

H6 Joint Management Response to Evaluation of the H6 Joint Programme (Canada and Sida) 2011- 2016

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May 2017	Joint Programme (UNAIDS, UNFPA, UNICEF, UN Women, WHO)	Joint	Technical Division	Anneka Knutsson	Hemant Dwivedi dwivedi@unfpa.org	September 2017

Overall response to the evaluation: H6 Global Technical team welcomes the Report on Evaluation of the H4+ (Now renamed as H6) Joint Programme Canada and Sweden (Sida) 2011-2016, its findings and recommendations. The H6 team notes with appreciation the evaluation findings that the H6 Joint Programme (H6 JP) has contributed to strengthening health systems for RMNCAH at both national and sub-national level by improving pre-service and in-service training and supervision, especially for Emergency Obstetric and Newborn Care (EmONC) and for Maternal and Newborn Death Surveillance and Response systems. The H6 team also appreciates the finding that H6JP has contributed to expanding access to services in RMNCAH by consistently targeting the provision of services to underserved and hard to reach geographic areas, and within those areas, populations most in need of RMNCAH services (including adolescents and youth, the poorest women, and people living with HIV and AIDS). The H6 Joint Programme demonstrated a capacity to adjust and respond to changing needs and priorities at a country level by responding to national challenges. The programme encouraged innovation as an element in the programme mandate, which enabled to catalyze and accelerate action in support of improved RMNCAH outcomes. The H6 partners were able to arrive at an effective division of labour in programme countries drawing upon the mandate and comparative strengths of each partner agency. The experience of implementing the joint programme helped the H6 partners to develop a deeper level of both, coordination and collaboration at a global as well as at a country level. The primary added value of the H6 JP is to accelerate the implementation of the Global Strategy has been its positive contribution to improving the availability and quality of essential RMNCAH services in the ten programme countries. This contribution arises mainly from the flexibility in jointly programming technical and financial support to RMNCAH, which is complementary (and sometimes catalytic) to support provided by other, often larger, programmes. In addition, the programme enabled the H6 partners to increase the volume, intensity and coherence of their policy engagement and advocacy efforts in support of the Global Strategy at the programme country level. H6 partners will continue to maintain a strong focus on providing technical support to the implementation of updated UNSG's Global Strategy for Women's, Children's and Adolescent's Health (2016–2030) – also known as the Every Woman Every Child (EWEC) movement.

The report's findings and recommendations addressing areas that require further attention and refinement in the ongoing support to EWEC are acknowledged. Specifically, the findings and recommendations related to H6 country teams to take actions to make results sustainable by building options for a transition to new funding sources and to retrofit exit strategies to the extent possible. The efforts country level should be designed to achieve a balance between improving the supply of services and strengthening demand by engaging with individuals and communities to address barriers to access, including sociocultural barriers. It should also incorporate well sequenced and coordinated support. At country level, the H6 partners should build on the experience of H6JP in order to engage with national governments to ensure that they can collectively influence broader impediments to the health sector (and beyond) including: weaknesses in human resources for health, health financing, and the general enabling environment. And programmes of support at country level should address key aspects of sexual and reproductive health and rights (including family planning) for

those most left behind, especially for young women and girls. The efforts to strengthen the capacity of national authorities to lead programme coordination mechanisms would ensure that chain of coordination exist from national to provincial to subnational levels. These mechanisms should reach to the sub-national level and include all implementing partners and local health service facilities. Furthermore, the engagement of regional offices in supporting H6 country teams will be further enhanced and in supporting the innovation action area of the Global Strategy for Women’s Children’s and Adolescent’s Health (2016-2030). The H6 partners should support systematic approaches to “linking evidence to policy and practice. The H6 technical team should ensure that the division of labour at both country and global level allows for full engagement by all partners through strategic partnership with financing arm of the Global Financing Facility (GFF) of EWEC and engagement and alignment of global stakeholders, including the Partnership for Maternal Newborn and Child Health.

Planned use of evaluation: The primary purpose of this evaluation was to inform the preparation of the post 2016 approach of H6 partnership at global, regional and country level. The approach paper (concept note) of H6 partnership in SDG era will use evaluation findings along with findings of other evaluations of collaboration like RMNCH Trust Fund and Muskoka initiative, lessons learned and analytical findings so that H6 partners, individually and/or collectively will incorporate lessons learned towards the contribution as “technical arm” of UNSG’s Global Strategy for Women’s, Children’s and Adolescent’s Health (2016–2030).

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

Recommendation No. 1	Transition Plan / Exit Strategies	Priority: Medium
	H6 country teams in the ten H4+ JPCS countries (in collaboration with global and regional teams and national health authorities) should undertake actions to make results sustainable by building options for a transition to new funding sources and to retrofit exit strategies to the extent possible.	

Management Response to Recommendation acceptance status	Accepted
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The H6 is developing a funding proposal for technical support additional to what is included in ongoing programmes to the H6 Joint programme countries, as well as new countries, as resources permit. Technical support provided by the H6 will support country-led efforts to build on progress made during the MDG era, including the strategies employed under the H6 joint programme, and set governments on a trajectory for meeting SDG’s related to RMNCAH. The funding proposal will be shared with prospective donors for consultation in mid-2017.

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 (MM/DD/YYYY)	Lead implementing unit	Lead implementing staff [name]	Additional units involved in implementation (if any)
Transition plan to sustain programme gains	1. Requires H6 country teams to engage in advocacy with national health authorities and other line ministries to ensure flexible, geographically focused elements of H4+ JPCS are reflected in ongoing and new programmes.	December 2017-2020.	H6 Country Teams	H6 Country Coordinator from 10 Programme Countries	H6 global and regional teams

	<ol style="list-style-type: none"> 2. Requires exploring other sources of funding including bilateral RMNCAH donors, non-traditional donors and other health financing mechanisms to sustain program gains. 3. Requires earmarked resources to maintain and support coordination platforms at sub-national level (at a minimum for time and travel of staff). 				
Recommendation No. 2	Balance between supply and demand side interventions	Priority: High			
	H6 partners' efforts to strengthen health systems for RMNCAH at country level should be designed to achieve a balance between improving the supply of services and strengthening demand by engaging with individuals and communities to address barriers to access, including sociocultural barriers. This should, in particular, strengthen the H6 contribution to the individual potential and community engagement action areas of the Global Strategy for Women's Children's and Adolescent's Health (2016-2030).¹ It should also incorporate well sequenced and coordinated support.				
Management Response to Recommendation acceptance status	Accepted				
Health systems strengthening features prominently within the work plan of the H6, with emphasis on community-level platforms and demand generation and mechanisms for social accountability for RMNCAH. These areas of work will be undertaken by H6 members with relevant expertise and ongoing work in select priority countries.					
<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 (MM/DD/YYYY)	Lead implementing unit	Lead implementing staff [name]	Additional units involved in implementation (if any)
Balance between supply and demand side interventions	<ol style="list-style-type: none"> 1. Requires H6 country teams, when mobilizing resources for RMNCAH, to advocate for an adequate focus on demand side activities which address socio-cultural barriers, over a sufficient time frame for generating observable positive results (normative changes). 2. Requires specific focus and required technical skills to focus on the barriers to women's access to services, including but not limited to discrimination-free services, gender norms that limit women from seeking out services, and awareness of their right to demand 	December 2017-2020	H6 Country Teams	H6 Country Coordinator from 10 Programme Countries	H6 global and regional teams

¹ World Health Organization (2015). *The Global Strategy for Women's, Children's and Adolescents' Health (2016-2030)*. P.7

	<p>services among women, young women, and adolescents.</p> <p>3. Requires H6 global and regional teams to provide technical support (for country teams) in the area of demand generation, including addressing gender inequality and community engagement, including engagement of women.</p> <p>4. Requires H6 country teams to engage with and support national stakeholders active in community engagement (inside and outside ministries of health), including civil society organizations, particularly women's organizations.</p> <p>5. Requires advocacy for mechanisms that allow especially women and young people's voices in planning and implementing SRMNCAH programmes.</p>				
Recommendation No. 3	Addressing broader impediments to the health sector		Priority: High		
	At country level, the H6 partners should build on the experience of H4+ in order to engage with national governments with "one voice" in order to ensure that they can collectively influence broader impediments to the health sector (and beyond) including: weaknesses in human resources for health, health financing, and the general enabling environment.				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]	Accepted				
By leveraging the thematic areas of expertise across the individual members of the H6, the H6 will support country-led efforts to address and integrate sectors that impact health outcomes for women, children, newborns and adolescents. As reflected in the work plan, cross-sectoral approaches are emphasized in every aspect of support provided by the H6.					
<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 (MM/DD/YYYY)	Lead implementing unit	Lead implementing staff [name]	Additional units involved in implementation (if any)
Addressing broader impediments to the health sector	I. Requires engagement of all H6 country team partners in a joint programme of advocacy and policy engagement extending beyond the health sector (including, for example, authorities for Water and Sanitation). This should include	December 2017-2020	H6 Country Teams	H6 Country Coordinator from 10 Programme Countries	H6 regional and global teams

	<p>engaging with country-led multi-stakeholder country coordination platforms for RMNCAH.</p> <p>II. Requires collaboration of H6 agencies at (i) strategic and technical level; as well as (ii) <i>ad hoc</i> funding to facilitate coordination (meetings, transport, field visits, etc.).</p>				
Recommendation No. 4	Comprehensive approaches to meet the needs of adolescent including young women and girls for SRHR	Priority: High			
	H6 partners supporting RMNCAH at country level should ensure that programmes of support address key aspects of sexual and reproductive health and rights (including family planning) for those most left behind, especially for young women and girls. To this effect, H6 partners should invest (both globally and at country level) in the promotion and dissemination of evidence-based and comprehensive approaches to meeting the needs of adolescents, including young women and girls.				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]		Accepted			
Leveraging the comparative advantages of H6 members, the H6 will advocate for and support nationally-led efforts to integrate SRHR within national RMNCAH strategies and programming.					
<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 (MM/DD/YYYY)	Lead implementing unit	Lead implementing staff [name]	Additional units involved in implementation (if any)
Comprehensive approaches to meet the needs of adolescent including young women and girls for SRHR	<p>I. Requires that global, regional and country-specific programmes of support to RMNCAH address the full spectrum of sexual and reproductive health including family planning initiatives as an important component of integrated RMNCAH information and services.</p> <p>II. Requires H6 partners to ensure that regional and country teams have collectively the technical skills and tools to effectively design and implement programmes covering the full spectrum of the RMNCAH agenda.</p>	December 2017-2020	H6 Country and global Teams	H6 Country Coordinator from 10 Programme Countries and global technical team members	H6 partners senior management

	<p>III. Requires H6 country teams to engage with: (i) actors outside the ministry of health including, for example, ministries of youth and sports, education, employment; (ii) partners outside the public sector by engaging with country led multi-stakeholder platforms where possible.</p> <p>IV. Requires effective joint advocacy and investments in addressing socio-cultural barriers for young people to access sexual and reproductive health and rights, including access to contraceptive information and services for adolescent girls (married and unmarried).</p>				
Recommendation No. 5	Strengthen national programme coordination Mechanism		Priority: Medium		
	H6 partners should support efforts to strengthen the capacity of national authorities to lead programme coordination mechanisms. These mechanisms should reach to the sub-national level and include all implementing partners and local health service facilities. This will strengthen the contribution made by H6 to the country leadership action area of the Global Strategy (2016-2030).²				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]	Accepted				
National capacity building is critical to achieve sustainable results and build resilient health systems at the national and sub-national levels. As reflected in the H6 work plan, the H6 will work with policymakers and other partners to prioritize capacity building in every aspect of technical support provided by the H6 partnership including national coordination mechanisms.					
<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 (MM/DD/YYYY)	Lead implementing unit	Lead implementing staff [name]	Additional units involved in implementation (if any)
Strengthen national programme coordination Mechanism	I. Requires H6 country teams to advocate for and actively participate in planning and coordinating	December 2017-2020	H6 Country Teams	H6 Country Coordinator from 10 Programme Countries	H6 global and regional teams

² World Health Organization (2015). P.7.

	<p>mechanisms which reach to local levels and are inclusive of key stakeholders.</p> <p>II. Requires H6 partners to participate in and support harmonized, coordinated and aligned platforms for coordinating support for RMNCAH including country-led, multi-stakeholder platforms.</p> <p>III. Requires H6 partners to provide support to efforts to build the capacity of national authorities in the development and leadership of coordinating mechanisms in RMNCAH.</p>				
Recommendation No. 6	Learning and Knowledge management strategy of the partnership	Priority: High			
	H6 partners should strengthen the learning and knowledge management strategy of the partnership, including the generation and dissemination of evidence-based documentation. Further, in supporting the innovation action area of the Global Strategy for Women’s Children’s and Adolescent’s Health (2016-2030), H6 partners should support systematic approaches to “linking evidence to policy and practice”.³				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]	Partially Accepted				
As is the current practice of the H6 partners, we will continue to draw on the comparative strengths and the individual as well as collective efforts of H6 members, the H6 will document and disseminate results achieved, lessons learned, and good practices, incorporating findings in technical support to country-owned RMNCAH strategies, wherever possible.					
<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 (MM/DD/YYYY)	Lead implementing unit	Lead implementing staff [name]	Additional units involved in implementation (if any)
Learning and Knowledge management strategy of the partnership	<p>I. Requires the joint development of learning networks or support to, and engagement with already existing thematic learning networks.</p> <p>II. Requires that (i) experiences at country level consistently inform the development of global knowledge and that (ii) global knowledge products are effectively disseminated and used within the</p>	December 2017-2020	H6 Country and global Teams	H6 Country Coordinator from 10 Programme Countries	H6 regional teams

³ World Health Organization (2015). P.7.

	<p>framework of south-south collaboration and inter-country exchange.</p> <p>III. Requires (i) strengthened technical support and guidance for country teams on evidence-based approach to documentation, and (ii) reinforced role of regional teams in monitoring and supporting innovation efforts.</p> <p>IV. Requires H6 global team to prioritise support to global knowledge products based on:</p> <ul style="list-style-type: none"> a. Gaps in technical knowledge and guidance in RMNCAH identified through programming experience of H6 country teams. b. Documented, evidence-based lessons on effective programming for RMNCAH building on practical field experiences by H6 country teams. c. Document evidence, including research of demand-side barriers to women’s access and use of health services d. The identification of “what works” and “what does not work” with clear and rigorous parameters to guide the documentation process of promising practices. 				
Recommendation No. 7	Strengthen Contribution by H6 to the three pillars of EWEC Global Strategy 2016 - 2030		Priority: Medium		
	H6 partners should ensure that the division of labour at both country and global level allows for full engagement by all partners to (a) support the community engagement action area of Every Women Every Child and the Global Strategy for Women’s, Children’s and Adolescent’s Health (2016-2030); and (b) strengthen the contribution made by H6 to each of the three pillars of the Global Strategy (2016-2030):4				

⁴ World Health Organization (2015). P. 77.

- i. Country planning and implementation efforts;
- ii. Financing for country plans and implementation including the Global Financing Facility(GFF);
- iii. Engagement and alignment of global stakeholders, including the Partnership for Maternal Newborn and Child Health(PMNCH).

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

Partially Accepted

As the designated operational/technical arm of the Global Strategy, the H6 is mandated to provide or procure technical support to country-led efforts to implement the Global Strategy and achieve SDG 3. While the primary purpose of the H6 is to provide countries with practical, evidence-based technical assistance, it often does so in conjunction with related entities, such as the GFF. It is important to note that while the H6 provides technical support to country-related GFF activities, H6 members, as UN entities, do not receive financial support from the GFF for services rendered on behalf of the GFF. It is important to note that the primary focus of H6 activity is the country level. By engaging and building on existing national coordination mechanisms, the H6 supports coordination and implementation activities in support of the Global Strategy. As noted in recommendation No. 7, responsibility for global alignment and coordination around RMNCAH is shared, with various entities responsible for upholding a collective commitment to align, coordinate and harmonize wherever possible.

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 (MM/DD/YYYY)	Lead implementing unit	Lead implementing staff [name]	Additional units involved in implementation (if any)
Strengthen Contribution by H6 to the three pillars of EWEC Global Strategy 2016 - 2030	<ul style="list-style-type: none"> I. Requires the H6 teams (at global and country levels) to demonstrate value-added as a programming group in support of the Global Strategy and to attract necessary resources II. At country level, requires country teams to coordinate: (i) seek funding opportunities and mobilize resources for action in support of RMNCAH as a collective group; (ii) secure funds for operational components of: joint planning, advocacy and supervision including staff time and travel at country level. III. Requires H6 global team to coordinate activities at global level to ensure alignment with other stakeholders including PMNCH. IV. Requires continuing <i>joint</i> H6 support (as the preferred technical arm of the Global Strategy 	December 2017-2020	H6 Country and global Teams	H6 Country Coordinator from 10 Programme Countries	Bilateral partners

	2016-2030) to countries in their partnership with the Global Financing Facility (GFF).				
Recommendation No. 8	Enhanced Engagement of H6 Regional Team		Priority: Medium		
	The H6 partnership should develop a clear definition of the regional dimension of its work and corresponding clear role and responsibilities for regional offices in supporting H6 country teams.				
Management Response to Recommendation acceptance status [Accepted/Partially Accepted/Rejected]		Partially Accepted			
As noted in response to Recommendation No. 7, the primary focus of the H6 is coordinated technical support to countries that request assistance on national RMNCAH strategies. The question of creating a physical or virtual H6 mechanism at the regional level raises a series of practical and managerial issues, many of which have been discussed and assessed at length by senior managers of the H6, including the DEDs and principals. In short, the H6 agrees to advance a common agenda and coordinate efforts wherever possible, practical and feasible at the global, regional and country levels. This commitment does not, however, necessitate the creation of new regional coordination mechanisms or staffing requirements.					
<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 (MM/DD/YYYY)	Lead implementing unit	Lead implementing staff [name]	Additional units involved in implementation (if any)
Enhanced Engagement of H6 Regional Teams	<p>I. Requires global and regional management teams of H6 partners, in consultation with country teams, to jointly agree on detailed roles and responsibilities of global, regional and country H6 teams.</p> <p>II. Requires H6 global partners and regional teams to identify and secure resources to fund regional team activities in support of H6 teams at country level.</p>	December 2017	H6 global and regional Teams	H6 Country Coordinator from 10 Programme Countries	H6 partners senior Management