

Annual Report 2022





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Cover Photos: Peninah Kisah, Luis Vera, Miguel García, PHM

Layout & Design: Fineline, Chennai

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About the People's Health Movement...

The People's 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 .
- ^D 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...



To the people and communities around the world who struggle for **Health For All**





People's Health Movement

Introduction









he People's Health Movement (PHM) publishes an annual report on the activities of its country circles, regions, global programmes, thematic circles and network members. The annual report 2022 refers to the PHM's main activities in the context of the continuingly difficult Covid-19 pandemic period. It shows the commitment to Health for All and the Right to Health by a movement that learned to adapt its performance to the new sanitary situation resulting from convergent socio-economic, environmental, war and conflict crises, especially affecting the working classes and gendered and racialised people across the world particularly in the Global South. The annual report 2022 includes the campaigns on Health for All and Health Rights at the region, country and global levels, the work of global programmes and thematic circles and the persistence of PHM in the context of the convergent crises in which PHM activists develop their struggles for health.

In 2022, a diversity of campaigns related to the social determinants of health and to the achievement of the right to health flourished all over the world, especially in the Global South. One of the most outstanding was the campaign on the transformation and decolonisation of health systems, involving PHM country circles from different regions and other partner organisations. The struggle against the privatisation and commercialisation of public services and for the transformation of health systems after the lessons learned from the Covid-19 pandemic became the most important challenge to PHM's goal to achieve universal and equitable access to comprehensive health care services.

This struggle included a new emphasis on decolonising international health policies, technology production and distribution and health knowledge and practices, all from a perspective of sanitary sovereignty. At the base of the decolonisation of health is the intention to shift power narratives and the restoration of indigenous knowledges to reflect, engage in dialogue and push toward the movement's goals. The strengthening of Comprehensive Primary Health Care (CPHC) through intersectoral action and community participation was at the centre of the discussion and mobilisation as modes to transform health systems by tackling the social determinants of health, promoting multi- and interculturality and fighting against the privatisation and commercialisation of Primary Health Care (PHC) policies, programmes and services.

Beside the struggle to strengthen and decolonise health systems, the PHM developed other important

campaigns. Many activities were organised on topics such as confronting old and new forms of colonialism in 'development', addressing the geopolitical and economic drivers of pandemics in the Global South and the local production of essential health technologies for equity and self-determination. Struggles related to equitable access to health technologies, treatments, diagnosis and vaccines for people in the Global South in the context of the Covid-19 pandemic and the necessary transformation of global trade and health regulations remained a focus. Food sovereignty, the defence of native seeds and the promotion of agroecology against the use of pesticides was highlighted in many regions and countries. The struggles against extractive economic activities and climate change and for the health of territories and the earth were paramount. The quest for gender justice and health through campaigns on International Women's Day, the International Day of Action on Women's Health and International Safe Abortion Day and addressing the exacerbation of gendered inequities during the Covid-19 pandemic was of central importance at the region and country levels. The defence and the strengthening of ancestral knowledge and practices was at the centre of the PHM's activities in many regions, especially Latin America and Africa. New emphases on supporting the struggles of health workers for their rights, the improvement of their conditions of employment, working conditions and social protection, together with an acknowledgment of community workforce rights grew from the pandemic. The PHM continued to be committed to the rejection of war and conflict and the defence of human rights globally, particularly in the context of the ongoing war against Ukraine, the occupation of Palestine, the war in Tigray and other violent conflicts and authoritarian governments, all of which affect health workers and communities. Examples of activities that illustrate these commitments are the launch of the online gallery 'Health Workers Under Attack' and webinars entitled 'Repression of Women Health Workers in Conflict Regions' and 'Healthcare in war-torn Tigray: Targeted or Collaterally Attacked?'

A new impetus on watching World Health Organization (WHO) meetings emerged with the return of the face-to-face Watchers training process and detailed commentaries covering all items on the agenda of the WHO's Executive Board (EB150) and the World Health Assembly (WHA75), despite the increasing limitations for civil society participation at these forums. This obliged the PHM to discuss and put into practice new strategies to strengthen progressive governments and health activist participation by working from below at the region and country levels. Several expressions of solidarity with people suffering the impact of convergent sanitary, economic, climate, war and humanitarian crises were developed in different regions and countries. Similarly, after three years of work, the sixth edition of Global Health Watch (GHW6), the PHM's flagship report, was published and disseminated in more than 14 countries, along with the popularisation of its content through seven podcasts.

The growth of the movement has been the result of the implementation of concrete actions or campaigns at the local, country, regional and global levels. The struggles for health have been developed within a process of strengthening the PHM's organisation through the reactivation and creation of several PHM country circles, a significant scaling up of the work the circles have been doing, the adhesion of new health activists, the improvement of regional and global programme coordination, the expansion, coordination and representativeness of thematic circles, the creation of new regional thematic circles, the establishment of new platforms and alliances, the development of health activists' capacities, the creation, improvement and relaunching of the PHM's communication capacities on several health issues, the improvement of multilingual communication inside and outside the PHM and the building of other health activists' capacities through the International People's Health University (IPHU) courses.

In the year 2022, the PHM Steering Council made two crucial decisions that will guide and shape the



PHM horizon: first, the Fifth People's Health Assembly (PHA5) is to be hosted by the city of Cali, in Colombia, in December 2023; second, the People's Health Tribunal (PHT) will be launched at the assembly. Under the label 'Health for All in a 'post-pandemic' world: Challenges and Strategies for Health Movements', the PHA5 will articulate a common political assessment and strategies to ground the movement's work in the aftermath of Covid-19. The aim is to strengthen the movement towards health equity, gender and social justice, solidarity and *buen vivir* (collective well-being), based on diverse experiences over the past five years. The goal is to shape strategies and build solidarity by promoting transparency, accountability, inclusion and participation, particularly of marginalised communities and from Low and Middle Income Countries (LMIC)/the Global South.

The People's Health Tribunal will serve to expose the role that giant corporations play in creating illhealth, erecting barriers to decent health care and fostering policies and practices which destroy our shared well-being, ecological harmony and the social and material rights of current and future generations (*buen vivir*). The ideas, norms, systems and structures that privilege corporate power over the well-being of people and planet will be contested by a programme of documentation, analysis and action to realise, secure and guarantee people's right to health against the depredations of transnational corporations and the governments and international agencies that protect them.

These developments are the result of the commitment of PHM members who are passionate about the PHM's beliefs, values and aspirations and a relentless practice in the struggles for health and the right to health. This annual report for 2022 is the effort of many PHM activists, region coordinators, global programme representatives and global secretariat members. Thanks to them for their hard work and commitment.





The Health For All Campaign and Health Rights









he Health for All Campaign (HFAC) is a global organising framework for different mobilisation actions by civil society networks and social movements around the world. The HFAC is where broad groups of PHM activists come together and connect PHM's global activism with local activism. Broadly, it intends to strengthen and amplify the vision and mission of the PHM locally, regionally and globally, campaigning at different levels and on different issues for health for all. Along with facilitating interlinkages between PHM country/ regional circles and the six PHM Global Thematic Circles (TCs), the HFAC plan includes building leadership by young people/activists and coordinating efforts towards movement-building within the PHM through strategic collaborations, alliances and linkages with diverse movements. Below is a list of HFAC activities in different PHM regions.

A. Regional and Country Level Activities

1) PHM Campaigns in South East Asia and the Pacific (SEAP)

The SEAP April 6 regional meeting identified several key strategic objectives. First, a strong opposition to the commercialisation and privatisation of health which are anti-poor and anti-collective health care. Second, continual campaigning for the Trade Related Intellectual Property Rights (TRIPS) waiver, proposed by the governments of South Africa and India, which demands the removal of intellectual property rights protection on technologies needed to prevent, contain or treat Covid-19 "until widespread vaccination is in place globally, and the majority of the world's population has developed immunity", thereby supporting pandemic management only with global equity. Third, the extension of IPHU into low-income countries in the SEAP region. Fourth, promoting the dissemination and profile of GHW6 to develop a global understanding of the connections between social, economic, political, commercial and environmental forces – both local and global - that influence health.

Equally important is the use of health-based advocacy to reverse increasing militarisation and armed conflict in the region and improving communication and engagement among the SEAP countries. SEAP organised a webinar on regional concerns about the rising tensions between the USA and China and the risks

of an armed conflict. The webinar was titled 'Are we Sleepwalking into War?' It addressed two main questions: what are the potential consequences for people's health due to the rising tension? and what can be done by the PHM and by citizens of the SEAP countries to minimise that risk? (SEAP Poster 1)

2) PHM Campaigns in Latin America

One of the main achievements of PHM Latin America in 2022 was the organisation, construction and launch of the campaign to transform and decolonise health systems in the region named "Popular Action for Health and Good Living". Based on a tremendous collective effort, all the PHM country circles in the region participated and several other partners were involved, such as the Asociación Latina Americana de Medicina Social (ALAMES) (Latin American Association of Social Medicine), the Associação Brasileira de Saúde Coletiva (ABRASCO) (Brazilian Association of Collective Health) and Medico International, among many other country level organisations.



Visuals of the campaign

One of the key objectives was to create a space for political collaboration and action, to look for convergence and to stimulate mobilisation on social and health policies in the region through a long-term campaign. The goal is to advocate for the development of public policies that transform and decolonise currently privatised and mercantilised health systems into public health systems with universal, equitable and intercultural access to guarantee primary health care. The campaign has been directed at civil society in general, social movements, health sector workers and citizens, with a special focus on the most vulnerable groups.

The campaign has six central axes: decolonise health policies and health systems, affirm health as a common good and as a fundamental human right, create a unique, universal, integral, intercultural and solidarity-based public health system, promote popular power and health sovereignty, strengthen CPHC as a strategy to transform health and living conditions and defend health workers and their rights.

The process of campaign-building involved several activities such as participation in events like the congresses in Guatemala, Argentina and Chile and the organisation of webinars in Peru and Brazil. It also involved several products such as the creation of the campaign's visual identity, a website, interviews, debates, podcasts, a social media kit and press releases.



All this culminated in the realisation of the 'Latin American Meeting for the Transformation and Decolonisation of Health Systems' during the 13rd Brazilian Congress of Collective Health, held by ABRASCO in Salvador, Bahia in November. As part of the event, the PHM promoted a two-day meeting with representatives from 13 Latin American countries. A political statement was elaborated, synthesising the campaign's main diagnosis and demands. The PHM also organised two scientific panels at the event, together with dialogues with other social movements and academic institutions.

In 2023, the campaign will continue with a focus on specific countries in the Caribbean region, organising debates and other campaign activities throughout the year. The organising committee will also work on the country-level promotion of the campaign and prepare for PHA5 in Cali, Colombia.



PHM LA activities and campaigns during the 13rd Brazilian Congress of Collective Health, in Salvador, Bahia. November 2022.

Mesoamerican region

The Mesoamerican subregion is represented by PHM country circles and associated organisations which are part of the Community Health Promotion Regional Committee (CPRSC). There are organisations in Chiapas in Mexico, Guatemala Asociación de Servicios Comunitarios de Salud (ASECSA), in El Salvador (Foro Nacional de Salud), Honduras Consejo Desarrollo Integral para la Mujer Campesina (Codimca), in Nicaragua Movimiento Comunal Nicaragüense (MCN), in Costa Rica, Red de Mujeres de Incidencia Social y Desarrollo (REMISOD) and in the Dominican Republic (Institución Social Colectivo de Salud Popular (COSALUP). The subregion has official participation in the thematic groups on gender and health, extractivism and ecosystems and war, conflict and occupation. In addition to the activities in each country, there are many joint activities within the subregion and with the Latin American region as a whole.

We highlight the ASECSA National and International Seminar "Hacia una nueva y renovada normalidad post Covid-19" Ixim Ulew, Ob' Tijax, Waqib' Kawoq, Wuqub' Ajpu Guatemala from 20--22 July, 2022, also accompanied by a IPHU training course and a face-to-face meeting of the regional coordinators. Another example is the 'Feminist Meeting of Central America and the Caribbean' and the publication of the 'Comparative Study of Health Systems'. All the countries of the subregion participated in the construction of the regional campaign 'People's Action for Health and Good Living' and sent representatives to the PHM's activities in the Brazilian Congress of Collective Health in November. Other examples of regional activities were the participation in the ALAMES social movement's network talks and the participation in ReAct Latin America, a global network building collective thinking with a social and ecological perspective.



From left to right: ASECSA Seminar in Guatemala (1, 2 and 3) and CPRSC Coordination meeting in Guatemala, July 17-22, 2022.

The different country circle activities are clubbed under thematic areas below:

Equitable Health Systems: At the Central American level, a health system comparative study produced by CPRSC and launched in late 2021 was presented and published in different countries in the region. It analyses the health systems in Nicaragua, Honduras and El Salvador, presenting a diagnosis of their performances during the pandemic, their structural limits and gaps and proposals for change based on CPHC.

At the country level, several activities were organised:

Costa Rica: Activists developed different actions such as the cantonal physical and mental health network, guidance and health promotion during the pandemic, several workshops for the resuscitation of ancestral medicine and the advocacy for local and national public policies with political control from within.

Nicaragua: The country circle developed a presentation on the results of the comparative study of health systems, strengthened by the Community Health Network, campaigned against Covid-19 and promoted





the vaccine, fairs and festivals for the Right to Health, updated information on Sexual and Reproductive Health (SRH) strategies, conducted SRH-HIV trainings, violence prevention and community surveillance.

Guatemala: The country circle put into practice a Political Formation School, conducted capacity-building of health promoters and midwives, the construction of community health centres, the development and production of educational materials, including a manual on the use of medicinal plants and one on community governance, apart from the ASECSA national and international seminar.

El Salvador: The country circle engaged in the monitoring of the supply of medicines and health services, the coordination and development of press conferences with relatives of health personnel victims of Covid-19, participation in the Alliance against the Privatisation of Health and a public denunciation of the nonconstruction of the Rosales National Hospital.

Honduras: The PHM in Honduras discussed the draft of the new national health system, conducted a training on health and rights for health activists, ta training of trainers in the Margarita Murillo school and the implementation of the social watchdogs initiative.

Gender Justice and Health: At the regional level, the Women's Commission of CPRSC met in Guatemala in July. In November, women from six countries from the Mesoamerican subregion organised a three-day meeting in El Salvador. The goal of the Second Mesoamerican Feminist Meeting was to develop strategies to fight for a world free of violence against women, for the defence of territories and bodies and for more political participation. The region also elaborated a common position on March 8, International Women's Day.

Guatemala: The PHM formed women's groups for their empowerment and economic autonomy and worked on the empowerment of young people and women in sexual and reproductive health (SRH). In October, ASECSA participated in the IIIrd International Summit of Indigenous Women from Abya Yala, which took place in Guatemala.



From left to right: (1) Women's Commission meeting in Guatemala, (2)(3) Second Mesoamerican Feminist Meeting. (4) Public feminist demonstration in El Salvador

Costa Rica: Apart from a march for women's rights and a walk for the rights of Nicaraguan women in prison, the PHM promoted the organisation of community leaderships (women from all areas of the country participated) and facilitated the economic autonomy of women by accompanying women. It also participated in shadow report to Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and in boards for the protection of children and adolescents.

Dominican Republic: Apart from training women and young people in SRH, the PHM held a forum on natural medicine with midwives, healers and people related to health. It participated in a diploma course on Decolonial Feminism and a seminar on the Prevention of Gender Violence. It also participated in a march demanding the decriminalisation of abortion and organised the provision of contraceptive methods to adolescents.

Nicaragua: The country circle organised a training process for teachers and students on the prevention of sexual abuse and a campaign against sexual abuse.

Honduras: The country circle joined the struggle for the decriminalisation of abortion. It facilitated advocacy in the Municipal Women's Network. It also participated in advocacy for the approval of the emergency contraceptive pill and the prevention of teenage pregnancy.



Nutrition and Food Sovereignty

Honduras: The group organised an agro-ecological training process in the creation of agro-ecological cornfields.

Guatemala: The country circle focused on promoting food security and food sovereignty

Environment and Ecosystem Health

Costa Rica: Hearing 5C, the country formed a Citizens Advisory Council on Climate Change, participated in various environmental initiatives and attended the Parliament for Mother Earth (Mexico).

El Salvador: The country circle set up a system of complaints, alerts and positionings around climate emergencies. PHM held a press conference with the Mesa Permanente Para La Gestión de Riesgo (MPGR) (Permanent Risk Management Board). The group conducted environmental fairs. It also organised a follow-up to the Citizens' Alliance against the privatisation of water. It forged a position, information campaigns, conferences and forums on the General Law on Water Resources. It organised an Environmental Walk, 2022.

Nicaragua: The country circle strengthened its the climate monitoring network. It organised workshops and talks on environmental protection and recycling.

War and Conflict, Occupation and Forced Migration

El Salvador: Exchanges were organised with Mexico and Colombia with relatives of victims of the disappeared. A march for the struggle against authoritarianism and mobilisation for the Peace Accords were the other activities.

Andes region

The Andes subregion consists of PHM circles in five countries: Venezuela, Colombia, Ecuador, Peru and Bolivia. The subregion participates in several thematic groups like Gender Justice and Health, War, Conflict and Migrations, Food sovereignty, Nutrition and Health and Ecosystems, Environment and Health.

All Andean countries participated in the ABRASCO congress in November 2022 for the launch of the Health System Transformation and Decolonising campaign; Oscar Feo from Venezuela, Katherin Carrillo from Colombia, Luis Lazo from Peru, Vivian Camacho from Bolivia and Arcadio Cedeño from Ecuador were the representatives. The PHM shared the campaign widely with allies in all the Andean countries.

At the country level, several campaigns were implemented in 2022. In Ecuador, the Frente Nacional por la Salud de los Pueblos del Ecuador (FNSPE) developed its annual plan during a national meeting in Cuenca, including several provincial assemblies, starting with the province of Manabí. At the same time, the PHM supported local campaigns to abolish the Presidential decree to lower taxes on certain products harmful for the environment and people's health. Given the country's public health system collapse, the PHM also denounced the budget cuts for health in a public statement:



"The catastrophe of the public health system and the 5th February elections"

PHM Ecuador expressed its solidarity with the indigenous communities suffering because of the largescale mining projects which have become a major health risk for communities across the Andean region.

In Venezuela, the PHM circle was reactivated after participation in the ABRASCO Congress. A group of 10 health activists came together and organised two video conferences. A WhatsApp group was created to coordinate continuing activities. The new circle commented on the PHC document being prepared for the WHO Executive Board meeting in January 2023. PHM Venezuela is also preparing to participate in the People's Health Tribunal to be launched at the 5th People's Health Assembly in Cali, Colombia, focusing on the 'Environmental and sanitary impact of the mining exploitation in the Orinoco Arc'.

In Colombia, the PHM country circle actively promoted a Health for All agenda during the campaigns for the presidential and congressional elections. The election of Gustavo Petro and the new government was, therefore, a major victory for the Right to Health agenda in Colombia and for PHM Colombia. PHM Colombia has been active in the Food Sovereignty circle, in which the starting of a regional circle for the Andean region to discuss initiatives at the regional level was broached. PHM Colombia activists have been campaigning for a Colombian general system of social insurance in Health reform, as this is one of the most privatised and commercialised health care systems in the region. This process, co-organised with ALAMES, the Pact for Health and Life and other community and health worker organisations and social movements, will be a crucial part of the health transformation agenda of the new Petro and Francia government. PHM Colombia has also been supporting six Caribbean indigenous communities (Kogui, Arhuaco, Yudkpa, Kankuamo, Wiwa



and Wayuu) in their struggle for the Sistema Indigena de Salud Proprio Intercultural (SISPI) (Indigenous System of Their Own and Intercultural Health). A three-day workshop was held in the city of Maicao, at the Ranchería La Paz community centre, where more than 300 people participated, forging a commitment to continue working with indigenous communities and to build their capacities to engage in discussions with the proposals of the Colombian health care system reform. The Salud Pal Barrio programme has also been developing activities of collective health and social medicine based on CPHC. Other activities based on the CPHC strategy have also been developed in several urban neighborhoods of the city of Popayan and some rural areas.

In Peru, the health organisation Foro Salud, part of PHM Peru, organised three debates on the 'Transformation and Decolonisation of Health Systems in Latin America and the Caribbean' on November 28, December 12 and 17, with representatives from Peru, Costa Rica and Ecuador, Nicaragua, El Salvador, Guatemala, Paraguay, Venezuela and Colombia.

In Bolivia, the PHM celebrated its ninth birthday. The PHM country circle has prioritised the promotion of popular health and agroecology during the last couple of years. The celebration of the ninth anniversary was attended by Global Coordinator, Román Vega, as well as by several colleagues from Latin America.

Brazilian Subregion

The year 2022 was very important to the Brazilian PHM circle, present in eight states. The circle made progress in local movement-building, regional articulation and creation of ties with other social movements. The highlight was the organisation of, and participation in, several activities during the ABRASCO Congress, in Salvador, Bahia, in November. At this event, PHM Brazil gained visibility and managed the first face-to-face meeting after the pandemic restrictions. PHM Brazil is also participating actively in all PHM's thematic circles.

Equitable Health Systems

PHM Brazil developed several activities related to equitable health systems. In January, the circle organised the webinar "Primary health care and resistance under neo-liberal governments", discussing the challenges of primary health care workers and activists in Brazil in resisting the neoliberal health policies being implemented in the opposite direction of comprehensive healthcare based on the Alma-Ata principles. The activity involved the participation of PHM global coordinators.

Circle members participated as delegates in the 'Free, Democratic and Popular Health' conference, held in May 2022. The event was organised by several health-based social movements and organisations to create a popular and participatory platform and programme demanding public policies that address the urgent and strategic needs of the Brazilian population and of the health system. The PHM, with other partners, organised a set of 10 proposals related to free knowledge for the development of, and access to, health technologies.

The circle engaged with the regional campaign Popular Action for Health and Good Living and with the participation of PHM-LA in the ABRASCO Congress held in November 2022. PHM Brazil helped manage several activities such as the 'Meeting for the Health Systems Transformation and Decolonisation in Latin America', the PHM's scientific activities in the Congress and others.

In December, together with the Black Union for Equality (Unegro), the circle organised a webinar 'Right to health in Brazil and the challenges to face racism in the SUS (Unified Health System)".



Left: The Free, Democratic and Popular Health Conference, where PHM Brazil participated as a delegate. Right: One of the activities organised by the PHM during the ABRASCO Congress.

Trade and Health

PHM Brazil promoted the webinar 'Free knowledge for the access and development of health technologies'" on July 27. It was a preparatory activity for the 'Democratic and Popular Conference onHealth', a national event bringing together all health movements and other civil society organisations. The debate involved other organisations such as Universities for the Access to Essential Medicines (UAEM), the National Articulation of HIV/AIDS movements, the Brazilian Interdisciplinary Association for HIV/AIDS and ABRASCO, which have become important PHM partners.

A document was produced with recommendations and demands to the conference and some of its proposals were included in the final report. The Brazilian circle is also engaged with the PHM Global Trade and Health circle and is helping to start a regional circle on the theme.







Nutrition and Food Sovereignty / Environment and Ecosystem Health

In December, the circle organised the webinar 'Popular surveillance in health: experiences and perspectives", discussing people's experience in confronting the food and extractivist corporations' impacts on the environment and the health of their communities.

Southern Latin American region

The Southern region Julio Monsalvo (named after the legendary Argentinian public health activist) is formed by four countries: Argentina, Paraguay, Chile and Uruguay. It has two coordinators, Carmen Baez (Argentina) and Mariluz Martin (Paraguay), both elected by the member organisations of the PHM.

In September, a sub-regional meeting was held in Argentina, supported by the PHM, with representatives and activists from the four countries and the presence of our Global Coordinator, Román Vega. The meeting was held in the context of the Congress of the Association of General Medicine of the Province of Buenos Aires (AMGBA). Many PHM activists participated in the congress on panels relating to Health System Transformation and Decolonisation; Food Sovereignty, Nutrition and Health and Integration of Health Systems, among others.



In November, the 32nd anniversary of Laicrimpo, an important movement and a member of the PHM, was celebrated. Among other activities, roundtables and panels like 'Is the health of ecosystems possible in the reality of the territories?' and 'Challenges of the people: Significant Experiences From Health in the hands of the community', were held with PHM members and other national and regional organisations and networks.





The Global Coordinator, Roman Vega, also participated in the Argentinian General Medicine Federation in an important roundtable on 'Health Systems: Transformation and Decolonisation' from the perspective of the integration of the Argentinian health care system.

In 2022, the idea of promoting the formation of thematic circles became a reality. People joined the Food Sovereignty, Nutrition and Health circle and the regional circle on Ancestral Knowledge was launched with significant participation and plans to project itself in Abya Yala and the rest of the movement. Circles on Popular Health Education and Mental Health will be launched in 2023.

The subregion actively participated in the Health System Transformation and Decolonisation campaign and participated in the PHM meeting held within the framework of the ABRASCO Congress. Members of the four countries actively participated, including one of the coordinators of the region, who also led the process.



PHM Argentina was very active in the struggle for food sovereignty. In this direction, it participated in different campaigns, mobilisations, political advocacy actions and webinars. Some examples are the promotion and regulation of the 'Promotion of Healthy Food Act', better known as "Food Labelling Act"; the VII Conference on Health, Nutrition and Food Sovereignty (CALISA UBA); the campaign to reject the resolution approving HB4 transgenic wheat; the celebration of the 25th anniversary of the Provincial Seed Fairs in the province of Misiones and the presentation of the 'First Annual Report on the Situation of Food Sovereignty in Argentina' (IASSA 2022), among others.

In terms of gender activism, PHM Argentina participated in a discussion on the agenda of a Women's Parliament in the Legislature of the City of Buenos Aires. Territorial and participatory workshops on popular health education were held with women, organised and facilitated by activists from the PHM and Tatu organisation. The circle accompanied the statement rejecting the criminalisation of doctors who perform abortions and participated in the IPHU on gender held in El Salvador by PHM Mesoamerica and supported and participated in the campaign for abortion promoted by the Justice and Gender Global thematic circle.

Regarding the defence of the earth, the focus was against the growing extractivism in the country. Some examples are the constant support to the people of Andalgalá against mega-mining projects and the repression of territorial defenders, the launching of the 'School for territorial defenders' in El Dorado, Misiones, participation in the campaign 'Paren de Fumigarnos' (Stop the Fumigation) in Rosario, a statement against the harassment of the Mapuche people and the participation in the campaign for the release of Mapuche women detained while protesting their eviction from their ancestral lands. We also supported the campaign for the approval of the Wetlands Laws by the government.



PHM Uruguay took steps regarding the coordination process between the Uruguayan Seed Network and agroecology activists. The idea is to invite them to participate in PHM. In addition, we have the support of the teaching unit of the Department of Family and Community Medicine, currently offering an Optional course for undergraduates and health workers on spirituality and health. One of the workshops is on integrating into medicine ideas based on ancestral knowledge.



In Chile, PHM members were energised by the Future is Public Conference in Santiago, Chile held in December 2022, to be part of the 'Our Future is Public' conference (OFIP22) (details in the later section). The conference gave the PHM the opportunity to catch up with Chilean colleagues and, within the framework of the conference, the members of the country circle organised several activities together with the Global Coordinator.

A small meeting was held with comrades from Chile/ALAMES interested in initiating a Chilean PHM circle. Global Health Watch 6 was also launched during the conference. A meeting was held with the national director of the National Health Fund (FONASA) and a presentation on privatisation in Chile was made by Camilo Bass, member of PHM Chile. Later, visits were made to health centres: Hospital de Asistencia Pública, Hospital Roberto del Río, Fundación Educación Popular en Salud (EPES), oriented to promote the organisation and community participation around health in popular sectors (https://epes.cl/) and the Petrinovic Health Centre (which provides services oriented to each of the members of the families of the commune, according to their life cycle stage. In all these visits, contacts were made to create future alliances with the PHM.

Members of PHM Paraguay participated in the sub-regional meeting in the framework of the Congress of General Medicine (AMGBA or FAMG) and in the National Meeting of Laicrimpo in Argentina. They led the campaign for a Public, Unique and Universal Health System in Paraguay of the María Rivarola Movement - ALAMES - PY, together with other organisations in the country. Throughout 2022, PHM Paraguay participated in the design and advocacy for the approval of a mental health law in Paraguay.

Training was provided to organisations and the peasant base, health promoters (belonging to organisations of Tesai Reka Paraguay), community health agents (health system) on the right to health. PHM Paraguay began to integrate with Conamuri (National Coordination of Rural and Indigenous Women), an organisation





Members of **PHM Chile** participated in the sub-regional meeting

that fights for food sovereignty, the defence of native seeds and the promotion of agroecology against the use of pesticides. It participated in the regional health meeting of ABRASCO, in El Salvador, Brazil. Leadership and participation in the articulation of 'Women free of Violence' as well as training and mobilisation on 8M and 25N. The Maria Rivarola movement for the Right to Health, member of the PHM, Latin America, Sub region South, together with other social organisations, organised the forum of Bañadense, in Campo-ciudad.





PHM Campaigns in Europe

All active PHM country circles in Europe have organised activities, following the PHM Europe 2022 work plan. Some country circles were able to connect with other organisations and conduct international activities as well. For example, activists from PHM Belgium co-organised a panel on the negative effects of privatisation on the right to health at the World Bank Civil Society Policy Forum, bringing a much-needed critical voice to this space. PHM Belgium, along with PHM France and the European Network Against the Commercialisation of Health and Social Protection, and other platforms, co-hosted a series of webinars ahead of World Health Day 2022, with the title 'Commercialisation of Health: The Other Pandemic?' PHM Belgium continues to engage in policy debates, including at the level of the European Parliament. In 2022, they have done so particularly on access to Covid-19 vaccines and the relationship between work and health.

PHM France continued to invest significant efforts in strengthening the country circle and building relationships with trade unions and other social justice movements. In 2022, they contributed to the formation of a joint platform on health and gender justice, which organised actions, online and offline, between 8 March and 7 April, in an attempt to illustrate interlinkages between the position of women in society and health. During the rest of the year, they worked closely with trade union organisations, contributing to the wave of strikes that erupted in the latter part of 2022, after the announcement of retrogressive pension reform in France.

PHM Scotland began to prepare a national People's Health Assembly, scheduled for the summer of 2023, involving different groups and movements through the preparation process. All over the UK, PHM circles have supported health workers' actions, that expanded as 2022 progressed. Several UK activists participated in the preparation of a People's Health Tribunal on extractivism (originally scheduled to take place alongside COP 27 but rescheduled for 2023).

In Spain, PHM groups worked on strengthening and expanding connections built during the organisation of the IPHU in 2021. Together with other local groups in Catalonia, they built a joint campaign for People's Health Day which focused on the social determinants of health; transparency in the health system; strengthening Primary Health Care; and precariousness of work in health care. The materials developed by PHM Spain were shared with other PHM Europe circles to be adapted to the local context and used during April 7 actions as per need. Please find the graphics here.

In Italy, PHM activists continued to work together with the Centre for International and Intercultural Health (CSI) on issues concerning social determinants of health in Bologna and with the collective Kathe, which published the graphic novel Materia Viva on 7 April (in Italian and English, with a forthcoming translation into Spanish), as part of the regional actions for People's Health Day.

PHM Germany worked mainly on strengthening their national presence and building the country circle through a series of in-person meetings and a workshop on the brain drain of nurses from the Global South and eastern Europe toward the Global North.

In Croatia, PHM activists continued to research the working conditions of nurses in the public health system, focusing on their unionising models. They held a series of health workshops for city councillors and high school students pursuing medical studies, focusing on working conditions and the importance of health workers standing up for the right to health. The PHM group in Croatia is also strongly connected to North Macedonia and Serbia, where research activities on the state of public health and the effects of Covid-19 on public health systems were conducted.





In Greece, PHM activists began preparation for the next conference of the International Association of Health Policy, Europe (IAHPE), which will take place in September 2023. They supported the actions of health workers who protested for the protection of the public health system.

In Georgia, PHM activists organised a trade unionising campaign for nurses and managed important gains by the end of the year.

In Turkey, while health activists managed to uphold a steady campaign of pressure for better working conditions and a stronger health system, they faced brutal repression by the government. Through 2021 and 2022, members of the Turkish Medical Association (TMA), including PHM activists, continued to carry out actions against privatisation and the loss of quality of health care in Turkey. They organised several protests and strikes by health workers. Their activities have been documented with support of PHM Europe, in several issues of the People's Health Dispatch (here, here, and here). In October 2022, the president of the TMA, Sebnem Korur Financi, was arrested on charges of spreading terrorist propaganda and held in prison until early 2023. Her case was documented through an entry in the PHM War and Conflict online gallery, with materials contributed by the People's Health Dispatch, Academics for Peace, a group in Germany, Medico International, and other organisations close to the PHM.

At the regional level, PHM Europe participated in the organisation of actions for April 7, People's Health Day, by Right to Health groups in Europe against the privatisation and commercialisation of health. With the support of PHM Spain, a set of graphics and posters was developed that could be adapted for local use. In August 2022, PHM Europe was invited to take part in the European University of Social Movements. PHM Europe regional coordinator, Ana Vracar, spoke at the launch of a publication about the effects of Covid-19 on health in Serbia, published by the local Centre for the Politics of Emancipation and Rosa Luxemburg Stiftung, Southeast Europe. Work also continued on issues regarding access to vaccines and medicines, both through the European Citizens' Initiative entitled 'No profit on pandemic' and through other initiatives for strengthening



public production of medical products (e.g. initiative by a group of Italian scientists, leading to the establishment of Jonas Salk Institutes as presented by activists from PHM Belgium).

PHM Campaigns in East and South Africa

Active PHM circles/chapters in the Eastern and Southern Africa (ESA) region have been involved in campaigns, advocacy and activism on issues of access to medicines, comprehensive primary health care, health care financing and also addressing the social determinants of health (food sovereignty, service delivery, water, sanitation and hygiene, air pollution, gender violence).

In 2022, PHM South Africa (PHM SA) was invited to make an oral submission on the National Health Insurance (NHI) Bill to the Parliamentary Portfolio Committee on Health. They also supported community health forums to develop their understanding of the NHI process to strengthen their participation in the debate. Members of the Community Health Forum were invited to become PHM SA NHI Ambassadors. These are health activists able to respond to questions about the NHI in their communities and promote a people-centred NHI.



Activists from PHM SA working to strengthen participation in the NHI campaign

PHM SA embarked on a new campaign entitled "Health Forum Building: Community-based and Intersectoral", based on the principle that community participation is key to improving health. The campaign is built on the successful experience of the existing Community Health Forum in Gugulethu. Each newly established health forum conducted a situational analysis and attended a three-day training exercise on the Right to Health, Social Determinants of Health, Progressive Primary Health Care, accountability, conflict management, leadership and campaign or project planning, implementing and basic evaluation. In 2022, six pilot community-based health forums were established in six sub districts of four provinces in South Africa. The campaign also supports the ongoing work of the Gugulethu Health Forum. This includes health promotion activities on non-communicable diseases (NCDs) and healthy food, working with the police on safety and



crime in the area, working with the schools on substance abuse and working with clinics on traditional circumcision. PHM SA continued to work on access to medicines by supporting the Fix the Patent Laws (FTPL) campaign and to support community health workers (CHW) through the South Africa Care Workers Forum Campaign (SACWF). In 2022, over 7.000 signatures were collected from CHW in four provinces to lodge a case demanding full recognition by the Department of Health. This includes a clear job description, permanent employment as well as a decent salary.



Superheroes protect the mRNA hub from Moderna. The company has filed patents relating to its vaccine in South Africa that could threaten the hub's future work.

PHM SA is also active in the politics of food and, in 2022 organised a three-day training session where over 70 community activists from three different areas involved in food gardens came together to discuss the politics of food and how to build a movement addressing issues such as the corporatisation of food. This led to politics of food community dialogues in different community settings with the objective to increase knowledge of NCDs and link this to a broader awareness of the causes and effects of a corporatised and industrialised approach to food. People were encouraged to start food gardens and adopt a healthier lifestyle. Finally, PHM SA is revising its publication Critical Health Perspectives (CHP), initiated in 2005 in the form of short editions critically analysing the health system of South Africa. Two issues were published in 2022, unpacking the South African NHI. In addition, PHM SA also started a Critical Health Perspective podcast.

PHM Tanzania has advocated for greater investment in the community health workforce (CHW) building on the findings of the country's Vital Signs Profile (VSP). Meetings were organised with the Dodoma regional health management team, civil society organisations and the media to discuss the findings of the VSP which show that the weakness in PHC is the lack of a consolidated community health workforce. This advocacy effort has helped PHM Tanzania increase its visibility and outreach, showing the government and health stakeholders the weaknesses in the implementation of PHC and holding them accountable for not addressing them.



PHM Zambia has been working mainly on issues related to the prevention of maternal and neonatal mortality, a serious problem in the national context. In particular, they have been advocating for maternal and neonatal essential commodities, diagnostics and a safe environment through the Midwives Association of Zambia.

PHM Kenya has continued its advocacy^{1,2}, against privatisation and commercialisation of health and for a tax-based over an insurance-based model of health care. They have also been carrying out campaigns demanding the release of mothers detained in public health facilities as they are unable to pay hospital bills, which is against the law and the constitution of Kenya. Finally, together with other partners, PHM Kenya is also engaging and mobilising communities to get vaccinated against Covid-19 to increase Covid-19 vaccine uptake in urban, informal settlements and rural areas. The PHM's Eastern and Southern Africa Regional Health Assembly took place in Kenya at the end of 2022 (see section on movement-building).

For the PHM Uganda network, 2022 was a very extraordinary year and very demanding, despite the Covid-19 vacuum. Through collaborations with organisations in the network at the national and regional levels, virtual meetings have been organised and papers and articles have been published to widen the knowledge base but also a mechanism to document PHM work in Uganda on diverse health issues has been created.

Under the Kampala Initiative, set up in 2021, a Decolonising Health in Africa (DHA) thematic group has been established, coordinated by the PHM Uganda chapter and Innovations for Development. The group organised study seminars to expand the knowledge base on decolonisation, shifting power narratives and how the movement can be pushed forward to achieve its goals.

They also organised a webinar series on topics such as confronting old and new forms of colonialism in 'development', addressing the geopolitical and economic drivers of pandemics in the Global South with a focus on Africa and the local production of essential health technologies for equity and self-determination. The group connected with other, similarly engaged organisations and networks to build collaborations around grassroots actions and perspectives. PHM Uganda also reacted during the Ebola outbreak where workers in Uganda health systems were exposed to risk without enough personal protective equipment or effective vaccines³. Finally, PHM Uganda team was invited by the Ministry of Internal Affairs to support the process of the drafting of the pandemic treaty, initiated by the World Health Organization trying to regulate uniformly in issues of cross-border migration in a pandemic, while protecting the health rights of citizens crossing from regions of high risk.

Western and Central Africa

Regarding the countries' activities, all five active countries (Democratic Republic of Congo (RDC), Mali, Benin, Togo, Cameroon, Gabon) have organised several workshops and community hearings on the right to health, campaigns on Covid-19 (awareness, vaccination, health education, etc.)

The RDC has organised several workshops and community hearings on the right to health, campaigns on Covid-19 (awareness, vaccination), community diagnoses for the effectiveness of community dynamics for

 ¹ https://nation.africa/kenya/blogs-opinion/blogs/need-to-review-proposed-health-financing-model-3934122
² https://static1.squarespace.com/static/5a6e0958f6576ebde0e78c18/t/626958acb8357d201c05f617/1651071149294/
Kenya-Health-Report-FINAL-APRIL+2022.pdf

³ https://peoplesdispatch.org/2022/10/21/uganda-needs-equipment-and-solidarity-in-the-face-of-ebola-outbreak/

health around aspects of gender in contexts of conflict, support for doctors to advocate for the improvement of their socio-professional conditions. Benin organized a webinar on the decolonisation of aid and the health system. Gabon organised an anti-tobacco campaign. Cameroon was able to officially register a chapter of the PHM. Mali organised a webinar on Covid-19 and access to health technologies, the fight against Covid- 19 and zoonotic diseases. Also, PHM Mali succeeded in the institutionalisation of the PHM circle, the formation of a secretariat, the development of an action plan for the country circle and the training of health workers on right to health issues. PHM Togo organised awareness activities for young people on reproductive health and participated in the preparatory work for the 72nd session of the WHO AFRO in Togo with Population Services International (PSI). As a region, a document of recommendations was prepared following participation in the 72nd session of the WHO regarding watching WHO AFRO Togo.

The PHM WCA region organised the follow-up to the 72nd session of the WHO Regional Committee for Africa which was held in hybrid format from August 22- 26, 2022 in Lomé, Togo in which the following activities were undertaken:

• Training a group of activists and civil society organisations from West and Central Africa on how to make health policy comments, policy briefs and follow up on the activities of WHO, other United Nations agencies and other regional bodies

• Discussing the agenda for the 72nd session of the WHO Regional Committee for Africa and bringing PHM's perspective on the agenda items.

- Engaging a new generation of activists in global health discussions that impact health in the region
- Mobilising regional and national civil societies around issues of health governance

• Building an editorial team in the region to monitor the work of WHO and other regional health organisations

• Training of national focal points for WHO monitoring at the country level in the region, including the promotion of thematic groups

This meeting enabled members of PHM West and Central Africa to better understand the workings of the WHO and issues related to global health.

The exercise related to the writing of comments and the active participation of the PHM circles of Mali, DRC and Benin are positive points to note. A strong mobilisation was noted at the level of the DRC PHM within the framework of the initiative. The PHM Mali circle has grown stronger and has become more active. NGOs members of PHM Togo have become active again thanks to these exchanges.

PHM Campaigns in South Asia

Member organisations and individuals from the region participated in thematic group meetings, webinars, advocacy and country-level activities. The region contributed to the People's Health Dispatch on several occasions during the year. As a region, solidarity was extended to the Sri Lankan struggle on health rights amidst the worsening political and economic crisis in the country. Two webinars were conducted through thematic circles focusing on the economic crisis in Sri Lanka and the issues pertaining to the links between the ban on chemical fertilisers in the agricultural sector and the economic crisis.

Link: https://phmovement.org/webinar-sri-lankan-crisis-can-imf-and-world-bank-save-the-nation/
Link: https://phmovement.org/en-es-sri-lanka-crisis-and-the-impact-on-agroecology-debates-lessons-to-be-learnt-7th-oct-12-pm-utc/

PHM Global also released two media statements on the Sri Lankan crisis, one on the threats to health workers during the civil uprising and the other on the debt crisis and push for privatisation on the advice of international financial institutions.

Link 1:*https://phmovement.org/phm-statement-condemning-attacks-on-medical-facilities-and-health-staff-in-sri-lanka/ Link* 2: *https://phmovement.org/statement-by-academic-experts-on-dealing-with-sri-lankan-debt-en-es-fr/*

The country circles have also been active on local as well as global issues pertaining to the PHM's scope. The IPHU on health systems was co-organised by the thematic circle on health systems and the South Asia region actively participated in it, with about 18 participants one resource person from Sri Lanka and others from Myanmar. The IPHU had two phases, first an online one and then an in-person meeting. Four sessions were held online and the in-person sessions were held from December 5-11, 2022 in Bangkok. Altogether 38 participants from 11 countries participated, with over seven resource persons joining in person and online. It was a successful endeavour and follow up work on the IPHU will take place over the next few months.

PHM Nepal strengthened its structural organisation, contributed to development of the social determinants of health strategy of WHO SEARO, actively co-organised the regional health systems IPHU, participated in different programmes organised by the government and non-governmental organisations (NGOs), apart from continued solidarity in PHM Global and other initiatives.

PHM Pakistan, specifically the Sindh unit, with a coalition of civil society organisations, demanded that the government provide HIV/AIDS services, including awareness programmes, testing of HIV/AIDS at the initial stage and provision of medicines for HIV/AIDS patients on an equal basis, during a demonstration held on 1 December 1 at the Press Club in Karachi. The demonstration also condemned the monopoly of big pharmaceutical multinationals, under the International Patent Act which makes medicines inaccessible. PHM's Sindh Secretariat (Pakistan) is focusing on media coverage to highlight the issues raised by PHM globally and locally. Right now, media coverage is substantial with 15 to 20 publications and TV channels on average reporting on the protests.

PHM Sri Lanka published three quarterly journals

Q1-https://drive.google.com/file/d/1-9gj6Ciy-pfWXTfAAy5F_Btm3TFx766d/view?usp=share_link

Q2-https://drive.google.com/file/d/1DrdxHobKoGYjWtq4ouX9_LDy38LnNL98/view?usp=share_link

Q3-https://drive.google.com/file/d/1y3JVFoP2AefFLcKHkoIUlzPHbndOLDb7/view?usp=share_link

Q4- https://drive.google.com/file/d/itLJ96haNAdp3zi4KyZo8Nth6li3ombbz/view?usp=share_link

On April 19, 2022 a campaign against the decision to remove face masks was initiated due to the increasing peaceful protestors. On May 27, 2022, on International Day of Action for Women's Health. PHM Sri Lanka was able to organise a virtual meeting to share experiences and discuss 'The economic crisis in Sri Lanka from a Gender Perspective'.

Link:https://drive.google.com/file/d/1sTkJj7FMo8VF96_UVumo96WaMx5a9vAX/view?usp=share_link

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In the month of June, at the peak of the political and humanitarian crisis, a discussion was held with a panel of experts and activists to discuss the gaps to be addressed during the economic crisis.

Multiple webinars on people's dialogues on Covid-19 vaccine, breast cancer awareness and World Breastfeeding Day, World AIDS Day (December 1), Human Rights Day (December 10) were held by PHM Sri Lanka.

The Sri Lankan launch of GHW6 in the region took place in Colombo on November 22, 2022 with the participation of activists, health care providers, political party members and experts. Introduction to GHW6



Global Health Watch 6 launch in Sri Lanka



and its relevance to regional and local contexts was discussed at length, along with the ongoing country crisis in Sri Lanka and the importance of pursuing movement-building.

Link: https://phmovement.org/launch-of-global-health-watch-in-colombo-sri-lanka/

A strategic plan discussion, looking at the next three years, was organised, on December 20, 2022 in Sri Lanka. PHM member organisations participated in a SWOT analysis. The focus was to raise awareness on the 'No privatisation of Health Care' campaign, the shortage of health staff and address injustices on marginalised groups, such as people with HIV and to protect human rights.

PHM Campaigns in Middle East and North Africa (MENA)

In the MENA region, 2022 was challenging because of the social and economic crises that plagued many countries in it. There were two local campaigns in which PHM MENA was involved: one was the mobilisation for the country coordinator in Palestine (Shatha Odeh) and the early 2023 mobilisation for relief work around the earthquakes in Turkey and Syria.

As for the 2022 Covid-19 response, mainly led by the governments and, in certain instances, with strong support of NGOs and UN agencies, there was no regional coordination through the PHM. As PHM MENA, we have collaborated with WHO (through Belgacem Sabri) and as members of PHM MENA, we have relationships with G2H2, Medico, etc.

As for the activities implemented, PHM MENA has organised three major events in September and October which are the IPHU (see the IPHU report), the GHW6 launch and the PHM MENA regional meeting in Beirut, Lebanon.

PHM Campaigns in North America

The North American region of PHM consists of two countries: the United States of America and Canada. In both countries, PHM is primarily organised through email listservers. Canada has had more consistent meetings and more consistent communication, but PHM USA currently is in internal reflection with members coordinating through issue areas and campaigns with others in the US and with PHM activists in other regions.

The region has shown significant participation in Ecosystems and Health. It has also worked for equitable health systems, on war and conflict and towards gender justice and health. Organisationally, as a region, it has chosen to invest time in thematic circles and deepen participation in those more than the interface with PHM Global functions.

The region has been working on the anti-privatisation agenda during the pandemic in partnership with PHM Europe, PHM Brazil and PHM India. Monthly hackathons were held to identify global actors that push privatisation (corporations, financial funds, consultants) with the aim of mapping common threats and common patterns.

PHM USA & PHM Canada wrote an article for People's Health Dispatch titled 'Investors in long-term care profit as aged and disabled residents and workers bear brunt of Covid-19', in June 2022.

At the country level, PHM USA continued its work on the long-term care issues around Covid-19. PHM USA supervised a US-based student on how to build anti-privatisation documentation of long-term care, learning from global movements. The work culminated in many reports. Leigh Haynes featured in a video in People's Health Dispatch, reflecting on Dobbs decision overturning Roe vs Wade which was the key to

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demand safe abortion rights in the USA. PHM USA also supported the partner organisation's Right Care Alliance Medical Debt campaign.

PHM Canada re-launched a seasonal newsletter to engage with a broader network of people who have expressed interest in PHM Canada's work. The purpose of this newsletter is to increase knowledge of PHM Canada's activities and spark people's involvement. PHM Canada issued a statement in support of the Iranian social justice movements. The country circle voiced their support for all of those unfairly involved and affected by the violence related to Russia's invasion of Ukraine. PHM Canada also worked with the People's Health Tribunal in Africa as a major contributor.

PHM Canada has been working with PHM's Ecosystems and Health thematic circle and PHM Ecuador to prepare a 12,000-word pamphlet on anti-extractive activism for Daraja Press, intended to be a resource to help anti-extractive activists in other areas and to help inform others in similar struggles by sharing our own experiences. It is under review at the press.

B. HFAC Activities and Thematic Circles

As mentioned above, the HFAC is a global organising framework for different mobilisation actions by civil society networks and social movements around the world. The HFAC is where broad groups of PHM activists come together and connect PHM's global activism with local activism. The above section highlighted region/country-wise PHM activities. Below, we list them in terms of activities undertaken at the thematic circles level, apart from some other globally coordinated work.

Part 1

Interlinkages between the Thematic Circles

In August 2022, a cross-thematic meeting between the HFAC team and different thematic circle coordinators. This was the first meeting of its type and was very useful. It initiated a conversation about how different thematic circles can work and build together, sharing experiences, common work priorities and challenges.

Efforts were made to identify common themes/priorities between thematic circles. Even though this process did not conclude in identifying clear priorities, efforts are ongoing. Examples of common activities are webinars on NCDs by the Health Systems and Food and Nutrition thematic circles and a joint webinar between the Gender Justice and War and Conflict circles on the 'Repression of Women Health Workers in Conflict Regions'.

A common challenge identified as a priority is how to work multilingually. Whenever possible and requested, translations in French and/or Spanish was provided in internal meetings. Efforts were made to make sure volunteer interpretation was guaranteed in the monthly internal meetings. All email communication minutes are translated into at least two languages, French and Spanish, and sent to the relevant regions/ countries. Similarly, webinars are all provided with interpretations. Public communications are provided in at least one language other than English as are /invites/posters circulated.

Regional integration and support

This year we organised meetings with the coordinators of different regions in 2022 (Brazil, South & East Africa, and Europe) and supported the MENA regional meeting. This renewed conversations on 'Health For



All' with the objective of 'realising the interconnectedness of varied issues pertaining to health rights and the social and political determinants of health' toward strategic mapping of cross-cutting issues for health equity, rights and intersectionality, across all regions and thematic areas.

These regional dialogues were crucial in exploring varied areas of interest, concerns, limitations and discussing strategies for moving forward. For instance, region-specific IPHUs came up as a gap that could be addressed and support for the region in mobilising younger participants and activists in the HFAC. Participants expressed interest in strengthening the gender perspective and the intersectionality framework emerged strongly. Many local/regional examples of social disparities and health inequities formed the background to these reflections. Movement-building pathways through sustaining support from the secretariat, fundraising and solidarity with other groups came up in certain regional discussions.

Regional thematic circle meetings also allowed good progress in building bridges. Food and Nutrition had meetings with WCA, South Asia and Latin America. The Gender Justice circle had meetings with Latin America and Europe, the same for Trade and Health. The regional Trade and Health circle was created in Latin America. The Food and Nutrition thematic circle organised several regional meetings.

The thematic circle coordination of Trade and Health and Food and Nutrition expanded the regional representation of their coordinators; the Extractivism group already had many. Expanding coordination helps include more people, build capacity, articulate better with other regions and share the coordination job load and responsibilities.

It's also important to note that many activities/webinars/statements of the TCs are planned/designed in active consultation with the country /regional circle, as can be seen in the thematic circle sessions in the following pages. As an example, a thematic circle's webinar unites speakers and views from different PHM regions.

Activities and campaigns

HFAC coordinators have been working with the background note and the proposal for PHA 5 and supporting fund-raising activities. Programme coordinators and thematic circles also helped PHM to build alliances with other civil society organisations and networks, such as the People's Vaccine Alliance, the Our World is Not For Sale network, the FoodFirst Information and Action Network (FIAN) International, the Global Alliance on War, Conflict and Health, among others.

HFAC activities also help connect regional, national and local struggles to the global context. An example is the War and Conflict thematic circle reaching regions with the online gallery 'Health Workers Under Attack'. Another important experience (described in detail below) was the design and launch of the 'People's Action for Health and Good Living' campaign in Latin America, together with the organisation of the meeting for 'Health System Transformation and Decolonisation in Latin America'. The extractivism and ecosystems thematic circle was building the People's Health Hearing at COP₂₇ and reaching partners in Africa.

HFAC's thematic circles and coordinators also collaborate with other PHM programmes. IPHU SEAP was organised together with the health systems thematic circle. HFAC work was further seen in connection with IPHU in the MENA region, wherein, as part of the organising team, local PHM partners help in the planning and facilitation of the course. As always, WHO Watch (check full report cited above) counted on active collaboration from thematic circles, especially Equitable Health Systems and Trade and Health. Thematic circle participation has also been helping to guide PHM positions on the WHO Working Group on Climate

Change and Health. Global Health Governance (GHG) has passed through important changes with the regular activities of thematic circles contributing to WHO agenda and discussions.

Part II

Below, we organise the activities thematic circle wise as per the six priority areas of PHM.

Equitable Health Systems

The Equitable Health System thematic circle along with the GHG programme organised a series of three webinars this year based on key issues identified in the annual World Health Assembly (WHA) of WHO in May 2022.

The three issues identified for the webinar were-

i. Human Resources for Health: Recent WHO Initiatives-From Global to Local Link: https://phmovement.org/international-webinar-on-human-resources-for-health-recent-who-initiativesfrom-global-to-local-16-july-1-pm-utc/

ii. Reflections on Policy Developments for NCD control Link: https://phmovement.org/en-es-fr-phm-reflections-on-policy-developments-on-ncd-control-in-wha-75-30thsept-fri-1-pm-utc-reflexiones-de-phm-sobre-la-evolucion-de-las-politicas-de-control-de-las-enfermedades-notransmis/

iii. Communicable Diseases

Link: https://phmovement.org/en-es-fr-webinar-on-communicable-diseases-seminario-web-sobre-enfermedades-transmisibles-webinaire-sur-les-maladies-transmissibles/

These webinars were opportunities to take the work of the GHG beyond the engagement in the WHA proceedings and take discussions perceived as largely technical in nature to a larger audience, including non-English-speaking audiences. The webinars were organised with the objective of dissemination of the PHM statements and work on WHA 75. All webinars were provided with interpretations in three languages and had on average 100 participants from about 15-20 countries. In some webinars like the one on NCDs, there were participants from countries like Azerbaijan too. We also plan to engage the speakers at these webinars in giving inputs for future commentaries on WHA agenda items.







We had WHO and high-level government representatives in the three webinars. For example, for NCD, the WHO scientist on the panel Ms. Monika, made an interesting presentation and it allowed for an engagement with WHO on one of our main concerns. In the webinar on Human Resources for Health, Giorgio Cometto from WHO spoke on the new directions, opportunities and challenges afforded by HRH Action Plan 2022- 2030 and by Global Health and Care Worker Compact. For the CD webinar, Dr. Mary Bassett, Commissioner of Health, New York State, spoke on polio cases in New York. The three webinars with Global Health Governance Groups were also used to promote the WHOTracker as a valuable resource and also to advertise the objectives of the PHMs Global Health Governance programme.

Apart from this, another webinar was organised on the privatisation of healthcare where experiences of privatisation and resistance were shared by different countries. Link: https://phmovement.org/en-es-fr-webinar-on-privatisation-of-healthcare-webinar-sobre-la-privatizacion-de-la-sanidad-webinar-sur-la-privatisation-des-soins-de-sante/

One of the main achievements for the circle this year was the formation of the International Peoples Health University (IPHU). A short course on health systems was held online from November 21 to December 1, 2022 and on-site from 6 to 11 December, 2022 in Bangkok, Thailand. This was organised by the Health Systems thematic circle of PHM in coordination with the regional coordinators of South Asia and SouthEast Asia, with Community Partners International (CPI) as a co-organiser. The course was attended by 38 participants from 11 countries. Thailand was chosen as the venue for the course because of its strong health system and for its efforts and success in achieving the primary healthcare objectives and vision.

We have been trying to engage the participants in PHM through various thematic circles and PHM programmes or regional activities and have received encouraging responses so far.

Details: https://phmovement.org/iphu-on-health-systems-in-thailand/

PHM published the letter (rejected by Lancet for publishing) which members from PHM had written in response to the article titled "The Lancet Global Health Commission on financing primary health care: Putting People at the Centre". PHM's letter put forth some of the key concerns regarding the Lancet Commission's recommendations. Subsequent to PHM self-publishing its above letter, the internal response by the authors of the Lancet letter to PHM was made public and can be read here.

Details below-Link: https://phmovement.org/rejected-letter-from-phm-to-lancet-on-phc-financing/







Deepika Joshi from the TC attended the Our Future is Public Conference in Chile and this participation was coordinated by the thematic circle. (Details in the later section).

The thematic circle drafted an initial response to the World Bank 2021 document "Reimagining Primary Health Care after Covid-19". The first draft has been sent to a larger working group for their inputs and will be finalised soon.

Link-https://openknowledge.worldbank.org/bitstream/handle/10986/35842/ 9781464817687.pdf?sequence=7&isAllowed=y

• Session at International Health Systems Congress, Javeriana University on "Enabling equitable access to Healthcare during the Covid-19 pandemic: Experiences of People's Health Movements from the Global South"

The PHM proposed a session to present the Covid-19 journeys that countries and communities in the Global South have made, including exposing how the inequalities have worsened by the response to the pandemic and how intersectionalities play out. The proposal also explored how people coped with the crisis and would include narratives of resistance to repressive policies, solidarity and support amongst people and how social practices emerge that reflect relationships of power even at the community level. This session proposal built on the existing body of work and research by researchers associated with the PHMs in India, South Africa, Colombia, Brazil and Central America and encourages participation from a number of smaller nations in the Global South.

• PHM also contributed to the People's Working Group on Multistakeholderism (dialogue with South Centre, Launch of Covax 2 etc.)



• The Health System Circle submitted its final report on deprivatisation of ACI in Chhattisgarh done with PHM Chhattisgarh India. It is a case study of the government taking back ownership of the "Heart Command Centre (Escorts HCC) in the capital city of Raipur, Chhattisgarh state, India. The HCC had earlier been given by the government to the private sector to be run in Public-Private Partnership (PPP) mode in 2003 but taken back in 2017 amid reports of underperformance and non-fulfilment of contracts. We documented the improvement in services in terms of access, affordability, equity under the government and how it can serve as a model for governments to provide quality tertiary services. We are now looking to get the report published and disseminated.

The circle also participated in the ABRASCO Congress, organised e by the Brazilian Association of Collective Health (see the section on ABRASCO) and the CLACSO (Latin American Council of Social Sciences) conference. This has been detailed in the above section.

Gender Justice and Health Thematic Circle

The thematic group continued its campaigns, movement-building activities and building of young leadership around gender justice and the intersections between health and socio-economic and political factors, promoting sexual and reproductive health rights and justice and access to healthcare.

The three strategic campaigns coordinated by the thematic circle took place around International Women's Day (IWD) on 8 March, the International Day of Action on Women's Health on 28 May, and International Safe Abortion Day on 28 September.

The 8 March IWD call, developed by the circle coordinator and members, was circulated widely within the PHM and uploaded on the website for public dissemination. The campaign call was significant in reiterating PHM's commitment to advancing the agenda of gender justice. While placing gender as a cross-cutting lens, it called for local, national, regional and global solidarity around contemporary political issues, including the rights of healthcare workers, protesting human rights violations and sexual and reproductive health rights and justice. As part of this mobilising, PHM Sri Lanka organized a meeting on "The Prevailing Economic Crisis in Sri Lanka through a Gender Perspective" among other regional and country actions.

For 28 May, International Day of Action for Women's Health, the circle participated in the campaign coordinated by the Women's Global Network for Reproductive Rights (WGNRR, a member of PHM) bringing together feminist and health activist voices, focusing on the Global South. It was an important mobilising and advocacy space, allowing for PHM's expressions of solidarity and commitment in speaking about wide-ranging issues and their gendered implications. For example, the campaign materials included the mention of issues in Afghanistan, socio-economic vulnerabilities, worsening health conditions and the exacerbated conditions for women and community health workers. Similar anecdotes from the Global South were highlighted and collective demands for addressing them were articulated.

Along with SAMA and WGNRR, PHM Gender Justice & Health thematic circle built a campaign around abortion rights, demanding decriminalisation and safe access globally. The circle joined the social media campaign around September 28 and co-hosted a Twitter rally that put out public messages and advocacy demands from the PHM. 'Abortion is Healthcare', and 'Access to Healthcare is a Human Right' remained the highlights of these messages.



People's Health Movemen



"Governments failing to ensure safe abortion access are abrogating their duties to uphold, protect and fulfil human rights that include the right to health"



We collated materials from varied members and friends of PHM, including from Nepal, India, Brazil, Argentina, Morocco and Kenya, amongst others. The circle prepared posters, tweets and other visuals along with the communications team to spread the message far and wide. Here are the glimpses of the campaign material. Here you can find some of the messages shared by PHM activists on the right to a safe, legal and free abortion.

Alongside the three campaigns, the circle also collaborated with other PHM circles and programmes to integrate gender justice in our other PHM work. The Gender Justice and Health group was also involved in the planning of the International People's Health University (IPHU) in the MENA region. Sessions on gender, sexual and reproductive health and gender-based violence were facilitated as part of the course held from 6 to 11 October, 2022 in Beirut, Lebanon.

Sarojini, Adsa and Deepa from the thematic circle facilitated the session. Mixed pedagogies of lectures, group activity and short films were adopted to steer a participatory understanding of the concept of gender and related issues. The interlinkages between gender and other areas covered in other sessions, discussions of feminist political economy and the feminist approach to access to healthcare and technologies were also flagged during the course. In the spirit of sustaining the interest of the young activists from the MENA region, details of the thematic group were shared with them, asking them to write to the coordinator to join the thematic group's listserv and meetings.

A session on gendered health and gender-based violence and strategies for eradicating gender-based





violence was coordinated as part of the IPHU being held in Latin America. Maria Zuniga from the Gender Justice circle coordinated the session on September 1, 2022. Sarojini and Adsa joined online to facilitate discussions and exchange of experiences between regions.

The circle also wrote two statements in response to struggles with reproductive rights in the US and the overturning of the Roe V Wade ruling.

The circle also co-organised a webinar titled 'The Repression of Women Health Workers in Conflict Regions' on March 12, 2022. It was held in the context of Women's Day, where we also discussed the case of our Steering Council member, Shatha Odeh, arrested in July 2021 by the Israeli occupying forces. We had speakers from Palestine, Lebanon, Philippines, Argentina and Amnesty speaking on the theme. The circle joined COPASAH Europe and PHM Europe in organising a webinar titled 'Impact of the crisis on access to health services for women, with emphasis on marginalized groups of women' held on 8 June, 2022. Neelanjana joined the webinar panel discussion on behalf of the TC.

As part of an attempt to share the GHW6 with a broader public, the GHW6 article on 'Gendered inequities during Covid-19 times: A View from the Global South' was transformed into a podcast, highlighting the gendered inequalities exacerbated by the pandemic.

It is also important to highlight the efforts of the circle to lead the process of developing an Anti-Sexual Harassment Policy for PHM. The group members coordinated various exchanges within PHM Global, leading to the development of the first policy document, uploaded on the PHM website, showing PHM's commitment to standing against sexual harassment in its comprehensiveness. The Committee Against Sexual Harassment (CASH) committee has been formed. This is a milestone in PHM's journey towards zero tolerance for sexual harassment. A Spanish translation of the policy was also developed.

The circle is always looking for ways to increase its impact. The group identified the following as the most pressing challenges: 1. Coordination happens online, which still poses challenges for some participants 2. English remains the lingua franca but efforts are being made to provide simultaneous translation in Spanish,

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French and Arabic to maximise the participation of all, 3. Finding new members with the spare time to be proactive 4. The inclusion of some new and emerging issues.

War and Conflict, Occupation and Forced Migration

This year, the thematic circle finally launched the online gallery 'Health Workers under Attack' that it had been conceptualising for a while. The PHM online gallery portrays individual cases of health workers world-wide facing several forms of repression, whose political and civil liberties and, in some cases, even lives, are at stake. Attacks on health workers impede people from getting necessary healthcare, violating international humanitarian law. PHM country circles and activists identified these emblematic cases and campaigned to seek justice. With this gallery, we hope to raise awareness of the problem, strengthen campaigns of PHM country circles seeking justice and share activities and calls to action.

PHM, along with comrades from Tigray, raised awareness of the dire situation in the Tigray region of Ethiopia and in its statement condemned the targeted attack on health workers and health facilities in the region, calling on all state and non-state actors to fulfil their obligations under international humanitarian and human rights law. Also, a webinar on this issue 'Healthcare in war-torn Tigray: Targeted or collaterally attacked?' was organised by the PHM Tigray circle and the thematic PHM War and Conflict, Occupation, Forced Migration circle in November.

PHM's thematic circles War and Conflict and Gender Justice and Health organised a webinar titled 'Repression of Women Health Workers in Conflict Regions' on March 12, 2022 in solidarity with women health workers in conflict regions. The webinar was organised in the context of Women's Day, where we also discussed the case of our Steering Council member, Shatha Odeh, arrested last year in July by the Israeli occupying forces.

In the previous year, as a result of discussions and requests in the PHM thematic circle on War and Conflict, the circle had commissioned an educational resource (a report and a power point presentation) on Palestine. This was 'Palestine: Anti-colonialism, health and human rights' written by Layth Hanbali and released in May 2022.

PHM also spoke out on the war in Ukraine, as its impact on health has been absolutely devastating. We are once again witnessing the harm and strife caused by armed conflict. PHM released a statement coordinated by the secretariat and communication team to state its position. The People's Health Movement (PHM) also condemned attacks on temporary medical facilities and health staff on May 9, 2022 and expressed solidarity through this statement with the people of Sri Lanka and their demands for a democratic resolution to the political upheaval. A short note was also published by PHM developed by the global secretariat, extending solidarity with people and communities in Turkey and Syria.

The Global Alliance on War, Conflict and Health (GAWCH) and the PHM had agreed to be part of the GAWCH collaboratively in 2021. The launch event of the alliance took place on July 1, 2022 online and was appreciated. PHM also prepared a note which guided the TC/GAWCH to smoothly take the work forward and make use of the partnership. In 2022, we could not work closely with the alliance but plan to do so in 2023.

GAWCH website: https://www.warconflicthealth.org/

The thematic circle members gave inputs for the WHO Executive Board meeting in January 2022 for the PHM comment on Peace for Health Initiative agenda item.



Link: https://docs.google.com/document/d/1QZjieslDVteq7geUteE5Kr5dSEKowgsKiYvoaxTntcA/edit

This year various podcasts based on the Global Health Watch chapters were released, coordinated by the communications and GHW team. The podcast on Peace and Health in four languages can be found here *https://phmovement.org/ghwpodcast-episode-4-peace-and-health/*

Nutrition and Food Sovereignty Thematic Circle

In 2022, the PHM Nutrition and Food Sovereignty thematic circle made some important advances. The circle expanded its coordination and representativeness in Latin America, Southern and Eastern Africa and South Asia. Local work was also strengthened with the organisation of thematic meetings in Latin America, Western and Central Africa and South Asia to discuss common issues and priorities in the different regions. This consolidated an important basis for future regional activities and for the organisation of regional thematic groups on nutrition and food sovereignty. As an example, the South Asia Regional Meeting on Nutrition and Food Sovereignty had a very rich discussion where participants from seven countries in the region (Afghanistan, Bangladesh, Bhutan, India, Nepal, Sri Lanka and Pakistan) joined and where many cross-country commonalities and comparisons came out quite clearly as also many suggestions for follow up actions.

On October 7, the Nutrition and Food Sovereignty thematic circle organised the webinar 'Sri Lanka food crisis and the impact on Agroecology debates: Lessons to be learnt'". The webinar had a presentation from a Sri Lankan activist and comments from PHM members from Argentina, Bangladesh and India. This was the first time we provided translations in Hindi owing to requests by groups in the country and interest in the issue. The goals of the meeting were to understand from friends in Sri Lanka what happened during the Sri Lankan food crisis and in what ways it links with the fertiliser ban in the country, hear from friends in different countries (Argentina, Bangladesh, India) about the impact of the Sri Lankan crisis on debates on agroecology in their respective countries; promote dialogue and learn from Sri Lanka in order to better create roadmaps for the transition to ecologically sustainable agriculture. The webinar was well-attended and is available on YouTube. The circle also participated in the webinar "PHM Reflections on Policy Developments on Non Communicable Diseases control in the 75th World Health Assembly", organised by the Equitable Health Systems circle and Global Health Governance programme.

PHM engaged with the Civil Society and Indigenous Peoples' Mechanism for Relations with the UN Committee on World Food Security (CSM₄CFS) and strengthened its relationship with organisations such as the FIAN International, the Agroecological Movement of Latin America (MAELA) and The International Baby Food Action (IBFAN). Contacts were also established for possible future collaborations with Fundaçao



PHM Food and Nutrition thematic circle activities in 2022

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Oswaldo Cruz (Fiocruz-Brasil), and the Brazilian Permanente Campaign Against Pesticides in the organisation of People's Health Tribunal.

Trade and Health

The PHM Trade and Health thematic circle focused its work in 2022 on restructuring internal projects and reaching PHM country circles and regions to promote activities such as monitoring trade agreements regionally, with special support to Western and Central Africa; documenting trade issues with periodic updates; coordinating regional advocacy and activism on priority issues; capacity-building within the region regarding trade issues, including webinars and useful videos, podcasts and documents ; and reaching out to individuals in all regions through decentralised work. The circle also supported the World Health Assembly watching.

An internal survey identified people interested in the Trade and Health circle in many regions, such as Latin America, Europe, India, Western and Central Africa, the Asia-Pacific region, Middle East and Northern Africa. Future actions for 2023 may include creating the Trade and Health Watch, involving countries interested in monitoring regional trade and health issues, starting a Trade and Health newsletter, developing a project on local production and sanitary sovereignty and direct support on the development of the People's Health Tribunal.

Another important moment of the year was when PHM was accepted as an associated organisation to the Our World is Not For Sale (OWINFS) network, which provides useful ongoing commentary on the World Trade Organization and can be an important space for future collaborations.

Environment and Ecosystems Health

The PHM Environment and Ecosystems Health circle organised and participated in several activities promoting a diversity of voices and including younger ones in an attempt at movement- building. The circle organised several GHW6 Launches: in Madrid - April (Amulya/Anne Emmanuelle), Guatemala - Asecsa meeting (Erika), Colombia/Bogotá - November. Launch in Universidad Nacional (Erika/Baij), Brazil/Salvador - November - ABRASCO Congres November (Damiàn Verzeñassi). The Body map territory was presented as well in Toronto on November 23 Blessing (PHM Canada), in the US in November at the American Public Health Association annual meeting in Boston. Hesperian has been promoting and distributing GHW6 through their networks in the US.

Regarding publications, the circle authors published an updated article of the GHW6 chapter in Science for the People magazine. This article was translated for ABRASCO (Spanish/Portuguese by Pryscilla from PHM Brazil as volunteer work) A podcast episode featuring Amulya regarding the GHW6 chapter was recorded. Those were examples of the multiple ways of presenting work collectively.

The circle also participated in several exchange processes and activities. Erika went in exchange to La Capsalera in Barcelona with the Young Feminist Family Physicians Association in June 2022, after cooperation for IPHU in 2021. Amulya participated in a meeting of activists working on occupational health in India. This meeting was held on September 19-20, 2022. This meeting was useful as a platform for sharing of knowledge, learning from each other; sharing achievements and difficulties. Baij is our liaison with the People's Health Hearing (Peoples Health Tribunal against Shell/Total).

Regarding movement-building and organisation, the circle included all the people suggested by the PHM Secretariat with an invitation based on their work and activism. Pryscilla from PHM Brazil (a young voice) has been very vocal and more voices (New Zealand colleague) were included.



PHM Movement-Building









Fifth People's Health Assembly (PHA5)

In 2022, the PHM Steering Council decided to organize the fifth edition of the People's Health Assembly (PHA) in 2023. The PHAs of PHM are probably the biggest gatherings of health activists in the world. Every 5 year PHM organises a People's Health Assembly. Previous Assemblies have been held in Savar, Bangladesh (2018), Cape Town South Africa (2013), Cuenca, Ecuador, (2005) and Savar, Bangladesh (2000). Over the years, the Assemblies were attended by around 1500-2000 people from 70 countries, with a strong presence of participants of the Global South. In 2023 the 5th Assembly will take place in Colombia. With the support of the public Universidad del Valle and the local government of Cali, PHM has 2 important allies to make it a success. A PHM International Organizing Committee (IOC) was created in 2022 which will oversee the general coordination and the work of 5 specific committees (Logistics, Communications, Finance, Mobilization, and Program Committees). As during previous editions, the Assembly will very much reflect the work of PHM and its allies worldwide. The Assembly will guide the way for the future PHM work. You can find more information about PHA5 here.(https://phmovement.org/5a-asamblea-mundial-por-la-salud-de-los-pueblos-colombia-2023-5th-peoples-heath-assembly-colombia-2023/)

PHT

In 2022, it was decided to organize a People's Health Tribunal (PHT) in 2023. In a global context facing intersecting crises, with transnational corporations having immense power over local, national and international politics, and with multilateral institutions lacking the means or will to intervene, accountability is very much needed. The PHT of PHM aims to do exactly that; to expose the role that giant corporations play in creating ill-health, erecting barriers to decent health care and in fostering policies and practices which are destroying our shared wellbeing, ecological harmony, and the social and material rights of current and future generations. The PHT will document and analyse cases of violations against the right to health, as it will invest in capacity building of health activists worldwide so they have the experience and knowledge to hold those accountable in their localities. It will also aim to strengthen legislation and accountability on local, national and international

level in favour of the right to health. The PHT will be launched during the PHA5 in Cali, Colombia. In the lead up to PHA5 a network of collaborative organisations as co-convenors/co-producers and partners in the PHT will be assembled; tribunal members will be recruited; and the ground rules for the work of the Tribunal will be determined. The tribunal will be a process of 3 years in total. More information on the PHT can be found here. (https://phmovement.org/peoples-health-tribunal-concept-note-tribunal-popular-de-salud-nota-conceptual-note-conceptuelle-pour-un-tribunal-sur-la-la-sante-des-peuples/)

Movement-Building in SEAP

Toward movement-building in the SEAP, members conducted a successful local launch of Global HealthWatch 6 (GHW6) at the annual conference of the Public Health Association of Australia and New Zealand. A webinar was organised on the risks of war in the region, focusing on the issue of increasing tensions between China and the US on the future of Taiwan. David Legge, Scholar Emeritus in the School of Public Health and Human Biosciences at La Trobe University in Melbourne, Australia and involved with PHM (especially IPHU) since its inception has been instrumental in developing a model for a People's Health Tribunal to be launched at PHA5.

Members presented on various issues at PMAC 2023, including health inequity, climate change and health. Six new members were recruited to the SEAP mail list from Papua New Guinea, Thailand and Timor Leste. Members participated in demonstrations and disruptive actions in Australia to raise awareness of the health risks of the continuing and expanding use of fossil fuels. SEAP has been involved in the struggle for a citizen's voice on health and health services in South Australia, first via the Health Consumers Alliance which was defunded by a previous government and now with the establishment of the People's Health Voice (PHV). The PHV will facilitate involvement of diverse populations in the development of health policy and services planning to improve equitable access to health care and services. SEAP has continued to campaign for the right to health for citizens of the Philippines and for protection of health care workers who have been subject to harassment and extra-judicial killings. The International Peoples Health University short course on Health Systems was held online from November 21 to December 1, 2022 and on-site from December 6-11, 2022 in Bangkok, Thailand.

Movement-Building in Latin America

In the Latin America, four subregions have been consolidated: Mesoamerica and the Caribbean region; the Andean region; the Brazil region; and the Southern Julio Monsalvo region, named after the legendary Argentinian public health activist. All these regions have been strengthening their governance structures, increasing the number of PHM members and expanding their influence at the country and region/sub-regional levels. An ad hoc coordination committee for the whole region, including the subregion coordinators, has facilitated making links and integrating different struggles for health, like the campaign for the transformation of health systems and decolonisation, food sovereignty and nutrition, ancestral knowledge, gender issues and against extractivism. In this process, PHM Latin America has been able to strengthen its country circles and also made agreements and built joint strategies to mobilise for the right to health with other influential organisations in the field of health, like ABRASCO, The Latin American Council of Social Sciences (CLASO), ALAMES and MAELA, among others.

Mesoamerican subregion

In PHM's Mesoamerican subregion, several movement-building processes were promoted at different levels, articulated with other activities. The alliances and partnerships with other social movements were



strengthened, as was the case with different feminist, indigenous, health worker and community-based organisations, academic institutions, national alliances and coalitions in health-related issues and struggles. In this sense, the CPRSC amplified its local and grassroot activism and, at the same time, expanded its network of partners at the country and regional levels.

Andes subregion

A PHM country circle was created in Venezuela after the ABRASCO Congress, currently consisting of 12 people, representing different regions, academic spaces and indigenous communities. PHM Colombia, with the prospect of hosting the PHA5 in December 2023, started to prepare for the PHA5, which resulted in the recruitment of many new PHM activists, including activists already part of ALAMES Colombia. New and older members are involved in academic activities, community- based programmes, such as Salud Para el Barrio, indigenous and peasant health issues, health worker trade unions and so on. The PHM Global Coordinator and other PHM academic activists began work in November 2022 with six indigenous communities from the Colombian Caribbean region supporting their struggles in transforming their health care system, strengthening indigenous ancestral knowledge and practices, protecting their territories and building capacities.

At the end of 2022, a group of young people - Salud Pal Barrio (Health for the Neighbourhood) - joined PHM. This is a community programme of collective health and social medicine in the territory, based on CPHC as a strategy, which develops its collective work through popular education for the permanent training of community health leaders in urban and rural territories in the city of Cali and in the Colombian southwest region. At the same time, another group in the Cauca province also joined PHM. This group is promotes PHC activities in several urban neighbourhoods of the city of Popayan and some rural areas. The PHM also reactivated the work with the Corporación para la Salud Popular Grupo Guillermo Fergusson (Corporation for Popular Health Guillermo Fergusson Group) and with the Movimiento Nacional por la Salud y la Seguridad Social (National Movement for Health and Social Security). All these organisations are now involved in the preparation and organisation of the PHA5 and several activities for the reform of the Colombian health care system.

In Peru, a PHM country circle has been created, integrating Foro Salud (Health Forum) and other PHM activists working on PHC and community participation. Foro Salud shared the campaign of health systems transformation and decolonisation and a special video programme called 'Lunes por la Salud' (Mondays for Health) is up and running, interviewing people from Latin America and Peru on health issues. Another PHM group of young health activists, led by Alexandro Saco, is working on the preparation of the PHA5. In Bolivia, PHM celebrated its ninth birthday. The circle has close ties with ALAMES Bolivia and is very active in the department of Cochabamba.

Brazilian subregion

PHM Brazil expanded its circle and built visibility in the health movement this year. It also improved its political articulations. PHM Brazil became a member of Front for Life, a coalition established by the health movements during the pandemic to gather the main voices against mismanagement in governmental responses to the pandemic and that has continued as an important forum for Right to Health activists. The Brazilian Centre for Health Studies (CEBES), an organisation affiliated to PHM Global, is one of the key leaders of Front for Life.

At the ABRASCO Congress, PHM Brazil held an open meeting for people interested in joining and actively participated in other events. The webinars and activities during the ABRASCO Congress also helped bring

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new, young activists into the circle and strengthen the collective identity of the circle.

Southern subregion

An important step forward for the Southern subregion was to identify partners in Chile and Uruguay and include them into the PHM subregional circle.

During the regional meeting held in Mar de Ajó, it was decided to create a coordination group with representatives from all the countries and volunteers from member organisations willing to strengthen the movement in the subregion. The name of this subregional governance and decision-making structure is Coquito. The objective is to build a more representative and democratic organisational form of communication and joint decision-making. Recently, a proposal was made to incorporate the coordinators of the active subregional thematic circles into this collegiate coordination.

In 2022, the idea of promoting the formation of regional thematic circles began to take shape. Thus, people joined the Food Sovereignty and Ancestral Knowledge circles that was launched with significant participation. A circle working on Health Systems in the Southern subregion is in the process of being formed. Likewise, we have the presence of activists from the subregion in the global thematic circles of Nutrition and Food Sovereignty, Gender and Extractivism.

Representatives of all the countries of the subregion have participated in the campaign and meeting on Transformation of Health Systems within the framework of the ABRASCO Congress, with significant and committed participation in all the actions and in previous and subsequent meetings.

The subregional circle is strengthening the information/media channels, particularly social networks. The Instagram account of the PHM South subregion is coordinated by the Argentinian country circle. We also have a YouTube channel to which we upload relevant content but we still need to strengthen dissemination and communication across the subregion.

Movement-Building in Europe

Some countries in the region, like the UK, France, and Germany, have formal PHM circles. Some of these are registered as organisations (i.e. Germany), while others function as a circle without formal registration (i.e. UK, France). In other countries, like Belgium, Italy, Croatia and, to some extent, Spain, there is a local organisation which can be taken as a focal PHM point, which facilitates PHM activities. Also, in some countries, PHM functions as an informal network of people coming from other associations. Country-level, decision-making mechanisms are defined by the circles themselves but they all participate in the exchanges on the regional level and contribute to work in the region.

In 2022, the level of activity remained stable with an increase at the end of the year, surrounding the preparation of a regional in-person meeting held in Barcelona from November 11-13 and a follow up meeting. Bringing together senior PHM Europe activists with those newer to the regional organisation was useful in two ways: 1) newer activists brought a different perspective to what can be done and concrete tools on how to achieve this; 2) the presence and experiences of senior activists made it clearer what PHM Europe (and Global) are, and what they are trying to achieve. Two areas were identified for future work: building public infrastructure for research and development (R&D) and production of medicines at the European level; countering different aspects of the privatisation of health care, including the erosion of the working conditions of health workers.



What is important to highlight is the positive effect of holding not only regional level but also country level health assemblies. This had a beneficial effect both in the case of PHM France and PHM Germany, as well as in Spain, where local PHM groups worked with other social movements on the preparation of their actions for April 7. The organisation of spaces where activists can meet in person and develop their own local plans of work has definitely helped with movement-building and pointed the region towards areas it has to address. A similar movement-building effect was observed during the implementation of concrete actions or campaigns: local actions for April 7, support for feminist groups in the leadup to March 8 and participation in the European Citizens' Initiative No profit on pandemic (in select country circles).

While there has not been massive growth in terms of the number of active circles, existing circles have significantly scaled up the work they do as well. Many activities helped build regional cooperation. For example, activists from PHM France and the PHM Europe programme as a whole took part in the European University of Social Movements (ESU) co-hosted by Association pour la taxation des Transactions Financière e l'aide pour citoyenne (Attac) Europe (Association for the Taxation of financial Transactiona dn Aid to Citizens), held in August 2022. Participation in the ESU spread the word about PHM among activists who had not heard about it before and connected them to local circles in the countries in which they are based.

Movement-Building in Eastern and Southern Africa

The most active circles in the region are PHM South Africa and PHM Kenya. PHM Uganda, Malawi, Tanzania, and Zambia appear to have become a little bit stronger, have active contacts/organised contacts but are experiencing setbacks in terms of leadership. In PHM Mozambique, there are contacts through older members and the alliance for Health but still no PHM activities.

In 2022, PHM-ESA activists benefited from an online capacity-building training conducted by PHM's Global Communication team, including an introduction to social media campaigning through different platforms (e.g. Twitter, Facebook, Instagram) and tools to develop informational posters and videos.

Finally, PHM-ESA members assembled in Kisumu, Kenya and agreed to actively accelerate health advocacy, campaigns and struggles for 'Health for All' at the country and regional levels based on the country's context, resources and realities. The meeting involved sharing best practices, reflecting on ways in which the PHM ESA region can work together and discussing how experienced members of the movement can mentor young people to ensure continuity and rotating leadership. The second day involved participating in a conference on Universal Health Coverage (UHC) with a focus on sharing experiences by different stakeholders on how countries are working towards achieving UHC.

Movement-Building in West and Central Africa

The WCA region organised an IPHU in Cameroon in 2021. In 2022, two regional IPHUs were planned in the DRC (Environment and health) and in Togo (Access to health technologies). They have been postponed because of the delay in preparation. They are planned for 2023 in the DRC and in Benin, before the General Assembly of the PHA5 in Colombia.

The WCA region has members present in the majority of the PHM's thematic groups. A position in the region was taken during the organisation of the first regional meeting of the nutrition working group by Claudio Schuftan, the Food and Nutrition thematic circle coordinator. The region is promoting the idea that all the thematic groups organise regional meetings of the TGs to allow the region to discuss, contribute and adopt the work, recommendations and even the vision of each PHM thematic group.

In the DRC, PHM is expanding to the provinces thanks to the partnership with Mondas. All Mondas representatives in the provinces have joined the PHM and coordinate national and international campaigns in favour of health for all.

During the African Social Forum in the DRC, organisations signed the PHM's health charter.

Movement-Building in South Asia

The South Asian region consists of all South Asian countries, excluding India, which operates as a separate PHM region. However, in practice, the South Asian region works in collaboration with PHM India in almost all activities. The South Asian region at present has four active country PHM circles: Bangladesh, Nepal, Pakistan and Sri Lanka. There are ongoing attempts to create active country circles in Afghanistan, Bhutan and the Maldives. Some attempts have been made to contact activists in those countries and invite them to be part of the South Asian region. However, through the efforts of colleagues from Bangladesh, the involvement of one female participant from Afghanistan in our regional South Asia Food and Nutrition meeting was achieved and later also the Gender Justice meeting, to learn about the country's situation and hope to follow up. Apart from that, the South Asian region has also worked closely with the country circles in Thailand, Malaysia and Myanmar. Following the recent IPHU, several other countries in Southeast Asia are also working together, including Cambodia, East Timor and Papua New Guinea. As a result of the Health Systems - South Asia-SEAP IPHU, this time we were able to make contacts with community partners in Myanmar and participants from Myanmar for the IPHU. All attempts are being made to activate country groups in Afghanistan, Bhutan and Maldives.

On the initiative of the South Asia members of the Food and Nutrition thematic circle, a regional meeting was organised in August. We had a very rich discussion where we engaged participants from seven countries in the region (Afghanistan, Bangladesh, Bhutan, India, Nepal, Sri Lanka and Pakistan).

A new South Asian regional coordinator and an alternative coordinator were appointed in April 2022, following a regional meeting held virtually. Prof. Manuj Weerasinghe from Sri Lanka was appointed the new regional coordinator and Dr. Sharad Onta from Nepal continued as the alternative coordinator. Several regional meetings were held online and a proposal to have an in-person regional meeting in Kathmandu was developed by PHM Nepal and responses from other countries are awaited. An email base of activists in the region is being created to improve communication and share experiences.

Movement-Building in the MENA region

The main focus for 2022 in the MENA region was to re-build internal communication within PHM MENA to overcome communications and interaction issues. The MENA regional coordinator was elected in 2022, which is very important for the region and for the management and the health struggles in the region. The region has been engaged with a network of organisations with regular meetings and activities.

There have been attempts to activate non-active countries in the region. Many were contacted for the IPHU but some of them did not answer despite regular follow ups. Bilateral contacts will be reactivated in 2023. Many IPHU participants continued to be active in their countries upon their return from Lebanon. The IPHU in Beirut led to the reactivation of a PHM in Lebanon.

On a bi-monthly basis, Amel and Dr Mohanna, PHM MENA coordinators, convene coordination meetings with all the country representatives/circles. This began with the appointment of Dr. Mohanna as acting





coordinator, during the first quarter of 2022 and has been strengthened with the organisation of the IPHU in Beirut, during the last quarter of 2022.

The following countries are represented:

- Morocco, Tunisia, Egypt, Lebanon, Palestine, and Yemen.
- Jordan and Syria do not attend on a regular basis.
- Some countries, such as Libya, Sudan, Iraq and Algeria do not have representatives.

• Iran attended one meeting and it was decided during the PHM MENA regional meeting that it would return as member of the PHM MENA region.

Thanks to the new coordinator, PHM MENA is taking enormous steps forward on the movement- building front. Even though there are more regular meetings, there are still some challenges. However, several mitigation measures were identified. It was difficult to find a common time slot for all participants (some work during the week, some on Sundays and for some others, it is a day off). To mitigate this challenge, it was decided in February 2023 to have a fixed day every two months to organise those meetings and to send the agenda in advance. It was also difficult to mobilise all countries for the meetings. The IPHU was a good opportunity to mobilize all countries. However, in the coming months, there should be more spaces for concrete engagement. The need for connections to be built between new potential members and the circles was partially fulfilled by the IPHU and this will be followed up. There was a lack of information for PHM updates. Amel now regularly sends the minutes of meetings, supported particularly by Yasser for communication in Arabic. To avoid individuals not receiving information on meetings and events, Amel has created a WhatsApp group and email list to facilitate communication.

Movement-Building in North America

A

The North American region has chosen to remain a network of individuals, bringing in other memberships and commitments into one space. PHM NA is known for being good at fostering international connections in the circles it operates in Canada and in the US and at facilitating connections with activists in other regions. As a region, PHM NA has been consistent in nominating new representatives to the Steering Council at the end of each term. The region has coordinated with other PHM chapters over the past year.

PHM Canada has seen impressive growth since 2019. It has witnessed deepened engagement over the last months. There has been more collective work than before. PHM Canada operates by consensus and hence no one has a clear Coordinator role. Duties in terms of organising and facilitating meetings and activities are shared by members.

There have been no changes within PHM USA over the last year. Members are dispersed but maintain relationships and contact, including engagement with PHM Global. PHM USA operates by consensus and members volunteer to convene meetings. PHM USA is committed to reactivate its meetings in 2023 so that members in different thematic circles share experiences, activities and plans.

The region is particularly active in four thematic circles: Environment and Ecosystems Health; Equitable Health Systems, War and Conflict, and Gender Justice and Health. The region is doing a lot of work on building cross-national solidarity in these areas.

PHM USA is fostering Caribbean connections by building environmental health solidarity campaigns in the French Caribbean.

Movement-Building at the Global Level

I. PHA work, PHT work, Any updates on SC work etc.

Still awaited.

II. Confirming and strengthening old and new partnerships

In 2022, PHM confirmed and strengthened many old and new partnerships. They are detailed below.

1. 'Our Future is Public' Conference, 2022

The 'Our Future Is Public' (OFIP) conference was held from November 29 - December 2, 2022 in Santiago, Chile. The conference aimed to gather social movements and civil society organisations from all over the world in Santiago, Chile for four days to develop strategies and narratives to strengthen public services for the realisation of economic, social and cultural rights and to tackle the effects of climate change. PHM Global was one among many co-organisers. The conference brought together different sectors and sectoral meetings were held on health, education, agriculture, economic justice and social protection, energy, food systems, housing, transportation, waste and water.

PHM joined the conference via its participation in the health sector. In the health sector, one of the main organisers/participants is the Consortium against Commercialisation of Healthcare with which many PHM circles have been involved in the past. From PHM Global, Roman, Deepika and Andres attended the conference. Other than them, 12-15 PHM members attended, all of whom identify themselves as members of various



PHM country circles or PHM in general. This gave us an opportunity to interact with people from PHM across the globe, especially from Africa, share our work and discuss pathways to engage with the OFIP groups as well as the Consortium.

Following the meeting, the Santiago Declaration for Public Services was drafted and PHM was among the signatories. We hope to take this forward through our engagement/contact with the consortium depending





on our arrangement (after decisions by relevant PHM structures) and different organisations involved in the event. We also hope to continue engagement and coordination with PHM colleagues who joined the conference from across the world and working on this issue.

2. PMAC

PHM also participated in the Prince Mahidol Award Conference 'Setting a New Health Agenda: At the nexus of Climate Change, Environment and Biodiversity' held from January 24-29, 2023 in Bangkok, Thailand. PHM members were part of the organising committee. PHM contributed by suggesting speakers for various plenaries and intervening in different sessions and workshops. The conference was organised under three subthemes:

1. Addressing the nexus of Climate Change, Environment, Biodiversity, and Health Emergencies

2. Challenges and Opportunities: Overcoming Challenges and Harnessing Opportunities for Biodiversity, Climate and Health

3. Making a Difference: Taking Action on the ground



We had powerful presentations from PHM activists from across the world on themes of environment, food systems, movement-building and other areas. We also used the conference to launch the GHW6 as well as to have an extended Coordination Committee meeting.

3. World Social Forum

In the year 2022, PHM reactivated its membership at the World Social Forum becoming once again an active part of its International Council, with a main and an alternative representative. PHM was invited to join the main event of the World Social Forum in Mexico City by the WSF Committee panel on Social Security. PHM was represented by Eduardo Espinoza, from El Salvador, who shared with the audience a synthesis of main issues around health systems and the right to health in the Global South, particularly focused on Latin America and on the challenges concerning the adoption of PHC from a community perspective. The PHM, with the Comite de l'annulation de la dette du Tiers Monde (CADTM) (originally Committee for

PMAC PRINCE MANDOL 2022



Equitable Health Systems



the Cancellation of Third World Debt and now Committee for the Abolition of Illegitimate Debt), organised a panel about right to health and the struggle against pharmaceutical patents, especially in the context of lack of access to Covid-19 vaccines.

4. People's Vaccine Alliance

The PHM also became an active member of the People's Vaccine Alliance (PVA) (https://

peoplesvaccine.org/). PVA was created in May 2020 and is now a coalition of more than 90 organisations and networks (see list here: https://peoplesvaccine.org/supporters/) working together to end vaccine apartheid. PVA has been an involved actor in the campaigns for the TRIPS waiver, taking up initiatives that the PHM can build upon and to which it might contribute. We have been involved in the activities of PVA's core working or temp groups and in the PVA Influencing Groups. Many of our country circles, affiliated networks, activists and allies are working with PVA. PHM has also been working with PVA in several regions such as:

PVA-LA (the Latin American branch called Vacunas para la Gente (Vaccines for The People)). In Latin America, the PHM participated in the 'Thematic Planning Workshop of Plataforma Vaccines LAC' panel in August 2022 where we discussed issues related to Intellectual Property (government use, compulsory licenses, etc.) and technology transfer mechanisms; international sanitary regulations; strengthening of health systems and services and timely and effective access to diagnoses, vaccines and treatments; and economic justice and transparency of drug acquisition. The main actions to be developed and tabled at the workshop are : exchange of information and knowledge for processes of regional political science; actions aimed at access; collective actions to strengthen health systems; support for national agendas on intellectual property; collective advocacy actions to change international regulations.



PVA Africa is being hosted by Africa Alliance, which has a continental footprint but is headquartered in South Africa. Africa Alliance is a rights-based development programme aimed at protecting the health rights of marginalised groups (African Alliance). The main thematic areas for PVA in the African region are: increasing availability of vaccines, e.g. through campaigning for the TRIPS waiver at MC12; highlighting the work of other PVA members in Africa; HIV/AIDS prevention; promoting LGBTQI+ access to healthcare; Ports 2 Arms pilot project being run in SA; proposal to expand to Eritrea and conflict areas (e.g. DRC); meeting online as the Africa steering group on an as needs basis; representation from each of five African regions at the meetings; last week's meeting did not hold as many people as were at the Vancouver AIDS conference; PVA Africa has some funds available to sub-grant indigenous organisations to support Covid-19 advocacy, which is in line with their approach to be led by the CSOs in their alliance and to highlight and support their work.

PVA Asia is focusing on bringing regional groups in Asia together to address inequities in public health. For instance, BIMSTEC (Bay of Bengal Initiative for multi-sectoral technical and economic cooperation) being part of PVA Asia means more regional representation from countries around the Bay of Bengal. The goal of PVA Asia is to strive for equality of access for Covid-19 vaccines, diagnostics and therapeutics and more resilient universal healthcare systems. PVA Asia has a multi-pronged strategy for their advocacy:



awareness-building and mobilisation; policy and advocacy; research and analysis; and alliance-building and networking. At present, PVA Asia's advocacy is focused upon: the TRIPS waiver, compelling the government to stop blocking the waiver and support it completely; G20, raise concerns about existing health inequities and advocate for sharing know-how technology related to Covid-19 vaccines and therapeutics; the development of a non-western vaccine.

5. Consejo Latinoamericano de Ciencias Sociales (CLACSO) (The Latin American Council of Social Sciences)

PHM also signed a cooperation agreement with the CLACSO Working Group on International Health and Sanitary Sovereignty in March 2022. This agreement allows both parties to: 1. discuss and disseminate jointly critical and decolonial perspectives from the Global South about international health through scientific events and activities, encompassing the contributions of the SISS WG/CLACSO and the experience of the PHM through its global programmes and thematic circles 2. create spaces for technical, scholarly and political exchange and for postgraduate courses and technical education involving groups of health researchers and health activists from the Global South, focusing especially on promoting exchanges between Latin America, Asia and Africa. 3. discuss and prepare a publication in Spanish and English (at least) about decolonial and critical perspectives on health from the South, co-edited and co-organised by SISS WG/CLACSO and the PHM. The PHM strengthened relationships with the Food First Information and Action Network (FIAN International), G2H2 was accepted in the Our World is not for Sale network, established new links with the agroecological movement in Latin America (MAELA), the Frente por la Vida (Brazil))Front For Life) and the Brazilian Association of Collective Health (ABRASCO) and participated in the creation of the Global Alliance on War, Conflict and Health.





Capacity-Building and the International People's Health University









nternational People's Health University, 2022

The International People's Health University (IPHU) aims to contribute to 'Health for All' by strengthening people's health movements around the globe, by organising and resourcing learning, sharing and planning opportunities for people's health activists, particularly from Third World countries working for a healthy, fair, convivial, and sustainable world. IPHU is a programme of the PHM, globally. IPHU is particularly committed to strengthening PHM as an organisation and as a network of organizations and activists.

The IPHU plan for the year 2022 included implementation of four courses: two online and two in-person courses. The planned online courses were related to the Access to Medicines joint project with the Third World Network (TWN) and were to be implemented during August/September 2022 for the global course and November/December 2022 for the SEAP regional course. The in-person courses were to be implemented in the MENA region during September/October 2022, and the Latin America region during November/December 2022. In addition, there were two other proposals from the Mesoamerica region and the Health Systems thematic circle to organise another two in-person IPHUs in Mesoamerica and the SEAP region respectively.

IPHU Online Course

Regarding the online IPHU courses, one global online IPHU course on Access to Medicines was organised by PHM and TWN from September 3 - October 1, 2022.

The course was held in September 2022 for which planning and applications were organised in the months of July and August 2022 respectively. The course was designed as a short, online, add-on training course for alumni of Access to Medicines, IPHU and those who follow issues of access to medicines and Covid-19 medical products.

The course discussed the struggle for health during the Covid-19 pandemic with a focus on issues of access to medicines and medical products. It commenced with a broad overview of the context in which vaccines, medicines and other medical products remained out of reach of common people. The course provided an overview of currently approved Covid-19 health technologies and examined whether scientific and medical developments reflected the needs of developing countries. The course also examined the June 17, 2022

decision of the WTO on the TRIPS waiver proposal and its implications for access to medicines in the developing world. It also reviewed the scope of TRIPS flexibilities available at the country level for governments and CSOs to use to overcome IP barriers and highlight areas where flexibilities are still evolving or being understood, such as in the case of trade secrets. The course examined international access initiatives such as ACT-A and COVAX as well as industry-led actions such as voluntary licenses and asked questions about their impact on increasing access. Finally, the course examined local production initiatives gathering steam in developing countries and reflected on the implications of these developments for future pandemics. The course included detailed group work for which participants researched and presented.

The course had 51 participants, of which 29 were given certificates after meeting the criteria of minimum attendance, group work and filling out the feedback forms.

The other online Access to Medicines course planned for the SEAP region was cancelled after discussion with the TWN due to time constraints.

IPHU In-person Courses

1. IPHU MENA/Beirut course



IPHU participants on a visit to the Bekaa area, Lebanon

The IPHU MENA course was conducted from October 6-11, 2022 in Beirut, Lebanon. The in-person phase was preceded by an online phase of three online sessions on September 17, 20, and 24, 2022. The course was organised in cooperation with Amel Association (Lebanon) and the Gender, Justice, and Health thematic group of the PHM and was implemented in a downtown Beirut hotel in El-Hamra district.

The online phase of the course involved orientation of the participants with the PHM and the IPHU. In addition, there was an introduction to advocacy and campaigning, especially through using social media, and presentations of some campaigns against the privatisation of healthcare from India. Also, there was a presentation explaining the task needed from each country's participants and the guidelines for work of the country groups through the course.



There were 35 participants in the in-person phase of the course from seven countries (Morocco, Tunisia, Egypt, Sudan, Lebanon, Palestine and Yemen) in addition to 13 resource persons (lecturers and country coordinators) from the MENA region and PHM Global. The in-person phase was implemented over six days, including the day for the field trip and was followed by the PHM MENA regional meeting.

The course followed the main IPHU curriculum with a special emphasis on gender. It started with each country's members making a brief presentation regarding the situation of the health and health system in their country. The course covered the following main subjects: the People's Charter for Health, milestones in health development, the political economy of health and health governance, gender (the construction of gender; intersectionality and linkages with health; understanding reproductive and sexual health from a reproductive justice approach; gender-based violence, health and the public health response, health system policies, the Right to Health and activism in the international treaties, PHC, social determinants of health, Trade and Health, in addition to a special session on 'Palestine: The struggle for Life and Health.' Along with the lecture presentations , there were rich, open discussions with the participants on the different topics of the course, especially regarding the trend of privatising health care and medical education in the region and the efforts to combat these trends. There were presentations of some local examples from the MENA region,



IPHU participants after receiving their certificates and copies of GHW6

in addition to examples from other regions, especially Latin America (Cuba and Costa Rica) that adopt health systems based on comprehensive PHC.

There was a field visit on the fifth day of the course. The participants visited two primary health care centres and a farm affiliated to Amel Association, located in the Bekaa area in south Lebanon. On the final (sixth) day, the country groups presented the proposed projects that they were working on through the working groups. The course concluded with the launch of Global Health Watch 6 (GHW6) in the MENA region. The event was organised on the evening of the last day at the same place where the course was conducted. Most participants, lecturers and country coordinators attended the event, in addition to invitees of PHM activists and friends from Lebanon. At the end of the launch, course certificates and free copies of

GHW6 were distributed to the participants.

The course was a successful experience for the participants and the PHM MENA region. It helped in the reactivation of post-pandemic, in-person PHM activities in the MENA region, which included three events: the IPHU course, the GHW6 launch and the regional PHM MENA meeting. The course also provided an opportunity to discuss several issues and suggestions for some activities related to health and PHM in the region, such as an IPHU course proposed in Morocco in 2023, discussed at the PHM MENA regional meeting after the course ended.

2. IPHU Mesoamérica/El Salvador course

The Mesoamerica IPHU was conducted from August 27 -September 4, 2022 in El Salvador. The course was fully funded by Medicus Mundi (Pais Vasco) and Medico International. The course is part of a project on the Right to Health and Gender-based Violence with women leaders from seven municipalities of greater San Salvador. That project also involves the University of El Salvador Gensalud Programme and the Observatory of Health (OPPS). Dr. Eduardo Espinosa, former Vice Minister of Health for the two periods of the Farabundo Marti National Liberation Front (FMLN) government, and Steering Council Member, PHM, Maria Hamlin Zuniga, were the coordinators of the course.

During the two governments of the FMLN in El Salvador (2009-2018), the Ministry of Health held eight intensive courses of 10 days for health personnel and leadership of the National Health Forum. These courses were funded by Medicus Mundi of Spain and had support from Medico International. These were the only experience of courses being held by a Ministry of Health with the PHM.

As in the other eight courses, participants from the Regional Committee for Promotion of Community Health, the PHM-related network in Mesoamerica, were included. The curriculum for the course followed the IPHU core curriculum, with a specific emphasis on gender-based violence and sexual and reproductive rights.

3. IPHU SEAP/Bangkok course




The IPHU course on 'Equitable Health Systems' was organised in Bangkok, Thailand, from December 6-11, 2022. It was preceded by an online phase from November 21-December 1, 2022. The course was funded by the PHM and organised with the cooperation of PHM's Health Systems thematic circle, along with PHM South Asia and PHM Southeast Asia and Pacific Region with Community Partners International (CPI) as a co-organiser and the support of the PHM GS.

The course aimed at building the capacities of activists to compare and analyse responses to the pandemic by different countries to develop a basic understanding of equitable health systems. The course was attended by 38 participants from 11 countries from the SEAP region. These participants were selected from about 130 applicants who responded to an advertisement of the course circulated within the global, regional, and national PHM networks and those of its allies. The programme had a total of 15 resource persons, of whom seven were from regional PHMs, seven from Thailand and one, Lauren Paremoer, online from South Africa.

The online section was held in two-hour sessions on November 21, 23, 25 and December 1. These sessions were meant to introduce the participants to each other, help them prepare for their on-site course and introduce the core concepts of the PHM. It covered the following topics: Introduction to PHM (day 1) - Introduction to Health for All and to health systems (day 2) - Introduction to the People's Charter for Health and PHM's strategic plan (day 3) - Introduction to Political Economy of Health and Healthcare (day 4).

The in-person section was from December 6-11, 2022. It started with each of the 11 countries presenting their country-level experience and the lessons learnt. It covered the following issues: the experience of the Covid-19 pandemic and its lessons for health systems; Comprehensive Primary Health Care; PHC and UHC: understanding the changing discourse and direction of health sector reform; private sector regulation; engagement and accountability; equity in its many dimensions with a focus on gender equity; community and people centred care; access to medicines /essential technologies; digitisation and its challenges; and human resources for health.

There were field visits on December 7 and 8. The visits were to primary health care centres and local bodies. They involved exposure to, and explanations of, the Thai health system through presentations, film and answering participants' questions regarding different aspects of the system such as organisation of services, human resources for health, financing of health care, governance of health and community participation.

Participants agreed that this course had been a very useful experience, exciting and a great learning opportunity. Both the hybrid format and the field visits were appreciated. They expressed wanting to go back to their respective countries and connect with their respective PHMs or establish PHM circles where they did not exist. There was also a decision to be more active in thematic circles and global health governance activity. At the close of the final day, in celebratory mode, all participants received their participation certificates from resource persons and course faculty. It ended with a vote of thanks to those who had contributed to making it a success.

The Latin America IPHU was cancelled and rescheduled to be held in Colombia in 2023 before the beginning of the PHA5. The other proposed regional courses of IPHU for the year 2023 are for the North America and Western and Central Africa regions, in addition to the country IPHUs, such as the one proposed in Morocco.





Promoting a Robust Critical Economy-based Analysis of Health









After three years of work, the sixth edition of Global Health Watch (GHW6), PHM's flagship publication, was published by Bloomsbury on April 21, 2022. The book was first launched in Madrid, during the meeting of PHM Global's Steering Council and then presented at 16 events in 14 different countries (see Table 1).

Date	City (Country)	Event
27 Apr 2022	Madrid (Spain)	PHM Global Steering Council Meeting
24 May 2022	Geneva (Switzerland)	World Health Assembly (side event)
30 May 2022	London (UK)	Medact seminar
31 May 2022	Adelaide (Australia)	Australian National University seminar
17 Jun 2022	Barcelona (Spain)	Quepo summer course
9 Sep 2022	Bologna (Italy)	International Initiative for Promotion of
		Political Economy (IIPPE) conference
22 Sep 2022	Adelaide (Australia)	Australian Population Health Congress
11 Oct 2022	Beirut (Lebanon)	International People's Health University (IPHU)
25 Oct 2022	Bologna (Italy)	Centre for International and Intercultural Health
		(University of Bologna) event
2 Nov 2022	Bogotà (Colombia)	Health System Global (HSG) conference (side event)
8 Nov 2022	Boston (US)	American Public Health Association (APHA) conference
19 Nov 2022	Cape Town (South Africa)	PHM South Africa General Assembly
22 Nov 2022	Salvador de Bahia (Brazil)	ABRASCO conference
22 Nov 2022	Toronto (Canada)	Canadian Conference on Global Health
23 Nov 2022	Colombo (Sri Lanka)	PHM Sri Lanka event

Table 1. Launches of GHW6

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1 Dec 2022	2	Sant	iago	(Chil	e)		Our F	uture	e is P	ublic	conf	erence	(side ever	nt)			
28 Jan 202	3	Bang	Jkok	(Thai	iland`)	Prince	• Mal	hidol	Awar	rd Co	nferen	ce (PMAC) 2022			

GHW6 also featured in:

• PLOS blog "Speaking of Medicine and Health" (27 April 2022): "Activists' Guide for a Healthier World: Global Health Watch 6", by Chiara Bodini and Ronald Labonté;

• Bulletin #24 of People's Health Dispatch ;

• The Lancet Offline (5 November 2022): "Resist, imagine, enact—an antidote to global vanity", by Richard Horton .

In the first eight months since publication, over 1600 hard copies of the book have been distributed worldwide, the majority through the PHM's networks and in part through sales. Over 60 ebook versions have also been sold by the publisher.

A dedicated GHW6 section was created on the PHM website, including an introductory video, a video on illustrations and cartoons in GHW6 and videos of some of the launches. After obtaining permission from the publisher, the GHW6 introduction was also uploaded and made available in different languages (Spanish, French, Arabic, Italian, Portuguese, and German).

Thanks to a funding collaboration with Rosa Luxemburg Stiftung (RLS), in collaboration with People's Dispatch and with the support of the PHM communication team, a series of seven podcasts was created,



Cover of the GHW6 podcast series



involving lead and co-authors of selected chapters. The podcasts cover six GHW6 chapters related to the PHM thematic circles with a focus on environment, gender, conflict, food systems, trade agreements and primary health care. In addition, one episode was realised based on two introductory chapters analysing the framework of the global political and economic architecture and its impact on health, equity and ecosystems. All podcasts were translated and re-recorded with voice actors in Spanish, French, and Arabic. A communication campaign, including a promotional video (also in four languages), has been created to accompany the release of the podcasts . Upon release, the podcasts are available on the Ivoox platform, where a dedicated PHM space has been created , and in the GHW6 section of the PHM website.

⁷ https://phmovement.org/global-health-watch-6/

⁸ https://www.ivoox.com/en/podcast-ghw-podcast-en-es-fr-ar_sq_f11775056_1.html





Global Health Governance









WHO Watch Programme: WHA75 & EB150

After two years of organising the Watch as a virtual initiative, it was felt that it will be good to revert to organising the watchers' workshops, WHA75 Watch and EB150 Watch, physically. The physical nature of the Watch allowed for a much more interactive team and, more importantly, for bonding among the watchers. Fortunately, Switzerland's travel restrictions were negligible and this allowed the team to travel regardless of vaccination status. However, many embassies had very few visa appointment slots available since Covid-19 due to which a watcher from Cameroon had to drop out (she joined the EB152 watch instead).

Both watching processes faced some difficulties due to ongoing renovations at the Palais Des Nations. CSO delegations (non-state actors) had limited access to the meeting venue, with only four badges issued per delegation. We acknowledge the unconditional support of Medicus Mundi International (MMI)/Thomas Schwarz who gave all the MMI/WHA badges to PHM Watchers who also received badges from Oxfam. Overall, the limitation on badges affected the discussions and advocacy that could take place within the meeting venue during WHA75.

Significantly less speaking time was allowed for CSO statements (amounting to about 120-150 words per statement) during both watches, which made it difficult to create nuanced and comprehensive statements. Videos of the longer 300 word versions of statements were posted on the PHM's social media, along with posters, tweets and interviews. An archive of the materials the watchers produced during WHA75 can be found here and of the materials produced during EB150 can be found here.

Due to the high costs of travel and accommodation, the watchers attending both events were predominantly based in Europe, though some of these watchers are from the Global South.

WHO Watch: 150th Executive Board- January 2022





The EB150 Watch team

The WHO's governing body meeting EB150 was held from January 24- 29, 2022. A team of volunteers/ watchers was created from the applications received towards the expression of interest for volunteers. The Watching team consisted of Aletha Wallace (Belgium); Dian Maria Blandina (Germany); Stanley Yeboah (Ghana); Kiweta Bista (Nepal); Yeykai Chikwenhere (Zimbabwe); Prithivi Prakash (Australia); Judith Stoltz (Germany); Ankit Acharya (Nepal); Beth Stinchcombe (United Kingdom). The team was supported by Susana Barria (India), Lauren Paremoer (South Africa), Gargeya Telakapalli (India) and Jyotsna Singh (India).

The WHO Watch program was organised in two phases:

i) Preparatory Phase: involved calls to divide the work and a preparatory workshop on 13, 14,15,19,20, 21 and 22 January, 2022 for the watchers to engage, discuss, critically analyse and prepare statements on the agenda items. In the workshop, there were presentations and discussions on the agenda of EB150.

ii) Watching Phase: The WHO Watch team followed the discussions of the EB virtually and intervened through statements. Due to the virtual nature of the EB, WHO restricted the number of statements to be read out on the floor of the EB meeting. However, the watch team went beyond the restrictions and circulated additional statements in written form and recorded videos for circulation on social media. We used Twitter to reach out to a broader audience beyond those following the discussions, through videos, posters and other information. The PHM statements were made in collaboration with Medicus Mundi International.

See links to the statements, posters and videos below:

- 7. Prevention and control of non-communicable diseases: Statement Poster Video
- 7 (b). Recommendations to strengthen and monitor diabetes: Statement Poster Video
- 9. & 10. Tuberculosis and neglected tropical diseases: Statement PosterVideo
- 11. & 12. Immunization agenda 2030; Infection prevention and control: Statement Poster 1 Poster 2 Video
- 14. Standardization of medical devices nomenclature: Statement PosterVideo



15.1 & 15.2. Public health emergencies: preparedness and response: Statement PosterVideo

- 15.4. Influenza preparedness: Statement PosterVideo
- 17. Maternal, Infant and Young Child Nutrition: Statement Poster

PHM, Medicus Mundi International (MMI) and Geneva Global Health Hub (G2H2) organised an informal, virtual civil society meeting daily during the 150th EB called 'EB Today'. The space helped in sharing and coordinating information during the meeting. One of the main concerns raised was the shrinking civil society space in WHO's processes which makes it almost impossible for CSOs and activists to engage with WHO and member states meaningfully. Jyotsna Singh and Gargeya Telakapalli from PHM were part of the organising team. Members of the WHO Watch team provided debriefs of the previous day's developments which was highly appreciated, especially by CSO members unable to follow the Assembly live.

WHO Watch: 75th World Health Assembly, May 2022



The WHA75 Watchers team

The WHO's governing body meeting, WHA75, was held from May 22-28, 2022. A team of volunteers/ watchers was created from the applications received from volunteers expressing interest. The Watching team consisted of Aletha Wallace (Belgium); Dian Maria Blandina (Indonesia/Germany); Marta Caminiti (Italy); María Alejandra Rojas (Colombia); Sarai Keestra (Netherlands); Anton Sundberg (Germany); Abhishek Royal (India); Jasper Thys (Belgium); Alan Rossi Silva (Brazil); Sopo Japaridze (Georgia) and Ben Verboom (UK/ Canada). The team was assisted by Lauren Paremoer (South Africa), Susana Barria (India), Roman Vega (Colombia), Jyotsna Singh (India) and Gargeya Telakapalli (India).

The 75th WHA WHO-Watch marked physical attendance after a gap of two years due to the Covid-19 pandemic travel restrictions. The WHO Watch programme was organised in two phases:

i) Preparatory Phase: The preparatory workshop was held at the House of Associations in Geneva. The workshop was held from May 16-20, 2022 for watchers to engage, discuss, critically analyse and prepare

statements on the agenda items. In the workshop, there were presentations and discussions on the agenda of WHA75.

ii) Watching Phase: The WHO Watch team followed the discussions of the WHA at the Palace of Nations. However, only four passes were available to the PHM WHO Watch team (through MMI) due to the restrictions on the size of delegations (due to ongoing renovations at the venue). Despite the challenge, the watchers coordinated the watch, with half the team following the proceedings virtually and the other half at the venue. The watch team was able to make statements in written form and officially on the floor of the WHA75. We used Twitter to reach out to a broader audience beyond those following the discussions through videos, posters and other information. PHM statements were made in collaboration with Medicus Mundi International. See links to the statements, posters and videos below:

13. Sustainable financing: report of the Working Group: Statement Poster Video

14.1 Prevention and control of non-communicable diseases: Statement Poster Video

14.1 (b), (i) & (e) Obesity, diabetes and cervical cancer: Statement Poster Video

14.1 (h) Draft action plan to reduce harmful use of alcohol: Statement Poster Video

14.2, 14.3 & 14.4 HIV, Viral Hepatitis, STIs, TB R&D and NTDs: Statement Poster Video

14.5 Immunization Agenda 2030: Statement Poster Video

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15. Human resources for health (submitted by Public Services International): Statement

16.1 & 16.3 IOAC report and health emergencies: Statement Poster Video

16.2 & 16.4 International Health Regulations and health Emergencies: Statement Poster Video

17.1 Influenza preparedness: Statement Poster Video

17.2 Global Health for Peace Initiative: Statement Poster Video

17.3 Poliomyelitis, including eradication and transition planning and polio post-certification: Statement Poster Video

18.1 Maternal, infant and young child nutrition: Statement Poster Video

PHM, Medicus Mundi International (MMI) and Geneva Global Health Hub (G2H2) organised an informal, virtual civil society meeting daily during WHA75 called 'WHA Today'. The space helped in sharing ideas and coordinating work during the week. The discussions were rich, with topics like health emergencies, non-communicable diseases and sexually transmitted diseases discussed. The discussions also revolved around the problematic role private industry plays in many areas of health – it poses barriers in addressing harmful effects of alcohol and adversely impacts infant nutrition. WHO's inability and reluctance to address these concerns was raised strongly. Jyotsna Singh and Gargeya Telakapalli from PHM were part of the organising team. Members of the WHO Watch team provided debriefs of the previous day's developments which were highly appreciated, especially by CSO members unable to follow the Assembly live.

PHM also organised a webinar entitled "Undermining Democratic and Multilateral Responses: Multistakeholderism in Global Health Governance" on 20 May, 2022. The panellists looked at the threats imposed by multistakeholder mechanisms that have captured multilateral institutions such as the WHO. This has a direct impact on people's health, children's education, digital rights, access to basic public services and human rights, including the right to a healthy environment.

Webinars post-World Health Assembly:

In addition, three webinars were held after the WHA in 2022, in collaboration with the Health Systems thematic circle in which issues of health workers and communicable and non-communicable diseases were discussed. The details of the webinars are below.

- July 16th Human Resources for Health: Recent WHO Initiatives: From Global to Local
- September 30th PHM Reflections on Policy Developments on NCD control in WHA 75
- November 4th WHA 75 resolutions on Communicable Disease: A Review

Two webinars/strategising meetings were organised on issues around amendments to the International Health Regulations,2005 and the Pandemic Treaty.

PHM's strategising meeting on the Pandemic Treaty/New Pandemic Instrument was held on August 10, 2022. The meeting included presentations by Nithin Ramakrishnan and Dian Blandina on the issues with the Pandemic Treaty as well as the global architecture needed for health emergencies. Lauren Paremoer and Susana Barria were the moderators.

Members of the Central and West African region followed the online discussions of the WHO Afro Togo meeting held in Lomé from August 22-26, 2022. Daily updates were made by the participants. On the sidelines of the 72nd session of OMS Africa in Togo, the first pan-African conference of health sector unions took place on August 19- 20, 2022 at La Concorde Hotel in Lomé, Togo, under the theme "The Covid-19 Pandemic: Lessons for the Future". The participants in the conference were health sector unions from Togo, Burkina Faso, Côte d'Ivoire, Ghana, Liberia, Niger, Nigeria, Kenya, Mali, Uganda, Zimbabwe, Botswana , South Africa and the PHM under the umbrella of PSI. A joint PSI/PHM statement was read at the end.

PHM's Commentary and Tracker on the Agenda of WHO's governing bodies

A very detailed commentary, covering all items on the agenda of EB150 and WHA75 was prepared by a team led by David Legge, in consultation with thematic circles (especially the Health Systems thematic circle) and 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 of all agenda items available during the WHO's governing body meetings. In addition to informing PHM's positions on individual issues and facilitating discussions at the preparatory workshop, the commentary is also shared extensively on the PHM-Exchange, PHM social media platforms and via a mailing list in the week preceding the EB and WHA meetings. 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/

Participation of GHG coordination team members in webinars and conferences

During 2022, Lauren Paremoer participated in the following webinars and in-person conferences:

• 'Undermining democratic and multilateral responses: Multistakeholderism in global health governance', Friday, May 20, 2022. Session organised by PHM, Transnational Institute (TNI), People's Working Group on Multistakeholderism (PWGM) for the G2H2 series of public policy debates entitled "People's realities, determinants of health, democratic governance: Connecting dots outside the doors of the World Health Assembly", held in advance of WHA75. Presentation title: 'Building campaigns from the country to the global levels against corporate capture of multilateral institutions'. • Plenary II - 2021: 'A Bad Year for the Access Movement?: Second Global Summit on Intellectual Property and Access to Medicines', Istanbul, Turkey, 19 July 2022. Presentation title: "Covid-19 and Compromised Global Health Governance".

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• 'What Does "Fit-for-Purpose" Biopharmaceutical Regulation Look Like in the Global South Post-Covid-19?, A Policy Workshop' Co-Organised by the Health Justice Initiative (Cape Town, South Africa) and Dalhousie University's Health Law Institute (Nova Scotia, Canada), Dublin, November 5-6, 2022. Presentation title: "An enabler of access? Reflecting on possibilities for the South African Health Products Regulatory Authority (SAHPRA) to advocate for equitable access to medicines".

During 2022, Dian Maria Blandina participated in the following webinars and in-person conferences:

• European Summer School of Social Movements (ESU22) Health Forum, Thursday, August 18, 2022. The session was organised by the European Attac Network. Panellists included: Maaza Seyoum from the People's Vaccine Alliance, Silvia Habekost from Berlin Alliance "Health instead of Profit" and the Alliance "Hospital instead of Factory", Riccardo Petrella from the 'Agora of the Earth's People' moderated by Agnès Moussion from Attac France and Dagmar Paternoga from Attac Germany. Further information can be found here.

• A Webinar workshop on August 27, 2022, organised by PHM Sri Lanka, titled 'Sri Lankan Crisis: Can IMF and World Bank save the Nation?'. Panellists included: Manuj C. Weerasinghe from University of Colombo and PHM Sri Lanka and Ronald Labonte from University of Ottawa and PHM Canada, and moderated by Dr. Vinya Ariyarathna, President of the Sarvodya Movement. Further information can be found here.

• A presentation on 'Privatisation of healthcare in the EU and its impact on Covid-19 response' at a workshop at the EU Parliament, organised by EPSU and The LEFT. Panellists included Marie Rose Ghys from Jessa Hospital, Belgium, Chantal Less from Erasmus University Hospital Brussels, Belgium, Monika Kudrová from Hospital Mlada Boleslav, Czech Republic, Mário André Macedo from Hospital Fernando Fonseca, Portugal, Karol Florek from the UK, Maria Juana Peñafiel Heras from Federación de Sanidad y Sectores Sociosanitarios de CCOO (FSS-CCOO), Spain, Nicole Meyer from Orpea, Ver.di, Germany, Carol Wathlet from Groupe Armonea, Belgium. The event was moderated by Marisa Matias and Marc Botenga, The Left MEPs. Parliamentarian audience were Kathleen Van Brempt (S&D), Tilly Metz (Greens), and Katerina Konecna (The Left). Further information can be found here.

• An online policy dialogue organized by Medicus Mundi International and Centre for Planetary Health Policy titled 'Why Post-Growth policies are essential for planetary health', 28 October 2022. Panellists included Winne van Woerden from the Commons Network and Eduardo Missoni from Bocconi University. Moderated by Remco van de Pas from Centre for Planetary Health Policy. Further information can be found here.

• A presentation on 'The effects of IMF programs on health and healthcare' at the 12th IIPPE conference in Bologna, Italy, on 8 September 2022.

• A guest lecture session titled 'Bretton Woods Institutions in Global Health Governance' for the Global Health Governance Workshop at the Aristotle University of Thessaloniki, Greece, on November 5, 2022.

• A guest lecture session titled 'ALMA-ATA and The Struggle for Global Health Equity' for the Health Systems Resilience Module at the University of Groningen, Netherlands, on February 28, 2022 and on December 5, 2022.



PHM Global Organisation









1. Global Secretariat

2022 was the first full year the PHM Global Secretariat (PHM GS) was coordinated from Latin America, by Global Coordinator Román Vega. The PHM GS consists of 10 members, some working half, and others working full time. 50% of the PHM GS are based in Latin America, which of course had a positive impact on the movement building in the region. The functions of the PHM GS are the following:

- Global Coordinator
- Assistant to the Global Coordinator
- Communications officers (2)
- IPHU coordinator
- GHW coordinator
- GHG coordinator
- HFA-campaign coordinators (2)
- Programs manager

2. Communication

Communications:

The PHM's Strategic Plan 2020-25 has laid out communications as an important part of its strategy of movement-building and keeping members and the general public informed of the PHM's positions and work. Effective communication helps the movement grow. It fulfills the need to reach new audiences, including a broader cross-section of activists and the broader public. It allows the activities of different country circles to be documented, shared and fed into the global narratives of the PHM. The PHM has been expanding its online presence significantly. Through communications, we want to convey our understanding of the political economy of health to achieve the goal of 'Health for All'.

In 2022, PHM's communications management conducted some activities and actions that respond both to the needs of the reputational risk management of the movement as well as to actions and work plans developed by the team.

Given that communication cuts across all lines of action, programmes and strategies, the communications team of the Global Secretariat provides support to the Global Programmes and Regional and Country Circles. It also works extensively on content creation for website administration and community management activities in social media.

Strategic communication

• In April 2022, a communications support plan was approved, which was developed throughout the year

• In August, a communications diagnosis and characterisation of the movement was developed, which included the use of logos, analysis and testing of the website and social media accounts

• PHM's Logo Refresh Proposal:

The team worked extensively on the standardisation of the PHM logo and went through a long process of developing multiple options. The final decision is still to be taken

Communication campaigns

• Participation in, and support for, the September 28 Safe Abortion campaign, which included web posts, videos for social networks and a series of posters with campaign messages for social networks. The campaign material was produced in English, Spanish and French. https://phmovement.org/campaign-on-safe-legal-and-free-abortion/

• Design, launch, implementation and sustainability of the campaign for the Transformation of Health Systems in Latin America with a mini-site embedded in the PHM homepage and a communication toolkit for dissemination https://phmovement.org/convergente-latam/

• Production and launching of the PHM fundraising campaign, including videos, posters and a new link for donations page.

Video:	https://youtu.	be/9VzUMQNfa1Q
Posters:	https://twitte	r.com/PHMglobal/status/1603375057400696835?s=20
	https://twitte	r.com/PHMglobal/status/1606414052779065345?s=20
	https://twitte	r.com/PHMglobal/status/1606414052779065345?s=20
	https://twitte	r.com/PHMglobal/status/1607849061247229958?s=20
New dona	tion link:	https://vivasalud.koalect.com/en-GB/p/people-s-health-movement/step-1

Communications support

• The SC mandated the communications team to work on a Language Justice Project and increase PHM's communication in Spanish, French and Arabic. The team has put a system in place to translate as many documents as possible in these languages. Even on social media, content in each language has increased. While a lot more work has to go into this, a good start has been made



• Logistical and content support for events in the form of making posters, sometimes in multiple languages, disseminating information about the event, backend support for zoom, uploading videos on PHM's YouTube channel and disseminating them

- Support for global projects in content creation and special coverage
- Proofreading of special contents

• Production of the GHW podcast launched in January 2023: https://phmovement.org/ghw-podcast-episodes/

• Creation of the mini-site of the gallery of health workers under attack https://phmovement.org/ health-workers-under-attack/ .

• Creation of content for WHO Watch during Executive Board meet in Jan-Feb (https://phmovement.org/ who-watch-eb-150-perspectives-and-interventions/) and during World Health Assembly in May (https:// phmovement.org/who-watch-wha-75-perspectives-and-interventions/)

Content creation

- Production and coverage of movement information
- Working on PHM's new website
- Editorial support in content generation of global programmes

Web and Social Media Management

• We created 85 posts and pages on the PHM website. They included announcements of PHM events, dissemination of PHM documents and collation of campaign materials

• Implementation of adjustments and improvements to the website in transition to the website redesign

• Creation of mini-sites on the PHM website: Health Workers Under Attack; Health Transformation Campaign in Latin America and many others.





• Generation, administration and maintenance of content on the website and social media

Social Media in 2022

PHM Global Twitter Account Analytics 2022

@PHMglobal started in 2022 with 5,663 followers and ended the period with 6,322 followers

Month	Tweets	Tweet impressions	Profile visits	Mentions	Followers New Followers
December	52	28,2K	5,411	174	6,322
details	-	+ 24.1%	+ 9,6%	+ 13,7%	+056
	18,8%				
December	52	28,2K	5411	177	56
November	50	24,8K	4,992	157	25
October	46	15,9K	15,9K	4,561	70
September	62	26,1K	11,1K	191	54
August	18	6,409	2,270	17	12
July	50	17.1K	6,161	82	55
June	29	30.9K	7,801	187	72
May	134	86.4K	17.6K	400	98

Peop) le'	s Heal	th Mo	v e m e	n t
April	30	143K	7,333	127	59
March	41	27.5K	5,064	152	43
February	25	26.5K	5,948	148	56
January	55	61.6K	9,968	151	59

YouTube https://www.youtube.com/@peopleshealthmovement3650

PHM uploaded 100 videos on its YouTube channel and created two playlists for the WHO Watch meetings. The images below represent some of the interesting statistics for PHM's YouTube channel.



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The 100 videos uploaded to the YouTube Channel generated 6,364 views.