



# Operationalizing The Partnership's Approach to Country Support





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While engaged in global advocacy and action to increase political commitment and resources to support achievement of MDGs 4 and 5, The Partnership recognizes that these global goals will actually be achieved through the efforts of individual countries. Therefore, the objective of the Partnership's country support activities is to serve a catalytic function, helping governments and their partners focus and coordinate available resources and other inputs in order to accelerate progress in improving maternal, newborn, and child survival and health, as well as to help generate additional resources when existing resources are already being effectively applied.

The approach laid out in this document represents a set of actions for which there is substantial consensus regarding their value in such strategically coordinated efforts. The Partnership will assist in putting in place or strengthening any of these elements that countries and partners believe will contribute to greater effectiveness of programs and investment. Where these elements are already in place, the Partnership will work with countries and partners to maintain momentum and seek additional resources. The Partnership, however, does not mandate any specific process, and offers its assistance to all countries in ways that will contribute to improved maternal, newborn, and child survival and health.



## ONE

### The Partnership recommended elements for countries to accelerate progress towards MDGs 4 & 5

1. A coordination mechanism, led by government, involving a broad range of relevant in-country partners including multilateral agencies, bilateral donors, international and in-country NGOs, professional associations, key academics, and others.
2. MNCH plan, based on the continuum of care with appropriate phasing, for accelerated scale up of key interventions, that fits within the country's health sector development plan and broader investment frameworks, such as the PRSP.
3. Alignment with the plan of available national, sub-national, and partner budget allocations and resources.
4. Identification of major non-financial human resource and health systems constraints on MNCH scale up.
5. Implementation of the plan, within the existing funding envelope.
6. Costing of the MNCH plan, mapping of available government and partner resources for MNCH, and identification of the funding gap in relation to achievement of MDGs 4 & 5.
7. Establishment of monitoring and periodic annual or biennial political-level review of resource allocation and of MNCH progress on internationally-recognized outcome-level indicators.

In accordance with its capacity, initially with a limited number of countries, The Partnership will assist countries in establishing and strengthening these elements.

When these elements are in place, the Partnership will use this status as a basis for working with the country and partners to seek additional funding to respond to the funding gap. This advocacy will include two dimensions:

- a. advocacy to senior levels of partner organizations already engaged in the country to maximize their commitment and MNCH allocations for that country, and
- b. advocacy to other organizations and the broader international community to generate additional sources of MNCH funding for the country.

For countries where The Partnership is directly engaged, the Partnership can provide:

- technical assistance
- engagement of national political leadership,
- tools for planning and priority setting and support for their application, if needed
- assistance in establishing appropriate monitoring and evaluation approaches and indicators
- catalytic funding for critical activities that are not able to be supported by government or individual partners

For costing, The Partnership is working on developing international consensus on appropriate tools for MNCH costing and resource mapping. These tools, once developed, will be made available to all countries, with recommendations regarding the appropriate use of each one.

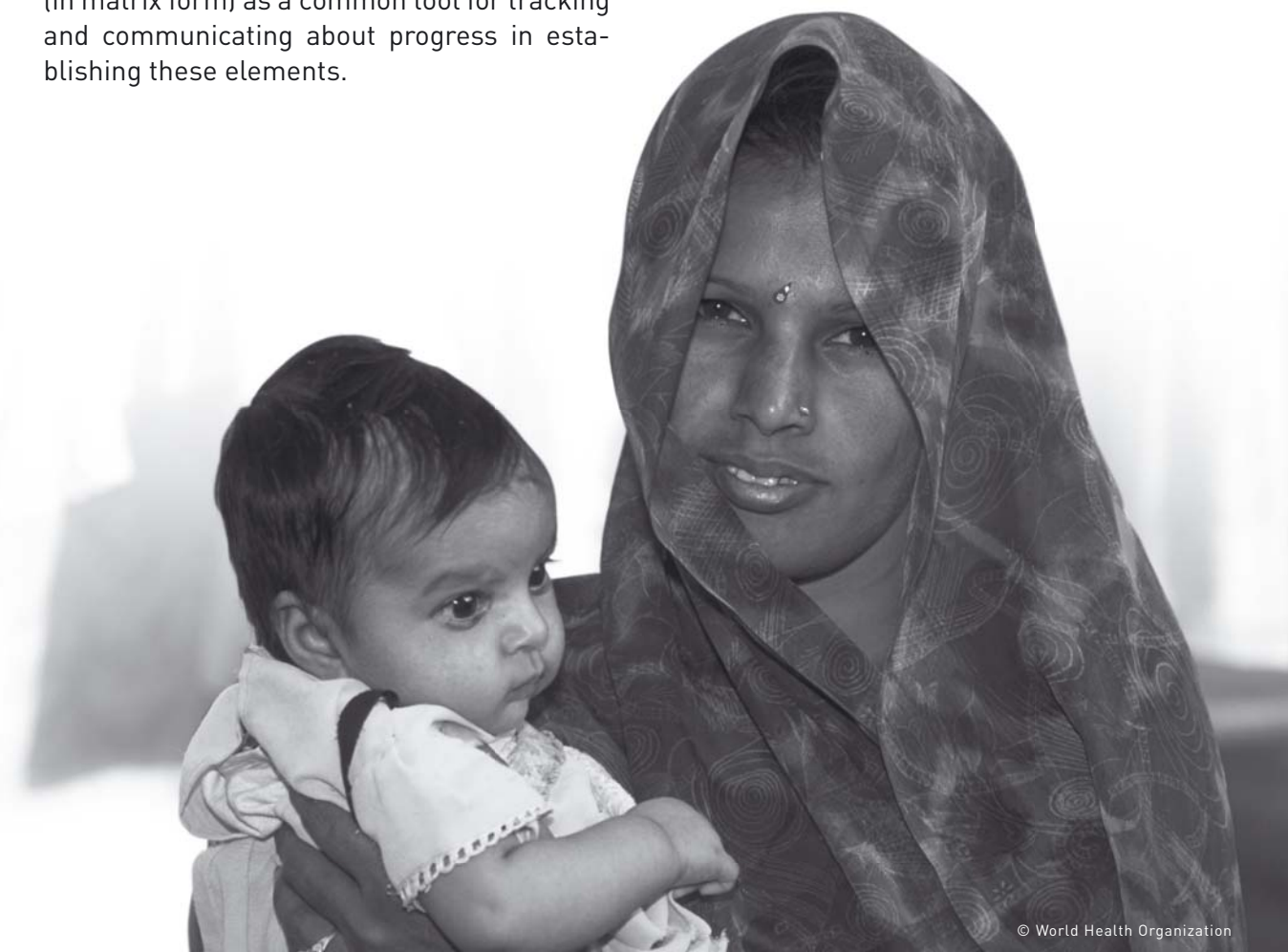
Countries for which The Partnership support is not yet available can work to put in place as many of these elements as possible - if desired, in communication with The Partnership Secretariat and partners.

As The Partnership engages with countries, it will enter discussions with government and partners, possibly including visits, to identify elements that are already fully in place, and inputs The Partnership might provide to establish or strengthen additional elements.

## TWO

### Establishing the approach with partners and countries

1. This statement of elements will be used as a basis for planning and communication of Partnership country support activities. To make this operational, the statement will be:
  - Provided on The Partnership website;
  - Disseminated to all countries that inquire about The Partnership membership;
  - Disseminated to all partners at headquarters level with the request that they disseminate them to their relevant technical, regional, and country offices;
  - Disseminated through partner bulletins and publications
  - For countries where The Partnership is directly engaged, provided to government authorities and in-country partner organizations and used (in matrix form) as a common tool for tracking and communicating about progress in establishing these elements.
2. This statement will also serve as the basis for a proposal to OECD/DAC that The Partnership be the lead mechanism to promote the acceleration and harmonization of activities aimed at MDGs 4 and 5, in accordance with the principles developed by the High Level Forum.
3. The statement will also serve for The Partnership to approach other institutions, e.g. Foundations, development Banks, private sector entities, etc., to influence their support to a wide range of countries





## THREE

# The Partnership inputs to support each element of the approach

A coordination mechanism, led by government, involving a broad range of relevant in-country partners including multilateral agencies, bilateral donors, international and in-country NGOs, professional associations, key academics, and others:

- help develop consensus on which coordination mechanism existing at country level can be formally designated for MNCH coordination, within the context of overall health sector coordination, and strengthened to ensure effectiveness and a balanced MNCH approach, and linked to national planning process
- establish communication channels between the government, the country MNCH coordination mechanism and The Partnership Secretariat (potentially through a lead partner or The Partnership focal person).
- Review periodically the effectiveness of the coordination process, with government and partners.

An MNCH plan based on the continuum of care for accelerated scale-up of key interventions, with appropriate phasing. The plan should fit within the country's health sector development plan and broader investment frameworks, such as the PRSP:

- review of existing analyses, plans, and strategies, using the continuum of care framework, with a view to building on these
- support for situation analyses and analytical processes, where gaps exist
- technical support to assist countries to draw upon the evidence base from the Lancet series and other objective analyses of MNCH interventions and delivery approaches

- acting as 'honest broker' to develop consensus on interventions, delivery strategies, and development of action plans
- through high-level participation, development of political connections needed to link the MNCH plans to national investment strategies.

Alignment with the plan of available national, sub-national, and partner budget allocations and resources

- Review periodically the effectiveness of the coordination process, with government and partners.
- Assistance to governments and partners for mapping and review of existing MNCH investments
- Participation in discussions with government and partners (at HQ, regional, and country levels) of options for redirection of agreements and investments, to take into account updated plans for MDGs 4 and 5
- Participation in discussions with GAVI, Global Fund, and other initiatives to discuss possibilities for alignment



Identification of major non-financial human resource and health systems constraints on MNCH scale up

- Participate in and help support assessments of systems and human resource constraints (building upon existing assessments, including any done for "Health System Strengthening" funding from GAVI and GFATM, or helping to use these MNCH assessments in the development of such HSS funding proposals).
- Participate in country-level and global discussions to connect donor and government resources for system strengthening and capacity building with achievement of key MNCH outcomes.
- Support identification and exchange of good practices and feasible approaches to overcoming system and human resource constraints.

Implementation of the plan, within the existing funding envelope

- [The Partnership will not be directly engaged in implementation, which is the province of national and local government, supported by in-country partners. However, The Partnership can support selected "catalytic" activities such as targeted evaluations, operations research, and experience-sharing workshops when it is politically or financially appropriate.]

Costing of the MNCH plan, mapping of available government and partner resources for MNCH, and identification of the funding gap in relation to achievement of MDGs 4 & 5

- Organize consensus on costing approaches and tools
- Mapping of professionals in different partner organizations and other institutions able to assist countries with costing and funding analyses
- Updating of their skills, and orientation to consensus tools and how to use them
- Identification of experts available for each region/ sub-region/ country and resources to support their participation in country work
- Make experts available to countries to assist in the application of tools and the implementation of costing and resource mapping activities

Establishment of monitoring and periodic annual or biennial political-level review of resource allocation and of MNCH progress on internationally-recognized outcome-level indicators

- Participate in discussions to establish the appropriate indicators and feasible approaches to their monitoring (working with governments in initiatives, e.g. Health Metrics, IMMPACT, etc.
- Assist with reaching agreement on approaches to resource monitoring
- Work with governments and their MNCH coordination mechanisms to use monitoring information to assess and improve progress in each country
- Facilitate and participate with stakeholders in periodic formal progress reviews, helping to ensure high-level participation by partners and government





**THE PARTNERSHIP**  
For Maternal, Newborn & Child Health



**World Health  
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