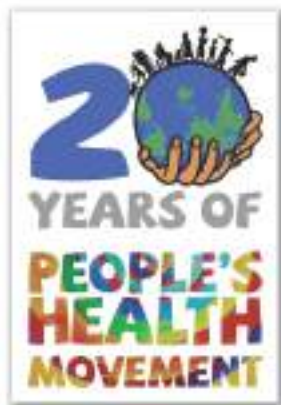


People's Health Movement



PHM Annual Report 2020



PHM Annual Report 2020

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About Peoples Health Movement...

The Peoples Health Movement (PHM) is a global network bringing together grassroots health activists, academics, policymakers and practitioners, civil society organizations and academic institutions from around the world, particularly from low and middle-income countries (LMICs). PHM currently has a presence in over 80 countries.

The People's Health Movement (PHM) was created in December 2000 following the first People's Health Assembly (PHA) in Bangladesh. Since then there has been three People's Health Assemblies (2005, Cuenca, Ecuador; 2012 Cape Town, South Africa; and 2018 Savar, Bangladesh again). In each of these over 1000 delegates from over 70 countries participated.

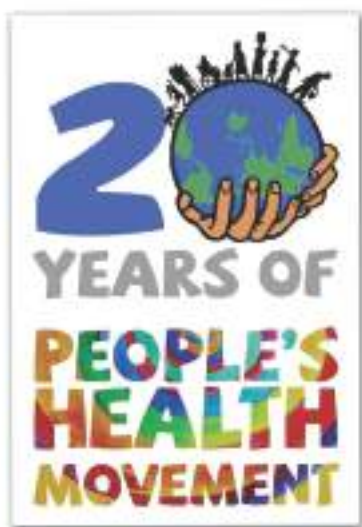
PHA 2000 adopted the People's Charter for Health, which outlines the global health situation, identified the main barriers to Health for All and adopted a set of principles, priorities and strategies to guide the people's health social movement globally.

PHM supports a number of activities at global and regional levels that integrate the efforts of its country circles. These include:

- The Global Health Watch (GHW): a critical alternative to [the] WHO's World Health report of which five reports have been published so far .
- The International People's Health University (IPHU): PHM's principal capacity building program.
- Democratizing Global Health Governance (including WHO Watch): 'watching' and providing critical support to efforts at democratizing World Health Organizations (WHO) and providing a critical analysis of global health policy
- The Health for All Campaign (HFAC) a global organizing framework for different mobilization actions by social movements around the world.

The vision of a 'global people's health movement' is to be seen as strengthening communication and collaboration in the huge diversity of organizations and social movements operating at local, regional and national levels. Such movements have played and continue to play a critical role in creating the conditions for better health and access to affordable decent health care. These individuals and organizations have their own history, commitments and identities, and this rich diversity is the strength of the movement. This report is a glimpse of such work as well as a report of the work done by the PHM at the global level...

People's Health Movement



I. Introduction



20 Years of
**People's Health
 Movement**

LOOKING BACK | LOOKING FORWARD

*Welcoming all PHM activists
 and friends to join us on*

4 December 2020	11:00 UTC
	4:30 PM Indian Standard Time
	6:00 PM Bangkok Standard time
	5:00 AM Central Standard Time
	1:00 PM Central Africa Time

zoom Meeting ID: 914 3466 4285 | Passcode: 169035
 Interpretations available in Spanish and French



7 The Context of year 2020:

As was the case with the rest of the world, in the last one year our activities and engagements have been immensely impacted by the Covid-19 pandemic crisis and the response to it. While PHM's regular work on different thematic areas may have got affected, the impact of the pandemic on different thematic areas necessitated and demanded our response and engagement in different ways.

During the significance of social and political determinants of health for achieving health equity and health for all became all the more starkly visible. All PHM country units had to contend with and engage with these different sectors in their various capacities. It gave us an opportunity to point out these intersections and political factors that PHM has been raising for a long. This was in addition to the existing issues that PHM has been pointing out such as growing inequities and power of transnational corporations, emergence of anti-democratic forces, climate crisis, worsening conflicts and displacements, shrinking welfare spaces, threats to comprehensive Primary healthcare approach and growing privatisation. However there was also resistance with people's movements and mobilizations against anti people policies, neo liberalism and injustice.

The modes of organizing and reaching out too had to be modified in the face of lockdowns and travel restrictions. Most PHM regions agree that the crisis gave them an opportunity to re mobilize and work together and the online mode of meeting helped in more frequent sharing and convening.

The Strategic Plan:

Last year PHM developed and finalised its [Strategic Plan: 2020-2025: Re-energizing Health For All for a New Global Context](#). The strategic plan lays out PHM's goals and strategies for the next five years (2020-2025), with the People's Charter for Health as the guiding vision for health in an equitable world.

The Strategic Plan was developed through an extensive participatory process of discussions, interviews, written inputs and feedback from health activists within and outside the movement. Long-standing PHM founders, young activists, alumni/ae of PHM programmes and friends of PHM in civil society and global health institutions all contributed their perspectives and understandings of how PHM can do its good work, better.

The plan has been translated into Spanish by PHM Latin America and is available [here](#).

The PHM Strategic Plan is based on **PHM's Vision**: "Equity, ecologically-sustainable development and peace are at the heart of our vision of a better world – a world in which a healthy life for all is a reality; a world that respects, appreciates and celebrates all life and diversity; a world that enables the flowering of people's talents and abilities to enrich each other; a world in which people's voices guide the decisions that shape our lives..

The PHM Strategic Plan 2020-2025 outlines goals in two major areas: (a) Advancing the Health for All Agenda through Key Social Movement Strategies and (b)Renewing the Health for All Campaign through Thematic Areas.

Goals:

Advancing the Health For All Agenda Through Key Social Movement Strategies

1. Increasing Power Through Movement Building
2. Creating Social Change Through Campaigns and Advocacy
3. Expanding the Base of Strong Advocates Through Capacity Building
4. Spreading PHM's Vision Through Analysis and Knowledge Dissemination
5. Global and National Policy Change Through Global Governance for Health

Renewing the Health For All Campaign through Thematic Areas

1. Advancing Equitable Health Systems
2. A Just Global Trade Playing Field
3. Ensuring Nutrition and Food Sovereignty
4. The Imperative of Environment and Ecosystem Health
5. A Focus on Gender Justice and Health
6. Building Advocacy Around War and Conflict, Occupation and Forced Migration and Health (War and Migration and Health)

The strategies and priority actions for energizing the movement were identified as follows:

ACTIVISM THROUGH KNOWLEDGE AND INSPIRATION

Priority action 1: Nurture a new generation of activists

Priority action 2: Re-ignite social and political consciousness for health

Priority action 3: Demonstrate optimism as a purposeful act of political resistance!

POWER THROUGH SOLIDARITY

Priority action 4: Converge with other social movements and support inclusionary structures and processes

Priority action 5: Support each other through resource mobilisation

SOCIAL CHANGE THROUGH MOBILISATION AND COORDINATION

Priority action 6: Balance responsiveness to new challenges with focused goals and planning

Priority action 7: Develop and broaden stronger advocacy to better advance global governance for health

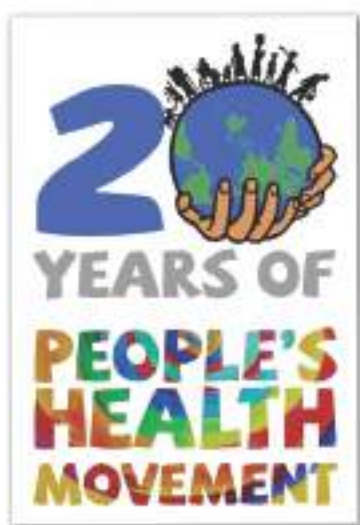
Priority action 8: Continue to clarify and strengthen PHM structures, roles, and processes

Priority action 9: Build coordination and communication systems for a 21st Century global social movement

In the following sections of this Annual Report we present the globally coordinated programs, and the work led by country circles and regions.

PHM's response to the Covid-19 is discussed within these themes. The activities mentioned are only some of the highlights and more details could be availed on PHM's website and social media handles.

People's Health Movement



II. Campaign on
Health for all and
Health Rights and PHM's
Covid Response



Covid 19 Community training for Activists - PHM South Africa



PHM developed the Health For All Campaign to serve as an umbrella for more specific activism around six priority social determinants of health, called Thematic Areas. The role of PHM is to facilitate a process amongst activists coming together under each thematic group to foster solidarity, exchanges, alliance building and joint intervention to influence policy at global and country level.

Each thematic area has coordinators whose responsibility involves both content development and convening the group. The six themes along with their coordinators are listed below:

1. Gender Justice and Health (Gender Justice)- N Sarojini
2. Trade and Health- David Legge
3. Equitable Health Systems (Health Systems)- Sulakshana Nandi, T. Sundararaman and Linda Shuro
4. Nutrition and Food Sovereignty (Food and Nutrition)- Claudio Schuftan
5. Environment and Ecosystem Health (Environment and Ecosystem)- Erika Arteaga and Amulya Nidhi
6. War and Conflict, Occupation and Forced Migration (War and Conflict)- Joseph Carabeo

Under most of these themes work happens at the country and regional level, with synergies built between action at the global level and these regional and country level actions. Typically countries are active in two to three thematic areas, with some countries being involved in all six. The work done on these themes are reflected in the regional and global activities reported in the next sections. However, whereas these six themes are useful for documenting the campaigns, many campaigns that take place in countries do so in response to national and sub-national or local issues, and do not necessarily conform to this categorization.

This year, in some of the countries, the work on thematic group happened due to needs/concerns arising out of Covid. For example, the food security crisis that arose out of Covid-19 led to more action on Food and Nutrition in South Asia and East and Southern Africa, shrinking democratic spaces, repressive measures and stifling of freedom led to interventions within the War & Conflict theme in the Philippines, Palestine and other regions, the campaign for equitable vaccine distribution, within the Trade and health theme, has taken place in many regions.

This section has been broadly divided into two parts- PHM's Covid-19 Response and the thematic activities.

Since the pandemic has had an effect/impact in all other areas/themes, there is quite a bit of overlap in the two sections.

1. PHM Campaigns in South Asia and India Regions

The last one year clearly demonstrated how the pandemic and the subsequent lockdown has amplified existing inequalities in India as in the other countries. The Covid-19 pandemic still continues to impact everyone's lives even today, especially of those who are most marginalized, such as Dalit (oppressed castes), tribal/indigenous, Muslim and other minority communities, migrant workers, daily wage earners, pregnant women, single women, persons with disabilities and transgender persons.

PHM Response to the Covid 19 Pandemic

Relief work-Most countries in the region were involved in relief work arising due to the government's response to the pandemic.

Sri Lankan PHM unit worked closely with people who were quarantined and provided necessary food items and other relief in the camps where they were kept

PHM Bangladesh undertook relief work through distributing cooked food among the floating people affected by the COVID-19 pandemic, in April 2020.

Almost all state units in PHM India (Jan Swasthya Abhiyan or JSA) involved themselves in the relief work arising out of a stringent countrywide lockdown announced suddenly, resulting in mass migration of workers from cities back to their home villages.

Information and Education Campaign-In India, state units were also involved in disseminating information and building awareness on Covid-19 for the community through patient literacy, filing complaints, applications, running counseling centres and through Public Interest Litigations in courts.

In Sri Lanka, the Sarvodaya Movement has launched a special community education programme known as "Suvodaya Programme" and some of PHM Sri Lanka member organizations held educational programmes within it.

PHM Bangladesh organised a month-long campaign in April 2020 across the country and distributed awareness pamphlets.

Right to Health and Covid-19-PHM Nepal initiated Campaign of People against Covid-19 (CoPAC) ([Poster](#)). It organized a virtual meeting on role of private sector in addressing Covid 19 pandemic.

PHM Pakistan has been monitoring the prices of Corona related medicine like Remdesivir and steroids as also the private sector treatment charges of Isolation ward and Ventilator care. Since health has become the provincial Subject after 18th Amendments in constitution and all provinces have their own health policy, PHM-Pakistan chapter is doing lobbying and capacity building activities to ensure the implementation in partnership with all stake holders including media. PHM Pakistan is also providing facilitation to Provincial Health Ministries, is striving to include Health Rights as basic Rights of Pakistani Citizen.

PHM Bangladesh organized a press conference titled "The Current Status of COVID-19 Pandemic and Our Duties" and another one on "Our Duties to Mitigate Corona Virus". PHM Bangladesh in collaboration with Third World Network and Equity BD also organised a webinar on "**Access to Treatment in the Time of a Pandemic in Bangladesh**". A human chain was formed in front of the National Press Club, Dhaka in 2020, in

the demand for taking effective measures to respond to COVID-19, bringing reform in the healthcare sector and ensuring health care services for the worker and mass people.

JSA, India brought out about 30 [statements and advisories](#) on the many issues arising out of Covid and state's Covid-19 response. JSA also gave inputs to the National Human Rights Commission to bring out [advisories](#) to assess the Impact of COVID-19 pandemic on human rights, especially on marginalized and vulnerable sections of the society, and future response. JSA organized the [Health session in the People's Parliament](#) that was organized by many CSOs (on 16th August) demanding that the government should hold the parliaments session which was being withheld in the name of pandemic.

Most of the state units' work in JSA was around issues of access to Covid-19 testing, treatment and related services, raising violations by the private sector and demanding regulation, monitoring impact on essential services due to Covid-19, demanding privacy and confidentiality of patients, discrimination and stigma, health workers issue and so on. This was largely done through bringing out statements, advocating with the government and media, documenting and bringing out testimonies, online campaigns and finally through legal means.

Bihar state unit of JSA took up the issue of targeting Muslims on Covid-19 (Tablighi incident link), linked to the growing polarisation and communalization in the country post 2014 with the election of new government. Due to the negative narrative, there was a Muslim woman who was denied services of delivery at various levels of healthcare till JSA activists intervened.

Activities by Thematic Area

Health Systems-PHM Nepal published articles in main stream National Daily Newspapers as main article or opinions on various health issues.

PHM Bangladesh organized a conference on the public toilet crisis in Dhaka city and related health hazards issues.

In Sri Lanka the Minister of Water & Sanitation, MrVasudeva Nanaykkara (long term active member of PHM-SL) has undertaken meetings with Members of Parliament in order to advocate for Health Rights to be included in the Sri Lanka Constitution.

PHM India submitted [comments](#) in response to the Indian government scheme to link new and existing private medical colleges with functional district hospitals which basically means handing over the government hospitals to the private sector and also highlighted the issue in media and social media.

Panel Discussion on Occupational Safety and Health of Nurses in India on World Patient Safety Day was organized by JSA Delhi and other units.

Food & Nutrition-Considering severe issue of stunting and malnutrition PHM Pakistan organized meeting with all the provincial assemblies to ensure that nutrition and food security issue are discussed in parliamentary committees. An advocacy project has been launched under which budget analysis was conducted on allocation of Budget to Nutrition and Health.

JSA continues to work closely with the Right to Food Campaign in India and brought out many statements with it on the issues arising after the pandemic.

Gender Justice- Uttar Pradesh state unit in JSA India participated in the protests against the Hathras case in which a girl from an oppressed caste was raped by men from oppressor caste, which the state seemed to

cover up and which caused a national furore.

Trade and Health-Most of the work under this theme is happening through EACT India team which is one of the three focus countries in this project.

Other thematic-JSA is associated with a campaign concerned about the Unique Identification or Aadhaar project that has led to exclusions and difficulties for people in accessing their social welfare entitlements and has implications for privacy and surveillance. Through these collaborations it is also trying to analyzing and critique the new introduced Digital Health Mission.

PHM Pakistan conducted capacity building workshop of Health Journalist to follow the health-related issue.

PHM Bangladesh submitted memorandum to the Election Commission of Bangladesh and the Department of Environment regarding stopping the printing and affixing of laminated posters in compliance with the directions of the High Court to protect the environment during the Dhaka North and South City Corporation elections.

2. PHM Campaigns in Latin America

PHM response to the Covid 19 Pandemic Response

Throughout Latin America activists were involved in multiple activities related to COVID 19.

Mesoamerica holds monthly meeting to update everyone on the latest statistics and to share ways that the groups to which they belong are working with communities that are largely abandoned by the official sector. Community work involved health promoters, traditional midwives, traditional therapists and others to meet the challenge in their communities. Interesting educational materials have been developed with indigenous communities in Mesoamerica and in the rest of Latin America. A series of webinar have been held involving persons from all the sub-regions and these analyses are shared widely.

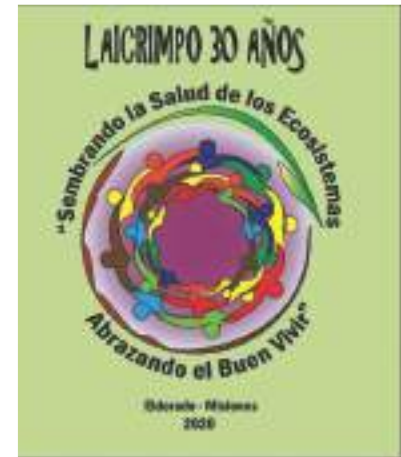
In most cases the official statistics and the response of governments has been inadequate to meet the challenge of the pandemic. Therefore alternatives are necessary and are being developed throughout the region, ALAMES prepared a statement that was circulated widely about the response and the demands of CSOs.

Some of the resources can be found [here](#) under “Resources in Spanish prepared by PHM comrades in Latin America.”

Meeting on “Collective Health and the Pandemic, Challenges to Academia and the Social Movements” was held in July’ 2020 with participation of academics and social movement activists from the Americas (attachment photo). Another meeting was held in November ‘21 on “Ancestral and Community Health Responses to the COVID 19 Pandemic”.

Twitter campaign in defense of the Brazilian universal health system SUS





The 30th Anniversary of the Laicrimpo Movement in Argentina

The Argentina unit formed Health system support committees giving telephonic follow-up to people with COVID and their families. It prepared articles, primers and brochures for dissemination, in the context of pandemic (Red Jarilla and Laicrimpo). It also organized Radio programs connecting 22 stations with updated information on COVID 19 (“Deshojando la Manzanilla”)

Activities by Thematic Area:

Environment and Ecosystem–In a two day event in Nov 2021,PHM Argentina celebrated 30th Anniversary of Laicrimpo- “Sembrando la salud de los ecosistemas Abrazando el Buen Vivir” (Sowing Healthy Ecosystems, Embracing Good Living). This event included online plenaries and simultaneous workshops.

Food & Nutrition- Brazilian alliance has been in advocacy work, with participation in the public consultation on the drinking water and labeling of ultra-processed foods. With MAELA (Agroecological Movement of Latin America) and other partners, PHM Argentina has been very active in their work on promoting indigenous seeds and issues of food sovereignty around it.

Gender Justice-In El Salvador the National Health Forum has continued to develop as the principle advocate for the right to health, to gender equity, against violence against women, children and LGBTI persons. The loss of our comrade Margarita Posada as only intensified the determination of the NHF to continue their activities, mobilization and attention to the communities throughout the country.

Other- In Columbia many of the activists who also identify with MSP participated in the initiative of the national strike in Colombia that involved the first two months of 2020, but which, due to the pandemic, was



Images from a fair about making compost with the Group Jarilla in San Andres de los Andes Argentina

demobilized; and as a result of the measures and what happened in the face of the pandemic, we joined the initiative to configure the **National Pact for Life and Health** that led to a series of demands, mobilizations and political advocacy actions for the right to health in the country, during the second half of 2020.

3. PHM Campaigns in the South East Asia and Pacific Region

PHM Response to the Covid 19 Pandemic

In Philippines, the CURE COVID (Citizens' Urgent Response to End Covid-19), an alliance of people's organizations coming from different sectors was organized for dissemination of correct and objective information on the Covid pandemic among the urban poor, peasants, workers, women's groups. PHM individual members lent their support to this initiative.

PHM Thailand worked with PHM Global, TWN, PSI, and Thai Drug System Monitoring and Development Centre) on 30 July 2020, titled "COVID and FREE TRADE: CPTPP Impacts on Health in Thailand." (video clip link, Thai audio).

Throughout the year, Africa Japan Forum worked together with key health advocates to develop Civil-20 Global Health Working Group and released a series of policy recommendation paper on global health, especially COVID-19, for the G20 process.

In Cambodia, COVID-19 pandemic impact report with findings on the impact on small-scale farmers and students in the country was launched with other reports. The event was a collective effort of those organizations which were part of the research studies. The launching event included representatives of embassies, various ministries and CSOs.

Activities by Thematic Area:

Health Systems- PHM South Korea made several CSO statements against to Korean doctors' resistance that was triggered by the government's decision to establish public medical schools.

Deborah Gleeson, Bel Townsend and David Legge wrote an advocacy article urging the Australian government to support the waiver of intellectual property rights for Covid medical products (link).

Gender Justice- Saerom Kim, Sun Kim and Changyup Kim published an article titled "Gender Analysis of COVID-19 Outbreak in South Korea: A Common Challenge and Call for Action." (link)

PHM South Korea continued to campaign and advocate to demand reform of SK's restrictive abortion legislation through CSO statements, held public conferences, webinars, and public campaigns including making on-line education materials and book discussion club.

PHM Papua New Guinea (PNG) engaged with an incident of domestic violence which resulted in death. In the incident, the man beat his wife and killed her leaving behind her two little children ages 3 and 6. The PHMPNG members joined others for a protest march in July 2020. They also took part in another protest against sorcery related killing of mothers and elderly women in rural parts of the country

Sama Resource Group for Women and Health and People's Health Movement (PHM) invite you for a Webinar.

**Not in Lockdown:
Voices and Struggles against Gender, Racial and Social Injustices**

JUNE 26, 2020
5:30 PM TO 7:00 PM INDIAN STANDARD TIME (GMT +5:30 HRS)

 SARA HOSSAIN (BANGLADESH) MODERATOR AND FLAGGING KEY ISSUES ON THE THEME	 SAROJINI N (INDIA) THE PANDEMIC AND SOLIDARITY: WHY IS JUSTICE IMPORTANT FOR HEALTH FOR MARGINALIZED, INDIA
 LEIGH HAYNES (USA) INQUIRIES ON TOP OF INEQUITIES: RACISM, VIOLENCE AND REPRESSION IN THE US DURING THE COVID-19 PANDEMIC	 SAEROM KIM (SOUTH KOREA) GENDERED IMPACT OF THE COVID CRISIS IN SOUTH KOREA
 SHATHA ODEH (PALESTINE) PANDEMIC, WAGES TO CONFLICT SETTINGS, CENTERING GENDER DISCUSSIONS FROM PALESTINE	 PENINAH KHISA (KENYA) UNDERSTANDING GENDER BARRIERS IN ACCESS TO HEALTH AND DETERMINANTS: EAST AFRICA

REGISTRATION LINK:
https://us22mbr.zoom.us/j/728UCU69QJHT8JDE_701P6G6EKXQW8TE1H

PHM Korea members were one of the panellists in the webinar titled "Gendered impact of the COVID crisis in South Korea"

Saerom Kim of PHM Korea gave a presentation titled "Gendered impact of the COVID crisis in South Korea" at the webinar co-hosted by Gender Justice and Health TC on 26 June 2020 (link).

War and Conflict- Three members of PHM Philippines are actively involved with this thematic group and coordinate its activities.

Environment and Ecosystem-Maan Tablang of PHM Philippines contributed an article that will be part of the GHW6 the environment defenders and activists who have been harassed by the military.

Trade and Health-The South Korean team and the country teams have been very active under this TG through the EACT project and other issues such as TRIPS waiver.

4. PHM Campaigns in the Middle East and North Africa Region:

Despite all the challenges that came with Covid, Health Work Committees, as a coordinator to the movement in the region, was able to network and activate their efforts with a number of countries in the region, for example: Jordan, Lebanon, Morocco, Tunisia, Egypt, Iraq, and Yemen. It established a joint project entitled "Equitable Access to Health in the Face of Privatization in Health Systems in the Arab Region".

People's Health Movement in the Middle East and North Africa invites you to participate in the live stream on:

Future of health systems in the Middle East and North Africa in the time of pandemic of COVID-19

Monday, May 18 at 10:00 PM (time of occupied Jerusalem) through:

ZOOM

Following the Facebook page of the Health Work Committees:
Health Work Committees - Palestine

Speakers:

- Mrs. Shafiqah Dabab**
Regional coordinator, People's Health Movement (PHM)
General director, Health Work Committees (HWC)
Palestine
- Dr. Mohamed Hassen Khudfi**
Epidemiology consultant
Coordinator, Right to Health Committee
Egypt
- Dr. Hani Ismail**
Director of Programs, Center of Global and Community Health
University of Texas Medical Branch (UTMB)
USA
- Dr. Karim Mekkawi**
President, International Arab Association of Social Medicine
Coordinator, Civil Society Coalition in Lebanon
Lebanon
- Dr. Ayta Khalil**
President, Moroccan Society of Human Rights
Morocco
- Dr. Belgacem Sabri**
President, Tunisian Association for Defending the Right to Health
Tunisia
- Mrs. Ebtissam El-Khatib**
Executive director, Society of Health for All
Yemen
- Dr. Amal Taji**
Director, Palestinian Medical Relief Society – Gaza
Coordinator, Health Sector of the Palestinian HWC
Palestine
- Mrs. Mahmoud El-Ahmed**
Researcher and activist,
Coordinator, Council of Human Rights Organizations

Webinar organised by the MENA region

PHM Response to the COVID 19 Pandemic

A webinar at the regional level “The Future of Health Systems in the Middle East and North Africa region in the Time of the Pandemic” hosted nine civil society organizations from (Palestine- Lebanon- Tunisia- Morocco- Yemen- Egypt- the United States).

In the region PHM made a series of contributions to the international and local media, preparing radio episodes and radio spots on health systems in the Arab region that were broadcast on radio sites in seven Arab countries (Palestine, Jordan, Tunisia, Iraq, Egypt, Yemen, and Lebanon). The broadcasting of these episodes coincided with the launch of a radio spot that was broadcast for 20 times targeting the public focusing on the right to health advocacy.

The image shows three screenshots related to PHM's media work. On the left is a screenshot of a radio broadcast interface with Arabic text. In the center is a screenshot of a woman speaking at a microphone during a radio episode. On the right is a poster for 'RADIO LANA' with Arabic text: 'نظرة بعمق' (Deep Look), 'اليوم العالمي للترويج للصحة' (World Day of Health Promotion), 'لماذا هي المنظمات الصحية في المنطقة' (Why are health organizations in the region), and '11 PM'.

Radio episodes were prepared by PHM MENA on Health Systems and aired.

Activities by Thematic Area:



HWC also held a panel discussion with various civil society organisations at both the local and international level to discuss preparing research papers from countries inside the MENA region

Health Systems-The region prepared a comprehensive study on privatization in health systems in the seven countries of the Arab region. The study was completed in Arabic and is currently being translated into English.

The region prepared a training guideline entitled “Equitable Access to Health”, led by Health Work Committees, which is a reference guide targeting workers in health, development and human rights sectors in order to approach health needs with a human rights-based approach.

Tunisia prepared a national paper on the privatization of health services in the county within the framework of the struggle movements under the Peoples’ Health Movement at the global and regional levels. In Tunisia, many organizations active in the health sector responded to the social movements called for by the Tunisian



Training guideline entitled “Equitable Access to Health” prepared by Health Work Committees as a representative of the Movement in the Region. It is a reference guide targeting workers in health,

Association to Defend the Right to Health, by forming a coalition of civil society organizations (more than 40 organizations) to defend the public health facility.

War and Conflict-The region participated in The Universal Health Coverage Conference in Bangkok at the beginning of February presenting a set of interventions in public and specialized meetings on protecting the right to health under military occupation.

Members from PHM participated in the electronic meetings and dialogue sessions organized by partner organizations within PHM, and with the Moroccan Association for Human Rights and presented an intervention on health under occupation and the role of civil society organizations.

5. PHM campaigns in Europe

PHM Response to the Covid 19 Pandemic

Building on the [campaign against commercialisation of health](#), PHM Europe and the European Network Against Commercialization of Health and Social Protection continued to work together on various activities: (1) PHM Europe published a number of press releases in support of other campaigns initiated around Covid19 issues, including the European Public Services Union action week of support for health workers and the Right to Cure European Citizens' Initiative; (2) organised a series of public discussions on privatisation of long-term care, which was encouraged and coordinated by PHM Canada; (3) as part of preparation of the IPHU in Barcelona, we have organised a webinar "Why is Privatisation Bad for Health?".

Activities by Thematic Area:

Health systems- PHM Europe was invited to take part in the panel "Saving crumbling health services" organised by the Left in the European Parliament, as well as a discussion organised by EMSA, called "Unequal Roads to Health Care".

A research project on de-privatisation of health has been initiated by PHM Europe which aims to document instances of de-privatisation of health services and facilities.

To strengthen the 7 April campaign, PHM Europe together with European Network organised a series of workshops on communications, which were supported by the Catalan organization Quepo. On several occasions during 2020, opinions and views of PHM Europe activists were published in the media (e.g. during 7 April actions in North Macedonia, media coverage was very good and enabled us to reach a wider audience than people already active in the right to health movement).

Additionally, country circles have also been implementing their own programs. For example, PHM France held a series of preparatory meetings before formalising the local circle, and afterwards held a public presentation on PHM's work and local plans, "Agirdurant la pandémie". PHM Germany has been holding local meetings on the Patent rights of essential drugs and vaccination.

PHM UK has dedicated efforts to initiating a collaborative platform called People's Health Watch, which aims to connect activists and exchange visions of a fairer health system and society.

In December 2020, the PHM group in Croatia organised a webinar "Access to Medicines: an introduction", focused on the basics of the access to medicine movement and its contextualization during the Covid19 pandemic.

PHM UK organised a [webinar](#) on global health justice for World Health Day.



Community sensitization on Covid by PHM-Zambia

War and conflict-PHM UK has participated in many initiatives on access to health care for migrants together with Medact, Docs not Cops, and Migrants Organise. These include protests and everyday engagement. PHMUK continues to work with these organizations to highlight these issues.

PHM UK continues to work actively on climate justice, environment, and health independently and through the Environment and Health thematic group.

6. PHM Campaigns in East and South Africa Region

PHM Response to Covid19 Pandemic

PHM South Africa is part of the C19 People's Coalition, a collective of over 300 CSOs, labour and faith based organisation who are seeking to ensure that South Africa's response to the Covid-19 crisis is one that is rooted in social justice and democratic principles.

A number of Webinars on topical issues were organised by PHM-SA 2020- These have been made into podcasts (link- <https://pod.link/phmsa>).

PHM Zambia worked with communities in supporting dissemination of information around Covid.



Presentation of PPEs to community health workers in Malawi received by Minister of Health, Hon. Khumbizire Chiponda and PHM Malawi members

PHM Malawi was involved in the call for support to CHW’s in COVID-19. Subsequently, CHWs who were at first sidelined in the allocation of PPEs have finally been provided with PPEs.

Additionally PHM-East and Southern Africa (ESA) has been involved in documenting case studies on health activism in ESA. The goal of the case studies was to gather stories and document key issues in health and Civil society activism in ESA, in the Covid-19 context and it’s response.

Currently the region has received five case studies from four country chapters that’s Kenya(one case study on Gender, other on UHC), Uganda(Health for all), Malawi(community health workers) and South Africa(Community health workers). The case studies have gone through multiple reviews by the ESA committee formed for this purpose. They have been submitted to the HS thematic group which has already used them for different purposes including the Global Health Watch. We plan to write an integrated paper based on the experiences from the case study.

Activities by Thematic Area:

Health Systems

- **PHM-Kenya- Study and dissemination** on issues of UHC access to affordable health care and out-of-pocket spending



Participants sharing their experiences on UHC in a study dissemination workshop in Kenya



Participants in Machakos and Nyeri counties of Kenya engaging in dissemination of findings. (left)

“UHC Day event by PHM Kenya on how PHM would like the government to drive UHC so that no one is left behind in terms of Health care”. (below)



- **Mozambique** -Campaign on social determinants of Health and Sanitary Citizenship, health care citizenship, social determinants of health and also on defence and guarantees of human rights. The OCS in Mozambique has also developed activities on the revision and updating of the Charter of Rights and Duties of the Sick in the National Health System.
- **PHM-South Africa** is engaged in the NHI campaign. PHM SA hosted a public meeting in partnership in ILRIG themed The State Of The Public Health and NHI, is there an alternative.



Public Meeting in South Africa - The State Of The Public Health and NHI, is there an alternative

- **PHM-Malawi**-Consultation on issues around UHC, Access to medicines with regards to African Medical Agency through developing IEC and training materials for PHM advocates.
- **PHM Uganda**- Engaging the policy enhancers on a couple of health issues. Through HEPS, we provided guidance to the Uganda UHC road map.



NCD workshops in PHM South Africa- Training of community members and members of five garden communities.

Food and Nutrition- PHM SA trained community members and members of five garden communities on the theme of food systems under NCD workshop projects.

Trade and Health- PHM Mozambique submitted a petition to Mozambique Ministry of Health advocating for exemption of intellectual property related to the covid-19 technologies. It also translated the PHM Policy Brief on waiver of IP provisions in TRIPS WTO into [Portuguese](#).

Gender Justice- PHM Kenya undertook country level initiative for case study on ‘Impact of pre-existing gender inequalities on adolescent girls and women in the midst of the pandemic in Kenya.’

7. PHM Campaigns in West and Central Africa Region

PHM Response to the Covid 19 Pandemic

PHM West and Central Africa [drew](#) the attention of political leaders to the need for a Human Rights-Based response in the region. It also produced a [commentary](#) on the Regional Strategy for Integrated Disease Surveillance and Response 2020-2030 and on countries’ COVID-19 response.

PHM DRC was involved in sensitizing young people, including students, decision-makers on the Right to Health and Covid 19 Response.

PHM Benin held a meeting to discuss PHM’s right to health assessment guide especially how to use it in the context of pandemic and the planned new legal framework on health.

In November, the region submitted country reports from five countries (Gabon, Mali, Cameroon, Congo and Benin) on various issues to the Global secretariat. The reports are in French and have been shared through the PHM website.

Activities by Thematic Areas

Health Systems- PHM Togo organized community-based activities aimed at improving HIV/AIDS-related services in the health centres, as part of the response to HIV, with the support of USAID.

PHM Gabon organized advocacy activities to improve the existing legal framework on tobacco in the country.

*Food and Nutrition-*As part of its work on Community Based Nutrition, PHM DRC mobilized people against malnutrition, trained pregnant and breastfeeding women, used culinary demonstrations on how to feed the child and his mother.

8. PHM Campaigns in North America Region

PHM Response to the Covid 19 Pandemic

PHM USA released a [statement](#) demanding an equitable and just response to the Covid crisis.

It also [endorsed the People’s Strike](#) that started in May 2020 in the US. PHM USA and other country circles from north led and supported the [sign on letter](#) asking rich countries to stop blocking the trips waiver proposal.

In December, the region joined in the [campaign to demand #Peoplesvaccine](#) and target Pfizer, Moderna and AstraZeneca with demands that they share their vaccines with the world.

PHM Canada members wrote an article titled [Covid-19 drug and vaccine patents are putting profit before people](#) in “The Conversation”.

An analysis of the discourse on safety during the COVID19 pandemic titled “Reimagining safety in a pandemic: the imperative to dismantle structural oppression in Canada” for the Canadian Medical Association Journal by a few members of PHM Canada.

Activities by Thematic Area

Health Systems- PHM North America organized a virtual learning series on [Building Campaigns Against Privatisation of Health Services](#). PHM Canada has been involved in [4 part webinar series](#) that explores the increasing commercialization and privatization of the long-term care industry in North America and Europe.

Environment & Ecosystem- PHM USA and Canada supported the [webinar](#) by Extractive Industries (under Environment and Ecosystem thematic) group on “Making the Connection: Fracking, Plastic and People’s Health”.

9. Global coordination for the Health For All campaign

The Health For All Campaign is being coordinated globally, with one team member of the PHM Global Secretariat holding nodal responsibility for it. The activities and intensity of the various thematic groups have been different. The groups usually meet together to discuss the work to be done, and the frequency of such meetings varies across the groups.

The Environment & Ecosystem Health TG and Trade & Health TG (post EACT project) have met once in two months on an average. Others have meetings with less frequency and carry on coordination over emails. In the last year the activities and meetings of the thematic groups has gained momentum, leading to concrete outputs such as country reports in the Food and Nutrition and Health Systems thematic groups, organizing a webinar within the Environment group and so on. The Trade and Health thematic group has been continuing with its urgent and relevant work through the EACT project activities.

Over this period many new members have joined the different thematic groups and the working groups within them. The new members have been added to listserv of thematic groups based on suggestions of PHM regional and country coordinators and also through nominations by existing group members.

In order to involve more people, it had been decided that there would be more dissemination of the work of the thematic groups to PHM Steering Committee members, and regional coordinators would be asked to propose suitable persons in different country circles to be part of the thematic circles. Participants of IPHU, WHO Watch and GHW could also be reached out for joining the groups. Efforts will be made to ensure that there are participants from many circles and not limited to only one region or one issue. To ensure smooth functioning and coordination, technical issues with existing listservs were resolved while new listservs were made where they didn’t exist. All thematic groups now have functioning listservs although the activity between them varies with these listservs being managed by the thematic coordinators or the Global Secretariat when requested.

PHM website now has an active Health for all Campaign page. The individual thematic pages are being built/updated in terms of content.

More details about the specific activities of the thematic groups/circles are described below:

i. Gender Justice and Health Thematic Circle

The current pandemic has impacted the lives of everyone but certainly has been having a disproportionate impact on the lives of the marginalised – women, girls, daily labourers, sex workers, as well as persons with

disability, transpersons and many others. Therefore it became more critical for this thematic group to inform, exchange and collectively reflect through sharing our knowledge resources, amplifying our voices, visibilising issues and fostering connections for support and resilience.

COVID 19, Lock Down and Health Rights

“Not in Lockdown: Voices and Struggles Against Gender, Racial and Social Injustices”–The webinar was organised on 25th June 2020 ([link](#)). An effort was made to translate the invite to Arabic, Korean, French and Spanish for a wider outreach.

The Thematic Group Coordinator was a part of the Prince Mahidol Award Conference (PMAC) webinars on COVID-19 and spoke on the issues related migrant crisis during the lockdown and also on Resistance, opportunities, and threats during COVID-19 pandemic with other colleagues from PHM, UNDP etc.

A [blog post](#) *“Trampling Hope, Mockery of Justice”*- A photo-essay by N Sarojini on the unplanned lockdowns in response to COVID 19 pandemic in India and the effect it has had on a vast population of migrants was uploaded on the PHM website and circulated.

Building Capacities of young activists on gender, equity and intersectionality



Discussion on gender and mental health as part of South Asian region International People’s Health University (IPHU)2020 in Kathmandu Nepal

The South Asian region International People’s Health University (IPHU) was co-organised by Sama and the PHM in February 2020 in Kathmandu (Nepal). The IPHU was meant to build capacities of young health professionals, social workers, researchers, and activists. It had participation from six South Asian countries. The IPHU content and discussions covered concepts of equity and health, social determinants; the political economy of health, an understanding of health systems and its transition, impact of trade on health, issues related to access to medicines, etc.

The thematic group also provided, support and information, and materials for IPHU Barcelona for the young activists on gender.

Campaigns

Campaign by Gender and Justice thematic Group- PHM and SAMA on [International Safe Abortion Day](#) on 28th September demanding ‘Access to safe, quality and legal abortion’ and strengthen global solidarity on women’s /feminists and public movements speaking out for the Abortion rights of ALL- young girls, women / pregnant persons and trans community, the situation being made worse by the Covid pandemic. The call



International Safe Abortion Day on 28th September by Gender Justice thematic Circle.



Posters prepared by colleagues at Naripokkho, Bangladesh in Bangla with English translation were shared on social media

for the campaign was created in English, Hindi, French and Spanish and circulated to various regional and country groups.

Volunteers from PHM India made a call video about the campaign following which we received [solidarity video messages](#) (link) and demands from Kenya, US, India, Bangladesh and the Women's Global Network on Reproductive Rights (WGNRR). Posters and sample messages were also created and we joined other feminist movements in the online campaign.

PHM Gender Justice and Health thematic group and Sama are undertook a one-day campaign on 10th December, the last day of the '16 days campaign on Gender Based Violence'. We received posters and video messages from different countries and carried out a social media campaign. Short videos such as those from young activist Usha Neupane from PHM Nepal speaking on Gender Based Violence were widely disseminated. Similarly, Maria Hamlin Zunega from Nicaragua sent her message on 10th December, Human Rights Day highlighting the issues related women prisoners, particularly political prisoners who suffer discrimination and humiliation and violence in prisons.



PHM was invited to facilitate the discussions on SRHR, Reproductive Justice (RJ), and the Pandemic in December as part of the **Young People, Reproductive Justice, and Abortion Rights Regional Online Discussion Series**.

Others Engagements

The thematic groups is providing inputs for developing the guidance document on Sexual Harassment within workplace/movements/activities of PHM.

ii. War and Conflict, Occupation and Forced Migration Thematic Circle

The thematic circle on war and conflict was given a boost this year. There were two consecutive meetings uniting on the action points for our circle. As a “launch” of the group, a webinar on increasing militarization of Covid Response was planned after which the core group was expanded.



The webinar on 25th August on “[Resisting Militarisation of the Covid-19 response](#)” was a launch for the War and Conflict thematic group (recording [here](#)). It saw very good attendance and participation-and some very useful and impressive presentations. There were presentations from activists in war-torn Yemen, from Lebanon, Philippines, India and Greece.

ii. Group member from PHM Sri Lanka had reached out to PHM with a note on poor treatment of garment workers by Sri Lankan military. The TG agreed that PHM should show solidarity to the groups and unions working on this. A statement of solidarity was drafted from the thematic and sent to PHM Sri Lanka.

iii. Some of the TG members were able to attend the PMAC webinars especially “[Resistance, Opportunities and Threats during the Covid Pandemic](#)” on Oct 28, 2020.

iii. Nutrition and Food Sovereignty Thematic Circle

Following up with the meeting discussions in August, where the group had decided that it would broadly focus on the issue of Hunger and nutrition in the context of Covid- 19 crisis, a background note and a cover letter on the same theme [calling for countries to contribute to case studies](#) was drafted and approved after subsequent comments. The call was circulated and two case studies were received.

iv. Environment and Ecosystem Health Thematic Circle

This year the group established regular connection and a working relationship with the Global Secretariat. The group has continued building solidarities around specific extractives struggles such as such as the work happening right now between Brazil, Canada, and Mozambique to tackle the mining company Vale through mutual learning and sharing experiences among various country circles which helped us to strengthen our campaign

In 2020, the draft for the chapter for GHW6 was completed, sent and comments have been received. The chapter building included strengthening of our work with a gender focus. We called for authors across all regions and ended with a collaborative effort of 8 territories Australia, Argentina, Philippines, Texas- USA, Canadá, Ecuador, India, UK.

The thematic group also made a presentation at American Public health Association meeting.

The thematic group members wrote an article on “[Connecting the Right to Health and anti-extractivism globally](#)”.

The group is collaborating with PHM USA &PHM Canada plan to host a [series of five webinars](#) showcasing communities struggling against extracted resources all through its commodity cycle: cobalt, fracked gas, lithium, petroleum, uranium.

The group supported PHM signing the [statement](#) related to related to new standards on Antibiotic use in the US livestock sector and signed the statement as a thematic group as well.

IPHU at Latin America (July 2020 to Dec 2020)- We had an IPHU in Latin America where 250 health personnel registered and 60 completed all the modules. The IPHU was an alliance with Instituto de Salud Socioambiental de Rosario and Anti mining resistance in Venezuela and Anti mining resistance in Intag Ecuador.

To commemorate 20 years of PHM, the thematic group interviewed its members and coordinators where they released a [video](#) explaining the thematic group’s vision and philosophy.

The group is in the process of identifying key documents for translation as well as volunteer interpreters to reach out to more people across various languages.

Plans and activities in 2021 include: (1) broadening the coordination meetings to include other regions and build solidarity (2) continue work on the webinar series “[making the connection](#)” (the first webinar in the series has been held) (3) continued solidarity with specific struggles against extractivist projects in our efforts to promote health and climate justice 4) IPHU Barcelona 5) COP26 events- People Health & Climate Tribunal 6) IPHU 2 in Rosario (Instituto de Salud Socioambiental de Rosario)

v. Equitable Health Systems Thematic circle

The health systems circle was also re-activated this year. Period meetings were held of the group that contemplated on the kind of documentation and research that was needed to highlight the health system issues during Covid-19. The vision and goals of the group were concretized through the strategic planning process. The goals for Advancing Equitable Health Systems in the next five years were decided as follows:

- A team of activists and champions for primary healthcare approach and equitable healthcare systems exists in most of our active country circles.

- Privatization efforts have failed in many instances due to public pressure related to PHMs activism.
- PHM has an accessible public repository of documents on these issues.
- Legal victories in more progressive/pro-poor laws and regulations to support comprehensive primary health care and health equity.

The following specific activities took place over the last year:

i. The thematic group developed (through various rounds of meetings) and put out a call for case studies. The following four themes were identified and guidelines for case studies were developed:

1. Struggles Against Privatization in times of Covid-19
2. Equity and the Covid-19 Health Systems Response
3. Community Health Workers (CHWs) and Covid-19
4. Health systems preparedness and response to Covid-19

The objective of the case studies was to build a global narrative on the issues and they could also be used for various PHM programmes (in GHW, for IPHU, as an e-publication or book, or special journal issue, in webinars etc).

The group received 10 case studies from 8 countries. Apart from this the East and Central Africa submitted five case studies to the group. The case studies have been reviewed with the help of volunteers and will be soon circulated to the authors for comments. The case studies are also being used for the Global Health Watch 6 and by the HS thematic group for one of the papers it is writing on Impact of Covid on Health Workers (Point iii).

ii. As part of the November's WHA73 there was an agenda item on primary health care. Under this topic, the document 'Operational framework for primary health care' was being considered. The thematic group responded to this framework and highlighted its concerns, contributing to the PHM-MMI statement at the WHA73. Find the statement here and the poster.

iii. The HS thematic group is currently working with PHM activists and associated organizations from various country circles a paper on the issues faced by health workers during the Covid-19 pandemic. This paper is part of a larger project of the Global Health and Justice Partnership of Yale Law and Public Health Schools on the 'Human cost of COVID-19 policies', covering themes of justice, ethics and rights, equity, exclusion, access.

iv. The group coordinated the sub-theme How are we dealing with COVID-19? At the Prince Mahidol Award Conference 2021 which was held online and many PHM activists participated in the webinars and sessions organized as panelists.

v. PHM activists in various countries and globally have been monitoring and documenting both instances of successful deprivatisation and the failures of PPPs (including publicly funded health insurance schemes). PHM is collaborating with TNI's "Public Futures" initiative for documenting deprivatisation of health services and facilities. Activists in a number of country circles such as Uganda, India, Kenya are highlighting problems with PPPs and collaborating with other organizations to highlight its problems.

vi. PHM HS group activists contributed to the global discourse on health systems, especially in the context of Covid-19 through writing articles and participating in webinars and other activities.

PHM thematic group members made two article contributions (Lauren Paremoer & colleagues and Fran Baum & colleagues) in the BMJ collection of articles on “Covid 19: The Road to Equity and Solidarity”.

PHM Co-Chair Sulakshana Nandi contributed to developing a free online course titled “[Post Corona Starts Now](#)” organized by the Global Labour University. The course brought together academics, trade unionists, human and labour rights advocates and policy makers from around the world to discuss policy solutions to the most pressing issues exposed by Covid-19 and also offers the opportunity to discuss an agenda for change. Many young PHM activists enrolled in the course.

PHM Co-Chair Sulakshana Nandi presented at a webinar organized by TNI on the topic “[The Public is Back Proposals for a democratic and just economy](#)”.

vi. Trade and Health Thematic Circle:

The trade and health thematic circle organizes meetings once every two months on an average. The major activity/engagement of the thematic group has been around EACT project which is being coordinated under this thematic group. The EACT project updates are given to the circle members and suggestions and inputs sought from them. There has also been a considerable effort to get the T&H circle to participate in actions and advocacies at the members’ levels.

At the beginning of the EACT project, a note was sent by the co-ordinator to the members of the trade and health circle to inform them of the Program and their active involvement was sought in both global policy and networking component. Many responded with interest to join and also took part in the meetings and we were able to build new alliances across countries.

Thematic group also facilitated PHM’s campaign supporting the TWN statement on waiver and also on showing solidarity with Thai civil society on the death of Dr Mongkong, former health minister of Thailand. The TG mobilised various countries around the waiver and signs on to the waiver the next time it is proposed again, Meeting fixed for November 6th. Many statements around TRIPS waver were drafted and endorsed apart from social media campaigns.

Webinars held under TWN_TRIPS Project

1. Access to Covid19 Medical Products - Possibilities and Challenges, 7th July

(co-organised by Third World Network)

Recording- [Click Here](#)

2. COVID and FREE TRADE: CPTPP Impacts on Health in Thailand, 30th July

(co-organised by Third World Network , Public Services International and Drug System Monitoring and Development Centre)

Recording- [Click Here](#)

3. Availability of and Accessibility to Biologics: Implications for Covid and beyond, 5th August

(co-organised by Third World Network)

Recording- [Click Here](#)

4. Intellectual Property Rights Regime: Implications for Access to Covid19 Medical Products

8th October

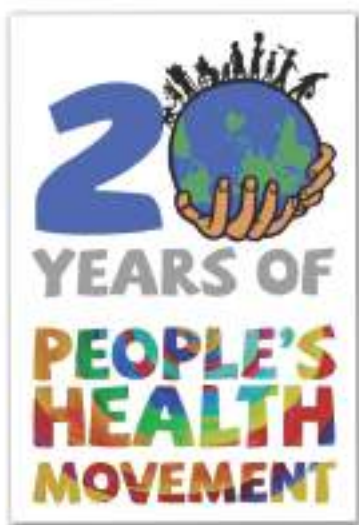
(co-organised by Third World Network)

Recording- [Click Here](#)

5. PHM Web Briefing: Proposed TRIPS waiver and the scaling up of production of vaccines and other health products in the pandemic context, 6th November

(The event was not uploaded for public as it involved internal strategizing).

People's Health Movement



III. PHM Movement Building





PHM's movement-building activities include: building and strengthening country circles; bringing in new partners and new networks; building on the synergies between global and local activities and finding new pathways and creating opportunities for more activists to get involved in realizing the PHM's vision. Improving communications (languages, technologies, modalities) within the organization and to the external world was also one of the priorities.

Almost all our regions accepted strengthened communication in the past year improves owing largely to the switch to the virtual/online format of meeting due to the Covid pandemic. The immediate responses needed for the Covid pandemic in health systems and other intersectional areas also provided an opportunity for movement building. Region wise details are below.

1. PHM Movement Building in South Asia and India



Community Health Workers (Mitaniins) from Chhattisgarh state of India present their demands to the Chief Minister in November 2020 demanding payment of pending Covid incentives, safer working conditions and social security.

For Covid-19 response, PHM India made four working groups were formed with more than 200 volunteers working under different themes on collecting evidence, advocacy and relief and support and building state level evidence resulting in many young activists were to get involved in this process. Apart from Covid response, PHM India also expanded its work and reach through engaging and providing support (through relief work, solidarity, statements etc) in key issues of concerns in this year such as farmer's protest, Delhi Riots etc.

Delhi state unit in India organised a [Panel discussion](#) on 'Caste and Occupation in times of Pandemic' on November 28 2020, in memory of Amit Sengupta. This was also part of observing the 20th year anniversary of the founding of the Jan Swasthya Abhiyan and the Peoples Health Movement.

PHM Nepal organized a virtual event on 24 December 2020 to celebrate 20 year of People's Health Movement. The theme of celebration was Looking Back-Looking Forward in Struggle for Equity and Justice in Health. 80 persons participated in the event from different parts of the country. Historical background and current activities of PHM were highlighted. Several participants reflected their views on achievement of PHM Nepal and learning from the past, opinion about what should be the present day agenda of PHM Nepal and what should be the approaches of PHM Nepal to move forward. The participants expressed that the event was reenergizing for the activists.

PHM Sri Lanka published three Magazines in 2020. PHM Pakistan Secretariat is putting its efforts to increase the member of PHM and expand the charter in Pakistan. More than 150 Small, medium and large size organizations are currently the members and their capacity building process is going on to raise the voice for health rights. Nepal proposed establishment of country circles in Bhutan and Maldives. With this view, one participant from Bhutan was involved in IPHU 2020. The efforts are ongoing.

Threats and Repression

PHM India unit reported concerns around state repression being faced by PHM and the civil society in general. The 4G internet network in J&K remained suspended till last month. The country saw mass exodus of migrants from cities to villages due to a sudden and stringent lockdown. The capitals saw riots between the Hindu majority and Muslim communities with destruction of lives and properties of mainly Muslim families.

2. PHM Movement Building in Latin America

Latin America is comprised of four sub-regions: a. Meso-America and Spanish speaking Caribbean, b. Andean, c. southern cone, and d. Brazil (Portuguese speaking). PHM in this region is affiliated with ALAMES throughout Latin America where many PHM, but not all, activists are also activists in ALAMES.

Memorial events for our comrade Margarita Posada were conducted. Persons from the LA Region participated in focus groups and interviews for the development of the Strategic Plan which has been translated into Spanish and has been disseminated widely ([link](#)). We also lost another dear friend Julio Monsalvo from Argentina this year.

Further, the region lost a co-ordinator through death in Mesoamerica. In the Southern subregion both co-coordinators are no longer functioning, one person because of sickness of a family member. Another has decided to leave the collective coordination. The Andean subregion continues to operate as individual countries. We need to develop a plan in 2021 for some sort of regional assembly to discuss governance and representation to resolve this situation.

There are a number of list serves and Whatsapp groups for PHM Latin America at the continental and the sub-regional level. There are also some Facebook accounts. Latin American activists are also part of some thematic group list serves.

There are many forms of repression or loss of liberties that the PHM is having to contend with in Latin America including harassment, arrest and imprisonment, assassination, loss of legal status and nationality, violation of individual and collective rights, etc. Our coordinator Maria Hamlin has herself been a victim of this harassment. Many of PHM colleagues were **threatened in Columbia** in practice to apparently slander and defame social leaders and link them with armed groups.



Julio Monsalvo with Carmen in the first People's Health Assembly. Our dear friend Julio and the founder of PHM in Argentina left us last year.



Latin America 20 years celebration

PHMLA had a series of three organizational meetings linked to celebrating the 20th anniversary of PHM. Three types of activities were planned at the sub-regional level: These was a video about the development of PHM in LA, **a seminar over 3 days**, and a campaign is to go on for a while collecting information about work in the sub-regions. Each sub-region worked on an overall framework from the meetings held to discuss the anniversary. This framework also looked at the future of PHM in Latin America.

In addition to the above, PHM LA commissioned the magazine Pijuanoto to undertake a project for reconstruction of historical memory by collectively recalling and reflecting on the path of MSP-LA and a critical and self-critical review of the journey taken to rethink the desired futures.

The Pijuanoto Magazine was born in 2005 and until mid-2015 it was the interlocutor, the voice of PHM Latin America. Its contents were related to expressions of struggle, of defense of the health of the people, its messages were backed by reliable sources, and the aesthetic part was handles very carefully, which gave it a very peculiar characteristic. Now less frequent in publication, a special issue was planned for this anniversary. Among the very many contents planned for this special issue were four articles that would share experiences of these 20 years in the struggle for the Right to Health and Life with Dignity of the People and perspectives were planned.

3. PHM Movement Building in South East Asia and Pacific Region



The first PHM SEAP region online meeting on 20 March 2020

PHM SEAP currently consists of 13 countries under the three regions of South East Asia, North East Asia and the Pacific.



PHM Cambodia (SACD organisation) 2020 activities

Solidarity movements under the COVID-19 pandemic gave us the opportunities to activate countries which were less active and various country level endorsements were circulated in the region for support Example- ([link1](#), [link2](#)). SEAP generated our first regional webpage (as a Google doc) to share country circles' statements and articles on COVID-19 during the early phase of the pandemic.

Stimulated by information and urgent call from PHM around Covid vaccines and IP issues, PHM-Japan,

at the beginning of December, 2020 contacted other like-minded NGOs and formed a network (“Equal Health and Medical Access on COVID-19 for All!”) to take collective actions on COVID-19 IP Waiver issue. It added two more member organisations this year: AJF (Africa Japan Forum) and Nagoya NGO Center.

One of the constituents of PHM Philippines, SHAPE UP (Solidarity of Health Advocates and Personnel for a Unified Plan to Defeat Covid 19) conducted two Zoom/Facebook Tributes to our colleagues in the frontlines (hospitals and community centers) who were afflicted with COVID and died from it. The presentations were very moving because we were supported by the Concerned Artists of the Philippines and they made the tribute meaningful by way of poems, songs, and other culturally enhanced presentations.

Philippines has managed to engage with Philippine Academic Society of Community Medicine (PASCOM). PHM members have been invited to speak as keynote speakers discussing issues on health and health rights in PASCOM’s General Assemblies.

PHM-OZ member Connie Musolino led an [article](#) reporting on narratives of activists who had been interviewed as part of PHM’s IDRC project researching the effectiveness of civil society activism. Some PHM-OZ members are active on twitter.

Threats and Repression-Since the start of the Duterte Administration in 2016, active and progressive organizations including the PHM constituents organizations in Philippines have been “red-tagged” or linked to these groups and charged with being coddlers of the communists/armed wings. A Facebook account was set up by unknown people which have identified our partner organisations as communist fronts, vilifying some of their respective officers and members. A protest letter was sent to Facebook demanding that the account be taken down and when FB declined, a protest action was done in front of the FB office and eventually FB took down the account. In this period few of the PHM Philippines colleagues were killed and shot down by assassins (flagged by the Duterte government for being “communists”). Protest actions have been launched about this and petitions have been filed in the Supreme Court to declare the Anti Terror Law (ATL) as unconstitutional. Delen De la Paz is one of the petitioners in the petition filed by the Movement Against Tyranny.

4. PHM Movement Building in Europe

There are currently 11 countries represented in PHM Europe some being more active than others and their representations varying over time. For ex, there is a group linked to PHM operating as PHM Scandinavia but communication with them oscillates.

It is worth mentioning that during 2020, two countries have formed formal PHM circles: Germany and France. This has encouraged local participation in those countries, and led to a series of events organised during the last year, for example [interviews with several PHM activists](#) in Germany.

Since 2019, we have based our intra-regional communication and coordination on a strategic document ([link](#)), aiming at involving more people, from all countries of PHM Europe, in decision making processes at the regional level. Implementation has been successful with most countries of the region, but some country circles have proven to be difficult to contact and therefore remain unrepresented in the smaller decision-making group.

Movement building was also encouraged through the participation in the development of PHM’s Strategic Plan, as well as constant contribution to global activities and programs.

PHM Europe has a very good relationship with European Network, with our activities being very close to

each other. Also, giving local affiliations and networking, PHM Europe has ties with associations: Medicus Mundi Mediterranea, Medact, HPA, Viva Salud, Centro di salute internazionale (CSI), Medico International, Mezis, MMI, Organization for Workers' Initiative and Democratization (OWID), IAHPE, and ESE (North Macedonia). Sometimes, there is also overlapping with work being done by UAEM.). Additionally, there are trade unions who are also part of PHM in some countries.

This time, the collaboration between PHM Canada, European Network, and PHM Europe has been quite successful in raising awareness and encouraging activists to mobilise around issues related to privatisation of long-term care.

In addition to several country-level communication channels (mailing lists, social media groups), the region continues to use a general mailing list, and hold regular bi-monthly Skype meetings.

5. PHM Movement Building East and South Africa Region

PHM East and Southern Africa currently has 9 countries within the region with 3 most active countries namely Kenya, Uganda and South Africa.

We have PHM East and Southern Regional committee which support existing regional work. There has been regular communication through Email, Skype/zoom and WhatsApp group. Countries like Mozambique after some years of stopping activities on PHM, has reactivated its communication and coordination activities.



PHC 14.1 and 14.2



PHM SA members meetings with Community Health Workers of Gauteng and Northern Cape provinces in South Africa to take feedback for extended model of South African People's Health University.

Before the pandemic PHM-South Africa made visits to the two provinces to get feedback from the groups on the extended model of South African People's Health University (SAPHU). PHM-SA has also started to work closely with the South African Care Workers Forum (SACWF).

6. PHM Movement Building in West and Central Africa

PHM WCA has contacts/members in 19 countries among them 14 French-speaking, 5 English-speaking

This year the Global Secretariat and the WCA region coordinator together worked to encourage WCA members to participate in different thematic groups of their interest and names of interested individuals were received for almost all thematic groups. Many of them have already been included in the email list serv. Others such as Ecosystem and Health are discussing and planning to figure out the interpretation issues over zoom so that the language barrier can be taken care of in meetings and webinars. Many issues

such as a PHM email id and regional listserv issues were resolved for smooth functioning of the movement.

PHM Benin organised online follow up activities with past IPHU alumni. There were three e-discussions with the alumni on COVID and Human rights, Covid and Culture, Covid and access to medicine.

During 2020, the Malian Right to Health Association (PHM Mali) built a partnership with two organizations:

- ▶ Tribune Jeunesse Association for Health and Hygiene to organise an IPHU on water sanitation, hygiene and human rights.
- ▶ Malian Association of Victims of Tobacco to sensitize the youth on tobacco and health.

The IPHU in Cameroon ended with a meeting on dynamization of PHM and an open invitation for potential participants to join. The participants were also given the opportunity to subscribe to each of the six PHM thematic circles.

7. PHM Movement Building in Middle East and North Africa Region



PHM Palestine organized an online training workshop for activists in the Arab region.

Despite the challenges that the region faces, Health Work Committees, as a coordinator to the movement in the region, was able to network and activate their efforts with a number of countries in the region, for example: Jordan, Lebanon, Morocco, Tunisia, Egypt, Iraq, and Yemen, where it established a joint project entitled “Equitable Access to Health in the Face of Privatization in Health Systems in the Arab Region”.

Many of the recommendations like health under occupation, refugee issues, protecting women from violence, and privatizing health systems were adopted in the PHM strategic planning.

In the webinar that was organized on “The Future of Health Systems in the Middle East and the North Africa Region in the time of Pandemic” participants from the European regions attended especially since French translation was provided. .

The organization of a region specific webinar, also contributed in a major way to strengthening the network across nations of this region and building capacity within country circles.

8. PHM Movement Building in North America

PHM Canada managed to build collaboration with PHM Europe and the European Health Network for its [4 part webinar series](#) on privatization of long term care industry.

In 2020, PHM Canada also went through an important internal reorganization in response to the growth

in members and work that arose out of the pandemic, in order to facilitate the incorporation of new members, and structures to facilitate decision-making and accountability. We now have regular administrative meetings, with four established workstreams to better organise our work, and clear strategies in place to fold in our connections with partners and allies.

PHM USA organized a well-attended virtual National Health Assembly on July 18th and 25th of 2020. The discussions were held on the basis of a movement-wide survey and building on past PHM-USA work and this experience was organized into 7 working groups :

- Health systems reform & access to equitable and respectful healthcare
- Reproductive justice
- Safe and healthy work
- Environmental justice
- Trade and health
- Immigrant rights
- Reversing US imperialism in global health

9. Movement Building at Global Level:

Celebrating 20 years of Peoples Health Movement:

This event helped energize the movement globally- by a participatory celebration and reflection on what it means to be a peoples movement. It also helped us launch the strategic plan- which is our way forward. For this reason- the title of the event was **“20 years of Peoples Health Movement: Looking Back, Looking Forwards.”**

This year marked 20 years since activists and comrades across the world joined us in the first People’s Health Assembly in Bangladesh in 2000 and the PHM journey began. To celebrate the occasion an international webinar was held on 4th December 2020. The first Peoples Health Assembly had been inaugurated on 4th December 2000. But in parallel to the international webinar, there was an appeal circulated for more regions and country circles to organize their own celebrations.

The International Webinar was moderated by Fran Baum and began with a joint singing of Bella Ciao, led by Chiara. The main guest speaker was Prof. Suwit Wibulpolprasert who spoke on Role of PHM and Health Activism to ensure health Justice. Other speakers who reflected on the 20 year journey were Hani Serag, Maria Zunega and Pacome Tometissi. As part of looking forward, Sulakshana Nandi presented the strategic plan in some detail. Special highlights of the event was the streaming of a video featuring 20 years of the PHM Journey but together by Sochara and introduced by Ravi Narayan, a former Global Coordinator, PHM. Another highlight was a second video put together by the global secretariat with the help of Sebastian, which had voices and messages from many country circles across the regions.

This was one of the most well attended webinars of the year, with over 250 from across 33 nations participating- and with translations available in English, Spanish, French and Arabic. [Link to webinar.](#)

The Strategic Plan as Movement Building Process

The other major event in movement building at the global level was the development of the Strategic

Plan. Appendix 2. The strategic plan development process occupied a significant part of the PHM global team efforts in the last year.

The process began with a detailed two-day discussion in the Steering Council Meeting in Bangkok. Preceding this, after months of discussions PHM had recruited the services of Lexi Nolen and Ravi Ram as full time for this process. Both facilitators were present in these initial discussions, which lay down the broad objectives and methodology of the plan. Broadly the final strategic plan was designed as an outcome of a facilitated participatory process based on synthesizing existing PHM plans and discussions as well as emerging ideas.

Development of the strategic plan required engaging with PHM's existing structures of regional representatives, country circles, global programmes and thematic groups. The purposes of the participatory processes were (a) to ensure that a diversity of views inform the strategy and improve its overall quality, (b) to prepare PHM activists globally for collective action, and (c) to enhance solidarity and shared ownership around the final strategic plan.

Information was sourced from documents; interviews with PHM activists including Steering Council and Coordinating Commission members; Coordinators and representatives of thematic and country circles, global programmes, and regions; Secretariat Staff; and activists from affiliate and non-affiliate networks, as well as donors and global health governance institutions.

Building on PHM's Theory of Change, a strategy framework was developed that combines the "why" of PHM's work (values), with the "how" of PHM's work (the Theory of Change strategies) and the "what" of PHM's work (priority health issues). It also factors in key context issues in global health as well as specifics of PHM's management and resources. The plan elements represent both priorities and emerging ideas for strengthening the impact of PHM's work, including how to greater connect PHM's various areas of work—both vertically (from the global to country levels of PHM's work) and horizontally (across key priority issues and various activities). The 5-year goals (as well as activities, outputs, and outcomes included in an expanded version of the framework) were developed by global programme and thematic circle coordinators, along with the Secretariat, Steering Council, and CoCo representatives.

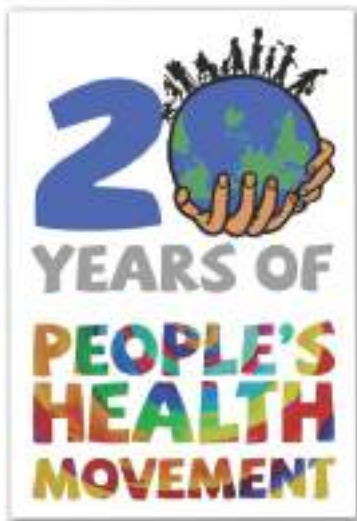
The participatory process also included an extensive survey of PHM country circles related to priorities, needs, current campaigns and country-level focus, and other issues. This process took place from May through July. The facilitators prepared materials to guide discussions within country circles regarding country priorities, mechanisms for movement building and engagement with global programmes/themes. Materials were prepared in English, French, Spanish and Arabic. The country engagements depended on activists at the regional level, including the PHM regional coordinator as well as regional committees (where functioning), to work with the facilitators in customizing and conducting interactions with the country circles. A few country circles were consulted for follow-up discussions. The Strategic Planning Country Discussion Guide included materials for activists to use in providing their inputs to the strategy, and in some cases countries have indicated that they will continue to use the Guide to help frame their national-level work.

A first draft was submitted in early June to the Coordinating Commission for discussion and feedback. A revised draft of the plan, incorporating results of the Coordinating Commission inputs, development of the framework goals, and Country Survey, was submitted to the Steering Council and Advisory Group, including regional representatives and to the thematic circle coordinators in early August for final comments and revisions and with an executive summary. These were then further incorporated leading to a pre-final draft

submitted by the facilitators-which was circulated once again to Steering Council In September 2020. Then a four-person group from within the coordination commission considered these final round of edits and suggestions, especially as pertains to the executive summary. This final document was and disseminated in November, exactly 10 months after the work began.

(Note: this entire section is cited almost verbatim from appendix 2 of the strategic plan- but with some minor edits to make it relevant to this document).

People's Health Movement



**IV. Capacity Building
and the International
People's Health University**



1. Globally Coordinated IPHUs

Two IPHUs were coordinated globally in this period.

a. Kathmandu, Nepal (17-23 February, 2020)

Theme - “The Struggle for Health and Equity in Health”

41 participants were chosen to attend from Bangladesh, Bhutan, India, Nepal, Pakistan and Sri Lanka.

This IPHU was organised by the People’s Health Movement (PHM) Global, Sama Resource Group for Women and Health and PHM Nepal. The major objectives of the IPHU were to build the capacities of young activists from South Asia to:

- Strengthen knowledge and conceptual tools for equity analysis of the political, social and economic structures and dynamics (at the local, national and global levels), which frame the social and environmental determinants of health.
- Broaden understanding on the social determinants of health and their intersectionality.
- Enable understanding on inequities and mental health.

b. Virtually conducted IPHUs with participants from MENA region (10 November- 16 December 2020)

Theme - “The Struggle for Health and Access to Affordable Medicines”

The IPHU on Access to Medicines is part of a 3 year joint activity of PHM and TWN under the project “Health for All: Increasing Access to HIV, TB and Hepatitis C treatment through effective use of Trips Flexibilities”. Two IPHUs under this project have already been held, one in Bangladesh (2018) and the other in South Africa (2019). The IPHU for 2020 was to be held in Jordan, but stood cancelled due to the pandemic crisis and restrictions on international travel. This necessitated that the IPHU be held virtually/online. 14 Participants from Egypt, Morocco, Jordan and Yemen joined in the IPHU.

The course spread over six weeks encompassed two formal sessions every week (two hour duration). These two days every week were divided into one with a lecture format and the other an interactive session with panel discussions, movie screening/review, group discussions and group work. While the live classes

were held on Zoom platform, an in house moodle platform ([click here](#)) was also created to allow for uploading reading materials, presentations and lecture videos. The in house platform was also to ensure a safe space for the lecture recordings to be uploaded.

2. Regional/country IPHUs

PHM Cameroon organised in December 2020, a IPHU with official launching by the PHM Global Coordinator and support/lectured from Claudio Schuftan.

In Europe, an IPHU is being prepared by two PHM affiliates in Catalonia (planned in May 2021) focusing on privatisation of health care. Several sessions of the IPHU are being developed with the help of PHM thematic groups, e.g. the one on gender and health, and conflict, migration and health.

3. Other capacity building activities

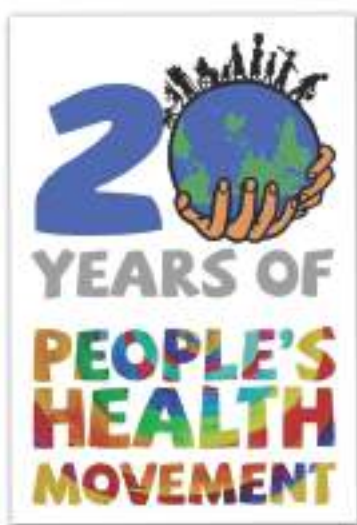
The countries too undertook capacity building activities at their level.

PHM SA hosted an online SAPHU with CHWs in the Eastern Cape. The online sessions took place weekly for 2 hours on a Saturday morning. The SAPHU's with CHWs have assisted CHW to become more organised as a force to challenge government regarding their status and pay, but yet to achieve full recognition as permanent health workers within the health system with appropriate pay and safe conditions of service. This is an ongoing struggle.

In Mozambique, PHM organization were engaged in a training activity through the promotion of an online course on digital activism involving various civil society organizations in Mozambique.

PHM Pakistan conducted capacity building workshop of Health Journalist to follow the health-related issue.

People's Health Movement



**V. Promoting a Robust
Political Economy based
Critical Analysis
of Health**



Global Health Watch 6

In 2020 Chiara Bodini and Ron Labonte, on behalf of GHW6 core editorial group, have continued the work on GHW6. Given the unexpected situation caused by the COVID-19 pandemic, and the need to both adjust to changed availability of authors and capture the reality of the pandemic and its impact on the political economy of health, it was agreed by PHM Steering Council to delay the publication by six months (from mid 2021 to late 2021/early 2022). This decision was then discussed with GHW6 editor, that in the mean time had changed as Zed Books merged with Bloomsbury Publishing. However, the contract did not change and Bloomsbury Publishing agreed to postpone the publication by six months.

The first half of 2020 was dedicated to re-contacting all authors and discussing new briefs for their chapters (now incorporating emerging COVID-19-related issues) and new timelines. This process was finalised after the summer, and allowed to minimise overlaps and maximise synergies and complementarities between chapters. Towards the end of 2020 the first draft chapters started coming in, and consequently started the process of review that is currently carried out by the co-editors, with support from other PHM activists who are expert in the different topics.

In conclusion, the GHW6 development process is on track and we look forward to having – in less than a year – another powerful tool to support and strengthen our struggle.

Actions in the Regions

Brazilian sub region contributed in Publication of the MSP / Cebes magazine in January during the World Social Forum in Porto Alegre

PHM India (through Delhi unit) organised the [Book Release programme](#) of “Political Journeys in Health: Essays by and for Amit Sengupta”.

PHM Nepal has published its [position paper](#) on health insurance model in Nepal and presented in several government and civil society forums.

Sharon Friel and Fran Baum from SEAP region contributed to a [series](#) produced by VicHealth (a statutory)

health promotion. They also wrote about the need for a social vaccine (link) using a metaphor PHM developed some years ago.

Bel Townsend has continued to research and advocate on issues of trade and health. An example of her research is this [article](#) on trade and investment as drivers of NCDs.

PHM-SA was invited to write an [article](#) on CHWs in the Eastern Cape as part of a series of articles on Re-imagining Health in the Eastern Cape Province, one of the provinces with the weakest health system and health outcomes for many years.



25. PHM participation in Prince Mahidol Award Conference

PMAC- Prince Mahidol Awards Conference (PMAC)

PHM has collaborated with the PMAC conference for over a decade. This year the conference was virtual and many PHM members played a role in organizing, chairing and contributing to sessions.

PHM organised Plenary and series of webinars concluded under PL2, which are available in the links below:

Immediate Health System Response to Covid-19: A tests of health Systems resilience

Assessing the situation of COVID-19 and international trade and health

Making International IP and Trade Regimes Work to Address the Health Response to COVID-19

Governance for health: towards more equitable policy-making and ethical partnerships

Forms of Discrimination, Social Exclusion - Focus on Inequitable Impact of COVID-19 Pandemic

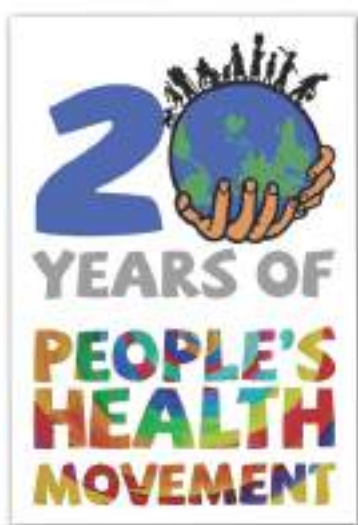
Resistance, opportunities, and threats during COVID pandemic

Social determinants of health

All the sessions of the conference have been recorded and can be accessed here <https://pmac2021.com/>.

In addition, PHM members contributed several articles to the [British Medical Journal special edition](#) on COVID-19: The Road to Equity and Solidarity.

People's Health Movement



VI. Global Health Governance





Jenn Lacy-Nichols at the WHO Executive Board Meeting, Jan 2020



PHM WHO Watchers, Jan 2021

1. Watching the World Health Organisation

The WHO Watch Program aims to promote and advocate for Democratic Global Health Governance. The program is designed to monitor and intervene in the WHO's Executive Board (EB) meeting in January and the World Health Assembly (WHA) in May. It is also an opportunity to advocate on issues related to Global Health Governance. The program incorporates elements of resource development, advocacy and capacity building of young activists.

Three cycles of 'WHO Watch' have been completed in 2020, in January at the 146th session of the Executive Board (EB146), the 73rd World Health Assembly (WHA73) de minimis of May (exclusively to discuss the response to Covid19 pandemic) and resumed WHA73 session of November. Due to the Covid19 pandemic, the WHA was held virtually, which required the WHO-Watch programme to adapt. Both the workshop and watching in May and November were held virtually and, in addition to the usual interventions in the official discussion, now held on zoom, special attention was given to projecting our interventions on social media platforms, especially twitter.

In 2020, the program involved 26 young activists as watchers who had the opportunity to experience first hand how the WHO's governing bodies function, and even more importantly, were familiarized with a vision of health for all as proposed by PHM. Further, the regular drafting of a comprehensive commentary of discussions on the agenda of WHO's governing bodies and the development of the WHO Tracker are a valuable addition to the global health movement. The WHO Watch program is organized in two phases- i. the preparatory phase and ii. The watching phase the technical topics were critically analysed and the positions to be articulated by were deliberated upon.

WHO Watch 146th Executive Board January 2020 (3rd to 8th February 2020)

A civil society brainstorming & strategy meeting was organised by Geneva Global Health Hub at Ecumenical Centre, Geneva on two days, 31 January and 1 February prior to EB meeting. The objective of the meeting was to discuss the approach of civil society organisations for EB146 and discuss the governance matters of WHO. WHO Watch team took the opportunity to present the analysis of various technical agenda points. The meeting also held a remembrance of PHM Co-Chair Prof David Sanders who passed away in August, 2019. The presentations and full details of the two-day event can be found here.

For the Watch, the submitted statements were also orally presented by the watchers during the discussions on the particular topic. The team also prepared a detailed policy brief - [click here](#)

Below are the topics and statements presented by WHO-Watch team for EB146.

6. Primary Health Care

7.1 Follow-up to the HLM of the UNGA on UHC

10. Ending Tuberculosis

14. GSPOA of action on public health, innovation and intellectual property

15.4 The public health implications of implementation of the Nagoya Protocol

19. Accelerating efforts on food safety

20. Data and innovation: draft global strategy on digital health

22.1 WHO reform

22.2 Engagement with non-State actors

WHO Watch: WHA73 (Abridged Session)- May 2020 (18th and 19th May 2020)

Though the agenda was limited to EU resolution (Covid-19 response), the watchers divided the topic into the following themes to analyse and understand it better; 1) Emergency preparedness, 2) Health systems, 3) Health workers, 4) Access to medical products 5) Human rights violations , Vulnerable groups , Gender, and social determinants and 6) Food Security, Socio-economic relief/response and larger macroeconomics.

Due to changes in organising, Non State Actors were not provided with opportunity to intervene through statements. However, PHM analysed and commented on the EU Resolution (Covid-19 Response) that urged strengthening international arrangements for responding to this and future pandemics more generally; and strengthening the accountability of nation states in relation to preparing for and responding to the pandemic in accordance with public health best practice and human rights principles.

In addition, popular articles were written prior and after the assembly to simplify the discussions for larger audiences.

WHO Watch: WHA73 - Resumed Session (9-14 November 2020)

Due to the virtual nature of the WHA, WHO restricted the number of statements to six to be officially read out on the floor of WHA. However, the watch team went beyond the restrictions and circulated additional statements in written/recorded videos for circulation on social media.

Find below the topics and statements (hyperlinked) presented by WHO-Watch team for WHA73 (resumed)

11.1 Primary Health Care

11.2 Follow-up to the HLM of the UNGA- NCDs

11.3 Global vaccine action plan

11.5 Ending tuberculosis

11.8 Neglected tropical diseases

11.9 GSPOA on public health, innovation and intellectual property

13.2 WHO's work in health emergencies

13.3 Influenza preparedness

13.5 Poliomyelitis

15.2 MIYCN and 15.3 Accelerating efforts on food safety

Posters

11.1 Primary Health Care

13.2 WHO's work in health emergencies

13.3 Influenza preparedness

13.5 Poliomyelitis

PHM'S Commentary and Tracker on Agenda of WHO governing bodies

A very detailed commentary, covering all items on the agenda of EB146 and WHA73 (de minimis) was prepared by a team led by David Legge, in consultation with experts around the world. This commentary was used as the basis for discussions at the preparatory workshop. The commentary prepared by PHM is the only comprehensive overview made available during the WHO's governing body meetings. In addition to informing PHM's positions on individual issues and in facilitating discussions at the preparatory workshop, the commentary is also shared extensively on the PHM-Exchange and other PHM social media platforms. The EB146 commentary was also shared with country delegates and WHO officials, and was used by country delegations, especially less resourced delegations from low income countries, a variety of CSOs, and even WHO officials. The PHM commentary is also acknowledged as the only comprehensive commentary of the entire agenda accessible to all delegates to the WHA.

The commentaries can be found on the following link:

<https://who-track.phmovement.org/>

Recording the Proceedings and Collaborating with a range of CSOs: Using Social Media, Google docs and Skype channel as tools for collaboration and advocacy

In the last few years it was noted that a considerable engagement on the discussions of EB/WHA was taking place over social media (mainly twitter). In this regard, the team of watchers was involved in a series of coordinated activities such as tweeting discussions/debates live, informing PHMs standpoint on various agenda items through posters and also by uploading videos of statements delivered at the WHA and EB meetings. (YT link)

Simultaneously, a **Skype channel (only EB)**, subscribed to by over 250 members, both from PHM as well as from other CSOs, provides a gist of the discussions at the EB in real time, and allows subscribers to comment on the positions articulated by different governments during the deliberations in the meeting.

Some of the CSOs that are part of the Skype channel collaborated with the PHM in various ways in promoting advocacy on different issues included: Third World Network, Medicus Mundi International, Medico International, Health Action International, Knowledge Ecology Initiative, Universities Allied for Essential Medicines, Public Services International, MSF, International Baby Food Action Network (IBFAN), and Oxfam.

2. Other activities and collaborations at global level

Webinars- Considering the shift to online debates through Webinars in response to the restrictions to physical meetings due to the pandemic, PHM took the lead in organising topical webinars on the sidelines of the WHA73 in May. Our webinars were well attended and allowed for wider debates with allies and civil society. More details on the webinars are provided below.

i. The COVID Pandemic and the WHO- Need for Reflection and Global Solidarity:

On 8th May, PHM organised a webinar on the need for global solidarity and the importance of WHO. This was held in the backdrop of an increasing attack on the WHO/UN system by few countries to delegitimize the role of multilateralism. The speakers of the webinar were Mirza Alas, Global Health Analyst, Andrew Harmer, Queen Mary University of London and Mary T Bassett, Harvard School of Public Health. The session was moderated by Dr Hani Serag, PHM. The recording of the session can be seen here

ii. Covid-19 World Health Assembly- A People's Assessment:

On 21st May, PHM organised a webinar to discuss and evaluate the WHA73 (Abridged Session) and what the outcomes of the session would mean for global health and in particular towards the response of Covid-19. A significant discussion was also on the issues of international health regulations, access to medicines and human rights. The speakers of the webinar were Walaiporn Patcharanarumol- IHPP, Ministry of Public Health, Thailand, Sundararaman T- PHM Global Coordinator and Natalie Rhodes- PHM UK and WHO-Watch team. The session was moderated by Maira Mathias- Health Journalist, Brazil. The recording of the session can be seen here.

iii. Responses to Covid 19 in the Middle East and North Africa Region: May 23

On May 23rd, PHM organised a webinar in the backdrop of the World Health Assembly to also understand the issues of Covid-19 and its response at the regional level. The discussion looked at the regional level response to the pandemic, preparedness of countries and the ability of Health Systems. This was also discussed in relation to the volatile geo-political situation in the region.

b. In April, PHM denounced the move by the US Trump Administration to defund World Health

Organisation (WHO) and called for building global solidarity to address the COVID-19 pandemic and its consequences and to support the WHO as the leading global health institution in this fight. The statement was widely circulated and translated to various languages. The statement can be found [here](#).

Participation in the WHO Town Hall meeting

T. Sundararaman (PHM Global Coordinator), Melanie Alperstine (PHM East and South Africa), Matheus Falcao (PHM Latin America) attended the ‘Civil Society Town Hall with WHO Director-General’ meeting on May 26. In the interaction, PHM raised concerns over the way autocratic governments used Covid-19 crisis to crack down on civil liberties and people’s rights. The DG also committed to follow up on the issue.

Resisting corporate capture of global health governance

Over the last year PHM was involved in multiple activities to put up resistance against corporate capture of global health governance. PHM collaborated with other organisations working on these issues in various sectors. Some of the highlights are given below:

i PHM published a paper titled ‘Covid19 Vaccine Governance: Sidelineing Multilateralism’ written by journalist Priti Patnaik. The paper highlights the sidelining of multilateral institutions such as the WHO in Covid-19 response related to vaccines and documents the shortcomings of the multi-stakeholder approach to global governance of Covid-19 medical products, and vaccines in particular, in ensuring equitable access across countries. The paper’s release coincided with WHO’s 148th Executive Board meeting week. The paper was very well received and gave us an entry point to create alliances with other organisations working on the corporate capture of UN institutions in other sectors. The paper can be found [here](#).

ii. PHM is part of an alliance created on the issue of corporate take-over of global governance through multistakeholderism. The alliance believes that the post COVID-19 world presents corporates with a new opportunity to deepen their capture of global governance and ensure it serves the interests of corporate business and profits instead of putting in place policies for the wellbeing of humanity. Therefore it is urgent to unmask this global and systemic trend by highlighting how it operates in key sectors as well as challenge it towards building a strong public and participatory governance. The collective [released various resources](#) around the time of the World Economic Forum held in January 2021. An open letter titled “Time for a Democratic Reset – Global Crises Need Global Governance in the Public Interest” was released by the collective. A webinar was organized on 26th Jan 2021 on “[The Great Take Over: How we fight the Davos capture of global governance](#)”. From PHM, Sun Kim of PHM South Korea and Steering Council member presented at the webinar of corporate capture of the WHO. Some other organizations that are part of this alliance include Corporate Accountability, FIAN, Focus on the Global South, FOEI, G2H2, IT for Change, MSI Integrity, Public Services International, and Transnational Institute.

iii. PHM endorsed various statements

PHM supported [Statement by PNGO and urged broader support for Palestine](#). PHM endorsed the statement of the Palestinian Non Governmental Organizations (PNGO) and called upon organizations and individuals to endorse it. PHM also called upon progressive civil society groups and social movement to practice solidarity with Palestinian people against the racist crime of the century of the US administration and Israel.

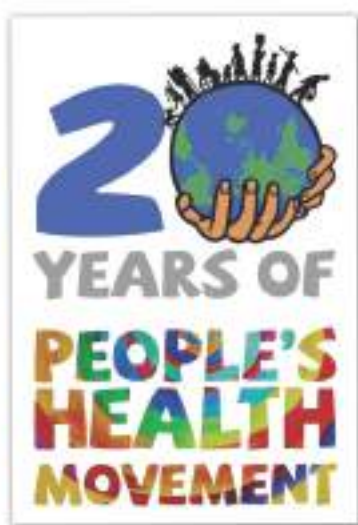
PHM endorsed [CSOs Letter on UN Food Systems Summit](#)- PHM endorsed the CSOs letter to the United Nations which was released as a protest and a caution against the imminent capture and influence of the UN Food Systems Summit by agribusiness. PHM endorsed the [Open Letter to Trade Ministries and the World](#)

[Trade Organization \(WTO\)](#) urging them to stop all trade and investment treaty negotiations during the COVID-19 outbreak and refocus on access to medical supplies and saving lives.

PHM endorsed the CSO [letter to the Secretary General of UN and DG WHO](#) urging them to operationalize fair and equitable benefit sharing arising from the sharing of COVID-19 digital sequence information and samples as recognized by the Convention on Biological Diversity (which has 196 Parties) and its Nagoya Protocol.

PHM endorsed the [Nurses Day Manifesto](#) that was developed by PSI asking for universal public health once and for all.

People's Health Movement



VII. Project: Promoting
Equitable Access to
Medical Products
in the Context of
COVID 19
Pandemic



The issue of equity in access to medical technologies is not an issue related to merely health systems preparedness or even global supply chains. It is representative of all the contradictions and conflicts created when health and health care, including access to essential technologies is seen as an opportunity for corporate profits, rather than as a global public good. The huge crisis in health care precipitated by COVID 19 has now brought this agenda of the very nature of production and allocation of health into the public discourse.

It is in such a background context that PHM has undertaken the Program “Promoting Equitable Access to Medical Technologies in the context of COVID 19 pandemic”. For ease of reference we are using the acronym “ EACT” (Equitable Access to COVID19 technologies). As a project this begins from July 1st 2020, and has duration of one year- closing on June 30th, 2021. The project has 4 arms- The global arm and the pilot country arms of South Africa, South Korea and India. As a program, our intention is that this work should continue indefinitely and extend beyond these pilot nations.

The work can be presented as contributions of the global arm and as work that took place in the three country circles.

1. Work of the Global Arm of EACT Program:

a. Developing Conceptual Framework for EACT:

The program began with a discussion on the conceptual framework – both for implementation of the project and for a political economy based analysis on the issues involved.

As an outcome of these discussions and to build a shared understanding of the framework three documents were finalized. These were:

1. **Note on Theories of change with respect to this project- Fran Baum and David Legge: (July 27-2020)**
2. **Note on Access to COVID 19 medical products: (David Legge 2020-07-23)**
3. **Global Developments Around access to covid technologies: (David Legge and Sun Kim, October 2020)**The article can be accessed here

b. Coordination and Project Management:

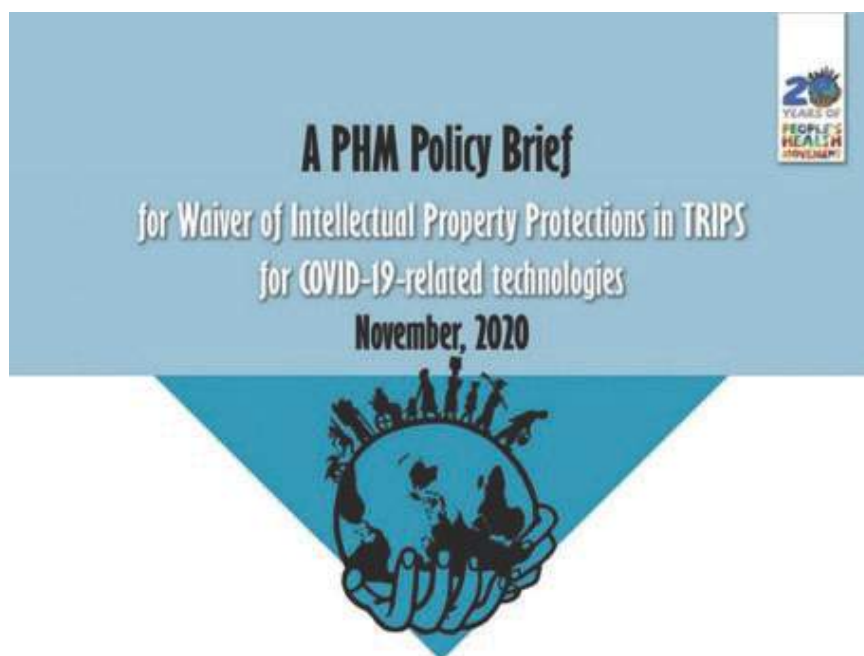
The global coordination of the project is through a project committee chaired by David Legge with Prasanna Saligram and coordinator. It organizes regular project review and planning meetings.

In addition order a Web briefing was organized by the Project team on November 6th 2020. tomobilise the PHM country/regional circles PHM, There was also a webinar where PHM collaborated with Third World Network (TWN), Medicines Sans Frontiers (MSF) and Section 27 organisations to initiate work in South Africa.

c. Policy Maps and Policy Products:

One of the main functions of the global arm is enabling access to already existing policy resources to PHM country circles as well as the development of new and relevant policy resources.

One major step in this direction has been the creation of a web-page in the PHM web-site called “Equitable Access to Essential Covid Technologies - Useful websites and articles”



Another major step he project team put together a Policy Brief to answer some of the common queries that some of the countries had raised at the first meeting of the TRIPS council but also put in details around what a mechanism like Covax could do or not do. The policy brief was designed as an easy to read and use statement that could be shared with decision makers to explain the issues involved and seek their support. It also served to educated PHM activists on this issue. This policy brief was translated into Korean and Portuguese by Korean and Mozambique team. Drawing from the Policy Brief, the PHM colleagues in Brazil prepared a Q&A document in Spanish for the Latin American region ([Link](#)).

Yet another form of increasing access to policy resources is being responsive to requests for support from different friends and allies. One such request was from Avaaz organisation which contacted PHM secretariat requesting for more information about the issues surrounding the access to medicines and technologies. Avaaz ran a campaign ‘universally accessible and affordable COVID-19 vaccines’ including on support for the waiver and collected 900,000 signatures which was presented to WTO. Bernard Kuiten, the WTO’s Head of External Relations, received the petition on behalf of WTO. More details can be read here.

d. Policy Interventions:

The major intervention in this period has been the mobilization of support across countries to the proposal by India and South Africa at WTO for waiver of all TRIPS conditionality related to intellectual property rights.

This took the form of endorsing a global call initiated by TWN and was followed by PHMs own appeal to governments of all nations and to PHM country circles and to civil society organizations to persuade nations to support this waiver proposal. The statement can be accessed at the link.

As part of this, EACT project team initiated another statement around the 19th Anniversary of Doha Declaration, which was released by the PHM Global secretariat globally.

Since there, EACT committee has guided PHM endorsement of a number of other calls and statements across many networks.

2. Country-level work

i. South Africa- In South Africa the country research team commissioned a consultant, Catherine Tomlinson, to complete a rapid situational analysis on barriers to accessing Covid-19 technologies. The report was officially launched in a webinar on 10 December 2020, which was attended by about 40 people from South Africa and beyond. . Locally, the report has been officially endorsed by Section 27, the Rural Health Advocacy Project, Cancer Alliance and a group of about 80 prominent South African academics. Participation in the C19 Peoples Coalition's efforts to launch a mass mobilisation campaign aimed at securing popular support and advocacy for universal access to Covid-19 vaccines.

Produced a set of 5 "Vaccine Q&A" cards, in collaboration with other members of the Health Working Group of the C19 People's Coalition. The cards can be accessed [here](#) under "Infographics and Campaign material developed by PHM". PHM South Africa becoming an official member of the Fix the Patent Laws Campaign. EACT South Africa researchers, in collaboration with Norwegian Peoples Aid, are engaged in efforts to lobby the Norwegian Minister of Foreign Affairs to endorse the Covid-19 TRIPS waiver tabled at the WTO by South Africa, India and others.

ii. South Korea- The South Korea network has been working on several studies and advocacy activities to let people and decision-makers know the public values to promote equitable access to essential health technologies for Covid-19. Our main goal is to support the pre-existing network (movement) with evidence generation and to nurture young researcher-activists in the process of doing it. the South Korea team has continuously monitored the domestic situation and regularly produced outputs like articles, statements, infographics, and media interviews. The team divided issues according to the life cycle of technology and three PHM Korea Fellows have monitored (1) R&D, production and supply policies and systems, (2) intellectual property rights, and (3) deregulation and pricing, respectively and is planning to regularly publish briefs on these issues.

The South Korea team focused on actively advocating the India & South Africa's TRIPS waiver proposal.= though publishing statements in support of the waiver, writing letter (here and here and here) to South Korean government with other CSOs. On December 10, KFHR (including APH, KPDS and CHSC) issued a statement titled "Today, President Moon Jae-in has to keep his words about equitable access to Covid-19 technologies, by supporting the TRIPS Waiver. This ofcourse went along with extensive media advocacy. Selected ones are-

- PHI weekly article series (1) which is published in The Pressian and The Rapportian.
- PHI's interview was published in Biz.Hankook.
- On January 5, an article with Sun Kim's interview titled "Who is the COVID-19 vaccine and treatment for?" was published.

Infographics developed- i. 'How can Covid-19 vaccines and treatments be global public goods? (link)' ii. 'The waiver of IP protections in TRIPS for Covid-19 technologies (link)'.



Infographics prepared by PHM South Korea

iii. India- EACT-India has identified four state level networks to undertake situational analysis of access to COVID-19 treatment and care as well as impact on other healthcare services.

National Consultation on *Equitable Access to COVID-19 Technologies and Treatment* was held online with over 11 speakers, about 60 participants across the span of more than three hours with English-Hindi translation. The sessions were held on five themes: PPE, diagnostics, treatment and intensive care (including therapeutics), vaccines and impact on non-covid health services.

SAMA Resource Group for Women and health, a member organisation of PHM India, also conducted a five seminar series on "*Ethical and Legal Challenges in Research on Preventive Vaccines and in Making Approved Vaccines Accessible*". EACT Project Advisory member N Sarojini and T Sundararaman were amongst the speakers at the sessions in the seminar series.

Campaign on India-SA proposal before the TRIPS Council- EACT members- Prasanna S and Priyam Lizmary Cherian wrote a commentary in national magazine on the South Africa- India proposal at the TRIPS Council titled, "COVID-19: The world needs to back India and South Africa's call to remove TRIPS hurdles".

A Panel Discussion on TRIPS Waiver Proposal: The State of Play and the Way Forward. Member of the EACT-India PAC- K M Gopakumar, spoke at the panel discussion on aspects of the proposal for waiver before the council and the impact it would have in the context of COVID-19.

All India People's Science Network (AIPSN), a network of PHM India, issued a statement on "*Vaccines and*

IPR waiver India-South Africa Proposal for TRIPS Waiver – Putting People before Profit". People's Health Movement India (Jan Swasthya Abhiyan, JSA) participated in the Twitter Storm on 8 December 2020: https://twitter.com/jsa_india/status/1336327435478990848.

Other articles- Many articles were written in this period by PHM members. Please visit the [EACT Resources page](#).

3. Other Global activities

Strengthening PHM Trade and Health thematic circle

One of the main offshoots of the EACT project has been the activation of the Trade and health thematic circle of PHM. There have been regular interactions of the Trade and Health circle which is also giving some sort of direction to the project and also drawing from some of the activities of the project. The Involvement of the trade and health circle is also central to replicating this project in more country circles and working with more global campaigns and allies.

One of the objectives of the project is to go beyond the pilot countries and for action to happen in other countries drawing from the project. At the beginning of December, core members of PHM-Japan Circle formed a network together with other like-minded NGOs to take forward collective actions on COVID-19 IP Waiver issue called as Equal Health and Medical Access on COVID-19 for All. A paper was prepared for joint action and a webinar was conducted on December 16th in which nearly 130 people participated. The network has also started some informal dialogue with some officials.

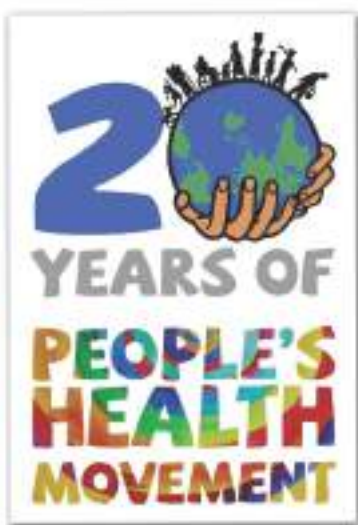
People's Health Movement formally signed up to the statement initiated by Third World Network to urge WTO to extend the transition period for least developed countries under article 66.1 of the TRIPS agreement ([link](#)).

Anna Marriot from Oxfam is part of the Global PAC of the EACT project and hence there is an organic exchange of ideas and collaboration occur between PHM and PVA (People's Vaccine Alliance).

PHM Europe friends some of whom are active members of the Trade and Health thematic circle and of the Global Project Advisory Committee (PAC) of EACT project are campaign coordinators of the **European citizens' initiative on Right to Cure (ECI)**. ECI which originated independently from the People's Vaccine Alliance (PVA), has evolved into a collaboration in the meantime.

Another campaign with which organic connection has happened is '**Free the Vaccine**' campaign led by the Universities Allied for Essential Medicines (UAEM). The Latin American coordinator of UAEM is part of the PAC.

People's Health Movement



VIII. PHM Global Organization





The Steering Committee (SC) is the principal decision making body of PHM Global. The Coordinating Commission is the executive body of the SC that is appointed by the SC and includes the two co-chairs of the SC. The current co chairs of the PHM Steering Council are Sulakshana Nandi and Fran Baum.

The 2020 PHM SC meeting took place in Bangkok during the Prince Mahidol Award Conference.

The Coordinating Commission has a monthly meeting on Skype on the first Wednesday of every month. This meeting has been held without any gap over the last 12 months.

The global secretariat has been functioning from India with four full time staff (including Global Coordinator). There has been an expansion of the global secretariat this year, with the addition of a research associate for nodal coordination of the thematic group activity and the participation of the global coordinator of the EACT project also contributing.

This year our Global Secretariat moved from Sama, Delhi (which hosted PHM till Sept 2020) to Viva Salud in Belgium. We sincerely thank Sama for hosting PHM in different capacities for almost 14 years as well as Viva Salud in agreeing to host us after September.

Committee Against Sexual Harassment (CASH) was set up with a mandate to receive and address complaints that arise in events and activities that we organise or co-organise and to provide sensitisation on the issue of sexual harassment to PHM activists. PHM is committed towards creating a gender sensitized, nondiscriminatory and inclusive space of work and interactions. The members of CASH are N. Sarojini, PeninahKhisa, Fran Baum, and Camila Giuliani.

Global communications

PHM website is one of the main channels of communication through which we have tried to present and disseminate information about PHM and its work in different focus areas. The website is regularly updated with the activities that PHM circles are conducting in different regions and countries. The statements written and the positions taken are regularly put up on the website for broader dissemination.

This year there were further attempts to translate statements into atleast Spanish, French and Italian.

Many were translated into Korean and Arabic too. For instance the [PHM statement on US defunding the WHO](#) was made available in six languages.

The Health for all Campaign page was also activated and is currently being updated.

The other major PHM communication channel is PHM Exchange. The PHM Exchange mailing list (<http://phm.phmovement.org/listinfo.cgi/phm-exchange-phmovement.org>) serves as a broader platform through which information is exchanged among the larger community in PHM. This includes, students, health professionals, health workers, academicians, activists and others. The type of information mostly includes upcoming events and activities on various contemporary issues, recent articles, resources etc. At present, we have more than 3650 subscribers to PHM Exchange. Anyone can easily subscribe to the exchange and receive information and get an update on PHM activities and positions.

Many country circles have a robust communication mechanism. Most regional circles too have been enabled by communication through regional mailing groups. Many country and regional countries agree that their online communications have become stronger owing to the pandemic. All the PHM thematic groups have now functional mailing groups where there is regular exchange of information through these thematic groups in the niche areas.

Many procedural issues arose as a result of discussions in the thematic groups (adding new members, listservs, PHM email id for TG coordinators etc) which were dealt with as they came. A handbook with these guidelines has been prepared by the Global Secretariat to streamline these issues and circulated for comments to the SC and the thematic groups in January 2021.

In addition to these channels, PHM also maintains presence in the social media circles through the PHM Facebook page (@peopleshealthmovement) with 5513 followers and the twitter handle (@PHMGlobal) that has 4873 followers. PHM has its YouTube channel. Many regional and country circles also have their own social media presence, websites and YouTube channels.

