

Secretariat Hosted by the World Health Organization and Board Chaired by The Rt Hon. Helen Clark, former Prime Minister, New Zealand

Outline of Board response to the PMNCH external evaluation & the way forward

- 1. Long history of independent evaluations: The recent PMNCH evaluation is the third time that PMNCH has commissioned an independent evaluation since its inception in 2005. Independent evaluations are essential to our progress:
 - Our 2008 evaluation process encouraged PMNCH to focus on funding gaps as a driver for our work in the MDG era, thus empowering PMNCH to pursue a successful programme of work that resulted in significant increases in funding for reproductive, maternal, newborn and child health issues to meet those gaps.
 - Our 2014 evaluation reflecting the transition between the MDGs and the SDGs directed PMNCH towards ensuring that women's, children's and now adolescents' health is included within the policy arena, including embedding this in the SDGs, UHC and also in the new and updated Global Strategy for Women's, Children's and Adolescents' Health.
 - Now, fully within the SDG era, the 2020 evaluation urges PMNCH to zero in on "the unfinished agenda" of preventable mortality and morbidity: i.e., achieving greater focus for greater results and greater impact. This is highly valuable to re-imagining PMNCH in the SDG era.
- 2. Finding: PMNCH's vision and mission is relevant valid, and urgent
 - The evaluation finds that PMNCH's vision and mission to improve the health and well-being of women, children and adolescents is highly relevant to the SDGs and to the vision of Universal Health Coverage through Primary Health Care.
 - The evaluation finds that public-private consensus-building, alignment and partnership for instance, through PMNCH's alignment across 10 constituencies – is essential to progress, well articulated by SDG 17.
 - The evaluation finds that uniting with one voice is urgent in the current political climate, when hard-fought gains in sexual and reproductive health are under threat, when stillbirths remain a neglected tragedy, when progress in newborn health has stalled, when inequity continues to be a significant problem across the globe, when new challenges are emerging in the context of humanitarian and fragile settings, and when the needs of older children and adolescents are only now coming to be recognised.
 - The evaluation finds that PMNCH offers unique value. With 1,000 partners in 192 countries, PMNCH remains an unparalleled advocacy platform for the continuum of care of women, children and, importantly, adolescents.
 - The evaluation finds that PMNCH offers considerable strengths through its high-level champions and broad convening power. It has an impressive track record of identifying gaps that require dedicated attention and spearheading new initiatives that influence political attention, such as the Every Woman Every Child's Global Strategy (2010 and 2015); Every Newborn Action Plan; GFF Civil Society group; the Adolescent and Youth constituency; the Nurturing Care Framework for ECD, and many others.



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3. Finding: PMNCH needs to rebalance depth and breadth

However, the evaluation also identifies urgent concerns to be addressed:

- The number of PMNCH members has nearly doubled in size in the SDG era resulting in the expansion of PMNCH governance structures and engagement management approaches, which are now seen as unwieldy, with shallow partner participation.
- Digitization of PMNCH's operations is at its infancy, and its further development and integration across all PMNCH activities will be critical to fostering and improved, interactive partner engagement experience.
- Whilst members' priorities and constituency interests have expanded significantly, the Partnership's budget and the size of the Secretariat have not.
- These new interests as well as the new SDG agendas for action more broadly have been insufficiently prioritized in PMNCH work-planning and strategies: Trying to "do too much with too little" has stretched resources too thin.
- o Consequently, partners have increasingly been reflecting on what PMNCH's identity and value addition could be in the current SDG era.
- 4. **The way forward for PMNCH:** Reboot and reimagine for greater effectiveness, results and impact. Despite these challenges, it is important to see that the Partnership boasts a rich set of assets that can be leveraged and harnessed, 'stitched' together in a different and more innovative way to ensure that the whole is greater than the sum of these individual assets. Examples of such assets include:
 - Committed and engaged high-level champions, with unparalleled networks and reach, dedicated to a clear focus on women, children, and adolescents at a time when concerted action is needed at national, regional and global levels.
 - The role and status of civil society, and the value placed on their contributions, have been elevated by PMNCH, resulting in concrete influence on political declarations and action plans (e.g., UHC Political Declaration, IPU Resolutions, etc.).
 - The vibrant adolescent and youth constituency has found a voice through its engagement in the Partnership, and that is now felt at national, regional and increasingly at global level.
 - The Partnership's track record and widely-regarded achievements in advocacy have been singled out by the evaluation as holding special promise for work going forward.
- 5. What we know: Progress for WCAH requires greater focus in the SDG era
 - A re-imagined, rebuilt PMNCH, fit for the SDG era, will learn from the lessons of history. For instance, when the foot went off the gas for the child survival movement in the 1990s, it was a very expensive lesson. It was not until the early-mid 2000s, with the development of dedicated evidence and advocacy platforms, such as Countdown to 2015 and PMNCH, that we regained focus, momentum, and progress.
 - Progress simply does not happen without dedicated leaders, platforms, messaging, and a roadmap, informed by evidence and powered by consensus. Now, in 2020, through the Strategy Retreat and supported by the external evaluation, we have a timely opportunity to re-imagine how to address our unfinished agenda for women, children and adolescents.