PMNCH 26th Board Meeting
14 December 2020, 12:00 – 15:00 CET
15 December 2020, 12:45 – 15:00 CET (12:00 – 15:00 CET Board Members only)

Document Title:  PMNCH-B26-2020; 4.c. PMNCH Call to Action 24-month campaign plan

Summary:  In July 2020, PMNCH Board Chair, Rt Hon Helen Clark, launched a Call to Action on COVID-19 on behalf of all of PMNCH’s more than 1,000 members. Since then, a 24-month campaign (2021-2022) has been developed to take forward the COVID-19 Call to Action, mobilizing and aligning partners behind the seven main asks.

The campaign plan, developed by the PMNCH Advocacy Working Group, proposes four main strategies and related activities to realize the seven asks in the Call to Action on COVID-19: (i) high-level political engagement; (ii) community mobilization; (iii) constituency mobilization; and (iv) media mobilization.

Actions Required:  Approve the Call to Action 24-month campaign plan.
Draft Campaign Action Plan (Oct 2020): PMNCH COVID-19 Call to Action

Overview
- PMNCH Board Chair Helen Clark launched a Call to Action on COVID-19 in July 2020 on behalf of all 1,100 PMNCH members;
- A 24-month campaign (2021-2022) is proposed to take forward the Call to Action, mobilizing and aligning partners behind 7 main asks;
- This campaign plan, advised by the PMNCH Advocacy Working Group, moves the PMNCH 2021-2015 Strategy into action, recognizing the challenges posed by COVID-19 in protecting the progress already achieved for women, children and adolescents everywhere;
- This campaign plan proposes specific advocacy outcomes, targets, and activities at country, regional and global levels through four main strategies: (1) High-level political engagement; (2) Community mobilization; (3) Constituency mobilization; (4) Media mobilization;
- This campaign will unite, amplify and build on the advocacy work of individual organizations: PMNCH partners at country and regional levels will agree on locally relevant advocacy targets, opportunities, and leadership for leveraging concrete government commitments;
- The success of this plan will depend on effective collaboration of partner-led working groups, enabled by digital tools/approaches;
- This plan will be monitored through SMART indicators aligned with the wider results framework of the 2021-2025 PMNCH Strategy.

Our Vision
Adapted from the PMNCH Call to Action on COVID-19: https://www.who.int/pmnch/media/news/2020/call-to-action-on-COVID-19/en/

The health and rights of women, children and adolescents are protected, promoted, and prioritized during COVID-19 response and recovery through strengthened political commitment, policies and domestic resource mobilization and financing, supported by ODA, for:

1. Sexual, reproductive, maternal, newborn, child, and adolescent health (SRMNCAH) services, supplies, and information and demand generation including for contraception, safe abortion, immunization, safe delivery, stillbirth prevention, and mental health
2. Advancement of sexual and reproductive rights and gender equality
3. Quality care, including respectful and dignified care, and effective community engagement and redress mechanisms
4. Recruitment, training, equal and fair pay, and safe working conditions, including protective personal equipment for frontline health workers, notably midwives and nurses
5. Social protections, including food and nutrition security, for marginalized and vulnerable groups and enhanced data to better understand and address disparities experienced by adolescents, refugees, the internally displaced, migrants, indigenous communities, persons living with disabilities, others
6. Functional, safe, and clean toilet and hand washing facilities and quality potable drinking water, with focus on healthcare centers, schools, and centers for refugees and internally displaced persons; and
7. Prevention of violence against women, children and adolescents through education and protection programs.

Expected campaign outcomes

| Outcome 1 | By March 2021, secure new, measurable commitments that advance the PMNCH Call to Action from 5 leading global and/or regional bodies. |
| Outcome 2 | By March 2021, secure new, measurable commitments that advance the PMNCH Call to Action from 5 priority country governments. |
| Outcome 3 | By September 2022, the 5 leading global and/or regional bodies fulfill their commitments. |
| Outcome 4 | By September 2022, the 5 country governments fulfill their commitments. |

Proposed targets

<table>
<thead>
<tr>
<th>Global/Regional Targets¹</th>
<th>Commitment by Target²</th>
<th>National/Sub Targets³</th>
<th>Commitment by Target⁴</th>
</tr>
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<tbody>
<tr>
<td>Global Fund to Fight AIDS, Tuberculosis and Malaria (GFTAM)</td>
<td><em>Example:</em> GFTAM’s 2021 strategy increases funding for interventions affecting women, children and adolescents by xx% PMNCH Call to Action Ask #1</td>
<td>Government of Francophone Africa country (TBC)⁵</td>
<td><em>Example:</em> $xx in functional and clean toilet and handwashing facilities, with emphasis on centres for refugees and internally displaced people PMNCH Call to Action #6</td>
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<td>BRICS (Brazil, Russia, India, China, and South Africa)</td>
<td><em>Example:</em> Resolution/communique, position statement or guidance document issued during 2021 BRICS meeting (host: Gov’t of India, Q4 2021) committing BRICS members to improving investment in women, children and adolescents PMNCH Call to Action Ask #1</td>
<td>Government of India</td>
<td><em>Example:</em> INR XXX to address violence against women and children (e.g., INR xxx to increase functional safe houses); INR XXX for social protection for migrant workers, including access to free transportation, nutrition, maternal health services, shelters Call to Action Asks #5 + #7</td>
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¹ Targets may include regional bodies, UN entities, professional bodies, major donor organizations or political platforms (e.g. coalition of current heads of state/government).

² Commitments should focus on new activities and intentions that can be implemented within the PMNCH Call to Action 24-month campaign period. Commitments should not be a continuation of previous commitments or a restatement of commitment to on-going work. Commitments should focus on measurable, high-level political declarations in relation to policy priorities, backed by financial resources intended to protect and promote women, children and adolescents throughout the COVID-19 pandemic and beyond.

³ These targets should include priority countries and the primary political target within the country. These can be included on the same line.

⁴ See footnote 2.

⁵ Francophone Africa country to be identified by the PMNCH Country Engagement Working Group, mapping to priorities of the PMNCH Humanitarian and Fragile Settings Working Group.
<table>
<thead>
<tr>
<th>Global/Regional Targets</th>
<th>Commitment by Target</th>
<th>National/Sub Targets</th>
<th>Commitment by Target (Illustrative)</th>
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<tbody>
<tr>
<td>African Union</td>
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<td>Example: African Union and Africa CDC commit to developing guidance and capacity for maintaining continuity of essential services as part of the Africa Joint Continental Strategy for COVID-19</td>
<td>Government of Kenya</td>
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<td>Example: Review of national policies, strategies and financing for adolescent and youth sexual and reproductive health (AYSRH) to ensure that the interventions targeting young people are responsive to their needs; meaningful inclusion of youth in accountability mechanism to plan, track implementation and validate results</td>
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<tr>
<td>PMNCH Call to Action Ask #1</td>
<td>PMNCH Call to Action Asks #2 + #5</td>
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<td>Organization of American States (OAS)</td>
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<td>Example: Declaration/resolution issued by OAS on behalf of member-states on the differentiated needs of women in social development and protection policies</td>
<td>Government of Mexico</td>
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<td>Example: Reestablish obstetric care services in XX hospitals in high population density areas and ensure referral mechanisms for care in these areas; increase funding for SRMNH by X, including earmarking for indigenous women’s health homes</td>
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<td>PMNCH Call to Action Asks #2 + #5</td>
<td>PMNCH Call to Action Asks #3 + #5</td>
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<td>Asia Pacific Economic Community (APEC)</td>
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<td>Example: Declaration by APEC member-states on the need to invest in emergency preparedness and health systems to benefit women, children and adolescents</td>
<td>Government of Nigeria</td>
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<td>Example: Increase domestic funding by xx% to the National Action Plan for WASH in the 2021 budget; legislative commitment for implementation of the Violence Against Persons Prohibition Act of 2015 across all states by 2021</td>
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<td>PMNCH Call to Action Ask #1</td>
<td>PMNCH Call to Action Asks #6 + #7</td>
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6 Targets may include regional bodies, UN entities, professional bodies, major donor organizations or political platforms (e.g., coalition of current heads of state/government).

7 Commitments should focus on new activities and intentions that can be implemented within the PMNCH Call to Action 24-month campaign period. Commitments should not be a continuation of previous commitments or a restatement of commitment to on-going work. Commitments should focus on measurable, high-level political declarations in relation to policy priorities, backed by financial resources intended to protect and promote women, children and adolescents throughout the COVID-19 pandemic and beyond.

8 These targets should include priority countries and the primary political target within the country. These can be included on the same line.

9 See footnote 2.
## Strategy 1: High-Level Political Engagement

**Aim:**
Mobilizing and engaging high-level leaders, politicians and decision-makers to strengthen political commitment, policies, financing and service delivery for women’s, children’s and adolescents’ health and well-being. This will be accomplished through bilateral engagement with member states; working with champions to create spheres of influence, including through the media; and supporting champion-led efforts to influence political platforms.

**Advocacy Working Group focal point:** Lars Gronseth, Norad

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<td><strong>National</strong></td>
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<td>1a) Engage key national leaders/key actors to strengthen political commitment</td>
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<td>- <strong>Meetings, media &amp; parliamentary engagement:</strong> Engage/mobilize national leaders in India, Kenya, Nigeria, Mexico and Francophone Africa country (TBC) through bilateral discussions, media interviews/commentaries, endorsement of country- and context-specific advocacy briefs and knowledge products, and other information-sharing and capacity building opportunities (e.g., Inter-Parliamentary Union events/processes; participation in national and sub-national Citizen Hearing events). (Reference Strategy 2a: Citizen hearings)</td>
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<td>- <strong>UN system:</strong> Engage national UN Resident Coordinators in India, Kenya, Nigeria, Mexico and Francophone Africa country (TBC) to increase prioritization of WCAH issues and inclusion of women’s, children’s and adolescent’s health needs in national response and recovery plans. Leverages PMNCH investments in multi-stakeholder platforms and PMNCH small grants to support multi-constituency and multi-sectoral collaboration.</td>
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<td>- <strong>Public events:</strong> Organize two large-scale virtual events as platforms for leveraging and announcing national commitments to women’s, children’s and adolescents’ health (e.g., Lives in Balance 2 in December 2020; Accountability Breakfast September 2021)</td>
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### Regional/Global

#### 1b) Support PMNCH champions to influence regional and global platforms

- **PMNCH champions** (e.g., PMNCH chair, past chairs, and Board members and others) leverage their membership and/or access to regional and global political and economic platforms (BRICS, AU, OAS, APEC) to exercise policy and financial influence for women’s, children’s and adolescents’ health.

### UN/Multilateral

#### 1c) Support high-level resolutions/communiques/declarations

- **PMNCH champions**, supported by other stakeholders. (Reference: Strategy 2 and 3, Community Mobilization and Constituency Mobilization) to influence the content/development of relevant high-level declarations and similar for endorsement at major multi-lateral fora (e.g., Commission on the Status of Women, ECOSOC, World Health Assembly, High Level Political Forum, UNGA, etc.), including addressing comprehensive sexual and reproductive health and rights programming, social inequities, etc. in the context of COVID-19

- Targeted outreach to at least 25 member states to support a UN resolution on youth and adolescent well-being in 2021

- Develop a background paper (i.e., Non-Paper”) on the value of long-term investments in the well-being of women, children and adolescents for India to propose as the 2021 BRICS chair

- Map and analyse agreed-upon actions by member states and the status of implementation related to UN Security Council resolution 2532 on COVID-19 (and other resolutions) to inform PMNCH’s high level political mobilization and outreach to heads of state. (Reference: Strategy 1a, Engage national leaders)
Strategy 2: Community mobilization

**Aim:** Organizing, mobilizing, and engaging the public to advocate for themselves. The value of this form of advocacy is that it is driven by the people. It is grounded in the belief that people matter, and that their collective voices are powerful in influencing decision-makers and in shaping policies and accountability at all levels of government, in particular as it relates to advancing commitments related to the 7 asks in the PMNCH Call to Action on COVID-19.

**PMNCH Advocacy Working Group focal point:** Kristy Kade, White Ribbon Alliance

### Activities

#### National/Regional

2a) Citizen hearings to create community demand for action
- Twice yearly virtual “citizen hearings” in India, Kenya, Nigeria, Mexico and Francophone Africa country (TBC), as well as in the Africa, Latin America, and Asia regions (approx. 16 per year/total). Communities describe their needs and demand accountability from leaders/decision-makers, amplifying the 7 asks in the PMNCH Call to Action on COVID-19. Community partners supported by small grants for planning/hosting. (Reference: Strategy 1a: Engage national leaders/key actors to strengthen political commitment)

2b) Community testimonials to inform policy/programming priorities
- Soliciting, producing, packaging and digital dissemination of community perspectives on gaps and priorities for women, children and adolescents in the context of COVID-19 and aligning with the Call to Action. Example: video reports/testimonials, digital- and paper-based survey evidence, social media
- High level champions and media to amplify community-based evidence to influence policy discussion and commitments. (Reference: Strategy 1a, 1b, 1c, High Level Political Engagement; Strategy 4, Media Advocacy)

#### Global

2c) Virtual march for gender/racial equality and UHC
- Community leaders in different countries/regions around the world lead a continuous 24-hour rally for justice on UHC Day 2021 until demands are met (Reference: Strategy 4c, Social media)
## Strategy 3: Constituency mobilization

**Aim:** Mobilizing the 10 constituency groups of PMNCH to work together in this strategic and coordinated campaign to achieve the 7 asks of the PMNCH Call to Action on COVID-19, aligning with the goals of the PMNCH 2021-2025 Strategy.

**PMNCH Advocacy Working Group focal point:** Desmond Nji, DESERVE/Cameroon Youth Network, PMNCH Adolescents and Youth Constituency

### Activities

**Global**

3a) PMNCH constituencies and members produce commitments to support the 7 asks of the PMNCH Call to Action on COVID-19
   - Support PMNCH constituency members in developing commitments related to their own focus areas, fostering action among partners in promoting the Call to Action. (Reference: Strategy 4d, Amplify through social media.)

3b) Launch PMNCH Advocacy Reference Group to link PMNCH constituencies and working groups/committees and mobilize support for the Call to Action
   - Encourage a minimum of three members from each PMNCH constituency and working group to join the PMNCH Advocacy Reference Group to foster broad-based action and cross-linkages between constituencies

3c) Launch a public sign-on campaign behind the Call to Action to generate widespread support and political pressure
   - “Protect the Progress” sign-on campaign to achieve at least 500 signatures by UHC Day 2020 and 1,000 signatures by World Health Day 2021. (Reference: Strategy 1b, Support PMNCH high-level champions)

3d) PMNCH Board meetings and e-Summits to rally partners behind the Call
   - PMNCH Board reviews progress on the Call to Action, linking to e-Summits (e.g., Lives in the Balance 2, Accountability Breakfast) to amplify Call

3e) Constituency sign-ons/declarations for specific Call to Action asks
   - Examples: Midwifery (sign-on campaign backing Ask #4, Support for frontline health workers, pegged to the May 2021 ICM congress); Adolescent well-being (drives advocacy for dedicated UN Declaration). (Reference Strategy 1c, Support high-level resolutions)
# Strategy 4: Media mobilization

**Aim:** Strengthening national, regional and global media capacity to inform and advocate effectively for women’s, children’s and adolescents’ health issues, focusing specifically on the 7 asks of the PMNCH Call to Action on COVID-19.

**Advocacy Working Group focal point:** Lori McDougall, PMNCH Secretariat

**Activities**

### National/Regional

4a) **Support for media story production and dissemination**
- Small grants for stories/series spotlighting 7 asks in the Call to Action, including leader interviews and citizen evidence. (Reference: Strategy 1a, Engage key national leaders; Strategy 2a and 2b, Citizen evidence);
- Dissemination of new evidence/commitments (e.g., national/regionally relevant data from stillbirth estimates, BRICS “non-paper”; State of the World’s Midwifery Report; Lancet series on WCAH and conflict, commitments made, etc.). Reference: Strategy 1c, Support resolutions;

4b) **Media summits for capacity building and partnership strengthening**
- National media e-summits (5) in India, Kenya, Nigeria, Mexico and Francophone Africa country with the media and PMNCH partners, to build mutual knowledge, capacity and media engagement;
- Develop digital database of media and PMNCH partner contacts for continued engagement and follow-up post-Summit. (Reference: Strategy 4a, Support for story production and dissemination)

### Global

4c) **Social media to amplify 7 asks of the PMNCH Call to Action**
- Social media to amplify signature campaigns (e.g., “Protect the Progress”), high-level declarations, PMNCH statements on midwifery and adolescent well-being (Reference: Strategies 1c, 3c, 3e);
- Podcast series of Helen Clark-led discussions with other champions and leaders, tied to e-Summit events. (Reference: Strategy 1a, 1b);
- Global media/PR campaign on interim report on the Call to Action campaign, launched at PMNCH Accountability Breakfast 2021;
- Monthly release of web, e-Blast, social media posts on Call to Action campaign, including latest on government and partner commitments. (Reference Strategy 3a, PMNCH constituencies support Call to Action)