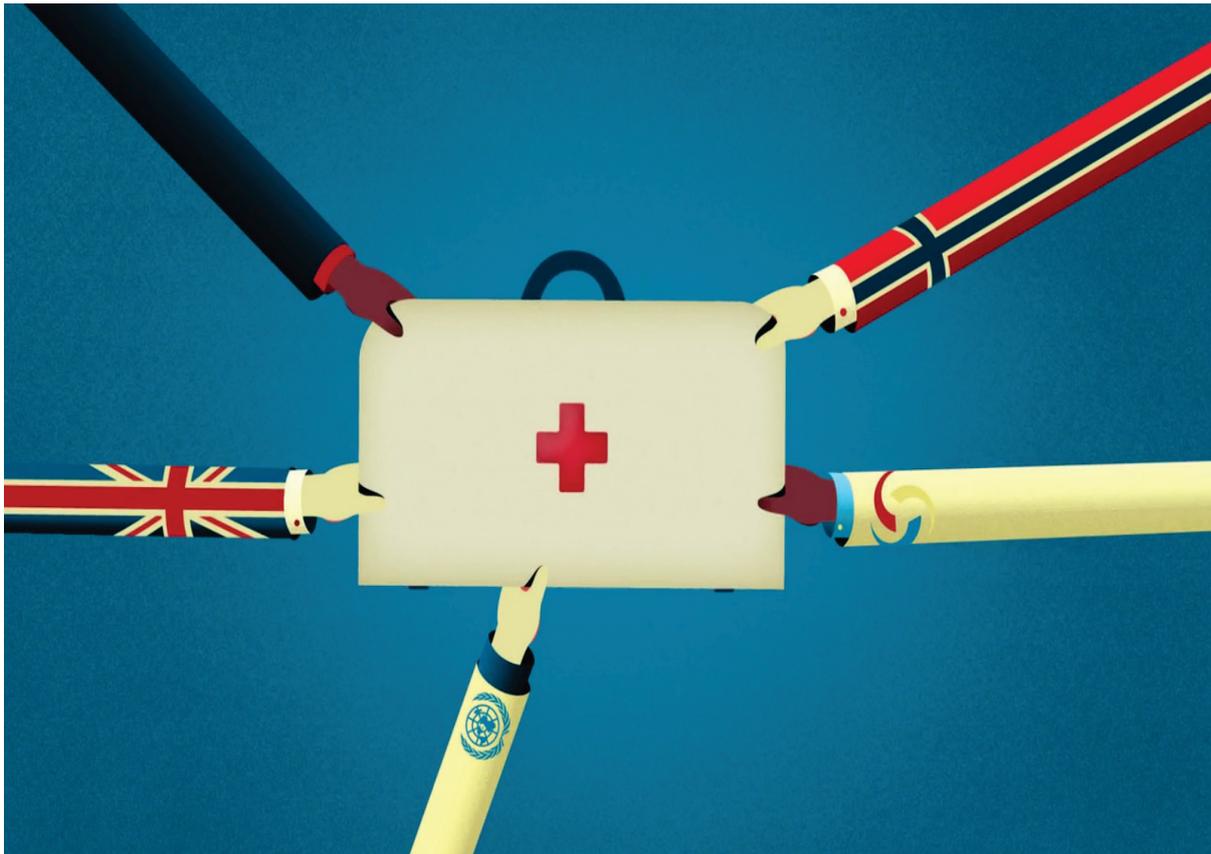


In the public interest? The role of international health cooperation in strengthening or weakening national health systems

Fourth People's Health Assembly, Dhaka, 15-19 November 2018

Workshop on 17 November 2018, 17.00 - 19.00 hrs, Room A 418



Background of the session: From Cape Town to Dhaka

Medicus Mundi International – Network Health for All (MMI) is a network of organizations working in the field of international health cooperation and global health, and one of the international civil society networks associated to the PHM.

Despite some achievements, the “aid paradigm” has mostly failed to drive sustainable progress for people who most in need of better lives. On the other hand, the actors of development cooperation itself and their legitimacy, methods and behaviour need a critical assessment.

Six years ago, the MMI Network contributed to the Third People's Health Assembly in Cape Town with its workshop „In the public interest? The role of NGOs in national health systems and global health policy“. The two sessions on “The challenge of integration” and “NGOs - the good, the bad and the evil?” found great interest – and showed us that there is a need to continue the conversation in the role of international actors in national health policies and systems beyond the initial focus on international NGOs.

Since then, MMI Network has been shaping and sharpening its role as a promoter, convener and facilitator of a critical reflection on the role of international cooperation (aid, development cooperation)

in strengthening or weakening people centred and people owned national health policies and systems, by setting up a working group, by publishing a discussion paper on Health Cooperation: Its relevance, legitimacy and effectiveness as a contribution to achieving universal access to health (October 2016) and by hosting a series of conferences and workshops dedicated to the topic.

The debate on aid or development cooperation currently takes place at many places and also at the current PHA, oscillating between the poles to **stop aid** (as it is mainly part of the problem and not contributing to solutions and as such cannot be “repaired”) or **what is needed to do it better** (as aid and the involvement of external actors in national health policies, systems and service delivery will remain a challenging reality in many countries, in particular in SS Africa).

Three weeks ago, MMI hosted, as part of a broader team led by the Secretariat of the International Health Partnership UHC 2030 (UHC2030) and also including the UHC2030 Civil Society Engagement Mechanism, a one-hour official side event to the Astana PHC Conference on the role of "aid" or international cooperation in the achievement of Primary Health Care. The session concluded with a broad agreement that the conversation needs to be continued – and with the related expectation and mandate to the organizers to provide modalities and platforms for this.

Not only in Astana, but overall, critical civil society voices from the global south were desperately missing in the conversation on aid – or at least it is difficult to hear them.

PHA4: Sister session on rights-based approach

The session is linked with a session organized by Viva Salud and partners on **“realization of right to health, right to food & children’s rights” (16 November)**. The organizers write in their outline:

“International cooperation, in all its forms, has tried with mixed results to improve the living conditions for people all over the world. It’s functioning and funding has changed throughout history along changes in power relations on the global and local field. It remains one of the most controversial sectors.

There is a growing consensus to take international cooperation outside the framework of aid. 'Aid' represents a relationship of dependency, it assumes an imbalance of power, knowledge and capacities. It's a one way street. But the alternative rights-based approach is far from a gained consensus, and has moved little beyond discourse.

The human rights-based approach, on the contrary, starts from the idea that people themselves are actors of social transformation. It starts from the dynamic between rights holders and duty bearers to provide a framework for social transformation, based on the world-changing claim made seventy years ago that every human being has an equal right to a standard set of conditions needed to live a life in dignity. As for today, this realisation remains a far-away dream for the majority of the world population.”

The MMI session: 3 steps

1. **What’s the problem** with development cooperation / aid in the health sector?
2. Is there a **common alternative perspective** on what should be the role of international cooperation for global solidarity in health?
3. **How to strengthen civil society representation** in global fora on aid / development cooperation and health?

Structure of the conversation in each step

1. Collecting input from the audience
2. Matching it with input by the organizers
3. Conclusions, perspectives

The organizers support the conversation with a few selected inputs:

- MMI Network: “What’s the problem with aid” (see below)
from: [MMI discussion paper \(2016\)](#) – explanations by Thomas Schwarz, if needed
- Perspective on how aid / development cooperation will be dealt with at UHC2030, based on a side event at the [Astana Conference](#) – short report by Thomas Schwarz
- MMI perspectives on what should be the role of international cooperation for global solidarity in health (from: [MMI discussion paper \(2016\)](#) – by Remco van de Pas

Expected outcome

Bringing the topic again into the People’s Health Assembly, and counting on the value of an open debate among various civil society actors, we expect to take along the following:

- to get a **better understanding** about how the role of “aid” in strengthening or weakening people centred and people owned national health policies and systems is assessed and debated by civil society representatives from various backgrounds;
- to **renew and strengthen contacts** among civil society experts and institutions interested to engage together in further defining a political position about what should be the role of international cooperation (including “aid” or not) for global solidarity in health;
- to **strategize** on how to strengthen the representation of a critical global civil society in global fora dealing with aid / development cooperation in the health sector (in particular: UHC2030 and its working groups).

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“What’s the problem with aid” (2016)

In: MMI discussion paper: “What’s wrong with development cooperation?”

1. Legitimacy, values, interests

- Neo-colonialist, neoliberal, destructive
- Distractive
- Donor driven agenda

2. Impact and outcomes

- Creating additional burdens and distorting national priorities
- Stabilizing bad governance and perpetuating dependency
- Distorting domestic economies
- Overall track record

3. Actors and behaviours

- Interventionism
- “Poverty porn”, paternalism and cynicism
- Institutional self-interest and insularity
- Aid (and) business
- legitimacy of international NGOs and civil society

4. Methods and practices

- Vertical, not integrated approach
- Lack of coordination
- One-way accountability
- Evidence base