# The Motion Tracker

## Funders

<table>
<thead>
<tr>
<th>Funders</th>
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<tbody>
<tr>
<td>Reproductive Health Supplies Coalition</td>
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<tr>
<td>New Ventures Fund</td>
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<td>Partnership for Maternal, Newborn, and Child Health</td>
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<td>Bill and Melinda Gates Foundation</td>
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## Time Period

April 2014 - December 2021

## 2018 Partners

<table>
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<tr>
<th>Country</th>
<th>Partners</th>
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<tbody>
<tr>
<td>Nigeria</td>
<td>30</td>
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<tr>
<td>Tanzania</td>
<td>45</td>
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<tr>
<td>Uganda</td>
<td>75</td>
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<tr>
<td>Zambia</td>
<td>53</td>
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**Total: 203 partners**
What Is a Commitment?

Commitment [ˈkʌmɪt-mənt]
noun

1. A specific statement of intent outlining actions the commitment maker will undertake and objective to be pursued.
2. An opportunity to catalyse collective action on a specific agenda or issue.

For FP2020, commitments function as a blueprint for collaboration, providing partners with a shared agenda and measurable goals.
Why Monitor Commitments?

Record progress and address barriers

Existing Issues

- No structures for follow-up
- Disjointed understanding of commitments and responsibilities
- Less engagement and participation of civil society
- Bias toward tracking measurable indicators (e.g. mCPR, unmet need)
- Less emphasis on processes
- ‘Blame and shame’ between civil society, development partners and government

The Motion Tracker

- Platform to engage using partnership model
- Mechanism to coordinate commitments made by each country
- Opportunity to publicize all commitments and outcomes
- Transparency among partners
- Progress measured
- Barriers identified and addressed
How does the Motion Tracker work?

The Motion Tracker is a customized, dynamic framework for strengthening accountability and drive action by keeping commitments visible and highlighting progress while fostering partner participation, engagement and ownership to address bottlenecks to achieving commitments.

01. Identification of the Commitments
   - Work with government and local partners to identify FP2020 commitments

02. Classification of Commitments
   - Collaborate with government and civil society to classify commitments as either implicit or explicit statements

03. Deconstruction of Commitments
   - Deconstruct the commitments by analyzing background documents

04. Categorization of Commitments
   - Categorize the commitments according to the World Health Organization (WHO) health system building blocks

05. Development of Commitment Performance Indicators
   - Work with a network of family planning practitioners and policymakers to develop performance indicators for tracking progress against each commitment statement

06. Implementation with Targeted Partner Engagement
   - Engage stakeholders to identify and acknowledge partner action, showcase progress and celebrate success as well as identify barriers and actions to accelerate progress
Complementarity of the Motion Tracker

**Motion Tracker**
- Quarterly data:
  - Uganda, Zambia and Tanzania
  - Finance, Policy, Service Delivery, Supply Chain, Technology
- Over 90 countries

**PMA 2020**
- Annual data:
  - 10 FP2020 priority countries in Africa and Asia
  - Utilization, Demand, Choice, Quality, Access
- 69 focus countries

**DHS**
- Data every 5 years:
  - Reproductive history, Method Knowledge/Use, Fertility preferences
- Over 90 countries

**FP2020 Commitments**
- Reproductive history, Method Knowledge/Use, Fertility preferences

**Track20**
- Annual data:
  - CPR, Commodity security, Choice, Quality of services, FP expenditure
- 69 focus countries

**THE MOTION TRACKER**
Benefits of the Motion Tracker

- Adaptable, dynamic system applicable at global, regional, national and sub-national levels
- Tracks both financial and non-financial commitments
- Tracks actions of commitment makers and other actors toward achievement of commitments
- Recognizes the voices of champions and stakeholders, ensures continuous engagement
- Advocacy tool for improving transparency
RESULTS FY2018/19
(JULY-DECEMBER 2018)
Objectives

Goal: Accelerate the fulfillment of the targeted number of fundamental commitments to the updated EWEC Global Strategy and Family Planning 2020.

The aim is to support countries meet their country-specific commitments using the Motion Tracker© which leverages both the expertise and resources of national partners as well as those of the International community.
Methodology

Sampling technique:
- Purposive (partner matrix)
- Snow-balling

Data collection techniques:
- Key Informant Interviews
- Desk reviews

Response rate: 76% (n=108 organisations)

Limitations:
- Low knowledge of commitments
- Low reporting rates
- Extensive time taken amidst conflicting priorities
- Reporting officers changing organisations
Accountability by results: Partner Engagement and Participation

- Govt
- Dev't Partners
- UN agencies
- Int'l NGOs
- local NGOs
- FBOs
- Associations

Number of partners

FP2020
EWEC Global Strategy

THE MOTION TRACKER
Accountability by results: Participation by HSS blocks

FP2020
- Financial Management: 25%
- Leadership & Governance: 17%
- Service Delivery: 31%
- Human Resources for Health: 11%
- Access to Essential Medicines: 9%

EWEC Global Strategy
- Financial Management: 54%
- Leadership & Governance: 8%
- Service Delivery: 13%
- Human Resources for Health: 16%
- Access to Essential Medicines: 9%
Review of Progress

Kindly refer to the handouts in your folders
a) FP2020
b) EWEC Global Strategy
Finance –related Barriers

- Advocate for increased domestic financing including handling fees for ADS
- Resource mapping for RMNCH
- Undertake budget tracking of resources for adolescent FP under GFF
- Fast track the ongoing process for establishment of a NHIS bill
  - Incorporating all stakeholder inputs
Leadership and governance–related Barriers

- Key policies and strategies pending approval
  - Emergency Medical Services policy
  - National Adolescent Health policy
  - Pharmacy Bill
  - Communication Strategy for behaviour change
Service delivery –related Barriers

• Low data use at all levels
• Low financing of the Refugee Health and Nutrition Plan
• Weak multi-sectoral partnerships
• Inadequate transport and funding for district level coordination and support supervision
• Knowledge gap among practicing providers
Human Resources for Health –related Barriers

- Poor / inadequate infrastructure (including staff accommodation).
- Inadequate staffing at all levels
  - a significant number of posts are not filled
  - current staffing norms not commensurate with the services provided and workload.
- Inadequate staff supervision at all levels
Access to Essential medicines–related Barriers

• Stocks outs of key commodities at facility level owing to inadequate budget allocation for EMHS.

• Handling fees for the Alternative Distribution Mechanism

• Mobilize resources dedicated to disposal of expired medicines
Lessons learned

• Less Visibility for EWEC Global Strategy commitments

• Partnerships are essential for achievement of Commitments

• Provided a platform for sharing and learning around family planning, challenges and opportunities among stakeholders
Acknowledgements

- PMNCH
- Ministry of Health
- All partners
THANK YOU