

31st Board Meeting

Taj Mahal Hotel, New Delhi, India

21 June 2023, 10:30 - 17:30 CET

22 June 2023, 09:30 - 16:30 CET

NOTE FOR THE RECORD OF DECISIONS

OBJECTIVES

The 31st PMNCH Board meeting focused on four strategic opportunities for country-led action, supported by PMNCH constituencies:

- Engaging with the **G20** and **G7** platforms to strengthen leadership and policy action for women, children and adolescents;
- Financing and policy opportunities to address the impact of climate change on women's, children's and adolescents' (WCA) health and well-being;
- Leveraging the Global Forum for Adolescents on 11-12 October 2023 to increase commitment to adolescent well-being, and to raise visibility for the needs and priorities of young people themselves through the 1.8 campaign; and
- Strengthening partner alignment at country level to drive implementation of commitments, including through high-level leadership and bottom-up community action.

PARTICIPANTS

Please see list of participants in Annex 1. Participants are kindly asked to review the list for accuracy, including omissions to be corrected. We will assume this list will stand, unless informed otherwise.

DOCUMENTS AND PRESENTATIONS

All Board documents and presentations can be found here.

LIVESTREAMING AND 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 for <u>Day 1</u> and <u>Day 2</u>.

A photo of the Board was taken and is available here.



Summary of decisions

	Conflict of interest review, agenda adoption, Note for the Record from er 2022 Board meeting	Responsibility
2.1	Adopted the proposed 31st PMNCH Board meeting agenda.	n/a
2.2	Noted no conflicts of interest.	n/a
2.3	Agreed that the Note for the Record from the Board meeting on 6 and 7 December 2022 is an accurate reflection of the proceedings.	n/a

	a – The G20 and Women's, Children's and Adolescents' Health: One Earth, mily, One Future	Responsibility
3(a).1	Develop and adopt a multi-year advocacy strategy to drive engagement with the G20 Presidencies: India (2023), Brazil (2024) and South Africa (2025), positioning of WCA health and well-being as a driver of economic growth and stability, and noting the cost of inaction.	SAC
3(a).2	Submit a short paragraph on WCA health and well-being for consideration in the G20 Leaders' Declaration, working closely with the Government of India as well as other G20 countries involved in the drafting process.	SAC

ITEM 3	b – The G7 and Women's, Children's and Adolescents' Health	Responsibility
3(b).1	Adopt a multi-year G7 advocacy approach, which will see PMNCH: (i) engage with the 2024 Italian presidency to bring WCA health and well-being to the fore within the context of the emerging interests for Italy (i.e., nutrition and migration, as well as possibly maternal and child health); and (ii) in parallel, start early advocacy engagement with stakeholders in Canada to work on influencing the 2025 G7 agenda, especially focusing on SRHR.	SAC
3(b).2	In the context of future G7 summits, actively work on protecting the gains for SRHR that have emerged from the G7 Japan summit (and those preceding it) through close alignment and collaboration with other G7 member-states supporting these issues (Germany, Canada, UK, etc.).	SAC
3(b).3	Building on the already existing G7-focused D&F constituency workstream, create an opportunity within the partnership for broader cross-constituency engagement in and contribution to this work, harnessing the full spectrum of experience and expertise from within PMNCH.	D&F SAC Secretariat

	 Addressing the impact of climate change on WCAH: Emerging opportunities, ng climate financing, for PMNCH action 	Responsibility
4.1	Engage and contribute to existing campaigns and networks on climate change (such as Alliance for Transformative Action on Climate Change and Health, One Sustainable Health Forum, etc.) and co-lead advocacy efforts prioritising the detrimental impacts on women, children, and adolescents, including the most vulnerable populations, with a view to breaking silos and mitigating the risk of fragmentation in this space.	 SAC and PECC All constituencies, particularly NGO, AY, GFM and UNA
4.2	Actively engage in COP28 to bring a WCAH lens, specifically during the Health Day, through PMNCH partners who are already active in the space.	SACAll constituencies



4.3	Collaborate with key partners on knowledge synthesis and research needs to support the uptake of evidence on impact of climate change on women's, children's and adolescents' health and well-being. This would include good practices on mitigation and adaptation, lived experiences, and data on indicators (e.g., heat stress and air pollution), with a view to creating targeted advocacy asks, including on climate and health co-financing.	 KE-WG and AccWG, SAC All constituencies, particularly ART, HCPA, AYC, D&F and UNA
4.4	Mainstream climate adaptation and mitigation strategies for vulnerable women, children, and adolescents within PMNCH's efforts to advance WCAH commitments at country level, including advocacy and accountability led by multi-stakeholder platforms, and capacity strengthening efforts to integrate climate change and WCAH in inter-sectoral policy, service delivery and financing. Advocate for the mainstreaming of WCAH within climate change policies, especially Nationally Determined Contributions and National Adaptation Plans. Specifically, identify and work with one country, in order to support their submission of an application to the Green Climate Fund programme specifically on WCAH.	PECC and AccWG All constituencies, particularly PG, IGO, UNA, DF, GFM, PS
4.5	Ensure the impact of climate change is integrated prominently into all PMNCH campaigns, including the 1.8 campaign for AWB.	 SAC and PECC All constituencies, particularly AY, NGO, UNA, IGO, PG

	– Advancing Adolescent Health and Well-Being through the Global Forum for cents and 1.8b Campaign	Responsibility
5.1	Intensify the mobilization of commitments for adolescent well-being from governments and non-state actors in advance of the GFA.	Board
5.2	Develop a monitoring and accountability framework to track actions and outputs from the GFA and 1.8 campaign process (e.g., knowledge products, number of young people engaged, national advocacy plans, national events).	GFA GCC / EC
5.3	Constituencies to continue to firm up and clearly articulate their contributions (commitments) to the GFA processes, as noted in Annex 2 of this Note for the Record, and to the overall PMNCH Results Framework.	ConstituenciesGFA Political Advocacy task team
5.4	Establish UNGA September 2023 event at head of state level to promote commitment to the AWB agenda at the highest level, and maintain momentum in 2024 and beyond (e.g., including of AWB in a WHA 2024 Resolution on WCAH issues). This could potentially be led by President Ramaphosa, focused on leveraging commitments to WCA health and wellbeing.	SAC
5.5	Mobilize support from UN Resident Coordinators and UN agencies to convene partners for commitment generation in 15 focus countries.	PECC and SAC
5.6	As part of PMNCH's broader and ongoing efforts to advocate for investing in adolescent wellbeing, efforts to be coordinated with all GFM constituency members to explore options of developing an AWB Strategy to be used when developing or updating in-country investment cases or plans (e.g., in the case of GFF).	 GFM constituency GFA Political Advocacy Task Team, 3) PECC/SAC Secretariat
5.7	Support the launch of <u>GFF's latest Investment Case</u> , through dissemination and coordinated advocacy efforts.	SecretariatPMNCH members



	6 – Delivering on country commitments for women's, children's and cents' health and well-being	Responsibility
6.1	Document, track and develop lessons learned from the 10-country Collaborative Advocacy Action Plan (CAAP) experience to date.	KEWG with guidance from PECC
6.2	Partners to explore ways: (i) in which resources can be secured to ensure implementation of the CAAPs; and (ii) to ensure meaningful engagement of all constituencies, enabling each constituency to play its unique role / part.	PECC / SAC, and D&F, NGO, AYC, and other constituencies
6.3	Continue to avoid duplication and build on existing multi-stakeholder platforms (MSPs), ensuring Government ownership, UNA facilitation / support, ART / HCPA and appropriate engagement of AY and local CSO participation, etc.	PECC with input from constituencies
6.4	PMNCH partners, including UN Agencies, to support and leverage ministerial dialogues with 10-13 CAAP countries regarding the implementation of national commitments, supported by global knowledge goods (e.g., commitment compendium, etc.).	SAC and PECC with UNA
6.5	CAAP model and its operations to be reviewed, including lessons learnt at the Nov/Dec 2023 virtual Board meeting.	PMNCH Board with input from PECC
6.6	High-level event to be organized alongside UNGA 2023 to give visibility to WCAH commitments made and implemented by key partner governments and aligned to GLN priorities	SAC

ITEM 1 – Opening Remarks

The 31st PMNCH Board Meeting was opened by Rt. Hon. Helen Clark, PMNCH Board Chair, who welcomed the participants.

Hon. Smriti Irani, Minister of Women and Child Development, Government of India, also welcomed the participants. She shared the experience and ambitions of the Indian Government in supporting the health and well-being of women, children and adolescents, engaging in discussion with Board members on the common opportunities and challenges in ensuring the sustainable provision of care to these population groups.

PMNCH Board Vice-Chair Rajesh Bhushan, Secretary, Ministry of Health and Family Welfare, provided his reflections as part of his welcome message.

A <u>pre-recorded video</u> message by WHO Director-General Dr Tedros Adhanom Ghebreyesus was shared.

Please refer to the recording of the Board meeting $\underline{\text{Day 1}}$ and $\underline{\text{Day 2}}$ to view the opening remarks and discussions.

ITEM 2 – Conflict of interest review, agenda adoption, Note for the Record from December 2022 Board meeting

	Decision / Action	Responsibility
2.1	Adopted the proposed 31st PMNCH Board meeting agenda.	n/a
2.2	Noted no conflicts of interest.	n/a
2.3	Agreed that the Note for the Record from the Board meeting on 6 and 7	n/a



December 2022 is an accurate reflection of the proceedings.

ITEM 3a – The G20 and Women's, Children's and Adolescents' Health: One Earth, One Family, One Future

This first Strategic Dialogue was set against the backdrop of the upcoming 18th G20 Heads of State and Government Summit, to be held on 9-10 September 2023 in New Delhi, India.

This session focused on identifying ways in which PMNCH can best support the G20 India presidency and G20 members in ensuring appropriate recognition and support for the urgent needs of women, children and adolescents within the main negotiation tracks of the G20 summit in 2023. It also considered how to strengthen the position of these issues ahead of the G20 summit in Brazil in 2024.

To inform G20 member-states about current needs and opportunities for health and well-being of women, children and adolescents (WCA), PMNCH was invited by <u>ThinkTwenty (T20)</u>¹ to develop a policy brief on the current status, trends, needs, and priorities to improve the health of women, children and adolescents in G20 countries.

Anshu Banerjee (WHO, UN Agencies Constituency) provided a brief overview on the G20 Policy Brief. Following this, the Deputy Minister of Health of the Republic of South Africa, Dr Dhlomo (Republic of South Africa, Partner Governments Constituency), and María Antonieta Alcalde (IPAS Latin America and the Caribbean, Non-Governmental Organizations Constituency) provided reflections in response to the presentation.

The Board had the opportunity to hear from the Indian G20 Sherpa, Amitabh Kant, who spoke passionately of India's concern with addressing the underlying drivers of well-being for women, children and adolescents through the G20 presidency this year, including the necessity to address the economic empowerment of women to reduce gender disparity and improve health and nutritional status. Mr Kant urged PMNCH members to be 'radical' and 'visionary' in advocating for women's empowerment and the improved economic well-being of WCA as a lever of sustainable development ('Put women at the centre of growth and promote them as leaders').

The item ended with remarks by Shombi Sharp, UN Resident Coordinator for India.

The discussions centred around the following themes:

- PMNCH's G20 advocacy efforts should be ambitious and should consider the broader structural drivers of health and well-being, including economic growth and stability.
- Empowering women and ensuring an equitable distribution of societal wealth to women is one of the key levers that could be applied to drive WCA health and well-being related progress.

¹ The T20 is an official group of the G20, which serves as an 'idea bank' by bringing together think tanks and high-level experts across the world to discuss policy issues relevant to the G20, over and above the issues being discussed in the formal tracks of the G20 process. As part of this process, the T20 will offer policy recommendations to the G20 leaders ahead of the Leaders' Summit in September 2023 to help the G20 deliver concrete policy measures.



 The many crises facing WCA health and well-being are also opportunities for building new and stronger partnerships. This is the right time to focus political attention on health and well-being: The COVID-19 pandemic has brought the impact of health on world economies into a much sharper focus than has ever before.

Decisions that have emerged from these discussions are set out below.

	Decision / Action	Responsibility
3(a).1	Develop and adopt a multi-year advocacy strategy to drive engagement with the G20 Presidencies: India (2023), Brazil (2024) and South Africa (2025), positioning of WCA health and well-being as a driver of economic growth and stability, and noting the cost of inaction.	SAC
3(a).2	Submit a short paragraph on WCA health and well-being for consideration in the G20 Leaders' Declaration, working closely with the Government of India as well as other G20 countries involved in the drafting process.	SAC

ITEM 3b – The G7 and Women's, Children's and Adolescents' Health

Strategic Dialogue 3B builds on the history of PMNCH's successful engagement with G7 member states in advocating for increased financing and policy measures for WCA health and well-being.

This Strategic Dialogue focused on exploring how PMNCH can develop a multi-year influencing approach for the G7, with the aim of maximizing support for SRHR, as well as MNCH and AWB. The participants also considered how the recent G7 support (i.e., at Hiroshima in 2023) for SRHR in UHC can be leveraged to increase visibility for SRHR, MNCH and AWB issues within the outcomes of the UN High Level Meeting on UHC in September 2023 in New York.

Two presentations opened this item. The first of these was by Chris Carter (PMNCH Board Vice-Chair; UK, Donors and Foundations Constituency), giving a 'first-hand' account of UK member-state perspective on what the 2023 Japan G7 has delivered for health and gender, and opportunities for further progress to be made in the years to come, with the support of all PMNCH stakeholders. Following, Ann Starrs (PMNCH Co-Chair of SAC; BMGF) presented the outcomes from the Hiroshima Summit in 2023, as well as a draft advocacy roadmap for PMNCH in 2024 and 2025, including possible events, products, champions and media opportunities where PMNCH can play an influencing role.

The discussions centred around the following themes:

- The Board congratulated all members involved in the G7 advocacy processes to date, noting significant SRHR-supportive language that was included in the G7 statements (from leaders as well as ministers).
- PMNCH has demonstrated its unique position to influence G7 processes. Future advocacy efforts should continue to be directed towards this important global forum, with a long-term plan that engages G7 processes early on and across its varied elements (i.e., leaders' communique, health communique, technical groups, etc.), in an organized and cross-constituency manner.



- Advocacy approaches need to be reflective of and adapted to priorities of different G7
 presidencies, while working with all G7 nations to prioritize WCA health and well-being within the
 available frameworks for each G7 summit.
- Throughout PMNCH's advocacy work, it will be important to ensure clarity and consistency across
 all communication and actions that PMNCH advocates for all three strategic goals: MNCH
 (maternal, newborn and child health), SRHR (sexual and reproductive health and rights) and
 Adolescent Well-Being. However, PMNCH may focus in on one or more of these components,
 depending on the context and therefore advocacy opportunities, as may be relevant.

Decisions that have emerged from these discussions are set out below.

	Decision / Action	Responsibility
3(b).1	Adopt a multi-year G7 advocacy approach, which will see PMNCH: (i) engage with the 2024 Italian presidency to bring WCA health and well-being to the fore within the context of the emerging interests for Italy (i.e., nutrition and migration, as well as possibly maternal and child health); and (ii) in parallel, start early advocacy engagement with stakeholders in Canada to work on influencing the 2025 G7 agenda, especially focusing on SRHR.	SAC
3(b).2	In the context of future G7 summits, actively work on protecting the gains for SRHR that have emerged from the G7 Japan summit (and those preceding it) through close alignment and collaboration with other G7 member-states supporting these issues (Germany, Canada, UK, etc.).	SAC
3(b).3	Building on the already existing G7-focused D&F constituency workstream, create an opportunity within the partnership for broader cross-constituency engagement in and contribution to this work, harnessing the full spectrum of experience and expertise from within PMNCH.	D&FSACSecretariat

ITEM 4 – Addressing the impact of climate change on WCAH: Emerging opportunities, including climate financing, for PMNCH action

Under this agenda item, the PMNCH Board reflected on the most recent evidence on the impact of climate change on WCA health and well-being, and discussed how PMNCH can best advocate for solutions to mitigate these effects and adapt to climate change in vulnerable populations, including through increased and targeted financial investments.

Flavia Bustreo (Fondation Botnar, Donors and Foundations Constituency), provided introductory remarks, which were followed by two scene-setting presentations:

Zulfiqar Bhutta (Aga Khan University and Sick Kids Hospital, Toronto) provided a brief overview of
evidence of the impact of climate change on WCAH, and priorities for action; and



 Mark Hanson (Chair, PMNCH Knowledge & Evidence Working Group) presented the current gaps and opportunities in co- or blended financing for improved outcomes for WCAH, based on a review by Jo Borghi and team of the London School for Hygiene and Tropical Medicine.

An open dialogue moderated by Flavia Bustreo and David Imbago (International Youth Health Organization, Adolescents and Youth Constituency) followed these presentations. Panellists included German Velasquez (Green Climate Fund) and Agnes Soucat (Agence Française de Développement, Donors and Foundations Constituency).

The session ended with closing remarks by Juan Pablo Uribe (World Bank, Global Financing Mechanisms Constituency).

The discussions centred around the following themes:

- Discussions contextualized climate change as one of the biggest and most pressing global challenges for the health and well-being of women, children and adolescents.
- Significant investments being channeled into climate mitigation and adaptation need to reflect
 the importance of WCA health and well-being to public health and prosperity across the life
 course. In many ways, addressing climate change is 'all about health', especially the impacts on
 the most vulnerable populations and WCA in particular.
- Climate change and health are becoming national issues and not just issues that are confined to
 health ministries; PMNCH has an opportunity to support these national as well as global dialogues
 by advocating for greater financing, supportive policies, and adapted services, while guarding all
 stakeholders against fragmentation and unhelpful competition.

Decisions that have emerged from these discussions are set out below.

	Decision / Action	Responsibility
4.1	Engage and contribute to existing campaigns and networks on climate change (such as Alliance for Transformative Action on Climate Change and Health, One Sustainable Health Forum, etc.) and co-lead advocacy efforts prioritising the detrimental impacts on women, children, and adolescents, including the most vulnerable populations, with a view to breaking silos and mitigating the risk of fragmentation in this space.	 SAC and PECC All constituencies, particularly NGO, AY, GFM and UNA
4.2	Actively engage in COP28 to bring a WCAH lens, specifically during the Health Day, through PMNCH partners who are already active in the space.	SAC All constituencies
4.3	Collaborate with key partners on knowledge synthesis and research needs to support the uptake of evidence on impact of climate change on women's, children's and adolescents' health and well-being. This would include good practices on mitigation and adaptation, lived experiences, and data on indicators (e.g., heat stress and air pollution), with a view to creating targeted advocacy asks, including on climate and health co-financing.	 KE-WG and AccWG, SAC All constituencies, particularly ART, HCPA, AYC, D&F and UNA



4.4	Mainstream climate adaptation and mitigation strategies for vulnerable women, children, and adolescents within PMNCH's efforts to advance WCAH commitments at country level, including advocacy and accountability led by multi-stakeholder platforms, and capacity strengthening efforts to integrate climate change and WCAH in intersectoral policy, service delivery and financing. Advocate for the mainstreaming of WCAH within climate change policies, especially Nationally Determined Contributions and National Adaptation Plans. Specifically, identify and work with one country, in order to support their submission of an application to the Green Climate Fund programme specifically on WCAH.	 PECC and AccWG All constituencies, particularly PG, IGO, UNA, DF, GFM, PS
4.5	Ensure the impact of climate change is integrated prominently into all PMNCH campaigns, including the 1.8 campaign for AWB.	 SAC and PECC All constituencies, particularly AY, NGO, UNA, IGO, PG

ITEM 5 – Advancing Adolescent Health and Well-Being through the Global Forum for Adolescents and 1.8b Campaign

During this discussion, the PMNCH Board explored the opportunities to work together and leverage the Global Forum for Adolescents (GFA) on 11-12 October 2023 for mobilizing greater commitments to adolescents' well-being, through the 1.8 Billion Young People for Change global campaign. It also focused on how to engage partners, leaders and champions to ensure comprehensive accelerated progress toward the 2030 Sustainable Development Goals (SDGs) and beyond.

Aditi Sivakumar (Board Vice Chair under-30, Adolescents and Youth Constituency) provided a brief presentation on progress. The presentation took stock of the work PMNCH partners have undertaken to date towards the GFA.

This was followed by oral interventions from each PMNCH constituency representative on actions being taken to advance the goals of the 1.8 campaign and the Global Forum, which are summarized in Annex 2 of this document. Open discussion followed, proving guidance and direction for cross-constituency action to accelerate planning and impact of these activities.

The discussions centred around the following themes:

- The Board noted the many important initiatives that are already underway, noting the need to
 ensure alignment and leveraging for greater impact. Currently collaboration between PMNCH and
 other initiatives / mechanisms (e.g., FP2030, ENAP/EPMM, GFF, etc.,) are being actively pursued
 for the benefit of AWB as well as the broader WCAH continuum, with a view that acting together
 in a more coordinated manner will result in more effective follow up and / or mobilization of new
 commitments.
- Reflected on the excellent support that all constituencies are providing and committing to in terms of the Global Forum for Adolescents, and associated AWB commitment mobilization processes. This includes the efforts to secure voices of young people themselves - noting



significant progress towards the target of one million young voices collected through the massive "What Young People Want" survey effort.

- Importance of coordination at global, regional and national levels, empowering national stakeholders (including governments) and young leaders themselves to lead the efforts, as well as existing accountability mechanisms (e.g., as led by parliamentarians in countries and through the Inter-Parliamentary Union processes).
- Transparent and inclusive multi-stakeholder platforms are important and powerful mechanisms to take this work forward.

Decisions from these discussions are set out below.

	Decision / Action	Responsibility
5.1	Intensify the mobilization of commitments for adolescent well-being from governments and non-state actors in advance of the GFA.	Board
5.2	Develop a monitoring and accountability framework to track actions and outputs from the GFA and 1.8 campaign process (e.g., knowledge products, number of young people engaged, national advocacy plans, national events).	GFA GCC / EC
5.3	Constituencies to continue to firm up and clearly articulate their contributions (commitments) to the GFA processes, as noted in Annex 2 of this Note for the Record, and to the overall PMNCH Results Framework.	Constituencies GFA Political Advocacy task team
5.4	Establish UNGA September 2023 event at head of state level to promote commitment to the AWB agenda at the highest level, and maintain momentum in 2024 and beyond (e.g., including of AWB in a WHA 2024 Resolution on WCAH issues). This could potentially be led by President Ramaphosa, focused on leveraging commitments to WCA health and well-being.	SAC
5.5	Mobilize support from UN Resident Coordinators and UN agencies to convene partners for commitment generation in 15 focus countries.	PECC and SAC
5.6	As part of PMNCH's broader and ongoing efforts to advocate for investing in adolescent wellbeing, efforts to be coordinated with all GFM constituency members to explore options of developing an AWB Strategy to be used when developing or updating in-country investment cases or plans (e.g., in the case of GFF).	GFM constituency GFA Political Advocacy Task Team, 3) PECC/SAC Secretariat
5.7	Support the launch of <u>GFF's latest Investment Case</u> , through dissemination and coordinated advocacy efforts.	Secretariat PMNCH members



ITEM 6 – Delivering on country commitments for women's, children's and adolescents' health and well-being

This agenda item provided an update on strategic approaches to advance the implementation of existing country commitments effort, for WCA health and well-being through the development of partner-led Country Advocacy and Accountability Plans ("CAAPs") in 10 to 13 countries in 2023, and related commitment mobilization efforts for adolescent well-being in 15 countries. It reflected on the work through high-level champions (e.g., Global Leaders Network; parliamentarians), grassroots organizations and processes (e.g., citizen hearings), etc.

Joy Phumaphi (PMNCH Chair of PECC, African Leaders Malaria Alliance) provided an update on status and objectives of this country-focused work.

This was followed by remarks from Olive Shisana (Special Advisor on Social Policy to the President of South Africa), Julitta Onabanjo (UNFPA, UN Agencies Constituency), and Per Falk (Ferring Pharmaceuticals, Private Sector Constituency). A discussion ensured, moderated by Githinji Gitahi (PMNCH Co-Chair of SAC, AMREF Health Africa).

The discussions centred around the following themes:

- National governments make WCAH commitments in response to existing global, regional and national obligations. These commitments are influenced by the changing socio-economic environments, humanitarian contexts, as well as resources available to government and other local actors.
- High-level political leadership and advocacy is necessary to drive strategic policy shifts, ensure stakeholder alignment, and support multi-sectoral commitments and actions to safeguard WCAH issues in the context of poly-crises.
- Successful implementation of commitments requires all partners to support the leadership of
 national governments through provision of technical, financial and service delivery support. In
 this regard, in-country coordination among partners must be strengthened using tools such as the
 Digital Advocacy Hubs (DAHs) and the PMNCH Partner Zone, as well as the efforts of the PMNCH
 Secretariat.
- Ongoing monitoring of commitment implementation through open, inclusive and solutionsoriented accountability approaches is critical. It is important to learn from existing global, regional and national frameworks and mechanisms to better align with and leverage existing mechanisms, including aligning with the facilitation and support from UNA and CSO constituencies, each playing their unique role.
- Capacity building, consensus building, and cross-sharing are also important to facilitating active
 engagement by partners, especially local civil society organizations. In this regard, knowledge
 resources such as the digital commitments compendium, and those generated by UN agencies
 and other partners (GFF, FP2030, etc.) as well as academic, research and training institutes, should
 be made easily accessible through the DAHs, linking with existing knowledge platforms.



Decisions that have emerged from these discussions are set out below.

	Decision / Action	Responsibility
6.1	Document, track and develop lessons learned from the 10-country Collaborative Advocacy Action Plan (CAAP) experience to date.	KEWG with guidance from PECC
6.2	Partners to explore ways: (i) in which resources can be secured to ensure implementation of the CAAPs; and (ii) to ensure meaningful engagement of all constituencies, enabling each constituency to play its unique role / part.	PECC / SAC, and D&F, NGO, AYC, and other constituencies
6.3	Continue to avoid duplication and build on existing multi-stakeholder platforms (MSPs), ensuring Government ownership, UNA facilitation / support, ART / HCPA and appropriate engagement of AY and local CSO participation, etc.	PECC with input from constituencies
6.4	PMNCH partners, including UN Agencies, to support and leverage ministerial dialogues with 10-13 CAAP countries regarding the implementation of national commitments, supported by global knowledge goods (e.g., commitment compendium, etc.).	SAC and PECC with UNA
6.5	CAAP model and its operations to be reviewed, including lessons learnt at the Nov/Dec 2023 virtual Board meeting.	PMNCH Board with input from PECC
6.6	High-level event to be organized alongside UNGA 2023 to give visibility to WCAH commitments made and implemented by key partner governments and aligned to GLN priorities.	SAC

ITEM 7 – Board wrap-up and closing remarks

The last agenda item provided a high-level wrap-up the key themes which emerged, noting that the full Note for the Record was to be shared following the Board meeting.

Rajesh Bhushan, PMNCH Executive Committee Chair, shared closing remarks noting his departure from PMNCH. PMNCH Board Chair Helen Clark thanked Mr Bhushan for his excellent stewardship and contribution to PMNCH's continued success on behalf of all Board members.



ANNEX 1

PMNCH 31ST BOARD MEETING AND SPECIAL G20 EVENT

20-22 June, New Delhi, India Draft List of Participants

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)
United Nations Agencies (UNA)

EC - Executive Committee

GEC - Governance & Ethics Committee

PECC - Partner Engagement in Countries Committee

SAC - Strategic Advocacy Committee

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
	Observing: Zoya Rizvi
BOARD VICE CHAIR	Chris Carter
Foreign, Commonwealth and	Deputy Director – Head of Human Development Department
Development Office (FCDO),	Foreign, Commonwealth and Development Office
Government of the UK	
BOARD VICE CHAIR <30	Aditi Sivakumar
My Empowerment Platform	Founder
•	My Empowerment Platform



Board Membership

PART		Director of the Centre of Excellence in Women, Children and Adolescents Health Aga Khan University Mike Mbizvo
PART		Mike Mbizvo
ART	opulation Council Zambia	
ARI		Country Discrete
1		Country Director
		Population Council Zambia
In	nternational Islamic Center for Population	Gamal Serour (apologies)
St	tudies and Research, Al Azhar University	Director of the International Islamic Center for Population Studies and Research
	,	Al Azhar University

	International Youth Health Organization	David Imbago Jácome Member International Youth Health Organization
AY	Youth for Health Promotion Zimbabwe	Naledi Katsande Programs Lead Youth for Health Promotion Zimbabwe

DF	Foreign, Commonwealth and Development Office (FCDO), UK Government	Chris Carter Deputy Director – Head of Human Development Department Foreign, Commonwealth and Development Office
		Observing: Sena Ar-Rikaby
	Agence Française de Développement, Government of France	Agnes Soucat (Virtual participation) Director of Health and Social Protection Agence Française de Développement

	World Bank / Global Financing Mechanism	Juan Pablo Uribe (Virtual participation)
É	worla Bank / Global Financing Wechanism	Global Director for Health, Nutrition and Population at the World Bank
Ū		Director of the Global Financing Facility for Women, Children and Adolescents (GFF).

нсра	International Confederation of Midwives	Sandra Oyarzo Torres (Virtual participation) President International Confederation of Midwives (ICM)
	International Pediatric Association	Naveen Thacker President International Pediatric Association (IPA)
	The International Federation of Gynecology and Obstetrics	Jeanne Conry (Virtual participation) President International Federation of Gynecology and Obstetrics (FIGO)



051	Inter Parliamentary Union	Martin Chungong (Apologies) Secretary General Inter-Parliamentary Union (IPU)
	IPAS Central America and Mexico	Maria Antonieta Alcalde Castro Director IPAS Central America and Mexico
OĐN	Plan International	Stephen Omollo (apologies with delegation to Kathleen Sherwin, Chief Strategy and Engagement Officer, Plan International) CEO Plan International
	Africa Health Budget Network	Aminu Magashi Garba (apologies) Coordinator Africa Health Budget Network (AHBN)
	Government of India	Rajesh Bhushan Secretary, Health and Family Welfare, Ministry of Health and Family Welfare Government of India
PG	Government of South Africa	Mathume Joe Phaahla (apologies with delegation to Sibongiseni Maxwell Dhlomo, Deputy Minister of Health, Government of South Africa) Minister of Health
		Government of South Africa
	Ferring Pharmaceuticals	Per Falk President Ferring Pharmaceuticals
PS	World Economic Forum	Børge Brende (apologies with delegation to Shyam Bishen, Head, Centre for Health and Healthcare, WEF) President World Economic Forum
	UNICEF	Catherine Russell (apologies with delegation to Anurita Bains, Associate Director, HIV and AIDS, UNICEF)
		Executive Director UNICEF
	UNFPA	Natalia Kanem (delegation to Julitta Onabanjo, Technical Director, UNFPA)
UNA		Executive Director UNFPA
	World Health Organization	Bruce Aylward (Virtual participation – with in person delegation to Anshu Banerjee, Director for the Department of Maternal, Newborn, Child and Adolescent Health and Ageing)
		Assistant Director-General, UHC and Life Course, WHO



	Governance and Ethics Committee Chair	Flavia Bustreo Vice President Fondation Botnar
SC Chairs	Partner Engagement in Countries Committee Co-Chairs	Joy Phumaphi (virtual participation) Executive Secretary African Leaders Malaria Alliance (ALMA)
	Strategic Advocacy Committee Co-Chair	Ann Starrs Director, Family Planning Bill & Melinda Gates Foundation
		Githinji Gitahi CEO AMREF Health Africa
		Observing: Caitlyn Mitchell (virtual)

Invited Guests

Smriti Irani	Minister of Women and Child Development Government of India
Amitabh Kant	G20 Sherpa Government of India
Shombi Sharp	UN Resident Coordinator, India
Olive Shisana (virtual participation)	Special Advisor on Social Policy to the President of South Africa Government of South Africa
German Velasquez (virtual participation)	Director Mitigation and Adaptation Division Green Climate Fund
Zulfiqar Bhutta (virtual participation)	Director SickKids Canada



ANNEX 2

PMNCH Constituency actions towards the GFA

Constituency	Summary of proposed contributions to the health and wellbeing and youth and adolescents
Mike Mbizvo on behalf of the	The Academic, Research and Training (ART) constituency members have assessed the unique value add of the ART membership and are committed to undertake the following actions:
ART	1. Actively supporting the 1.8 campaign's progress and the development of the programme of the Global Forum for Adolescents (GFA), through membership and active engagement in the GFA Programme Action Group. Members of the ART constituency have submitted expressions of interest and look forward to leading and coproducing sessions within the GFA programme.
	2. ART members play a critical role in developing evidence-based guidance and tools to support advocacy and accountability for Adolescent Well-being (AWB), including the investment case for adolescent well-being and a measurement framework to monitor AWB.
	3. ART constituency members are poised to advocate and provide technical support for government commitments to Adolescent Well-being in priority countries, including through cross-constituency collaborations.
	4. ART constituency members are generating evidence and key materials to advance our understanding of the five domains of adolescent well-being and contribute to the 1.8 billion campaign and the GFA.
	5. Members of the ART constituency are actively organising or planning national events in support of the GFA, and ART members are mobilising and sharing the "What Young People Want" platform with university consortia, student bodies, youth champion mobilisation and networks of academic professionals under 24.
	In addition, the ART constituency plays a critical role in supporting the advancement of knowledge and evidence on adolescent well-being. This includes undertaking knowledge translation on policy relevant AWB evidence; ensuring dissemination and uptake of AWB knowledge for policy and programming, including through digital platforms; and developing resources – for instance training materials, courses, inclusion of AWB content in curricula and professional training; and undertaking capacity strengthening activities, including webinars and mentorship programmes.
David Imbago on	Members of the PMNCH Adolescents and youth constituency (AYC) are drawn from over 100 youth-led organizations. We support PMNCH's work by ensuring the principles of
behalf of the AY	meaningful adolescents and youth engagement are integrated across all the work that we are doing as PMNCH.
	The constituency is the main driver of the Global Forum for Adolescents and the 1.8 billion campaign. The AYC is playing a key role as leaders and members of the action groups that are driving the planning of the forum. Additionally, the AYC has been extremely active across all five engagement opportunities outlined in the partner engagement kit.
	For instance, the AYC is at the forefront of mobilizing responses for the What Young People Want Initiative. Work done by youth led organizations/grantees in 10 countries, (which are aligned with the priority countries of the Global Forum for Adolescents) has to date mobilized more than 300.000 responses! This mobilization has been done offline and



online across these countries and will be available on a dashboard later. We have one of the grantees here -- and if members are curious about the process of mobilization - please do reach out to the YP Foundation to understand how they are working with young people on the ground to mobilize responses in the country. This work is also closely related to the commitment mobilization work where the grantees are working with lead partners.

As a part of their effort to support the campaign, all the grantees will organize a national event in the months to come in support of the forum and support commitment mobilization through national advocacy roadmaps which they have developed in support of the Forum.

In addition to the grantees, other youth networks of the AYC have also been keen on organizing national events. The AYC has been instrumental in tapping the student community for this. Students from One Young World at the University of Bath organized an event in UK in April, while a youth led organization organized an event in China recently. They led on the design and agenda —truly taking ownership of the campaign and forum — making it their own.

Ananda has used the forum for inspiration to organize an event on WeChat as well. It has been exciting to see and increasing number of youth organizations participate in the work.

In addition:

- Members of the AYC have also been very active on social media -- raising the visibility of the forum and the campaign over the past many months.
- We have also had several youth-led organizations apply for the programme. In fact, members of the constituency were instrumental in designing the programme that was presented today during the PAG workshop in New York a few weeks ago.
- Since January, members of the constituency, AYC members have also taken part in several events including the ECOSOC, AHAIC, Big Pink Dialogue, CSW, WHA to raise the visibility of the campaign and the forum. A lot of you were in Geneva during walk the talk which featured our very own Merette Khalil calling on young people to join the campaign and advocate for adolescent well-being.
- In addition to leading on a lot of these activities, members of the AYC have also been raising the visibility of the campaign in their own networks encouraging them to make the campaign their own, advocating for issues they are most passionate about, and working with partners to mobilize commitments. Gareth Jones who is here can give us an insight into how his organization is doing this.

Chris Carter on behalf of D&F

Members of the PMNCH Donors & Foundations (D&F) constituency are drawn from governments, philanthropic foundations, multilateral agencies and / private sector organizations, brought together into the constituency by the fact that they have historically and / or are currently supporting PMNCH's work through grant funding. At the start of 2023, the constituency has set out its objectives for the year, noting its intention to deliver contributions to the Global Forum for Adolescents in line with PMNCH's objectives. These contributions are focused on what individually and collectively members of the D&F constituency can do to support the broader call for mobilizing new commitments (nationally, regionally and / or globally) to improve adolescents health and wellbeing.

The constituency contributions can be grouped into three areas. The first of these is the use of government and diplomatic networks and embassies to host events, mobilize speakers, and share information advocating for the mobilization of commitments (e.g., contributions from the UK Government). Members' combined diplomatic resources provide a powerful network of positive and constructive influence, with a reach spanning right across the globe – with diplomatic missions, thematic advisers and experts, and high level government champions engaged towards this goal.



Secondly, the constituency will use its extensive advocacy capabilities through social and traditional media and also through its existing grantee networks to energize and empower communities to advocate for new commitments as well as to press for accelerating the implementation of existing commitments, which were adopted to support young people's well-being aspirations (e.g., contributions from the Bill & Melinda Gates Foundation). Messages will be amplified, partnerships built, and relevant adolescents and wellbeing targets embedded in current and/or future grants, where this is possible. They will also focus on engendering a sense of accountability and follow up, to strengthen the implementation and sustainability of these commitments going forward (e.g., contributions from the FIA Foundation).

Finally, constituency members will also advocate internally within their own governments and organizations to lead by example and make commitments themselves to the adolescents' health and wellbeing cause (e.g., contributions from the Fondation Botnar). These commitments could be made through a financial, policy and / or service provision lens, and will serve to provide a rallying call to the broader community to work as one towards our common objective.

Naveen Thacker on the HCPA

As the Health Care Professionals Association (HCPA) constituency of PMNCH, we bring together the voice and commitment of millions of healthcare professionals across the globe. We fully support the Global Forum for Adolescents and 1.8 billion campaign, and consider prioritization of adolescent health and wellbeing critically important across the life-course, including to achieve MNCH and SRHR outcomes.

HCPA constituency is actively engaging across all 5 areas:

As regards commitments - HCPA's are supporting to advocate for and help implement government and sub-national commitments to prioritize adolescents in policies, investments and service delivery in all countries we operate. We are ready to support the Lead partners in 15 adolescent well-being priority countries and in 10 priority countries to develop and implement Collaborative Advocacy and Accountability Action Plans (CAAP).

HCPA constituency is developing a joint commitment on what HCPA's can do together and each organization separately to improve adolescents health (including to address teenage pregnancies, support young pregnant women, SRHR for young people., incl. abortion, improved vaccination of adolescents against HPV, improved training for health professionals to ensure provision of adolescent-appropriate services; investing in early leadership (student engagement at congresses, strengthening accountability measures etc).

This work is underway, including IPA explicitly included adolescents in its new strategy and workplan; ask to all national associations to engage on GFA/1.8 billion campaign; through FIGO, ICN, COINN, ICM, IPA Youth Leadership programs; WONCA promotion of adolescent care as critical element of PHC, FIGO engagement in youth-specific measuring in adolescent health services, e-certification courses for youth-friendly services etc.

National convenings: Given HCPAs presence on the ground, we are actively engaged across countries. Some examples include IAAH engaging young professionals' networks working in adolescent health to organize webinars targeting their constituency; including appointing youth ambassadors in 30 countries; FIGO is organizing a dedicated webinar in September; and IPA is planning to organize national convenings in the 15 priority countries, in collaboration with other national HCPA member societies. Promoting What Young People Want and active social media engagement: HCPAs, and importantly Youth HCPAs have been actively supporting crowdsourcing youth voices and sharing the evidence and campaign's material through their global, regional, national associations and engaging via social media, and other means.



	Global Forum for Adolescents Programme - we have expressed interest to contribute.
	Throughout we emphasize adolescents and youth, and young professional voices as collaborative, interdisciplinary efforts to address what adolescents and young people need
	and want, and to impact sustainable change.
Helen Clark on behalf of the	The GFM constituency contributions to the Global Forum for Adolescents and, more broadly to adolescent health and well-being, can be grouped into the following areas.
GFM	The constituency will use its extensive collaboration with national governments to foster more effective dialogue between ministries of health and finance in order to leverage more efficient and equitable domestic financing and prioritize implementation of national commitments for adolescent health and well-being and mobilize new ones when no policy or legislation frameworks are in place.
	Secondly, the constituency will use its platforms and programmes to make adolescent health and wellbeing integral to national efforts and ensure that the voice of adolescents and youth can be heard at both national and global levels, e.g. through dedicated representation in key global and national platforms and processes.
	Thirdly, the constituency will work closely with governments, civil society and UN partners to mobilize financial resources and fill funding gaps at country level, including through innovative financing mechanisms, and invest in adolescent health and wellbeing.
	The GFM constituency will continue providing technical support for countries to develop and cost their national plans making sure adolescent health and well-being is integral to the plans and that these are implemented by working with a full range of stakeholders in the spirit of trust, accountability and integrity.
	Finally, the GFM constituency will support and participate in systems that define adolescent health and well-being for purposes of tracking funding flows, both domestic financing and official development assistance for health, and identifying gaps to strengthen action and accountability.
Helen Clark on behalf of the IGO	The IGO Constituency is very committed to supporting the mobilization for commitments and to engage more widely in the Global Forum of Adolescents as per the 5 asks outlined in the Partner Engagement Kit.
	Engaging global and regional political platforms (such as the G7, G20) as well as parliaments is critical to influencing their agendas and elevate the visibility of this important issue among key decision makers. While global engagements are underway, the IGO constituency is examining ways in which to revitalize itself including through expanding membership to more strategic inter-state collaborations and identifying strategic mechanisms to engage them.
	PMNCH's Parliament Engagement Strategy is currently being implemented. Engaging parliaments and parliamentarians, in line with their accountability role in the commitment follow up and mobilization will be important as they play an important role in making laws, providing effective oversight, and in the budget process.
	Different activities took place during the 146 th IPU Assembly in Manama (March 2023) and several speakers and MPs expressed interest in understanding better the Adolescent Wellbeing Framework, as well as what would be needed to improve adolescent wellbeing, including good practices in legislation, policies, strategies finances and services. At the IPU Assembly, we also organized a workshop on Comprehensive Sexuality Education (CSE) that aimed to inform parliamentarians why CSE is important for the health and wellbeing



of young people and why political and governmental commitment is key to making it happen. The discussion had underscored the need to educate across the life course, but much more remained to be done and further considered. We are currently looking into ways to give these issues more visibility at the upcoming IPU Assemblies. The IPU Advisory Group on Health (AGH), of which PMNCH is a technical partner, will also be consulted and could support addressing adolescent wellbeing. The AGH supports the implementation of the health component of the IPU Strategy by focusing on inequalities and discrimination that stand in the way of universal access to services. One of the main areas of work of the AGH is women's, children's and adolescents' health and well-being.

As the AWB monitoring framework is currently being developed, we encourage linking it to ALMA's tools including the community scorecard. Making parliamentarians aware of this resource is equally important especially as it relates to their own country's accountability mechanisms will be critical.

For the Global Forum for Adolescents (GFA), ALMA's Youth Advisory Council have submitted an expression of interest to lead and contribute to the 5 core programmatic tracks, and side-events of the Global Forum for Adolescents. The efforts of the National Youth Armies supported by ALMA (both in Africa and diaspora) could be very helpful in disseminating the chatbot link to the already engaged 3.5k African youth and their networks and soliciting their input on matters of importance to them – The chatbot link has been shared with ALMA's malaria youth champions via the telegram group which has 1000 members. ALMA's National Youth Armies could also strategically leveraged to organize innovative national events.

Young parliamentarians could be encouraged to gather the voices of young people through their functions of constituency outreach. However, I need to point out here that the cut-off point for young MPs in IPU is 45 years of age and not 30. The IPU will promote the GFA through our social medial channels and will undertake future joint collaboration with PMNCH similar to the collaborative posting on Instagram across both the 1.8 Billion Campaign and the IPU channels during the 146th IPU Assembly in Manama which led to increased engagement of the 1.8 Billion campaign.

We are in constant contact with PMNCH and stand ready to mobilize parliamentarians as well as the IGO constituency around the GFA, as appropriate. The deliberations from today's meeting will help the IGO Constituency to think further on how to support these exciting efforts.

Maria Antonieta on behalf of the NGO

The NGO constituency is comprised of nearly 840 organizations and accounts for over 60% of PMNCH partners. As the largest PMNCH constituency, we are very pleased to have been part of this process throughout and in co-creating the Global Forum. PMNCH NGO Constituency members have been actively involved in the strategizing and planning of the Global Forum – including representation in the dedicated Global Coordination Committee, the Programme Action Group, the Partnership and Communications Action Group and the Digital Experience Action Group.

In terms of the programme creation for the Global Forum, we are very pleased to share that the NGO Constituency members responded overwhelmingly to the Expression of Interest for organizing concurrent sessions during the Global Forum's main programme in October. I am very excited to share that over 70% of the submissions made were by NGO constituency members who are continuing to demonstrate their commitment for the adolescent well-being agenda.

Furthermore, NGO constituency members are also taking the agenda to the communities by organizing various national events in support of the Global Forum across different regions. To-date nearly 51+ events have been registered across nearly 30 countries. I am pleased to share that over half of the events organized are by NGO constituency members championing and spotlighting a spectrum of issues impacting adolescent well-being including SRHR, mental health, climate change, nutrition, empowerment, education, and



	meaningful engagement. NGO members, both in high-income countries and low- and middle-income countries alike are leading this by organizing localized events in support of the Global Forum. For example, NGO partners in the UK - collectively organized a dialogue with Parliamentarians in the House of Lords in May 2023. In the coming months, we
	hope to have more of our membership organize more events in support of the Forum.
	As you have already heard, Plan International, is a part of the NGO Constituency Leadership and is coordinating the mobilizations of commitments for Adolescent well-being in 7 countries. We have also sensitized the PMNCH partners and NGO constituency members in the commitment countries to ensure the commitments being drafted are in response to the lived experiences and the community demands emerging from the voices gathered through the What Young People Want Initiative.
	NGO members have also been critical in leading engagements, including Africa Health Agenda International Conference (AHAIC) in March 2023, the ECOSOC Youth Forum in April 2023, the 76 th World Health Assembly (WHA) in May 2023, and other events throughout the year and on the road to the Global Forum in October 2023. Going forward, we hope to document some of the learnings in terms of our engagement with the 1.8 Campaign and the Global Forum and inspire more of the membership to collectively deliver for the Forum.
Zoya Rizvi on behalf of PG	India is and has been a strong advocate of the Global Fforum for Adolescents and adolescent well-being agenda overall. We are a part of the Global Coordination Committee for GFA.
	As part of our contribution, the Ministry organized the MoHFW G20 co-branded event, which was preceded by the 4 youth focused regional consultations spread across India to ensure representation, and, 1 global consultation in partnership with PMNCH to gather perspectives and opinions of what young people want.
	These 5 consultations have informed language in the outcome document of the MoHFW co-branded G20 event as well as the thematic paper, both of which were released by the Hon'ble Ministers of Health, Govt of India, during the event held on the 20th of June here in New Delhi.
	As committed by Govt of India, we will continue to support all of PMNCH's efforts to advance adolescent well-being and more broadly women, children and adolescents health and well-being.
	We will build upon the success of this event and continue to consult adolescents and young people to formulate policies and programs that have a bearing on their health and well-being.
Per Falk on behalf of the PS	Members of the PMNCH Private Sector (PS) constituency, which includes diverse business entities and global corporations, are actively aligning behind a unified call to action for the 1.8 billion youth in the world. This commitment, which we intend to launch at the United Nations General Assembly, signifies our firm belief that adolescent health and well-being are a pivotal concerns for the sustainability of businesses in the future.
	Our collaboration with the World Economic Forum has opened avenues to an advocacy roadmap, mobilizing private sector momentum for this common goal. Specifically, we aim to motivate our members towards individual PS commitments that underscore the importance of this issue. For instance, the pharma sector's robust representation in the mission to eradicate cervical cancer is a landmark commitment in this direction. Our commitment template, which will be released soon, will enable companies to seamlessly link their social and environmental responsibilities and encourage SMART commitments.



The PS constituency acknowledges the imperative of a dynamic conversation on how decisive government policies and leadership within the private sector can mutually enhance and foster ambition for adolescent health and well-being. This dialogue will help portray the private sector as a part of the solution in policy discussions within the G7, G20, and COP28 contexts.

We are delighted to share the increasing local initiatives, both led by or involving the active participation of the private sector, rallying behind the 1.8 billion campaign and empowering young people as agents of change. For example, Rotary and Rotaract hosted a successful youth-driven event in Australia, the Big Pink. In Ghana, in partnership with Dataking Research Lab, we are fostering academic discussions and multi-stakeholder forums to deliberate on critical issues regarding adolescent health. In Nigeria, DAI Global is enhancing adolescent reproductive health and empowering this segment with the skills, social capital, and resources needed to realize their full potential through various interventions and youth-led events.

Lastly, we are ensuring that the private sector is aptly represented in the virtual Global Forum for Adolescents sessions, highlighting our commitment to youth health and well-being where it truly matters.

Anshu Banerjee on behalf of the UNA

It is with great pleasure that I bring to your attention the noteworthy achievements of the H6, underscoring our unwavering commitment to advancing the health and well-being of all individuals, particularly the young population. These accomplishments are a testament to our ongoing efforts to effect positive change and create a better future for adolescents globally.

The Technical Working Group, comprising members from the H6 agencies, UNESCO, and PMNCH, developed the Adolescent Health and Wellbeing Framework. A timebound expert consultative group has been established to support the development of the Adolescent Health and Wellbeing monitoring framework which will be presented at the GFA. Furthermore, the UN agencies have made substantial contributions to the BMJ collection, showcasing our dedication to knowledge dissemination and evidence-based practices. Additionally, we are updating the Accelerated Action for Health for Adolescents Framework, a comprehensive compilation that incorporates WHO recommendations spanning a broad spectrum of adolescent health areas. These encompass vital aspects such as physical activity, nutrition, sexual and reproductive health, mental health, and emerging lessons from the unprecedented challenges posed by the COVID-19 pandemic. By enriching the content of this update, we ensure its relevance and applicability to the evolving needs of adolescents worldwide.

With regard to the forthcoming Global Forum for Adolescents, we affirm our commitment to robust engagement with stakeholders. In this regard, UNICEF and UNFPA are actively convening the program action group and WHO is represented in the Global Coordination Committee.

In November last year, WHO communicated with the country offices, highlighting the Global Forum of Adolescents and urging them to support efforts in making youth and adolescents visible in reporting to the SDG Summit. UNICEF and UNFPA sent a similar joint letter earlier this year. We acknowledge that data disaggregation at the country level can present challenges; however, we have encouraged our offices to collaborate closely with governments to address this issue and emphasize the importance of comprehensive reporting.

At the regional level, our agencies have engaged with various working groups and committees. Notably, UNFPA has actively engage its regional adolescent and Youth advisors and key country office colleagues, while UNICEF has concentrated its efforts on the Caribbean and Mediterranean regions. Furthermore, we are pleased to note that the WHO Regional Committee for the Eastern Mediterranean region is planning a side event, which will be prominently showcased during the plenary session of the Global Forum for



Adolescents. Significantly, our collective efforts extend to supporting the submissions that have been made. UNFPA has spearheaded this initiative with five submissions, and we have further collaborated with external organizations for an additional 23 submissions. UNICEF has supported numerous partners with their submissions. WHO has also submitted for the Global Forum, focusing on the implementation of the Adolescent Health and Wellbeing Framework and the Monitoring Framework. These collective endeavors address critical issues such as gender-based violence, sexual reproductive health, comprehensive sexuality education, and more. We remain fully engaged in supporting our partners to enhance the quality of submissions and provide necessary assistance in their preparation for the forum.

Recognizing the paramount significance of engaging young people, we have initiated discussions with UNESCO to foster collaboration with Ministries of Education to encourage schools to facilitate dedicated 60-90 minutes sessions on the 11th or 12th of October, enabling students to discuss their health and well-being openly. UNESCO has experience in the past supporting similar activities and we are awaiting the result of their internal discussion. In order to reach more young people WHO has thought the global youth mobilization an existing collaboration with the 6 Big Youth organizations who collectively have a membership of around 250 million people. Both UNFPA and UNICEF are mobilizing their respective youth networks. WHO has launched a Youth Council to enable young people to engage with WHO and influence its work

The constituency also proposes to organize briefings in advance of 11 and 12 October in Geneva and New York for Permanent Missions, bilateral partners, GHIs, civil society and parliamentarians in order to ensure there is a global component recognizing the need to for global partners to be involved and are willing to see how if of value they can be linked to the actual GFA.

The UNA Constituency will use its social media to amplify the PMNCH Social Media Toolkit. The UNA Constituency looks forward to working with PMNCH through 2023 in the lead up to the Global Forum for Adolescents and to continuing engagement with the 1.8 Billion Young People for Change Initiative.