

## PMNCH (2026-2027) Consolidated Workplan

October 2025

This consolidated workplan for 2026–2027 aligns with the PMNCH Strategy 2026–2030 by integrating the Unfinished Agenda, Sexual and Reproductive Health and Rights (SRHR), and Adolescent Health and Well-Being (AHWB) into a coherent framework.

The Plan organizes the Partnership’s activities for the period under five interlinking action areas of financing, accountability, multisectoral alliances, inclusive policies and rights-based advocacy, and capacity building. This structure is intended to remove duplication, strengthen linkages and complementarities across action areas, enhance measurable impact and clarify expectations and responsibilities.

### **1. Key Actions**

In summary, the key action areas for PMNCH (members and the Secretariat) in 2026-2027 are:

#### **I. *Mobilize Sustainable Financing***

Mobilizing innovative, long-term financing for the Unfinished Agenda, SRHR, and AHWB. Emphasis will be placed on i) domestic resource mobilization, ii) high-level advocacy for global health investments and investment cases, and iii) fostering partnerships with regional development banks, private sector, and private foundations. Equipped with advocacy tools and monitoring, and reporting on fluctuations in public health expenditure, donor contributions and funding overall, PMNCH will advocate for predictable, diversified and sustained financing streams to uphold essential services, particularly targeting countries with high rates of maternal, newborn and child mortality (including conflict and crises affected countries).

#### **II. *Foster Accountability***

Working with non-governmental organizations<sup>1</sup> and other constituencies to systematically track implementation of government commitments for women’s, children’s and adolescents’ health (WCAH), SRHR, and AHWB, by strengthening, adapting and using data from existing scorecards, digital dashboards, and citizen-led hearings., PMNCH will support the implementation of official commitments through South–South exchanges and peer-learning across countries which will promote course corrections and more transparent and accountable health systems.

#### **III. *Strengthen Multisectoral Alliances to Tackle Structural Inequities***

Strengthening national, regional, and global multisectoral coalitions and multidisciplinary communities of practice to align stakeholders working on WCAH, SRHR,

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<sup>1</sup> This includes civil society, youth organizations, health care professionals, academia etc.

and AHWB across sectors such as health, education, nutrition, WASH, humanitarian response, climate, economic and social development. By developing and coordinating joint campaigns and policy dialogues, as well as supporting collaborative, in-country advocacy efforts, PMNCH will foster holistic approaches that expand reach, enhance continuity of care, and reduce duplication of effort, while anchoring advocacy in the voices of community representatives. This includes engaging with community leaders, youth parliamentarians, educators, and the media to challenge harmful norms, stigma, discrimination, and structural inequities. Through support for youth-led and community-led campaigns and cross-constituency collaboration, PMNCH will help drive more inclusive policies and increase acceptance of sexual and reproductive health and rights, including for adolescents and youth.

#### **IV. *Advancing Progressive Laws and Policy and Rights-Based Advocacy***

Undertaking parliamentary engagement, high-level global, regional, and domestic advocacy, and support inclusive dialogues to promote and advance rights-based laws and policies. This includes translating global guidance into regional and national tools such as model laws, facilitating peer learning and cross-movement initiatives across health, nutrition, and humanitarian sectors, and showcasing progress at major forums to encourage political uptake and implementation. To help counter anti-rights narratives, PMNCH will coordinate campaigns, promote disinformation-monitoring systems, and provide advocacy trainings, including on how to leverage digital tools for enhanced results. By equipping youth, the media, parliamentarians, and civil society with strong evidence-based communication tools, PMNCH will work to safeguard political space for advancing priorities in WCAH, SRHR, and AHWB.

#### **V. *Strengthen Capacity and Foster Professional Development***

Responding to the growing need for well-trained, adequately deployed, and resilient health workforces, supported and equipped to deliver integrated programmes on WCAH/SRHR and AHWB, and building on lessons from the AHWB agenda, PMNCH will work to strengthen institutional and individual capacities to translate global knowledge into evidence-based context-specific action. PMNCH will foster tailor-made capacity strengthening programmes for Constituencies, building on cross-constituency learnings as key element for sustaining advocacy and accountability capacity.

### **2. Cross-Cutting Impact in 2026-2027**

The consolidated workplan seeks to better align efforts to promote financing for WCAH/SRHR and AHWB with accountability, advocacy, and implementation efforts.

## 2.1 Desired outcomes:

- Sustained and predictable funding for WCAH, with emphasis on domestic and innovative financing mechanisms as key sources.
- Enhanced accountability, supported by robust data collection and use and citizen engagement.
- Coordinated multisectoral action, that enables service continuity and enhances equity, particularly within fragile contexts.
- Stronger legal and policy protections, thus shoring up realization of rights-based access to health.
- A narrowing of the gap between advocacy and implementation, helping equip key stakeholders to turn commitments into action and results.
- Increased public and political support, by countering misinformation and tackling social barriers.

## 2.2 Key performance indicators (KPIs)

KPIs are set for each of the seven priority areas (see table below). These will enable close tracking of progress and impact, which in turn helps hold PMNCH accountable for its own action/implementation of commitments. These KPIs are identified for the two-year biennium period of 2026-2027 and will be reviewed by the Board on an annual basis.

## 3. What's new compared to previous PMNCH workplans

The 2026–2027 workplan marks a shift from more siloed programming to an integrated systems-based framework. The new workplan consolidates efforts on financing, accountability, advocacy capacity, and policy change into interlinked, aligned, coordinated and thus more strategic levers for change. The Plan introduces advanced digital monitoring tools, formalizes coalition building, institutionalizes root cause analysis and focused responses to misinformation. This is designed to improve PMNCH efficiency, coherence, and measurable impact.

Among its unique features are:

- Strategic alignment of all five thematic areas through a unified matrix, rather than separate work streams.
- Financing made as a cross-cutting and systems issue, rather than a siloed issue.

- A bold approach to accountability inclusive of all themes and made practical through use of digital tools to provide shared evidence thus enabling more timely course correction and acceleration of successes.
- Structured mechanisms for multi-sector and multi-constituency coalition-building, to help capitalize on synergies and co-benefits.
- Consolidation of policy change efforts, better linked to technical assistance and regional platforms, and mechanisms that support implementation.
- Better use of model laws, peer learning, and regional dialogues (AU, ASEAN, BRICS, G20, IPU).
- Better integration of global normative guidance (as provided by WHO/UNFPA/UNICEF/UNESCO) in national policy tools.
- Introduction of a strategic focus on countering misinformation, spanning WCAH, SRHR, and AHWB.
- An institutionalized approach to combatting anti-rights/SRHR pushbacks, taking a multi-pronged approach, using high-level political advocacy, digital tools and coalition building.
- Systematic focus on societal barriers, integrated across the workplan rather than isolated initiatives.
- A comprehensive results framework, with quantifiable metrics at multiple levels.

#### 4. Ways of working in 2026-2027

The PMNCH consolidated workplan for 2026–2027 is a plan for coordinated delivery by all PMNCH partners jointly with the PMNCH Secretariat.

Many of the areas that the Plan focuses on are (as intended) already priorities for many individual partners, and for others beyond the Partnership. However, the specific contribution that PMNCH as a platform enables, and which the Plan seeks to leverage, are those where **cross-organisation/cross-partner co-ordination and collaboration increases impact**.

Members of each of **PMNCH six constituencies** will propose contributions they will make to the Plan's delivery through constituency meetings and through the PMNCH Board meetings. Cross-constituency working groups will be established to enable coordinated implementation of key activities.

**The Secretariat** will facilitate cooperation within and across constituencies, help disseminate key tools and resources, monitor and periodically report on progress to PMNCH partners and routinely scan global, regional and national spaces for opportunities for collective action.

To summarize, this will include:

## 1. Constituency-Led Contributions

Members of each of PMNCH's six constituencies will:

- **Identify and propose specific contributions** aligned with their expertise and strategic priorities.
- **Commit resources and leadership** to deliver on selected activities within the consolidated workplan.
- **Engage in regular coordination meetings** to ensure alignment and accountability.

## 2. Cross-Constituency Working Groups

To foster collaboration and avoid siloed efforts:

- **Thematic working groups** (no more than 3 in a biennium) will be formed, bringing together representatives from multiple constituencies.
- These groups will **co-design and implement joint activities**, such as advocacy campaigns, knowledge-sharing events, and policy dialogues.
- **Shared workplans and timelines** (activities or theme based) will guide implementation, with clear roles and deliverables.

## 3. Partner Coalitions and External Collaboration

PMNCH will:

- **Leverage existing partner coalitions** and networks to amplify reach and impact.
- **Engage external stakeholders** (e.g., UN agencies, regional bodies, civil society alliances) to co-host events, co-develop tools, and co-lead initiatives.
- **Promote cross-sectoral and cross-constituency learning** by linking health with education, climate, humanitarian, and social sectors.

## 4. Secretariat Facilitation and Support

The PMNCH Secretariat will play a central enabling role by:

- **Coordinating across constituencies**, ensuring coherence and synergy in activities.
- **Disseminating tools and resources**, including policy briefs, advocacy toolkits, and evidence syntheses.

- **Monitoring progress** through regular reporting, dashboards, and feedback loops.
- **Scanning for opportunities** at global, regional, and national levels to initiate or join collective action efforts.

## 5. Strategic Use of Convening Power

PMNCH Board members and high-level champions will:

- **Convene strategic dialogues** with policymakers, donors, and influencers.
- **Mobilize political will and visibility** for key issues through global forums, summits, and parliamentary engagements.
- **Showcase constituency-led innovations and progress** to inspire replication and scale.

## i. Mobilize Sustainable Financing

Action area	Main Tactics	Key Activities	Outputs	Outcomes (across the Strategy Period 2026-2030)	Impact (across the Strategy Period 2026-2030)	KPIs (2026-2027) (Those highlighted in green are “attribution” KPIs to Secretariat. Other KPIs are PMNCH membership “contribution”)	Targets 2026 & 2027
<b>Mobilize innovative, sustained financing for WCAH, SRHR, and AHWB.</b>	Advocacy with governments, donors private sector, private foundations  Develop and promote investment cases  Promote linkages to multisectoral financing	Implement budget advocacy and domestic resource mobilization efforts as part of <b>Collaborative Advocacy Action Plans (CAAPs)</b> (WCAH, SRHR, AHWB)  Establish <b>Financing Taskforces</b> (particularly targeting SRHR & Adolescent Health) that create and promote innovative financing mechanisms and partnerships (e.g. with regional development banks, private sector and	Coordinated national financing plans integrating WCAH-SRHR-AHWB.  Innovative co-financing schemes established (e.g. with climate, nutrition and humanitarian sectors).  Financing platforms and cooperating mechanisms established to mobilize and monitor execution of financing for WCAH, ARHR and AHWB  Key stakeholders trained on budget	Increased and diversified global and domestic funding streams.  Greater political commitment to ringfenced budgets.  Enhanced multi-sectoral financing allocations in costed budgets	More predictable, long-term financing is ensuring sustained and equitable service delivery.  Implementation of financial commitments into budget expenditures, leading to improved service coverage and health impact	Number of CAAP countries adopting investment cases for costed plans.  Number of financing platforms established, with number of trained stakeholders  % increase in public health expenditure as a share of total health spending, including for WCAH, SRHR, and AHWB  Number/value of innovative financing schemes operationalized.	Costed budget plans adopting WCAH investment cases in 5 CAAP countries in 2026 & 5 additional countries in 2027  4 financing platforms established in 2026 and 2027  10% increase in public health expenditure as a share of total health spending, in 2026, and 10% increase in 2027.  10 innovative financing schemes in 2026 and 2027.

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		<p>humanitarian organisations).</p> <p>Promote and develop <b>country and regional investment cases</b>, showing co-benefits of WCAH, SRHR and AHWB financing, incorporating climate resilience.</p> <p>Promote and produce <b>advocacy tools</b> (policy briefs, dashboards, ROI analyses, engagement methods) to equip partners, parliamentarians, and youth groups.</p> <p>Track and advocate against <b>reductions in ODA and domestic funding</b>, using consolidated intelligence across WCAH, SRHR, AHWB.</p>	advocacy and tracking tools.				
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## ii. Foster Accountability

Action area	Main Tactics	Key Activities	Outputs	Outcomes (across the Strategy Period 2026-2030)	Impact (across the Strategy Period 2026-2030)	KPIs (2026-2027) (Those highlighted in green are “attribution” KPIs to Secretariat. Other KPIs are PMNCH membership “contribution”)	Targets 2026 & 2027
<b>Foster accountability for translation of official commitments to WCAH, SRHR and AHWB into measurable action.</b>	<p>Integrated data generated through existing scorecards, digital dashboards, and citizen-led hearings, strengthening or adapting them as necessary to foster accountability</p> <p>Promote and strengthen South-South collaboration</p>	<p>Promote integration of <b>SRHR and adolescent indicators</b> including on equity, into existing accountability platforms (e.g. AU Countdown, ALMA).</p> <p>Strengthen <b>national scorecards and progress reports</b> jointly with civil society, youth groups, and parliamentarians.</p> <p>Promote and support <b>citizen hearings and participatory</b></p>	<p>Public scorecards and barometers are covering progress on realizing WCAH–SRHR–AHWB commitments.</p> <p>Tested models for grassroots and youth-led methods are monitoring commitments, with civil society and youth group active participation.</p> <p>Data and good practices used to stimulate cross-country lessons and implementation</p>	<p>Enhanced public transparency and more equitable participation in formal accountability processes.</p> <p>Structured process for responses by duty-bearers and evidence-based course corrections implemented.</p> <p>Sustained use of accountability tools and platforms addressing implementation gaps at national and sub-national levels</p>	<p>Greater public accountability for implementation of official commitments to improved, including more equitable, SRMNCAH outcomes.</p> <p>Accountability recommendations acted upon by duty-bearers through policy, budget, or service delivery adjustments.</p> <p>Strengthened data systems and evidence-based decision-making, supported by sustained</p>	<p><b>Number of countries publishing integrated WCAH/SRHR/AHWB scorecards annually.</b></p> <p>% of official commitments for which there is evidence of measurable progress (tracked via dashboards).</p> <p><b>Number of citizen-hearing, social accountability dialogues, youth/citizen hearings facilitated by PMNCH.</b></p> <p><b>Number of health system plans, budgets, or</b></p>	<p>20 countries publishing integrated scorecards in 2026-2027, including CAAP countries</p> <p>Evidence of progress on 40% of commitments in 2026-2027</p> <p>4 youth/ citizen hearings/social accountability sessions yearly and youth and CSO increased inclusion in formal accountability mechanisms in 10 countries</p> <p>10 CAAP country plans that use accountability</p>

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		<p><b>public budgetary processes and reviews</b> in CAAP countries.</p> <p>Institutionalize <b>peer learning and knowledge exchange</b> (i.e. through GLN events, cross movement workshops (health, humanitarian, climate), parliamentary dialogues etc.).</p> <p>Promote and create <b>AI-driven dashboards and data visualizations</b> to track implementation in real time.</p> <p>Advocate for data availability for decision making, including real-time data and digitalized HIS.</p>		accountability processes	<p>performance reviews that use accountability resources to improve WCAH and equity</p>	resources in 2026-2027
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### iii. Building Multisectoral Alliances to Tackle Structural Inequities

Action area	Main Tactics	Key Activities	Outputs	Outcomes (across the Strategy Period 2026-2030)	Impact (across the Strategy Period 2026-2030)	KPIs (2026-2027) (Those highlighted in green are “attribution” KPIs to Secretariat. Other KPIs are PMNCH membership “contribution”)	Targets 2026 & 2027
<b>Build and strengthen coalitions for WCAH, SRHR and AHWB across health, climate, finance, nutrition and other sectors.</b>	Advocate and help coordinate cross-sector networking, communities of practice, and cross-sector policy dialogues	<p>Strengthen national WCAH/SRHR/AHWB coalitions, aligning with EWENE, CSA, GFF, SUN networks</p> <p>Support development and socialization of multi-sectoral advocacy roadmaps linking health to education, nutrition, climate, and digital innovation</p> <p>Foster and enable communities of practice for integrated service</p>	<p>Integrated advocacy plans across constituencies</p> <p>Shared tools and events driving joint messaging, advocacy and resource mobilization</p> <p>Enabled coalitions and communities of practice driving multisectoral action</p>	<p>Coordinated and integrated national implementation strategies reduce duplication and fill gaps</p> <p>Strengthened alignment and coherence of advocacy efforts across constituencies</p> <p>Enhanced capacity of stakeholders to engage in multi-sectoral action for WCAH, SRHR and AHWB</p>	<p>Coordinated action leads to evidence-based policy and programming to reduce inequities and preventable morbidity and mortality</p> <p>Enhanced multi-sectoral interventions support integrated services</p> <p>Improved continuity and quality of care across the life course</p>	<p>Number of functioning multisectoral coalitions with formal plans</p> <p>Number of joint advocacy campaigns and events focusing on cross-sector alignment</p> <p>% increase in policy and programming commitments reflecting multisectoral integration</p>	<p>10 CAAP Countries with multisectoral coalitions in 2026 and 2027</p> <p>10 multisectoral-focused advocacy campaigns and events yearly</p> <p>10% yearly increase in new commitments reflecting multisectoral integration</p>

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		delivery and accountability  Galvanize joint coalition events and campaigns with public-private-philanthropic partners					
<b>Challenge harmful norms, stigma, discrimination, and structural inequities.</b>	<p>Community-driven action to address underlying causes and social barriers</p> <p>Youth leadership and advocacy</p> <p>Cultural dialogue to address root causes and dismantle social barriers</p> <p>Support youth-led campaigns on bodily autonomy, adolescent-pregnancy prevention, and mental health</p> <p>Leverage global and regional platforms (CAAP, GLN) to elevate social</p>	<p>Engage youth and community leaders, parliamentarians, educators and media to publicly challenge harmful norms and practices</p> <p>Support youth-led campaigns on bodily autonomy, adolescent-pregnancy prevention, and mental health</p> <p>Leverage global and regional platforms (CAAP, GLN) to elevate social</p>	<p>Social norms-change campaigns and training workshops in priority countries</p> <p>Greater visibility for marginalized voices through storytelling and policy engagement</p> <p>Coordinated platforms and coalitions addressing structural inequities</p>	<p>Increased political and societal will to remove barriers to health and education</p> <p>Enhanced inclusivity in policy processes</p> <p>Capacitated stakeholders addressing harmful norms and practices</p>	<p>Improved knowledge, attitudes, and behaviors among stakeholders that promote equitable norms, reduce stigma and discrimination</p> <p>Policies and programmes engaging communities to address the social determinants of health and improve equity</p>	<p>Number of youth/community-led initiatives influencing policy outcomes</p> <p><b>Number of coalitions integrating social determinants of health into agendas/statements/outcome documents</b></p> <p>% of national health strategies including actions on social/cultural barriers</p> <p>Measurable shifts in public perception on</p>	<p>5 youth/community-led initiatives influencing policy in 2026, and 5 in 2027</p> <p>10 coalitions integrating SDH and equity yearly</p> <p>15% of health strategies including actions on social/cultural barriers yearly</p> <p>15% surveyed increase in evidence-based attitudes on A/SRHR issues</p>

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		<p>determinants in political dialogue</p> <p>Develop inclusive communication products in multiple languages for accessibility and cultural relevance</p>				adolescent and SRHR issues	
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 iv. *Advancing Progressive Laws and Policies and Rights-Based Advocacy*

Action area	Main Tactics	Key Activities	Outputs	Outcomes (across the Strategy Period 2026-2030)	Impact (across the Strategy Period 2026-2030)	KPIs (2026-2027) (Those highlighted in green are “attribution” KPIs to Secretariat. Other KPIs are PMNCH membership “contribution”)	Targets 2026 & 2027
<b>Advocate for more robust and supportive WCAH, SRHR and AHWB policies, laws and rights-based implementation.</b>	High-level global, regional and national advocacy, parliamentary engagement, and regional legal reform initiatives	Lead, foster and support regional and national dialogues (AU, ASEAN, BRICS, G20, IPU) to advance rights-based policy and legal frameworks.  Foster and	Policy and legal briefs and toolkits widely disseminated  New or updated model laws and legal frameworks supporting comprehensive	Policymakers capacitated to implement inclusive, rights-based approaches  Increased regional alignment on WCAH/SRHR/AHW	Strengthened policy and legal frameworks effectively adopted and implemented	<p>Number of parliamentarians trained and leading legislative change.</p> <p>Number of actions by regional platforms to support WCAH commitment</p>	<p>20 parliamentarians and 2 country parliaments trained yearly in 2026-2027</p> <p>One third (33%) of regional platforms with prioritized commitments in</p>

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						implementation?	2026 and 2027
		<p>support parliamentary forums to draft and adopt progressive WCAH/SRHR/AHW B laws and foster their implementation</p> <p>Facilitate peer learning on legal reforms through sub-regional and CAAP country exchanges</p> <p>Translate global normative guidance (i.e. from WHO/UNFPA/UNICEF/UNESCO) into actionable national policy tools</p> <p>Host high-level events (WHA, UNGA, AU, UHC HLM) to showcase progress and</p>	<p>health and rights. B standards.</p> <p>Parliamentary forums prioritizing laws and policies for WCAH, SRHR and AHWB</p> <p>Convenings to increase community, health care professional, and youth voice and engagement in normative and policy discussions and decisions.</p>	<p>Strengthened national and sub-national policies addressing rights-based approaches to health</p>		<p>Number of countries adopting new or reformed laws aligned with global standards.</p>	<p>5 countries adopting new/reformed laws yearly in 2026-2027</p>

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		mobilize commitments					
<b>Combat mis- and dis-information, and anti-rights movements</b>	<p>Coordinated campaigns at global, regional, and national levels to address misinformation and resist anti-rights movements</p> <p>Coalition-based monitoring of regression and opposition to rights, including SRHR</p> <p>Capacity-strengthening in advocacy to address mis- and disinformation</p>	<p>Develop and launch campaigns with feminist, youth, and media partners to amplify evidence-based pro-WCAH/SRHR/AHWB narratives.</p> <p>Strengthen digital advocacy capacity of CAAP partners, parliamentarians, and youth networks and support CAAP partners to advocate against misinformation.</p> <p>Produce compelling case studies and human stories to influence media, public opinion and</p>	<p>Global and regional campaigns promoting fact-based messaging.</p> <p>Active monitoring platforms detecting misinformation in real time.</p>	<p>Increased public awareness of SRHR and adolescent rights as integral to UHC.</p> <p>Reduced policy capture by anti-rights movements.</p> <p>Enhanced capacities to combat misinformation and anti-right approaches based on evidence-based tools.</p>	<p>Uptake of evidence-based information by partners and stronger political space for advancing WCAH/SRHR/AHWB policies.</p> <p>Strengthened evidence-based and progressive policies and laws.</p>	<p>% increase in positive/non-oppositional public media sentiment on MNCH, SRHR and AHWB (measured by AI tools).</p> <p>Number of misinformation incidents countered with verified messaging.</p> <p>Number of advocates and policymakers trained in digital safety and counter-opposition narrative framing.</p> <p>Number of progressive national SRHR</p>	<p>25% increase in positive media reporting in 2026 and 2027</p> <p>20 reported and verified incidents yearly in 2026 and 2027</p> <p>80 advocates trained yearly, including 20% young people</p> <p>5 countries with progressive policies adopted/revised in 2026 and 5 countries in 2027</p>

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		decision-makers.				policies adopted or revised	
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## v. Build Capacity and Foster Professional Development

Action area	Main Tactics	Key Activities	Outputs	Outcomes (across the Strategy Period 2026-2030)	Impact (across the Strategy Period 2026-2030)	KPIs (2026-2027) (Those highlighted in green are “attribution” KPIs to Secretariat. Other KPIs are PMNCH membership “contribution”)	Targets (2026 & 2027 non-cumulative)
<b>Support, advocate for and enable capacity building and professional development in WCAH, SRHR and AHWB</b>	Develop tools, resources and support for professional development in, and strengthened institutional capacity to deliver, adolescent, SRHR and WCAH programmes.	Promote, develop and roll out Massive Open Online Courses (MOOCs) on adolescent health and multisectoral service delivery  Advocate for and support implementation of phased Professional Development Programmes (PDPs) in priority countries.	Enhanced workforce skills and institutional capacity for adolescent-responsive services  Cross-country knowledge exchange platforms are functional  Strengthened capacity building programmes	Improved quality and continuity of care through trained personnel and stronger institutional systems  National programmes adapt global tools and resources more effectively	Sustainable service delivery gains from professionalized, evidence-based programming  Programme implementation and service delivery improved by enhanced capacities and leading to better quality of care	# participants completing MOOCs/PDPs-  # countries institutionalizing training programmes  # technical products co-created or adapted nationally  % improvement in service delivery	200 participants completing MOOCs/PDPs yearly in 2026-2027, including 20% young people  5 CAAP and GLN countries institutionalizing training programmes yearly in 2026 and 2027  10 technical products

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		<p>Promote and help establish national-level Communities of Practice to share innovations and address bottlenecks, particularly in fragile contexts.</p> <p>Provide technical assistance and mentorship to policymakers, program managers, and youth advocates</p>	adopted by institutions			indicators linked to trained workforce	<p>created/adapted in 2026-2027, including in-depth case studies and lessons learned</p> <p>15% improvement in service delivery indicators linked to trained workforce in 2026 - 2027</p>
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