Reaching 
Every Woman
and Every Child
through Partnership
Working together to improve the health of women and children

Graça Machel
Board Chair, The Partnership

There is now clear and powerful momentum to improve the health and well-being of women and children. As never before, all partners are aligning their efforts, making commitments and delivering on promises.

As the Chair of the Board for The Partnership for Maternal, Newborn & Child Health, I am committed to working with all our partners to ensure that efforts to improve sexual, reproductive, maternal, newborn, child and adolescent health outcomes are in line with the evidence. Collaboration is key to advancing our agenda. Concerted action increases impact, efficiency and accountability. As the world becomes more interdependent, our response to issues has to be integrated as well. The Partnership is an excellent example of this collaboration.

Today, there is no reason why the act of giving life should lead to death. We are all affected by these losses. As a woman, mother and grandmother watching the next generations grow, struggle and thrive, I cannot help but feel deeply our joint responsibility to make change happen and take the necessary action to improve the lives of the most vulnerable people.

It is an honour to serve as The Partnership’s new board chair, and I offer my gratitude to my board member colleagues, the secretariat and all the partners working at the global, regional and country level for their unceasing commitment to development and women’s and children’s health.

I am certain that if we continue to work together, we can all make a difference.

Carole Presern
Executive Director, The Partnership

Since our start in 2005, The Partnership for Maternal, Newborn & Child Health has grown to include more than 500 partners from around the world – nearly half of those joining since 2011, reflecting growing momentum at all levels. We work together to accelerate progress, identify challenges and opportunities to strengthen coordination and accountability among partners. We are making progress, but the majority of developing countries are still expected to fall short of the United Nations Millennium Development Goal targets for reducing maternal and child mortality by 2015.

That dry-sounding phrase “falling short of targets” translates to the deaths of nearly 20,000 children under five every day – 40% of them in the first month of life, and the deaths of more than 700 women each day in pregnancy and childbirth. And the targets don’t even include stillbirths, a staggering 7,200 per day, 2.6 million annually.

We stand together with our partners to secure results. Lives depend on it.
The Partnership for Maternal, Newborn & Child Health

The Partnership (PMNCH) joins the reproductive, maternal, newborn and child health (RMNCH) communities into an alliance of more than 500 members, across seven constituencies: academic, research and teaching institutions; donors and foundations; health-care professionals; multilateral agencies; non-governmental organizations; partner countries; and the private sector. Working together our goal is a world in which all women, newborns, children and adolescents not only are healthy, but thrive.

Vision
The achievement of the United Nations Millennium Development Goals 4 and 5, to reduce child mortality and improve maternal health, with women and children enabled to realize their right to the highest attainable standard of health in the years to 2015 and beyond.

Mission
Supporting partners to align their strategic directions and catalyze collective action to achieve universal access to comprehensive, high-quality reproductive, maternal, newborn and child health care.

Added Value
To be an institutional platform bringing together and enhancing the interaction of partners focused on improving the health of women and children, working across the reproductive, maternal, newborn and child health continuum of care. In essence, The Partnership enables members to share strategies, align objectives and resources, and agree on interventions to achieve more together than they would have been able to achieve individually.
The Partnership: a platform for knowledge, advocacy and accountability to improve women’s and children’s health

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The Partnership plays a central role in facilitating joint action on many fronts, mainly progress towards the United Nations Millennium Development Goals (MDGs) 4 and 5, to reduce child mortality and improve maternal health, as tracked by the Countdown to 2015 initiative, and through support for the Global Strategy for Women’s and Children’s Health and Every Woman Every Child.

MDGs and the Countdown to 2015
Tracking progress of countries towards the achievement of MDG 4 and 5 is critical to the work of The Partnership and its members.

The secretariat of the Countdown to 2015 initiative is hosted by The Partnership. Based on data and analysis from each of the 75 countries that account for more than 95% of the global burden of maternal and child mortality, Countdown seeks to boost national and global progress, improve equity and foster greater accountability.

Innovating for change
The Innovation Working Group (IWG) was created in 2010 to harness the power of innovation to accelerate progress towards achieving the health MDGs. The IWG catalyzes initiation and enables the scaling of innovations across technological, social, financial, policy and business domains. The IWG continues to pursue leadership in supporting collaborative efforts among multiple stakeholders.

“With the launch of the Global Strategy for Women’s and Children’s Health, we have an opportunity to improve the health of hundreds of millions of women and children around the world, and in so doing, to improve the lives of all people.”
- United Nations Secretary-General Ban Ki-moon
The Global Strategy for Women’s and Children’s Health and Every Woman Every Child

Launched by United Nations Secretary-General Ban Ki-moon during the UN Millennium Development Goals Summit in September 2010, the Global Strategy calls on all stakeholders to work together to save the lives of 16 million women and children by 2015.

Under the auspices of the Global Strategy, the Every Woman Every Child effort was created to spur commitments to policies and programs that address major health issues facing women and children. In 2011, the Commission on Information and Accountability for Women’s and Children’s Health (CoIA) was formed to strengthen global reporting, oversight and accountability for women’s and children’s health.

As a platform for joint action, The Partnership issues annual reports on progress of commitments from more than 250 stakeholders. For instance, The Partnership estimates that the Global Strategy has leveraged about US$20 billion in new and additional money to women’s and children’s health.

Public-private partnership for life-saving health care

Every Woman Every Child brings together stakeholders from the private sector, academia, global health community and civil society to innovate and advance the cause of women’s and children’s health.

As one example of the power of partnership, UNFPA and Intel have joined forces to strengthen skills of midwives and community health workers through technology and training. This innovative collaboration will increase the capacity of health workers around the world through software and technical assistance provided by Intel, with content and training developed by UNFPA in partnership with governments, professional and partner organizations working nationally and globally. This initiative has been created with a view to reduce the number of pregnancy- and childbirth-related deaths across the world.
The Partnership’s strategic objectives

The Partnership’s work is based on three key priorities supporting all partners to achieve better outcomes for women and children in high-burden countries.

In achieving these objectives, The Partnership structures its activities around four operational principles:

1. Being **partner-centric**, by supporting partners to deliver The Partnership’s objectives, without replacing or replicating partners’ work or their internal governance/accountability processes;

2. Focusing on **convening** by providing a platform for partners to discuss and agree on ways to align their existing and new activities; focus on **brokering** by actively facilitating knowledge, innovations, collaborations, etc. among its members;

3. Being driven by **country demand** and **regional priorities**; and

4. Promoting the **continuum of care** approach to improve women’s and children’s health.

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<th>Knowledge</th>
<th>Advocacy</th>
<th>Accountability</th>
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<td>Increase access to and use of knowledge and innovations to enhance policy, service delivery and financing mechanisms, addressing key constraints to universal access to high-quality reproductive, maternal, newborn and child health care in high-burden countries.</td>
<td>Identify and mobilize additional resources for RMNCH through partner engagement and by maintaining visibility of women’s and children’s health issues in policy and development forums. Promote consensus on evidence-based policy development and implementation (including strategic priorities and alignment of resources).</td>
<td>Promote accountability for resources and results, leading to better information to monitor RMNCH results, as well as better and more systematic tracking of how resource commitments are actually allocated.</td>
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Evidence shows that an effective continuum of care, which includes interventions from adolescence through pregnancy, the postnatal period, and through to the age of five, is essential to the well-being of this and the next generation across all countries.

Continuous care across life stages and from home to hospital is crucial for reproductive, maternal, newborn and child health (RMNCH). It takes on even greater significance because a child’s health is closely linked to the mother’s from conception through to birth and beyond.

While there has been progress in expanding and improving RMNCH services in the past decade, significant gaps remain, particularly around the time of birth and the home-to-hospital continuum.

Governments, donors, business communities and civil society must work together to ensure these gaps are addressed and efforts to strengthen the continuum of care across all life stages are kept front and centre in achieving MDGs 4 and 5 by 2015, and beyond as the post-MDG framework is implemented.
There has been a substantial decline in maternal mortality in the past two decades: the estimated number of women who die in pregnancy or childbirth has dropped globally nearly 50% since 1990. However, for every woman who dies, approximately 20 others suffer injuries, infections and disabilities.

Most (56%) of maternal deaths are still concentrated in sub-Saharan Africa, where disparities in access to care and health services are most acute.

Child mortality declines

We are making remarkable progress in reducing child deaths after the neonatal period, with mortality rates among older children dropping about 3% per year in the last decade. Yet newborn survival has lagged behind, at a yearly reduction rate of less than 2% accounting for more than 40% of the number of children under five dying every day. We know that these deaths can be prevented using effective and affordable interventions.

PMNCH key achievements

Since its launch in 2005, The Partnership has played a leading role in increasing the profile of, and progress towards improved RMNCH. Some significant achievements include:

Brokering KNOWLEDGE and INNOVATION for action

▪ “Essential Interventions, Commodities and Guidelines for Reproductive, Maternal, Newborn and Child Health” (WHO, Aga Khan University and PMNCH), is the first-ever global consensus on the most critical life-saving commodities and services for the world’s most vulnerable women and children;
▪ Producing a series of knowledge summaries highlighting topics relevant to RMNCH to support advocacy, policy and practice to improve women’s and children’s health.

ADVOCACY to mobilize and align resources

▪ Acting as the platform for the development of the Global Strategy for Women’s and Children’s Health, and as a key partner in the mobilizing of more than 250 financial, policy and service delivery commitments through the Every Woman Every Child effort;
▪ Collaborating with the International Parliamentary Union (IPU) and the Pan African Parliament in the development of important resolutions to prioritize policy and budget action to improve women’s and children’s health.

Promoting ACCOUNTABILITY for resources and results

▪ Producing annual reports on the implementation of commitments to Every Woman Every Child, informing the work of the independent Expert Review Group;
▪ Collaborating with the United Nations High Commissioner for Human Rights and the Human Rights Council in the development of technical guidance on the application of a human rights-based approach to the implementation of policies and programmes to reduce preventable maternal morbidity and mortality.
Leading up to 2015 and beyond: key opportunities for PMNCH

The Partnership’s Strategic Framework for 2012-2015 calls on partners to accelerate progress towards MDGs 4 and 5, as well as addressing MDG 6 (HIV, TB and malaria). At the same time, The Partnership is working to ensure that the health of women and children remains high on the post-2015 agenda.

KNOWLEDGE and INNOVATION
The Partnership will support increased and improved coverage and implementation of essential interventions for women’s and children’s health (in priority countries) by:

▪ Promoting implementation of essential interventions using a multi-stakeholder approach;

▪ Identifying success factors from countries that have accelerated progress to reduce preventable maternal and child mortality.

ADVOCACY
The Partnership will seek to achieve and maintain the highest possible political commitment to women’s and children’s health in the years to 2015 and beyond by:

▪ Developing and facilitating partner-based advocacy work, linking action to key policy moments to ensure women’s and children’s health remains a global and regional priority in the post-2015 development framework;

▪ Engaging media, parliamentarians and civil society to create sustained interest and accountability around RMNCH issues.

ACCOUNTABILITY
The Partnership will promote accountability on progress, commitments and process by:

▪ Maintaining a forum for discussion and political dialogue on financing mechanisms and gaps across the continuum of care;

▪ Working with the Commission on Information and Accountability to ensure the Every Woman Every Child commitments are implemented, and recommendations of the Commission are reported and carried forward.

PARTNERSHIPS and the PRIVATE SECTOR
The Partnership will strengthen partner engagement and alignment nationally, regionally and globally by:

▪ Developing relevant messaging for our private sector constituency and facilitating campaigns related to private-sector participation in women’s and children’s health issues;

▪ Encouraging stronger coordination within our multi-stakeholder partner platform and advocacy network.
PMNCH supported publications

The Partnership produces a wide range of publications, such as knowledge summaries on issues related to RMNCH, annual reports on progress towards achieving the Global Strategy/Every Woman Every Child commitments, and Countdown to 2015 progress reports.

These and all PMNCH publications are available at: http://www.who.int/pmnch/topics/en/
Funding The Partnership’s work

Over the years, our partners have channeled a proportion of their spending to improve the health of women and children through The Partnership. This has been reflected in the ongoing increases in The Partnership’s annual budget, rising from US$ 5.86m in 2009 to US$ 14.74m in 2013.

Multi-year, non-specified funding, which supports the workplan as a whole, is becoming the norm, with most donors (who are institutionally able) providing their support in this manner.

Since 2009, The Partnership has received funding from a number of donors. These have included the governments of Australia, Canada, Germany, Italy, the Netherlands, Norway, Sweden, the United Kingdom and the United States of America; the Bill and Melinda Gates Foundation and the MacArthur Foundation; as well as the World Bank and the Commission on Information and Accountability. Partners have also committed in-kind resources (e.g., staff time), and/or are in the process of approving funding arrangements.
For more information:

PMNCH:  
www.pmnch.org

Every Woman Every Child initiative:  
www.everywomaneverychild.org

Countdown 2015:  
www.countdown2015mnch.org

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