

PMNCH Board Meeting  
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Dhaka, Bangladesh

# *PMNCH Director's report*

## *Partners working together*

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improving  
maternal, newborn and child health  
through active partnership

## Outline

1. Unprecedented opportunities for MNCH in 2010: PMNCH is pro-actively involved
2. A 'partner-centric' Partnership has become a reality
3. Highlights from the PMNCH Strategy and Workplan achievements since December 2009
4. PMNCH: Where the rubber meets the road
5. Inside workings

## Unprecedented MNCH opportunities in 2010

MNCH rises to the top of the global health agenda; PMNCH is pro-actively involved:

- March 2010: MNCH plenary session, IPU, Bangkok
- April 2010: UN SG senior strategy meeting, New York
- June 2010: Women Deliver/ Countdown plenary and Health Systems sessions
- June 2010: G 8 meeting Canada
- July 2010: AU special meeting on MNCH
- September 2010: MDG summit - UN GA



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## A 'partner-centric' Partnership has become a reality



- Partners successfully working together and delivering on agreed outputs.
- PMNCH continues to be an effective platform for activities most effectively undertaken in partnership.
- Three main modes of partnership working:
  - Partners working together within each PA
  - Linking activities across different PAs
  - Leveraging external partnerships through PMNCH

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## Key accomplishments in 2010 - to date

- PA1: Knowledge mapping and options reports; portal prototype.
- PA2: Consensus on essential interventions (review & A-list)
- PA3: Agreement on MNCH commodity security strategy (H4 and other partners)
- PA4: A successful regional HCPA workshop for Arabic-speaking states held in Amman, Jordan.
- PA5: G8 Call to Action and high-level support to Canadian presidency of G8; coordination of UNSG Joint Action Plan; high-profile global media outreach; landscape analysis and video; development of African Investment Case.
- PA6. Countdown 2010 report and conference.

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# Collaboration across Priority Action Areas

- Cross-PA collaboration on knowledge syntheses and the MNCH knowledge portal (PA1-6)
- Collaboration between MNCH interventions and commodity lists (PA 2,3)
- Advocacy for essential interventions set out in MNCH consensus (PA2,5)
- Countdown data supports G8 advocacy (PA5,6)

## **PMNCH launches "Call to Action for the G8" to double MNCH resources**

### **A call for a doubling of resources**

26 April 2010 | Geneva/Halifax - The welcome endorsement by the G8 of a global consensus<sup>1</sup> on maternal, newborn and child health at the L'Aquila Summit in 2009 committed all G8 Governments to take action to save the lives of vulnerable women and children. Under Canadian leadership, the G8 in 2010 must collectively support this commitment with new resources for Maternal, Newborn and Child Health (MNCH), including reproductive health. This commitment must include access to integrated and cost-effective interventions that have been proven to save lives. The G8 must also put its leadership squarely behind the UN Secretary General and make an ambitious contribution to a concrete plan of action to accelerate progress towards the Millennium Development Goal (MDG) 4, which remains off-track, and MDG 5, which has made the least progress of all the goals<sup>2</sup>.



## PMNCH: Where the rubber meets the road

- Addressing differing levels of engagement of individual board members and partners.
- Ensuring coherence across the workplan – effective communication across PAs.
- Changing dynamics with lead partners rotating off the Board.
- Maintaining the focus on the real added value of PMNCH – through partnership working, rather than on individual MNCH efforts.
- Use of PMNCH funds – funding secure, but alignment required with conflict of interest recommendations.



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## PMNCH: Inside workings

- Working with lead partners to implement workplan
- Support to core functioning of committees
- Mobilizing resources

Overall 92% of workplan funded for 2010

- Large transaction costs to the secretariat for pass-through funds
- Secretariat - functionality versus flexibility

THANK YOU!

