Study Guide for the online course on Democratising Global Health Governance and WHO Watch (IPOL GHG)

People's Health Movement and International People's Health University announce: GHG IPOL 2014: 13 April - 13 May, 2014

Welcome and introduction

Welcome to the first Global Health Governance IPOL (more accurately a WHO Watch IPOL), scheduled to run from 13 April to 13 May 2014. The IPOL program involves 4 units over 4 weeks. Each unit includes readings, exercises and discussion. The full reading program and associated exercises are set out below in this Study Guide.

Follow the below links for critical introductory material:

- About PHM
- About WHO Watch
- A note about <u>Global Health Governance</u>

These three documents contain material which is critical to the WHO Watch project and should be treated as essential pre-reading. In future, hopefully more leisurely GHG IPOLs we will cover these topics within the course structure.

Objectives

The purposes of this IPOL are to:

- explore and develop the analysis and theory of change underpinning WHO Watch;
- orient potential watchers to the practical tasks involved in the different components of WHO Watch:
 - o face to face watching, documenting, lobbying;
 - o item analysis, commentary, and reporting;
 - o topic research, reporting and updating;
 - o networking, liaison, collaboration, advocacy;
 - o policy engagement at national level;
- to develop our policy analysis, policy development and policy advocacy skills.

Study program

This edition of GHG IPOL comprises four topics:

- 1. WHO: structures, functions, governance
- 2. History of WHO
- 3. WHO Watch
- 4. Policy skills

Each topic includes:

- a set of learning objectives,
- a reading program,
- a webinar discussion,
- one on-line small group discussion, and

one written exercise (with email feedback).

We will be working in small groups who will communicate with each other by email and via Skype (text and voice) or other platforms where preferred. Each small group will include two facilitator/participants. Each small group will have their own listserv identity. Write to this address and it will go to all the members of your group.

Each topic cycle will take <u>one week</u> including the webinar, reading, the small group on line discussion, submitting the written exercise and circulation of feedback. Participants can of course move faster than this if they choose. (This very short turnaround is not ideal but unavoidable for this first iteration of the course.)

Topic	Reminders to	Webinar	Group Skype	Deadline for
	be posted	(1100 UTC)	conference to be	exercises to be
			scheduled (1100	shared
			UTC tbc)	
Topic-1: WHO:	Friday 11 April	Sun 13 April	Tues 15 April	Thurs 17 April
structures,				
functions,				
governance				
Topic-2: History	Friday 18 April	Sun 20 April	Tues 22 April	Thurs 24 April
(and political				
economy of WHO				
Topic-3:	Friday 25 April	Sun 27 April	Tues 29 April	Thurs 1 May
Watching				
Topic-4: Policy	Friday 2 May	Tues 6 May	Wed 7 May	Fri 9 May
analysis				

The webinars will be broadcast on YouTube and discussion will be mediated via Skype (text only). The URL for the YouTube broadcast will be notified on the day via Skype.

Skype

Your facilitator will email you shortly to arrange the first Skype teleconference for your group. You should ensure that you have 'accepted', as contacts in your Skype client, all of your group members so you can communicate easily by Skype.

Study guide

Topic 1. WHO: functions, structures, governance

Introduction

Our focus in this topic is on WHO as an organisation; what functions it carries; how it is structured; the resources it deploys; how it works; and how it is governed.

Learning objectives

Participants will gain a broad familiarity with the functions, structures, resources and governance of WHO at all three levels and including the relationship between Secretariat and governing bodies.

Readings

The readings for this topic are all from the WHO official website.

- WHO Constitution
- About WHO. Explore:
 - WHO's core functions (<u>here</u>);
 - A six-point agenda to improve public health (<u>here</u>);
 - Budget, fund sources and expenditures (here);
 - Where does WHO's funding come from? How much and from whence?
 - Where does it go? How much and where to?
- WHO's structure and presence (here)
 - Headquarters (here)
 - visit each of the clusters listed;
 - in each cluster select and visit at least one department which deals in issues that you are familiar with; read and consider;
 - Regional offices (from <u>here</u>)
 - Browse the RO site (not the HQ RO site);
 - navigate to the websites belonging to country offices (if you can find them, NOT the regional office summary information about each country pages);
 - select five countries that you are familiar with;
 - find the Country Office website; find the Country Cooperation Strategy; read and consider;
- Governing structures
 - GBs versus Secretariat (here);
 - EB and WHA
 - Visit the GB Documentation page (here, bookmark it!)
 - Visit the GB Official Records page (<u>here</u>)
 - Visit WHA66
 - Explore the different 'departments' on the WHA66 documents page
 - Select one item on the WHA66 agenda; read the Secretariat reports, check if there were 'decisions' or 'resolutions'; find in the Official Records the report of that discussion
 - Visit EB134
 - Explore the different 'departments' on the EB133 documents
 - Select one item on the EB134 agenda; read the Secretariat reports, check if there were 'decisions' or 'resolutions'; find in the Official Records the report of that discussion
 - o Regional Committees
 - Visit two regional office pages and navigate to Governance
 - Find the pages dealing with the 2013 regional committee meetings; find the agenda, the Secretariat papers, the decisions and resolutions, and the report of discussion

Webinar

The webinar for this Topic will feature a discussion with a person very familiar with WHO.

Skype Discussion

- Report on your browsings and readings?
- What is good about WHO? What are its limitations and drawbacks? What are the priorities for reform?

• What are you planning to write for the exercise below?

Exercise

Can you identify obstacles, in the governance, structures and practices of WHO, to its achieving its constitutional mandate? Discuss one such obstacle.

Topic 2. History of WHO: from the first sanitary conference to contemporary WHO reform

Introduction

The changing political forces which have shaped WHO can be traced in the history of WHO from 1851 to the present.

Learning objectives

Participants will be familiar with

- Progenitors of WHO
- Establishment of WHO
- Directors general from Chisholm to Chan; broad features of their period in office

Participants will be broadly familiar with the technical and political histories of:

- Malaria
- Smallpox
- Primary Health Care
- Breastmilk substitutes
- Essential medicines
- IMCI
- FCTC
- Global Strategy on Nutrition and Physical Activity
- IHRs (and H5N1)
- IMPACT
- WHO Reform

Participants will be broadly familiar with the origins of, effects of and responses to the WHO Financial crisis including the progress of WHO reform.

Readings

- The WHO <u>histories</u>
 - o The first ten years
 - The second ten years
 - The third ten years
 - o The fourth ten years
- From GHW
 - o World Health Organization (2005)
 - The World Health Organization and the Commissionon the Social Determinants of Health (2008)
 - o WHO: Captive to conflicting interests (2011).
- WHO Reform
 - See official pages from <u>here</u>
 - GHW4 draft chapter on WHO Reform (here)

Webinar

The history of WHO and its DGs. Interview with long standing WHO observer.

Skype discussion

Readings and browsings

About the webinar

Planned writings; allocation of episodes

Exercise

Participants will allocate within each group the episodes listed above (malaria etc) and one member will prepare a note on each history for circulation.

Topic 3. WHO Watch

Introduction

WHO Watch is:

- a resource for advocacy and mobilization:
 - o providing a current account of global policy dynamics in relation to a wide and growing range of health issues; and
 - o ensuring that activists at grass roots are more familiar with the global dimensions of the problems they are facing and are able to shape their advocacy accordingly;
 - o connecting local mobilisation to global action through bringing the voice of grassroots activists to the WHO;
- it is also an intervention in global health governance:
 - o generating support for a reformed WHO so that the organization is restored to its proper place as leader of global health governance;
 - democratizing the decision making within WHO, in particular by supporting delegations from smaller countries who are seeking to know more about particular issues or are looking for resources regarding issues that they are concerned about;
 - supporting wider knowledge of, and participation in, the various engagements across the broader field of GHG with a view to changing the balance of power framing global decisions which impact on health.

WHO Watch involves an annual cycle:

- January Executive Board
 - o preparation
 - o orientation and planning
 - 'watching' (documenting, disseminating, lobbying, making statements, reporting, alerting)
 - o supporting (at a distance)
 - o follow up
- policy dialogue (pre WHA)
 - o networking with health and other activist networks
 - liaison with ministers of health
 - o liaison with low and middle income countries
- WHA (and May EB)
 - o preparation
 - o orientation and planning
 - o 'watching' (documenting, advocating, reporting)
 - o supporting (at a distance)

- o follow up
- policy dialogue (pre regional committee (RC))
 - o networking with health and other activist networks
 - o liaison with MOH
- RC watching
 - o preparation and planning
 - o 'watching' (documenting, advocating, reporting)
 - o supporting (at a distance)
 - o follow up

The 'audiences' of WHO Watch include:

- member state representatives preparing for and participating in GB discussions
- management and staff of WHO Secretariat
- ministries of health
- ourselves (learning)
- health activists working at the community, local and national levels
- health activists working in various more specialised civil society networks (from local to global)

The products of WHO Watch include:

- 'event pages', focused on a particular meeting (of EB or WHA or RC), structured around the agenda with links to the
- 'item pages', identifying the issues in focus, providing some necessary background, explaining the PHM perspective or critique, reports of debate, suggestions for advocacy;
- 'item reports': reports of debates (long or short) for wider dissemination;
- 'topic pages' which provide broad historical background regarding the development of a particular stream of debate with URLs to key documents;
- 'integrated commentary': PDF or hard copy comment on all of the items on the agenda, for despatch or handing to delegates and for wider dissemination;
- 'statements': 300 word contributions from MMI/PHM read to the EB or the WHA at the end of the debate of an item.

Communication media used in watching:

- webpages to record our commentary;
- Google docs to record our semi verbatim record of the debate;
- email for internal communication and through PHM Exchange for wider dissemination;
- Twitter to alert our followers to new web content and highlights of debate.

Learning objectives

- introduce participants to the WHO Watch program;
- orient participants to the practical tasks involved in the different components of WHO Watch:
 - o face to face watching, documenting, lobbying;
 - o item analysis, commentary, and reporting;
 - o topic research, reporting and updating;
 - o networking, liaison, collaboration, advocacy; and
 - o policy engagement at national level.

Readings

Browse the WHO Watch website:

- Explore recent and forthcoming Events;
 - o In particular, explore WHA67;
- Explore the pages linked under your WHO region (see);
- Explore the topics department.

Webinar

This webinar will take the form of a discussion among experienced watchers about the watching process.

Skype

Discuss:

- the browsings and the Webinar;
- what you are each planning to do for the Exercise.

Exercise

Select one item on the agenda of <u>WHA67</u> which would be a priority in your country and read carefully the existing PHM commentary (focus, background, debate at EB, and comment). Follow the links in the background to get a clear sense of the trajectory of this issue.

Review the existing topic summary in the <u>topics department</u> of the WHO Watch website for the issue you have studied. If there is a topic background, review it and suggest how it needs to be updated. If there is no topic page suggest the framework for a topic page.

Topic 4. Policy analysis

Introduction

In the reading below policy analysis is described in these terms:

Policy analysis involves moving between three different domains of analysis. The first phase involves an analysis of the policy in purely rational terms; the evidence used, the values expressed and the logic applied. The second phase involves an analysis of the politics of the policy; seeking to understand this policy as an event within a political context. Thirdly we need to reflect upon our own commitments in this area and the ways in which they might shape the position we take. Objectivity in policy analysis requires that we identify our own prejudices and ensure that they are not obscuring our judgement.

Each of these three phases involves a different set of questions and they produce three different sets of answers. We then need to check these answers against each other. Is the rational analysis consistent with the political analysis? Is it possible that our judgement of the rational argument or the politics of the policy is affected by our own preconceptions which we were previously unaware of? This is an iterative process; checking these different domains of analysis against each other until some kind of consistent story emerges.

This kind of step by step approach to policy analysis is intended as a guide to the novice. Experienced policy analysts work through the logic and the politics of the policy concurrently and guard intuitively against being thrown off track by their own prejudices. Developing expertise in policy analysis involves working through these stages so many times and in so many different cases that they become automatic.

The three domains (or three 'balls in the air') is the core of this idea. We need to analyse the policy in technical terms and in political terms and check each of these perspectives against each other. We need to reflect on how our own hopes and hostilities might be getting in the way of a more useful analysis of either the rational side or the political side of the policy.

The linked reading below provides a further exploration of this idea.

Learning objectives

- Developing our skills in policy analysis
- Establishing some shared language for discussing the processes of policy analysis
- Acquiring practical skills in policy analysis

Readings

See <u>Legge, D., T. Zhang, D. Gleeson and H. Yang (2010)</u>. Policy analysis, policy development and policy capacity. <u>Health Policy in and for China</u>. V. Lin, Y. Guo, D. Legge and Q. Wu. Beijing, Peking University Medical Press: 423-437 (English); 485-494 (Chinese).

Webinar

The webinar for this topic will present a discussion of the debate over WHO's relationship with 'non-state actors' (see <u>WHA67 Item 11.4</u>) and WHO Reform more generally as a case study of this approach to policy analysis: the rational/technical; the political; and the personal. (DL)

Skype

- Discuss the introduction and the purpose of this topic; why is it needed?
- Discuss the readings and the webinar
- What are you planning to focus on in your exercise?

Exercise

Browse the following pages:

- 13.2 World psoriasis day (PHM comment); see also topic page on psoriasis;
- 13.5 Maternal, infant and young child nutrition (PHM comment);
- 14.2 Addressing the global challenge of violence, in particular against women and girls (PHM comment); and
- Topic pages on <u>IPRs and medicines</u>.

Choose one of the above. Can you separate out the rational narrative from the political narrative and can you identify how your own world view could obscure your analysis?