



Wahana Visi awarded grant from Global Partnership for Social Accountability

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Innovative proposal focuses on improving governance in services for maternal and child health
The Global Partnership for Social Accountability (GPSA) is pleased to announce the first grants to 12 civil society organizations (CSOs) in 10 countries. The GPSA grants, totaling more than US\$9 million over the next five years, will provide strategic support to projects in which civil society and governments collaborate to resolve critical governance problems in developing countries. The 12 projects were selected from a total of 216 proposals submitted by CSOs in response to the first GPSA Call for Proposals, launched in February 2013. The Call was launched in the first 12 opted-in countries: Bangladesh, Dominican Republic, Honduras, Indonesia, Kyrgyz Republic, Malawi, Moldova, Mongolia, Mozambique, Philippines, Tajikistan and Tunisia.
In Indonesia, Wahana Visi will build on the success of a two-year multi-stakeholder coalition, Maternal and Child Health Movement, to scale-up its ongoing project aimed at improving governance and delivery of maternal, newborn and child health (MNCH) services. Through user-friendly information on health minimum standards and budgets, the expanded program will seek to actively mobilize community members to engage with and advocate for improvements in their local health service delivery chain. To accomplish these objectives the program will utilize a combination of different transparency and social accountability tools, including civic education through ICT and social media, social audits, services scorecards, research and targeted advocacy. This multi-sectoral project will involve stakeholders from the Ministry of Health, the Ministry of Peoples Welfare and the Special Envoy to the Indonesian President on the MDG. The program will work as well with sub-national authorities to simultaneously address policy and implementation gaps on critical MNCH service blockages, such as the national village midwife policy, and the availability, role and training of posyandu and puskesmas health cadres.
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