

Reporting back: Advocacy group

Partnership for Maternal, Newborn and Child Health

PMNCH Board Retreat
Geneva, 13th September 2008

Advocacy activities

Activities (as per Table 5.1, page 19 of Issues Paper)	Global	Regional	National
1a. OK – ‘health and development communiques’; international groups like IMF and events (e.g. HLE in New York)	✓		
1b. OK – ‘donors/ stakeholders/ other global funds’	✓	✓	✓
1c. Delete – considered a task			
1d. Include ‘develop core messages (e.g. investment case, equity) + evidence, where possible’	✓	✓	✓
1e. Modify as ‘Increase outreach to media’	✓	✓	✓
1f. Modify as ‘Actively canvass’, and include ‘all development partners’	✓	✓	✓

Advocacy activities

Activities (new, discussed by group)	Global	Regional	National
1g. Increase public awareness/ engagement	✓	✓	✓
1h. Mobilise national champions/ stakeholders/ leaders for MNCH issues			✓
1i. Explore/ identify innovative channels, tools and technologies for advocacy	✓	✓	✓

Illustrative advocacy outputs

- **Clear commitment and greater resources to MNCH in the G8 and other international/ political fora**
- **Increased funding from all global funds for MNCH cause**
- **Establishment of a pool of MNCH champions at national/ global level**
- **'MNCH friendly' (to be defined) policies and budgets**
- **Recognition by funding agencies of MNCH as a global public good (similar to HIV/ AIDS, Malaria etc.)**
- **Increased public discourse and media coverage**

- **Agreed with Bullet points 1 – 3 on Table 5.1, page 19 of Issues Paper**
- **Shared agenda among partners and drawing on comparative advantages/ strengths of each partner**
- **Shared benefits and risks among partners**

Value added of some version of PMNCH

Yes, reasons being:

- **Only global entity advocating for MNCH**
- **Only partnership with the full range of stakeholders/ partners**