

UNHCR Evaluation Management Response			
Evaluation title:	Evaluation of the project “Saving Maternal and Newborn lives in Refugee Situations” in Cameroon, Chad and Niger		
UNHCR evaluation reference:			
Entity that commissioned the evaluation:	Public Health Section, UNHCR		
Due date of Management Response:	10. October 2021		
Coordinator of Management Response:	Ann Burton	Chief of Public Health Section	PHS, DRS
Management Response approved by (senior manager in commissioning office):	Marian Schilperoord	Job title: Deputy director DRS	Country/Office: Switzerland, Geneva
Date:	10. December 2021		

General comments on the evaluation:	<p>The evaluated project “Saving Maternal and Newborn lives in Refugee Situations” is the second project focusing on mothers and newborns that is implemented with the financial Support of the Bill and Melinda Gates Foundation.</p> <p>UNHCR welcomes the evaluation findings and recommendations. The actions responding to the recommendations are developed in line with UNCHR’s commitment to the Global Compact on Refugees, focusing on strengthening national health systems in cooperation with partners and working towards the inclusion of refugees in national health systems and policies. They build on ongoing work to incorporate learning from the project into the wider public health programming of UNHCR and partners. Actions will be implemented in close cooperation with other functional units within UNHCR and partners.</p>
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RECOMMENDATION 1:	<p>UNHCR should consider expanding the project for continued improvements in maternal and newborn care (MNC) and in Family Planning (FP) for refugee populations in low-resource settings within the WCA region if not more broadly. This recommendation clearly has cost implications at multiple levels:</p> <p>At country level: UNHCR Senior Management, Public Health and Programme Teams</p> <ol style="list-style-type: none"> a. Support sustainability and expansion of project activities with regards to training, provision of materials, supplies and infrastructure restoration, and awareness raising of MNC and family planning. b. Invest in the engagement and training of additional CHWs and healthcare staff at sites and at surrounding referral health centres. This includes identifying and implementing mechanisms for potentially better compensating CHWs’ efforts. c. Increase access to, and quality of, comprehensive emergency obstetric and neonatal care. d. Advocate for the integration of LDHF training content into national pre- and in-service training curricula through increased involvement of Ministries of Health. <p>At regional bureau level: Senior Public Health Officer</p>
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	<p>e. Foster communication, information and experience sharing between project country teams to reinforce efforts to improve overall cross-country public health performance following the departure of the project manager.</p> <p>At global level: Senior SRH Officer /PHS</p> <p>f. Incorporate lessons learned from this project into UNHCR's strategic approach and upcoming new global public health strategy.</p> <p>g. Promote the inclusion of LDHF training in UNHCR supported MNC programmes and continue sharing lessons learned from the project as widely as possible with other country operations and agencies.</p>				
Management response:	X Agree Partially agree Disagree <input type="checkbox"/>				
Reasons (if partially agree or disagree):	With regard to recommendation (d). Advocate for LDHF training content integration in national pre- and in-service training curricula through increased involvement of MoH, UNHCR Niger agrees. However, given that a prior assessment of human resource capacity building needs in the area of maternal and newborn health, has already been carried out, does not believe there is any further need for advocacy. As such, UNHCR Niger will focus instead on the retraining of community relays and the continuous training of Master Trainers. UNHCR Niger also suggests that the integration of training content, rather than being carried out at the national level, should focus on the district level, as direct implementation is done at this level.				
Unit or function responsible:	Public Health Unit Niger, Cameroon, Chad, Regional Bureau West Central Africa (RBWCA), Public Health Section HQ (PHS)				
Top-line planned actions	By whom	Comments	Expected completion date	Progress	
	Status	Comments			
1	Establish a mentoring system for health facilities that have benefited from the project and whose service providers have been trained to provide maternal and newborn health services.	<p>UNHCR in Niger/ Ministry of Public Health Niger (MoH)</p> <p><u>At the level of health facilities that have benefited from the project</u></p> <p>1. Organize training of trainers on EmONC (Emergency Obstetric and Neonatal Care), including quality of care, women's rights and supervision.</p> <p>2. Coordinate (and support if necessary) technical capacity strengthening of the health facilities that have benefited from the project through appropriate partners, under the supervision of the MoH.</p> <p><u>At the level of health structures that have not benefited from the project</u></p> <p>3. Select, in collaboration with appropriate actors and local health authorities, health facilities to benefit from capacity building.</p>	12/2023	planned	

			<p>4. Organize training sessions for service providers of selected health facilities on EmONC, health promotion and supervision, in collaboration with other appropriate actors and under the supervision of MOH.</p> <p>5. Coordinate (and support if necessary) technical capacity strengthening of the health facilities that have benefited from the project through appropriate partners, under the supervision of the MoH.</p>			
2	Systematic integration of maternal and newborn health training at district level for health staff and community health workers	UNHCR in Niger/MoH	<p>1. Identify, in collaboration with health districts, the training and refresher training needs (including training of trainers) of health workers and community health workers in maternal and newborn health.</p> <p>2. Establish a database on the training of health staff and community health workers for better follow-up and monitoring of the maternal and newborn health capacity-building process in refugee hosting districts.</p> <p>3. Develop in collaboration with the health districts a training and refresher training schedule for identified personnel.</p> <p>4. Facilitate the implementation of training schedules in collaboration with the appropriate actors.</p> <p>5. Advocate with district health officials in refugee hosting districts for the systematic inclusion of maternal and newborn health capacity building in their planning documents.</p>	12/2023	planned	
3	Ensure, in collaboration with appropriate actors including UNFPA and under the supervision of the MoH, that a minimum package of quality maternal and newborn health services is available at each health centre in the districts hosting refugees.	MoH/ UNHCR in Niger/ UNFPA	<p><u>At Community level</u></p> <p>1. Support in collaboration with other appropriate actors and under the supervision of local health authorities, awareness raising sessions and behaviour change communication activities on maternal and newborn health, as well as the establishment of community-level referral mechanisms in all refugee sites benefiting from the project.</p>	12/2023	Planned	

			<p>2. Support, in collaboration with other appropriate actors and under the supervision of the MoH, the functioning of the referral system at community level.</p> <p><u>At primary health care level</u></p> <p>3. Ensure that health care providers are trained with the support of UNFPA and under the supervision of the MOH, and that they are provided with adequate equipment and supplies for the provision of maternal and newborn health services.</p> <p>4. Support the functioning of the medical referral system in collaboration with other actors and under the supervision of the MoH.</p> <p><u>At secondary health care level</u></p> <p>5. Ensure that relevant health care providers are trained with the support of UNFPA and under the supervision of the MoH, and that they are provided with adequate equipment for the provision of maternal and newborn health services</p> <p>6. Support the functioning of the medical referral system in collaboration with other actors and under the supervision of the MoH.</p>			
4	Establish a mentoring system for health facilities that have benefited from the project and whose service providers have been trained to provide maternal and newborn health services	UNHCR in Cameroon / Ministry of Public Health Cameroon (MoPH)	<p><u>At the level of health facilities that have benefited from the project</u></p> <p>1. Organize a training of trainers on EmONC, including the quality of care, women's rights and supervision, for 35 health care providers from the 11 health facilities that benefited from the project.</p> <p>2. Coordinate (and support if necessary) capacity strengthening of health facilities which have benefited from the project, under the supervision of the MoPH.</p> <p><u>At the level of health facilities that did not benefit from the project</u></p>	03/2022	Planned	

			<p>3. Select in collaboration with appropriate actors and local health authorities, health facilities to benefit from capacity building.</p> <p>4. Organize training sessions for service providers of selected health facilities on EmONC, health promotion and supervision, in collaboration with other appropriate actors and under the supervision of MOPH.</p> <p>5. Coordinate (and support if necessary) capacity strengthening of health facilities which have benefited from the project, through appropriate partners, under the supervision of the MoPH.</p>			
5	Scaling up the concept of model mothers for community-based maternal and newborn health activities	UNHCR in Cameroon/ MoPH	<p>1. Organize in collaboration with the other actors, experience sharing sessions with community groups working with other health facilities on the concept of model mothers, to introduce and garner support for the concept and to mobilize the technical and financial sources for scaling up the approach.</p> <p>2. Set up within each selected health district a pool of trainers for the model mothers' approach through training of trainers of existing model mothers.</p> <p>3. Organize in collaboration with the appropriate actors and under the supervision of MoPH the training of 35 mother leaders from health facilities who have not yet benefited from the project as model mothers.</p>	12/2022	Planned	
6	Ensure, in collaboration with appropriate actors including UNFPA and under the supervision of MoPH, that a minimum package of quality maternal and newborn health services is available at all levels (community level, primary health care and referral facilities)	UNHCR in Cameroon/ MoPH	<p><u>At Community level</u></p> <p>1. Support, in collaboration with other appropriate actors and under the supervision of local health authorities, awareness sessions and behaviour change communication activities on maternal and newborn health, as well as the establishment of community-level referral mechanisms in all refugee sites benefiting from the project.</p> <p>2. Support the functioning of the referral system at community level in collaboration with other actors and under the supervision of the MoPH.</p> <p><u>At primary health care level</u></p> <p>3. Ensure that appropriate health care providers are adequately trained with the support of UNFPA and under the</p>	12/2022	Planned	

			<p>supervision of the MoHP, and that they are provided with adequate equipment and supplies for the provision of maternal and newborn health services.</p> <p>4. Support the functioning of the medical referral system for each health facility, in collaboration with other actors and under the supervision of the MoH.</p> <p><u>At secondary health care level</u></p> <p>5. Ensure that appropriate health care providers are trained with the support of UNFPA and under the supervision of the MoH, and that they are provided with adequate equipment and supplies for the provision of maternal and newborn health services</p> <p>6. Support the functioning of the medical referral system for each health facility, in collaboration with other actors and under the supervision of the MoH.</p>			
7	Ensure the integration of training activities, supplies of materials, consumables, equipment and rehabilitation of maternal health infrastructure into the normal planning of UNHCR, the Ministry of Health and other dedicated actors.	UNHCR Public Health Section Chad & Ministry of Health (MoH)	<p>1. Organization of joint assessment missions of the needs of the health structures of the camps in terms of maternal and newborn health, officials of the Ministry of Health at the district level.</p> <p>2. Inclusion of medicines, supplies and materials and equipment related to maternal and newborn health in the regular annual order of UNHCR's operation in Chad.</p>	12/2021	Planned	
8	Strengthen advocacy with the Ministry of Health and potentially interested actors for the strengthening of additional health workers.	UNHCR Public Health Section Chad & MoH	<p>1. Reinforce the coordination through active participation in health cluster meetings and health development meetings under the leadership of the Ministry of Health.</p> <p>2. Maintain and strengthen advocacy with the government for the assignment of additional health workers to the health structures in and around the camps as part of the strategy of integration of refugees into the national system.</p> <p>3. Update the joint action plan with UNFPA and UNICEF and initiate action plans with other actors to take into account support for maternal and newborn health activities in sustainability.</p>	12/2022	Ongoing	

			4. Support UNFPA in the recruitment, training and deployment of midwives to identified public health centers.			
9	Strengthen at the national level the mechanisms and frameworks for mobilizing humanitarian and development actors to support the health system in refugee-host regions	UNHCR Public Health Section Chad & MoH	Active participation in the national exercise for identification of humanitarian needs for 2022.	10/2021	ongoing	
10	Building national capacity for the national roll-out of the Help Mother Survive and Help Babies Survive approaches	UNHCR Public Health Section Chad & MoH	<p>1. In collaboration with the Ministry of Health and other maternal and newborn health actors, organize training sessions of trainers and cascade training sessions for providers of camps and surrounding hospitals in the East, South and Lake Chad.</p> <p>2. Mobilize resources to provide 40 health facilities with training materials (posters, anatomical models, booklets) to implement the LDHF approach in health districts.</p>	11/ 2022	Planned	
11	Ensure effective communication between the beneficiary country operations	Public Health Unit RBWCA	<p>1. Facilitate the development and implementation of the agreed communication strategy and plan, including what to communicate, methods and communication channels, as well as clarifying tasks and responsibilities of project country teams.</p> <p>2. Support trainings/refreshers sessions of the country teams on the right skills sets for communication.</p> <p>3. Facilitate information sharing and feedback between the countries (including through feedback exchange meetings).</p> <p>4. Support the translation of all the project documents into French.</p> <p>5. Support as needed activities related to the visibility of the projects in the countries.</p>	12/2023	Planned	
12	Ensure smooth technical coordination between the beneficiary countries	Public Health Unit RBWCA	<p>1. Facilitate discussion sessions with the countries in collaboration with relevant stakeholders (including UNFPA and WHO) to enhance experience sharing.</p> <p>2. Ensure regular information sharing among the beneficiary countries.</p>	12/2022	Planned	

13	Incorporate into Global Public Health Strategy and its application	Public Health Section, UNHCR HQ	Lessons learnt from the project have been incorporated into the strategy and the SRH technical sheet. The strategy has an emphasis on capacity building of UNHCR and partners and the LDHF training modalities and trainings topics will be incorporated to the extent possible into capacity building measures.	10/2022	Ongoing	
14	Disseminating project learnings	Public Health Section, UNHCR HQ	Learning from the project will be incorporated in the forthcoming Maternal and Newborn Health guidelines. Additional activities include (among others) global webinars and SRH trainings.	10/2022	Ongoing	
RECOMMENDATION 2:		<p>Consider MNH project integration into wider UNHCR public health programming and greater support to national health systems.</p> <p>At global level: Senior SRH Officer /PHS</p> <p>a. Oversee the integration of MHN strategies into overall PH programming through for instance, propagating the use of low-cost high-impact interventions and other successful strategies for improving MNH in low resource settings.</p> <p>b. Foster support to local/provincial health systems in areas of operation in line with the Global Compact for Refugees.</p>				
Management response:		<input checked="" type="checkbox"/> Agree <input type="checkbox"/> Partially agree <input type="checkbox"/> Disagree				
Reasons (if partially agree or disagree):						
Unit or function responsible:		Public Health Section HQ (PHS)				
Top-line planned actions		By whom	Comments	Expected completion date	Progress	
					Status	Comments
1	Finalise Maternal and Neonatal Health Operational Guidance	Public Health Section, UNHCR HQ	The guidance, which incorporates many of the elements covered in the project including the application of low cost, high impact interventions for neonatal health, will be widely disseminated within UNHCR and across partners. The guidance also contains information on support to local health systems in line with needs assessments.	12/2021	Ongoing	
2	Train a cadre of trainers in sexual and reproductive health within UNHCR	Public Health Section, UNHCR HQ	This training developed jointly by UNHCR with UNFPA and incorporating lessons learnt from the project will be undertaken in October 2021 and includes emphasis on maternal and neonatal health. The trained staff will then apply the skills and knowledge learnt to programming and also coaching and mentoring of public health and partner staff. UNFPA staff will also be trained thus amplifying the reach.	11/2021	Planned	
RECOMMENDATION 3:		<p>UNHCR should consider strengthening the support it provides to partners in monitoring and evaluation (M&E).</p> <p>Further assistance to partner NGOs aligns well with the roll-out of UNHCR's Results Based Management processes and the development of country-level M&E plans to improve the effective implementation of project activities through on-going lesson-learning, and periodic assessment of project impact:</p>				

		<p>At country level: UNHCR Public Health Teams (and Inter-Agency Focal Points)</p> <ol style="list-style-type: none"> As part of the phased roll-out of multi-year strategic planning, increasingly ensure that MNH projects are integrated in, and based on, an overall theory of change to strengthen design and programme impact through credible, useful, cost-effective and evidenced-based strategies that are adapted to context and discussed with partners taking each one's role and contribution into account. Provide assistance to NGO partners to enhance the quality of health data collected based on the existing HIS and taking into consideration national data collection systems. Periodic assessment of the quality of care using the Balanced Score Card. Data should also be collected from the beneficiaries (e.g., client exit interviews, focus group discussion, surveys) to gauge satisfaction with services and quality of care. Strengthen engagement with ministries of health with regard to the sharing of local and national surveillance data in order to improve the potential for the broader assessment of project impact beyond refugee sites. Facilitating easier access to national data will reduce data collection burden on local partner staff if the monitoring is better integrated and complements health ministries' surveillance efforts. 				
Management response:		X Agree Partially agree Disagree <input type="checkbox"/> <input type="checkbox"/>				
Reasons (if partially agree or disagree):						
Unit or function responsible:		Public Health Unit Niger, Cameroon, Chad				
Top-line planned actions		By whom	Comments	Expected completion date	Progress	
					Status	Comments
1	Ensure that maternal and newborn health activities are included in the joint multi-year operational plan developed by UNHCR, MoH and partners	UNHCR in Niger/ MoH MoPH/UNHCR in Cameroon	<ol style="list-style-type: none"> Organize a joint multi-year operational planning review workshop to ensure adequate consideration/integration of maternal and newborn health, including the roles and responsibilities of each actor. Support in collaboration with MoH, coordination of the implementation of the joint MoH/ UNHCR/ Partner operational plan. Provide assistance to NGO partners to enhance the quality of health data collected based on the existing HIS and taking into consideration national data collection systems. 	Throughout the period of the multi-year plan (2021-2025)	Planned	
2	Continue to support in collaboration with MOH and UNFPA the completion of the	UNHCR in Niger/ MoH	<ol style="list-style-type: none"> Organize training sessions for health staff on assessing the quality of services provided by health facilities using the Balance Score Card (BSC) tool. 	12/2023	ongoing	

	assessment of the technical capacity and quality of maternal and newborn health services in refugee hosting districts	UNHCR in Cameroon/ MoPH	<p>2.Ensure, in collaboration with the MoH and UNFPA, the supervision of implementation of the BSC assessment.</p> <p>3. Organize feedback meetings to share the results of BSC assessments with all stakeholders and jointly develop recommendations to improve health service quality, including the roles and responsibilities of each actor.</p>			
5	Ensure a robust health information management and reporting including on quality indicators supported by the use of BSC	UNHCR Public Health Section Chad	1. UNHCR Chad is planning an internal strengthening in the area of information management and aims for a robust monitoring and health information system which includes quality indicators.	03/2022	Planned	
6	Ensure quality data collection reporting and analysis by health partners and reinforce Capacity building in the use of on the new UNHCR iRHIS health information system and the BSC	UNHCR Public Health Section Chad	<p>1. Recruitment of National staff as M&E and reporting.</p> <p>2. Organization of field training sessions for Data Managers and iRHIS focal points by health center.</p>	03/2022	Ongoing	
RECOMMENDATION 4:		<p>Future interventions among refugee populations in similar settings should factor in the importance of addressing persisting socio-cultural factors that affect behaviours in MNC and FP.</p> <p>At country level: UNHCR Public Health Teams</p> <p>a. Further strengthen the focus on increasing acceptability of and demand for FP, in addition to the provision of contraceptives. This could be done through sharing and implementation of proven strategies in such countries as Niger where they implemented engagement of men and community/religious leaders ('École des maris' UNFPA program). Other strategies could include engaging community-based organizations that have proven successful in marketing approaches for SRH in similar context, as well as increasing women's empowerment through education and economic independence. Multi-sector collaboration would help ensure multiple aspects are addressed.</p> <p>b. Increase knowledge about and access to FP among adolescents, as conducted in Cameroon in this project. A life-course approach to SRH and early intervention have been shown to be key to improving FP globally.</p> <p>c. Better address the persisting verbal and physical abuse of mothers during pregnancy and delivery. Training modules included some elements of respect of women's rights as a step towards addressing this problem. Further educating providers and increasing women's knowledge of their rights is more likely to support institutionalising respect for maternal and reproductive rights. However, given the scale of this phenomenon, more work will be required to better understand the reasons behind harmful practices and identify potential ways to address them.</p> <p>At regional level: Senior Public Health Officer in cooperation with relevant sections</p> <p>d. Create deeper linkages to address community norms together.</p> <p>At global level: Senior SRH Officer/ PHS</p>				

	<p>e. Consider promoting a wider evidence-based approach to family planning as integral part of overall public health programming to enhance access to modern methods of contraception.</p> <p>f. Foster the consistent inclusion of respectful maternity care trainings and standards into MNC programmes.</p>					
Management response:	<input type="checkbox"/> Agree <input checked="" type="checkbox"/> Partially agree <input type="checkbox"/> Disagree					
Reasons (if partially agree or disagree):	<p>Recommendation (RBWCA) d): This recommendation should be under the responsibility of the targeted country operations, given that in the context of decentralization and regionalization processes, the Regional Bureau does not have any accountability relative to the support of communities at country level. This recommendation should therefore be addressed to Country Operations (first line of defence) – as an operational recommendation. <u>Suggestion</u>: Consider marking this recommendation as under the responsibility of UNHCR beneficiary country operations.</p>					
Unit or function responsible:	Public Health Unit Niger, Cameroon, Chad, Regional Bureau West Central Africa (RBWCA), Public Health Section HQ (PHS)					
Top-line planned actions	By whom	Comments	Expected completion date	Progress		
				Status	Comments	
1	Facilitate processes to improve the acceptability and demand for maternal and newborn health services at refugee sites	<p>UNHCR in Niger/MoH</p> <p>UNHCR in Cameroon/ MoPH</p>	<p>1. Establish, in collaboration with MoH and UNFPA, partnerships with refugee communities to explore and address community norms harmful to maternal and newborn health.</p> <p>2. Support, in collaboration with MoH, UNFPA and other appropriate actors, a baseline assessment and annual assessments of the acceptability and demand for maternal and newborn health services, including family planning in refugee communities and their host communities.</p> <p>3. Organize training sessions with refugee leaders on improving maternal and newborn health and family planning, including on the negative effects of certain harmful community norms and practices.</p> <p>4. Support the training of community outreach workers on improving maternal, newborn and family planning practises and preventing harmful practices, with the aim of facilitating community dialogues.</p> <p>5. Support the implementation of community dialogues on sexual and reproductive health, including maternal and newborn health and family planning, in refugee communities, in collaboration with UNFPA and under the supervision of the MOH.</p>	<p>12/2023</p> <p>12/2022</p>	Planned	

			<p>6. Support experience-sharing sessions on the concept of 'les écoles des maris', with the support of UNFPA and the collaboration of the MOH.</p> <p>7. Facilitate awareness-raising and behaviour change communication campaigns for maternal and newborn health at refugee sites, with the support of national organizations, including community-based organizations specializing in the areas of advocacy and marketing.</p>			
3	Facilitate awareness-raising and behaviour change communication campaigns for sexual and reproductive health including family planning and adolescents and youth SRH in all refugee hosting districts	UNHCR in Cameroon/ MoPH	<p>1. Support training of trainers of adolescent and youth peer educators in sexual and reproductive health, as well as adequate provision of equipment, in collaboration with appropriate actors and under the supervision of MoPH and the Ministry of Youth.</p> <p>2. Support cascade trainings for adolescent and youth peer educators on sexual and reproductive health in all refugee communities.</p> <p>3. Support, in collaboration with MoPH and UNFPA, awareness-raising and behaviour change communication sessions on sexual and reproductive health for adolescents and young people in all refugee communities.</p>	12/2022	Planned	
4	Reduce the persisting verbal and physical abuse of mothers during pregnancy and delivery.	UNHCR in Cameroon/ MoPH	Health providers will also be trained on the quality of services offered in the context of maternal and newborn health as part of capacity building efforts under recommendation 1.	03/2022	Planned	
5	Promote and implement approaches that improve the acceptability of maternal and newborn health services by populations.	UNHCR Public Health Section Chad & MoH	<p>1. Production and distribution of simple tools and guidelines to prevent persistent verbal and physical abuse of mothers during pregnancy and childbirth and reminding providers of women's rights and respect for maternal and reproductive rights.</p> <p>2. Systematic integration of humanizing and respectful health care modules into all training sessions involving care providers in refugee hosting districts.</p> <p>3. Facilitation of awareness-raising and communication campaigns for maternal and newborn health behaviour change at refugee sites, with the support of national organizations, including community-based organizations specialized in the fields of awareness-raising and marketing.</p>	12/2022	Planned	

			4. Working with MoH, other key actors and partnerships and linking with refugee and host communities to explore and address community norms harmful to maternal and newborn health.			
6	Strengthening the quality of maternal and newborn health services based on good practices and edifying experiences.	UNHCR Public Health Section Chad & MoH	1. Facilitation of experience-sharing workshops on good practices in other countries in the field of maternal and neonatal health. 2. Finalization and popularization of the Mama Kangaroo guidelines developed in Chad within the framework of the project, for the benefit of other structures in the country and other countries.	12/2022	Planned	
7	Support the country operations on the processes to addressing community norms in collaboration with local authorities.	The Public Health Unit/RBWCA	Provide guidance and advice to the country operations on the processes to addressing community norms in collaboration with local authorities, including through lessons learnt and best practices sharing.	12/2023	Planned	
8	UNHCR has incorporated modern methods of family planning into its essential medicines lists and also assessments of family planning service availability into the Balanced Scorecard (BSC) which is undertaken at primary health care facility	Public Health Section, UNHCR HQ	In order to monitor the availability and quality of family planning services the BSC will be used in primary health care facilities supported by UNHCR, including outside of the project countries.	10/2022	Ongoing	
9	As above under recommendation 2 Finalise Maternal and Neonatal Health Operational Guidance	Public Health Section, UNHCR HQ	The Maternal and Neonatal Health operational guidance also includes references to family planning services availability and quality with links to further guidance. Respectful maternity care is integrated throughout the guidance.	10/2022	Ongoing	
10	Through capacity strengthening activities and the community of practice UNHCR will promote an evidenced-based approach to family planning as well as respectful maternity care.	Public Health Section, UNHCR HQ	Updates, articles in journals, field experiences will be shared.	10/2022	Ongoing	
RECOMMENDATION 5:		<p>UNHCR should undertake a more strategic approach to its partnership with the BMGF (and other potential global health funders), one that is both transactional (based on funding), and non-transactional (based on a relationship of shared values and interests).</p> <p>Specifically with the BMGF, there exists a strong convergence of values and interests that should be further developed drawing on, and moving beyond this project to look at wider issues of low-cost public health technologies and innovations, longer-term developmental</p>				

	objectives and collaboration as well as the scope to scale innovations/pilot projects in a wider range of countries that fall within the BMGF's wider geographical priorities.					
	<p>At global level: PSP (with PHS) PSP should consider developing stronger theories of change that generate the impact/value that a multi-year (transactional and non-transactional) partnership with a donor like the BMGF might generate according to the vision that UNHCR wishes to achieve and where there is commonality between the two institutions. Whilst this will require more creative thinking and brainstorming internally, partnership cultivation will no doubt need to incorporate a deepening of the relationship through stronger and wider articulation of mutual goals (healthy productive lives for vulnerable forcibly displaced populations in low-resource settings) and transformative objectives and processes that extend beyond emergency/short-term approaches and potentially, beyond current focal points/departments within both UNHCR and the BMGF.</p>					
Management response:	X Agree Partially agree Disagree <input type="checkbox"/>					
Reasons (if partially agree or disagree):	Also relevant for both Regional and National levels since partnership cultivation concerns all UNHCR's entities at all levels.					
Unit or function responsible:	Private Sector Partnership (PSP), HQ					
Top-line planned actions	By whom	Comments	Expected completion date	Progress		
				Status	Comments	
1	Internal conversation between PSP and PHS to determine opportunities for BMGF and other foundation partners to build upon "Saving Maternal and Newborn Lives in Refugee Situations"	<p>PSP</p> <p>The PSP and PHS teams will explore opportunities to build upon the work and evaluation of "Saving Maternal and Newborn Lives in Refugee Situations" in line with the vision of UNHCR. The discussion will include an exploration of the commonalities between this vision and those of BMGF or other foundations.</p> <p>This aligns well with PSP and PHS's ongoing efforts to build a more strategic engagement with BMGF.</p> <p>Based on this discussion, PSP and PHS will pursue engagement with BMGF as per action 2 below.</p>	10/2021	Ongoing		
2	Strategic meeting with BMGF to discuss collaborative vision for public health	<p>PSP</p> <p>The PSP team will pursue a collaborative meeting with the partnership focal point at BMGF and potentially additional BMGF colleagues to discuss more strategic vision on working together in maternal and newborn care (MNC) and Family Planning (FP) for refugee populations in low-resource settings. Conversations would include opportunities and approaches for collaboration beyond provision of financial resources.</p>	12/2021	Ongoing		

			Timing for completion will be dependent on timing and outcome of "Recommendation 5, Action 1" and colleague availability.			
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