Dear Members and Friends,

Another successful year with the Geneva Global Health Hub lies behind us! I want to thank all members and friends, and our Executive Secretary, Thomas Schwarz for the unwavering commitment and enthusiasm that makes the Hub a vibrant and increasingly recognized place for civil society to meet, plan and strategize regarding our involvement in global health policy.

2018 saw two significant global health celebrations: The World Health Organization turned 70, and it was the 40th anniversary of the Alma-Ata Declaration on Primary Health Care. G2H2 members participated actively in the preparations for both celebrations, as well as in all the associated meetings, assemblies, and events. We reminded WHO and all the global health players that “Health for All” still has a long way to go. The social, political and economic determinants of health that were at the core of the visionary Alma Ata Declaration appear to have been forgotten, and so has the Alma-Ata call for a “new international economic order”.

Besides its ongoing work, the Hub clarified its mandate through internal discussions and development of the new biannual 2019-20 work plan. The G2H2 Steering Committee held a series of open discussions, and a new working group on WHO and global health governance and financing was initiated. Focusing on an issue that is at the roots and core of G2H2 and has brought us together, that working group will also explore options of moving beyond the role of being an advocacy facilitator towards a more active engagement in advocacy. We are happy to deepen these discussions during the Annual General Meeting planned for May 2019 when the Steering Committee will present the work plan for discussion and approval.

Finally, in 2018 we welcomed some new members to the G2H2. Steady growth increases our credibility as a relevant civil society space, and provides the necessary funding, for the time being at least, to maintain our independence and continue our ongoing work.

I encourage all members of G2H2 to think of potential new members of the Hub and invite them to join our efforts. Only then can the Hub look forward to a sustainable future as a vibrant space and discussion forum for civil society involvement in global health.

Andreas Wulf
President
2018: MIXED MESSAGES AND MIXED FEELINGS

The Geneva Global Health Hub is a civil society project designed to facilitate work related to Geneva global health actors and processes. Simply put, “we are building a strong civil society space in Geneva for more democratic global health governance.” 2018 has left us with mixed feelings about the scope and quality of this civil society space, in particular as it relates to the World Health Organisation (WHO).

On the one hand, the new WHO leadership says it looks forward to a renewed engagement with civil society. WHO Director-General Tedros launched two thematic civil society teams in the preparation for the UN High-Level Meetings on tuberculosis and NCDs, and mandated a “WHO - Civil Society Task Team” to propose concrete actions to improve relations between WHO and all levels of civil society. In the preface of the Task Team’s report “Together for the Triple Billion - a new era of partnership between WHO and civil society,” published in December, Dr Tedros lauded civil society partners as providing “unique and powerful voices of the people that WHO serves.”

That said, the challenge is to assess whether these initiatives and the related partnership narrative of the new WHO leadership represent a real opening and genuine spirit of engagement with civil society, or if they reflect institutional confusion, improvisation and lack of a clear strategy. Given the current balance of power, the launch of the various new “civil society teams” can be seen as a diversion strategy or an attempt to patronise and manipulate civil society actors. Institutionally speaking, the net result of these initiatives has been further fragmentation of WHO governance. The fact that “civil society” (in relationship to WHO) is not defined, confuses the issue of who has a place at the table and why, and who is excluded. These are key issues of legitimacy, power, and representation.

But G2H2 members also reported that all levels of WHO staff have been responsive in their technical contacts as well as formal and informal consultations. This can be seen as a sign that some “public servants” are keen to get support for their efforts to counter the current mainstream global health discourse.

The WHO “Framework of engagement with Non-State Actors” (FENSA) and the dominant “multi-stakeholder” and “partnership” narrative contribute to the confusion. In this context, G2H2 continues to promote inclusive WHO engagement with civil society organisations that represent public, rather than private, interests. As the shortcomings of FENSA and its implementation demonstrate, the various “Non-State Actors” cannot be meaningfully packaged together.

In this context, 2018 saw unexpected and challenging discussions on the extent to which civil society should be represented at the meetings of the WHO governing bodies (Executive Board and World Health Assembly). In an overdue debate on governance reform launched at the EB meeting in May, member state representatives clearly stated a preference for reducing the role of, and space for “Non-State Actors” in these meetings. Subsequent informal consultations, euphemistically called “recommendations to stimulate the participation of Non-State Actors in official relations in governing bodies meetings”, resulted in the January 2019 EB report that contained proposals that, if implemented, could restrict or complicate civil society engagement in WHO governing bodies. NGO representatives responded to this report by providing constructive proposals before and during the EB meeting. Again, on the positive side: several WHO and member state representatives are defending civil society engagement and are interested in our suggestions about how to do things better. The next chapter of this story will unfold in 2019 – hopefully with a happy ending.

Thomas Schwarz
Executive Secretary
G2H2 IN 2018: ACTIVITIES, ACHIEVEMENTS, AND AMBITIONS

The activities of “the Hub” in the past year are based on an initial (2017-18) two-year work plan consisting of four modules:

1. Networking, communication and collaboration
2. Convening and facilitating civil society strategizing and advocacy
3. Provision of services to individual G2H2 members
4. Governance, accountability, institutional development

The “technical part” of the Annual Report 2018 is aligned with those modules, covering the calendar period from January to December 2018. References and further details can be obtained at the secretariat.

1. NETWORKING COMMUNICATION AND COLLABORATION

Networking, communication and collaboration are core functions of the Hub, complementing its role as a convener and facilitator of civil society strategizing and advocacy.

Members can propose and set up G2H2 working groups according to their needs and capacities. Working groups are formally endorsed by the steering committee. The Hub offers a “virtual work space” (including a listserv) to such groups, which are owned, led and actively used by G2H2 members and their partners. Publishing members’ profiles and contact details on the G2H2 website ensures transparency and visibility. Although the topics and mandates of current working groups seem to overlap, each working group has its particular story/background and task, and is related to particular processes that need civil society attention.

Five G2H2 working groups were active in 2018: The FENSA Watch working group followed implementation of the WHO Framework of Engagement with Non State Actors. At the end of the year, the group was integrated in a new and broader working group on WHO and global health governance and financing. The working group on Philanthrocapitalism continued to look into the role and influence of large private foundations on global health policies and practices. The Global Health and Corporate Power working group linked the health sector with the debates in an intergovernmental working group at the UN Human Rights Council on a Binding Treaty for Transnational Corporations to uphold human rights standards. In 2018, the ad hoc task force 40 years of Alma Ata was maybe the most visible G2H2 working group, convening civil society debate on the relevance of the Primary Health Care concept today and in the future.

WHO AND GLOBAL HEALTH GOVERNANCE AND FINANCING

The Geneva Global Health Hub has its roots in the WHO financing and governance crisis and related engagement of many civil society organizations. It is an institutional response to the widely felt need to share analyses, strategize together as appropriate, and coordinate interventions on pressing global health issues and processes.
When the G2H2 FENSA Watch working group was launched in 2017, members agreed that civil society should focus on the implementation of the WHO Framework of Engagement with non-State Actors (FENSA), adopted by the World Health Assembly in 2016. The working group analysed FENSA related issues such as the review of the status of Non-State Actors currently in official relations, conflicts of interest at WHO, FENSA implementation in partnerships, and networks hosted or co-hosted by WHO. It also reviewed the ad-hoc way in which the new WHO leadership engaged with various “civil society teams”, such as those related to the UN High-Level Meetings on NCDs and TB in 2018.

The work of FENSA Watch culminated in an intensive full day session on “WHO Governance: the conversation continues,” at the meeting organized by G2H2 ahead of the 142nd session of the WHO Executive Board, in January 2018.

Towards the end of the year, based on a consensus among G2H2 members that WHO governance issues are inextricably integrated in the overall global health governance crisis, a team of G2H2 members launched a new working group on *WHO and global health governance and financing*, integrating and continuing the “FENSA Watch” tasks. The group decided to initially focus on WHO related matters and processes, based on a shared assessment that some current processes at the WHO need immediate civil society attention. These include:

- Initial evaluation of the implementation of FENSA (2019) and new plans for a “WHO Strategy on Engagement with non-State actors”
- “WHO Transformation” by the new leadership team around WHO DG Dr Tedros, whose scope and consequences remain unclear
- WHO Governing Bodies reform and the prospect of shrinking civil society space
- Interaction of the new WHO leadership with various “civil society” teams and related governance issues
- WHO financing: the “investment case” launched by the WHO Secretariat in autumn 2018, and the related creation of a “CSO Advisory Group”

Within a short time after its launch, the new working group has become one of the most vital spaces for sharing, strategizing and collaboration within G2H2.
PHIANTHROCAPITALISM

This working group established in summer 2017 plans to produce a paper on philanthrocapitalism. This will include an analysis of the political economy of philanthrocapitalism, mapping the actors and activities, with a focus on interactions of such actors with WHO. As a first result, some members of the working group published, in October 2018, a discussion paper on “Philanthrocapitalism in global health and nutrition: analysis and implications” and launched the paper in a well-attended civil society side event to the World Health Summit in Berlin.

GLOBAL HEALTH AND CORPORATE POWER

The working group looks at the process of an Intergovernmental Working Group currently drafting a binding treaty to regulate transnational corporations and other businesses. The working group aims at engaging health sector organizations in the “treaty process”, in order to deepen intersectoral dialogue on corporate power and global health, and to support health sector contributions to related activities and campaigns.

In 2018, although the working group has not been operating in a systematic way, civil society colleagues from the health sector continued to engage with the “treaty process” and move the debate forward. On 18 October 2018, the working group and partners co-organized an open civil society debate on the role of transnational corporations and the right to health. This took place in the context of the civil society mobilization week for a binding treaty, in a spectacular location: a round tent on the Place des Nations.

40 YEARS OF ALMA-ATA

The AA40 task team hosted by G2H2 planned and implemented a full day civil society workshop in Geneva in May 2018 to commemorate the 40th jubilee of the Alma-Ata Declaration. In parallel, and based on a concept note submitted by G2H2 to the WHO secretariat, the working group successfully contributed to the preparation and implementation of a formal technical briefing at the World Health Assembly on the Alma-Ata jubilee. At that briefing, the working group’s representative on the panel, Gisela Schneider, made a powerful pledge to translate the core of the Alma-Ata spirit and declaration into the present and future. We will report about the May workshop in the next section.
Once more, the intensive process of jointly assessing an issue and planning an event together triggered activities beyond the task and working group itself: As a follow-up to the May events, a group of G2H2 members successfully submitted a proposal for a civil society “café session” at the official formal Alma-Ata jubilee event, the International Conference on Primary Health Care that took place in Astana, in October. The civil society session on “Calling for a New Global Economic Order - the forgotten element of the Alma-Ata Declaration” provided a much needed counter-narrative to a conference that was, in its formal programme, too technical and too much “business as usual”.

TOOLS FOR SHARING AND HORIZONTAL COMMUNICATION

In addition to the working groups, G2H2 has continued to provide some concrete tools for information sharing, allowing members to strategize, communicate and exchange information and experience throughout the year. The G2H2 website provides basic information on the Hub’s meetings and publications, including an overview and contact addresses of the G2H2 working groups. It is supported by related tweets and targeted communication via an internal mailing list, and provides updates on current Geneva global health meetings, consultations, and other opportunities for civil society to engage in global health processes. In 2018, our overview of formal meetings and informal World Health Assembly side events attracted considerable attention.

Blogs written by G2H2 members and other civil society experts and published on the G2H2 website are expected to provide introductions and viewpoints on particular global health processes and to spur exchanges of information and analysis from civil society activists and experts.

The G2H2 secretariat provides updates on global health processes and events involving Geneva based institutions on Twitter. Our more than 3000 followers are an indication of, and contribute to, our growing visibility. Using Twitter as a tool to promote transparency and inclusiveness at the World Health Organization, we continued to push WHO towards publishing a comprehensive and timely list of current consultations and meetings. Since Twitter has become a key communication channel at WHO, we are happy to know that Dr Tedros and other senior WHO officials follow, and sometimes retweet us.

The Secretariat created an internal mailing list (“G2H2-members”) in 2017. The listserv has provided the secretariat and G2H2 members with a direct, interactive and “horizontal” communication line for sharing information, networking and promoting collaboration.
2. CONVENING AND FACILITATION OF CIVIL SOCIETY STRATEGIZING AND ADVOCACY

Although the Geneva Global Health Hub was also set up to overcome the “communication and collaboration break-down” between the traditional civil society meetings in January (WHO Executive Board) and May (World Health Assembly), the two annual face-to-face meetings remain a key setting for nurturing collaboration and fostering new initiatives in the field of global health policy.

Based on the feedback systematically collected after every meeting, we changed the initial format of “closed” civil society meetings to allow a more flexible format that includes public and closed sessions. Following internal discussions, we agreed to construct civil society events as:

- A combination of open and protected spaces for civil society brainstorming (sharing assessments, democratic conversation) on key issues;
- Protected spaces for civil society strategizing (assessments leading to joint action);
- Spaces for broader conversations with the WHO Secretariat and other key actors.

**JANUARY WORKSHOP: WHO GOVERNANCE - THE CONVERSATION CONTINUES...**

On Friday, 19 January 2018, a full day of sharing and discussing focused on issue and processes related to the governance of the World Health Organization. The morning session started with an introduction to the new WHO Strategy (13th General Programme of Work), analysing the approach of, and calls by the new WHO Director General Dr Tedros to overcome the “donor chokehold” on WHO finances. Comparing these initial steps by the new WHO leadership with the civil society message “The WHO we want and the leadership WHO needs” published in March 2017 led to a debate on how civil society can move from analysis to presenting strategic alternative proposals on WHO governance and financing. Under the title “Engaging with the private sector AND safeguarding public health?” the afternoon session focused on the implementation of the WHO Framework on engagement with Non-State Actors (FENSA) and on how WHO is redefining conflicts of interest. The session closed with the screening of an ARTE film “WHO: in the clutches of lobbyists?”.

**MAY WORKSHOP: 40 YEARS OF ALMA ATA - TRANSLATING “HEALTH FOR ALL” INTO THE PRESENT AND FUTURE**

The Alma-Ata Declaration of 1978 emerged as a major milestone in the field of global public health. Referring to the social, political and structural determinants of health, emphasizing the importance of accountability to the people, and proposing comprehensive Primary Health Care (PHC) as key to the attainment of the goal of Health for All, the Declaration still reads as a visionary and revolutionary text.

2018 was the year of commemorating and celebrating 40 years of the Alma-Ata declaration. In a full-day workshop organized by the G2H2 Task Group “40 Years of Alma-Ata”, participants critically revisited the Alma-Ata Declaration and its core principles to study its potential for civil society use as an inspirational tool and guidance in our quest for Health for All.

The day included many highlights such as the initial group reading of the full text of the Alma-Ata Declaration, the testimonials by two senior and two junior global health activists, and the historic documentary “A Dream of Health” (1988). Four breakout groups worked intensively in the afternoon. Based on a working document provided by the planning team and the discussions in these groups, G2H2 published, as a result of the workshop, the statement “Translating ‘Health for All’ into the Present and Future” that was, throughout the year, used as a key civil society input to the celebrations of the Alma-Ata jubilee.
...AND MORE

In addition to the two full-day thematic workshops, both civil society meetings included the “traditional” session on “key items on the agenda” of the respective WHO governing body meeting, with overview presentations and introductions provided by members of the PHM WHO Watch team. Both events also included “institutional” meetings of G2H2, with a planning meeting in January, and the Annual General Meeting in May.

In May, based on a call to G2H2 members to propose topics for a half-day session, Garance Upham organized a well-attended round-table on Antimicrobial Resistance (“AMR – are we off track?”) with a great panel of representatives of WHO and key institutions working in the field of AMR.

In May, with 88 participants in the Friday workshop and totally 116 participants in the Saturday sessions, attendance of the civil society meetings organized by G2H2 reached a new peak. Documentation of the civil society meetings is available on the G2H2 website. Lists of participants and the reports on the feedback received can be requested from the secretariat. In the participants’ own words:

- “I really enjoyed the morning session, especially because of the input by WHO and the possibility for direct discussion with WHO (instead of only talking about WHO).” (January)
- “I liked the afternoon session on the World Health Organization engaging with the private sector the most! As a relatively young public health professional, it was intriguing to see how the influence of private sector affects agenda setting at WHO.” (January)
- “A beautiful day, inspiring and reconfirming my engagement for Primary Health Care.” (May)

The civil society meetings in January and May were kindly hosted by the World Council of Churches and took place at the main hall of the WCC’s Ecumenical Centre. This support is greatly appreciated.
IT’S ABOUT PEOPLE

We could not foresee it, but May 2018 was the last time that Amit Sengupta led us through the “key items on the WHA agenda” part of the programme, with his encyclopaedic review of what processes and topics on the agenda of the World Health Assembly needed particular attention. Amit Sengupta passed away later in the year, in a tragic swimming accident in Goa, India.

Civil society sharing, strategizing, cooperation is not just about organizations; it is mainly about people. Without Amit, the Geneva Global Health Hub and the People’s Health Movement’s crucial activities, the WHO Watch and the Global Health Watch, will not be the same. We will remember Amit as a powerful advocate, an inspiring leader and a friend. In the word of a G2H2 member: “You were the brightest mind. Yours was the sharpest analysis. And your silence would, each time, intelligently speak. It always carried a gentle authority, the wisdom of the man who sees issues and implications, and pushes things forward with endless persistence.” We miss you!

And, again, it’s about people: Garance Upham and her great “extended family team” provided the participants, with an informal reception in January and a marvellous “tasting buffet” in May, a much welcome opportunity to stay a bit longer, to move from politics and strategizing to informal sharing and networking. Many thanks for this!

And yes, we walked the talk. Equipped with fancy G2H2 T-shirts, some members joined the public event on the Sunday ahead of the World Health Assembly, starting at the Place des Nations and leading, by walking or running for your health, through the UN quarter of the global health capital.

3. PROVISION OF SERVICES TO INDIVIDUAL G2H2 MEMBERS

Throughout the year, the G2H2 secretariat responded to individual enquiries by G2H2 members and other civil society colleagues on Geneva processes, meetings and actors. But compared with the continuous development of general activities and services in the fields of convening, networking and communication provided to all members and reported in the sections above, the range of services provided, upon request, to individual Hub Members or Partners has again remained limited. As a result, providing services to individual members will not be kept as a particular field of activities in the G2H2 work plan 2019-20. But please feel free to get in touch with the G2H2 secretariat if you need a hand.
4. GOVERNANCE, ACCOUNTABILITY, INSTITUTIONAL DEVELOPMENT

The second Annual General Assembly took place on Saturday morning, 19 May, at the Ecumenical Centre, as part of the civil society meetings organized by G2H2, and attended by 13 member organization and a total of 26 participants. The Assembly noted the admission of five new members and approved the narrative and financial reports submitted by the Steering Committee as well as the budget and membership fees for 2018. Following a proposal by the Steering Committee, the Assembly amended the G2H2 statutes to introduce individual membership, and to increase the SC seats by one.

The Assembly elected/reconfirmed the **G2H2 Steering Committee** as follows:

- Andreas Wulf, Medico International (President)
- Patrick Kadama, African Centre for Global Health and Social Transformation
- Ann Lindsay
- Garance Upham, Safe Observer International
- Remco van de Pas, Medicus Mundi International Network
- Baba Aye, Public Services International (new)
- Katherine Pettus, International Association for Hospice and Palliative Care (new)
- Nicoletta Dentico, Health Innovation in Practice (new)

The President expressed the Steering Committee’s and members’ appreciation to Bill Jeffery (G2H2 Vice-President) and Odile Frank (G2H2 Secretary) for their engagement and contributions to G2H2 over the last two years. Both declared their unavailability for another term earlier in the year. The Assembly also mandated the Steering Committee to undertake, in the second half of the year, a **review of the first two years of G2H2** (output and institutional setup) to inform the future, and strategic steering of the project. This took place during a series of four open SC meetings that took place from September to December 2018, based on a working document provided by the Secretariat and President. The process addressed the following particular elements of G2H2 positioning and planning:

- Ambitions (beyond as civil society space/platform and service provider)
- Financial sustainability
- Working groups: (Expectations beyond the current format)

Initial results of the process were reported back to G2H2 members at a briefing session in January 2019. The results of this joint effort of consolidating initial achievements and bringing our civil society project to a next level will be presented in the next Annual Report.

The Constitutive Assembly agreed and reconfirmed at the AGM in May 2018 that the **G2H2 Secretariat** is hosted by the Medicus Mundi International Network at its Geneva office, based on a Secretariat agreement defining its role and scope of work. The Executive Secretary who is currently the only employed G2H2 staff, implements the mandate and leads the day-to-day management of the Hub. The Steering Committee and the Members at the first AGM expressed appreciation for the contributions and engagement of the Secretariat.
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“We build a strong civil society space in Geneva for more democratic global health governance.”