PMNCH for Women's, Children's and Adolescents' Health

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ZERO DRAFT

PMNCH 2022-23 Workplan

1. Introduction

This PMNCH's proposed two-year Workplan sets out the work that PMNCH plans to deliver in 2022-23 calendar years. It operationalizes the PMNCH 2021 to 2025 Strategy and is based on the recently approved PMNCH's Results Framework, discussions during the Board meetings in 2021, lessons learned to date, and work that is currently underway by PMNCH.

The workplan structure, as approved by the Board in Dec 2021, envisages structuring PMNCH operations according to the three functional areas of Knowledge Synthesis, Partner Engagement, and Campaigns & Outreach. Work within these functional areas is directed at meeting the Results Framework's Outputs, Short-Term Outcomes, and Intermediate Outcomes.

2. Principles underpinning the workplan

The workplan was developed adhering to the following principles and criteria:

- **PMNCH's Theory of Change – Securing Commitments to prioritize women, children and adolescents.** PMNCH's workplan articulates the activities and processes that implement the updated Theory of Change, as reflected in the PMNCH's 2021 to 2025 Results Framework. Each proposed deliverable – and all coherently working together – supports PMNCH's efforts in influencing governments, as well as regional and global bodies, to make new policy, financing and / or service-related commitments to prioritize women's, children's and adolescents' (WCA) health and well-being.
- **Partner-led, partner-centric, and PMNCH-branded.** Activities included in the workplan have been conceptualized, developed, and led by partners, and their value derives from the fact that they are delivered in partnership – through PMNCH – rather than by any one entity alone. Activities undertaken by PMNCH partners on their own accord are not included in the workplan.
- **Focused and contextualized within the available budget.** PMNCH's approved Essential budget has been set at US$ 10 million and Comprehensive at US$ 15 million per year, with intensive resource mobilization efforts underway to secure resources to meet these budgetary plans. In the context of national and global needs to support women's, children's and adolescents' health and wellbeing, this is a relatively modest but important, catalysing, contribution. This makes it very important for the workplan to focus on a limited number of most impactful activities, whose delivery will empower and facilitate partners in the context of the Theory of Change.
- **Measurable and transparent.** The workplan strives to be measurable and transparent. The aim is to have a workplan, whose implementation is possible monitor and measure, through reasonable investment.

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- **Rolling two-year workplan.** It is suggested that PMNCH starts operating on a rolling two-year workplan basis, with the proposed workplan intended to summarize what PMNCH will do in 2022-23 calendar years. Aspects of the proposed content build on our work in 2021, whilst the 'rolling' nature of the workplan will reflect 2022 and 2023 contributions to what we do in future years as part of our collective effort to implement PMNCH's 2021 to 2025 Strategy, through our Results Framework. The two-year workplan will also then align with the current WHO's (as PMNCH's host agency) biennial work planning cycle.

3. Content development

The content of the workplan reflects the direction provided by PMNCH's Board, both in terms of the strategic advocacy priorities and how these may be implemented, as set out in the decisions from its meeting in Dec 2021.

In this context, draft deliverables in this plan have been derived from the following sources:

- Board decisions on flagship deliverables, as presented and agreed upon at PMNCH's Dec 2021 Board meeting;[1]
- Presentations and discussions at the July and Dec 2021 Board meeting, which elaborated on several important themes and products, reflecting partner consultations;
- Committee, working group and constituency led discussions on priorities and opportunities for PMNCH in 2022 and 2023, including in relation to our three strategic goals – reducing preventable maternal, newborn and child mortality including stillbirths; SRHR; and adolescent health and well-being;
- Ongoing efforts from 2021, including those earmarked for funding through existing grants.

Proposed deliverables are grouped in the three agreed functional areas. They all work together in a synchronized manner to enable partners to achieve the objectives of PMNCH's Theory of Change, as follows:

- **Knowledge synthesis.** This functional area includes deliverables that synthesize and translate knowledge and evidence for advocacy and influencing purposes, tailored to need and audience demand, such as digital toolkits, compendiums policy briefs, reports, articles, etc. PMNCH itself does not produce original scientific evidence, but rather promotes alignment and consensus among partners on evidence-based messaging, as well as adapting and translating policy-relevant evidence into tools fit for advocacy purposes.
- **Partner engagement.** The deliverables in this functional area seek to strengthen the ability of partners to engage effectively in advocating for greater financing, policy and service delivery commitments. Deliverables focus on capacity strengthening of constituencies and partners to

[1] Four goals for 2022 were approved by the PMNCH Board, at its meeting in Dec 2021: (i) sustaining focus on the 7 asks of the Covid Call to Action, with special attention to asks 1, 2 , 3, 4 and 7 (prevention of violence); (ii) WCA in Universal Health Coverage (UHC) processes; (iii) adolescent health and well-being, including its relationship to SRHR, mental health and climate change; and (iv) reducing preventable maternal and newborn deaths, including stillbirths.

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advocate, align and network more powerfully together – this is intended to be done through workshops, webinars, digital platforms, and promoting inclusive and participatory membership in PMNCH.

- **Campaigns & Outreach.** The deliverables in this functional area focus on supporting the development, implementation, and partner participation in PMNCH campaigns to amplify key goals and messages. Outputs include public events, media materials and engagement, and campaign mobilization processes.

Each deliverable included in the workplan will have both **thematic and functional attributes.** So, while the primary structure for the workplan is function-based, each deliverable will also contribute explicitly to one or more of the PMNCH's overarching goals of preventable MNC and stillbirths, SRHR and/or adolescent health and well-being.

Finally, moving forward to implementation, each if the workplan deliverables will be led by one of the existing PMNCH committees and working groups. Deliverable leads will be responsible for: (i) articulating action plans, including sub-products, timelines and recommended inputs; (ii) convening partners from across different constituencies, working groups and committees to carry out these plans; and (iii) reporting on progress to the Executive Committee and onward to the Board. This process will be supported and facilitated by the Secretariat.

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Intermediate Outcome *As a result of strengthened PMNCH member capacity, governments as well as regional and global bodies make new policy, financing and/or service-related commitments to prioritize women's, children's and adolescents' health and well-being*			
Short-term Outcomes	Outputs	Deliverable	Coordinating structure
Knowledge synthesis			
Increased knowledge for advocacy by PMNCH members	Evidence products synthesized and/or developed	1.1 **Economic analyses** setting out the case for increased and better (more equitable) investments in / financing and cost of inaction for WCAH (e.g., digital compendium on existing or upcoming economic analyses / investment cases, including for MNCH, SRHR and adolescent well-being, etc.).	KEWG
		1.2 Resources to support embedding WCA health and well-being (including MNCH, SRHR, and AH services) into **UHC/PHC plans** (e.g., the adaptation of the WHO's UHC Compendium into user-friendly formats).	KEWG
		1.3 Monitoring of trends and **accountability** evidence (e.g., progress reports, etc.) and production of digitally accessible resources (e.g., reports, accountability compendium, briefs and assets, etc.) related to WCA, including progress evidence on COVID-19 related commitments.	AccWG
		1.4 Digital compendium of **resources** and evidence-based messaging **on the impact of COVID-19 on WCA** (inc. gender-based violence, mental health, etc.) and mitigating strategies.	KEWG
		1.5 Knowledge documenting community and **people's voices and lived experience** related to WCA health and well-being (e.g., reports, briefs, digital assets, etc.).	KEWG
		1.6 **Knowledge resources** to advance on Board priorities within the overall PMNCH thematic areas: **MNCH** (e.g., preterm and stillbirths, etc.); **SRHR** (e.g., sexual and gender-based violence, etc.); and **adolescent** health and well-being (e.g., climate change, mental health, etc.).	KEWG
Partner Engagement			
Increased advocacy skills and networks among PMNCH members	Coalitions strengthened and partners' capacity built	2.1 Establishment of the **Global Leaders Network** for high-level engagement and advocacy for WCA health and well-being.	SAC & PECC
		2.2 **Strengthen capacity and support to constituencies and partners** to mobilize and implement Call to Action commitments (e.g., strengthening MSPs, engaging UNRCs, engaging parliaments, working with youth led organizations, collaboration with the private sector, etc.).	PECC
		2.3 Constituency and partner **capacity building** for enhanced policy advocacy through purpose-built learning and training (e.g., webinars, workshops, professional development programmes, etc.).	PECC

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		2.4 Creation of **PMNCH Digital Advocacy Hubs** to support partner engagement and knowledge sharing, capacity building and joint action.	GEC
		2.5 Inclusive **participation of partners in PMNCH structures**, including completing the governance reform and ensuring more effective member engagement and good governance more broadly (e.g., Good Governance work; MAYE, etc.)	GEC
Campaigns & Outreach			
Increased advocacy campaigns participation by PMNCH members	Advocacy campaigns organized and delivered	3.1 Development of **Global Forum on Adolescents (2023)** structure, programme and digital communication approaches.	SAC
		3.2 PMNCH **organized global, virtual, events**, including Lives in the Balance 4 e-summit, UN High Level Political Forum accountability dialogue, and annual Accountability Breakfast.	AccWG
		3.3 PMNCH **participation in selected global and regional events** (e.g., regional forums on sustainable development, CSW, ICFP, G7 / 20, COP 27, IPU Assemblies, African Union engagement, etc.).	SAC
		3.4 **Mobilizing** for greater commitments to PMNCH campaign asks, including the COVID-19 Call to Action (especially Asks 1, 2, 3, 4 and 7) and the #Adolescents2030 campaign.	SAC
		3.5 **Digital and earned media products** supporting PMNCH's 2022 Goals (e.g., commentaries, blogs, podcasts, videos, interviews, statements, etc.).	SAC