

Review of hosted partnerships

Review of the Partnership for Maternal, Newborn and Child Health

Report by the Director-General

1. In accordance with decision EB132(10) (2013), the Programme, Budget and Administration Committee of the Executive Board periodically reviews the arrangements for hosted health partnerships.
2. This report summarizes the contribution of the Partnership for Maternal, Newborn and Child Health to improved health outcomes, the harmonization of its work with the work of WHO and the Secretariat's interaction with the Partnership, reflecting the period since the previous report in 2020.
3. Since its establishment in 2005, the Partnership has been supporting women's, children's and adolescents' health in accordance with the United Nations Secretary-General's Every Woman Every Child Global Strategy for Women's, Children's and Adolescents' Health (2016–2030) (the Global Strategy).
4. The Partnership is the world's largest alliance of nearly 1500 governments and organizations working in women's, children's and adolescents' health and well-being, up by 50% from 2020. Its membership is drawn from across the 10 constituencies represented on its Board, which is chaired by the Rt. Hon. Helen Clark, former Prime Minister of New Zealand and former Administrator of the United Nations Development Programme.

CONTRIBUTIONS TO IMPROVED HEALTH OUTCOMES

5. The Partnership's 2021–2025 Strategy has three thematic objectives: (i) to drive down preventable maternal, newborn and child morbidity and mortality, including stillbirths; (ii) to uphold essential sexual and reproductive health and rights interventions and ensure continuous progress in financing and equity; and (iii) to advance the health and well-being of adolescents.
6. In order to achieve these objectives, the Partnership implements an advocacy-based programme of work to encourage better policies, legislation and financing, as well as equitable coverage and uptake of high-quality services.
7. In doing so, the Partnership facilitates the alignment of partner-based efforts through three interrelated functions, namely: (i) knowledge synthesis; (ii) partner engagement; and (iii) campaigns and outreach.

Knowledge synthesis

8. The Partnership uses its knowledge synthesis function to facilitate the use of evidence to drive more responsive and equity-enhancing policy, financing and service delivery, for example:

(1) Maternal, newborn and child health: The 2023 *Born too soon*¹ report on preterm birth involved more than 60 partners, including WHO, the United Nations Children’s Fund and the United Nations Population Fund. The report achieved an estimated cumulative potential media reach of nearly 3.5 billion people and an estimated social media reach of 10.5 million. Its messaging and targets were fully aligned with the Every Newborn Action Plan – Ending Preventable Maternal Mortality initiative. More broadly, the Partnership continues to act as a platform to track progress against the Global Strategy, including through its contribution to the 2022 Global Strategy progress report.²

(2) Sexual and reproductive health and rights: The Partnership has consistently highlighted evidence-based messages to promote progress in line with the Sustainable Development Goals. In recent years, this has included the development of knowledge translation resources such as the COVID-19 vaccine and pregnancy video,³ which has had over 100 million views, and the advocacy toolkit on sexual and reproductive health and rights.⁴ The Partnership has also produced an advocacy brief to support comprehensive sexual and reproductive health and rights in national universal health coverage plans⁵ and supported youth leaders in delivering the Youth-Led AYSRHR (Adolescent and Youth Sexual and Reproductive Health and Rights) Global Roadmap for Action. In 2023, the Partnership highlighted the sexual and reproductive health and rights-specific needs of young people through the global Agenda for Action for Adolescents.

(3) Adolescent well-being: The Partnership collaborated with WHO to develop a widely disseminated framework for adolescent well-being.⁶ As part of its “1.8 Billion Young People for Change” campaign, the Partnership is mobilizing new commitments. In this context, it acted as a platform for the development of the BMJ’s adolescent well-being collection.⁷ The Partnership is also currently leading on the development of an adolescent well-being investment case⁸ and, in partnership with WHO, developing a set of indicators and a monitoring framework for measuring adolescent well-being.⁹ The Partnership promotes adolescent and youth engagement through

¹ See <https://www.who.int/publications/i/item/9789240073890>, accessed 28 February 2024.

² See <https://www.who.int/publications/i/item/9789240060104>, accessed 28 February 2024.

³ See https://www.youtube.com/watch?time_continue=13&v=Bo2Ypfp7jv0&embeds_uri=https%3A%2F%2Fpmnch.who.int%2F&feature=emb_logo, accessed 28 February 2024.

⁴ See <https://pmnch.who.int/resources/tools-and-toolkits/pmnch-covid-19-and-wcah-toolkits/srhr>, accessed 28 February 2024.

⁵ See <https://pmnch.who.int/resources/publications/m/item/why-sexual-and-reproductive-health-and-rights-are-essential-for-universal-health-coverage>, accessed 28 February 2024.

⁶ See <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7423586/>, accessed 28 February 2024.

⁷ See <https://www.bmj.com/adolescent-wellbeing>, accessed 28 February 2024.

⁸ See <https://pmnch.who.int/resources/publications/m/item/adolescents-in-a-changing-world-the-case-for-urgent-investment#:~:text=The%20overarching%20Adolescent%20Well-being,rights%20imperative%2C%20the%20demographic%20and>, accessed 28 February 2024.

⁹ See <https://www.who.int/groups/adolescent-well-being-measurement-expert-consultative-group>, accessed 28 February 2024.

leading the Global Consensus Statement on Meaningful Adolescent and Youth Engagement,¹ and taking actions to ensure the implementation of the Statement.²

Partner engagement

9. Work in this sphere strengthens the capacity of partners to act collectively to advocate for improved implementation of existing financing, policy and service delivery commitments, as well as mobilizing new commitments to address key gaps. Examples include:

(1) Global engagement: The Partnership works through its partners to advocate in global platforms, including those associated with the Group of 20 (G20), Group of Seven (G7), World Economic Forum, Conference of the Parties (COP) to the United Nations Framework Convention on Climate Change (UNFCCC), the Inter-Parliamentary Union (IPU) and the World Health Summit, including at the World Health Assembly and the United Nations General Assembly. Recent examples of engagement include a call to the G7 to prioritize sexual and reproductive health and rights in universal health coverage,³ as well as an advocacy brief.⁴ During the 2023 G20, the Partnership worked closely with WHO on advocacy material, such as a policy brief on maternal, newborn, child and adolescent health.⁵ During the 2022 UNFCCC COP process (COP27), the Partnership participated in events including the Climate Change and Women's Health side-event. Similarly, as part of the Coalition of Partnerships for UHC (Universal Health Coverage) and Global Health, the Partnership engaged in advocacy efforts.

(2) Regional engagement: The Partnership's Africa regional advocacy strategy for 2023 and 2024 guides its partners in their engagement with the African Union and regional development bodies. The Partnership supports partner efforts to: (i) leverage regional commitments; (ii) foster closer engagements; (iii) engage with parliamentarians; and (iv) roll out country-based digital advocacy hubs. It also leverages global events to draw attention to regional issues, as it did with respect to the countries in Africa in 2021 and countries in the Latin America and Caribbean in 2022 in the context of the United Nations General Assembly.⁶ In support of the Global Forum for Adolescents convened by the Partnership (see below), national events were organized in collaboration with WHO Regional Office for Africa, WHO Regional Office for the Eastern Mediterranean and the regional interagency coordinating mechanism Every Woman Every Child – Latin America and the Caribbean.

¹ See <https://pmnch.who.int/resources/publications/m/item/status-of-meaningful-adolescent-and-youth-engagement-maye>, accessed 28 February 2024.

² See <https://pmnch.who.int/resources/publications/m/item/meaningful-adolescent-and-youth-engagement>, accessed 28 February 2024.

³ See <https://pmnch.who.int/resources/publications/m/item/call-to-g7-to-prioritize-srhr-in-uhc>, accessed 28 February 2024.

⁴ See <https://pmnch.who.int/resources/publications/m/item/why-sexual-and-reproductive-health-and-rights-are-essential-for-universal-health-coverage>, accessed 28 February 2024.

⁵ See <https://t20ind.org/research/maternal-newborn-child-and-adolescent-health-and-well-being/>, accessed 28 February 2024.

⁶ See <https://pmnch.who.int/news-and-events/events/accountability-breakfast/2021> and <https://pmnch.who.int/news-and-events/events/accountability-breakfast/2022>, accessed 28 February 2024.

(3) National engagement: The Partnership supports partners to advance accountability for women's, children's and adolescents' health and well-being commitments, and to mobilize new commitments. This includes strengthening national coalitions and multi-stakeholder platforms. Partnership leaders participate routinely in assemblies held by the IPU. In addition, the Partnership participated in the country consultations coordinated by the Civil Society Engagement Mechanism for UHC2030;¹ more than 100 of its partners in Ghana, Liberia and Malawi were involved in these consultations and 88 Members of Parliament from 46 countries were capacitated in the IPU-organized empowerment series for young parliamentarians on health and nutrition.

Campaigns and outreach

10. Work in this area focuses on supporting the development and implementation of campaigns and partner participation in order to align and amplify key advocacy and accountability messages.

11. As part of its most recent workplan for 2022–2023, the Partnership organized 15 flagship events and actively supported some 40 partner events. In addition, information on more than 420 partner events was disseminated through the Partnership online Events Hub during the period.

12. Campaigns have included:

(1) Call to Action on COVID-19 campaign: The profound effects of COVID-19 on women, children and adolescents have been documented and deployed by the Partnership for advocacy purposes. Important Partnership deliverables during the COVID-19 pandemic have included a global Call to Action, supported by evidence summaries, which guided a partner-led commitment drive resulting in 21 commitments from governments and foundations amounting to a total of US\$ 32.1 billion for health and social services for women, children and adolescents. The Call to Action on COVID-19 campaign was highlighted at a series of five virtual “Lives in the Balance” events held between July 2020 and May 2023.

(2) 1.8 Billion Young People for Change campaign: The most recent global campaign led by the Partnership aims to achieve greater policy and financing support for adolescents and young people and is based on asking young people themselves about their experiences and needs. To date, more than 1.5 million young people have submitted their responses via tools developed by the Partnership and through the “What Young People Want” process. The campaign has comprised:

(a) the Global Forum for Adolescents, held on 11–12 October 2023. This event was the world's largest online gathering for adolescent well-being and brought together some 10 000 individuals, with a social media reach of 2.9 million for the Partnership and 3.5 million for the campaign;

(b) national supporting events. The Global Forum was supported by 125 national events involving nearly 8000 participants;

¹ See <https://cseonline.net/civil-society-perspectives-souhcc-2022/>, accessed 29 February 2024.

(c) a range of knowledge products¹ developed by the Partnership and its partners, including WHO.

To date, the campaign has resulted in policy and financing commitments² from 18 governments and two regional bodies, as well as numerous nongovernmental stakeholders, to support adolescents' well-being.

13. The Partnership works with high-level champions in support of its campaigns, focusing this effort through the Global Leaders Network, an emerging peer-to-peer network of heads of state and heads of government, supported and fostered by the Partnership under the leadership of Cyril Ramaphosa, President of the Republic of South Africa. The Network, which currently includes Bangladesh, Denmark and Senegal, was announced at the World Economic Forum in Davos in January 2023, and held its first public event on the sidelines of the United Nations General Assembly in New York in September 2023.

HARMONIZATION OF THE PARTNERSHIP'S WORK WITH THE RELEVANT WORK OF WHO

14. WHO is a key partner of the Partnership, playing the role of hosting organization, as well as being a Board member and an implementing partner. WHO is closely involved in the development of the Partnership's annual workplans. Through aligning analytical, advocacy and accountability processes, publishing a variety of materials and coordinating events and meetings, the Partnership ensures that objectives agreed with WHO are met.

15. In order to support our partners in advancing COVID-19 advocacy campaign goals and combating misinformation, the Partnership communicated and packaged WHO guidance on mitigating the negative impacts of COVID-19 on women's, children's and adolescents' health and well-being.

WHO'S INTERACTION WITH THE PARTNERSHIP

Hosting arrangements

16. In 2016, the Director-General issued generic hosting terms for WHO-hosted partnerships, which apply to the Partnership.

Human resources

17. The Partnership's secretariat currently comprises approximately 20 staff positions, supported by consultants. All staff are subject to WHO's Staff Regulations and Staff Rules.

Programme and financial management

18. The Partnership's budget is separate from that of WHO and is approved by the Partnership Board. It is set at US\$ 10 million per year.

¹ See <https://www.1point8b.org/products>, accessed 29 February 2024.

² See <https://pnmch.who.int/news-and-events/campaigns/agenda-for-action-for-adolescents/country-commitments>, accessed 29 February 2024.

19. The Partnership has been subject to a series of full, independent, external evaluations¹ and will be evaluated again in 2025.

20. A recent management review found excellent results for the Partnership Secretariat management processes, as benchmarked against relevant global indicators. In addition, the Partnership has consistently been ranked as a “very high performer” in the 2023 *Global Health 50/50* report² on promoting gender equality.

Resource mobilization and cost recovery

21. The Partnership mobilizes its own resources. Since 2020, the Partnership has secured resources from 11 different donors.

Communications

22. The WHO hosting relationship is recognized in the Partnership publications by a standardized statement, such as “Hosted by the World Health Organization” and its website is maintained in coordination with WHO.

Other organizational policies

23. The Partnership derives its legal personality from WHO and is therefore subject to all WHO’s rules and regulations.

CONCLUSIONS

24. In the context of the Sustainable Development Goals and faced with the challenges of COVID-19, climate change and conflicts, the objective of safeguarding progress to date and improving the health and well-being of women, children and adolescents must remain a high priority. Fulfilment of this ambition requires today more than ever a comprehensive yet focused response that brings together stakeholders from multiple sectors and perspectives. The impressive results demonstrate that both WHO and the Partnership benefit from the hosting arrangement in advancing their common objectives.

25. The Partnership develops its own strategies and workplan. WHO is a permanent member of the Partnership’s Board and Executive Committee. Meanwhile, the Partnership interacts with various partners and stakeholders, including nongovernmental organizations, young people, philanthropic foundations, academic institutions, and the private sector to create the multifaceted partnerships needed to achieve common goals. The Partnership also acts as a platform for disseminating and promulgating WHO’s products and programmes.

¹ See <https://pmnch.who.int/resources/publications/m/item/2014-2019-external-evaluation>, accessed 29 February 2024.

² See <https://pmnch.who.int/news-and-events/news/item/12-07-2023-global-health-50-50-names-pmnch-very-high-performer-for-gender-equality>, accessed 29 February 2024.

26. The Partnership is currently delivering its 2021–2025 Strategy, having made important advances towards its vision and mission. This strategy has ensured that the Partnership continues to evolve in its role, contribute effectively to achieving the relevant Sustainable Development Goals and supports the implementation of the Global Strategy and the Global Action Plan for Healthy Lives and Well-being for All.

ACTION BY THE EXECUTIVE BOARD

27. The Board is invited to note the report and to provide any comments or recommendations it deems pertinent, particularly in respect of the following question:

- Are the Member States satisfied with the hosting arrangements and reporting as described in the report?

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