



COMMISSION ON SOCIAL DETERMINANTS OF HEALTH



Development of a Strategy for Civil Society Engagement in the Commission on Social Determinants of Health: Progress Update, January 2006

Background

The engagement of civil society is vital to the long-term political sustainability of the Commission's messages. To develop collaboration with civil society constituencies, the CSDH has adopted an innovative approach, departing from standard practice in international organizations and previous global commissions, where civil society "participation" has often meant rubber-stamping decisions made by others.

The CSDH has asked civil society organizations to take an active role and share decision-making power in the Commission process. The specificity of the CSDH model of collaboration with civil society is that civil society actors themselves are defining how they want to work with the Commission, elaborating their strategies through national and regional consultative processes. In this way, the knowledge and concerns of civil society inform the agenda for collaborative action from the start. This approach seeks to: (1) respect civil society's critical autonomy; (2) respect regional specificities; (3) empower civil society partners and reinforce their capacity for action on health equity and social determinants. Empowered civil society constituencies are vital to positioning health equity as a social goal and to sustaining action on health determinants over time.

To advance this agenda, leading regional civil society networks have been asked to facilitate a consultative process through which civil society groups will collectively define their strategies for working with the CSDH. The organizations responsible for guiding this consultative process in four regions (Africa, Asia, Eastern Mediterranean, Latin America/Caribbean) are known as CSDH regional Civil Society Facilitators (CSFs).

This approach to working with civil society was discussed and approved by CSDH Commissioners during their September 2005 meeting in Ahmedabad. Commissioners approved the strategy and reaffirmed the importance of civil society participation in the key dimensions of the CSDH: learning, advocacy, action and leadership. Commissioners emphasized the importance of a political approach to social determinants action that operates simultaneously "top-down" (engaging the highest levels of political leadership) and "bottom-up" (drawing on community knowledge and leadership capacities and nurturing the demand for action at the social base).

Progress update

1.- Formalizing the Commission's relationship with regional Civil Society Facilitators (CSFs) for phase I

Contractual relationships with regional CSF organizations have been formalized in three of the four regions via WHO Agreements for the Performance of Work (APWs). The contract in the fourth region is in process of signature. The contracted partner organizations are:

- Asia: People's Health Movement, India (in alliance with Asian Community Health Action Network)
- Eastern Mediterranean: Association for Health and Environmental Development, Egypt
- Latin America/Caribbean: Asociacion Latinoamericana de Medicina Social (in alliance with Coordinadora Latinoamericana de Organizaciones del Campo and Red de Salud y Seguridad en el Trabajo)
- Africa: The contract is being signed with Health Action International Africa, in alliance with EQUINET, People's Health Movement, South Africa, and the Health Civil Society Network.

The meeting report on the first meeting of CSFs, held in Geneva in August, has been finalized with the input and approval of all participants, and has been translated into French and Spanish. A link to the report in the three languages will be included on the CSDH website.

2.- Building regional civil society strategies

As discussed in Ahmedabad, the CSDH civil society agenda involves two phases:

1. Design of regional strategies for civil society engagement in Africa, Asia, Eastern Mediterranean and Latin America/Caribbean (September 2005-March 2006)
2. Implementation of the regional civil society strategies (April 2006-May 2008)

During Phase 1, covering the period September 2005 - March 2006, CSFs are leading consultative processes in their respective regions to develop collectively owned, inclusive regional strategies for civil society collaboration with the Commission. The key products that will emerge in each region are:

1. A political mapping/situation analysis of civil society actors and agendas on social determinants of health in the region
2. A regional strategy for civil society collaboration with the CSDH through May 2008
3. A detailed implementation plan for putting the regional strategy into action

As key milestones in their consultative processes, each CSF will hold a major regional civil society meeting as well as national consultations and small working meetings during Phase 1.

Awareness-building about the Commission and the development of regional civil society strategies have progressed strongly in all 4 regions. Each CSF has successfully organized its major **regional civil society meeting**:

- **Africa:** Nairobi, 10-11 January 2006. The meeting was organized and hosted by Health Action International Africa and EQUINET and brought together 24 participants from diverse organizations representing nine countries (Democratic Republic of Congo, Kenya, Malawi, Mozambique, South Africa, Tanzania, Uganda, Zambia, Zimbabwe). Participants included representatives of the Ministries of Health of Kenya and Tanzania, delegates from international organizations, and WHO personnel from the Regional Office for Africa and Country Offices. The meeting unfolded successfully and provided an opportunity for mapping, network building and shared strategizing among organizations concerned with action on the social determinants of health. The CSDH was ably represented by Dr Anthony Mawaya, CSDH Focal Point for AFRO. However, participants were concerned by the absence of representation from the CSDH secretariat and the fact that no CSDH Commissioners were able to attend in person. Participants expressed these concerns in a document reflecting on the process thus far and pointing out ways forward for improved future collaboration between regional civil society and the CSDH.
- **Asia:** Bangkok, 14-15 November 2005. The meeting was hosted by the Asian Community Health Action Network and the People's Health Movement, India, and benefited from the active participation of Commissioner Yan Guo. Alec Irwin represented the CSDH secretariat. The Bangkok meeting brought together representatives from civil society organizations in 13 countries. Significant progress was made during the meeting to disseminate the goals and strategies of the CSDH, advance the regional mapping/situation analysis of social determinants and civil society action, and gain consensus on the key elements of the regional civil society strategy for collaboration with the Commission. Dates were fixed for national meetings which will be held through February in many of the participating countries.
- **Eastern Mediterranean:** Cyprus, 3-5 December 2005. The meeting was hosted by the Association for Health and Environmental Development. The organizers received 28 confirmations from 10 countries, though last-minute complications reduced participation to 16 representatives of 7 countries (Egypt, Iran, Iraq, Lebanon, Palestine, Tunisia, Bahrain). The meeting was enriched by the participation of Commissioner Prof. Ndioro Ndiaye. Alec Irwin represented the secretariat. Over 3 days, participants met to share experiences, discuss and work together. The sessions laid foundations for a regional strategy and work plan addressing the social determinants of health in the Eastern Mediterranean space,

taking account of the economic, cultural and political diversity among the region's countries.

- **Latin America:** Lima, 9-10 January 2006 The meeting was hosted by Asociacion Latinoamericana de Medicina Social, the Coordinadora Latinoamericana de Organizaciones del Campo and the Red de Salud y Seguridad en el Trabajo, with additional support from the Health Forum of Peru. Orielle Solar represented the CSDH secretariat. No CSDH Commissioner was available to participate. The meeting brought together representatives from civil society organizations in 11 countries and ten regions within Peru and resulted in substantial advances in the development of the regional strategy. At the close of the meeting, a social dialogue on the CSDH was held, in which 150 people from numerous institutions and organizations in Peru took part.

National meetings have also taken place or will do so shortly in the following countries:

- Africa: Tanzania.
- Asia: Bangladesh; Cambodia; China; India (4 national meetings); Indonesia; Nepal; Philippines; Sri Lanka; Thailand; Vietnam.
- Eastern Mediterranean: Egypt; Morocco; Palestine/Iraq; and one country from Middle Gulf.
- Latin America: Chile; Colombia; Nicaragua; Paraguay; Peru; Uruguay.

3-. Second global meeting of CSDH regional civil society facilitators

A Second global meeting of CSDH Civil Society Facilitator organizations was held in Montevideo, Uruguay, on 12-14 December 2005. In this meeting, CSFs presented and compared experiences in the development of their regional strategies and planned civil society participation in the CSDH Iran meetings. The Montevideo consultation brought together representatives of CSFs from all regions to pursue the following objectives:

1. Share and discuss the methodologies developed for civil society mapping in each region, looking both at organizations and the wider political context (highlighting opportunities and obstacles).
2. Discuss strategies for broadening the base of civil society participation in the processes linked to the CSDH, with special attention to grassroots groups.
3. Discuss and agree strategies for the participation of civil society in Country Work.
4. Discuss the generation and collection of knowledge of social determinants that exists in civil society and how this can influence the unfolding work of the Knowledge Networks and the CSDH itself.
5. Discuss and agree communications strategies to be developed from civil society and the requirements for implementing these strategies.
6. Identify the capacities that need to be strengthened within civil society and among social leaders for the implementation of proposed CSDH civil society strategies.
7. Explore opportunities for linkage between civil society and the Commission's strategy for engaging global actors and initiatives.
8. Plan the participation of CSFs in the fourth meeting of CSDH Commissioners in Iran (January 2006).

Main outcome of second CSF meeting

The organizations present showed strong receptivity and commitment to the development of strategies for civil society participation in action on social determinants of health. This expressed itself in an increased demand for national meetings and opportunities for exchange to further develop strategies and actions. Grassroots organizations of working people and women, along with human rights groups, joined the CSDH process as a result of the meeting.

4- Civil society participation in Iran meetings

The participation of CSFs and representatives of local Iranian civil society in the CSDH meetings in Tehran will aim to reach several important objectives. First, CSFs will engage Commissioners in a discussion of their respective draft regional strategies for civil society collaboration with the CSDH. Additionally, CSF representatives will participate in working meetings with the CSDH secretariat Country Work team and leaders of the Knowledge Network on Measurement and Evidence, to advance detailed plans for civil society collaboration with these components. CSFs and representatives of Iranian civil society will develop and discuss positions on how civil society can contribute to processes of national policy change in Country Work partner countries and specifically to intersectoral action on social determinants and the positioning of health as a cross-governmental goal with broad social ownership.

Next steps: towards implementation

The regional CSFs will submit their completed strategies by 31 March 2006. During February and March, the CSDH secretariat will draft Terms of Reference for organizations to coordinate the implementation phase of CSDH civil society collaboration in each region. When TOR are completed, the secretariat will issue a call for proposals. Candidate organizations will be evaluated and a coordinating group designated in each region by mid April. The coordinating groups will lead the implementation of regional civil society strategies from April 2006 to May 2008, when the CSDH will complete its work.