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Overview of PMNCH-IPU Collaboration

Background

About PMNCH

The Partnership for Maternal, Newborn & Child Health (PMNCH) is the world's largest advocacy alliance committed to protecting and promoting the health, well-being and rights of women, children and adolescents. No other partnership has PMNCH's breadth, depth and diversity. We bring together 1400+ partners from 10 constituency groups (Figure 1; IPU is part of PMNCH's Intergovernmental Organizations Constituency) representing 192 countries. From governments to private sector businesses, from healthcare professionals to grassroots activists: our work connects the smallest village to the United Nations General Assembly, while bringing people to the forefront of global efforts.

PMNCH provides a multistakeholder platform allowing these diverse organizations to align objectives, strategies and resources, and to amplify evidence for action to support the attainment of the Sustainable Development Goals (SDGs), including through universal health coverage (UHC) and primary health care. Through its unique convening power, PMNCH enables members to deliver collectively more than each could deliver alone.

PMNCH's vision is a world in which every woman, child and adolescent realizes their right to health and well-being, leaving no one behind. Our mission is to mobilize, align and amplify the voices of partners to advocate for the health, well-being and rights of women, children and adolescents, particularly the most vulnerable.

With advocacy as PMNCH's core function — supported by knowledge synthesis, partner engagement, campaigns and outreach — PMNCH mobilizes and resources its partners to seek changes in policy, financing and services for women, children and adolescents, and to hold each other accountable for delivering on our promises.

PMNCH's work concentrates on three areas: maternal, newborn and child health; sexual and reproductive health and rights; and adolescent health and well-being, to cover the continuum of care, addressing different levels of health services throughout the life course, and spanning all life phases. They also extend beyond the health sector to address the broader determinants of health.

PMNCH-IPU Partnership

PMNCH and IPU are united by the shared need to respond to 5 key global trends shaping the developmental landscape (based on IPU'S 2022-2026 strategy) - climate change threat; growing social & economic inequalities; need to improve connectedness between parliaments and their constituencies and need to address regression in human rights and development achievements. IPU and PMNCH are committed to ensuring that national parliaments play a critical role in improving WCAH at the national, regional and global levels through their key prerogatives of legislation, budgeting, oversight and representation.





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Strategic synergies

PMNCH collaboration with IPU is currently based on two of the IPU's 5 strategic objectives: SO1 - Building effective and empowered parliaments and SO 4 - Catalyzing collective parliamentary action — with a specific focus on strengthening parliamentary institutions and enhancing parliamentary engagement at the national and international level for better WCAH outcomes.

Specific areas of collaboration

- 1. Strengthening political commitment and action on women's, children's, and adolescents' health (High-level engagement)
- 2. Mobilizing parliaments to use core functions of legislation, budget, oversight, and representation to protect, promote and prioritize the health and rights of women, children, and adolescents (Constituency mobilization)
- 3. Making parliaments more responsive to the health needs and rights of women, children, and adolescents (Community engagement)
- 4. Contribute to accountability for the implementation of commitments on women's, children's, and adolescents' health at the national level (Accountability)

Ways of working

Cooperation between the IPU and PMNCH takes place at the political level through the IPU Advisory Group on Health (to which PMNCH is a technical partner) and the PMNCH Board as well as operationally through a series of cooperation and funding agreements.

- Bilateral technical support on WCAH to national parliaments on the areas mentioned above
 - Collaborative Advocacy Action Plan countries Ethiopia, Kenya, Liberia,
 Nigeria, Malawi, Sierra Leone, Senegal, South Africa, Tanzania, Zambia,
 - Adolescent Well-Being commitment making countries including Botswana, Canada, Congo, Ghana, Ethiopia, Liberia, Malawi, Namibia, Nigeria, Portugal
- Support to parliaments collaboratively with IPU secretariat Malawi and Zambia
- Collaboration with regional parliaments to catalyze support to national parliaments EALA proposed.

Tools and resources

To advance the above objectives, PMNCH offers the following tools and resources to parliamentarians to ensure that they are able to exercise their constitutional powers to give visibility to WCAH issues in national policies and investments.

- Investment case studies
- Advocacy Briefs
- Training modules
- Introductions and facilitation





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Key Milestones

The partnership between the IPU and PMNCH which commenced in 2008 has resulted in key milestones including the passage of 3 IPU resolutions on WCAH.

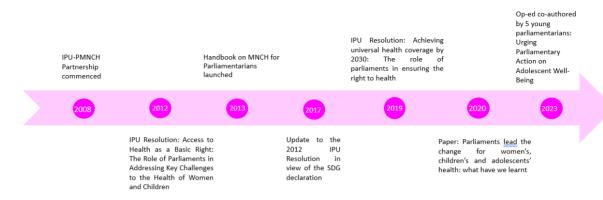


Figure 2: Key milestones of the PMNCH-IPU Collaboration