

THE KAMPALA INITIATIVE CONCEPT NOTE

COOPERATION AND SOLIDARITY WITHIN AND BEYOND AID



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CONTACTS, ENQUIRIES

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- Thomas Schwarz, MMI Network, schwarz@medicusmundi.org

1. Introduction: The Kampala Initiative

The planning of a civil society workshop on “How to advance cooperation and solidarity within and beyond aid?” that will take place in Kampala, Uganda, in November 2019 was initiated by Medicus Mundi International (MMI) as part of their ongoing work in the field of providing spaces and instruments for in-depth reflection and dialogue among actors in international health cooperation.

In July 2019, MMI reached out to potential partners with a call to engage in the planning. Since then, the workshop and related processes have been coordinated by a planning group with representatives of different organizations that confirmed their interest and engagement as co-organizers of the workshop, namely the African Centre for Global Health and Social Transformation (ACHEST), the Center for Health Human Rights & Development (CEHURD), the Ecumenical Pharmaceutical Network (EPN), the Foundation for Integrated Rural Development (FIRD), Health Poverty Action, Medicus Mundi International Network (MMI), People’s Health Movement (PHM), and the Southern and Eastern Africa Trade Information and Negotiations Institute (SEATINI). Other institutions are welcome to join in. The workshop is financially supported by the Open Society Foundations (OSF).

The co-organizers view the forthcoming Kampala workshop as milestone and formal launch of a longer process - the “Kampala initiative” - of sharing, strategizing and hopefully joint action among civil society organizations critically engaged in or dealing with “health aid” and its actors and practices. When this is confirmed, the Kampala Initiative shall be jointly carried forward by the involved organizations in a continued democratic and transparent interaction, and allowing new partners to join in anytime.

- **Kampala initiative:** www.medicusmundi.org/kampalainitiative
- **Kampala workshop,** 14-15 November 2019: www.medicusmundi.org/kampala2019/
- **Series of webinars,** 29 October to 8 November 2019: www.medicusmundi.org/kampalawebinars

2. Advance cooperation and solidarity within and beyond aid

“Poverty is not a natural condition. It is a state of plunder. It is delusional to believe that charity and aid are meaningful solutions to this kind of problem.” (Jason Hickel)

We will use the term “health cooperation” or “aid” in the sense of international or transnational development cooperation for health: organizations which lead health programmes in low- and middle income countries (“developing countries”) or support public or private partner organizations technically and/or financially in order to improve health outcomes and access to health care.

In this definition, the range of “aid” actors goes from small “development projects” and NGOs to the big global health initiatives and financing facilities and the Official Development Assistance for Health (DAH) provided by bilateral agencies.

Fierce criticism of development cooperation is not at all new and well documented, and it covers the whole field: Its legitimacy, its intrinsic values and interests behind, its outcomes, its methods and practices, its actors and their behaviour. We do not quote the rich literature (but have added a short list of initial references, see Annex 1).

As a starting point, we refer to a list of some main points of analysis and criticism displayed in a workshop on “The role of international health cooperation in strengthening or weakening national health systems” at the 4th People’s Health Assembly in Dhaka, 2018.



All in all, aid is still a challenging reality, and this reality needs to be acknowledged and addressed. To do this, we propose to apply a double perspective:

- What's wrong with aid and its actors, structures, paradigms and policies, methods and processes, and how can these failures and shortcomings of aid be challenged and addressed?
- How to achieve real cooperation and solidarity within and beyond aid?

Initial references and resources: see Annex 1

Help us to expand the list of key documents by sharing your own key references, both academic and other.

3. Objectives and expected outcomes

The Kampala workshop and initiative are based on the assessment that, to assess and address the challenging reality of aid, there is a need for cultivating debate among critical and independent civil society, i.e., groups that are not funded by or beholden to powerful global health actors and donors. This is essential for civil society to play its role of critiquing health and development. Independent civil society is too often crowded out by well-funded, “favoured” NGOs that support the dominant narrative of their donors and/or governments. The Kampala initiative will create working space for a growing network of independent civil society to develop an alternative narrative, to challenge and transform health aid.

3.1. Kampala initiative

Overall objectives of the Kampala initiative:

- To establish a democratic civil society space and structure (alliance, community) of independent, critical-thinking activists and organizations across Southern and Northern boundaries.
- Within this space (alliance, community), the critique of aid leads to formulating, promoting, disseminating and seeking political traction for a new, broadly shared civil society narrative on cooperation and solidarity within and beyond aid.
- To identify a set of sub-topics/themes and related critical, concrete and catalytic cases (entry points for interventions within the aid paradigm or for advancing solidarity and cooperation beyond aid).

3.2. Kampala civil society workshop, November 2019

Expected outcomes of the Kampala workshop:

- A core group of organizations and people are inspired and committed to continue providing a civil society space and structure (or community) for addressing failures and shortcomings of “health aid” and its actors and practices, and to advance the agenda of solidarity and cooperation within and beyond aid.
- There is an agreed perspective of how to bring this civil society space (alliance, community) to a higher level, through an outline of next steps of the “Kampala Initiative” and other means.
- There are clear perspectives on how to follow-up on a set of particular themes/cases (e.g. task groups with work plans and deliverables).
- A “Kampala declaration on health cooperation and solidarity” and/or a workshop report are published and can be used as an initial reference document for the “Kampala initiative” and to extend the group of engaged organizations and people.
- Additional outcomes will be defined by the thematic working groups under the Kampala Initiative (these may include a normative statement, akin to the NGO Code of Conduct, etc.).

4. Thematic focus

4.1. Four selected sub-topics/themes, four thematic working groups

The Kampala workshop will be a working session, not a symposium or mini-conference. Much of its success and traction for continued engagement (in the sense of a continued “Kampala initiative” and alliance/community) will depend on the participants’ engagement and capacity for jointly working on set of critical, relevant themes and related concrete, urgent cases.

These themes and cases will have the potential of being entry points for critical interventions within the aid paradigm and setup (challenging and addressing some of its failures); or starting points for advancing our solidarity and cooperation beyond aid.

In this sense, the list (below) of four thematic working groups for the Kampala workshop is a starting point for a conversation and process, and not a final or authoritative “map” of the biggest challenges in the field of aid.

T1 Thematic group 1: Aid stabilizing or overcoming an unfair global trade regime?

Convenor: Jane Nalunga, SEATINI, jnalunga@seatiniuganda.org

The dominant postcolonial narrative of “rich donors aiding poor/fragile states” needs to be challenged, as it distracts attention (and action) from addressing the core of an unfair global trade/tax/tariff/finance regime in which the health inequity between and within countries is rooted. Critical civil society voices have called for “honest accounts” to address the incoherence of donor country policies and multilateral institutions that work against the normative values of aid in the sense of global solidarity.

T2 Thematic group 2: Aid and its actors distorting/supporting national health policies, systems, processes

Convenor: Moses Mulumba, CEHURD, mulumba@cehurd.org

Aid and powerful international actors (from Global Health Initiatives to bilateral agencies and NGOs) have the potential to support or distort national health policies, systems, political processes. The call for alignment of aid with national policies and systems (Paris Declaration) has never led to more than lip service, and the dominant “multi-stakeholder” approach in international health partnerships perhaps contributes to a growing influence of commercial actors and their interests and political agenda and to a further reduction of the space, role and power of both national governments and people, communities and civil society.

T3 Thematic group 3: Representation and voice(s) of civil society in global fora and processes

Convenor: Ravi Ram, PHM, phm.esafrica@phmovement.org

Civil society representation in global processes, actors and fora related to health cooperation is unequal and faces governance challenges. These need to be addressed by related institutions (in particular: Global Health Initiatives), but also by civil society: We need to sort things out among ourselves, addressing governance and power issues, moving civil society engagement beyond lip service and token representation, based on the opportunities provided by the fact that, for the legitimacy of these global processes, actors and fora, “they need us”. And if there is an agreement on the need to address these issues, how to do it concretely? How can broader civil society make its multiple voices heard, when the dominant narrative is defined by large NGOs - southern and northern - funded by institutions in the global North?

T4 Thematic group 4: From aid to “global solidarity beyond aid”

Convenor: Tess Woolfenden, Health Poverty Action, t.woolfenden@healthpovertyaction.org

Global solidarity can be easily called for, but what should it look like, and how can it be achieved? Some potential questions to explore could be: What does global solidarity mean to us? Is it important? What does it look like in practice? How could organisations in the Global South and North best work together? How can we achieve this? What are the barriers to achieving this? What examples are there to inspire us? Is language/framing an important part of this? What could a new narrative look like that encompasses our understanding of global solidarity?

4.2. Examples of concrete cases to be addressed by the working groups

Related to the four themes and thematic working groups, we are building a shortlist of concrete cases on which all the working groups and therefore all confirmed participants will work before, during and after the Kampala workshop. Again, these cases are not expected to cover the entire field of challenges related to aid. They are to be concrete, tangible, and inspirational (leading to concrete action), but also generalizable and linking back to the four themes, and perhaps urgent in that civil society actions can lead to positive, visible changes.

At the beginning of its work, every thematic working group will be requested to select “their” case or cases (from the shortlist below or develop its own case from its members’ experiences).

C1 Case 1: “Mutual benefits” in the migration of health personnel

The WHO Code of Practice on the international recruitment of health personnel adopted by the World Health Assembly in 2010 is currently being reviewed by the WHO. The issue of what needs to be done that both destination countries and countries of origin benefit from the migrating health personal has been at the core of the Code, but has always been a controversial and unresolved one. The challenging call for compensation or return of investment did not make it into the Code, but was replaced by a vague proposal on cooperation: “Destination countries are encouraged to collaborate with source countries to sustain and promote health human resource development and training as appropriate.” How to challenge this?

This case mainly refers to theme 1.

C2 Case 2: Can normative guidance help to “do aid better”?

If aid remains a reality for some of the poorest countries, and if there is an honest will to address and overcome some of its shortcomings and failures, there might be a need for renewed normative guidance, in the follow-up of the Paris Declaration/Accra agenda on aid effectiveness, the IHP+ “seven good behaviours” taken up by UHC2030, and the “NGO Code of Conduct for Health Systems Strengthening” proposed earlier by a group of international NGOs, but not having found real traction.

This case refers to themes 1, 2 and 3.

C3 Case 3: Watch the GAP! Global Action Plan on Healthy Lives and Well-Being

The implementation of a “Global Action Plan on Healthy Lives and Well-Being” (GAP) that was launched by 12 leading “donors” in September 2019 needs to critically watched, as the GAP has the potential to further strengthen the power of the big actors and distort national processes, structures and policies. The development of the GAP also shows the challenge of representation of civil society in global processes and the divergence of positions and interests within civil society.

This case refers to themes 2 and 3.

C4 Case 4: Addressing and using the power of language

Dominant narratives about aid and charity emanating from the global North (and in particular from many NGOs) sustain power imbalances and distract from action on the root causes of poverty, in particular damaging policies and practices by actors in the Global North. That includes the way the global economy is structured and issues such as trade, tax, climate change. Health Poverty Action recently produced some communication resources to provide a practical guide to address some of the pitfalls and to reclaim the narrative – and its power – for the issue of justice and solidarity.

This case mainly refers to theme 4.

C5 Case 5: Investing any hope in “Global Public Investment”?

“The language and theory of Aid is outdated”. But the world still needs something like it. So what is the way forward to create a fairer, safer, healthier, more prosperous planet?” In a side event to the UN High-Level Meeting on UHC, a group of organisations including the Joep Lange Institute and OSF presented a paper on “Global Public Investment” in view of launching a campaign for “more and better aid”. The paper promotes a “renewed/rethought/revamped understanding of the role and nature of ODA and other types of concessional international public finance” and “five paradigm shifts related to the ambition, function, scope, contributors and narrative of development assistance to help shape its future”. This may be an initiative worth to be critically assessed and followed closely.

This case refers to themes 1, 2 and 4

C6 Case 6: Creating space for civil society engagement in the Global Financing Facility (?)

As part of a broader civil society team, the Dutch NGO Wemos critically follows the developments and outcomes of the Global Financing Facility (GFF) for Reproductive, Maternal, Newborn, Child and Adolescent Health. In a [new interactive story](#) published on their website and in a series of country case studies including Kenya and Uganda, they report on efforts undertaken to create space for civil society engagement in the GFF, to influence and improve this global health initiative.

This case refers to themes 2 and 3

C7 Case 7: “Best Public value for public money?” Match-funded hospital infrastructure development

Wemos just [published the report on a case study](#) on the application of Dutch Official Development Assistance (ODA) policy instruments for business strengthening in the healthcare context. “We looked into the case of a multi-million ORIO (infrastructure development) project for 37 public hospitals in Tanzania, which is match funded by the governments of the Netherlands and Tanzania. The case study was of explorative nature, incorporating desk review and interviews with key informants of the Dutch government, the main companies involved, health professionals, CSOs and researchers in Tanzania.” Wemos writes: “Our findings are especially relevant now that the so-called ‘Maximizing Finance for Development’ (MFD) approach of the World Bank (WB) is rapidly unfolding.

This case refers to themes 1 and 2.

5. The Kampala Workshop, 15-16 November 2019

5.1. Format and programme

The Kampala workshop will provide a dedicated space for intensive debate and work. The workshop is neither a large, public event (and we would not have a budget for that) nor training session, but a gathering of a small group of 20-25 experts, practitioners and activists who have the potential of developing civil society critiques and solutions to the challenges of health aid and being the initial core of a team and process that advances sharing and joint action beyond the workshop. The format of the workshop is outlined below:

- 2 full days;
- No long introductions, but getting right into a working mode, based on the involvement of participants in the workshop preparation;
- Main work in four thematic working groups convened and facilitated by experienced process leaders and moderators (selected from participants);
- English only, no translation (solely due to logistical and budget constraints; involvement of Francophone, Lusophone and Hispanophone civil society is not to be omitted in a longer term initiative).

Tentative programme, as an illustration: See Annex 2.

Contact programme: Ravi Ram

5.2. Date, location, finances

The workshop will take place on Friday 15 November and Saturday 16 November 2019. This is immediately after the International Conference on Population and Development (ICPD+25) Summit in Nairobi and would allow ICPD+25 participants to join the workshop (however, without a full day of travel in-between).

ACHEST and PHM Uganda kindly agreed to provide some logistical support for the workshop. A logistics team reviewed options for the venue. We finally agreed to have the workshop at the **Fairway Hotel**, PLOT 1-2 Kafu Road, P.O. BOX 4595, Kampala, Uganda

The organization of the workshop is supported by the Open Society Foundations (OSF), as part of a grant to MMI for their work in this field in the years 2018-20. The OSF contribution allows the organizers to cover some organizational costs and a few travel grants, without being able to provide them with fancy “all included” packages. Participants and co-organizers are requested to cover, to the extent possible, some/most of their expenses, in cash or in kind/capacities, for the workshop and its preparation and to explore possibilities to provide a financial contribution to the workshop.

Contact logistics and finances: Thomas Schwarz

6. Series of public webinars, 29 October to 8 November 2019

The “Kampala Initiative” will be launched with a series of four public webinars, focusing on four cases that have the potential of being entry points for critical interventions within the aid paradigm and setup or starting points for advancing our solidarity and cooperation beyond aid. The conversation on these cases and on the related overall themes of the Kampala Initiative will be continued in a civil society workshop in Kampala in mid-November.

FOUR WEBINARS	FOUR CASES	FOUR THEMES
Tuesday 29 Oct 2019 16.00-17.30 EAT	Investing any hope in “Global Public Investment” A critical look at a recently launched campaign for “more and better aid”.	Is aid stabilizing an unfair global trade regime? Or how to avoid this? Aid and its actors distorting or supporting national health policies, systems, processes?
Friday 1 Nov 2019 16.00-17.30 EAT	Creating space for civil society engagement in the Global Financing Facility (?)	Representation and voice(s) of civil society in global fora and processes?
Tuesday 5 Nov 2019 16.00-17.30 EAT	In the follow-up of the Paris Declaration/Accra agenda on aid effectiveness: Can normative guidance help to “do aid better”?	How to achieve global solidarity within and beyond aid?
Friday 8 Nov 2019 16.00-17.30 EAT	Addressing and using the power of language: How to reclaim the aid narrative and its power – for the issue of justice and solidarity.	

- The webinars are public and can be attended individually.
- Announcement and registrations: www.medicusmundi.org/kampalawebinars

7. How to join the Kampala workshop and initiative

6.1 Participants in the Kampala workshop (call for Expressions of Interest closed)

We looked out for a team of 20-25 civil society colleagues that together provide the mix of institutional support, personal engagement and skills/capacities needed to achieve the expected outcomes of the workshop (see above, section 4).

The selection of participants was done by a sub-committee of the planning group, based on the following criteria:

- gender balance: at least 40-50% of each gender (female and male);
- geographic mix (participants from East Africa and from the “global North”);
- mix of institutional backgrounds: civil society organizations and networks working in the field of aid or critical watching the aid sector, grassroots civil society organizations “affected” by aid, independent academics, health activists, etc.;
- mix of expertise and experience related to the key issues and particular cases to be dealt with in the workshop;
- early involvement in the planning group.

When registering for the workshop, participants committed themselves to actively engage in the preparation as outlined above, including their participation as a presenter or panellist in at least one of the public webinars taking place in October/November, in the Kampala workshop itself, and, if all works well, in a follow-up process extending into 2020 (or beyond) as determined during the Kampala workshop.

For financial reasons, we needed to rely on a majority of participants that do not need to be financially supported to make it to Kampala in order to attend the workshop. “Northern” participants will cover their own travel costs, and we will have a considerable number of civil society colleagues from Kampala/Uganda and Eastern Africa among the “Southern” workshop participants. In this sense (only), the workshop has a regional bias, and during the workshop participants will define ways of compensating for that initial regional focus. The workshop themes and the Kampala Initiative are intended to be global in nature.

We expect all participants to attend the workshop for two full days, and we request all participants including Kampala residents to spend at least the night of 15-16 November at the conference venue (hotel in/near Kampala), to allow continued work and networking in the evening of the first day.

6.3 ...and those not able to attend the Kampala workshop?

Those who cannot attend the Kampala workshop or do not fulfil the related conditions (e.g. cannot actively engage in the preparatory process), but are interested in the issue of how to advance cooperation and solidarity within and beyond aid and in the related “Kampala initiative” are invited to flag their interest by sending a short message to schwarz@medicusmundi.org. You will be invited to the pre-workshop webinars and will hear from us soon after the workshop.

REFERENCES AND RESOURCES

Please send us any references on the challenges of aid and development cooperation to be published here. These references will be rather used in the preparation of the workshop, but not at the workshop itself.

General, introductions

- Health Cooperation: Its relevance, legitimacy and effectiveness as a contribution to achieving universal access to health. MMI discussion paper (2016)
<https://www.medicusmundi.org/contributions/reports/2016/health-cooperation-its-relevance-legitimacy-and-effectiveness-as-a-contribution-to-achieving-universal-access-to-health.-mmi-discussion-paper>
(URL will change in October)
- The role of international health cooperation in strengthening or weakening national health policies and systems. MMI workshop at the 4th People's Health Assembly, November 2018
<https://www.medicusmundi.org/contributions/events/2018/in-the-public-interest#mmi-workshop-at-pha4>
(URL will change in October)
- Thomas Gebauer and Felix Speidel, Solidarity begins beyond aid. Medico international, 2015.
<https://www.medico.de/en/solidarity-begins-beyond-aid-15502/>
- The DDD Manifesto: Doing Development Differently. Workshop statement, 2014
<https://buildingstatecapability.com/the-ddd-manifesto/>
- External Funding and Health Development. PHM IPHU Resource Library
<https://iphu.org/en/dah>
- Firoze Manji, The missionary position: NGOs and development in Africa
http://www.oxfid.org/uploads/3/3/5/4/3354679/missionary_position.pdf
- Moving from Humanitarian to Development aid: East African Symposium on aid effectiveness and Health Systems Development, 15th – 16th August 2018, Kampala, Uganda
<http://musph.ac.ug/index.php/accordion-1/282-moving-from-humanitarian-to-development-aid-east-african-symposium-on-aid-effectiveness-and-health-systems-development>

Thematic working group 1: Aid stabilizing or overcoming an unfair global trade regime?

- Honest Accounts? The true story of Africa's billion dollar losses. Health Poverty Action 2014
<https://www.healthpovertyaction.org/wp-content/uploads/2018/12/Honest-Accounts-2017-1.pdf>
- Jason Hickel, The death of international development. Al Jazeera, 2014
<http://www.aljazeera.com/indepth/opinion/2014/11/death-international-development-2014111991426652285.html>
- The Saving Idea is yet to be Conceived. Thomas Gebauer in: Rethinking the Power of Aid. Medico International, 2003
https://www.medico.de/fileadmin/_migrated_/document_media/1/rethinking-the-power-of-aid.pdf&sa=U&ved=0ahUKewijzsb16670AhWBfxoKHbM8BLUQFggEMAA&client=internal-uds-cse&usq=AFQjCNGrduQ2cH8d59qyixcVkgycDxOASQ
- Gorik Ooms and Rachel Hammonds: Financing Global Health Through a Global Fund for Health? Chatham House 2014
<https://www.chathamhouse.org/publications/papers/view/197444>

Thematic working group 2: Aid and its actors distorting or supporting national health policies, systems, processes?

- The making of a “Global Action Plan for healthy lives and well-being for all”: We are still not amused... Blog by Thomas Schwarz, 2019
<http://g2h2.org/posts/still-not-amused/>
- OECD DAC: Paris Declaration and Accra Agenda for Action
<http://www.oecd.org/dac/effectiveness/parisdeclarationandaccraagendaforaction.htm>
- CSO partnership for development effectiveness
<https://www.csopartnership.org/>
- The Global Fund Advocates Network (GFAN): The future of aid
<http://www.globalfundadvocatesnetwork.org/campaign/the-future-of-oda/>

Thematic working group 3: Representation and voice(s) of civil society in global fora and processes

- Katerini T. Storeng and Antoine de Bengy Puyvallée: Civil society participation in global public private partnerships for health. In: Health Policy and Planning, 2018
<https://academic.oup.com/heapol/article/33/8/928/5085423>
- Arundhati Roy, The NGO-ization of resistance. Massalijn 2014
<http://massalijn.nl/new/the-ngo-ization-of-resistance/>

Thematic working group 4: From aid to “global solidarity beyond aid”

- A practical guide for communicating global justice and solidarity: An alternative to the language of development, aid and charity. Health Poverty Action Toolkit, 2019
<https://www.healthpovertyaction.org/change-is-happening/campaign-issues/the-power-of-language/resources-for-communicating-global-justice-and-solidarity/>
- Building a movement for health - a tool for (health) activists. PHM/Viva Salud, online toolkit
<http://twaha.be/phm-manual>

Initial references related to the six specific cases proposed to be dealt with by the four thematic working groups are available in the introductions (section 4.2 of the concept note). Further references will be provided by/to the working group members at a later stage, for the cases selected by the group.

TENTATIVE WORKSHOP PROGRAMME

S/N	PROGRAMME	TIME	LEAD
Day 1 of the workshop: Friday, 15 November 2019			
	Participants are expected to arrive in time (or better: stay at the venue overnight) and get settled in the plenary room so that the workshop can start without any delay.	Before 09:00	All
1.	Welcome	09:00-09:10	Facilitators
2.	Participants' introduce themselves: Background, workshop expectations	09:10-09:30	All
3.	Initial review by participants: Objectives and expected outcomes of the workshop; introduce Kampala Initiative	09:30-10:00	Facilitators All
4.	Introductory presentations by four thematic working groups (WG), looking back at preparatory work and webinars and ahead to the workshop: Members; case selected; where are we with it; what do we want to achieve in Kampala; further perspectives (10 min presentations, 10 min discussions) - Aid, trade relations and financial flows - Dominating influence of powerful international actors	10:00-10:40	WG convenors or rapporteurs
Health break, and tea/coffee/snacks		10:40-11:00	
5.	Introductory presentations by four thematic working groups (continued) - Civil society representation in global fora and processes - Explore the concept of "global solidarity"	11:00-11:40	WG convenors or rapporteurs
6.	Preparing the group work - Practical issues/challenges/needs of WG - Review and confirmation of programme, schedule	11:40-12:00	Facilitators All
7.	Thematic working groups: First session	12:00-13:00	WG convenors
Group photo & lunch		13:00-14:00	All
8	Thematic working groups: Second session	14:00-17:00	WG convenors
Tea/coffee/snacks (within the session; no formal break)		by WG	All
9.	Plenary: WG briefing on state of work (15 min each)	17:00-18:00	WG rapporteurs
	Evening: group dinner or other programme	TBD	TBD

S/N	PROGRAMME	TIME	LEAD
Day 2 of the Kampala workshop: Saturday, 16 November 2019			
10.	Recap of Day 1 - Refinement to workshop aims - Suggestions on agreed outputs	08:00-08:30	
11.	Thematic working groups: Third session	08:30-10:00	
12.	Rapid reviews across groups – options include... - Round robin discussions - Fishbowl discussion - <i>Others ...</i> NOT PRESENTATIONS Possible re-mixing of group members	10:00-10:45	
<i>Tea/coffee/snacks break</i>		10:45-11:00	All
13.	Rapid reviews (continued)	11:00-11:30	
14.	Thematic working groups: Fourth session / wrap up	11:30-13:00	
<i>Lunch</i>		13:00-14:00	All
15.	Plenary review of draft outputs from working groups	14:00-15:30	
<i>Tea/coffee/snacks</i>		15:30-16:00	All
16.	Plenary discussion on how the workshop and its outputs should be presented more broadly - Further work on outputs - Incorporating ideas from other regions - “Kampala Initiative” - what does this mean - Who else may be important to join this work?	16:00-17:00	All
17.	Workshop evaluation and feedback	17:00-17:15	All
18.	AOB and next steps	17:00-17:45	
19.	Closing and vote of thanks	17:45-18:00	
Day 3: Review and planning meeting (small team) Sunday, 17 November 2019			
20.	Review and packaging of output documents Framing the Kampala Initiative and workshop declaration for public dissemination	8:00-11:30	Small group
21.	Workshop review, evaluation notes, next steps	11:45-13:00	Small group
	Departures		