

29th Board Meeting - virtual (TEAMS)

14 July 2022, 13:00 - 16:00 CET

15 July 2022, 13:00 - 16:00 CET

NOTE FOR THE RECORD

Objectives:

The PMNCH 14-15 July 2022 Board meeting took place at an increasingly fragile time for women, children, and adolescents. The combination of COVID-19, climate change, and growing conflicts around the world has interrupted progress in sustainable development, with consequences to be felt for generations to come.

Protecting the 2030 SDG agenda requires a robust effort by all PMNCH partners to align behind country leadership in mobilizing for policy, financing and service delivery commitments to protect the most vulnerable.

This Board meeting focussed discussion on four strategic opportunities for country-led action, supported by all PMNCH constituencies:

- Securing greater women's, children's and adolescents' (WCA) health and well-being national, regional and global commitments, especially in times of COVID, conflict, and climate change.
- 2. Upholding Sexual and Reproductive Health and Rights.
- 3. Galvanizing a global movement for adolescent well-being.
- 4. Maintaining momentum on maternal, newborn and child health

PARTICIPANTS

Please see list of participants in Annex 1. Participants are kindly asked to review the list and add their name or names of their colleagues who attended for any part of the meeting, so that we have an accurate record of all those who participated.

DOCUMENTS AND PRESENTATIONS

All Board documents and presentations are to be found on the PMNCH Website

RECORDING OF THE MEETING

The Board meeting was livestreamed and available for public viewing. In addition, the Board meeting was recorded. The recording of the meeting is available on PMNCH's website for reference.

Summary of decisions

ITEM 1 - Introduction

	Decision / Action	Responsibility
1.1	Board meeting agenda approved	n/a
1.2	No conflicts of interest noted	n/a
1.3	Recording of this Board meeting and uploading on PMNCH website agreed	Secretariat
1.4	Decisions/guidance document reflects Board meeting from 7 and 8 Dec 2021	n/a

ITEM 2 – Protecting and Promoting Women, Children and Adolescent Health (WCAH) through Commitments

	Decision / Action	Responsibility
2.1	Advocacy and accountability for existing WCAH related commitments as well as	Knowledge & Evidence
	securing new ones, especially as we resist a roll back on rights	WG, Accountability WG,
	• Instead of soliciting PMNCH-branded commitments, create a digital commitment	Partners Engagement in
	compendium of existing commitments (e.g., FP2030; UHC, etc.,) and prioritize	Countries Committee
	advocacy and accountability for these, highlighting WCAH.	(PECC) Action Plans 1.3;
		2.2; 3.2
2.2	Lead partners in countries	PECC, Strategic
	Identify lead partners in key countries who could convene partners locally and	Advocacy Committee
	identify opportunities – advocacy and accountability for WCAH.	(SAC). Action Plan 2.2
2.3	Civic voices	Constituencies, with
	• Increase the capacity of and support to Civil Society Organisations and young	PECC, SAC
	people to play powerful roles in country and regional accountability processes,	Action Plans 2.2 and 2.3
	including through multi-stakeholder platforms, dialogues, products and events.	
2.4	Regional policy and global discussions	K&EWG, PECC
	Develop evidence-based advocacy briefs and evidence-based messaging to	Action Plans 1.1 and 1.2
	advocate for supportive policies and adequate investments and funding for	
	WCAH, including exploring the issue of blockages in contraceptive supplies being	
	caused by the Ukraine conflict and determine whether advocacy would be	
	helpful.	
2.5	Advocacy for improved financing for WCAH	K&EWG, SAC, PECC
	Focus more tightly on return on investment and financial advocacy, including	Action Plans 1.1, 2.2,
	innovative financing, fiscal space for WCAH in domestic finance, protection of	3.2 and 3.3
	ODA for WCAH and financing for access to commodities and supplies, working	
	closely with GFF.	
2.6	Celebrate success, amplify and share lessons learned.	K&EWG, SAC, PECC
	Amplify positive developments on how countries are successfully addressing the	Action Plans 1.2; 2.2,
	3C's (COVID, conflict, climate change), to feed into effective advocacy towards	3.1-3.3
	supportive policies, adequate investment and greater service coverage for	
	WCAH.	
2.7	Capacity of UHC/PHC systems to address WCAH needs.	SAC
	• Increase advocacy on supporting primary health care systems, including WCAH	Action Plan 3.2 & 3.3
	self-care practices, mental health and adolescent well-being, through whole-of-	
	government approaches – ensuring that UHC/PHC deliver for WCA.	
2.8	Multidimensional threats to WCAH	K&EWG, Acc.WG
	Focus on implementation of commitments that address the multidimensional	Action Plan 1.2, 3.2-3.3
	and inter-related threats of COVID-19, climate change and conflict as well as	
	some broader aspects of mental health, migration, cost of living / inflation,	
	conservatism and the food crisis.	
	Seek ways to promote / support Alliance for Transformational Action on Climate	
	& Health.	



ITEM 3 – Mobilizing for SRHR in Universal Health Care

	Decision / Action	Responsibility
3.1	Technical update of SRHR Global Strategy	SAC, K&EWG, PECC,
	Support the technical update of the Global Strategy on SRHR (led by	Acc.WG
	SRH/WHO) through facilitating consultations among all PMNCH	Action Plans 1.2, 2.2,
	constituencies and ensuring effective advocacy by PMNCH champions and	3.1-3.3
	partners on key messages, including through events (e.g., ICFP), social media	
	and multi-stakeholder platforms.	
3.2	SRHR related knowledge / information.	K&EWG, SAC, AccWG
	• Facilitate SRHR policy influencers and stakeholders' (e.g., CSOs,	Action Plan 1.2, 2.1-
	parliamentarians, media) access to easy-to-use data, accountability and	2.3, 3,1-3.3
	advocacy tools.	
3.3	Global and regional policy and financing platforms to secure SRHR support	Constituencies,
	Support political advocacy efforts at the global and regional levels (e.g., UN)	supported by PECC,
	multilateral processes, G7/G20, AU) to protect and promote SRHR and gender	SAC. Action Plans 2.1-
	equality, including in collaboration with GFF.	2.2, 3.1-3.2
3.4	SRHR-focused partnerships for joint action	SAC, PECC, all
	Facilitate collaboration, communication and joint action across and among	Constituencies
	sectors and PMNCH constituencies through digital means (e.g., Digital	Action Plans 1.2, 2.2
	Advocacy Hubs, Chatbots) to amplify progressive voices and support joint	and 3.2
	advocacy and accountability actions.	
3.5	SRHR definition(s)	K&EWG, SAC
	Amplify and disseminate the agreed Guttmacher-Lancet Commission's SRHR	Action Plan 1.2
	definition to ensure greater clarity and comprehensiveness, as well as	
	consensus among PMNCH partners (Knowledge & Evidence WG) and amplify	
	widely (SAC)	
	/ (/	

ITEM 6 – Progress report from the PMNCH Executive Committee

	Decision / Action	Responsibility
6.1	 Executive Committee report Approved the Executive Committee (EC) report. Congratulated the immense effort and substantial success to date in securing resources for PMNCH's work, given most difficult of global circumstances. 	n/a
6.2	Operational flexibility Reflecting the uncertainty in the external environment, important that the EC continues to lead PMNCH's flexible approach to delivering on its overall objectives, ready to adjust the details of the workplans as needed.	Executive Committee
6.3	 Resource mobilization efforts Continue to implement the Resource Mobilization strategy. Called upon all partners to actively engage in resource mobilization efforts – making introductions and advocating for PMNCH, etc. Country governments are invited to talk about the value they see in PMNCH and advocate for the brand globally to support resource mobilization efforts. Working with UNICEF and other partners, PMNCH to advocate for alternative uses of ODA resources originally intended for COVID-19, including redirecting some of these resources to WCAH issues. Consider how partners (e.g., NGOs, private sector, etc.) can engage in cofunding and / or in-kind contributions. 	Constituencies, Executive Committee
6.4	 Future prioritization Depending on the level of resources secured, EC to continue to prioritize the 	Executive Committee



	workplan as needed and taking into consideration Board priorities.	
6.5	Collaboration with GFF Executive Committee,	
	Continue to collaborate closely with GFF, whose focus on SRHR and	Secretariat
	adolescents' health provides good opportunities and synergies for further	
	collaboration, as well as co-funding opportunities.	2.2 and 3.2

ITEM 7 – Strategic Dialogue III - Global Forum for Adolescents

	Decision / Action	Responsibility
7.1	 Vision, objectives and goals of the Forum Board members agreed that there is a need for the EC to oversee the development of an operational plan to ensure that PMNCH can tap the full power of the partnership for delivery, including through CSOs and youth constituencies within other global platforms (Gavi, GFF, GFTAM, COP27, etc.). Vision of the Forum to be widely communicated through a strapline and elevator pitch, linked to rich calendar of events in 2022-23, e.g., curtain raiser on International Day of the Girl Child, ICFP and SRHR link, etc. Important to frame this <u>not</u> only as a single event/conference: It is a civic movement, supported by highly visible flagship events like the curtain-raiser and the Forum itself, the UNGA events, G20 Summit and into 2024, post-Forum including ICPD in 2024. Identify key asks (Agenda for Action for Adolescents) to drive political advocacy and commitment generation and identify effective accountability mechanisms for the Agenda, complementing other accountability mechanisms to ensure action and accountability at the country level e.g., the SDG review process. 	EC, GFA structures, with Strategic Advocacy Committee, adolescents & youth constituency Action Plan 3.1
7.2	 Partner engagement at the country level Facilitate in-country coordination and leadership to follow up on implementation of adolescents' wellbeing related policies and programmes. Partners to help mobilize necessary resources and accountability for these efforts at country level, including through small grants to strengthen youthled coalitions. Put in place strategies to bridge the digital divide to reach the most vulnerable. Country partners to be supported by PMNCH with advocacy resources that can be adapted and tailored for context specific national events and activities aligned with the Global Forum, including national advocacy agendas developed from the input of young people (supported by analysis of data generated by Chatbots). 	GFA structures, with Partners Engagement in Countries Committee, adolescents and youth constituency Action Plan 3.1 and 2.2
7.3	 Programming and features of the Forum Global Leaders Network to advocate for Agenda for Action for Adolescents (e.g., leading the Sept 2023 in-person side event at UNGA). Private sector partners to contribute to the Global Forum (e.g., Innovation Marketplace, Digital Advocacy Hubs, sponsorship, Chatbot, media, etc.). Engage with large public-facing advocacy organizations (e.g., Global Citizen) for advice and partnership and secure support of high-profile champions to front the #Adolescents2030 campaign. 	GFA structures, with private sector and adolescents & youth constituencies Action Plans 2.1, 2.2 and 3.1
7.5	 Resourcing Essential to ensure that adequate resources are made available to deliver on the ambition of the project, including a Secretariat team that is properly supported and staffed. All constituencies, including NGO and private sector constituencies, to tap their networks to contribute in-kind and through cash / sponsorship. 	Secretariat, Executive Committee, GFA structures, adolescents & youth constituency Action Plan 3.1



ITEM 8 – Governance Reform implementation and next steps

	Decision / Action	Responsibility
8.1	Renewal of Board Chair term	n/a
	Supported and strongly welcomed the renewal of Board Chair term for Rt	Action Plan 2.4
	Hon Helen Clark to serve for another three-year term until Nov 2025.	
8.2	Governance Reform achievements, challenges and opportunities	Governance & Ethics
	Took note of the status of governance reform implementation and	Committee
	acknowledged the great progress which has been made since early 2020 in	Action Plan 2.4
	response to the External Evaluation, thanking the GEC and EC for their	
	leadership and management of this process.	
	Noted also challenges and opportunities, as well as the plans to address	
	these as part of the good governance and light touch assessment work.	
8.3	Governance Manual	Governance & Ethics
	Important to finalize the Governance Manual to provide greater clarity and	Committee
	transparency on the diversity, inclusion and good governance policies, as	Action Plan 2.4
	well as mechanisms for nominations and leadership transitions.	
8.4	Possible move towards a partially virtual Secretariat	Governance & Ethics
	Options to be explored on the need, modalities and feasibility (including in	Committee, Executive
	WHO-hosting context) of potentially moving towards a partially virtual	Committee,
	Secretariat, building on working practices from COVID-19 and the	Secretariat, Action
	governance reform processes.	Plan 2.4
8.5	Secretariat workload	Governance & Ethics
	Acknowledged the immense work done by the Secretariat to facilitate	Committee, Executive
	partner engagement, acknowledging that the transition to partner-led	Committee,
	delivery is still in process and to be accelerated with Digital Advocacy Hubs. • Secretariat workload remains very high, and partners are encouraged to	Secretariat
	• Secretariat workload remains very high, and partners are encouraged to provide any possible support (e.g., secondments, staff time, etc.).	Action Plan 2.4, as well as 1.2, 2.2 and
	 Explore options for simpler and further streamlined governance structures 	3.1-3.2
	to reduce process intensity, which is one of the key drivers for a very high	3.1-3.2
	workload at the Secretariat.	
	Continue to prioritize the workplan wherever possible.	
8.6	Light Touch Assessment (LTA) and Good Governance (GG) work	Governance & Ethics
-	Took note that the emerging findings from the Light Touch Assessment and	Committee
	Good Governance work show that the PMNCH governance has new energy,	Action Plan 2.4
	broader participation (especially of young people), greater clarity of roles,	
	and is already proving to be more effective.	
	Recognizing that LTA and GG processes are internal learning and course-	
	correction exercises and not external evaluation processes, and an integral	
	part of a 'learning organization'.	



LIST OF PARTICIPANTS PMNCH 29TH VIRTUAL BOARD MEETING

Academic, Research and Training Institutes (ART)
Adolescents and Youth (AY)
Donors and Foundations (DF)
Global Financing Mechanisms (GFM)
Health Care Professional Associations (HCPA)
Inter-Governmental Organizations (IGO)
Non-Governmental Organizations (NGO)
Partner Governments (PG)
Private Sector (PS)

EC - Executive Committee

United Nations Agencies (UNA)

GEC - Governance & Ethics Committee

PECC - Partner Engagement in Countries Committee

SAC - Strategic Advocacy Committee

Participants are kindly asked to review the list and add their name or names of their colleagues who attended for any part of the meeting, so that we have an accurate record of all those who participated.

Board Leadership

BOARD CHAIR	Rt. Hon. Helen Clark	
	Former Prime Minister of New Zealand	
BOARD VICE CHAIR	Rajesh Bhushan	
Government of India	Secretary, Health and Family Welfare	
•	Ministry of Health and Family Welfare	
	Government of India	
BOARD VICE CHAIR	Darren Welch	
Foreign, Commonwealth and	Director of Global Health	
Development Office (FCDO) UK Government	Foreign, Commonwealth and Development Office	
BOARD VICE CHAIR <30	Aditi Sivakumar	
My Empowerment Platform	Founder	
	My Empowerment Platform	

Board Membership

Aga Khan University (AKU)	Marleen Temmerman Director of the Centre of Excellence in Women, Children and Adolescents Health Aga Khan University	
	Aga Khan University	



	Population Council Zambia	Mike Mbizvo Country Director Population Council Zambia
	International Islamic Center for Population Studies and Research, Al Azhar University	Gamal Serour Director of the International Islamic Center for Population Studies and Research Al Azhar University
AY	International Youth Health Organization	David Imbago Jácome (only attending Day 2) Member International Youth Health Organization
۷	Youth for Health Promotion Zimbabwe	Naledi Katsande (Apologies sent) Programs Lead Youth for Health Promotion Zimbabwe
DF	Foreign, Commonwealth and Development Office (FCDO) UK Government	Susan Clapham Health Adviser Foreign, Commonwealth and Development Office
GFM	Gavi, the Vaccine Alliance	Anuradha Gupta Deputy CEO Gavi, the Vaccine Alliance
	International Confederation of Midwives	Franka Cadée (Apologies sent) President International Confederation of Midwives (ICM)
НСРА	International Pediatric Association	Errol Alden President International Pediatric Association (IPA)
	The International Federation of Gynecology and Obstetrics	Jeanne Conry President International Federation of Gynecology and Obstetrics (FIGO)
160	Inter Parliamentary Union	Martin Chungong (Apologies sent) Secretary General Inter-Parliamentary Union (IPU)
Z	IPAS Central America and Mexico	Maria Antonieta Alcalde Castro Director IPAS Central America and Mexico
	Plan International	Stephen Omollo CEO Plan International



Africa Health Budget	Aminu Magashi Garba
Network	Coordinator
	Africa Health Budget Network (AHBN)

PG	Government of India	Roli Singh Additional Secretary and Mission Director, National Health Mission Minister of Health and Family Welfare Government of India
	Government of Liberia	Wilhelmina Jallah (Apologies sent) Minister of Health Government of Liberia

PS	Abt Associates	Caroline Quijada Principal Associate Abt Associates
	World Economic Forum	Børge Brende (Apologies sent) President World Economic Forum

	UNICEF	Luwei Pearson (attending on behalf of Catherine Russell) UNICEF
UNFPA Diene Keita, Willibald 2 UNFPA		Diene Keita, Willibald Zeck and Rachel Snow (attending on behalf of Natalia Kanem) UNFPA
	World Health Organization	Anshu Banerjee (attending on behalf of Zsuzsanna Jakab) WHO

Standing Committee Chairs

	Governance and Ethics Committee Chair	Flavia Bustreo Vice President Fondation Botnar
SC Chairs	Partner Engagement in Countries Committee Vice Chair under 30	Gareth Jones PECC Vice Chair under 30
	Strategic Advocacy Committee Co-Chair	Ann Starrs Director, Family Planning Bill & Melinda Gates Foundation



List of observers

(Granted full participation rights for Item 3 on Day 1)

WHO SRH	Pascale Allotey
Department	SRH/WHO Director

Invited Guests

	Invited guests for the whole duration of the Board meeting
Government of Argentina	
Government of Burkina Faso	t Minister of Health Government of Burkina Faso represented by Valérie Sanon
Government	t of Chile Minister of Health (apologies) Government of Chile
Government of Ethiopia	t Minister of Health Government of Ethiopia represented by Dr. Munir Kassa
Government of Mexico	t Minister of Health Government of Mexico represented by Karla Berdichevsky Feldman
Government of Senegal	t Minister of Health Government of Senegal, Ibrahima Seck
Government Sierra Leone	
Government South Africa	(4)



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