

UNFPA Management Response to MHTF Mid-term Evaluation Phase-III-2018-2022

Evaluation Report Issue Date	Evaluation report tag [choose 1 from the list below]: 1. Country Programme Evaluation (CPE) 2. Regional Programme Evaluation (RPE) 3. Programme Level Evaluation (non CPE or RPE evaluations) 4. DAO (Delivering as One) Evaluation 5. UNDAF Evaluation 6. Humanitarian Evaluation 7. Meta-Evaluation 8. Evaluation Approach Paper 9. Evaluability Assessment	Additional attributes [(Joint ,impact or institutional)]	UNFPA Business Units Responsible for implementation	Heads of Responsible Business Units Final approvers	Responsible Unit Managing/Coordinating Focal Point Hemant Dwivedi, SRHB,TD dwivedi@unfpa.org	Date of submission
22 February 2022	Programme Level Evaluation	Institutional	TD, ESARO, WCARO, EECARO, APRO, LACRO, ASRO, Country Offices	Pio Smith, OED Julitta Onabanjo, TD Anneka Knutsson, TD	SRHB Hemant Dwivedi dwivedi@unfpa.org	25 March 2022

EVALUATION RECOMMENDATION(S) AND PROPOSED ACTION POINT(S)

[List all recommendations below as they appear in the Evaluation Report]

Recommendation No. 1	Strategic recommendation	Priority: High
	<p>As the key UNFPA vehicle for SRHR-MNH integration and support, continue and expand the MHTF into a new phase.</p> <p>Operational implications:</p> <ul style="list-style-type: none"> • Set the ambition of Phase IV and the expected gap it will fill. Identify why the UNFPA contribution to filling this gap is best wrapped into a global programme approach rather than through routine country budgets. • Develop Phase IV goals, objectives, strategies, targeted partnerships and investments, and expected outcomes (elaborate the new programme) working in collaboration with the Advisory Board and regional and country offices to strengthen buy-in, fundraising and stakeholder engagement. • Develop a revised theory of change to guide Phase IV and ensure it identifies the role and positioning of the MHTF in relation to other UNFPA investments in MNH and the larger landscape of maternal mortality reduction. 	
	Management Response to Recommendation acceptance status <small>[Accepted/Partially Accepted/Rejected]</small>	Accepted
	<i>If recommendation is partially accepted or rejected, provide reasons:</i>	N/A

If recommendation is accepted or partially accepted, list, below, action(s) that will logically lead to its implementation, ideally within a year of the date recommendation was issued					
Action point title	Action point text	Due date (year)	Lead implementing unit [specify <u>only one</u> per action point only]	Lead implementing and reporting staff Owner [specify <u>only one</u> per action point only]	Additional units involved in implementation (if any)
Phase IV of the MHTF will be based on an expanded theory of change that identifies the role and positioning of the MHTF in relation to other UNFPA investments in SRMNH and the larger, global landscape of maternal mortality reduction.	<ul style="list-style-type: none"> Develop a revised theory of change (TOC) or similar to guide the MHTF Phase IV. Identify the MHTF's role vis - à - vis other UNFPA investments in Maternal & Newborn Health and SRMNH along the continuum of care. 	February 2023	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	Technical Division (SRH Branch, CS Branch; gender Branch), Policy and Strategy Division, regional offices, Humanitarian Office, the MHTF Advisory Board
	<ul style="list-style-type: none"> Develop a "white paper" aligned with UNFPA's overall contribution towards SRMNH, Maternal Mortality Reduction and UNFPA's SP 2022-2025. 	February 2023	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	
	<ul style="list-style-type: none"> Develop a MHTF Phase IV business plan which articulates objectives, strategies, strategic partnerships, and investments, and expected outcomes in collaboration with all relevant UNFPA divisions/ branches, regional and country offices teams. 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	

Recommendation No. 2	Strategic recommendation		Priority: High		
	<p>Position the MHTF within a comprehensive UNFPA maternal health strategy and action plan.</p> <p>Operational implications:</p> <ul style="list-style-type: none"> • Develop a comprehensive cross-organizational maternal health strategy and action plan that is clearly situated in relation to the UNFPA organizational strategic plan 2022-2025 and its transformative result of ending preventable maternal deaths. • Identify the MHTF contribution at the organizational level to this maternal health strategy (including roles and responsibilities) as well as contributions from the Supplies Partnership (maternal health commodities) and other thematic funds (Ending Child Marriage, FGM, and the HIV response), humanitarian resource and core funds. • Clarify the role of the MHTF within UNFPA in relation to the maternal health strategy and action plan and in support of the UNFPA transformative result. • Refine and update the MHTF logic chain in the next phase of the programme to reflect its contribution to the organizational maternal health strategy and action plan and its role as co-convenor of the global Ending Preventable Maternal Mortality initiative. 				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]		Accepted			
If recommendation is partially accepted or rejected, provide reasons:		N/A			
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Drawing on the MHTF experience, in anticipation of Phase IV, and in light of the 2022-2025 UNFPA strategic plan, develop a UNFPA organizational-level maternal health strategy and action plan that clearly positions the MHTF and other UNFPA MNH efforts including roles and responsibilities.	<ul style="list-style-type: none"> • Develop a comprehensive cross-organizational Maternal and Newborn Health & Wellbeing* Strategy (including an action plan) aligned with UNFPA’s organizational strategic plan 2022-2025 and its transformative result of ending preventable maternal deaths. Establish a UNFPA Maternal and Newborn Health & Wellbeing Strategy Reference Group. Articulate the role of the MHTF within the corporate Maternal and Newborn Health & Wellbeing Strategy. <p>* Maternal and Newborn Health & Wellbeing entails a broader and more comprehensive approach to the SRHR life course and Women’s Health.</p>	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Anneka Knutsson knutsson@unfpa.org Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org	Technical Division (SRH Branch, CS Branch, Gender Branch, PD Branch), Policy and Strategy Division, Humanitarian Office, regional offices

	<ul style="list-style-type: none"> Build strong synergies between the MHTF, the Ending Preventable Maternal Mortality (EPMM) and Every Newborn Action Plan (ENAP) at global, regional and country level. By building synergies, position the MHTF in the global SRMNAH architecture. 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Jean Pierre Monet monet@unfpa.org Willibald Zeck zeck@unfpa.org	
Recommendation No. 3	Strategic recommendation		Priority: High		
	<p>Champion quality of care at the point of delivery including respectful care.</p> <p>Operational implications:</p> <ul style="list-style-type: none"> In the UNFPA maternal health strategy and action plan (Recommendation 2), identify how UNFPA and the MHTF will contribute to developing and scaling-up knowledge and practice related to systematically delivering high quality, respectful SRHR-MNH care. Articulate programmatic investments to promote quality of care across the MHTF and to position respectful care at the centre of all MHTF technical areas at the strategic level. Develop and integrate an actionable programme model into the MHTF to promote respectful care in practice, especially through EmONC and midwifery (e.g., through the implementation of a midwife-led model of care). In the MHTF ROM system (Recommendation 9), include key performance indicators on community engagement, demand-side quality of care, and measures that track the experience of respectful care (embedding these in EmONC, midwifery, fistula, and MPDSR components more systematically). 				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]		Partially Accepted			
<i>If recommendation is partially accepted or rejected, provide reasons:</i>		There is concurrence on the need to scale up and champion respectful care across the MHTF technical areas. However, systematically addressing respectful care will be challenging given that the assessment and monitoring of experience of care is a rather new public health concept which is still under development globally (such development being lead by WHO) and given the MHTF's rather limited financial resource pool. The MHTF business plan Phase IV will address and incorporate respectful care for SRHR-MNH integrated services but interventions will have to be gradually implemented and outcomes carefully assessed given the above-mentioned, ongoing developments in global / public health.			
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Build global leadership and scale up quality care/ respectful care for SRHR-MNH integrated services.	<ul style="list-style-type: none"> Ensure that quality of care, respectful care, and SRHR-MNH integrated care are incorporated in UNFPA's Maternal and Newborn Health & Wellbeing Strategy and action plan in alignment with UNFPA's SP 2022-2025. 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Anneka Knutsson knutsson@unfpa.org Willibald Zeck zeck@unfpa.org	Regional Offices, Country Offices
	<ul style="list-style-type: none"> Ensure that quality of care, including respectful care, and SRHR-MNH integrated in the MHTF business plan Phase IV. 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Anneka Knutsson knutsson@unfpa.org Willibald Zeck zeck@unfpa.org	
	<ul style="list-style-type: none"> Integrate respectful care for SRHR-MNH integrated services across EmONC health facilities and midwifery interventions (e.g., pre and in - service education etc.). Strengthen partnership around quality-of-care improvement including positive experience of care. 	March 2024	Technical Division (Sexual and Reproductive Health Branch)	Michel Brun brun@unfpa.org Jean Pierre Monet monet@unfpa.org Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org	
Recommendation No. 4	Strategic recommendation		Priority: High /Medium		
	<p>Be more systematic about integrating community engagement across all MHTF activities.</p> <p>Operational implications:</p> <ul style="list-style-type: none"> The UNFPA maternal health strategy and action plan (Recommendation 1) should foresee how to integrate community-facing work across all MHTF dimensions and technical areas to include both supply- and demand-side considerations. Ensure the orientation of the MHTF technical interventions takes better account of the first delay and systematically incorporates community demand and engagement to the greatest extent possible. In particular: <ol style="list-style-type: none"> Broaden the EmONC network approach to include community health and household engagement in decisions to seek care and an increased interface with community-based health workers where relevant Orient midwifery to include community engagement and demand creation for all SRHR–MNH services especially in support of ANC, family planning and fistula prevention Where possible, include communities into MPDSR processes Invest in knowledge building around strengthening community demand for care and health service responsiveness. 				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]		Partially Accepted			

<i>If recommendation is partially accepted or rejected, provide reasons:</i>	There is concurrence on the need for stronger focus on community engagement. The MHTF’s work in this respect is already in process with a push to accelerate. A systematic and comprehensive approach to community engagement that includes community demand interventions and engagement at a very decentralised (household) level will, however, require substantial additional financial investments. At this point, the MHTF would focus its limited financial resources on further strengthening the facility-based care and improve linkages to community level (including community health workers), essentially through midwifery. Based on financial resources available, specific work on demand for care could be done in targeted countries, in collaboration with other UNFPA funding streams and partners. UNFPA has no indication that MHTF donors would be willing or able to increase their financial contribution to the MHTF.
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Shape the MHTF to promote a more structured approach towards community engagement as part of a broader strategy to generate increased demand for timely and accessible MNH services. This reorientation should focus on increasing the timeliness and efficacy of decisions to seek care, to elect to deliver in a health facility, and to participate in death audits/reviews; all linked to improved quality of care.	<ul style="list-style-type: none"> ● Ensure that MHTF technical interventions are oriented towards community demand generation and engagement. <ul style="list-style-type: none"> ○ Broaden the EmONC network approach and include community engagement in decisions to seek care and an increased interface with community-based health workers where possible and financially possible for the MHTF. ○ In the updated midwifery acceleration strategy, strengthen linkages between facility and community level. ○ Invest in strengthening initiatives to prevent, identify and treat obstetric fistula and other morbidities at community level. This will be done through awareness raising and use of digital technology for utilisation of services and timely referrals. 	February 2024	Technical Division (Sexual and Reproductive Health Branch)	Michel Brun brun@unfpa.org Jean Pierre Monet monet@unfpa.org Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org Bridget Asiamah asiamah@unfpa.org	Regional offices, country offices, DCS, MCB, RMB

Recommendation No. 5	Governance recommendation	Priority: Medium
	Engage partners, especially donors, more actively in the MHTF progress. Operational implications:	

	<ul style="list-style-type: none"> Develop revised terms of reference for the Advisory Board, which includes its contribution to shaping the MHTF strategic direction, accountability to its members, and results monitoring roles. Establish an annual calendar of meetings (including the <i>ad hoc</i> participation of specific strategic, technical, or implementing partners). Develop a comprehensive communications strategy (building on <i>The MHTF Wins!</i>) around the role of the MHTF in relation to the UNFPA transformative result on ending preventable maternal deaths, its approach, and results achieved in programme countries. Tools and products should be designed as part of the strategy with tailored messaging to a wide and diverse audience, including key stakeholders (funding partners, other strategic and technical partners, country governments, implementing partners and beneficiaries). 				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]	Accept				
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Invest in the role and functioning of the MHTF Advisory Board to strengthen accountability to funding partners, to increase participation in shaping strategic direction and to support improved communication of results and performance.	<ul style="list-style-type: none"> Establish an annual calendar of meetings that will guide MHTF business plan Phase IV development. Propose a revision of the terms of reference to the Advisory Board. 	January 2023	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org Jean Pierre Monet monet@unfpa.org	DCS, RMB, MCB
	<ul style="list-style-type: none"> Build a communications strategy as a key component of the MHTF business plan Phase IV. Focus will be given to global, regional and country advocacy initiatives and products. 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org Jean Pierre Monet monet@unfpa.org	DCS, RMB, MCB, regional offices and country offices
Recommendation No. 6	Operational recommendation			Priority: High	
	Improve the strategic coherence and responsiveness of the MHTF. Operational implications:				

- Clarify the MHTF working arrangements so that linkages and inter-relationships among the four technical areas are clearer, and their tendency to operate as siloed areas of support is reduced.
- Consider developing an option to enable the MHTF to be more responsive to country priorities. This approach should enable countries to select their technical priority areas among the four MHTF technical areas and to access the MHTF support for further technical areas where relevant.
- Develop an application-based approach to allocate a portion of the MHTF funds with a country office matching arrangement, together with the MHTF brokered partnerships and technical expertise.
- This could be implemented through a range of approaches such as: (a) setting aside a portion of funds to be allocated to a limited number of countries each year through an application process; the process could be based on multi-year grants matched by core funds and/or other country-leveraged funding, or (b) selecting (based on consultation with country offices) a limited number of additional technical areas to focus on for a three to five-year period and accepting applications from countries wishing to work in these areas.

Management Response to Recommendation acceptance status **Accepted**
 [Accepted/Partially Accepted/Rejected]

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Clarify and streamline the linkages among the four technical areas and strengthen their coherence while also enabling more responsiveness to evolving MNH priorities and specific country needs.	<ul style="list-style-type: none"> • In the MHTF business plan Phase IV, specify and articulate linkages and integration across the four technical areas within the MHTF business plan Phase IV. 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Geeta Lal lal@unfpa.org Sarah Bar-Zeev	Regional offices, country offices, PSD
	<ul style="list-style-type: none"> • Within the scope of the MHTF business plan Phase IV, allow country offices to flexibly choose their priority areas from within the business plan. 	February 2024	Technical Division (Sexual and Reproductive Health Branch)	bar-zeev@unfpa.org Bridget Asiamah asiamah@unfpa.org	
	<ul style="list-style-type: none"> • Within the scope of the MHTF business plan Phase IV, develop a workplan format that will require country offices to create linkages with regular resources and overall CP priorities together with the MHTF brokered partnerships and technical expertise (matching arrangement). 	February 2024	Technical Division (Sexual and Reproductive Health Branch)	Michel Brun brun@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	

Recommendation No. 7	Operational recommendation		Priority: High		
	<p>Embed the focus on midwifery and the health workforce environment across the MHTF.</p> <p>Operational implications:</p> <ul style="list-style-type: none"> • ‘Mainstream’ midwifery across all other technical elements of the MHTF, identifying especially how midwifery support contributes to quality of care, respectful care, and community engagement and demand. • Reposition midwifery through analysing and planning more far-reaching interventions to support midwifery in action. For example, consider whether and how to integrate the opportunity triangle analysis model to deepen midwifery inputs and programming more systematically at global and country levels. The opportunity triangle helps to separate out capacity (the skills element) from the incentives affecting decision-making and the motivation needed to apply knowledge consistently, taking account of critical environmental enabling factors, gender dynamics and systems context. Together, these elements reflect the opportunity that health workers must do the right thing, at the right time, in the right way against a backdrop of a specific health system and gender and rights environment. The MHTF could usefully apply this approach to ensure it is investing in ways that sharpen the impact of midwives in practice, taking the MHTF foundation work on midwifery regulation, education, and professionalization to the next level. 				
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Further develop MHTF engagement in and leadership on midwifery and the health workforce environment as a key entry point for MNH. Focus on embedding midwifery into community and primary care and into investments in health systems reforms, including the EmONC network expansion.	<ul style="list-style-type: none"> • Mainstream midwifery across all technical areas of the MHTF. Reflect these efforts in the MHTF business plan Phase IV, in the Maternal and Newborn Health & Wellbeing Strategy and in the updated UNFPA Midwifery Strategy. The elements of quality of care, and community engagement and demand will be specifically addressed. 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org	CSB, GHRB, ROs, Country offices, HO
	<ul style="list-style-type: none"> • Undertake global, regional, and country level advocacy with major partners (e.g., H6, civil society, private sector) for further repositioning quality midwifery care and the creation of an enabling conducive work environment for 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org	

	midwives. Take advantage of upcoming global events like the ICM Triennial Congress, Women Deliver, Align MNH and others.				
	<ul style="list-style-type: none"> Systematically deepen midwifery programme interventions and generate evidence to reposition midwifery within and outside of the organisation (e.g., UNFPA/ UN publications, peer reviewed journal articles etc.). Follow the long-term aim to make midwifery an essential component of health system strengthening processes. 	June 2023	Technical Division (Sexual and Reproductive Health Branch)	Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org	
Recommendation No. 8	Operational recommendation		Priority: High		
	<p>Invest more in MHTF core value-adds: SRHR-MNH integration and promoting catalytic results.</p> <p>Operational implications:</p> <ul style="list-style-type: none"> Develop, regularly update, and share widely with country and regional offices, comprehensive guidance and tools on designing, implementing, measuring, documenting and communicating catalytic interventions under the MHTF programme. Develop, regularly update, and share widely with country and regional offices, guidance on strengthening integration, including approaches to removing gender barriers to integration. In the MHTF ROM system (Recommendation 9), include indicators to track progress on integration and the catalytic effect of interventions across all technical areas. Establish communities of practice to more methodically share lessons learned among country offices to strengthen their investments at an early stage, and to identify potential processes as well as partners. 				
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Develop and promote detailed and actionable guidance for country offices around the core strategies underpinning the MHTF: (i) integration of SRHR-MNH services, and (ii) guidance on planning, achieving and documenting catalytic effects.	<ul style="list-style-type: none"> Through the MHTF business plan Phase IV provide guidance on catalytic measurement mechanisms in line with corporate guidelines and processes to track: <ul style="list-style-type: none"> Articulate clear guidance for regional and country offices for the integration of SRHR and MNH. In all MHTF annual reports, include a dedicated chapter addressing the catalytic impact of the programme. Strengthen existing MNH Communities of Practice within TD’s overall knowledge management efforts. 	February 2024	Technical Division (Sexual and Reproductive Health Branch)	Geeta Lal lal@unfpa.org Bridget Asiamah asiamah@unfpa.org Jean Pierre Monet monet@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org Michel Brun brun@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	CSB, GHRB
	<ul style="list-style-type: none"> In the MHTF ROM system include indicators to track progress on integration and the catalytic effect of interventions. 	February 2024	Technical Division (Sexual and Reproductive Health Branch)	Michel Brun brun@unfpa.org Geeta Lal lal@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	
Recommendation No. 9	Operational recommendation		Priority: High /Medium		
	Refine results monitoring to improve understanding and communication about the MHTF value-added in different contexts. Operational implications: <ul style="list-style-type: none"> Refresh the MHTF theory of change and logic chain in line with previous recommendations. Adapt the results framework and performance management approach to focus on fewer, more relevant results at output level but more meaningful results at immediate and intermediate outcome levels; develop key performance indicators tracked by all MHTF partner countries that help capture the value-added by the MHTF and UNFPA more broadly to MNH and integrated SRHR-MNH. The MHTF ROM system should be presented to enable partner countries (country offices) to see how and whether they contribute toward the achievement of MHTF outcomes and capture information on the degree of success achieved through interventions adopted. Regularly transmit and discuss results with the Advisory Board as well as through the current <i>MHTF Wins!</i> rubric to strengthen buy-in and accountability for results. 				

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Adapt the ROM system to track fewer, more immediately relevant results that can support a clear narrative about the MHTF contribution and value added in varied settings as well as its progress and achievements in relation to integrated SRHR-MNH services. The ROM should have a greater focus on perceptions of change among stakeholders. It should supplement the formal indicator framework with reporting through more use of qualitative information on the contribution to and progress toward outcomes, including to support increased understanding about what is working, when and where.	<ul style="list-style-type: none"> Modify and adjust the results framework to focus on fewer results at output level. Streamline the indicator framework in the MHTF Business Plan Phase IV for easier tracking of MHTF contributions at immediate and intermediate outcome level. Develop an indicator for country offices to track the “MHTF’s value add”. 	February 2023	Technical Division (Sexual and Reproductive Health Branch)	Michel Brun brun@unfpa.org Hemant Dwivedi dwivedi@unfpa.org Geeta Lal lal@unfpa.org Willibald Zeck zeck@unfpa.org Jean Pierre Monet monet@unfpa.org	Regional and Country Offices
	<ul style="list-style-type: none"> Update the MHTF Theory of Change and Logic Chain within the MHTF Business Plan Phase IV. 	February 2023	Technical Division (Sexual and Reproductive Health Branch)	Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org Bridget Asiamah asiamah@unfpa.org Michel Brun brun@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org Willibald Zeck zeck@unfpa.org	

	<ul style="list-style-type: none"> Keep the MHTF Advisory Board regularly informed through briefs/updates/ results (e.g., MHTF Wins! and other briefs) aiming to strengthen buy – in, ownership and accountability for results. 	June 2022	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org	
Recommendation No. 10	Operational recommendation		Priority: High		
	<p>Invest in innovative financing approaches to attract an expanded donor base.</p> <p>Operational implications:</p> <ul style="list-style-type: none"> Elaborate a funding strategy to attract multi-year commitments from existing donors and broaden the donor base to attract new partners. Build continuity in funding flows by creating a bridging mechanism that will enable funding to be disbursed continuously in support of multiyear contracts, limiting fallow periods and supporting sustained action. Undertake a fundraising campaign linked to quality of care and women’s health across the life-course in the context of an organisational maternal health strategy and action plan. Establish mechanisms that enable the MHTF to strategically and carefully widen its programme model including through the use of an application-based match funding model for a portion of available funds aimed at leveraging additional resources from country offices and country-based partners, including bilateral donors (also see Recommendation 6). 				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]		Partially Accepted			
<i>If recommendation is partially accepted or rejected, provide reasons:</i>		There is concurrence of a need for broadening the MHTF donor base, to attract new partners and increased multi-year commitments. Recent global developments must be taken into consideration for example additional challenges created by the COVID-19 pandemic or the recent conflicts including the Russia - Ukraine conflict, which will have an unforeseeable effect on European economies and subsequently donor commitments. This will probably make it more challenging to invest in fundraising and especially fundraising. That said, efforts to broaden the MHTF donor base will continue and would require strong leadership from senior management and RMB with support from the SRHB. The MHTF Phase IV Business Plan, and the Maternal and New-born health strategy which will contain a fund-raising and financing strategy, will be presented to a recently established corporate resource management committee and efforts will be made to explore private sector funding like the recent good example with Takeda and more advocacy for domestic financing.			
<i>If recommendation is accepted or partially accepted, list, below, action(s) that will logically lead to its implementation, ideally within a year of the date recommendation was issued</i>					
Action point title	Action point text	Due date (year)	Lead implementing unit [specify <u>only one</u> per action point only]	Lead implementing and reporting staff Owner [specify <u>only one</u> per action point only]	Additional units involved in implementation (if any)

Develop a funding model and financing plan to support the next phase of the MHTF that addresses declining commitments, counteracts the negative effects of onerous financial management processes, and enables the MHTF to strategically expand its scope and depth in its next phase.	<ul style="list-style-type: none"> In close collaboration with RMB elaborate a fund raising strategy as part of the new MHTF Phase IV Business Plan that would attract multi-year commitments from existing and potential new donors. 	December 2023	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org Bridget Asiamah asiamah@unfpa.org Michel Brun brun@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	DCS/RM Branch, Technical division (CSB branch), regional offices, country offices and MCB
	<ul style="list-style-type: none"> In collaboration with RMB develop advocacy materials for increased visibility vis-à-vis potential new donors, which will reflect UNFPA's MHTF Phase IV Business Plan and Maternal and Newborn Health & Wellbeing Strategy. 	December 2023	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org Bridget Asiamah asiamah@unfpa.org Michel Brun brun@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	
	<ul style="list-style-type: none"> In collaboration with SPB, proactively seek private sector partnership engagement and funding support for new, innovative programming based on the MHTF Phase IV Business Plan. 	December 2023	Technical Division (Sexual and Reproductive Health Branch)	Willibald Zeck zeck@unfpa.org Geeta Lal lal@unfpa.org Sarah Bar-Zeev bar-zeev@unfpa.org	

				Bridget Asiamah asiamah@unfpa.org Michel Brun brun@unfpa.org Jean Pierre Monet monet@unfpa.org Hemant Dwivedi dwivedi@unfpa.org	
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