ANNUAL REPORT 2017
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Dear Colleagues,

The longer I work with ACTION, the more fully I appreciate the depth and scope of the work that we do. It is sometimes difficult, in the moment, to fully grasp how each advocacy win — big or small — adds up to fundamental changes at country and global levels. The value of this report lies in its documentation and demonstration of our collective efforts and outcomes, and it helps us understand how much we do and how we are shaping key areas of the global health agenda. Heartiest congratulations on another successful year of advocacy.

Last year had more than its fair share of uncertainty. Globally, the fight against poverty seemed increasingly polarized; while some leaders seem inclined to treat marginalized people as valueless and disposable, many others are working to address social and structural barriers that keep them on the fringes of society and outside of national economies. There were changes at the G7 level that provoked anxiety among countries of the Global South, whose development agenda is funded in part by the G7.

The reward of our work is in seeing how well our partnership works, even in the midst of the challenges. This report creates a record of our impact across the three pillars of our strategic framework: ending the epidemics, giving all children a healthy start, and building equitable and sustainable systems. In partnership building, we welcomed Health Promotion Tanzania (HDT) as our 13th partner, continuing to expand our capacity for collaborative work around the world.

I am proud of the work we do, but we cannot rest on our laurels. I pledge on behalf of the partnership to make 2018 an even better year.

In solidarity,
Allan Ragi

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Dear Colleagues,

Thank you for your support and partnership on another highly successful year for ACTION. The pages of this report are replete with examples of smart thinking, dogged determination, the fire of your collective passion to end poverty, and the benefits of a network that truly values the principles of equal partnership, local leadership, and global ambition.

We contributed to global progress again this year by deepening the relationships between advocates, policymakers, global health institutions, and communities facing inequitable access to health. We helped educate members of parliament (MPs) in more than a dozen countries so that they could make well-informed choices on health systems, tuberculosis (TB), child health, and nutrition, and recruited them as champions to make them better advocates for the communities they serve.

Beyond MP engagement, our advocates were at key global decision-making tables, such as the civil society constituencies or boards of UHC2030; the Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund); Gavi, the Vaccine Alliance (Gavi); the Global Polio Eradication Initiative (GPEI); the Global Financing Facility (GFF); Nutrition International; and the Partnership for Maternal, Newborn & Child Health (PMNCH); the G7 summit in Italy; the G20 and Civil-20 summits in Germany; the World Bank Spring and Annual Meetings in the U.S.; the Union World Conference on Lung Health in Mexico; and the Global Ministerial Conference on Ending TB in Russia — among others.

Though we are still a relatively small network of core partners, there is no mistaking the huge impact we had in key national and global spaces in 2017. That outsized impact is thanks not only to the strength of our partnership but also to the thousands of individual local experts, policymakers, volunteer advocates, journalists, researchers, and health workers alongside whom I am proud to work to achieve health equity worldwide.

Sincerely,
Hannah Bowen
ABOUT THE 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, DC-based secretariat, 13 independent ACTION partners work together to increase investments and build political support for global health. Because they disproportionately impact people living in poverty and have lacked the political prioritization they deserve, our core campaigns focus on TB, the world’s leading infectious killer; vaccine-preventable diseases; child health; nutrition; and other ways to advance universal health coverage (UHC). Over the last seven years alone, ACTION partners have helped bring more than US$15 billion to the Global Fund, $5 billion for Gavi to support poor countries in immunizing half a billion children, and $3 billion for the long-neglected fight against undernutrition.

ACTION believes that when local expertise is paired with global perspectives, we create a multiplier effect of individual and collective action. We work as equal partners to set and achieve advocacy goals that move the needle on policies and investments to secure health for all. Our work builds relationships and momentum over time that are resilient to change, as you will see in the snapshots from around the world in 2017.
Æquitas Consulting Pvt. Ltd., based in 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 non-governmental organization (NGO) established in 2005 to help disseminate information on TB-HIV and AIDS co-infection.

Global Health Advocates (GHA) 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.

Global Health Advocates (GHA) France is a NGO that focuses on engaging all sections of society to fight diseases that disproportionately affect people living in poverty and are also the leading causes of people living in poverty.

Health Promotion Tanzania (HDT) is a national NGO working for a responsible and healthy society through innovative community-based systems and standards that deliver sustainable impact. Its three program areas are policy monitoring and advocacy, community system strengthening, and knowledge and innovation.

KANCO is a membership organization established in the early 1990s in Kenya with operations in the eastern African region. Its membership comprises of NGOs, 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 (POAF), based in South Africa, was established in 2006 to complement the work of Yvonne Chaka Chaka as UNICEF and Roll Back Malaria Goodwill ambassadors in Africa. It is a nonprofit organization registered 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, based in the U.S., 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, we use our voices to influence political decisions that will bring an end to poverty.

RESULTS Japan is a nonprofit 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 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.

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.

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.
This 2017 report captures a year of growth and rich collaboration across the ACTION partnership. In a volatile, uncertain, complex, and ambiguous global environment, ACTION recorded big advocacy wins across its three impact areas: End the Epidemics, Healthy Start, and Equitable and Sustainable Systems.

We were grateful in 2017 to work closely with a cohort of trained champions, including TB survivors, doctors, researchers, and advocates, to elevate TB to the top of the global health agenda.

However, TB was not our only success story this year. We kept nutrition from falling off the development radar by influencing the World Bank’s prioritization of human capital to include investments in nutrition and by steering national and international coalitions to the most important advocacy opportunities. We also helped GPEI to raise more than $1 billion for polio eradication, and we have been at the forefront of thinking on how to make the end of the disease the start of accelerated progress for health systems overall. We produced a report, Progress in Peril? The Changing Landscape of Global Health Financing, that has helped shift the global conversation on the concept of middle-income countries “transitioning” from global financial support.

ACTION Africa, meanwhile, became a more structured forum for regional collaboration on advocacy campaigns, knowledge exchanges, and capacity building projects. We expanded our reach with the addition of Health Promotion Tanzania (HDT) as our 13th partner. We also began framing our priorities and activities within our new five-year Strategic Framework (2017–2021), published our first-ever annual report, and redesigned our website.

In 2017, ACTION secured more than $25 million in multi-year grants from leading institutional funders, including the Bill & Melinda Gates Foundation, the Children’s Investment Fund Foundation, and Capital for Good, to fund locally rooted, globally connected advocacy. These partnership resources facilitate ACTION’s networked multiplier effect while supplementing each partner’s additional organizational funding sources. Our Strategic Framework projects further growth over the next three years.

The reports that follow show why ACTION, as a strong partnership, is a powerhouse in global health advocacy. Each partner played crucial roles in the collaboration and growth that drove ACTION’s impact in 2017. The reports are in alphabetical order throughout, before and after the four feature articles: Spotlight on TB, Policy and Advocacy Manager Mandy Slutsker Takes 10, Transition Threats and Opportunities, and Building Parliamentary Champions for Nutrition.
A young student at the Early Childcare and Development Centre in Ethiopia, leads her class in reciting the alphabet. RESULTS Canada visited the centre during their 2017 MP delegation.
Taking on civil society leadership in Zambia
CITAMplus’ activities last year, and the response from government and media, reinforced its growth and increased status as a leading civil society organization in Zambia. This is evident in CITAMplus’ work on TB and its success hosting and connecting RESULTS Educational Fund volunteers with key government officials.

Linking grassroots advocacy volunteers across borders
CITAMplus hosted a team of grassroots leaders from RESULTS Educational Fund in February 2017 for a weeklong tour to promote learning and collaboration between both teams. During their stay in Zambia, the U.S. team interacted with leaders from government and non-governmental organizations and other health sector stakeholders. Minister of Justice the Hon. Given Lubinda and his Central Province counterpart and TB champion, the Hon. Sydney Mushanga, were among the ministers who met the team.

Led by CITAMplus’ executive director Carol Nawina Kachenga, the visiting team met with the Global Fund Country Coordinating Mechanism at its secretariat based at the Zambian National HIV/AIDS Council and with United States Agency for International Development (USAID) officials to help the American grassroots advocates appreciate the impact of USAID’s work in Zambia. The team also toured facilities supported by the Global Fund, including a warehouse of the Churches Health Association of Zambia, the principal recipient of the Fund’s resources.

Expanding tuberculosis advocacy
CITAMplus led on community systems strengthening and advocacy, communication, and social mobilization to increase financing from government, private sector,
and international organizations to fight TB. Through relentless effort, we reached 35 districts in 10 provinces to establish community groups of just under 600 current and former TB patients. The work complemented government efforts to trace and treat TB cases, make referrals to health centers, and sensitize community members on TB under a new project called Eradicate TB.

Tuberculosis in the Mining Sector in Southern Africa was another of CITAMplus’ active projects in 2017. Situated in the Copperbelt Province, the project focused on education around TB and silicosis, another lung condition common in the region, as well as compensation for ex-miners as a part of the Global Fund regional grant.

With financial support from the Eastern Africa National Networks of AIDS Service Organizations, CITAMplus provided support for selected civil society organizations (CSOs) and community representatives on the writing of 2018–2020 Global Fund concept notes. With funding from AIDS and Rights Alliance for Southern Africa, CITAMplus revived and strengthened community support systems in a quest to address stigma by providing training of trainers among people living with HIV and developing and distributing community-friendly information, education, and communication materials.

Another major success was a series of dialogues with MPs, urging them to advocate for increased domestic funding and policy change to support the fight against TB, among public and national leaders. Successes of the series were highlighted in the local media.

Looking ahead
The formation of a Zambia TB Caucus has been high on CITAMplus’ agenda for the last several years, and signatures have been collected from 32 MPs on the Barcelona Declaration pledging to fight TB. In 2017, deep engagement with MPs across parties brought the launch of a formal TB Caucus closer to fruition. CITAMplus anticipates launching the caucus in the first quarter of 2018 with support from Yvonne Chaka Chaka of POAF and in collaboration with the chair and vice-chairpersons of the Africa Regional TB Caucus, the Parliamentary Committee of Health, and the National TB Program.
Seizing an active political moment
France, in 2017, was dominated by presidential and legislative campaigns and elections. Advocacy groups benefited from this active environment as candidates for the major political parties all made unprecedented commitments for official development assistance (ODA). Work at the European Union (EU) level focused on ensuring effective health research and development policies in a context where aid is increasingly used to meet EU migration, commercial, and security interests.

Ensuring good policies and sufficient resources to address health
Taking advantage of the election season, GHA France worked with other civil society organizations to secure commitments from the major candidates to the presidential election in favor of ODA by organizing debates and meeting with campaign teams. Emmanuel Macron’s commitments included increasing the level of ODA spending to reach 0.55 percent of gross national income (GNI) by 2022 and not reducing the impact of ODA by tying aid to French economic interests nor conditioning its volumes to compliance with migration policies. After the elections, GHA France continued the discussion with the new government on how to meet the 0.55 percent target.

At the EU level, GHA France’s Brussels office, with fellow organizations, succeeded in ensuring the next development policy framework, the European Consensus on Development, includes a commitment to dedicate 20 percent of EU ODA to human development (which encompasses health, nutrition, education, and social inclusion). GHA France’s Brussels office also published the report Misplaced Trust: Diverting EU Aid to Stop Migration, which highlights the risk for EU ODA to be tied to the political priority of stemming migration flows.

Increasing political support for ODA and global health
Additionally, GHA France continued its work to increase awareness and knowledge of ODA and global health issues amongst MPs by creating champions in the newly elected National Assembly. GHA France worked with Oxfam France to organize an MP delegation to Senegal on UHC, TB-HIV coinfection, and child health and a follow-up delegation to Geneva to meet with global health multilateral organizations and discuss the importance of France’s role. During budget bill discussions, participating MPs called for an increase of ODA. In the end, a €100 million increase in ODA, originally proposed by the government, was voted by the Parliament, bringing ODA contributions to 0.44 percent of GNI, according to government estimations.

Looking ahead
In 2018, GHA France will focus on the global health budgets and new development instruments, including the EU multiannual financial framework (MFF), the French 0.55 percent ODA trajectory, and the related trust funds. GHA France will continue to advocate for the EU and France to increase their ODA and for this ODA to fully deliver on EU and French Agenda 2030 commitments.
A Tanzanian national nonprofit founded in 2004, HDT has its headquarters in Dar es Salaam, with offices in the Ngara, Biharamulo, Mbinga, Nyasa, and Geita districts and strives for a responsible and healthy society through innovative community health systems and standards that deliver sustainable health impact.

**Focus areas**

Currently, HDT works on TB; HIV/AIDS; reproductive, maternal, newborn, and child health; and nutrition among under-five children and pregnant women. Its theory of change is built on three pillars: knowledge and innovation, policy monitoring and advocacy, and community system strengthening.

“It’s a great privilege to join the ACTION partnership,” Bujari said. “We will help to build the global network of champions, responsive institutions, and engaged communities needed to sustain political will and political action on global health. In Tanzania, we will support the government’s overall goal of reaching all households with quality essential health and social services.”

Bujari counts more than a decade of strategic advocacy experience — putting a human face behind the numbers, building local evidence for national and international advocacy, and holding government accountable — as HDT’s key organizational strength and contribution to the ACTION partnership.

**Health policy wins**

Collaboration is not new to HDT. Joining forces with important local, national, and international organizations, HDT has achieved significant health policy wins for its communities. These include working with Baltimore-based Johns Hopkins University’s Bloomberg School of Public Health to increase the government of Tanzania’s national family planning budget from 2 billion Tanzanian shillings in 2013 to 14 billion in 2017. Together, they also successfully advocated for the inclusion of a special provision in the Public Procurement Act 2016 to fast-track lifesaving medical commodities, which will lessen the incidences of essential medicines being out of stock.

Among its current portfolio, HDT’s work on the Advance Family Planning project pushes forward the vision of the July 2012 London Summit on Family Planning to “enable at least 120 million women and girls in some of the world’s poorest countries to use contraceptives...without coercion or discrimination by 2020.” The Tanzanian government has committed to providing resources to increase usage from 3.8 million in 2017 to 4.3 million in 2020. HDT and other local CSOs promote the political commitment and track progress toward attaining these goals in Tanzania.

In addition to health advocacy, HDT works in community mobilization and community-based health interventions. HDT’s PEPFAR-funded Civilian, Community HIV Prevention and Home-Based Care Services project targets adolescent girls and young women 15–24 years of age, men who have sex with men, female sex workers, and people who inject drugs. By providing HIV prevention services, voluntary counseling and testing, and care and treatment, HDT and partners contribute to the UNAIDS 90-90-90 targets for 2020: 90 percent diagnosed, 90 percent of those who are diagnosed on treatment, and 90 percent of those on treatment retained.

**Partner collaboration**

ACTION partners KANCO and WACI Health worked with HDT for more than a decade on several programs. Most recently, they produced an analysis on nutrition and the Global Financing Facility in collaboration with the Partnership for Nutrition in Tanzania.

Allan Ragi, chair of ACTION’s Leadership Group, observed that HDT is well positioned to lead advocacy in Tanzania and complements ACTION’s ongoing work in East Africa overall. This includes advocating for investments in effective health services for the poorest and most underserved people and pushing for policy changes that improve outcomes in child health, nutrition, infectious disease treatment, and sustainable health systems.
A year of strong collaboration with government and civil society
KANCO navigated a challenging year in national politics to record significant successes in its portfolio. KANCO's accomplishments reflect the strength of its collaboration with government and CSOs, our grassroots advocates, and alliance with multilaterals, such as Gavi.

Health resources advocacy
The general elections presented an opportunity to advocate for increased domestic resources for health, after the World Bank reclassification of Kenya from a low-income country to lower-middle income, which was expected to significantly affect the country’s access to external resources for health financing. Following discussions with political leadership around the Citizens Health Manifesto developed by CSOs across the country with the help of KANCO to define key health goals, health was prioritized in the political parties’ manifestos. After the election, the new government also prioritized UHC, food security, and nutrition in its “Big Four Plan” for economic development.

Global Fund engagements
In the development of Kenya’s Global Fund proposal in 2017, KANCO coordinated engagement of CSOs and communities to ensure input from national- and county-level governments and CSOs. Consequently, 10 percent of the drafting team was from CSOs and communities. KANCO was also nominated to chair a community system strengthening sub-committee that received an allocation of $4 million, or 10 percent, of the Resilient Systems Strengthening for Health grant of $44 million.

Additionally, KANCO facilitated negotiations leading to a 30 percent increase of resources to non-state actors for the implementation of activities to fight HIV, TB, and malaria. This was a 22 percent increase from the previous grant which had only allocated seven percent for non-state actors activities, excluding purchasing of drugs. The Kenyan government also committed $2.8 million per year as co-financing for the grant as a conditional requirement. Other advocacy wins included allocation of more than $70 million toward streamlining nutrition support to TB patients and people living with HIV. In addition to improving efficiency in distribution of therapeutic foods, the National AIDS and STI Control Program, in collaboration with Kenya Medical Supplies Agency and the Ministry of Health Nutrition Department will closely monitor implementation of these interventions.

Grassroots advocacy
All 14 chapters of our grassroots advocates were deeply engaged in 2017. Advocates from Murang’a county’s two wards influenced resource allocation of $34,000 for the environmental program for the first time. In addition, $4 million was allocated to existing incomplete health facilities, representing about 59 percent of the total budget for the two wards for the health sector. Similarly, in the Nyeri chapter, citizen advocates influenced the development of guidelines on how to manage facility improvement fees. (Facilities fees impose user fees on patients and undermines universal access to care).

Supporting immunization
KANCO received an award for supporting routine immunization in Kenya from the Ministry of Health. This was followed by a grant from Gavi of $3.6 million to work on immunization advocacy in 17 counties in Kenya. The objectives of the grant are to accelerate strong political engagement; improve governance and financial sustainability; and address equitable access to, and utilization of, routine immunization services by 2020.

Looking ahead
KANCO plans to engage the Ministries of Health, Agriculture, and Foreign Affairs; Parliament; media; and key stakeholders at the county level to promote accountability for results of Global Fund grants, an increase in domestic resources for health by five percent, and strong operationalization of the 2017 Health Act in Kenya. KANCO plans as well to document lessons learned on Global Fund engagement processes at the country level.
Princess of Africa Foundation (POAF) continues to help amplify the voices of marginalized communities, including children and people living in poverty or with HIV/AIDS and TB. Advocacy includes collaboration with the South African government, the World Bank, UNICEF, and global health agencies such as Gavi and the Global Fund.

Hope for every child

Founder Yvonne Chaka Chaka works across the ACTION partnership, using her celebrity to drive attention to its mission and work. At an event marking the Day of the African Child in Namibia in 2016, Chaka Chaka pledged to do her part to enhance and uphold children’s rights. She made good on her word in July 2017, championing the rights of disabled children with the release of the song “Kulila,” recorded with children of Walvis Bay’s Sunshine Children’s Centre. The song was produced in collaboration with UNICEF and Gerson Mwatile, music teacher at Walvis Center who wrote the song. POAF is deeply appreciative of their support.

Prioritizing nutrition

In April, Chaka Chaka was a panelist at the “Spotlight on Nutrition: Unlocking Human Potential and Economic Growth” event co-hosted by the World Bank and UK Department for International Development (DFID). Panelists included the Permanent Secretary Department for International Development Mark Lowcock, World Bank President Jim Yong Kim, Tata Chairman Ratan N. Tata, Guatemala Minister of Public Finance Julio Hector Estrada, and Nigeria Finance Minister Kemi Adeosun. Kenyan media personality and entrepreneur Julie Gichuru chaired the panel and summarized how each country planned to take action to scale-up action on nutrition.

In September, Chaka Chaka advanced her argument with an op-ed published by Devex titled “The world needs to invest in childhood nutrition to ensure a healthy future.” The piece focused on the importance of investing in proper nutrition, aligning it with ACTION’s aim to give all children a healthy start, with equal opportunities for girls and women to thrive.

Unite to end TB

Chaka Chaka served as program director for the launch of South Africa’s National Strategic Plan on HIV, TB and STIs 2017–2022 (NSP), supported by President Cyril Ramaphosa, who was deputy president then, and Minister of Health Dr. Aaron Motsoaledi. UNAIDS Executive Director Michel Sidibé attended the event along with representatives of other UN agencies and CSOs. In partnership with the South African Department of Health, Aeras, FIND, and TB Alliance, Princess of Africa Foundation co-chaired a leadership engagement dinner on TB to mark the formal launch of the NSP.

Health for all

In October, Chaka Chaka participated in the Global Fund, Gavi, Global Health Innovative Technology Fund (GHIT), and other global health institutions (GGG+) Forum organized by RESULTS Japan to encourage their government to increase contributions to global health security and universal health coverage. Through the GGG+ Forum and a closed-door meeting with the Prime Minister’s senior advisor, Chaka Chaka and other ACTION representatives urged the government to use its December 2017 UHC Forum to demonstrate progress. Chaka Chaka returned to Japan to see this advocacy through and witnessed Prime Minister Shinzō Abe announcing a pledge of $2.9 billion during the UHC Forum and vowing that no one will be left behind.

Chaka Chaka co-moderated the closing session of the UHC Forum where fellow ACTION partner WACI Health’s executive director, Rosemary Mburu, was a speaker alongside leaders from the Japanese government, WHO, World Bank, and UN. Mburu achieved the distinction of being the only civil society representative to speak at both the opening and closing sessions.

Looking ahead

Princess of Africa Foundation will continue to drive progress in Africa toward achieving the Sustainable Development Goals (SDGs) — in particular, the goal of “healthy lives and well-being for all at all ages.”

POAF founder Yvonne Chaka Chaka exchanges greetings with now-South African President Cyril Ramaphosa.
Back in 2004, a small group of advocates came together to launch a campaign called “Advocacy to Control TB InternationaLLy.” Over the next decade, it evolved into the ACTION global health advocacy partnership.

At the time, TB was a largely neglected driver and consequence of poverty, impacting millions of people around the world. World Health Organization (WHO) 2007 data shows that a decade ago an estimated two billion people, or one-third of the world’s population then, were infected with the bacteria. ACTION became one of the few groups catching political leaders’ attention, but it was not easy to build the awareness needed to reduce the prevalence and impact of the disease.

Although preventable and treatable, TB still kills an average 1.7 million people each year — making it the deadliest infectious disease in the world. Too little investment in treatment support as well as research and development (R&D) into new ways to fight the disease allowed it to flourish — increasingly, in drug-resistant forms. ACTION’s work over the past 14 years to build a larger and more robust coalition of political champions, advocates, and experts around the world has dramatically changed the dynamics. TB is now at the top of the global health and development agendas with targeted efforts to end the epidemic by 2030.

**Accelerating the global response**

Efforts continued in 2017 as the partnership connected TB advocates to influencers and policymakers in their own countries and in high-level international fora — from the Australian Parliament to the WHO Global Ministerial Conference, “Ending Tuberculosis in the Sustainable Development Era: A Multisectoral Response,” held in Moscow.
Kenyan TB survivor and ACTION media champion Timpiyian Leseni giving the opening address at the WHO Global Ministerial Conference.
Early in the year, ACTION held its 11th global media champion training in Paris, supporting 10 participants from nine countries, to hone their skills and identify the most meaningful ways to tell their stories and persuade political leaders to invest in the TB response, including R&D into better diagnostic tools and treatment. Participant Yuliya Chorna, TB advocacy project manager at Alliance for Public Health, Ukraine, described the workshop and direct advocacy as “transformational — well-balanced in terms of process and results.”

The program set the stage for the rest of the year as ACTION staff and the newly trained champions made their mark on high-level events. Kenyan advocate and multi-drug resistant TB (MDR-TB) survivor, Timpiyian Leseni, and South African survivor and health worker, Ingrid Schoeman — both ACTION-supported champions — raised pertinent issues about TB and the need for greater awareness and action during the Moscow meeting. Leseni gave the opening address, taking the stage just before Russia President Vladimir Putin. Prior to the summit, KANCO and WACI Health worked with CSOs to convince the Kenyan government to send the minister of health as its representative and to increase government investment in LAM technology, a simple diagnostic tool that detects the presence of TB in urine samples among people with late-stage AIDS. While in Moscow, the Kenyan minister announced that his government would invest $300,000 in the technology.

ACTION partners also helped to shape the G20 leaders’ communique and the Moscow Declaration through formal and informal civil society consultations, work with the Global TB Caucus (a network of more than 2,300 parliamentarians from 130 countries committed to ending TB), and direct engagement with their governments’ representatives in the negotiations.

We continued to build and broaden the TB movement by engaging and supporting civil society, researchers, and other stakeholders in fora such as the Union Conference in Guadalajara, Mexico, in October, and the International Conference on AIDS and STIs in Africa (ICASA) in Abidjan, Côte d’Ivoire, in December. ACTION hosted multiple sessions to educate TB stakeholders about where TB fits in the global antimicrobial resistance (AMR) agenda, mobilize civil society around the Moscow Ministerial Conference and the upcoming United Nations High-Level Meeting (UNHLM), and raised awareness about the potential impact of Global Fund transition on the TB response and health systems in middle-income countries.

Building momentum toward 2018

The evidence of political will we saw in 2017 is a harbinger for 2018, with ACTION joining civil society, governments, WHO leadership, and other stakeholders to raise ambitions for the first-ever UN HLM on TB, in September 2018. Hopes are high that the heads of state who attend the HLM will build on their ministers’ Moscow Declaration and endorse bold new approaches to TB prevention and treatment.

Reflecting on the partnership’s goals for 2018, RESULTS Educational Fund Executive Director Joanne Carter noted, “for a disease that’s largely preventable, treatable, and curable, we cannot be satisfied with a status quo that fails to reach one out of every three people. This is an equity issue. It’s well within our collective power to reach every person with testing, treatment, and care — if we muster the resources and focus.”

More than a decade of advocacy on TB has taught us that it takes smart and unrelenting efforts to realize every small measure of success. We have learned, too, that it is impossible for any one entity to secure meaningful progress if we work in a vacuum. The design of the ACTION partnership, therefore, is uniquely equipped to bring together affected communities, policymakers, and other key stakeholders to make the fight against TB a driver of broader global health progress. We have good reasons to be hopeful for 2018.
1. How long have you been with ACTION?
I joined ACTION in April 2010 as a research associate, and I have been the lead on TB advocacy since October 2011.

2. You are the longest serving member of the Secretariat team in 2017. Why have you stayed?
Because I believe the work we do is important, and I enjoy working with people from all over the world.

3. How has ACTION changed during your tenure?
We have expanded our work beyond TB to include child health and nutrition. Our mission was originally solely on TB. Now we advocate on health in a more holistic way.

4. How did you become interested in international development, global health, and TB?
Previously, I worked in biosecurity at the U.S. National Institutes of Health. My interest in global health developed after I volunteered at an orphanage near Cape Town in 2005. At that time, people were just getting access to lifesaving HIV treatment, and I saw lives were transformed as a result. I also saw other lives cut short because they did not have access, and I became aware of the impact of the dual burden of TB and HIV. I was shocked at how little I knew about TB, and I was inspired to learn and do more to combat its prevalence and support affected communities.

5. What is your greatest achievement for the portfolio to date?
Being able to support the formation of the Global TB Caucus. The idea for the Caucus came from UK MP the Rt. Hon. Nick Herbert, who attended an interparliamentary delegation with ACTION in 2013. He had the opportunity to engage with a U.S. Member of Congress and was inspired to form the caucus as a result, which was launched at the Union World Conference on Lung Health in Barcelona, October 2014. Each member signed the “Barcelona Declaration,” committing to ending TB in their countries. The MPs have significantly impacted the work on TB, including the Global Fund replenishment in 2016, and they are now playing a key role in the HLM.

6. What were the major portfolio accomplishments in 2017?
The media training we held with 10 advocates was significant to our 2017 successes, overall. Our partners also engaged their governments around prioritizing TB at the G20 level; RESULTS UK successfully advocated for specific language on providing incentives for investment in R&D in the outcome documents signed by G20 heads of state. This marked a big step forward in our work.

7. Do you consider the UNHLM on TB a major accomplishment, and can you describe ACTION’s role bringing it to fruition?
Just getting the meeting is a huge accomplishment. This will be the first time TB is addressed at the head-of-state level. We worked with allies at the Stop TB Partnership and WHO to get the meeting on the UN agenda. Now, we are playing a major role in shaping it through the UN missions in New York. Through my role as co-chair of the civil society and affected community advisory panels, we are working with partners to get heads of state to attend and commit to a strong political declaration.

8. What do you hope for from the UNHLM on TB?
A declaration with specific, measurable, and time-bound commitments for countries to find and treat all people with TB using an equitable, rights-based, and people-centered approach.

9. Post-UNHLM on TB, how can advocates hold world leaders accountable to end TB by 2030?
Hopefully, the declaration will include a call for regular UN reporting and review, which will allow us to hold leaders accountable. Regardless of the outcome of the HLM, we at ACTION push for strong investments in TB and can hold our governments accountable by tracking commitments through tools such as ACTION scorecards, utilizing the media to put pressure on government leaders, and engaging MPs to champion TB within government.

10. What do you hope to be your biggest impact on ACTION?
I want to help make ACTION stronger by supporting partners’ work and encouraging all our members to share their knowledge and lead.
A mother and child in Kano State, Nigeria, one of the last polio endemic regions in the world.
transition
threats and opportunities

At a time when there is increasing thrust toward UHC and we have seen dramatic progress made through global cooperation, the global health financing landscape is shifting. With both the World Bank’s International Development Association (IDA) and Gavi gearing up for influential mid-term reviews, GPEI beginning to wind down programs, and many of the major financing institutions — including IDA, Gavi, GPEI, the Global Fund, GFF, WHO, and others — all working on major resource mobilization efforts by 2020, 2017 was a critical year for health advocates to be heard on the issue of global health financing.

The general lack of awareness of, and preparation for, middle-income countries being “transitioned” out of global donor funding for health loomed large as a threat to health systems. ACTION launched Progress in Peril: The Changing Landscape of Global Health Financing on the sidelines of the UN General Assembly in September; the report describes the risks and opportunities of simultaneous transition — when two or more of the previously mentioned financing institutions will wind down funding. Our analysis suggests that at least 24 countries face the withdrawal of two or more of these major funders within the next five years, with seven countries potentially transitioning out of three funding programs.

Domestic resource mobilization

“The reality is, no country should make development plans that focus too much on external funding,” says WACI Health Executive Director Rosemary Mburu. “The unpredictability across global systems is making this point strongly for us. We must each insist that our own governments manage our resources efficiently, allocate the funds needed strategically, and mobilize private sector support to help fund key domestic programs like universal health coverage. But, we also need to be ambitious about maintaining and even expanding global partnerships to fill funding gaps and spur innovation.”

In the ACTION report and the partnership’s work throughout 2017, we have pushed advocates, government representatives, and multilateral financing institutions to consider a way forward: expanding political commitment by leaders in low- and middle-income countries to invest domestic resources in health; reframing eligibility criteria for external health funding to incorporate sustainability; improving coordination at the country and global levels; and scaling up global and regional resources for targeted, equity-focused post-transition support in middle-income countries.

ACTION’s advocacy

Specific areas of transition advocacy in 2017 included the following:

• Partners using their voices on the boards and constituency groups of major global platforms to raise the issues of simultaneous transition, engagement with countries post-transition, and strengthening immunization and surveillance systems. In 2017 alone, ACTION-affiliated staff had roles in the leadership of the Global Fund Advocates Network (GFAN); GPEI Polio Advocacy and Communications Team; and the board constituencies of the Global Fund, Gavi, and GFF.

• In November, RESULTS Australia and RESULTS UK released a joint publication, A Balancing Act: risks and opportunities as polio and its funding disappears, to make more specific recommendations around transition from GPEI. Grounded in case studies on Nigeria and Pakistan, the report found that funding will be cut in half from 2017 to 2019, leaving significant challenges for the 16 countries that receive 95 percent of GPEI’s overall support — but also that it is still an “opportunity to use GPEI wind-down to strengthen routine immunization programs, and provide technical and financial support to build capacity for transition planning and implementation.”

• Through a delegation to Nigeria to cover polio organized by ACTION, journalists from the UK and Australia connected to programs at the front lines of eradication efforts, which also support a health system that GPEI wind-down will significantly impact.

• During the ICASA conference, WACI Health and RESULTS Educational Fund used ACTION’s report as a tool to raise awareness among civil society engaged with AIDS, TB, malaria, UHC, and AMR about how transition could impact their work and communities as well as the opportunities it presents.

Crucial mid-term reviews

Building on our analysis and advocacy in 2017, ACTION is hopeful that the mid-term reviews of progress by both Gavi and IDA, scheduled for 2018, will address the need for a more organized transition — including post-transition support — and for lower-middle-income countries to focus on mobilizing domestic resources to close the projected gaps in the short term and fund sustainable systems in the long term.

“It’s a moment of reckoning for all of us who want to see more equity in health,” agrees Yvonne Chaka Chaka, founder of Princess of Africa Foundation. “The gross national income or other similar measure may say that a country is able to fund universal health coverage without global partnerships, but we know that by any practical measure, many health systems are not there yet. It’s every country’s responsibility to take care of its citizens and to do our part for advancing global goals.”
ACTION continued its work with the nutrition community to build a cadre of parliamentary champions to serve as advocates for nutrition and early childhood development across party lines and across borders. As part of that work in 2017, we engaged MPs in multi-country networks at the World Bank Spring and Annual Meetings, as well as the Scaling Up Nutrition (SUN) Global Gathering in Cote d’Ivoire in November, to facilitate discussions and collaboration around common goals and how to achieve them.

RESULTS Canada, RESULTS UK, GHA France, and ACTION Secretariat staff, along with ACF, supported six MPs to attend the Parliamentary Network on the World Bank and IMF’s Global Parliamentary Conference in April 2017 and led a session on investing in the early years in the conference program. ACTION and ACF also hosted a full-day meeting of a group of 19 MPs from Bangladesh, Bermuda, Burkina Faso, Cameroon, Canada, Kenya, Latvia, Malawi, Mauritania, Niger, Nigeria, and Tanzania, who named themselves “Parliamentarians for Investing in the Early Years.”

Participants were briefed on critical resources and key moments as well as ongoing activities by World Bank staff, the coordinator of the SUN movement, and a representative from the African Leaders on Nutrition. They discussed a set of commitments that they would make at the national, regional, and global level.

ACTION also served as a bridge between the growing community of parliamentarians working with SUN. At the SUN Global Gathering, ACTION led a thematic session on parliamentary and media engagement. ACTION partners continue to advise on the ongoing development of a workstream on parliamentary advocacy through SUN, along with partners from UNICEF, ACF, Nutrition International, and others.
RESULTS Australia enjoyed a year of consistent advocacy and great outcomes in all our three main areas of focus: TB, polio, and volunteer engagement.

**Raising TB awareness**

TB advocacy built on ongoing efforts to raise parliamentary awareness and cultivate political champions and included several high-profile activities. One hundred guests from parliament, government departments, and civil society attended a World TB Day breakfast at Parliament House in March. Valda Kereu spoke about the impact of TB in Papua New Guinea, sharing a compelling story from the perspective of both a patient and the parent of a child who had TB.

In February and May, respectively, RESULTS Australia hosted UK MP and chair of the Global TB Caucus Nick Herbert, and Eric Goosby, MD, UN Special Envoy on TB. They both met with Minister for Foreign Affairs and Trade, the Hon. Julie Bishop, and spoke with the Australian TB Caucus. Goosby traveled to the Torres Strait Islands with RESULTS Australia CEO Maree Nutt and MP and co-chair of the TB Caucus, Warren Entsch, to see the impact of the disease in far north Queensland and Papua New Guinea.

**Long-term advocacy rewarded with multi-million-dollar pledge**

The Australian government, as part of its commitment to fighting multi-drug resistant TB (MDR-TB) in Papua New Guinea, and in partnership with the World Bank, pledged AUD$20 million to the Emergency Tuberculosis Project, the outcome of some of our long-term advocacy.

Additionally, the government launched its Indo-Pacific Health Security Initiative in October to combat the challenges of existing and emerging infectious diseases for Australia and the region, with a commitment of AUD$300 million over five years. Under the Initiative, up to AUD$75 million was made available for Product Development Partnerships that address drug resistance in TB and malaria and innovations for vector control.

**Influencing broader ODA policy**

Early in the year, RESULTS Australia volunteers made submissions to a Foreign Policy White Paper issued by Prime Minister Malcolm Turnbull and Bishop, sharing their vision of what Australia should be — and how their values of equity in health, education, and generosity should be reflected. This was followed by a study tour in August when volunteers held more than 40 meetings with MPs. They advocated for, and secured a pledge of, AUD$30 million for emergency relief in Africa and the Middle East — AUD$20 million for relief to 13 million people who have fled their homes in Somalia and South Sudan and AUD$10 million to dislocated communities in Yemen. The efforts continued with Anti-Poverty Week events in October in Sydney, Hobart, Perth, and Melbourne.

**Polio eradication**

RESULTS Australia marked World Polio Day in October with an event in Parliament House attended by more than 80 parliamentarians and staffers. Partnering with Global Citizen, Rotary International, UNICEF, and Polio Australia, we celebrated our One Last Push parliamentary champions. This event followed a pledge by the government in June of AUD 18 million in additional funding for GPEI as part of its call for pledges to complete the task of polio eradication.

**Looking ahead**

RESULTS Australia anticipates an equally active and productive 2018 with the UN HLM in September and the very real possibility of the last new case of polio next year as well. We plan to be on the frontline — ensuring that the Australian government maintains its commitment to both major human development goals.
A year of productivity and progress

RESULTS Canada had a highly productive 2017 with progress made in several key areas. Most notably, it helped to secure a significant win in the fight to end polio and to raise the profile of nutrition and TB on the Canadian and global stage.

Impact

RESULTS Canada citizen advocates wrote letters to decision-makers, met with their MPs, and raised the profile of polio in the media. The group’s effort helped secure a pledge of CAD$100 million over three years from the Canadian government to GPEI to help eradicate the disease. Conscious that the work is not over, RESULTS Canada will continue to work to ensure the political will necessary to see this fight through to the end.

Influence

RESULTS Canada increased its network of parliamentary champions who are committed to using their positions to help end extreme poverty. In August, MPs Yasmin Ratansi, Matt Jeneroux, and Iqra Khalid joined RESULTS Canada staff on a delegation to Ethiopia. They saw first-hand the impact of Canadian development investments in reducing malnutrition and advancing early childhood development. Since then, the MPs have been actively engaged on critical global health issues and encouraging their constituents to join RESULTS Canada’s network of citizens advocates.

The need to advance R&D on TB was also an important focus area for RESULTS Canada in 2017. The year began with a successful research and development showcase on Parliament Hill. Organized by RESULTS Canada and hosted by the Canadian All-Parliamentary Global Health Caucus on HIV, TB and Malaria, the event was attended by the Ministers of Health and of International Development, among dozens of other parliamentarians. The caucus is a group of MPs from all political parties who work to create the political will to end HIV/AIDS, TB, and malaria. This work has put Canada in a pivotal position to show leadership in 2018, including at the forthcoming UN HLM on TB.

Partnership

Some of the year’s biggest successes resulted from working with sector allies. RESULTS Canada was a part of a core group of organizers, alongside Action Against Hunger (ACF) and Nutrition International, that organized the “Nutrition: Cornerstone of Gender Equality” conference in Ottawa, linking nutrition themes to the Canadian government’s focus on a feminist international assistance policy. The conference brought together 11 Canadian organizations and more than 100 participants. Speakers included representatives from the Canadian government, Global Affairs Canada, Women Deliver, UNICEF, World Food Program, Global Nutrition Report, and Global Financing Facility.

The conference was followed by a parliamentary event hosted by nutrition champion and MP Pam Damoff. Keynote speeches were given by HRH Princess Sarah Zeid of Jordan and Dyan Rodriguez, an inspirational nutrition advocate from the Philippines who came to Canada to share her story of successful grassroots activism in the Philippines after participating in ACTION media and advocacy training in 2015.

Another ACTION champion, TB survivor Nandita Venkatesan, visited Ottawa in October to address the Canadian Conference on Global Health advocacy workshop. She drew attention to the horrors she experienced with MDR-TB and the power of advocacy. She also met with members of the Global Health Caucus on HIV, TB and Malaria and RESULTS Canada volunteer advocates to discuss the global gaps in TB funding.

Looking ahead

RESULTS Canada anticipate that 2018 will be just as productive as 2017, with tremendous opportunities to take advantage of Canada’s increasing prominence on the world stage. Canada will host the 2018 G7 Summit, and RESULTS Canada is pushing for leadership from the Canadian government that paves the way for progress on the issues that affect the world’s most vulnerable.
Inspiring advocacy and action across the United States

As a new presidential administration and Congress swept into Washington, DC, in January 2017, Maurine Murenga was in Ames, Iowa, mobilizing the local community around global health advocacy.

Murenga, a longtime ACTION champion and advocate from Kenya, was diagnosed with HIV in the early 2000s. At the time, treatment was slowly becoming available in lower-income countries after years of a diagnosis equaling certain death.

She was able to get access to treatment through the newly formed Global Fund — and then fought to make sure that others like her had the same chance to survive. A support group she joined turned into an advocacy group, and eventually, she started an organization in Nairobi focused on supporting adolescent girls living with HIV and TB.

Murenga worked together with volunteer advocates from RESULTS Educational Fund who were making clear to U.S. policymakers that constituents in every corner of the country — rural and urban; red states and blue states — cared about global health and wanted to see the U.S. maintain its role.

Murenga visited 11 cities in seven states — Iowa, Wyoming, South Dakota, North Dakota, New York, New Hampshire, and Delaware — as part of her whirlwind advocacy tour around the United States. The goal was not only to increase political support for crucial global health issues during a politically fraught moment, but also to mobilize new communities to get involved in advocacy and help grow the RESULTS movement.

The tour was a rousing success, garnering attention on TV and in newspapers across the country, calling policymakers into action in the fight for equitable access to health.

“The tour was a rousing success, garnering attention on TV and in newspapers across the country, calling policymakers into action in the fight for equitable access to health.”

Looking ahead

RESULTS Educational Fund will continue to fight for better policies, increased resources, and continued bipartisan U.S. leadership on global health.
A well-executed advocacy agenda
RESULTS Japan successfully executed multiple high-level projects in 2017, focused on government and multilateral health and nutrition agencies, including WHO, Global Fund, Gavi, Global Health Innovative Technology (GHIT) Fund, UNICEF, World Food Program, and the Food and Agriculture Organization.

RESULTS Japan also worked closely with ACTION partners, particularly the Princess of Africa Foundation, with founder Yvonne Chaka Chaka visiting in March, October, and December. During her visits, Chaka Chaka met with several policymakers to help deepen their understandings of the health issues in Africa. Her presence was well-received and her visits widely regarded as great advocacy moments for RESULTS Japan.

Funding research and development to fight TB
RESULTS Japan’s advocacy goals included an ambitious effort to raise 90 billion yen in the three years from 2017 through the end of 2019. Targeted activities focused on executives of three key ministries — the Ministry of Foreign Affairs, Ministry of Finance, and Ministry of Health Welfare and Labor — to advocate for sufficient funding through the supplementary budget to cover the unpaid sum from Japan’s 2014–2016 Global Fund pledge as well as contributions to global health through various channels including the Ministry of Health, Welfare and Labour’s contribution to the WHO, GHIT’s work on TB, JICA’s health ODA, and through the cabinet secretariat. To strengthen Japan’s R&D system on TB, RESULTS Japan held public-private discussions with the three ministries. An example of public-private collaboration on R&D, the GHIT Fund announced in mid-2017 that it had reached its $200 million replenishment target thanks in large part to the contribution of the Japanese government. RESULTS Japan’s previous work to elevate the opportunities around R&D for TB and other infectious diseases helped contribute to that success and open the door for expanded R&D partnerships.

GGG+ Forum and other advocacy activities
More than 400 people participated in the 2017 GGG+ Forum, including experts on nutrition, malaria, sanitation, gender, and child health. High-level politicians, donors, and civil society attendees included Dr. Hirotó Izumi, advisor to Prime Minister Shinzō Abe; Dr. Shinichi Kitaoka, president of Japan International Cooperation Agency; executives from the Global Fund, Gavi, GHIT Fund, WHO, UNICEF, GPEI, and UNDP; and ACTION partners Chaka Chaka, Princess of Africa Foundation Director Louis Da Gama, KANCO Executive Director Allan Ragi, ACTION Secretariat Director Hannah Bowen, and RESULTS Educational Fund Program Development Director Victoria Treland.

In her address, Chaka Chaka urged Japanese leaders to support UHC and reduce infectious diseases such as AIDS, TB, and malaria. She also called for support to decrease malnutrition and increase gender equity, all of which she said are necessary to achieving the Sustainable Development Goals (SDGs).

RESULTS Japan launched the first GGG+ Forum in 2016 to advocate for contributions from the government for global health, including TB and other infectious and/or vaccine preventable diseases. The Forum was aimed at encouraging the Japanese government to invest more resources to achieve global health security ahead of the UHC Summit in December 2017.

Other notable efforts include advocacy to strengthen budgetary support for refugee assistance in Gaza through the UN Relief and Works Agency for Palestine Refugees (UNRWA).

Looking ahead
RESULTS Japan plans to continue its advocacy efforts in 2018 to ensure that Japan plays a lead role in promoting global health and helping developing countries meet the SDGs. Central to this will be Japan’s role as co-host of the UN HLM on TB from which we hope will come global consensus on ending the disease by 2030.
Fast-tracking progress on TB, child health, and nutrition

It was a lively and challenging year for UK advocacy. Parliament triggered Article 50, indicating its intention to leave the European Union, the country voted (again) in a dramatic general election, and a new Secretary of State was appointed to lead the Department of International Development (DFID). By working nimbly, we helped fast-track progress on TB, child health, and nutrition.

Influencing the G20 on TB

In 2016, the G20 recognized AMR as “a serious threat to public health, growth, and global economic stability,” placing it on the agenda for the 2017 G20 under the German presidency. Our mission was to ensure that TB was at the center of discussion on AMR and in any resulting initiatives.

Our G20 advocacy took us from Vauxhall in London to Berlin, via Number 10 Downing Street. We worked with our partners to align key messages and asks for Sherpa teams around the world, and we used our position as a co-chair of the Civil Society 20 Health Working Group to make clear recommendations on which issues are elevated by world leaders.

On July 8, 2017, ACTION partners were delighted to see the G20 call for a new platform to incentivize research and development to tackle drug-resistant infections and thrilled that the specific threat of TB was included in the communique.

Government commits to eradicating polio

Building on efforts in 2016 to develop the One Last Push network of UK parliamentary polio eradication champions, we persisted with work to show the government that there was strong public and political support for a bold pledge to GPEI. Our grassroots campaigners worked with parliamentary champions to get signatures on a letter to the Secretary of State pledging support for a new financial commitment. More than 60 MPs from across the political spectrum signed the letter.

On July 4, 2017, former Secretary of State for International Development the Rt. Hon. Priti Patel, announced a £100 million commitment to GPEI — the exact amount we had been calling for. The funds will help immunize 45 million children each year until 2020. To celebrate the UK’s leadership on polio eradication, 15 politicians from opposite ends of the political spectrum joined a basketball match with the British Paralympic team led by medalist and polio survivor Ade Adepitan in Trafalgar Square.

Championing nutrition

We worked closely with Government Whip Baroness Manzoor to elevate nutrition as a political priority in Parliament, drawing on her experience joining a 2016 delegation to India that we organized with advice from our partners Æquitas and GHA India. In February, the former National Health Service regional director secured a debate in the House of Lords, questioning the government and other peers on political leadership for nutrition, micronutrient interventions, and food fortification; the debate emphasized nutrition as a foundation for development.

We advanced our work on nutrition in August with a parliamentary delegation to Tanzania with new MPs David Linden and Henry Smith; shadow International Development Minister Roberta Blackman-Woods; and long-time nutrition champion, Lord David Watts. They visited communities under DFID’s Enhancing Nutrition Services to Improve Maternal and Child Health programs, which are aimed at empowering marginalized populations to access essential health, nutrition, and school readiness services. The delegation allowed these policymakers to witness firsthand the important links between nutrition and education.

The G7 summit in Milan in November provided an opportune moment to reinvigorate the nutrition community, following the disappointment of 2016’s Nutrition for Growth (N4G) event in Rio. We pushed for an announcement from the government, resulting in the unlocking of all its 2013 N4G matched-fund commitment — £84.2 million.

Looking ahead

Our mission in 2018 is to ensure that the UK plays a leading role in making the first-ever UN HLM on TB a success, to highlight the risks and opportunities posed by the wind-down of the GPEI for immunizations among key stakeholders, and to work with stakeholders to keep nutrition firmly on the government’s agenda, with women and adolescent girls front and center of their development programs.
Responding to global health challenges through policies and accountability

WACI Health’s advocacy work in 2017, in line with its 2016–2020 Strategic Plan, focused on responding to global health challenges through 1) increased resources for health, 2) policies that improve health and facilitate health equity, and 3) improved accountability on health delivery and governance.

Cultivating champions for resource mobilization

Cultivating high-level champions to support increased domestic investments and Global Fund resource mobilization was central to WACI Health’s work in 2017. In August, Executive Director Rosemary Mburu advanced this agenda at a high-level meeting in Italy organized by the Italian Ministry of Foreign Affairs, Italian Ministry of Health, and the Global Fund to help create political momentum beyond the G20 and G7 summits and prepare for the G7 Health Ministers’ Meeting in Milan in November. In her address, Mburu reminded the audience that the Global Fund partnership has saved more than 22 million lives in implementing countries.

Responses from the audience affirmed the value of voices from implementing countries supporting the work of the Global Fund to build high-level champions for Global Fund resource mobilization.

In collaboration with the African secretariat of the Parliamentary Caucus on TB, WACI Health also engaged parliamentarians from across Africa to cultivate support for domestic investments and Global Fund resource mobilization. Kenyan MP, the Hon. Stephen Mule, chair of the Africa TB Caucus, co-published a blog on domestic investments titled “We Must Invest in TB-HIV Programming or Lose Two Fights at Once.”

Civic engagement and civil society strengthening

Through GFAN Africa, WACI Health joined partners in Kenya, Tanzania, and Senegal in constituency building and high-level advocacy on domestic resource mobilization (DRM). In Senegal, efforts were on strengthening the National Civil Society Platform on Health hosted by the National Alliance of Communities for Health. The platform currently offers space for civil society and community to engage in the development of the national health financing strategy. In Tanzania, this work contributed to the development of a civil society platform on DRM hosted by the Tanzania Network of Women Living with HIV.

At the sidelines of the Africa Partnership and Coordination Forum in November, WACI Health led a group of CSOs in a regional meeting on domestic resource mobilization. The meeting resulted in a position paper on DRM, which fed into the main forum. The forum serves as a platform to identify opportunities for joint action, advocate for continued political commitment, and coordinate advocacy to improve health outcomes. Participants are drawn from the African Union Commission and its organs, Regional Economic Communities, multilateral and bilateral development partners, non-state actors, the parliamentary sector, UN Agencies, and regional networks of community groups.

Strengthening accountability on Global Financing Facility implementation

WACI Health led in an in-depth analysis of the Kenya Global Financing Facility (GFF) Investment Framework and Project Appraisal Document to create better understanding of the facility. The report, Understanding the Global Financing Facility — The Case Study of Kenya (a collaborative effort with KANCO and Kenya Health NGOs Network), was instrumental in guiding CSOs toward clear roles and responsibilities within the GFF framework for effective accountability while drawing on the global GFF civil society engagement mechanism.

Looking ahead

With the momentum around UHC coming out of the UHC Forum in Tokyo in December, WACI Health will leverage its influence and contribute to operationalization and accountability at the country level through Mburu’s position as CSO representative on the UHC2030 steering committee.
**Italy**

**Successful advocacy amidst rapid changes**

Consultant Francesca Belli led national-level advocacy in Italy linked to ACTION’s European and global strategies, with a focus on leveraging Italy’s presidency of the G7 and its growing influence among health donors. The efforts came amidst major changes in G7 countries, with elections in France, UK, Germany, and Japan and the inauguration of a new U.S. president in January, following general elections in November 2016. As a member of Italy’s Global Call Against Poverty (GCAP) G7 steering committee, Belli sought to impact the debate on G7/G20 agendas and processes.

ACTION champions Christine Muyama, nutrition program officer at the Graça Machel Trust, and Ingrid Schoeman, a dietitian who contracted drug-resistant TB in 2012, participated in civil society events alongside the G7 summit. Belli met and shared priorities and recommendations on nutrition with Italy’s Agriculture minister ahead of the final G7 Agriculture communique.

The health ministers’ communique reflected ACTION’s priorities: integrating language on research and development, particularly AMR and TB, with clear support for the UN HLM on TB in 2018.

**The Global Nutrition Summit**

Held in Milan, November 4, 2017, the Summit was co-hosted by the Italian G7 presidency, the City of Milan, and the Ministry of Health. Donors announced $3.4 billion in funding, including $640 million in new commitments to advance the global response to malnutrition. The health ministers’ communique reflected ACTION’s priorities: integrating language on research and development, particularly AMR and TB, with clear support for the UN HLM on TB in 2018.

ACTION partnered with Oxfam and Oxford University to publish the study, “Malnutrition, Non-communicable Diseases and Associated Double Duty Initiatives,” which was released during the summit. It analyzes the links among malnutrition, non-communicable diseases (NCDs), TB, and HIV and highlights the fact that diabetes, an NCD, is estimated to be the cause of 15 percent of TB cases because diabetes impairs the immune defenses. Further, the study found that patients with concurrent diabetes suffer worse TB treatment outcomes. Recommendations include coordinated actions across sectors to address problems of malnutrition and undernutrition to meet the targets for nutrition and NCDs.

A post-summit workshop organized by ACTION and other members of GCAP discussed the outcomes on global health and addressed recommendations to the 2018 Canadian G7 presidency. Representatives of the Italian Ministry, international organizations, and members of parliament attended the event. Recommendations were shared with the Canadian Embassy in Rome and with key Canadian civil society leaders including RESULTS Canada.

**Looking ahead**

The main priority for 2018 will be to develop a strong narrative calling for Italy’s new leadership to promote multilateralism and high-efficiency bilateral financing for global health. Following elections in March 2018, it will be important to work with the new government to ensure Italy delivers on its pledges to the Global Fund, Gavi, and nutrition. Additionally, ACTION’s consultant in Italy looks forward to the high-level meeting on NCDs in September 2018, to be co-facilitated by Uruguay and Italy, as a potentially important opportunity to discuss the interaction between NCDs and TB.

**South Korea**

**Building and learning**

As South Korea continues the path of building a stable democracy and a strong economy that supports people and significantly contributes to overseas development, it remains difficult to predict the government’s or media’s behavior or to build consensus around ideas of common good. RESULTS Korea is building a cadre of volunteer advocates and an advocacy strategy in an environment where, aside from churches, people do not have a history of volunteering. Recruiting Meelyoung Shin as a volunteer leader in February marked an important turning point. She has since brought in several additional volunteers, and RESULTS Korea has started a group study of the book *Reclaiming Our Democracy: Healing the Break Between People and Government* authored by RESULTS Educational Fund founder Sam Daley-Harris.

RESULTS Korea holds regular grassroots volunteer meetings and have sent hundreds of letters to Parliament’s Health and Welfare Committee, which decides on funding to the Global Fund, for instance. The letters have stressed the value of global health investments and made the case for significant increases in the commitments to the Global Fund and Gavi. In addition to letter-writing, RESULTS Korea volunteers secured a meeting with committee member Yoon Jong Pilin in December. We were well-received and left with the assurance of further support with information sharing as needed.
Partnerships between local, national, and international CSOs are powerful tools for achieving social change. The ACTION partnership demonstrates this philosophy by bringing together locally rooted Global South and Global North advocacy groups to advocate for equitable access to health services.

ACTION’s model recognizes that each partner is uniquely positioned to add value and has been instrumental in facilitating cooperation among its southern partners. Linked by similarities in development contexts and challenges, ACTION Africa partners increasingly share knowledge, exchanging ideas and nurturing their strategic value to the partnership.

WACI Health’s work and cooperation with KANCO, for example, has been uplifting and mutually reinforcing. Both groups have collaborated in GFF work in Kenya and the Africa region. To foster learning among CSOs in GFF implementing countries, we partnered with the Africa Health Budget Network (AHBN) to co-convene a regional information sharing meeting in April 2017. The forum provided a good opportunity for a South-South exchange for CSOs from six implementing countries (Kenya, Tanzania, Nigeria, Cameroon, Sierra Leone, and Senegal) to share GFF experiences and learn from each other.

WACI Health and KANCO’s experience with the GFF process in Kenya facilitated learning and acquisition of knowledge, skills, and lessons, which came in handy when HDT, ACTION’s Tanzanian partner, took on leadership of the GFF process last year. The cooperation among WACI Health, KANCO, and HDT in strengthening civil society accountability for the GFF in Kenya and Tanzania offered a great entry point for further cooperation among African countries.

South-South cooperation is not without challenges, particularly given that each partner is primarily focused on delivering their independent organizational strategy.

This means that collective action, while useful and beneficial, may not always be a priority. We have, however, learned to incorporate collective actions in our work plans, particularly around campaigns. ACTION Africa partners have also developed a Strategic Frame, which articulates how the partners (WACI Health, KANCO, HDT, CITAMplus, and the Princess of Africa Foundation) intend to work together. Based on our experience so far, we envision more fruitful collaborations toward our mutual goal of helping to build a strong and healthy future for all.
In turn, KANCO learned important lessons from ACTION Africa partners on high-level engagement, including with national governments. In 2016, for example, Princess of Africa Foundation worked with KANCO to engage the Kenyan First Lady as a nutrition champion. As a result, during 2017, the decision to relegate the Kenyan Department of Nutrition to a unit under the Ministry of Health was reversed and there have been minimal budget cuts compared to previous years.

KANCO and WACI Health have also shared with HDT knowledge on experiences on Kenya country engagements on the GFF. As a result, HDT organized a GFF CSO coalition to engage the World Bank, Tanzanian Ministry of Health, and other stakeholders to develop an analysis on the funding of reproductive, maternal, newborn, child, and adolescent health to use as a tool for policy engagement in Tanzania. In addition to joint activities such as Gavi and Global Fund replenishments, ACTION Africa has been pursuing new funding opportunities to address key health challenges in different African countries.

Every small but meaningful step, as demonstrated in our work so far, will help create the leadership needed to develop a systematic approach to South-South cooperation in public health and development. The challenge now is to seize the opportunity and the moment, and to do so with greater urgency, toward the realization of a disease-free Africa.

Allan Ragi
Executive Director, KANCO
Chair, Leadership Group

Africa continues to bear the brunt of communicable diseases such as HIV/AIDS and TB. This is compounded by the challenge of limited capacities and knowledge to respond to the increasing incidence of NCDs such as cardiovascular diseases, cancer, and diabetes. There is great urgency to turn these challenges into an opportunity to create an efficient and responsive health system — and to do so with limited resources. We see South-South partnership and development cooperation as crucial to this effort.

Within the ACTION partnership, KANCO (Kenya), WACI Health, CITAMplus (Zambia), and Princess of Africa Foundation (South Africa) have been working to strengthen joint sharing and learning in multiple areas related to capacity building. This, we believe, will be enhanced by the recent addition of HDT (Tanzania).

At the heart of our cooperation is the strengthening of the institutional sustainability of the southern partners. Since 2015, the regional group we call ACTION Africa has been sharing lessons and strengthening each other’s institutional sustainability. KANCO, for example, is currently supporting the costing of strategic plans for both Princess of Africa Foundation and WACI Health. We have also supported the reviews of manuals for board development and shared experiences on monitoring and evaluation and reporting tools.
The 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; 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. Members of the Leadership Group in 2017 were as follows:

Allan Ragi, Chair
Executive Director
KANCO

Aaron Oxley
Executive Director
RESULTS UK

Joanne Carter
Executive Director
RESULTS Educational Fund

John Mathai
Executive Director
Global Health Advocates India

Noriko Shirasu
Executive Director
RESULTS Japan

Patrick Bertrand
Executive Director
Global Health Advocates France

Peter Bujari
Executive Director
HDT

Rosemary Mbura
Executive Director
WACI Health
Chair, ACTION Africa

Bobby John
Managing Director
Æequitas Consulting Pvt. Ltd.

Carol Nawina Kachenga
Executive Director
CITAMplus

Chris Dendys
Executive Director
RESULTS Canada

Maree Nutt
Chief Executive Officer
RESULTS (International) Australia Inc.

Louis Da Gama
Director
Princess of Africa Foundation

Peter Bujari
Executive Director
HDT
Volunteer community mobilizers visit homes in Tarauni village in Kano State during a national immunization campaign.