

Agenda for the IHP+ Civil Society Consultation
Mövenpick Hotel, 20 rue des Pré-Bois, 1215
Geneva, Switzerland

Friday, 23 May 2008

8:30	<p>Welcome – Julian Schweitzer, World Bank and Elaine Ireland, Action for Global Health Opening Remarks – Carissa Etienne, WHO (TBC) and Sue Perez, Treatment Action Group</p>
8:45	<p>Overview and Objectives</p> <ul style="list-style-type: none"> + Objective of the CS Forum: Phil Hay, World Bank + Focusing on Results: The IHP+ and Delivering the health MDGs: Bob Fryatt, WHO and Nicole Klingen, World Bank <p>Aim: Outline of the IHP+ process, including principles and strategies to improve delivery against the health MDGs, progress to date at the country level, and the value-added of Civil Society.</p>
9:15	<p>Civil Society: Concerns about and Critiques of the IHP+</p> <ul style="list-style-type: none"> + IHP+ Guiding Principles and Issues in Financing: Brook Baker, Health GAP USA - 7m + Critical Issues in Human Resources for Health (HRH): <i>Grace Mukasa, Health Workforce Alliance Initiative - 7m</i> + Budget Development and Surveillance at the Country Level: <i>Teresa Guthrie, Centre for Economic Governance and AIDS in Africa – 7m</i> + Q&A - 25m + Wrap Up – 7m <p>Aim: This session aims to highlight concerns that Civil Society in both the north and the south have in regard to the IHP+. It provides an opportunity for Civil Society to raise major concerns up front in order for them to be addressed by IHP+ partner agencies and IHP+ teams in signatory countries.</p> <p>Rapporteur: Nick Corby, ActionAid UK</p>
10:15	<p>Coffee/Tea Break</p>
10:30	<p>The Role of Civil Society in IHP+ and Other Models of Engagement</p> <ul style="list-style-type: none"> + Rationale, Roles and Responsibilities for CS representation to the IHP+: Elaine Ireland, Action for Global Health - 7m + Civil Society on the GFATM Board: Peter van Rooijen, International Civil Society Support Netherlands - 7m + Civil Society on the UNITAID Board: Carol Nyirenda, Treatment Advocacy and Literacy Campaign Zambia - 7m + Civil Society on the GAVI Board: Jane Schaller, International Pediatric Association - 7m + Q&A - 25m + Wrap Up – 7m <p>Aim: This session focuses on clarifying the rationale, roles and responsibilities for Civil Society representation in IHP+ structures. It provides an opportunity for Civil Society to share experiences on current involvement in existing global health activities, with a specific emphasis on financing mechanisms. Experiences from engagement with the Global Fund to Fight AIDS, TB and Malaria, UNITAID and the GAVI Alliance will be discussed in the context of developing the IHP+ Civil Society Consultative Group.</p> <p>Speakers presenting on the GFATM, UNITAID and GAVI will provide overviews on representation and responsibilities (i.e. how many members, makeup of north/south representation, responsibilities and term of Civil Society representatives, mandate on respective Boards, level of influence on Boards, level of financial and technical support provided to representatives, opinion on how effective Civil Society involvement has been, etc.) and any other experience that is valuable to share.</p> <p>Rapporteur: Anna Marriott, Oxfam Great Britain</p>
11:30	<p>IHP+ working groups: Mandate, workplan and progress to date</p> <ul style="list-style-type: none"> + Makeup, mandate, and progress: Nicole Klingen, World Bank- 8m + CS Involvement on National Plans and Strategies Working Group: Fareed Abdullah, International HIV/AIDS Alliance UK - 8m + National Plans, Validation, and the new GFATM NSA window: Mohga Kamal-Yanni, Oxfam Great Britain – 8m + Q&A - 15m + Wrap Up – 6m <p>Aim: This session focuses on clarifying the IHP+ working groups, their mandates, objectives, composition (how many members are included and who do they represent), organization (how often do they meet and discuss), and progress to date.</p>

	<p>Of all the IHP+ structures, the working groups remain the most are the most unclear/undefined with respect to defined deliverables and intended influence in the direction and agenda of the IHP+.</p> <p>Rapporteur: Beth Fredrick, International Women's Health Coalition USA</p>
12:15	Lunch
13:15	<p>Financing the IHP+: Intent, Commitment, Expectations and Concerns</p> <ul style="list-style-type: none"> + Meeting Abuja Commitments in Africa and Restrictive Fiscal and Monetary Policies: Rotimi Sankore, Africa Public Health 15% Now Campaign – 10m + A Proposal for Filling the Gaps, Donor Intentions and Commitments: Anton Kerr, International HIV/AIDS Alliance UK – 10m + Q&A – 20m + Wrap Up – 5m <p>Aim: This session focuses on how the IHP+ will be financed. In order to achieve the goal of the IHP+ to support countries to achieve the health MDGs, it will require more than improved coordination – it will require additional financing by donors and country governments themselves. To date, the intention of donors to fill financing gaps identified by countries has been unclear. The example of the EFA-FTI, which was similarly designed, demonstrates that without clear commitment by donors, initiatives will not succeed. This session also provides an opportunity to raise issues around the impact of IMF policies on countries' ability to increase budgets for the health sector.</p> <p>Rapporteur: Paul Kasonkomona, Treatment Advocacy and Literacy Campaign Zambia</p>
14:00	<p>Civil Society Engagement – Taking the Agenda Forward at the Country Level</p> <ul style="list-style-type: none"> + Cambodia: Var Chivom, Reproductive Health Association of Cambodia - 6m + Zambia: Simon Mphuka, Churches Health Association of Zambia - 6m + Kenya: Peter Kamau, Kenya AIDS NGOs Consortium – 6m + Burundi: Marc Ndayiragije, Alliance Burundaise contre le SIDA - 6m + Break out in working groups to discuss practical mechanisms of ensuring meaningful engagement of Civil Society at the country-level, particularly in country health sector teams – 30m <p>Aim: This session focuses on sharing experiences of Civil Society engagement with IHP+ teams at the country level and coming to practical suggestions for improving Civil Society engagement at the country level. Four countries have been selected to share their experiences – Cambodia, Kenya and Zambia, because these countries are farthest along in compact development, and Burundi because of active Civil Society engagement to date. The break out session should serve to build off country experiences and is an opportunity for CS IHP+ signatory countries to develop practical suggestions at improving meaningful engagement in their countries.</p> <p>Speakers will address:</p> <ul style="list-style-type: none"> ▪ how they became involved with their respective IHP+ country team ▪ what IHP+ means for his/her country ▪ have they and/or other CSOs engaged with the country health sector team worked to raise awareness about IHP+ among other CSOs and if so how ▪ which other CSOs are engaged with the team and are CSOs working together ▪ who are the other development partners on the team, how often does the team meet and is CS invited regularly to team meetings ▪ are CS views and feedback taken seriously and incorporated in discussions and documents ▪ has CS been consulted during the stocktaking exercise and involved in development of and finalizing the stocktaking report as well as in the development of the country compact ▪ has the team organized consultations with the broader Civil Society health community or otherwise taken an active role in engaging country level CSOs <p>Rapporteur: Joel Mayowa, Treatment Action Movement Nigeria</p>
15:00	Coffee/Tea Break
15:15	<p>Civil Society Engagement – Taking the Agenda Forward at the Country Level (CONTINUED)</p> <ul style="list-style-type: none"> + Report back from working groups – 30m + Q&A - 20m + Wrap Up – 15m <p>Rapporteur: Joel Mayowa, Treatment Action Movement Nigeria</p>
16:15	<p>Summary – Rapporteurs</p> <p>Next Steps – Sue Perez, Treatment Action Group, Nicole Klingen, World Bank, and Bob Fryatt, WHO (TBC)</p> <p>Closing Remarks – Julian Schweitzer, World Bank and Carissa Etienne, WHO (TBC)</p>
17:30	Closing Cocktail