Letters from the Director and the Leadership Group Chair

Dear ACTION Partners,

Please accept my warmest congratulations on the publication of our first annual report. While I am pleased at this milestone, I am far more heartened by the activities recorded here and the difference that ACTION is making in the world, advancing work on tuberculosis and in child health and nutrition. I sometimes think we fail to pause and take notice of the full impact of our work, but seeing it here in words and pictures is a powerful reminder of the progress that is being made through our collective efforts. As we look back at our work in 2016, we can be proud of what we have accomplished so far. However, we know there is much more to be done to secure a healthier future for more of the world’s children.

This partnership came together on the recognition that good health is fundamental to productive lives and ending the scourge of poverty, yet millions of people every year lose their productivity, quality of life, or even their lives to preventable and treatable diseases and conditions such as undernutrition. The effects are quite often devastating for families and the repercussion felt throughout communities and our nations. Each of us as advocates, each of our organizations, and each of our governments has a role to play in changing the status quo and creating the world we want – one where every person has access to health.

Confident in the strength of our individual and collective voices, we must press on with our mission to influence policy and mobilize resources to fight diseases of poverty and achieve equitable access to health.

I am proud of ACTION’s work so far, and I am excited by what we are about to do in the years ahead.

In solidarity,
Allan Ragi
Chair, ACTION Leadership Group
(2017-2018)
Executive Director, KANCO

Dear Friends,

ACTION is pleased to bring you our first ever annual report, in which we highlight the accomplishments and challenges of our partnership in the past year and look ahead to doing more and better in the years to come.

This report comes at a moment when ACTION partners are reflecting on our history and embarking on the next phase of powerful advocacy under a new five-year strategic plan for 2017-2021. In these pages, we celebrate what has gone well, and resolve to improve on those areas where we can and must do more. We have compiled a report that shows both the depth of policy experience our partners and network of advocates bring to this work, and the breadth of our influence globally.

The stories we have compiled from 2016 help us to reflect on the passion and dedication of our partnership and the dogged dedication that goes into every small task that we know will make a difference in the lives of all of our neighbors.

It would be easy to get lost in the day-to-day mechanics of advocacy all over the world and see our work as disconnected and tedious – to conclude that a single letter to a newspaper will not make a difference, or that meaningful relationships with members of parliaments are too time-consuming to cultivate in the face of fiercely contested elections. Though our partners undertake these tasks every day, they are far from routine – these efforts are connected, creative, and their cumulative impact is huge.

I am proud of the work of our partners in 2016 that has helped secure over $9.8 billion of the nearly $13 billion in new pledges to the Global Fund to Fight AIDS, TB and Malaria; maintain and strengthen support for Gavi, the Vaccine Alliance and the Global Polio Eradication Initiative; shape the Global Financing Facility to promote equity, impact, and civil society engagement in reproductive, maternal, newborn, child, and adolescent health and nutrition; and improve accountability for progress in the long-neglected fight against undernutrition.

The progress against diseases of poverty globally has been impressive over the last decade. As our experience in 2016 shows, however, more work remains to be done if we are to achieve the global goals for universal health coverage. ACTION partners, and the advocates we work with around the world, remain committed to an ambitious agenda for the funding and policy change that will get us closer to those goals.

Sincerely,
Hannah Bowen
Director, ACTION Secretariat
About ACTION Global Health Advocacy Partnership

ACTION is a partnership of locally rooted organizations around the world that advocates for life-saving care for millions of people who are threatened by preventable diseases. ACTION operates on the premise that all countries can end diseases of poverty and improve health if they step up funding and create more effective policies.

Supported by a Washington-based secretariat, twelve independent ACTION partners, described below, work together to increase investments and build political support for global health. Tuberculosis (TB), the world’s leading infectious disease; vaccines, child health and nutrition are our core issues. Over the last six years alone, ACTION partners have helped bring more than $15 billion to the Global Fund to Fight AIDS, TB and Malaria (Global Fund); $5 billion to Gavi, the Vaccine Alliance (Gavi), to support poor countries in immunizing half a billion children; and $3 billion for the long-neglected fight against undernutrition. In 2016, ACTION partners helped secure over $9.8 billion of the nearly $13 billion in new pledges to the Global Fund.

ACTION believes in the multiplier effect of individual and collective action to solve some of the world’s most intractable problems. Engaging parliamentarians and other policymakers throughout the partnership is a mainstay of our advocacy efforts. This was particularly robust in 2016 with delegations to Indonesia, Cambodia, India, and Madagascar by various partners. These relationships allow partners to adapt to changing political contexts and major shake-ups in government. Through our partnership and a network of advocates, we push the boundaries and we make progress – one small victory at a time as you will see in the reports that follow.

Æquitas Consulting Pvt. Ltd., India, is a mission oriented organization and platform for professionals who work together across disciplines to see health as an outcome of public policies, and of their own work.

Community Initiative for Tuberculosis, HIV/AIDS and Malaria plus Related Diseases (CITAMplus) is a Zambian NGO established in 2005 to help disseminate information on TB/HIV and AIDS co-infection.

Global Health Advocates, France, is a health advocacy organization dedicated to fighting against diseases stemming from poverty and inequality. GHA’s mission is to advocate for policy change at the highest political level and to mobilize resources to tackle major health threats, build sustainable health systems, and enhance health equity. GHA is based in Paris and Brussels.

Global Health Advocates, India, functions as a network of professionals from the private sector and NGO community focusing its activities in the areas of global advocacy and partnership building.

KANCO is a membership organization established in the early 1990s in Kenya with operations in the eastern African region. Its membership comprises of non-governmental organizations, community based organizations, faith based organizations, private sector actors, and research and learning institutions that have a focus on health advocacy and implementing health programs.

Princess of Africa Foundation was established in 2006 to complement the work of Yvonne Chaka Chaka as UNICEF and Roll Back Malaria Goodwill ambassador in Africa. It is a non-profit organization registered in South Africa under Section 21 of the Companies Act with main objectives being to carry out community and social charity works.
RESULTS Australia is a nonprofit grassroots advocacy organization, committed to creating the political will to end the worst aspects of poverty through education, public events, media coverage, educational trips, and research.

RESULTS Canada is a nonprofit grassroots advocacy organization, committed to creating the political will to end the worst aspects of poverty through education, public events, media coverage, educational trips, and research.

RESULTS Educational Fund creates long-term solutions to poverty by supporting programs that address its root causes — lack of access to medical care, education, or opportunity to move up the economic ladder. RESULTS is a movement of passionate, committed everyday people. Together they use their voices to influence political decisions that will bring an end to poverty.

RESULTS Japan is a nonprofit grassroots advocacy organization, committed to creating the political will to end the worst aspects of poverty through education, public events, media coverage, educational trips, and research.

RESULTS UK works to end poverty by enabling people to exercise their own personal and political power for change. RESULTS is a movement of passionate, committed everyday people. Together they use their voices to influence political decisions that will bring an end to poverty.

WACI Health is an African regional advocacy organization committed to creating political will to end life-threatening epidemics and improve health for all in Africa.

WACI Health

In 2016, ACTION also worked with consultant Francesca Belli to advance Global Fund, nutrition, and health advocacy in Italy; with RESULTS Korea, whose volunteers and civil society allies helped to secure a pledge to the Global Fund; and with a network of hundreds of volunteer advocates, trained Media Champions, patient advocates, and civil society coalitions.
CITAMplus is cementing its place in Zambia as an advocacy organization dedicated to the welfare of those suffering from the major infectious disease epidemics, finding cures and securing a healthy future for the next generation. In a country that is striving for peace and security, but shackled by issues of poverty and underdevelopment, the role of organizations like CITAMplus is invaluable. This was evident in the impact of our activities last year.

CITAMplus works to influence policy and mobilize resources to fight diseases of poverty and improve equitable access to health services. CITAMplus coordinates with civil society organizations working around TB and TB-HIV co-infection in Zambia, and is the current secretariat of the Africa Coalition on TB.

CAMPAIGNING FOR THE GLOBAL FUND

Among our major activities in 2016, we held a year-long campaign for the Global Fund Replenishment effort, including working with grassroots citizen advocates and our REAL Change fellows (selected individuals between ages 18-30 who receive training in how to work with the media, their communities and policymakers to create change) to write letters to the ministries of health and finance, asking that the Zambian government make a pledge. It was rewarding to note that the government made its first-ever pledge to the Global Fund: USD $3 million over the 2017-2019 period.

Though CITAMplus’ success influencing the Zambian government to show solidarity through a pledge was important, the work did not end there. We were also able to influence much larger pledges by connecting the voices of community advocates with parliamentary champions in key donor countries. Having identified through the ACTION network’s donor advocacy strategy that key donors including the Netherlands, Sweden, and Denmark might reduce their commitments to the Global Fund, CITAMplus organized a march featuring more than 500 civil society organizations, to coincide with the 134th Inter Parliamentary Union (IPU) Conference, held in Zambia March 21. The conference brought together MPs from all over the world. CITAMplus took advantage of the moment to call attention to excluded populations—such as persons with disabilities, people living with HIV, those affected by TB and malaria, sex workers, youth and women—and, supported by the media, to press local and world leaders to make pledges to the Global Fund. A petition was signed by over 400 people living with HIV and affected by TB and malaria. Executive Director Carol Nawina Kachenga, together with Princess of Africa Foundation founder Yvonne Chaka Chaka, also held meetings alongside the IPU with delegations from Netherlands, Sweden and Denmark. A video documentary was produced and is being used by the Global Fund Advocates Network of which ACTION partners are a driving force.

BEighter MEDIA RELATIONS

Media relations also improved dramatically, evident by greater TV, radio, newspaper and online news coverage of health issues, and a greater presence on Facebook and Twitter to engage with grassroots advocates, policymakers, and the media. Zambia, with a population of about 16 million people, has over 200 media organizations. Media sources that consistently carried our work include:

Health Minister Dr. Chitalu Chilufya (2nd right) listens to REAL Change Fellow Namoya Nanchengwa on a tour of the CITAMplus Exhibition Stand during World AIDS Day 2016 Commemorations, December 1, 2016.
• TV stations—Zambia National Broadcasting Corporation (ZNBC), Muvi, ABN, Prime TV and Revelation TV;
• Radio stations—Zambezi FM, Hot FM, Roots FM, Phoenix, Christian Voice, COMET and Mpangwe FM; and
• Print and online sources—Times of Zambia, Daily Nation, New Age Newspapers, Daily Mail, Lusaka Times, Mwebantu and Zambian Observer.

Featured items included our request to the Zambian government to make a pledge to the Global Fund and our criticism of the government’s procurement of anti-retroviral drugs with a short shelf life, which resulted in problems with expired drugs.

CITAMplus was most often represented in the media by executive director Kachenga and policy and advocacy Officer Nathan Nhlane. Namoya Nanchengwa, a REAL Change fellow, was featured on December 1 on Revelation TV, talking about letters written by youth advocate to the government asking it to support the Global Fund.

LOOKING AHEAD

Plans for 2017 include working with ACTION partners and Zambian members of the Global TB Caucus to launch the TB National Caucus to enhance, make more effective and better coordinate the fight against the disease; persevering with our demands to the Zambian government to build and adequately staff and stock 650 health posts that have been promised but not fully delivered; and continuing an aggressive media engagement to highlight TB, HIV/AIDS, malaria, nutrition, child health and immunization.
ENSURING POLICIES AND RESOURCES ADDRESS HEALTH INEQUALITIES

Despite a difficult economic context, GHA France succeeded in securing strong political and financial commitments for official development assistance (ODA) for health at both French and European Union (EU) levels. GHA France’s mission is political advocacy to ensure that policies and resources effectively address health inequalities. Building coalitions and working in partnerships is part of the DNA of GHA France; for instance, it has created and is facilitating the Collectif Santé Mondiale (with nine French civil society organization members), which is the only coalition in France that deals specifically with health financing.

SECURING RENEWED SUPPORT FOR THE GLOBAL FUND

Working with other civil society organizations, GHA France secured a pledge of EUR 475 million from the EC to the Global Fund for 2017–2019, a substantial increase over the previous period (2014–2016) when EC contributed EUR 370 million.

In June, President Francois Hollande announced a renewed EUR 1.08 billion pledge to the Global Fund for 2017–2019. This was possible in part because advocates and policymakers had championed a broader campaign on ODA for health, rather than pursuing a Global Fund pledge in isolation. The strategy paid off, as French ODA also increased for the first time in five years: the French Parliament allocated an additional EUR 364 million to ODA, an 11 percent increase over 2016 levels.

INCREASED POLITICAL SUPPORT FROM PARLIAMENTARIANS

GHA France’s commitment to increasing attention to global health spurred our participation in the launch of both Eurasian Parliamentary Group on TB and Francophone TB Caucuses—important first steps in creating two regional networks of parliamentarians committed to ending TB. The Eurasian Caucus currently consists of MPs from more than 20 countries. The Francophone TB Caucus was created thanks to a cooperation agreement between the Francophone Parliamentary Assembly (FPA) and the Global TB Caucus during the FPA 42nd general assembly in Madagascar and has paved the way to the creation of several national TB Caucuses in francophone countries. GHA France is part of the Global TB Caucus secretariat along with RESULTS UK and RESULTS Australia, ACTION partners and head of the Francophone Secretariat.

In July, GHA France organized an MP delegation to Madagascar on TB and HIV. Five French MPs participated from different political parties. When they were back from this delegation, the MPs engaged in media action during the debate of France’s financial bill, called for an increase of ODA budgets, and supported the creation of a Francophone parliamentary network on TB.

GHA France organized roundtables during both Joint Parliamentary Assemblies between the EU and the African, Caribbean and Pacific countries, on the key role of parliamentarians in the fight against malnutrition. Both events were well-attended and the MPs showed
solid commitment to advancing nutrition policies in their respective constituencies. We will build on these commitments, continuing to mobilize parliamentarians and facilitating networks of MPs willing to do their part to promote nutrition.

**PRIORITIZING NUTRITION POLICY DEVELOPMENT**

GHA France supported the adoption of a resolution by the World Health Assembly calling for a strong decade of action on nutrition (2016–2025), including the implementation of national targets and increased financing.

GHA France is coordinating the Generation Nutrition (GN) campaign at the EU level, which is a coalition of civil society organizations asking for an additional commitment of EUR 1 billion for nutrition-specific interventions for the period 2016–2020, the formulation of a wasting target in EU policies, and the strengthening of global accountability mechanisms for nutrition. Also as part of the GN campaign in France, GHA France worked to more effectively include nutrition in the health strategy of the French development agency.

**WORKING WITH CIVIL SOCIETY ADVOCATES**

GHA France is a technical member of OAFRESS, a Francophone African organization for strengthening health systems and immunization. GHA France facilitated a workshop on domestic resource mobilization in Côte d’Ivoire with representatives from OAFRESS countries, to develop deeper knowledge of budget advocacy and develop advocacy strategies to increase financing for health and immunization. GHA France worked with the OAFRESS secretariat to ensure participation of OAFRESS representatives in high-level events, such as the Ministerial Conference on Immunization in Africa in Addis Ababa, Ethiopia, in February and the Francophone Heads of State Summit in Antananarivo, Madagascar, in November 2016.

**LOOKING AHEAD**

GHA France will continue to carry forward its mission in a changing political context. A key electoral year for France, when outcomes will have a major impact on the European Union, 2017 also brings many opportunities to achieve our goals. The ambitious objectives of GHA France include taking advantage of high-level political events to spread our message and secure bold political commitments for global health.

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1Wasting, or low weight for height, is a strong predictor of mortality among children under five. It is usually the result of acute significant food shortage and/or disease. There are 24 developing countries with wasting rates of 10 percent or more, indicating a serious problem urgently requiring a response. From: https://www.unicef.org/progressforchildren/2007n6/index_41505.htm

The territorial boundaries of countries as shown on this map are neither accurate nor authentic, and do not represent the actual and sovereign claims of any government.
COORDINATING FOR IMPACT

The India Extrapulmonary TB Guidelines became a reality in August. With just over 24 months of work engaging more than 100 experts across multiple specialties and institutions, GHA India played the coordination role to keep the process moving.

What started as an effort to ensure reduction in diagnostic and therapeutic malpractice for TB in gynecological settings snowballed into this large exercise approved by the Ministry of Health and using the Cochrane Systematic Review methodology. The release of the Guidelines marks the first milestone in ensuring a framework of quality diagnosis and care for extra pulmonary forms of TB, particularly in the context of MDR TB and need for higher quality diagnostics.

Building on this work, we intend to continue supporting the stakeholders and experts who will use these guidelines to improve the quality of care for all forms of TB in India.

MANAGING STAKEHOLDER EXPECTATIONS: THE KEY TO CAMPAIGN SUCCESS

Amitabh Bachchan, perhaps the most well-known film celebrity in India, has been a successful UNICEF ambassador for polio. He also is a hepatitis B carrier, a condition he picked up from a transfusion of unscreened blood 35 years ago. Engaging Bachchan to speak out about his personal health status was a new area of work for Æquitas, and he graciously accepted, making a public appearance at World Hepatitis Day 2016 event in Mumbai led by the Government of India and the World Health Organization (WHO).

Bachchan’s work is critical to the child health agenda in India, where 2.7 million children are born annually. Every one of these children needs to be immunized fully. The immunization effort to eradicate polio in India was a great success, but other vaccine-preventable diseases continue to take a heavy toll. A hepatitis B elimination campaign offers another opportunity to reinforce the idea of immunization as an expectation—and responsibility—of individuals and communities.

Persuading trusted celebrities to endorse immunization and promote the support and use of services was key to the success in ending polio. With Bachchan, this lesson is now being repeated for ensuring birth dose administration of hepatitis B vaccine, within the context of full immunization for all children. Birth dose coverage still lags, with missed opportunities in about 40 percent of live births—roughly 1 million newborns—and needs to be addressed. Hepatitis B mother-to-child transmission prevention requires a birth dose of vaccine, in addition to the 3 regular doses which are administered as part of a combined pentavalent shot for Diphtheria, Pertussis, Tetanus & Hemophilus Influenza B. Children of Hepatitis B positive mothers not receiving the birth dose are more likely to develop liver cancers later in life.

LOOKING AHEAD

Keeping celebrity champions engaged while managing the expectations of all stakeholders (government, multilateral and national technical agencies, media, health service providers) is a tricky task, but is key to a successful campaign. Amitabh Bachchan’s role in talking about immunization is a good example of how disparate sectors, including the film industry, can be supported to work together effectively on the specific issue of eliminating hepatitis B, and on the immunization landscape in India in general.
A mother taking her children to be vaccinated against polio.
ENGAGING GOVERNMENT ON SOCIAL POLICY TO INFLUENCE CHANGE

Good health is essential for development, but the disease burden in Kenya, including malaria, HIV, tuberculosis (TB), and vaccine-preventable diseases, and morbidity and mortality remain high, particularly among women and children.

KANCO works with civil society and other stakeholders to engage government on social and policy issues to influence change. In 2016, several priorities and objectives were achieved, all aligned to country-specific priorities and in line with ACTION’s focus as outlined below.

SIXTH TOKYO INTERNATIONAL CONFERENCE ON AFRICAN DEVELOPMENT (TICAD VI) AND INITIATIVE FOR FOOD AND NUTRITION SECURITY IN AFRICA (IFNA)

The TICAD Summit was held for the first time in Africa, in Nairobi, Kenya, with the Japanese Prime Minister and other dignitaries, including African Heads of State and heads of UN organizations, in attendance. KANCO engaged in policy discussions with key partners in health as well as mobilized and organized over 200 civil society organizations (CSOs) in a series of planning meetings to participate in TICAD VI. The focus of CSO engagement was sensitization on how to engage with key decision makers on nutrition, food security, and domestic resource mobilization for health. Significant outcomes included the adoption of the Nairobi Declaration and its plan of action for nutrition in Africa, IFNA, to be implemented in 10 African countries including Kenya, and the realization of the 5th Global Fund Replenishment campaign. KANCO, in collaboration with other partners, strongly advocated for funding and was heartened by the Kenyan Government’s pledge of USD 5 million to the Global Fund and USD 54 million for domestic resources for health.

TRAINING MEDIA EDITORS IN KENYA

In collaboration with the Media Council of Kenya and the Ministry of Health and National TB Programme, KANCO engaged more than 35 journalists in a dialogue on the role of media in domestic resources for health. KANCO also published several articles on nutrition and accountability.

Due to the decentralization of health and the reclassification of Kenya as a lower middle-income economy by the World Bank, it is imperative to advocate for increased domestic resources from the national and county governments.

CHILD-FRIENDLY PEDIATRIC TB TREATMENT LAUNCHED

In September, the Ministry of Health collaborated with KANCO and other stakeholders to launch the appropriately dosed, child-friendly TB medicines, making Kenya the first country to roll out these products. Organized under the theme “A Globally TB-Free Generation,” the launch was hosted by health and TB control partners, including County Executives Committee Members for Health (CECs) from various counties in the country.
The child-friendly medicines are expected to make the daily six-month treatment period of TB at least more manageable for the affected children and family as well as the healthcare providers. Through the ACTION partnership, KANCO is assessing the implementation of the rollout of the treatment and other catastrophic costs hindering children from accessing proper treatment and care.

TOWARDS AN AFRICAN TB CAUCUS

A leadership meeting in Nairobi was planned to coincide with World TB Day 2016; 300 people attended. The theme was “Championing Leadership toward Ending TB in Africa.”

Health Minister Aaron Motsoaledi of South Africa, the Chair of Stop TB Partnership, observed that the cost of treating MDR-TB, a virulent strain responsible for about one-third of the 700,000 deaths per year from antimicrobial resistance (AMR), could rise to USD 16.7 trillion by 2050. He praised the G7 leaders for issuing a declaration recognizing AMR and TB at the top of the global political agenda and urged G20 leaders to follow suit.

DOMESTIC RESOURCE MOBILIZATION FOR HEALTH IN KENYA

In partnership with the Ministry of Health, the Global Fund, and Gavi, KANCO and WACI Health held a parliamentarian workshop in July on domestic resource mobilization for health. The meeting brought together 30 Members of Parliament (MPs) from three committees: Health; Finance, Planning and Trade; and Budget and Appropriation.

The aim of the meeting was to encourage the MPs to increase domestic contributions to health sector programs by enhancing parliamentarians’ knowledge of and sensitizing them on policies and domestic funding for health. Key pledges by MPs included the need for the ministry of health to develop a transition and sustainability plan and present it to Parliament. Other pledges included: to enforce their oversight role on funds coming into the country through the Global Fund and Gavi; to be the voices of children in resource mobilization for vaccination and immunization; and to evaluate and support the health financing strategy when it gets to parliament.

LOOKING AHEAD

In 2017, KANCO plans to be involved in IFNA implementation, through collaboration with the New Partnership for Africa’s Development (NEPAD), among other stakeholders. KANCO also plans to continue to engage the media and to hold leaders and governments accountable to their citizens.
GIVING VISIBILITY TO MARGINALIZED COMMUNITIES

Princess of Africa Foundation (POAF) is a practical expression of the desire of its founder, Yvonne Chaka Chaka, to use her celebrity to influence change in Africa and around the world. Focusing on health and issues affecting women and children, POAF, through its strategic presence and participation in high-level events, brought significant visibility to these issues in 2016. As importantly, POAF also helped to open doors for other ACTION advocates to access decision makers, creating deeper and more impactful relationships than a one-time event would typically generate.

POAF continues to partner with organizations such as Gavi, the Global Fund, the Stop TB Partnership, and UNITAID in our advocacy for better health across Africa. These partnerships were created to assist in attaining the Millennium Development Goals, particularly goal 4—reduce child mortality; goal 5—improve maternal health by 2015; and goal 6—combat HIV/AIDS, malaria and other diseases; but they have evolved to the new opportunities presented by the Sustainable Development Goals as well.

A VOICE FOR WOMEN AND GIRLS

Chaka Chaka’s article, “Get out of Girls’ Way,” was published by The Economist’s “The World in 2017” edition in November. The article focused on the crucial barriers impacting the growth and development of the girl child, including access to education, health, nutrition and sanitation. In another article, “Access to water and toilets keep girls in school” (News Deeply), Chaka Chaka pointed to simple steps that still need to be taken in many communities to make it possible for girls to get an education.

Chaka Chaka was on message at Women Deliver’s Fourth Global Conference in Copenhagen, including speaking at a session on “Making Investments in Nutrition and Health Work for Women and Girls,” convened by ACTION, and at a panel on “Balancing the Equation in Observing the Role of Women Across Development.”

Chaka Chaka also performed at the first ever Advocacy Concert to increase access to education and health care for women and girls, held at AfrikaFest, Copper Box Arena, in London, UK, in November; and at the World Humanitarian Summit in Istanbul, Turkey, in May. She used the opportunity to encourage delegates to ensure governments and stakeholders stay true to their pledges, matching action to words.
SECURING TREATMENT FOR AIDS, TB, AND MALARIA

At an Action Against AIDS dinner in Berlin, Germany, Chaka Chaka addressed a coalition of 300 nongovernmental organizations across the country focused on securing treatment for everyone for AIDS, malaria and TB. In a meeting with MPs and community-based organizations, she pushed for the Global Fund Replenishment. And, at the 21st International AIDS Conference in Durban, South Africa, she called for government and civil society to work together to reach those people who still lack access to comprehensive treatment, prevention, care and support services. The conference served as a focal point to intensify political and financial commitments to AIDS, and thanks to work by ACTION partners to bring the “deadly duo” of TB-HIV to the attention of the AIDS advocacy community, included the first ever parallel conference on TB.

LOOKING AHEAD

POAF will continue to use the strong and powerful voice it has to bring attention to the issues—the voice of Yvonne Chaka Chaka. We will not stop at raising awareness, however. We will work with our partners in ACTION and other civil society allies to ensure that policymakers turn their awareness into investments, policies, and effective programs, and follow through on their promises.

POAF participated in the Women Deliver Conference in Copenhagen, Denmark. Women Deliver’s 4th Global Conference was its largest gathering on girls’ and women’s health and rights.

The territorial boundaries of countries as shown on this map are neither accurate nor authentic, and do not represent the actual and sovereign claims of any government.
SECRETARIAT DIRECTOR
Hannah Bowen Takes 10

Q. How long have you been with ACTION?
A. I joined ACTION in December 2014, which was a particularly interesting time in global health advocacy, with the Millennium Development Goals entering their final year and the Sustainable Development Goals coming together. It was also a pivotal moment in ACTION’s growth, with the establishment of a formal Leadership Group in 2015 and initial work begun on a new strategic framework to guide the partnership’s advocacy.

Q. Describe your role as director of the ACTION Secretariat.
A. The Secretariat team and I support all 12 formal partners, and the many other advocates who campaign with ACTION, to be as impactful and influential as possible. We coordinate, communicate, connect, coach, and convene. Our role is to help make sure that the ACTION partnership’s advocacy is more than just the sum of its partners’ individual campaigns.

Q. What attracted you to the position?
A. I was drawn to the partnership’s philosophy of advocacy, which is based on the belief that access to health should be a right, that governments have the largest role to play in making health coverage universal, that all of us—as citizens, as civil society, as experts, as ordinary people—are responsible for steering our own governments to play that role, and that we all benefit from connecting those efforts across borders.

Q. What unique strengths do you bring to the position?
A. I have a background as more of an international development generalist, mainly focused on communications and advocacy, but I think the most important contribution I can make as the ACTION Secretariat director is in supporting organizational management and strategy. For that, my experience working in multi-country and multi-stakeholder partnerships has been the biggest value.
Q. How has ACTION changed under your leadership?
A. We have grown over the last couple of years, gaining new formal partners, as well as strong allies and consultants in new geographies. But, I think the biggest changes have been in the complexity of the issues and campaigns we are taking on. It has been exciting to work with advocates all over the world who are not afraid to dig in to the most complicated political and health challenges, and find pragmatic solutions. Over the last couple of years, we have expanded our ability to be nimble and to identify and react to opportunities (and threats) on such complicated issues.

Q. What has been your greatest challenge to date?
A. None of the health issues we face or the political environments we work in are getting any easier. Even successful campaigns create their own challenges—like the final stages of polio eradication or maintaining investment in research after a scientific breakthrough. But I think the biggest challenge for me has been facing the assumption that too many people in government or business make before they meet us: that the expertise of civil society, advocates, patients, and ordinary citizens in setting policy and solving health challenges is secondary or optional. I am proud of ACTION’s daily work to prove their assumption wrong.

Q. What has been your greatest joy or success?
A. There have been many advocacy wins over the last couple of years, many of which are described in this report. But for me, my greatest joy comes from the moments when I see someone in a decision-making role—an MP, the head of a multilateral development bank, the chief executive officer of a company—listen to an ACTION advocate’s story and a light goes on. Whether it is a statistic presented at the right moment, a personal experience, a creative solution, even a hard question, I have seen that shift in someone’s perspective, where they are convinced by the case we are making and value the perspective we bring.

Q. How do you see ACTION evolving over the next five years?
A. Even with all our collective expertise, it is hard to predict which changes in the health and political landscapes we will be facing even in 2018, let alone five years out. But I see the partnership evolving to more fully support advocates in more geographic regions, particularly in low- and middle-income countries; I see our advocacy tipping the balance on key issues like TB and antimicrobial resistance, but not in a “siliced” way. I see our model of local-to-global, inside-outside, long term (and opportunistic) advocacy adapting, as our counterparts in government and the private sector more fully acknowledge and welcome the contributions of civil society experts.

Q. In a competitive global space, what is ACTION’s unique value proposition?
A. ACTION’s most unique and powerful strength is the very structure and philosophy that sometimes makes it hard to define and promote a unified brand. The partnership model of authentic local leadership by independent, highly skilled advocates, coordinating together for national and global impact, is what makes ACTION’s work effective, nimble, efficient, and creative. Our model of working closely with policymakers and journalists over the long term—across political parties, across borders, across sectors—as trusted allies who are not afraid to criticize or push hard for our views, but always have an eye on practical solutions, is what makes ACTION’s campaigns resilient.

Q. What do you hope to be your biggest impact on ACTION?
A. I hope in the years ahead that I can draw out even greater ambition in ACTION partners’ strategies and our joint campaigns and to support strong and effective organizations to be best-in-class in terms of nonprofit management.
When ACTION was established as a loose network in 2004, the pressing need that brought like-minded advocates together was a lack of awareness, political will, community engagement, and action against the TB epidemic. At a time when activists were driving breakthroughs against the other major infectious disease epidemics—HIV/AIDS and malaria—ACTION advocates saw a gap in TB advocacy.

Through our work together since that time, we have helped put TB higher on the global agenda; sadly, the years of lagging advocacy and action that drove us to form ACTION are also evident in the slower progress the world has made against TB compared to HIV/AIDS and malaria. For that reason, TB remains a core focus of our work. Our individual and collective campaigning for a successful Global Fund Replenishment in 2016 helped secure more resources to fight TB and our efforts to raise the profile of TB-HIV coinfection and put TB R&D priorities in the global spotlight will continue in 2017.

Over the years, we have identified other pressing health issues that result from a lack of political will in key countries, and taken them on as part of our ACTION agenda. In low and middle income countries, childhood diseases are too commonplace and often set the groundwork for a lifetime of challenges. Of the nearly six million children under age five who die every year, the majority could be prevented by increasing access to simple and cost-effective interventions, such as inexpensive vaccines and medication, exclusive breastfeeding, clean water, and sanitation, the WHO says.

Through our MP engagement, journalist delegations, media trainings, and other tactics, ACTION plays an increasingly influential role helping to solve some of these problems and moving the world closer to attaining the Sustainable Development Goals, which include: ending preventable deaths of newborns and children under five years of age, with all countries aiming to reduce neonatal mortality (to at least as low as 12 per 1,000 live births) and under-five mortality (to at least as low as 25 per 1,000 live births); and ending the epidemics of AIDS, TB, malaria, and neglected tropical diseases.

This is evident in ACTION partners’ work to help eradicate polio, a highly infectious viral disease, which mainly affects young children and typically causes debilitating paralysis; to garner support for Gavi, the Vaccine Alliance (Gavi); and to hold countries accountable for their national and international commitments to supporting immunization programs, such as the 2016 Addis Declaration on Immunization, signed by African leaders, to expand immunization for more children.

We have also expanded our work to help give every child a healthy start. Childhood stunting, being too short for one’s age, is a barrier faced by approximately 159 million children, or 24 percent of the world’s children under age five. The condition is the result of inadequate nutrition during the first of a child’s life, the crucial window for critical physical and cognitive development. Stunting is irreversible and adversely impacts individuals and societies, impairing cognitive and physical development, reducing productive capacity, and often resulting in overall poor health with an increased risk of degenerative diseases, such as diabetes.

In Madagascar, more than half of the children under age five are chronically malnourished, and more than one in four are severely malnourished, according to World Bank data. An ACTION-hosted delegation for journalists from five countries to Madagascar in 2016 drew attention to the problem with an article in the Huffington Post, dramatically highlighting the difference between two five-year-olds born on the same day in the same town: Miranto, a healthy child, and Sitraka, who is stunted, a heads length shorter, and looking half his age. Sitraka is still learning to speak and has difficulty standing for any length of time. He is unable to attend school and has few friends. The boys’ stories are stark examples of the disadvantages suffered by children who do not get the nutrients they need during those crucial development years.

We had some great wins in 2016, including our multi-country parliamentary delegation to India on polio, but we also took time this year to reflect on the evidence and experience around child health and build a more cohesive advocacy strategy across the core areas in which we see opportunities for reducing preventable child deaths—immunization, polio, and the systems that deliver child health interventions—in line with the new ACTION strategic framework,” said ACTION Secretariat policy and advocacy manager, Heather Teixeira.
Madagascar is typical of countries that will be left behind in a cycle of poverty without strong leadership and financial investment at the country level, along with support from the international community. Investments in health, nutrition, and early childhood development (ECD) are imperative for families and national and international economies in the long run. Experts say every additional $1 invested in quality early childhood development programs yields a return of $6 to $17 each year. The annual Global Nutrition Report has shown similar outcomes—with some countries yielding more than 50 times as much—and that the annual global GDP losses from malnutrition are greater than what was lost each year during the 2008–2010 financial crisis.

In the fall of 2016, ACTION partnered with Action Against Hunger to convene the first global meeting of MPs on “Investing in the Early Years,” through nutrition and ECD, alongside the World Bank annual meetings, after a call by Bank President Jim Kim to end stunting. Eight MPs from Burkina Faso, Cameroon, Madagascar, Malawi, Tanzania, and the United Kingdom, plus a staff member of a U.S. Member of Congress, attended a half-day meeting to exchange ideas and experiences. The MPs also attended the first World Bank-hosted Human Capital Summit focused on “Investing in the Early Years,” where finance ministers and heads of state spoke about ongoing and future efforts to invest in ECD, particularly nutrition.

“Having new institutional champions, particularly financial institutions, has helped to bring newer, stronger voices to the table, and it has also helped to frame nutrition, not only as a health issue, but a broader economic development issue,” said Nandini Pillai, ACTION Secretariat advocacy and impact manager. “I am proud of our leadership in this area and I look forward to even more effective partnerships and seeing the full impact of our work.”

Future ACTION

In its new strategic framework, ACTION outlines a vision for the partnership: by 2021, we will see significantly better outcomes in health and nutrition equity around the world, and remove systemic barriers to health for the world’s poorest, allowing all people to achieve their potential. ACTION aims to achieve this by advocating for investments in effective health services for underserved people to be made by governments in their own countries, as well as globally; and using our collective expertise about political systems, policy options, proven health interventions, and gaps in research and development, to push for policy change. With global health at a crossroads, ACTION is perfectly poised to set new standards for advocacy and dramatically change the landscape for global cooperation.
Strengthening Advocacy Through Research and Learning

ACTION’s work was strengthened significantly in 2016 through several joint learning opportunities, as well as the release of a new report highlighting the need for a coordinated response to deadly TB-HIV co-infections, if additional progress is to be made against either disease.

In October, ACTION held its second workshop on transition and health financing in Bangkok, Thailand, with 15 civil society representatives from Nepal, Bangladesh, Pakistan, Thailand, Vietnam, and Laos. Building on the success of a similar 2015 workshop in Lusaka, Zambia, participants engaged in discussions on the process of transition, or the withdrawal of donor funding as a country’s economy grows. ACTION facilitators, guest experts, and the participants learned from each other’s experience and crafted strategies around domestic resource mobilization and transition readiness—with heavy emphasis on the transition from Gavi support for immunization programs and vaccines to countries’ full self-funding, given the economic status of many Gavi-eligible countries in the Asia Pacific region. Participants left the workshop with detailed, country-level advocacy strategies to work with their governments on health financing in the context of donor withdrawal and to work with global health institutions and donors for more responsible transition processes. ACTION continues to engage participants from both the Lusaka and Bangkok workshops as colleagues and champions working towards successful, sustainable financing for global health programs.

In May, ACTION hosted a refresher training on media and advocacy skills for another group of colleagues and champions who had previously participated in an ACTION media training. Ahead of the Women Deliver Conference in Copenhagen, Denmark, the participants focused on delivering effective panels and interviews in a global conference setting; all had previously worked with ACTION to hone their media skills for nutrition advocacy, part of ACTION’s on-going media training work.

In addition to gaining new perspectives through workshops and trainings, our work has also been strengthened by the perspectives gained through original research and policy analysis. On July 19, ACTION launched the report, “From Policy to Practice: How the TB-HIV Response Is Working,” at the International AIDS Conference in Durban, South Africa, which built on our 2014 publication, “From Rhetoric to Reality.” The new report drew from a careful analysis of countries’ and institutions’ key policy and program documents, as well as case studies conducted by ACTION partners; the findings show that, while countries have taken steps in the right direction since 2014, policy improvements have not all translated into changes at the facility level. In addition, most of the burden to support key TB-HIV activities still falls heavily on under-resourced TB programs.

The report recommends that governments of countries with high burdens of these infectious diseases develop joint national TB and HIV strategic plans, while scaling up investments in underfunded TB programs. It also urges stakeholders to work together to address key gaps and develop the appropriate tools to prevent, diagnose, and treat HIV-associated TB.

Expanding Advocacy Networks

ACTION’s impact was expanded in 2016 through a network of allies, including RESULTS Korea and an ACTION consultant in Italy. ACTION’s global campaigns in 2016 were supported by advocacy directors in both countries, who worked actively on coalition building and advocacy strategies to influence policymakers in resource mobilization for the Global Fund replenishment and other health and nutrition investments.
The Financial Impact of ACTION’s Partnership: 
Global Fund Replenishment

- **Australia** increased funding to AUD 220 million, a 10-percent increase of its previous commitment, despite an environment of major cuts to Australia’s aid programs.
- **Canada** affirmed its leadership in the fight against the epidemics with a CAD 804 million pledge.
- The **European Union** committed EUR 470 million in March 2016, a 27 percent increase over its previous pledge. An additional EUR 5 million top-up was announced in September 2016.
- **France** pledged EUR 1.08 billion over three years.
- **India** pledged USD 20 million, a nearly 50 percent increase over its previous commitment.
- **Italy** announced in June an increase in funding to EUR 130 million, 30 percent more than its previous commitment. At the Global Fund Replenishment conference, Italy announced a EUR 10 million top-up in solidarity with low- and middle-income countries, who also announced pledges at the conference.
- **Japan** committed USD 800 million after hosting the Global Fund Replenishment’s preparatory meeting in December 2015.
- **Kenya** pledged USD 5 million, more than doubling its commitment from the previous Global Fund Replenishment conference in 2013.
- **South Korea** pledged USD 11.75 million over 3 years.
- **The United Kingdom** pledged GBP 1.1 billion and will work to increase incentives for private sector investments in the Global Fund.
- **The United States** committed to deliver one-third of the total funds, up to USD 4.3 billion, matching donor investments with USD 1 for every USD 2 pledged by others through September 2017.
- **Zambia** pledged USD 3 million over three years.
REFLECTIONS ON 30 YEARS OF SUCCESSES AND CHALLENGES

The celebration of our 30th anniversary last year served as a backdrop for reflection on our history, successes and challenges, and our resolve to move forward more passionately and purposefully toward our goal to end global poverty.

THE BIRTHDAY BASH

Appropriately, we marked our big anniversary with a massive party—a conference attended by 80 people in Sydney. Expert speakers, current and past Members of Parliament (MPs) from all sides of politics, and even a visit from RESULTS and RESULTS Educational Fund founder Sam Daley-Harris lent special significance to the celebrations, which included sessions on building champions in the media, parliament and community. The conference also promoted newly-formed friendships with like-minded people from around the country.

ROBUST GRASSROOTS ENGAGEMENT

Beyond our major milestone, 2016 saw RESULTS Australia’s campaigns coinciding with national elections—the perfect opportunity for our volunteers to meet with members of parliament (MPs) in their electorates, and for us to make big asks for the work of the Global Fund. We did this both with formal meetings and curbside chats, 48 times during the year.

These established contacts helped volunteers to secure 19 pledges from MPs to “play their part to end the world’s worst epidemics” and to support RESULTS Australia staff in gathering 136 signatures from MPs on letters of support for the Global Fund—a full 60 percent of the Parliament.

Shortly after the signed letters from MPs were delivered to the Minister of Foreign Affairs, the Hon Julie Bishop MP announced on September 15 the country’s pledge of AUD 220 million for the three years 2017–2019. The pledge represented a 10 percent increase...
on Australia’s previous commitment to the Global Fund, as well as being a significant achievement in the context of deep cuts to Australia’s aid budget.

Our grassroots volunteers’ efforts to urge a strong and generous Australian pledge to the Global Fund also included 76 published letters to the editor and five published opinion pieces by volunteers. A notable achievement was the publication of an opinion piece co-signed by three senators from the three major parties, brilliantly driven by the RESULTS Hobart team.

THE AUSTRALIAN TB CAUCUS

In March, RESULTS Australia co-hosted an event at Parliament House that served as the launch for the Australian TB Caucus. Co-chaired by MPs Warren Entsch (Federal Member for Leichhardt) and Matt Thistlethwaite (Federal Member for Kingsford Smith), the Caucus is a group of federal MPs committed to taking action on TB. The Australian Caucus is part of the Global TB Caucus that ACTION partners, including RESULTS UK, have helped to foster over the last several years. As the Secretariat for the Caucus, RESULTS Australia ensures that members are well-informed about TB-related issues and provides the assistance MPs need to advance the Caucus’ aims in Parliament, through the media and at local, regional and global levels. Caucus activities for the year included raising support for Australian aid, including funding for the Global Fund, medical research for developing better TB tools, and programs to end TB in Papua New Guinea.

ONE LAST PUSH ON POLIO

RESULTS Australia collaborated with the Global Polio Eradication Initiative (GPEI), Rotary Australia, UNICEF Australia, and Global Citizen to start the One Last Push campaign to support the efforts of Australian politicians to be “the Parliament to End Polio.” The campaign, launched by RESULTS Australia in Parliament on World Polio Day 2016, secured 25 Australian MPs’ signatures, including the now-Minister for Health Greg Hunt, who have publicly stated their support for polio eradication on the One Last Push website. We have also shared lessons on this work with our ACTION colleagues in RESULTS Canada and RESULTS UK, who are using the One Last Push platform to build parliamentary support for GPEI as well.

LOOKING AHEAD

Next year, we plan to expand the size and influence of the Australian TB Caucus and raise the profile of the disease in parliament and the wider community, continue our efforts to support the One Last Push campaign on polio, and work harder to show how Australia can use its power and influence to help end poverty through equitable access to health for people in the poorest parts of the world.
BUILDING RELATIONSHIPS BETWEEN ADVOCATES AND POLICYMAKERS

RESULTS Canada had a banner 2016, thanks to the concerted efforts of our staff members, citizen advocates and partner organizations. Staff and volunteers saw new momentum in their work on polio and TB, helping to secure millions in funding and engaging with decision makers. Our community of supporters also came together for our most successful national conference to learn, build relationships and plan for the year ahead. We closed the year largely satisfied with our successes in engaging policymakers at high levels, deepening our relationships with volunteer advocates and other stakeholders, and laying the foundation for an even more successful 2017.

VOICES THAT CHANGE THE WORLD: OUR BIGGEST NATIONAL CONFERENCE

We began the year on a high note—hosting our biggest national conference ever, with over 150 attendees, including MPs, patient advocates, Global Affairs Canada officials and ACTION colleagues. The theme of the conference was “voices that change the world” and focused on informing, inspiring and empowering participants to create a more just world. The conference culminated in a meeting between RESULTS Canada citizen advocates and over 40 MPs to urge them to act on polio, nutrition and TB.

Many of the MPs evolved into valuable champions of our issues as the year unfolded. Member of Parliament Sonia Sidhu became a passionate anti-polio advocate following her participation alongside MPs from the UK and Japan in ACTION’s joint parliamentary delegation to India to learn more about the disease. She has since written blogs and spoken up in Parliament, and was one of the founding members of the One Last Push online platform, intended to raise awareness and inspire action on polio eradication.

MP Pam Damoff also became a valuable advocate after joining RESULTS Canada’s parliamentary delegation to Indonesia in August. After seeing the devastating effects of malnutrition firsthand, she is playing a leadership role on nutrition. She has helped establish the Canadian Nutrition Caucus, and joined the global Leading Group of Parliamentarians on Early Childhood Development and Nutrition.

MP Brenda Shanahan also participated in our delegation to Indonesia and was spurred to action after visiting a hospital specializing in multi-drug resistant TB (MDR-TB). Upon returning to Canada, she attended the Global Fund Replenishment conference in Montreal and is now a co-chair of the Global Health Caucus on HIV/AIDS, TB, and Malaria. She is committed to Canada continuing to take leadership in addressing these epidemics.

TB ADVOCACY AND THE GLOBAL FUND REPLENISHMENT CONFERENCE

After concerted effort by RESULTS Canada citizen advocates, Canadian International Development Minister Marie-Claude Bibeau announced a CAD 85 million pledge to TB REACH, a financing mechanism that provides small grants to organizations that are working to improve TB diagnosis and treatment at the community level.
RESULTS Canada was also instrumental in the Canadian government’s decision to host the Global Fund Replenishment, as well as its historic pledge of CAD 804 million. To ensure that the replenishment conference would engage civil society and build momentum for further advocacy, RESULTS Canada, in partnership with the Interagency Coalition on AIDS and Development, organized a two-day civil society meeting and public event ahead of the conference itself. This took place September 16–17 in Montreal, and featured numerous ACTION colleagues as speakers. RESULTS Canada’s executive director also published a joint op-ed with Minister Bibeau. The Replenishment conference reinvigorated the work of the Global Health Caucus for HIV/AIDS, TB, and Malaria, of which RESULTS Canada is co-secretariat. The Caucus hosted a parliamentary event after the Replenishment conference to recruit new members and celebrate Canadian leadership.

In order to build support and interest ahead of the conference, RESULTS Canada ran an immensely successful media tour with Global Fund champion Loyce Maturu. Ms. Maturu had been supported in honing her media skills by an ACTION training in October 2015 and worked with ACTION partners to share her perspective on the value of the Global Fund with decision makers in the U.S. and at the International AIDS Conference in Durban, South Africa in July in addition to her work with RESULTS Canada. Between a Canadian press article picked up by 16 different outlets, television appearances on CBC’s Power and Politics and CTV’s Power Play, a front-page story in the Ottawa Citizen, and articles in CBC, iPolitics, and the Huffington Post, the total circulation and viewing figures for Ms. Maturu’s Canadian media tour reached an incredible 1.6 million impressions.

RESULTS Canada anticipates that the year ahead will be just as productive and exciting as 2016, with tremendous opportunities to take advantage of Canada’s increasing prominence on the world stage. Prime Minister Justin Trudeau has made it clear that he is willing to fill the gap in global leadership, and we are willing to work to ensure that the government puts words into action to provide help where it is needed, including scaling up nutrition and eradicating polio. With Canada hosting the Group of 7 (G7) presidency in 2018, RESULTS Canada has the opportunity to work with our ACTION colleagues in other G7 countries, Canadian civil society and key decision makers to ensure that reaching the Sustainable Development Goals is on the agenda.
A NARRATIVE OF CHANGE POWERED BY PASSIONATE, COMMITTED EVERYDAY PEOPLE

After several days on the road together, Thokozile Phiri Nkhoma and Crickett Nicovich were a few minutes late for their meeting at a newspaper in Salina, Kansas. When they walked in, four RESULTS volunteers were already there, telling the head of the editorial board—along with the paper’s deputy editor, a reporter, and a photographer—all about the Global Fund.

Nicovich, a staff member in Washington, was not surprised. Volunteers were an integral part of this media tour and set up the meeting at the Salina Journal themselves. They talked about how crucial it was for the Global Fund to have the resources it needs to keep fighting against all three epidemics—and how that would only happen if the United States and world leaders stepped up their investments at the upcoming pledging conference.

While many of the volunteers at the meeting had personal reasons for getting involved in advocacy, none could illustrate the urgency of the Global Fund’s work better than Nkhoma, who grew up in Malawi and founded a nonprofit organization there focused on TB-HIV advocacy.

She told the newspaper’s staff about losing her father to TB and HIV when she was a girl. Her mother, younger sister, and younger brother all learned they were HIV positive shortly afterwards. While Nkhoma is not HIV positive, she battled a severe TB infection at age 15.

“My family was greatly affected by these diseases,” she explained. It was only because of the Global Fund that she and her family members could receive treatment. Although her mother and younger brother have since passed away, her 26-year-old sister is still taking anti-retroviral medication for HIV.

“The Global Fund is saving her life every day,” Nkhoma said.

A few days after this meeting, Nkhoma’s story appeared on the front page of the Salina Journal. It was precisely what Nicovich, Nkhoma, and the volunteer group in Kansas had been hoping for: prominent local coverage that was likely to get the attention of lawmakers, who in turn could turn up the political pressure in Washington. And it worked. The U.S. pledged up to USD 4.3 billion ahead of the Global Fund Replenishment conference in Montreal, Canada, in September, with a matching element that depended on other pledges. Other countries—including those whose pledges were shaped by the advocacy of our ACTION partners—stepped in and invested an additional USD 8.6 billion. As a result, the Global Fund partnership will now be able to save 14 million more lives from HIV, TB, and malaria by 2020.

Incredible outcomes like this are why RESULTS Educational Fund has been taking advocates like Nkhoma on media tours for the past eight years.

“Our grassroots volunteers are fantastic at getting media published and talking to local reporters, but working with someone who can explain the personal impact of these programs is often what moves reporters and editors to write,” Nicovich said.
As Nkhoma and staff crisscrossed the country on a whirlwind tour of eight states, RESULTS volunteers worked hard to secure dozens of meetings. In Kansas alone, volunteers booked meetings at newspapers in five different cities.

Meanwhile, volunteers across the country were publishing their own media and pushing their members of Congress to weigh-in in support of the Global Fund.

“The relationship with the grassroots volunteers has been incredible. It’s like a family—and they are on top of their game,” Nkhoma said.

Securing the new U.S. pledge was just the latest step in over 15 years of advocacy on the Global Fund by RESULTS volunteers. Almost two thousand pieces of media and hundreds of meetings with members of Congress has helped drive US investment in this powerful tool against some of the world’s biggest killer epidemics, helping save over 22 million lives.

Nkhoma said she came to join RESULTS volunteers in the United States because she believes in the power of advocacy—that only with political attention and investment will we end these epidemics.

“Change happens when this becomes a story that people can relate to,” Nkhoma said. “They start to see the issue in a new way. It’s all about humanity and solidarity.”

LOOKING AHEAD

With a new Congress and Administration in Washington, the team at RESULTS Educational Fund is now focused on making sure the U.S. continues to do its part supporting the Global Fund and advancing the fight against diseases of poverty.
Diligent in Advocacy Efforts

RESULTS Japan stayed true to its mission in 2016, hosting a series of high-level events dedicated to fostering political will to end the worst aspects of poverty. Established in 1989 with the visit of RESULTS and RESULTS Educational Fund founder Sam Daley-Harris, RESULTS Japan has been diligent in its advocacy efforts, which include making policy proposals to fund microcredit initiatives and communicable diseases, as part of the effort of the Japanese overseas development assistance and the Japanese International Cooperation Agency.

Among its successes in the last year, RESULTS Japan has been instrumental in ensuring strong investments in health in Japan’s supplementary budget—including JPY 39.3 billion (USD 359 million) for Global Fund, 14 billion (USD 128 million) for the Coalition for Epidemic Preparedness Innovations, JPY 4 billion (USD 37 million) for polio, and JPY 2.23 billion (USD 20 million) for Gavi. This was accomplished in coordination with Diet members and the cabinet secretariat, including Hiroto Izumi, special advisor to the prime minister.

RESULTS Japan also helped secure JPY 120 billion (USD 1.1 billion) for universal health coverage from the Japanese government. Prime Minister Shinzo Abe made a commitment to support universal health coverage, which envisions access to good quality health services to everyone without suffering financial hardship.

One of the most influential activities hosted by RESULTS Japan in 2016 was the first “GGG+ Forum,” showcasing Gavi, the Global Fund, the Global Health Innovative Technology (GHIT) Fund, plus other mechanisms including GPEI and WHO, with more than 300 people participating in the event. Hiroto Izumi, special advisor to the prime minister; Ichiro Aisawa, chair of Friends of the Global Fund; the Japan Diet Task Force; and Shinichi Kitaoka, president of Japan International Cooperation Agency, were among the special guests. Speakers included Ngozi Okonjo-Iweala, chair-elect of Gavi; Kiyoshi Kurokawa, representative director and chair of GHIT; Alex Ross, director of Centre for Health Development at the WHO; and Joanne Carter, executive director of RESULTS Educational Fund. The forum attracted both print and electronic media attention, including Daisanbunmei magazine and NHK World. It helped to set the agenda for global health funding and make the case that investments in one mechanism must not come at the expense of other key programs.

RESULTS Japan negotiated with Ministry of Foreign Affairs, Ministry of Health, Labour and Welfare to increase Japanese contribution to the Global Fund. Here, Japanese Prime Minister Shinzo Abe meets with world leaders at the G7 Summit in May.
G7 ISE-SHIMA SUMMIT

The G7 Ise-shima Summit, chaired by Prime Minister Shinzo Abe, took place on May 26–27, 2016. RESULTS Japan used the opportunity of this global spotlight to push the ministries of foreign affairs and health, labor and welfare to show leadership by increasing the Japanese contribution to the Global Fund. The Japanese Government announced its intention to provide USD 0.8 billion from 2016–2020 for the Global Fund on May 20, giving ACTION partners in other G7 countries another tool to press for ambitious commitments from their own governments.

Finally, in a meeting between Hiroto Izumi, special advisor to the prime minister, and Seth Berkley and Chika Kitajima from Gavi, RESULTS Japan urged that funding for Gavi be increased and organized introductions between the Gavi representatives and Gaku Hashimoto, member of the House of Representatives and chief of the Liberal Democratic Party’s foreign affairs division, and Masakazu Hamachi, parliamentary secretary for foreign affairs, to build parliamentary support for robust funding to Gavi.

ENHANCING PUBLIC INTEREST AMONG JAPANESE CITIZENS

We planned and implemented an event to enhance the public interest in our work at Global Festa on October 1-2. Global Festa is known as the biggest event about international cooperation in Japan, with a hundred thousand people attending over the two days.

In addition, RESULTS Japan implemented a campaign for World Polio Day to enhance the public interest in international cooperation with Dr. Kenji Shibuya, Professor and Chair, Department of Global Health Policy Graduate School of Medicine of Tokyo University. We also collaborated with Diet members to make the polio campaign successful, including Hon. Sadaharu Tanigaki, former president of the Liberal Democratic Party Hon. Ichiro Aisawa, Friends of the Global Fund, Japan Diet Task Force, and Hon. Kenzo Fujisue, Secretary General of Diet Task Force on Global Polio Eradication. We secured a prime advertising location in Ikebukuro subway station, posting a message about World Polio day for commuters to see as they passed. Along with Hon.Aisawa, Hon. Fujisue and polio patients, we distributed 5,000 flyers in front of the advertisement during peak commuting hours. Ikebukuro station is the largest station in Japan, used by 0.7 million people per day.

LOOKING AHEAD

This year, RESULTS Japan Executive Director Noriko Shirasu and staff participated in the TICAD VI summit in Nairobi on July 27-28. Thanks to our advocacy work, JICA launched the Initiative for Food and Nutrition Security in Africa (IFNA) at TICAD. The aim of IFNA is for nutrition improvement in Africa. Now, with other nutrition-devoted NGOs Save the Children Japan and World Vision Japan, we as the self-named “Three Musketeers” aiming for nutrition improvement, plan to unitedly ask the Japanese Government to contribute a cumulative amount of 100 billion Yen to nutrition programs from 2016 to 2020. The year 2020 will be pivotal for our advocacy as global attention turns to Japan for the Tokyo Olympic and Paralympic Games.

The territorial boundaries of countries as shown on this map are neither accurate nor authentic, and do not represent the actual and sovereign claims of any government.
RESULTS UK, through a range of potent advocacy activities, made its presence felt in 2016, securing important wins in the fight to end global poverty and laying a firm foundation for future successes. Outstanding work included spurring historic commitments to the Global Fund and cultivating new champions for child health and nutrition.

BUILDING SUPPORT FOR THE GLOBAL FUND

Three-quarters of all international financing for TB come through the Global Fund, which makes the Global Fund Replenishment campaign a particularly significant time. Although the UK has been a leading donor since the Global Fund’s inception, in 2016, growing opposition to international aid meant that future contributions were uncertain. In 2015, RESULTS UK began engaging parliamentarians in preparation for what would be the fifth replenishment. Despite Britain’s shock vote to exit the European Union and the subsequent change of government, our long-term strategy meant that we were still well positioned to work with MPs to ensure that the replenishment was a priority.

A parliamentary delegation to Zambia in 2014—with visits to projects supported by the Global Fund—and a corresponding advocacy tour with an MP from Zimbabwe to the UK were key advocacy efforts in building the secure cross-party support that was critical to our success. We also jointly organized an event at the Conservative Party Conference with the UK international development secretary and the Global Fund’s then-executive director, Mark Dybul. An MP in the Zambia delegation chaired the event, which he described as one of the best he had ever attended.

At the Replenishment conference in Montreal, Canada, UK International Development Secretary Priti Patel announced a pledge of GBP 1.1 billion to the Fund, a 10 percent increase on its previous pledge. In her subsequent statement to the House of Commons, she cited the work of parliamentarians “whose advice and support on this issue has been invaluable for the Government.”

TB patient Pham Anyang, 28, stops for a portrait outside his home in Srosomthmy Village in Cambodia.
In the run-up to the Replenishment conference, our grassroots team also took two UK health professionals working on TB on a delegation to Cambodia under RESULTS UK’s new program, Champions for the Global Fund. Jess Potter, M.D., and nurse, Sue Dart, shadowed colleagues from the National Centre for TB and Leprosy Control in Phnom Penh and Kampong Chang, where they gained insight into how the Global Fund has helped Cambodia control the TB epidemic, as well the funding gaps that remain.

On their return, Potter and Dart met with Kate Osamor, shadow secretary of state for international development; Nick Herbert, co-chair of the All-Party Parliamentary Group on Global Tuberculosis and the Global TB Caucus; and Rushanara Ali, Potter’s local MP. Potter also published an op-ed in the Guardian, titled, “Wake up to the Pandemic.”

**NUTRITION ACCOUNTABILITY**

Working with the Department for International Development’s (DfID) nutrition team to improve the impact and accountability of its nutrition programs was a significant part of our work in 2016. We contributed to its position paper on nutrition, participated in strategic meetings and produced a series of briefings on best practices in integrating nutrition across the reproductive, maternal, newborn, child and adolescent health continuum for improved nutrition and health outcomes. These case studies were launched in November in the UK Parliament, with a roundtable discussion attended by MPs, DfID staff, donor agencies, and civil society organization allies.

**ONE LAST PUSH TO ERADICATE POLIO**

In April, RESULTS UK and ACTION colleagues led an inter-parliamentary delegation to India, which was certified polio free in 2014, to learn about polio eradication. Following the delegation, Conservative MP Andrea Jenkyns, who participated in the tour, shared her experiences in PoliticsHome, encouraged UK leadership on global polio eradication and called on the government to assess shortfalls of the Global Vaccine Action Plan. The then Secretary of State Justine Greening agreed that “we are in touching distance of seeing this terrible disease eradicated from our planet for the first time in history.”

**SUPPORTING TB ADVOCATES IN EASTERN EUROPE AND CENTRAL ASIA**

RESULTS UK continued its support to the TB Europe Coalition (TBEC), a network of civil society organizations across Europe and Central Asia, dedicated to the fight against TB. The coalition was born out of a lack of civil society involvement, despite the region having the highest burden of drug resistant TB in the world. TBEC now represents a strong civil society presence. Our work with TBEC last year included supporting the creation of the first Russian-speaking network of people with experience with TB in Eastern Europe and Central Asia region—TBpeople. As the only such network, TBpeople is exceptionally placed to represent its interests in health care reforms and legislative changes at the national and regional levels.

**LOOKING AHEAD**

Despite the changing political landscape, we will work hard to keep our issues on the political agenda and build engagement with decision makers, old and new. We will remain focused on eliminating polio and on our larger goal of a world free from extreme poverty by 2030.
MOBILIZING GOODWILL AND RESOURCES TO END DISEASES

The global health landscape has registered dramatic progress over the last two decades. Organizations working to end epidemics, such as HIV, TB and malaria, have garnered both good will and resources toward eradication. Beginning in 1997, WACI Health sought to raise awareness on HIV/AIDS, mostly working to support and strengthen campaigns on HIV accountability among diverse civil society constituencies worldwide. In 2008, we registered as World AIDS Campaign International (WACI) in South Africa, and in 2016 rebranded as WACI Health. Now, we focus on HIV and broader health issues in Africa, with a particular emphasis on health financing.

U.N. HIGH-LEVEL MEETING ON HIV AND THE GLOBAL FUND REPLENISHMENT CAMPAIGN

WACI Health co-hosted a pan-African civil society forum ahead of the United Nations High-Level Meeting (HLM) on HIV. The outcome document, the Africa Civil Society Position on HLM, placed the replenishment of the Global Fund among the list of priorities. Civil society organizations including Global Fund Advocates Network (GFAN) Africa members, were instrumental in contributing the following language: “We strongly recommend that member states, donors, private sector, development partners, civil society and all other stakeholders of the continental HIV response...commit to fully financing the AIDS response by...ensuring that the Global Fund is fully funded.” The document was later used by advocates with delegates to the High-Level Meeting and U.N. missions to elicit support from African Union members and donor markets.
THE GLOBAL FINANCING FACILITY

On the sidelines of the Global Financing Facility (GFF) Investor’s Group meeting in Tanzania in November, WACI Health worked with KANCO and civil society partner, Health Promotion Tanzania, to convene a meeting on maternal, newborn, child and adolescent health, and nutrition. The goal was to foster understanding about the GFF and nutrition, outline key next steps on how to organize around the GFF, lay the foundation for a civil society forum to engage MPs around maternal and child health and nutrition, and monitor GFF implementation.

ACCELERATING UNIVERSAL ACCESS

At the 6th Tokyo International Conference on African Development, held August 27-28 in Nairobi, Kenya, WACI Health highlighted the importance of universal health coverage in Africa, and the need to end HIV, TB and malaria, and improve nutrition and food security. Participants included 35 heads of states and global leaders including World Bank President Jim Kim, African Development Bank President Akinwumi Adesina and the Global Fund Executive Director Mark Dybul. WACI Health’s Executive Director Rosemary Mburu moderated a side meeting, hosted by GFAN Africa, Africa Japan Forum, and African Civil Society Platform for Health (CISPHA), on health financing focusing on the role of domestic resource mobilization in bringing forth universal health coverage. Dybul made introductory remarks.

AFRICA AT THE FOREFRONT

The highlight of the year was our participation in the Global Fund Replenishment campaign and our effort toward raising USD 13 billion. Together with CISPHA and GFAN Africa, WACI Health advocated for continued and increased funding more for the fight against HIV, TB and malaria. It was rewarding when global health leaders gathered in Montreal, Canada in September, hosted by Canada’s Prime Minister Justin Trudeau, and raised USD 12.91 billion—just short of the USD 13 billion goal and the biggest commitment of funds to fight diseases in history. We were especially gratified that for the first time, African countries were at the forefront, galvanizing the world to invest more in the Global Fund. Benin, Côte d’Ivoire, Kenya, Namibia, Nigeria, Senegal, South Africa, Togo, Zimbabwe, Zambia and South Africa all made strong pledges themselves. WACI Health’s executive director Rosemary Mburu was at the forefront herself, speaking on the replenishment conference stage as a civil society expert on the opportunity the Global Fund has to end malaria.

To reach that point, WACI Health collaborated throughout the year with ACTION partners to position African leadership at the core of the Global Fund Replenishment. For example, we worked with KANCO and Kenyan CSOs to engage government officials, including Cabinet Secretary for Health Cleopas Mailu and Acting Director of Medical Services Jackson Kioko, who advocated internally for an increased Kenyan pledge to the Global Fund; that came to fruition with a pledge of USD 5 million by Kenya.

WACI Health also played a leading role in setting up the regional GFAN hub in Africa. At the Inter-Parliamentary Union meeting in Lusaka, Zambia, GFAN Africa worked with CITAMplus on joint messages for advocacy purposes and led a march of about 2,000 people to the embassies of Sweden, Denmark and the Netherlands, delivering letters urging support from their governments. The Danish MP who received our letter, upon returning to Denmark, tried to mobilize support for action on AIDS, TB and malaria. Other activities included a press conference and statements to MPs to encourage local budget allocations for health care.

LOOKING AHEAD

WACI Health plans to focus on increasing domestic resources for health through innovative financing mechanisms. We will also look at finding ways to expand financial risk protection, to ensure that health care does not drive people into a cycle of poverty.
The ACTION Leadership Group

The ACTION Leadership Group is the body responsible for ensuring that the shared vision, mission, values, and strategic aims of the partnership are upheld; providing a venue to coordinate strategically across the partnership on joint advocacy campaigns and activities; overseeing and supporting the work of the Secretariat, including financial oversight and fundraising support; ensuring that the partnership remains a “light touch,” complementing the global and national level advocacy work of partners; and agreeing on the entry and exit of partners.

Leadership Group Members as of 2016

Allan Ragi
Executive Director
KANCO

Aaron Oxley
Executive Director
RESULTS UK

Dr. Bobby John
Managing Director
Æequitas Consulting Pvt. Ltd

Carol Nawina Kachenga
Executive Director
CITAMplus

Joanne Carter
Executive Director
RESULTS Educational Fund

John Mathai
Executive Director
Global Health Advocates India

Lauren Dobson-Hughes
Former Executive Director
RESULTS Canada

Louis Da Gama
Director
Princess of Africa Foundation

Maree Nutt
Chief Executive Officer
RESULTS (International) Australia Inc

Noriko Shirasu
Executive Director
RESULTS Japan

Patrick Bertrand
Executive Director
Global Health Advocates France

Rosemary Mburu
Executive Director
WACI Health
TB patient, Manovo, 14, sits on his bed at a Basic hospital in Ambavombe, capital of the Androy region in Madagascar's remote and deprived south.