

BRI-2013- ITEM6

Partners' Forum

Summary

PMNCH will host its 3rd Partners' Forum from 29 June to 2 July 2014, in Johannesburg, South Africa. This paper provides an overview of the 2014 Partners' Forum.

The Forum will be co-hosted in partnership with the Government of the Republic of South Africa (tbc), A Promise Renewed, Countdown to 2015, and the independent Expert Review Group (iERG)¹. The Forum will be a key event, part of a larger strategic process aimed at bringing together key stakeholders in women's and children's health as well as other sectors. It will aim to:

- (i) Take stock of lessons learned and progress made since 2010;
- (ii) Assess and coordinate our efforts to accelerate progress towards attainment of the MDGs; and,
- (iii) Ensure that women, adolescents, children and newborn wellbeing, equity and accountability are at the heart of the Post-2015 development agenda.

Action required from the Board

The Board is invited to give its views on the key themes, and a headline/strapline for the Forum and provide guidance on how the Partners' Forum platform can be used to:

- work effectively with key partners and stakeholders to develop strategies for accelerating progress in women's and children's health leading up to 2015; and,
- shape the Post-2015 development agenda;

For information - the anticipated budget for the Forum will be discussed in the context of the work plan discussion.

¹ See Annex 1

Background

PMNCH has held two previous Partners' Forums. The 1st Forum, in Dar es Salaam in 2007, marked the emergence of PMNCH as the first dedicated partnership focused on maternal and child health and the pursuit of MDGs 4 and 5.

The 2nd Forum, in New Delhi in November 2010², aimed to develop joint approaches and strategies to operationalize the UN Secretary General's Global Strategy for Women's and Children's Health, launched in New York in September 2010. The timing of the Forum was crucial after the launch of the Global Strategy, and the Forum gave immediate continuity to the issue, keeping attention and placing PMNCH as an important platform for (R)MNCH, and gave the Partnership a crucial role. It brought a shift, and focus to issues of equity, health systems and human resources for MNCH, as well as attention to integration and intersectoral collaboration for health. The Forum also provided a platform for developing strategies and networks that promote accountability for those pledges. It featured success stories in financing, delivery and accountability, identifying innovative strategies, policies and programmes that could be scaled up for change.

2014 Partners' Forum

The Forum is an opportunity to:

- (i) Take stock of lessons learned and progress made since 2010;
- (ii) Assess and coordinate our efforts to accelerate progress towards attainment of the MDGs; and,
- (iii) Ensure that women, adolescents, children and newborn wellbeing, equity and accountability are at the heart of the Post-2015 development agenda.

Highlights

- *Launch Every Newborn Action Plan*: The Every Newborn action plan will be launched at the 2014 Partners' Forum with the support of more than 50 organizations, led by UNICEF and WHO. The plan will enable policy makers and all stakeholders to take action to accelerate national plans to achieve clear results for newborn survival, enhancing the achievement of wider goals for women's and children's health.
- *Launch of Countdown to 2015 Report for 2014*: Periodically, the Countdown to 2015 publishes up-to-date information on country data on indicators to reflect coverage of RMNCH interventions, equity, financing and health policies and systems for 75 countries with the highest morbidity and mortality of women and children. The 2014 report will

² See Annex 2

present updated country profiles with the most recent information available, and will be used to advocate for specific action.

- *Key messages from previous iERG reports and flagging forthcoming 2014 issues:* The iERG will be highlighted as an effective accountability mechanism to ensure that commitments to women's and children's health are being delivered on time and with impact. The 2014 iERG report will be launched during the UN General Assembly in 2014.

Objectives

- I. *A common vision of the Post-2015 development agenda:* PMNCH and its partners believe that the Post-2015 development agenda should be one that is people-centred, and that takes a human rights, equity, and gender sensitive approach. A common Post-2015 development agenda would include engaging non-health actors, and linking RMNCH and sustainability. Non-state actors, including the private sector, will be crucial in the Post-2015 development framework, and have core competencies that can help address many gaps across the health system to improve the health of children and women. The debate so far has flagged 'new models of partnership', which PMNCH is well placed to demonstrate. The Forum is well timed to be used as an opportunity to shape a common vision, and also to develop innovative ways of working across key constituencies and sectors for improved women's and children's health.
- II. *Evidence based decision-making:* In consolidating knowledge and advocacy towards acceleration of current progress towards MDGs 4 and 5 (and other MDGs), in elevating women's, adolescents', children's and newborns' health and their wellbeing in the Post-2015 framework, the role of evidence is crucial. The Forum aims to showcase and disseminate evidence on what works to improve health outcomes, including: success factors; cross-sectoral (education, nutrition, water and sanitation, women and girl empowerment, etc.) approaches to women's and children's health; and, successful accountability mechanisms such as the Commission on Information and Accountability (CoIA).
- III. *Renewed focus on the Continuum of Care:* We know that a newborn and children's health is closely linked to the mother's, from conception through to birth and beyond. The health and wellbeing of adolescents is essential for social and economic progress generally, and for progress towards the MDGs. Evidence shows that an effective continuum of care, which includes intervention packages from pre-pregnancy through to childhood up to age 5, is essential to the wellbeing of this and the next generations, across all countries. There are lively debates about redefinitions of the continuum of care, which will be taken into the Forum for discussion.
- IV. *Mechanisms for tracking national, regional and global progress:* significant progress has been made to improve women's and children's health since the MDGs were first articulated. The

number of children dying each year has fallen by almost 50 per cent, from over 12 million deaths in 1990 to 6.6 million in 2012. The number of women who die each year from pregnancy or childbirth-related complications also dropped nearly 50 per cent, from 543,000 in 1990 to 287,000 in 2010. The forum purposes to highlight and further the work of national, regional and global accountability mechanisms, in particular; iERG, A Promise Renewed (APR) and Countdown to 2015. To make further progress, we need to strengthen and refresh efforts to track national, regional, and global efforts, and to anticipate the metrics needed in the post 2015 era.

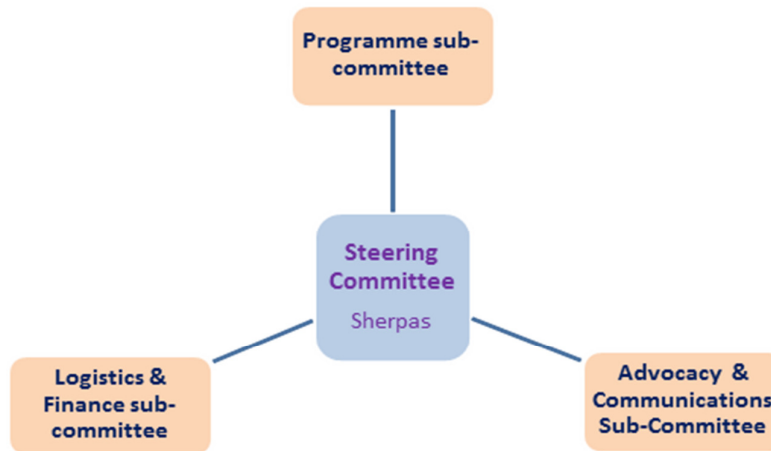
The PMNCH 2013 report showed that the implementation of commitments and pace of disbursements has accelerated. The challenge now is to engage with potential new commitment-makers (including the private sector) and focus on implementation of commitments. Future accountability-related work should focus on monitoring the implementation of commitments, including tracking progress on disbursements of financial commitments and documenting any relevant policy changes. As the focus shifts to monitoring implementation, we need to consider other approaches to reporting. This would include approaches based on: more targeted national or regional score cards on progress towards implementing specific commitments; a series of concise country-focused reports, constituency led and owned accountability efforts; and synthesizing data from initiative specific accountability reports and annual reports from commitment-makers. All stakeholders – countries and development partners – have a role to play in addressing the gaps in and challenges for implementation, and all have a responsibility to be accountable for their promises.

Governance Structure

Mrs. Graça Machel, the PMNCH Board Chair, will host the Partners Forum. A Steering Committee, with representation from each of the co-hosts (CD to 2015, A Promise Renewed and the iERG, with WHO as the hosting agency of PMNCH, and Government of South Africa - tbc), will:

- Provide overall guidance to the planning and implementation of the Partners' Forum
- Oversee three sub-committees: (i) programme, (ii) advocacy & communications, and (iii) logistics & finance
- Will provide regular updates to PMNCH Executive Committee and take the decisions necessary to ensure the Forum is a success.

The Sherpas will act as the links between the Steering Committee and the sub-committees.



Roles and responsibilities

Programme Sub-Committee

- Develop the Forum's agenda to be endorsed by the Steering Committee
- Develop the Forum's overall theme, plenaries and parallel sessions
- Propose speakers, panellists, chairs and list of participants
- Monitor key deadlines

All constituencies will be represented on this sub-committee. The programme sub-committee will report to the Steering Committee, and must coordinate with other sub-committees.

Communications & Advocacy Sub-Committee

- Develop an advocacy and communication strategy for and around the Forum
- Develop common messages and communications to key audiences and stakeholders through various channels (partners' websites, social media, etc.)
- Build consensus around branding and coordinate production and dissemination of publications, key documents
- Identify and monitor key deadlines

All co-hosts may be represented on this sub-committee. The communications & advocacy sub-committee will report to the Steering Committee, and must coordinate with other sub-committees.

Logistics & Finance Sub-Committee

- Coordinate closely with the Government of the Republic of South Africa, Partners' Forum project manager, programme sub-committee, and event management company to ensure

that:

- participants are invited to the Forum and provided relevant event information
- participants' logistics requirements are met (air travel, visas, accommodation)
- venue and event logistics are in place
- Manage the budget, and develop costing for the various activities
- Identify and monitor key deadlines

All co-hosts may be represented on this sub-committee. The logistics & finance sub-committee will report to the Steering Committee, and must coordinate with other sub-committees.

Agenda

The agenda will be developed by the Programme sub-committee and endorsed by the Steering Committee. The Steering Committee is in the process of appointing members to all sub-committees. A broad description is included below.

Date	Event
29 th June, Sunday	Side meetings/Preparation
30 th June, Monday	Day 1 (Plenary Sessions 1, 2, 3) + Parallel Sessions
1 st July, Tuesday	Day 2 (Plenary Sessions 4, 5, 6) + Parallel Sessions
2 nd July, Wednesday	Day 3 Parallel Sessions and PMNCH Board Meeting (half-day)*

Participants

It is expected that a maximum of 800 participants will attend the 2014 Partners' Forum. This could include approximately 600 overseas participants. If the process between Jan-June is adequately structured, taking advantage of other meetings, then numbers and budget could reduce, if constituencies are content to be represented through attendees in June/July.

Budget

The anticipated 2014 Partners' Forum estimated budget is USD 1.5 million. PMNCH will allocate USD 0.5 million for the same (including 100 participants sponsored by PMNCH), and will rely on the other co-hosts to raise the remaining amount. A detailed budget and monitoring system will be developed by the Logistics & Finance committee. If the full amount cannot be raised, scope and participation will need to be adjusted accordingly.

Timeline

The Steering Committee, in consultation with the three sub-committees, will provide guidance on the various activities to be completed in preparation for the Partners' Forum and develop key milestones for the coming months. Tentative deadlines include:

Deadline	Activity	Responsibility
Nov 30	Agreement on Partners' Forum governance and operational structure	Steering Committee
Dec 15	Nomination of members to sub-committees: Programme, Communications & Advocacy, Logistics & Finance	APR, Countdown to 2015, iERG, PMNCH
Jan 15	Hiring of Partners' Forum Project Manager	TBD
Jan 15	Finalize Budget for Partners' Forum	Logistics & Finance sub-committee
Jan 15	Finalize (concept note / MOU between partners) for Partners' Forum	Steering Committee
Apr 1	Finalize Agenda for Partners' Forum	Programme sub-committee

Annex I: Co-host Partners' Profiles

A Promise Renewed

Committing to Child Survival: A Promise Renewed is a global movement to end preventable child deaths. Under the leadership of participating governments and in support of the United Nations Secretary-General's Every Woman Every Child strategy, A Promise Renewed brings together public, private and civil society actors committed to advocacy and action for maternal, newborn and child survival. A Promise Renewed emerged from the Child Survival Call to Action, convened in June 2012 by the Governments of Ethiopia, India and the United States, in collaboration with UNICEF. The more than 700 government, civil society and private sector participants who gathered for the Call to Action reaffirmed their shared commitment to scale up progress on child survival, building on the success of the many partnerships, initiatives and interventions that currently exist within and beyond the field of health.

Countdown to 2015

Established in 2005 as a multi-disciplinary, multi-institutional collaboration, Countdown to 2015 is a global movement of academics, governments, international agencies, health-care professional associations, donors, and nongovernmental organizations, with The Lancet as a key partner. Countdown uses country-specific data to stimulate and support country progress towards achieving the health-related Millennium Development Goals (MDGs). Countdown tracks progress in the 75 countries where more than 95% of all maternal and child deaths occur, including the 49 lowest-income countries. With a focus on MDGs 4 and 5, Countdown promotes accountability from governments and development partners, identifies knowledge gaps, and proposes new actions to reduce child mortality and improve maternal health. The PMNCH acts as the Countdown to 2015 Secretariat.

Independent Expert Review Group (iERG)

The UN Commission on Information and Accountability for Women's and Children's Health was established by WHO at the request of the United Nations Secretary-General to accelerate progress on the Global Strategy for Women's and Children's Health. Starting in 2012 and ending in 2015, the iERG is reporting regularly to the United Nations Secretary-General on the results and resources related to the Global Strategy and on progress in implementing this Commission's recommendations.

PMNCH

Established in 2005 – bringing together three existing partnerships - and hosted by the World Health Organization, PMNCH is a partnership of more than 560 organizations from seven

constituencies: governments, multilateral organizations, donors and foundations, non-governmental organizations, healthcare professional associations, academic, research and training institutions, and the private sector. The vision of the the Partnership is the achievement of the MDGs, with women and children enabled to realize their right to the highest attainable standard of health in the years to 2015 and beyond.

Annex 2

At the 2010 Forum in New Delhi, the following commitments were made:

- The Government constituency reaffirmed their support for the Global Strategy, and acknowledged: a) the need for continued political leadership by governments; b) the imperative for country owned, costed, unified health plans; c) the need for accountability; and, d) the need for strengthening partnerships with other constituencies.
- Multilateral organizations committed to supporting the implementation of the Global Strategy by: a) encouraging country commitments based on national plans; b) supporting country-level implementation; and, c) contributing to strengthening accountability.
- The Donor/Foundation constituency committed to funding and working with countries and development partners to deliver support in ways that have the greatest effectiveness and yield greatest impact.
- The Academic, Research and Training (ART) constituency committed to: a) establishing a global PMNCH network of ARTs; b) developing an advocacy strategy to address allocation of adequate support for research and innovation, and raise the profile of research; c) providing leadership in achieving consensus among the ART community on priority interventions and remaining evidence gaps; and, d) developing a work plan for the ART constituency.
- The HCPA constituency committed to: a) scaling up the quality and coverage of select evidence based key interventions; b) working collaboratively with other constituencies at all levels; c) strengthen health professionals' capacity; d) creating a culture of monitoring and evaluation; e) modifying training curricula to include ethics, women's and children's rights and a respect for all; f) building the organizational capacity of health care professional associations; and g) maximising the use of ICTs.
- The NGO community committed to: a) advocating for increased investment and progressive action for the realization of the right to health for all, including women, newborns, and children; b) calling for an independent assessment of all commitments made to the Global Strategy; contributing to the definition and tracking of indicators to monitor progress and impact; d) mobilizing additional commitments from the NGO community to the Global Strategy; e) holding all stakeholders accountable for pledges; and f) adopting and evaluating innovative approaches.