



Women's,
Children's and
Adolescents'
Health

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PMNCH Board Meeting

Tues. 07 December 2021, 12.00 – 14.00 CET and Wed. 08 December 2021, 12.00 – 14.30 CET

Document Title: PMNCH-B28-2021; 2c, PMNCH 2021 to 2025 Results Framework

Summary: PMNCH's [2021 to 2025 Strategy](#) sets out the overall strategic direction and objectives for the work of the partnership. It also provides a high-level overview of the PMNCH Results Framework for the strategic period.

Since the launch of the Strategy, PMNCH has implemented important governance reform processes, which have empowered members to be at the centre of delivering PMNCH's work. Members drawn from these new governance structures have now had the opportunity to review and fine-tune, in a consultative manner, PMNCH's Results Framework, under the guidance of the Executive Committee.

This paper presents the summary Results Framework (Annex 1), restating its objectives and structure, the underpinning Theory of Change and ways to deliver and monitor PMNCH's success, setting out next steps in the implementation process.

Actions Required: The Board is asked to approve the updated PMNCH's 2021 to 2025 Results Framework, as well as a proposed annual workplan structure.





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PMNCH 2021 to 2025 Results Framework and Workplan structure

PMNCH members delivering more together for women's, children's and adolescents' health

DRAFT FOR APPROVAL

1. Introduction

PMNCH's [2021 to 2025 Strategy](#) sets out the overall strategic direction and objectives for the work of the partnership. It also provides a high-level overview of the PMNCH Results Framework for this strategic period.

Since the launch of the Strategy, PMNCH has implemented a comprehensive governance reform process to enable a more effective and partnership-centric delivery of the Strategy's objectives. The new governance structure places PMNCH members firmly at the centre of conceptualizing, developing and implementing PMNCH's activities. Emerging from this reform process were four standing committees and two working groups¹. Each of these structures fielded a representative into an ad-hoc and time bound Results Framework Working Group (RFWG), whose role was to update, in a consultative manner, the PMNCH's 2021 to 2025 Results Framework.

The updated Results Framework is presented in Annex 1. This Results Framework underpins the work of the PMNCH as a whole, not just the Secretariat. The updated Results Framework is consistent with the original Theory of Change and builds on the high-level overview set out in the Strategy document itself. The Strategy will be delivered through a series of annual workplans, the proposed structure of which is set out in Annex 2. Once the Results Framework is approved, the noted committees and working groups, as well as PMNCH constituencies, will oversee the identification of relevant deliverables for 2022, and future years in due course.

In presenting this Results Framework, the RFWG is seeking approval for its overall structure and approach. Once this is adopted, further work will be undertaken to develop the relevant methodological approaches to measure and monitor progress, as well as to propose the final indicators and milestones, which are presented here in draft form. Further work is described in Annex 3, including the development of detailed definitions; processes to monitor progress and to disaggregate the overarching indicators; establishment of baseline measures and work-planning processes.

2. Objectives and structure of the PMNCH Results Framework

PMNCH's Results Framework aims to:

- guide the work of the PMNCH members and the Secretariat during the implementation of the 2021 to 2025 Strategy;

¹ The four standing committees are: (i) Executive Committee (EC); (ii) Strategic Advocacy Committee (SAC); (iii) Partner Engagement in Countries Committee (PECC); and (iv) Governance and Ethics Committee (GEC). There are also two working groups, namely Knowledge and Evidence Working Group (KEWG) and Accountability Working Group (AcWG)



- inform external stakeholders, including current and potential funders, about the work and value-added of PMNCH; and
- provide the basis for regularly monitoring the work of PMNCH, and for eventually evaluating PMNCH's work at the end of the Strategic period.

The Results Framework, consistent with the PMNCH Strategy 2021-2025, distinguishes between:

- **PMNCH attribution:** things within the control of PMNCH (*Outputs; Short-term Outcomes; Intermediate Outcomes*), for which PMNCH can be held accountable; and
- **PMNCH contribution:** things outside of the direct control of PMNCH, but towards which PMNCH makes meaningful contributions (*High-level Outcomes; Impact*).

Furthermore, the Results Framework provides the basis for both monitoring and evaluation, enabling partners to review progress of their work in terms of both quantitative and qualitative metrics. The Results Framework distinguishes between monitoring and evaluation as follows:

- **Monitoring:** PMNCH Secretariat-led and standing committees/working groups oversee tracking processes on an ongoing basis, focused largely on Outputs, Short-term Outcomes, and Intermediate Outcomes. The purpose is to track progress and hold PMNCH members and the Secretariat accountable for those things within PMNCH's control, and to course-correct accordingly as the Strategy is implemented.
- **Evaluation:** Led by external organization(s) and conducted on a periodic basis, to gather evidence against the Theory of Change and Results Framework on whether and how PMNCH is supporting delivery of the full results chain up to Impact level.² The Evaluation will make use of baselines and monitoring data gathered throughout the period, and supplement this with any additional data collected during the Evaluation phase of work.

Finally, the Results Framework will inform the process of annual workplan development, which will operationalize PMNCH's ambitions. The articulation of the workplan will be overseen by the standing committees and working groups, and ultimately the Executive Committee, with a view to identify outputs best placed to be managed by PMNCH.

Any future work taken forward by PMNCH will aim to contribute to the delivery of the Sustainable Development Goals as relevant to women's, children's and adolescents' health and will be closely aligned with existing frameworks and mechanisms (e.g., UHC2030, Global Financing Facility, FP2030 and others), leveraging on these existing platforms and processes to make its work more impactful and contributing to their success in turn. In this context, this will ensure that the whole spectrum of sexual, reproductive, maternal, newborn, child and adolescents' health and well-being is anchored to, and/or included, in the efforts to adopt, roll out and strengthen Universal Health Coverage (UHC) and Primary Health Care (PHC),

² High Level Outcome and Impact indicators are drawn from already existing processes, such as the Sustainable Development Goals, Countdown to 2030 processes, GAMA, WHO policy database, etc. These have been purposefully selected to avoid any duplicative reporting by PMNCH. It should be noted that some of the work delivered by PMNCH during the course of its Strategy will aim to improve existing and/ or potentially introduce new indicators where this is appropriate, and work with partners to embed these in their respective reporting processes.



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as embedded in national (i.e., country-focused), regional and global commitments aligned with PMNCH goals (Intermediate Outcomes of the Results Framework). PMNCH's efforts will thus ensure that UHC and PHC deliver for these populations.

3. PMNCH's Theory of Change

In setting out the Results Framework contained in Annex 1, PMNCH has further fine-tuned its Theory of Change. It begins with PMNCH members working together, with support from the Secretariat as may be required, to conceptualize and develop a series of PMNCH-branded products (e.g., investment cases showing the benefits of investing in WCAH); events (e.g., virtual campaign events supporting national commitment making efforts); and/or processes (e.g., strengthening existing capacities of youth-led organizations). These efforts are noted as **Outputs** in the Results Framework. They are driven by, and emerge from, country need, based on members' articulated demand and joint action, always promoting the principles of equity and "leaving no one behind", as well as ensuring the inclusion and leadership by those directly affected and at the centre of PMNCH's strategy, i.e., young people and women.

These member-developed Outputs will add to the existing knowledge and capabilities and strengthen motivation of the wider PMNCH membership. The aim is to further empower members to be agents of change, enabling new behaviours and actions, as articulated and measured by the **Short-term Outcomes**. The intention is to ensure that PMNCH members have access to additional resources and networks to strengthen their already existing capacities and motivations to influence governments, as well as influence regional and global bodies to make new [policy, financing and/or service-related commitments](#) to prioritize women's, children's and adolescents' health and well-being. These are represented and tracked by **Intermediate Outcomes**, and directly attributable to PMNCH's work.

Securing of these new commitments is, in turn, PMNCH's contribution, together with contributions from all the other stakeholders in the ecosystem, to the **High-Level Outcomes**. Implementation of these commitments will be reflected in actual in-country, regional and global level changes in *policies, financing and service coverage* that lead directly to improvements of women's, children's and adolescents' health and well-being.

These changes, in turn, contribute to the attainment of the overall **Impact** that PMNCH is aiming to support through the delivery of its Strategy. This is to contribute to the ongoing efforts to achieve: (i) reduced preventable maternal, newborn and child (MNC) morbidity and mortality, including stillbirths (Strategy Objective 1); (ii) improved Sexual and

PMNCH in action – Example:

- PMNCH convened and supported multi-stakeholder in-country networks define advocacy roadmaps and evidence needs as related to prioritising SRHR in the context of adolescents' well-being;
- PMNCH-branded knowledge synthesis product is conceptualised and developed by PMNCH members on SRHR issue (**Output**);
- product strengthens the existing advocacy capability of youth-led organisations (**Short-term Outcome**), who working together better engage with their governments on securing commitments;
- resulting in the national government's financial commitment (**Intermediate Outcome**) to increase existing funding for SRHR services in the country;
- converting the commitment into reality through advocacy work raises government expenditure and increases access to SRHR services in the country by young people (**High-Level Outcome**); and
- sustainably contributing to the reduction in the adolescent fertility rate (**Impact**) in the country.

[Examples of PMNCH support in action can be seen here.](#)



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Reproductive Health and Rights (SRHR) outcomes (Strategy Objective 2); and (iii) improved Adolescent well-being (Strategy Objective 3).

4. Delivering and monitoring PMNCH's success

As set out in more detail in Annex 3, delivering and monitoring PMNCH's success will include a series of mutually supportive processes during the implementation phase. These include:

- An ongoing review of the targets, indicators and means of verification across the Results Framework. This will include fine-tuning the indicator definitions, monitoring methodologies, and the development of internally monitored sub-indicators to ensure the responsiveness of PMNCH's work to issues of, for example, gender, disability and meaningful adolescents and youth engagement (MAYE), inclusivity and member empowerment, etc.;
- Establishment of baseline(s) to be used in monitoring and eventual evaluation processes;
- Development of detailed and deliverable-driven annual workplans, based on the structure set out in Annex 2, to support the delivery of PMNCH's ambitions.

Annex 1: PMNCH 2021 to 2025 Results Framework

PMNCH Contribution	Impact	MNCH: Reduced preventable MNC morbidity and mortality, including stillbirths	SRHR: Improved SRHR outcomes	ADOLESCENTS: Improved Adolescent health and well-being
	Targets by 2030 (and Means of Verification)	MMR (SDG 3.1.1); birth attendance (SDG 3.1.2); <5 mortality rates (SDG 3.2.1); Neo-natal mortality rates (SDG 3.2.2); Stillbirth rates (GS 3.2); Number of new HIV infections (SDG 3.3.1); TB incidence (3.3.2); malaria incidence (SDG 3.3.3); Adolescent fertility rate (GAMA); Family Planning services (3.7.1); Adolescent birth rate (SDG 3.7.2); Adolescent mortality rate (GS 3.4); Adolescent injury-related mortality rate (GAMA); Suicide mortality rate (SDG 3.4.2); Prevalence of intimate partner violence among adolescents (GAMA); Household expenditures on health (3.8.2).		
	High Level Outcomes Targets by 2030 (and Means of Verification)	<ul style="list-style-type: none"> • Multi-sectoral Determinants of Health Outcomes (SDG targets): Poverty reduction (1.1.1); Nutrition (2.2.1); Education (4.1.1); Early childhood development (4.2.1); Gender equality (5.1.1; 5.2.1; 5.2.2; 5.3.1; 5.3.2); Water, sanitation and hygiene (6.1.1; 6.2.1; 6.2.2); Ending violence against children (16.2.1; 16.2.2; 16.2.3); Partnerships (17.1.1; 17.1.2; 17.16.1) • Policy: Improved national policies on MNCH (Countdown 5462; 5528; 5410; 5414; 5466; 5433; 5492; 5496; 5498; 5467; 5468; ENAP/EPMM postnatal care and birth attendance) • Financing: Increased country health expenditure per capita (including on MNCH) financed from domestic sources (WHO NHA) and ODA for MNCH (SDG 3.b.2) • Services: Improved coverage and quality of essential MNCH services (SDG 3.8.1) 	<ul style="list-style-type: none"> • Policy: Improved national policies on SRHR (Countdown 5405) • Financing: Increased country health expenditure per capita (including specifically on SRH) financed from domestic sources (WHO NHA) • Services: Improved coverage and quality of essential sexual and reproductive health services (SDG 3.8.1) 	<ul style="list-style-type: none"> • Policy: Improved national policies on Adolescent health (Countdown 5374; 5413) • Financing: Increased country health expenditure per capita (including specifically on adolescent health) financed from domestic sources (WHO NHA) • Services: Improved coverage and quality of essential adolescent health services (SDG 3.8.1)

PMNCH Attribution	Intermediate outcome – Increased WCAH commitments (realization of which is reflected in High-Level Outcomes)	Intermediate outcome indicators: Commitments	2021	2022	2023	2024	Target 2025
	As a result of strengthened PMNCH member capacity, governments as well as regional and global bodies make new policy, financing and/or service commitments to prioritize women's, children's and adolescents' health and well-being, with a focus of 'leaving no-one behind'	# low- and middle-income country governments that publicly make new policy, financing and/or service commitments to prioritise women's, children's, adolescents' health & well-being	[15]	[20]	[25]	[27]	[30] Cumulative
		# global and/or regional bodies make public new commitments prioritising women's, children's, adolescents' health & well-being	[1]	[2]	[3]	[4]	[5] Cumulative
	Short-term outcomes – Increased members' / champions' capacity resulting from new knowledge, attitudes, practices	Short-term outcome aggregate indicators: Knowledge, Attitude, Practices					
	Knowledge Synthesis: Increased knowledge for advocacy by PMNCH members, as a result of exposure to and use of PMNCH knowledge products.	% increase in PMNCH members interviewed who report greater knowledge on relevant issues to support their advocacy efforts, as a result of exposure to and use of PMNCH knowledge products					
	Partner Engagement: Increased advocacy skills and networks among PMNCH members, as a result of exposure to and use of PMNCH's member-engagement processes.	% increase in PMNCH to members interviewed who report greater skills and networks for advocacy, as a result of exposure to and use of PMNCH member-engagement processes					
	Campaigns & Outreach: Increased advocacy campaigns participation by PMNCH members, as a result of exposure to PMNCH products, events and/or processes.	% increase in PMNCH members interviewed who report greater active participation in PMNCH campaigns, as a result of exposure to and use of PMNCH knowledge products, events and/or processes					
	Outputs – Branded PMNCH products, events, processes developed and implemented by members	Output aggregate indicators					
	Knowledge Synthesis: Evidence products synthesized and/or developed to equip PMNCH members to advocate for commitment-generation and hold commitment makers accountable for implementation	# of products developed (e.g. op-eds, summaries, journal articles, reports, videos, speeches, infographics, toolkits, tweets, posts, etc.)					
		# of stakeholders reached (e.g. views, downloads, shares, visits, etc)					
	Partner Engagement: Events, grants, products developed and implemented to support PMNCH members to advocate for commitment-generation and hold commitment makers accountable for implementation	# of joint advocacy and accountability events, products and processes					
		# of partners engaged and supported					
	Campaigns and Outreach: Advocacy campaigns organized and delivered enable Members to advocate for commitment-generation and hold commitment makers accountable for implementation	# of campaigns related events and processes					
		# of high-level champions engaged in delivering the campaigns					
		# of members engaged in delivering the campaigns					

Indicator wording and milestones to be developed in the implementation phase

Indicator wording and milestones to be developed in the implementation phase

Annex 2: PMNCH annual workplan structure

Intermediate Outcome	Short-term Outcomes	Outputs	6m	1y	Deliverable	Partner structure	Lead Sec team	PMNCH theme	Due date	Budget	How the deliverable contributes to Outputs and Outcomes
As a result of strengthened PMNCH member capacity, governments as well as regional and global bodies make new policy, financing and/or service-related commitments to prioritize women's, children's and adolescents' health and well-being	1. Knowledge Synthesis: Increased knowledge for advocacy by PMNCH members, as a result of exposure to and use of PMNCH knowledge products.	1. Knowledge Synthesis: Evidence products synthesized and/or developed to equip PMNCH members to advocate for commitment-generation and hold commitment makers accountable for implementation									
					1.1.1 [sub-deliverables]	[SAC]	[KS]	[MNCH]			
					1.1.2 [sub-deliverables]	[PECC]	[PE]	[SRHR]			
					1.1 [xxxx]	[GEC]	[CO]	[AdHW]			
					1.2.1 [sub-deliverables]	[KEWG]	[DC]	[CROSS]			
					1.2.1 [sub-deliverables]	[AcWG]	[OP]				
					1.2 [xxxx]						
					1.3.1 [sub-deliverables]						
					1.3.2 [sub-deliverables]						
					1.3 [xxxx]						
					Etc.						
					Sub-total US\$)					[xxxx]	
	2. Partner Engagement: Increased advocacy skills and networks among PMNCH members, as a result of exposure to and use of PMNCH's member-engagement processes.	2. Partner Engagement: Events, grants, products developed and implemented to support PMNCH members to advocate for commitment-generation and hold commitment makers accountable for implementation									
					2.1.1 [sub-deliverables]						
					2.1.2 [sub-deliverables]						
					2.1 [xxxx]						
					2.2.1 [sub-deliverables]						
					2.2.1 [sub-deliverables]						
					2.2 [xxxx]						
					2.3.1 [sub-deliverables]						
					2.3.2 [sub-deliverables]						
					2.3 [xxxx]						
					Etc.						
					Sub-total US\$)					[xxxx]	
	3. Campaigns & Outreach: Increased advocacy campaigns participation by PMNCH members, as a result of exposure to PMNCH products, events and/or processes.	3. Campaigns and Outreach: Advocacy campaigns organized and delivered enable Members to advocate for commitment-generation and hold commitment makers accountable for implementation									
					3.1.1 [sub-deliverables]						
					3.1.2 [sub-deliverables]						
					3.1 [xxxx]						
					3.2.1 [sub-deliverables]						
					3.2.1 [sub-deliverables]						
					3.2 [xxxx]						
					3.3.1 [sub-deliverables]						
					3.3.2 [sub-deliverables]						
					3.3 [xxxx]						
					Etc.						
					Sub-total US\$)					[xxxx]	
		Total budget (US\$)								10,000,000	

Annex 3: Delivering and monitoring PMNCH's success

In order to deliver and monitor PMNCH's success, a series of mutually supportive processes are being proposed for development and as part of implementation, as discussed below.

A3.1 Review of targets, indicators and means of verification

Definitions and thematic areas

TO BE DEVELOPED AND TO INCLUDE:

- *Definitions of terms and concepts.*
- *Taxonomy of cross cutting and individual thematic areas (MNCH, SRHR, Adolescents), clarifying which sub-themes are included and how the proposed work is integrated and mutually supporting.*

Monitoring of progress: Results Framework 'Contribution' section

TO BE DEVELOPED AND TO INCLUDE:

Impact indicators, targets and means of verification

- *Full list of indicators relevant to the Results Framework's Contribution section, including any updates to those listed originally in the Strategy (for example, consideration of SRHR indicators that align with the Guttmacher-Lancet Commission framework).*
- *Which organization is monitoring these indicators and how, with links to the information that is available.*

High-Level Outcomes indicators, targets and means of verification

- *Full list of indicators that are relevant to the Results Framework's Contribution section.*
- *Which organization is monitoring these indicators and how, with links to the information that is available.*
- *PMNCH led accountability processes will be linked to the actualisation of commitments and thus their link to the achievement of the High-Level Outcome indicators.*

Monitoring of progress: Results Framework 'Attribution' section

TO BE DEVELOPED AND TO INCLUDE:

Intermediate Outcomes

- *Consideration given to the number and which countries will be partnered with to secure their national commitments, and how this may change over time.*

Short-term Outcome indicators, targets and means of verification

- *Fine-tune indicator wording and establish milestones, including means of verification.*
- *Proposition for methodological approaches to measure progress against the indicators (e.g., KAP/B studies).*
- *Consideration of both quantitative and qualitative approaches to telling the story.*

Output indicators, targets and means of verification

- *Fine-tune indicator wording, establish milestones and means of verification, in close collaboration with the workplan development process, and set out the monitoring methods.*
- *Develop internally monitored sub-indicators that would ensure the responsiveness of PMNCH's work to issues of, for example, gender, disability and Meaningful Adolescents and Youth. Engagement (MAYE), inclusivity and member empowerment, etc.*
- *Consideration of both quantitative and qualitative approaches to telling the story.*

A3.2 Establishment of baselines

TO BE DEVELOPED AND TO INCLUDE:

- *Defining the baseline(s) for the Contribution aspects of the Results Framework.*
- *Defining the baseline(s) for the Attribution aspects of the Results Framework.*
- *Develop baseline(s) with a view to enable a meaningful evaluation to take place in due course.*

A3.3 Workplan development

TO BE DEVELOPED AND TO INCLUDE:

- *Development of individual deliverables under different functional areas.*
- *Assigning descriptors to the deliverables, including partner engagement, thematic focus, budgets, etc.*
- *Ensure linkages to the Results Framework, particularly the Output indicators.*