

Advocacy and Influencing Impact Reporting Tool

This tool has been developed to gather further information and evidence on CARE’s advocacy or influencing win. At CARE, advocacy is defined as “*the deliberate process of influencing those who make decisions about developing, changing and implementing policies to reduce poverty and achieve social justice.*”¹ Influencing and advocacy can go beyond government policies, it can include influencing governments, donors or NGOs to adopt a CARE program model or influencing the private sector to change their company policies or operating practices.

This tool captures the significance of the win, the level of CARE and our partner’s contribution, who stands to benefit from the change, and what evidence do we have to support a claim of change or impact. With the wide range of successes within influencing work and the various roles CARE may have played in this win, this tool allows us to identify how significant the win is as well as the significance of CARE’s contribution and our partners.

Success:	
<p>1. What is the advocacy or influencing win? Include details such as:</p> <ul style="list-style-type: none"> • A description of the win, and how it was achieved • start date and end date • any incremental wins that happened along the way • the main decision makers that CARE influenced to achieve this win <p>2. Why is this advocacy or influencing win significant? What was the reality prior to the advocacy/influencing win that the win aims to address?</p> <p>3. If this win is part of a larger advocacy or long-term program goal, please describe the larger advocacy/influencing goal?</p>	<p><i>Advocating for Canadian/G7 coordinated response on Myanmar/Bangladesh (Dec 2017 – Jun 2018)</i></p> <p><i>Given continued inaction by the international community in response to the most recent crisis in Myanmar and Bangladesh CARE USA, CARE NYC and CARE Canada coordinated efforts to support and shape Canadian, USA, G7 and UNSC leadership in response to the humanitarian crisis in Myanmar/Bangladesh, in the context of the Canadian G7 Presidency.</i></p> <p><i>Outcomes of this advocacy efforts included:</i></p> <ul style="list-style-type: none"> - G7 Foreign Minister commitments to a more coordinated effort to sanction responsible Myanmar authorities; - Announcements of new coordinated sanctions by some G7 countries; - Adoption of \$300 million/3 year strategy to support a coordinated response to the crisis by the Government of Canada; - Ongoing consultations with CARE Canada and other civil society organizations towards a Government of Canada strategy on NGO access in Bangladesh. <p><i>Given its history of support for democracy and human rights in Myanmar (including the Honourary citizenship bestowed on Aung San Suu Kyi), Canada has been a leader among states speaking out against the most recent atrocities in that country that began on August 25, 2017. This included the appointment of the Honourable Bob Rae as Canada's Special Envoy to the crisis, as well as humanitarian assistance to displaced people in Bangladesh. Given the severity of the crimes in Myanmar, and the extend of the humanitarian needs in Bangladesh (with an approaching monsoon anticipated to make this even more severe), however, Canadian and international action was increasingly looking like "too little, too late." This was having the effect of emboldening Myanmar military leaders to undertake further offensives against other minorities, while taking measures that would further imperil or erase the possibility of safe, dignified and informed returns by people displaced from Rakhine state. CARE Canada's engagement and leadership as a convener and advocate on this crisis strengthened and further shaped Canadian leadership in its own policies, and in pushing for greater attention to the crisis by G7 leaders.</i></p>

¹ See CARE International Advocacy Handbook for more information

Contribution:	
<p>4. On a scale from high, medium, or low, how would you rate CARE's contribution to the advocacy/influencing win? <i>(please refer to the scale below the table)</i></p> <p>5. Describe CARE's contribution, specify CARE's unique role as well as the role of other main actors including partner organizations and coalitions.</p> <p>6. What evidence is there that supports our claim to have contributed to this win?</p>	<p><i>High.</i></p> <p><i>CARE USA, CARE NYC and CARE Canada coordinated efforts to bring CARE's CDs from Myanmar and Bangladesh to Ottawa, Washington and NYC in April 2018. Given Canada's G7 Presidency and the meeting of G7 Foreign Ministers on April 22-24, the tour provided a unique opportunity for CARE to support and shape Canadian, USA, G7, and UNSC leadership in response to the humanitarian crisis in Myanmar/Bangladesh.</i></p> <p><i>In order to support and shape Canadian leadership on this issue, especially in the context of Canada's G7 Presidency, CARE Canada led efforts to organize an Experts' Roundtable and press conference on the Crisis in Myanmar and Bangladesh on 16 April, 2018 - less than a week before the G7 Foreign Ministers' Meeting. The Roundtable produced a detailed "Chairs Summary" and succeeded in establishing a more united front among human rights organizations, humanitarian organizations, think tanks and academics, Rohingya and Myanmar diaspora groups, and in carving out a more substantial role for civil society in informing and influencing related policy discussions. The Roundtable and subsequent press conference also involved high-level authorities in the Canadian political landscape, including Hon Bob Rae, Hon Lloyd Axworthy, Hon Allan Rock, and influential Parliamentarians. This provided direct influence over key Government of Canada interlocutors on the issue, and boosted direct civil society access to the halls of power within the Government of Canada. Resulting meetings with political staff from the office of the Ministers of Foreign Affairs and International Development allowed for civil society to drive its messages to the highest levels, and paved the way for ongoing government consultations with civil society in the roll-out of Canadian policy in response to the crisis. CARE's convening efforts also generated a momentum for ongoing, coordinated activities by a range of Canadian civil society organizations. While many of the activities were undertaken in coordination with other organizations, the initial impetus came from CARE Canada - absent which, many of the subsequent coordinated efforts would not have happened.</i></p>
Potential Impact/Reach:	
<p>7. What is the impact population that is expected to benefit from the advocacy/influencing win? Describe how the win will translate into a better life for these participants?</p> <p>8. If the change we have influenced is fully implemented, can you quantify the number of lives that could potentially be reached by this advocacy win? <i>Please explain how you calculated this number.</i></p>	<p><i>Canadian and G7 leadership on this issue has the potential to impact the humanitarian operations for a large number of the 1M people displaced from Myanmar now in Bangladesh, as well as the estimated 1-2 hundred thousand Rohingya that remain in Myanmar. Leadership on this crisis from Washington and UN-NYC could further help mobilize international policy leadership and funding towards the \$951M JRP.</i></p>
Actual Impact/Reach:	
<p>9. Do we have any evidence to date that these expected outcomes have been achieved? If so, please describe how the win has translated into a better life for the impact population.</p> <p>10. Can you quantify the number of lives that have been improved? <i>Please explain how you calculated this number.</i></p>	<p>N/A</p>
Reflection and Learning:	

<p>11. What were the main challenges you faced, and were they overcome? If so, how?</p> <p>12. What influencing tactics were particularly effective/ineffective?</p> <p>13. What would you do differently next time?</p> <p>14. What are the next steps or follow-up actions for this advocacy/influencing win?</p>	<p><i>CARE's main challenges in advocating around this issue is our inability to use the 'R' word in public communication. This meant that we needed to lead from behind - identifying and supporting other individual and organizations to speak up on the issue. This curtails our ability to maintain message discipline, and leads to more diffuse policy recommendations and asks. This was managed to a large extent by the heavy lifting we did in the organization and shaping of the agenda for the Experts' Roundtable, and by working with diaspora groups with limited policy and advocacy experience to shape their remarks in press conferences, etc. Coordination between CARE Canada, CARE New York and CARE USE around the North American advocacy tour by CARE's CDs for Myanmar and Bangladesh also proved highly effective: their presence opened doors to parliamentarians and other political offices, while also providing a source of legitimacy and ground-level knowledge in the policy dialogues we organized and participated in.</i></p> <p><i>Next steps include:</i></p> <ul style="list-style-type: none"> - <i>In Canada: seizing future opportunities to inform the roll-out of Canada's strategy in the region, and providing updates to help inform ongoing lobbying by civil society organizations, academics and others with whom we've developed new relationships through this process..</i>
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Rating scale²:

High: There is reason (evidence) to believe that the change would not have happened without CARE's efforts. This could also include significant actions from partners which we support technically or financially.

Medium: There is reason to believe CARE contributed substantially, but along with other partners

Low: CARE was one of a number of actors that contributed, but this change may have happened regardless of CARE's involvement

² This rating scale has been used by Save the Children to measure contribution in advocacy work