Recommendations for the G8 Deauville Summit

Summary of Recommendations
InterAction's G8/G20 Task Force urges G8 leaders to implement the following recommendations at the May 26-27 summit in Deauville, France. As the largest association of U.S.-based, non-profit organizations, InterAction and its members deal daily with the impact of global poverty. The current financial crisis has had a serious impact on commitments made by G8 members to developing nations. Through strong actions and a commitment to greater transparency, the G8 should leverage good governance efforts by its partners and remove impediments to economic growth. In a bid to maximize the outcomes of the Deauville summit, the following steps should be taken:

Food Security, Agriculture and Nutrition
1. Fully fund the L’Aquila $22 billion pledge.
2. Rebalance donor funds to improve nutrition and reach small-scale producers.
3. Integrate resilience to climate change and civil society partnerships into food security plans.

Maternal, Newborn and Child Health (MNCH)
1. Implement MNCH commitments made under the 2010 Muskoka Initiative and ensure much needed international engagement, coordination, accountability and investment to achieve Millennium Development Goals 4 and 5 through active support of the UN Secretary-General’s Global Strategy on Women’s and Children’s Health.
2. Coordinate donor funding to support integration of services within the health and other development sectors, and ensure equitable access to health services across the full continuum of care.

Accountability
1. Direct the G8 Accountability Working Group (AWG) to seek outside input to inform its reporting.
2. When the AWG establishes a new expert group, make public its terms of reference and the names and affiliations of all of the experts; then update the information in a timely and transparent fashion.
3. Require that the AWG conduct a comprehensive evaluation of all G8 commitments, make it publicly available 30 days before each summit and hold a public comment period.
4. Publish the report schedule (with probable topics) through 2015.
Detailed Recommendations

Food Security, Agriculture and Nutrition
G8 leaders created the 2009 L'Aquila Global Food Security Initiative and pledged to invest $22 billion over 3 years in food security, to encourage rural development in poor countries, and create sustainable solutions for about 1 billion hungry people worldwide. The leaders also decided to promote new investments and improved efficiency of aid programs and regional coordination by involving all partners. This initiative still lacks a clear action plan, transparent timeline for fund delivery or accountability framework. To this end, we urge the G8 to:

1. **Fully fund the L'Aquila $22 billion pledge.**
   Establish a robust accountability framework requiring nations to honor these commitments, including to the Global Agriculture and Food Security Program. This should include annual reporting on country allocations; types of interventions, including assistance for small-scale producers; results indicators, including child stunting and wasting; and donor disbursements against pledges. We applaud the United States government for its progress toward these accountability and transparency measures. The L'Aquila commitments should be supported by strengthening the U.N.-based Committee on World Food Security.

2. **Rebalance donor funds to improve nutrition and reach small-scale producers.** We applaud the 2010 Muskoka G8 focus on reduced child and maternal malnutrition as a primary outcome of the Food Security Initiative. However, the Muskoka Accountability Report indicates that G8 pledges for nutrition are less than 3 percent ($426 million) of the bilateral total. Over 50 percent ($9 billion) is pledged for agricultural, agro-industries, forestry and fishing. To ensure that pledges translate into tangible results for the nearly 1 billion hungry people worldwide, G8 leaders must rebalance donor funds to improve nutrition and reach small-scale producers. We strongly encourage G8 nations to participate in and support the Scaling Up Nutrition (SUN) movement to raise the priority of direct nutrition interventions and nutrition-sensitive development in nations affected by high rates of child malnutrition.

3. **Integrate resilience to climate change and civil society partnerships into food security plans**
   through impact and risk analysis, vulnerability assessments to identify and target the most vulnerable populations and help them develop increased adaptive capacity. Ensure that civil society, including local and non-governmental organizations and vulnerable populations and communities, are full partners in food security planning and program implementation, monitoring and evaluation. Climate change threatens to reduce agricultural productivity by half in parts of sub-Saharan Africa\(^1\) and cause yield declines and price increases for rice, wheat, maize and soybeans, leading to an increase in child malnutrition by 20 percent by 2050 relative to a world with no climate change\(^2\). Identifying the most vulnerable populations and integrating risk and impact analyses ensure that food security approaches are responsive to a changing climate and does not lead to increased vulnerability to climate change. Participation of civil society and vulnerable populations is critical to ensure that programs incorporate local knowledge and respond to the needs of the most vulnerable populations.

Maternal, Newborn and Child Health
We welcome the G8's recognition of unacceptably slow progress toward achieving Millennium Development Goals (MDGs) 4 and 5\(^3\) and the group’s decision to prioritize maternal and child health by launching the Muskoka Initiative. The Muskoka Initiative and President Barack Obama’s Global Health Initiative (GHI) offer a critical opportunity to galvanize international action to expand existing successes and accelerate progress in improving maternal, newborn and child health (MNCH). To this end, we urge G8 leaders to take the following steps.

1. **Implement the MNCH commitments and support MDGs 4 and 5**
   made under the 2010 Muskoka Initiative. Ensure international engagement, coordination, accountability and investment to achieve MDGs 4 and 5 through support of the UN Secretary-General's Global Strategy on Women's and Children's Health.

2. **Integrate health services.** Coordinate donor funding to support integration of services within the health and other development sectors and ensure equitable access to health services across the full continuum of care.

Both of these sets of actions should be reinforced by continued G8-civil society dialogue and periodic meetings of G8 Health/Development Ministers.

**Background.** The G8 Muskoka Initiative committed its members to support significant progress in developing countries with high rates of maternal and under-five child mortal-
We urge the G8 to adopt the following recommendations to build on progress towards fully implementing their commitments. At the Deauville summit, we call on G8 leaders to articulate support for greater civil society engagement year round, which is in the interest of all concerned—particularly those whose urgent needs have called us all to action.

To that end, the G8’s Accountability Working Group (AWG) and any other sector- or issue-specific groups it establishes, should function in accordance with the following principles:

1. **Inputs.** G8 members should direct the AWG to receive input from other international organizations (e.g., the U.N., specialized agencies, the OECD Development Assistance Committee and the African Union), recipient governments and a broad spectrum of civil society to inform their reporting.

2. **Terms of Reference.** The AWG should publicly release the terms of reference for each expert group and the names and affiliation of all experts as soon as they are identified. Meeting schedules for such groups and a detailed agenda should be publicly available at least 20 days before any meeting.

3. **Comprehensive Evaluation.** The AWG should conduct a comprehensive evaluation and publish G8 commitments consistent with the Muskoka Accountability Report’s criteria for commitments.

4. **Report Release.** Make public the AWG annual report 30 days before the summit and release a schedule of future reports, with provisional topics, through 2015. This should apply to both years in which the report is thematic (as it is this year) and years when it is comprehensive in scope.

**Background.** We welcome the AWG and its duty to prepare reports. The suggestion to alternate between sector-specific or thematic reports one year—such as the 2011 focus on food security and health commitments—and more comprehensive reviews the next year is reasonable. The AWG should also look to civil society and recipients for full participation in the evaluations.

As AWG’s members have noted, better-crafted commitments are needed to improve the G8’s ability to measure progress. We support the recommendations to do so by: (1) identifying clearly defined, time-bound objectives, that measure progress against indicators, and are tied to results-oriented outcome targets; (2) establishing baselines for financial commitments and differentiating between new and old funding; and (3) designating how and when the G8 will report on each commitment.

**Accountability**

The Deauville Accountability Report is a step towards improved accountability. But the report is disappointing in that it presents disbursements in “current dollars” (not taking into account inflation) with only a few references to “constant dollars”. The report reaffirms its adherence to the Paris Declaration’s Aid Effectiveness Principles. Unfortunately the “specific recommendations” are general statements to “improve transparency”, “build common sets … of performance criteria”, “mapping of vertical funds and multilateral donors”, and pilot evaluations. The recommendations propose no deadlines nor do they give implementation plans.
The Muskoka Report calls for the exemption of “aspirational commitments” from the accountability process. We disagree with that approach. All G8 commitments—and especially aspirational ones—should influence the global policy agenda, set G8 priorities and catalyze action that should be tracked.

Among otherwise positive signs, three impediments cast doubt on the G8’s commitment to clear and transparent monitoring and reporting: 1) the G8 accountability reporting process is not transparent. 2) there are no indications of the G8’s willingness to involve civil society in monitoring and reporting efforts, despite the fact that many G8 states do so in their own development assistance programs. 3) civil society’s access to the G8 summit is restricted.

The G8 regularly convenes specialized groups of experts to consider issues in-depth. These issue-oriented groups should function in a transparent fashion. As key implementers of the G8’s initiatives, we consider expert groups essential actors in gathering and receiving information from international organizations, governments and civil society to inform G8 decision-making.

Many organizations contributed to one or more recommendations in this policy statement. While the statement is not designed to be a consensus position of the contributors, it has been endorsed by InterAction’s leadership.

**Accountability**
ActionAid USA  
Bread for the World  
Global Health Council  
InterAction  
Management Sciences for Health  
Oxfam America  
Save the Children  
Trade Union Sustainability Development Unit

**Maternal, Newborn and Child Health**
CARE  
Family Care International  
Global Health Council  
InterAction  
International Medical Corps  
Management Sciences for Health  
Oxfam America  
PATH  
Population Action International  
Save the Children

**Food Security, Agriculture and Nutrition**
ActionAid USA  
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CARE  
PATH  
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International Medical Corps  
Oxfam America  
Save the Children

**End Notes**


3. MDG 4 aims to “reduce by two thirds, between 1990 and 2015, the under-five mortality rate” and MDG 5 aims to “reduce by three quarters the maternal mortality ratio” and “achieve universal access to reproductive health”

4. This is described in the Consensus for Maternal, Newborn and Child Health statement.