

# ANNUAL REPORT

2021



## Editorial

“ 2021 saw another year full of rapid changes both outside and inside GHA. Our advocacy continued to focus on actively pushing donors and governments to respond to the Covid-19 crisis, by mobilising resources and putting in place equitable policies that will help prevent future pandemics.

The Covid-19 pandemic has shown the need for the international community to improve the way we approach global health, and how we manage health threats collectively. What is the purpose of global cooperation if it consolidates inequalities between and among countries? The pandemic forces us to rethink our model of cooperation, by putting the spotlight on our interdependence and the flaws of our current international system. Countries and communities most affected by global health issues are still in the backseat of the current global health architecture. Rich countries and regional powers like the European Union continue to push for policies that impede equitable access to healthcare by opposing the removal of intellectual property barriers from Covid-19 technologies. Our challenge in coming years will be putting equitable access at the heart of the political debate in every phase of pandemic preparedness and response and avoiding the further polarisation of privileged and under-served countries.

In June 2021, with the support of [Focus 2030](#), we launched our very first campaign on sexual reproductive health and rights “[EssentiELLES](#)” during the Generation

Equality Forum. We continued our long-term cooperation with the [ACTION](#) advocacy partnership, raising the political profile of global health in twelve countries across the world. 2021 was also a year of financial uncertainty, as one of our major donors -the [Open Society Foundation](#)- has been undergoing significant restructuring. While we welcome their regional shift to get closer to their grantees, the decision to dismantle its global “Public Health Programme” came as a shock to us and our allies in the access to medicines movement.

In 2021, we also moved to new offices in Paris and were very pleased to welcome a significant number of new staff both in Paris and Brussels, as well as a new Board member: [Walid Rachedi](#). In June we kick-started our strategy renewal process for 2022-2027. A significant amount of time was spent to think about the wider determinants of health inequalities and how they will impact our work in the five years ahead. Stay tuned for the launch of our new strategy in 2022!

Patrick Bertrand, Founder  
and Executive Director



## Acronyms

<b>ACT-A</b>	Act-Accelerator
<b>AU</b>	African Union
<b>CSO</b>	Civil Society Organisation
<b>EU</b>	European Union
<b>GHS</b>	Global Health Summit
<b>GNI</b>	Gross National Income
<b>HERA</b>	Health Emergency Preparedness and Response Authority
<b>IFI</b>	International Financial Institution
<b>MEP</b>	Member of European Parliament
<b>MP</b>	Member of Parliament
<b>N4G</b>	Nutrition 4 Growth Summit
<b>NGO</b>	Non Governmental Organisation
<b>ODA</b>	Official Development Assistance
<b>PLFSS</b>	French Social Security Financing Bill
<b>R&amp;D</b>	Research and Development
<b>SDG</b>	Sustainable Development Goal
<b>SRHR</b>	Sexual and Reproductive Health and Rights
<b>TRIPS</b>	Trade-Related Aspects of Intellectual Property Rights
<b>WHA</b>	World Health Assembly
<b>WHO</b>	World Health Organisation
<b>WTO</b>	World Trade Organisation

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# MAKING GLOBAL HEALTH A POLITICAL PRIORITY FOR FRANCE AND THE EU

## Stronger programming for a more effective French development policy

For over two years, Global Health Advocates and its French civil society partners have advocated for the revision of the 2014 French international development policy programming law. This law sets guidelines and defines French Official Development Assistance (ODA) geographic and sectoral priorities. Many of GHA's recommendations had already been included in the National Assembly's [report](#), by the rapporteur of the Foreign Affairs Committee: Member of Parliament (MP) Hervé Berville. In addition, GHA's consistent work to raise awareness on global health issues among MPs resulted in cross-party adoption of amendments endorsing that :

- 0.7% of French gross national income (GNI) will be devoted to ODA by 2025. A calendar has been set within the law to reach this goal by 2025.
- an increase in ODA credits will also benefit multilateral aid, not only bilateral aid, as initially planned.
- global health is one of the five priorities of French ODA.

## Health as a foundation for a genuine AU-EU Partnership

The 6th European Union - African Union summit aimed to renew the relationship between the EU and the AU. As a high-level meeting among heads of state, postponed several times due to Covid-19 it was a challenging event for civil society engagement.

While each institution prepared its position on a new "EU-Africa strategy", the EU's position was significantly less progressive on health. A wider perspective, focusing on longer-term sustainable changes was missing as well as a commitment to fully fund the Global Health initiatives they already support. While the EU suggested a partnership structure around five pillars, GHA together with other CSOs crafted an idea for a 6th partnership on health. GHA worked with [ACTION](#) partner [WACI health](#) in Kenya to conduct interviews with African civil society, later [sharing their demands](#) with EU officials as well with organisers of the Summit.


Early December, the Slovenian Presidency's event on health in the EU-Africa, invited WACI Health as a speaker on community healthcare. GHA drafted [Recommendations for Transformative Actions on Health](#), which were widely shared by [Concord](#) (the EU Development NGO umbrella platform) and circulated among Ministries of Foreign Affairs of EU Member States.

## France championing Global Health through its Presidency of the European Union Council

France took the rotating presidency of the EU Council in January 2022 for six months. Within this role, France oversees the work of the Council, sets up the agenda and can influence ongoing negotiations and initiate new processes. In 2021, as France was preparing its presidency programme, GHA reached out to the Elysée, the Ministry of European and Foreign Affairs, the European Affairs Secretary General to the Prime Minister and the Permanent Representation towards the European Union in Brussels to ensure Global Health would be among the top priorities of the French Presidency.

GHA coordinated with CSOs both at the French and European level and with the Covid-19 pandemic still hitting hard, Global Health was eventually included in the agenda of the French Presidency. Our main [demands](#) for the Presidency were about the renewal of the EU Global Health Strategy, the launch of a Team Europe Initiative on Health Systems Strengthening, the need to have a strong European leadership on the negotiations of Intellectual Property barriers and funding to guarantee equitable access to Covid tools. In December 2021, France confirmed they would amplify those messages with their EU counterparts during their Presidency. GHA was also invited to be part of the Organising Committee of the Global Forum on TB Vaccine which was due to take place in Toulouse in 2021. While it was postponed to 2022, GHA worked on having the event registered as an official event of the French Presidency of the EU.

**PRÉSIDENCE FRANÇAISE D'UNE UNION EUROPÉENNE AU COEUR DE LA SANTÉ MONDIALE**



La France et l'Union européenne (UE) ont de tout temps été des actrices centrales de la santé mondiale. La pandémie de Covid-19 qui a porté les enjeux en matière de santé mondiale au plus haut niveau de l'agenda politique international a été un nouvel exemple de leur rôle moteur. En œuvrant notamment en faveur d'une réponse internationale rapide et équitable via la mise en place de la plateforme ACT-Accelerator (ACT-A) ou en se mobilisant fortement lors du Global Health Summit du 21 mai 2021, elles ont démontré qu'elles prenaient la mesure du défi majeur auquel le monde était confronté. Le leadership de la France s'est par ailleurs démarqué à travers le partage de vaccins dont elle a été l'initiatrice, son soutien en faveur du développement des capacités de production en santé au Sud, ainsi qu'un portage politique de valeurs fondamentales pour faire des produits médicaux de lutte contre le Covid-19 des biens publics mondiaux.

Près de deux ans après le début de la pandémie, et malgré les efforts importants mis en œuvre par la communauté internationale pour répondre à la crise, l'accès équitable aux produits de lutte contre le Covid-19 ne s'est pourtant pas concrétisé. Un tel constat rend urgent et plus indispensable que jamais le renforcement de la solidarité et de l'architecture sanitaire internationale. A l'aune des nombreux débats qui marquent actuellement les discussions internationales à ce sujet, l'Union européenne se doit de saisir cette opportunité pour faire prévaloir son modèle et ses valeurs et parler d'une seule et unique voix.

**De janvier à juin 2022, la France prendra la présidence du Conseil de l'Union et a choisi de faire de la santé mondiale l'une de ses priorités. Nous saluons cet engagement fort, et invitons la France à mettre en application ce portage politique de la santé mondiale à travers des propositions concrètes en faveur de la solidarité internationale pour la santé, d'une meilleure cohérence des politiques publiques en la matière et d'un soutien renforcé à la recherche, au développement et à l'innovation qui permette véritablement un accès équitable aux produits et technologies de santé.**

**PROMOUVOIR LE RÔLE CENTRAL DE LA FRANCE ET DE L'UNION EUROPÉENNE SUR LA SANTÉ MONDIALE**

→ **Organiser un événement pour le 20ème anniversaire du Fonds Mondial**

La présidence française du Conseil de l'Union européenne (PFUE) interviendra alors que le Fonds mondial de lutte contre le VIH/Sida, la tuberculose et le paludisme fête ses 20 ans. Depuis sa création, le Fonds a permis d'effectuer des progrès considérables en faveur de la lutte contre ces trois maladies mais la pandémie de Covid-19 a provoqué des reculs alarmants en la matière. L'année prochaine sera marquée par l'accueil de la 7ème reconstitution des ressources du Fonds mondial par les Etats-Unis, une échéance critique pour atténuer les impacts dévastateurs du Covid-19 sur les trois pandémies. Depuis sa création, la France a joué un rôle politique et financier majeur en faveur du Fonds mondial, un leadership s'est notamment confirmé par son accueil de la dernière reconstitution des ressources et

# UNEQUAL ACCESS TO COVID-19 TOOLS: HOLDING RESPONSIBLE PARTIES TO ACCOUNT

## 1. HEALTH FOR ALL OR PROFITS FOR A FEW?

### Making vaccines against Covid-19 a Global Public Good

The Covid-19 pandemic once again highlighted global inequalities in access to health products. While 88% of people living in low-income countries are still unvaccinated from Covid-19, GHA [called on France](#) to remove intellectual property barriers that prevent scaling up and diversifying production of affordable vaccines. GHA coordinated a civil society call to [urge the French government](#) to encourage its European partners to adopt the TRIPS waiver proposal, submitted by South Africa and India and backed by more than two-thirds of members at the World Trade Organisation (WTO).

From September to the end of November, GHA continued to raise awareness among key negotiators, such as the diplomatic advisors to the President, the Ministers of Health and Trade, and the Secretary General for European Affairs. On November 27, on the eve of the 12th Ministerial Conference of the World Trade Organisation the meeting was postponed to June 2022, following the outbreak of the omicron variant. GHA encouraged its civil society coalition to communicate massively by releasing an [op-ed in the JDD](#) and a joint press release, which was covered by a dozen media outlets, including [Challenges](#) and [Ouest France](#). Continued pressure from French civil society has contributed to France's involvement in the negotiations, which now encourage its partners to promote technology transfer and production capacity for health products in developing countries.

### Meeting with Emmanuel Macron ahead of the G7 Summit

A week before the Carbis Bay G7 Summit, GHA together with six other NGOs were invited at the Elysée. It was the first time since the French Presidency of the G7 in 2019 that a dialogue between civil society and the President was held ahead of a Heads of State's Summit. Emmanuel Macron shared the assessment of our organisations and our call to do more to fight the pandemic. Most notably, he claimed that he was in



favour of the TRIPS waiver at the WTO, a claim which he formally reiterated during a press conference the next day.

## 2. MOBILISING RESOURCES FOR THOSE MOST IN NEED






### One year anniversary of the ACT-Accelerator: mobilising France to fund the international Covid-19 response

On the anniversary of the launch of the ACT-Accelerator, a unique global collaborative initiative that engages states, health agencies and the WHO in the fight against the coronavirus, GHA hosted a webinar on France's contribution to the international health response to the Covid-19 pandemic. It was a great opportunity to highlight ACT-A's significant progress on the delivery of the first vaccines, Unitaïd's successes in increasing access to treatments in lower income countries and the challenges the world is still facing to put an end to this pandemic. At the webinar, the French Minister of Europe and Foreign Affairs, Jean-Yves Le Drian reaffirmed the importance of knowledge sharing, technology transfer and price transparency.

<b>Propos introductifs</b> <b>Dr Joseph CABORÉ</b> Directeur de la Gestion des Programmes, Bureau Régional de l'OMS pour l'Afrique	
<b>1 - ACT-A, un an après : quel bilan, quels besoins?</b>	<b>2- Rôle et opportunités pour la France dans la réponse globale</b>
 <b>Dr Paul KRISTIANSEN</b> Responsable de la R&D des standards, des tests biologiques et du développement préclinique au CEPI	 <b>M. Jean-Yves LE DRIAN</b> Ministre français de l'Europe et des Affaires étrangères, déclaration vidéo
 <b>Dr Moumouni KINDA</b> Directeur général d'ALIMA	 <b>Pr Michel KAZATCHKINE</b> Membre du Independent Panel for Pandemic Preparedness and Response, Conseiller spécial auprès d'ONUSIDA pour la région EOAC
 <b>M. Philippe DUNETON</b> Directeur exécutif d'Unitaid	 <b>M. Jean-François Mbaye</b> Député du Val-de-Marne
 <b>Mme Françoise VANNI</b> Directrice des relations extérieures et de la communication au Fonds mondial	actionsantemondiale.fr 

### Mobilising European funds for the Covid-19 response

Although the EU was quick to respond to the Covid crisis, leading the development of the ACT-Accelerator and the organisation of resource mobilisation conferences, they have yet to commit to spending their fair share of resources and have not been supportive to policy making that would lead to true equity (eg: the TRIPs waiver). Mobilising more EU funds has been challenging due to a strained development budget, balancing the financing the Covid response while also safeguarding money for longer-term global health commitments. Together with other CSOs and the [PAN network](#), GHA [called on the EU](#) to meet their "fair share" and contribute an additional €1.3 billion from its flexibility instruments - a new mechanism that was purposely planned for emergencies.

COVID-19	
<h1>5 REASONS WHY the EU should <b>immediately</b> use the <b>flexibility instruments</b> for the <b>global</b> COVID response</h1>	
#1	<b>Because it is exactly what these budget lines were made for</b>  <p>According to the Global Europe Regulations, contributions to ACT-A would be appropriate from both the Cushion and the Rapid Response Pillar. The COVID pandemic is a global crisis that requires a quick response and EU leadership.</p>
#2	<b>Because that's where the money is</b>  <p>The cushion and the rapid response pillar have been allocated €8.49 billion and €2.83 billion euros respectively for the period of 2021-2027, enough to meet the EU's fair share to ACT-A, contribute to the wider COVID response, and still have enough remaining for future urgencies.</p>
#3	<b>Because "Global Challenges" thematic budget line is already overstressed</b>  <p>The thematic budget line that could be used for health is sparse, with only €137.2 million for 2022 - far below what is needed for the EU to meet its fair share to ACT-A and other global health initiatives.</p>
#4	<b>Because EU investments for global health in partner countries are insufficient</b>  <p>The development budget has been geographised. As a consequence, thematic issues like health are neglected.</p>
#5	<b>Because not doing so will cost much more</b>  <p>COVID-19 threatens to reverse the progress made towards the SDGs and increases the risk for people living non-communicable diseases. The entire world suffers the longer this pandemic continues, and evidence shows it could cost the world 9.2 trillion in 2021 alone.</p>

### 3. GLOBAL HEALTH GOVERNANCE: FROM GLOBAL HEALTH SECURITY TO GLOBAL HEALTH EQUITY

#### Global Health Summit: GHA's call to G20 leaders

On 21 May 2021, the European Commission co-hosted the Global Health Summit together with Italy. GHA was active ahead of the summit, trying to influence the agenda and improve the presence and coordination with civil society. As a result, GHA was invited to a [civil society consultation](#), which took place a few days before the summit, as well as to a meeting with the G20 sherpas. At the Summit, the leaders adopted the '[Rome Declaration](#)', committing to common principles to overcome Covid-19 and to prevent and prepare for future pandemics. [GHA's reaction](#) to the Rome Declaration highlights five key demands for a more equitable response to Covid-19.

#### The new EU Health Emergency Response Authority: Publicly governed, Producing Public Goods, Publicly Accountable !

The EU has decided to improve Europe's capacity and readiness to respond to cross-border health threats and emergencies by creating a new mechanism: the Health Emergency Preparedness and Response Authority (HERA). GHA sees this development as a new opportunity for the EU to drive the development of critical health technologies as global health public goods and move away from a R&D system that is highly detrimental to access. If done well, the EU model can have a huge impact beyond Europe. In September 2021, before the new HERA policy package was published, GHA created a [social media campaign](#) to present three guiding principles for HERA:

- The only guarantee of HERA's independence, autonomy and integrity is public governance. Relying on independent and evidence driven foresight and science, HERA has to make decisions aligned with public interest and global health needs.
- All end products of HERA have to be affordable, available and accessible to people globally in case of health emergency. For this to happen, HERA must consider its results public goods and attach access conditionalities and open science principles to funding agreements.
- Finally, with its unique and responsible role in the EU health preparedness ecosystem, HERA must remain publicly accountable.

**HERA MUST ADOPT  
TRANSPARENCY  
STANDARDS AT ALL LEVELS  
TO ENSURE PUBLIC  
ACCOUNTABILITY**

#3PsFORHEALTH

**HERA'S END PRODUCTS  
MUST BE CONSIDERED A  
PUBLIC GOOD TO ENSURE  
ACCESSIBILITY AND  
AFFORDABILITY**

#3PsFORHEALTH

**PUBLIC GOVERNANCE OF  
HERA IS CRUCIAL TO  
ENSURE PUBLIC INTEREST-  
DRIVEN DECISIONS**

#3PsFORHEALTH

When the proposal was released, GHA and its partners [raised concerns](#) over the governance structure of the new authority that cut out the European Parliament and civil society, while offering a prominent seat to the pharmaceutical industry. In addition, the proposal was a continuation of existing medical countermeasures funding and procurement practices with well known weaknesses such as lack of transparency on contracts or no provisions for public health interest. In October 2021, GHA's Executive Director raised those points again during a High Level Panel on «Redefining the speed of innovation» at the Politico 2021 Health Care Summit.

## Fightings pandemics: equity as the backbone of global health governance

In November 2021, a Special Session of the World Health Assembly took place to find a consensus on the way forward for a new international instrument on pandemic preparedness and response. GHA published a [discussion paper](#) to call for equity to take a central role in the new pandemic accord. GHA recognizes the weaknesses of the International Health Regulations, the limits of other models of global cooperation, and recommends four guiding principles to ensure equity in the context of a new accord.

DISCUSSION PAPER

**FIGHTING PANDEMICS :  
EQUITY AS THE BACKBONE  
OF GLOBAL HEALTH  
GOVERNANCE**



The COVID-19 pandemic has shown the need for the international community to improve the way we approach global health, and how we manage health threats collectively. The pandemic forces us to rethink our model of cooperation, by putting the spotlight on our interdependence and the flaws of the international system. What is the purpose of global cooperation, if it consolidates inequalities between and among countries? Our challenge in coming years will be putting equitable access at the heart of the political debate in every phase of pandemic preparedness and response, and avoiding the further polarization of privileged and under-served countries. Health equity could be defined as follows: the right for all human beings to have access to efficient health systems, medical tools and scientific advancements regardless of their social, economic and geographical condition.

With the forthcoming World Health Assembly (WHA) Special Session taking place from November 29th to December 1st, 2021, there is an urgent need to prioritize equitable access and global cooperation.

This discussion paper explores the role of equity in the pandemic preparedness and response (PPR) political dialogue, through an analysis of current and future global health mechanisms, identifying shortcomings in the global health governance architecture. The WHA Special Session will discuss calls to reform the International Health Regulations (IHR) and establish a new International Treaty for Pandemics. If adopted, this 'treaty' would be the second legislative document under the binding normative authority held by the World Health Organization (WHO) Constitution, twenty years after the Framework Convention on Tobacco Control (FCTC). Therefore, negotiations constitute an important occasion to reshape global cooperation around health equity. This paper provides avenues for a new global deal.

1. Security over equity: the weaknesses of the IHR
2. Beyond the IHR: limits of the approaches to health equity
3. What models for an equitable future ?

# BEING MORE INCLUSIVE: BREAKING DOWN SILOS IN GLOBAL HEALTH

## The Generation Equality Forum: a key moment to mobilise more ressources for sexual and reproductive health and rights (SRHR)

In 2021, UN Women, Mexico and France co-organized the [Generation Equality Forum](#) (GEF) in Paris. This was a key opportunity for GHA to develop new advocacy expertise on SRHR and engage in joint civil society's mobilisation for an ambitious political and financial commitment from France on SRHR. GHA joined the [Collectif Générations Féministes](#) and coordinated various members of French civil society such as [Amref Health Africa](#), the [French Council for Africa](#), the student initiative «Les Afriques Vous parlent» as well as other organisations through regular meetings. GHA organised a roundtable «Meeting the challenge of strengthening access to sexual and reproductive health services» and a published a monthly newsletter “EssentiELLES” ([#1](#), [#2](#), [#3](#), [#4](#), [#5](#), [#6](#)).

### TABLE-RONDE. RENFORCER L'ACCÈS AUX SERVICES DE SANTÉ SEXUELLE ET REPRODUCTIVE : ET SI ON RELEVAIT LE DÉFI ?

#### INTRODUCTION

- DELPHINE O, Ambassadrice pour le Forum Génération Égalité
- INGRID-AXELLE KOFI, membre de l'initiative Les Afriques Vous Parlent

#### 1 | Favoriser l'accès des femmes et des filles aux services DSSR : ils sont passés à l'action

- ERIC FLEUTELOT, Directeur technique, pôle grandes pandémies, Département Santé, Expertise France
- IMMACULÉE MULAMBA AMISI, Experte en santé sexuelle et reproductive, Cordaid, République Démocratique du Congo
- REJANE ZIO, Responsable programmes santé de la mère et de l'enfant, Sidaction
- MYLÈNE LORIDAN, Chargée de programme et de partenariats, Amref Health Africa

#### 2 | Quelles solutions globales pour améliorer l'accès aux services de santé sexuelle et reproductive ?

- MATY DIA, Responsable de Partenariats au GFF CSO Hub
- STÉPHANIE SEYDOUX, Ambassadrice pour la santé mondiale, Ministère de l'Europe et des Affaires étrangères
- En attente de confirmation



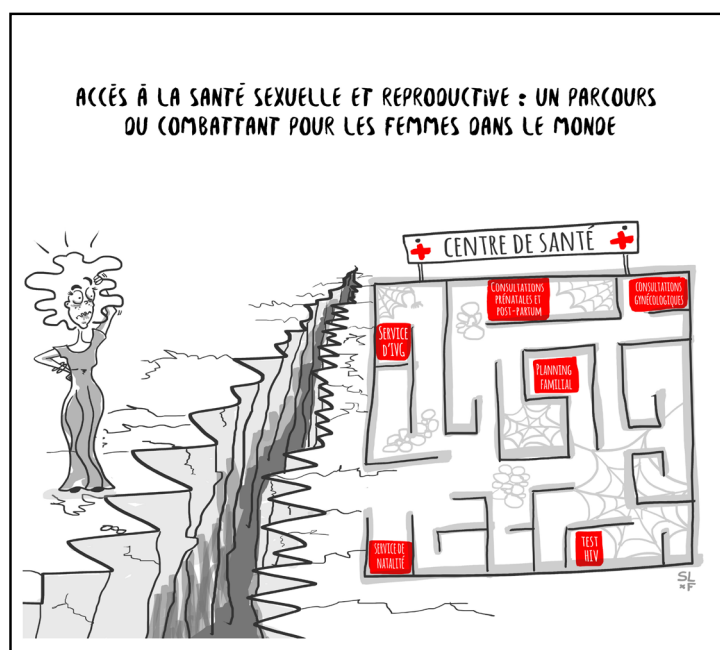
CONSEIL PRÉSIDENTIEL POUR L'AFRIQUE

EXPERTISE FRANCE



L'INITIATIVE

pour la santé mondiale



Alongside the feminist movement, GHA [called on France](#) to double its ODA for SRHR, by pledging at least €200M annually to these issues over the period 2021-2026. GHA was a key player in bringing different CSOs to work together and build a strong shared commitment, as featured in this [video](#) published ahead of the summit. At the Summit, [France committed](#) to increase its funding with an additional €100 million over 5 years to SRHR. GHA was able to quickly expand its health advocacy work and will continue working for effective access to SRHR services for women and girls.

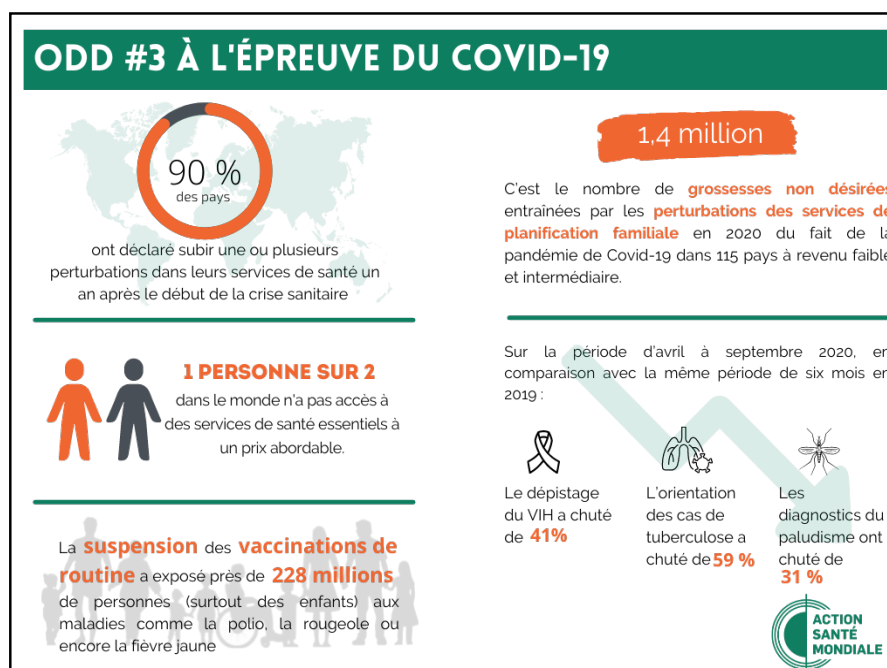
## Keeping malnutrition high on the EU development agenda

The December [Nutrition for Growth](#) (N4G) Summit was a key pledging moment to end malnutrition. It was a challenge to get further financial commitment from the EU because of a strained development budget. Conflicting priorities between member states meant that the thematic and global health budgets have been severely underfunded. COVID-19 made this significantly worse, and nutrition was not listed as a priority area of EU development policy.

GHA's worked through the Generation Nutrition (GN) coalition to mobilise the Commissioner for International Partnerships Jutta Urpilainen, by linking the fight against malnutrition to other EU priorities, issuing recommendations linked to the [EU Multiannual budget, malnutrition and Covid-19](#), [malnutrition and education](#) and issuing a [financial ask](#) for the Summit. The EU's and its Member States' commitment reached €4.3 billion. The Commissioner also spoke at the Summit, showing high-level political engagement.

## Redoubling efforts to achieve SDG #3

From July 6 to July 15, the High-Level Political Forum (HLPF) for Sustainable Development 2021 was an opportunity for GHA to [reflect](#) on the current state of progress towards achieving the third sustainable development goal (SDG3). While the world was already behind, Covid-19 has reversed hard-won gains made over the past decades. Covid-19 brought the world face to face with its unpreparedness to tackle health emergencies. If more progress had been made in favour of SDG3, the health crisis could have been better anticipated and Covid-19 caused fewer victims. Observing a decline in achieving SDG 3 eight years away from the deadline is concerning, making GHA call on the international community to redouble its efforts to achieve SDG3, particularly in least developed countries.



# IV. HOLDING DECISION-MAKERS ACCOUNTABLE FOR THEIR COMMITMENTS

GHA works to ensure comprehensive follow-up of governments' financial commitments to global health. GHA's work does not stop at commitments, rather it stops when commitments turn into concrete actions.

## Watchdogging French disbursement delays to the Global Fund

In 2019, France hosted the 6th replenishment of the [Global Fund to Fight HIV/AIDS, Tuberculosis and Malaria](#) with a new commitment of €1.296 billion to the Fund. In 2021, GHA analysed the provisions of the draft budget for 2022 and noted that it would not be possible for France to honour its pledge to the Global Fund. Together with several health NGOs (AIDES, the ONE Campaign, Oxfam France, Sidaction, Solidarité Sida and Solthis), GHA wrote to the French President warning about these disbursements' delays. By leading civil society's work, GHA has played a driving role and continues to engage in collective actions to ensure France's continued support to the Global Fund.

## Ensuring France's continued commitment to increasing access to medicines via Unitaïd

During the adoption of France's annual budget, GHA worked with MPs and the French government to raise awareness on the important work of UNITAID in tackling unequal access to COVID19, HIV and TB treatments. This led to France committing continued support to UNITAID in 2022, including within the therapeutic pillar of the ACT-Accelerator.

## Ensuring better transparency of the pharmaceutical market

Given the considerable increase in the price of new drugs, notably for cancer, hepatitis C and certain rare diseases, GHA has been advocating for better transparency of the pharmaceutical market. Together with several MPs, GHA worked to improve the traceability of public funding for research and development (R&D), in order to guarantee fairer prices for health products. In the framework of the 2021 French Social Security Financing Bill (PLFSS), our sustained advocacy led to the adoption of provisions requiring pharmaceutical companies to disclose the amount of R&D-related public subsidies they receive each year.

Throughout 2021, GHA remained in contact with the cabinet of the Minister of Health and followed the drafting of the [implementation decree](#). Although it was decided that pharmaceutical companies should only disclose the amount of direct subsidies, the Ministry

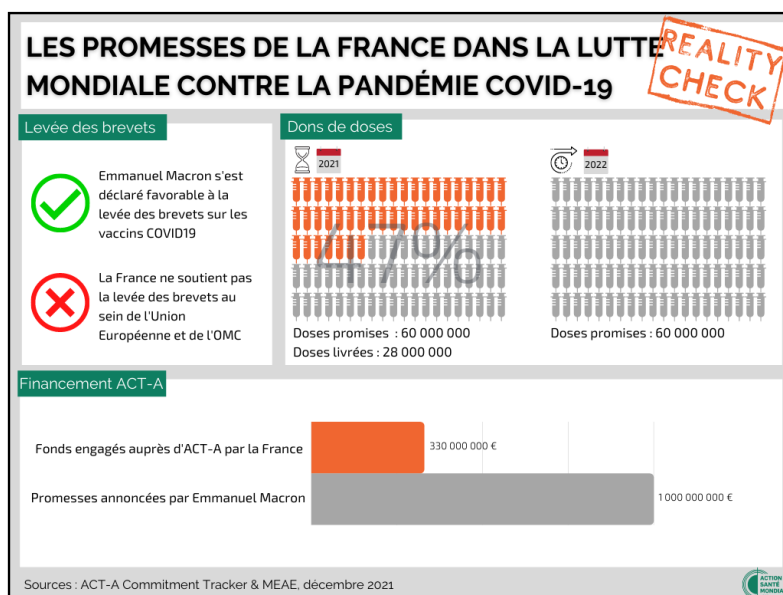
of Health is currently in discussion with the Ministry of Public Finances to potentially include the amount of indirect subsidies, such as tax credits. GHA will continue to monitor this policy when the first data will be published at the end of 2022.

## Lip Service Reality Check tool

GHA created a “Reality Check” tool to show the gap between decision makers' political commitments and their implementation. The tool was used several times during live debates on the French budget...



...as well as to monitor disbursements:



# V. STRENGTHENING PARTNERSHIP AND ADAPTING TO CHANGES

## Supporting our partners in Côte d'Ivoire

In line with its mission for equitable access to healthcare, GHA supports its partner [ASAPSU](#) in Côte d'Ivoire in their national and regional advocacy towards technical and financial partners. In 2021, GHA helped ASAPSU implement its priorities: the definition of a global advocacy strategy rather than a project oriented approach, setting up an advocacy team, developing an advocacy plan focusing on: mobilising resources for the Global Financing Facility, regularly evaluating the World Bank's human capital projects' implementation together with the Parliament and overseeing the implementation of Covid-19 emergency response by international agencies together with [CICODEV](#) in Senegal. GHA's support to ASAPSU is possible thanks to GHA's Francophone Africa consultant.

## GHA launches a new website

In 2021, we launched our new [GHA website](#) to better showcase our activities, advocacy priorities along a new visual identity. On our new website you'll find our position papers, publications, as well as a new OPINIONS blog.

Our [Opinions](#) blog attempts to give a better and broader understanding of what we're working on, by giving a voice to different actors working to improve global health. The [first series](#) came out in October 2021 and was about the role of International Financial Institutions (IFIs) in the global response to Covid-19. The objective was to reflect on the ways IFIs have mobilised important amounts of financial resources to support countries' responses to health and economic consequences of the Covid-19 pandemic.



The [second series](#) came out on December 1st, on the occasion of World AIDS day. The objective was to address the lessons (un)learned from the fight against HIV/AIDS in the midst of a new pandemic.

## Breaking the silos: committing to a One Health approach

When Covid-19 broke out in France in February 2020, GHA was already highlighting [environmental destruction as one of the main causes of pandemics](#) (especially zoonotic diseases originating in animals). As such, GHA started to join partnerships aiming at defragmenting the issue and became a member of the Strategic Partner Committee of the [One Sustainable Health Forum](#) in 2021. The OSH Forum gathers NGOs, academics and scientists, coordinating policy recommendations for European governments on the operationalisation of the One Health approach.

## Renewing GHA's strategy for 2022-2027

GHA's first-ever strategy (2017-2021) was developed during a retreat of Board and staff members in 2016. In June 2021, GHA started a Strategy Development Process with a discussion of our vision, mission, objectives and selected the key societal trends that will influence our future work in the coming five years. In October 2021, GHA started a participatory strategy development process with four Work Streams made of all our staff, and which looked at: New Trends (the link between health and climate, and digitalisation of healthcare); Evaluation of GHA's work; Mapping of other organisations' strategies ; Organisation of a staff and Board retreat. These Work Streams concluded their work in December 2021. Presentations of the outcome of their work were held during webinars for Board members and staff. A consultant was hired to help GHA with the design of the new strategy as well as GHA's retreat planned on 10-11 March 2022 in Lisbon.

Global Health Advocates is a **French NGO** which mission is to carry out **political advocacy** in France and with the EU institutions to **ensure policies and resources are effectively addressing health inequalities**.

GHA strategy revolves around three main pillars:

- Resource Mobilisation, to increase the quantity and the quality of public health financing ;
- Public Policies to ensure that governments and other stakeholders are adopting and implementing coherent policies which meet everyone's health needs, with a specific focus on poor and marginalized populations.
- Capacity Building to strengthen civil society in countries with higher health inequalities so that they're better equipped to influence their decision makers.

GHA **identifies the most neglected global health issues** which get the least financing and political attention, and work to fill those gaps through advocacy and capacity building of civil society in order to guarantee equitable access to healthcare.

