

Notes
Brainstorming Session of the
NGO Advisory Group on Health Promotion
3 December 2007, WHO HQ Geneva

Present: Dr. Gordon Galea, WHO, Mrs. Funke Bogonjuko, WHO, Mrs. Berhane Raswork, Beat Schatzmann - IAC, Bernard Amahaya Kadasia, - IAS, Xuan Hao Chan - FIP, Gabi Sozanski, Joanna Koch - ACWW, Anna Grigoryan - WFUNA, Joyce Jett - SCI, Dominique Robert - IDF, Christine Lee Thorsen, Dr. Julian Fisher – FDI, Lauriane Zonco – WHF, Grace Lo – IFRC.

- 1. The Chair, Mrs. Berhane Raswork** opened the meeting, welcoming and thanking all present.
- 2. Round of brief introductions by participants**
- 3. Update by Dr. Gauden Galea, WHO Coordinator**

Dr Galea presented the plans for WHO in this new biennium. The new Medium Term Strategic Plan has four key result areas where collaboration may take place with the NGO advisory group:

- Effectiveness of health promotion. Work will be done to identify projects where health promotion is making a difference and to evaluate, document and disseminate examples from all regions;
- Financing of health promotion. Work will concentrate on sources of sustainable financing for health promotion (primarily direct appropriation, taxation and social health insurance) linked to mechanisms for delivery of health promotion services
- Partnerships in health promotion. The Global Conference on Health Promotion in 2009 will focus on Health Promotion and the Development Agenda and there will be a possibility here of connecting the work of the NGO Advisory Group formally to the conference through the theme chosen by the NGOs themselves: local wisdom
- Capacity for Health Promotion. Work here will focus of the development of packages for capacity building and provision of technical support for countries in developing human resources and national plans for health promotion

Response from NGOs present

Dr. Julian Fisher (IDF) spoke of the need to teach health promotion and the importance of disease prevention

Dr. Grace Lo (IRCF) spoke of the Health Promotion Leadership programme in the Red Cross – it has identified Health promotion managers. A focus example is on women's'

health. Join a group for 9 months, introduce health promotion. Create a project. Input methods of health promotion. Social marketing, Management techniques.

Response from Dr. Gauden Galea

He endorsed efforts by other partners, and the comments made on capacity building – this is a common concern.

He amplified on the theme of partnership with Civil Society in terms of its involvement at the

a. Local level (East Mediterranean and the Americas). There are many examples of existing health promotion projects based on local collaboration with civil society: Health municipalities found in many regions of WHO and the CBI – Community Based Initiatives in the Eastern Mediterranean are examples of this.

b. Professional level: Certain NGOs have a primary concern with Health promotion – these include the IUHPE (International Union of Health Promotion and Education) and the International Network of Health Promotion Foundations (INHPF)

c. International level: NGO Advisory Group is developing a platform for wider collaboration. It would be important to find a common theme over the next two years. This would bring all members of the Platform together in a possible set of common projects that could be showcased at the meeting. The theme proposed by the group “Local Wisdom” needs to be further developed but has a promising source of opportunity for collaboration.

The Seventh Global Conference on Health Promotion GCHP7 – The theme is set: Health Promotion and the Development Agenda – though the title may change when the planning committee meets in April. There have been two informal consultations with Kenya. The theme and product of the NGO work on Local Wisdom could be showcased at the Conference. There will be an Africa Day at the Conference and NGOs in this advisory group should be sure to get their affiliates involved through work on a common platform.

4. Health Promotion Platform

i. Bernard’s Presentation about the Platform

Bernard gave a short background to the Group.

NGOs had been involved in health promotion since Alma Ata. It became necessary to form a group for coordination and systematic participation. This happened in Jakarta in 1997. Initially activities involved participation at Global HP conferences and exchanges of information, annual briefings at the WHA as well as occasional workshops. At the 6th Global Conference held in Bangkok the group made a decision to increase NGOs joint actions and encourage NGOs’ participation in health promotion, undertaking also to work

with other stakeholders particularly in the implementation of the recommendations of the BCHP, monitoring and evaluating the progress and give feedback.

This gave the group an additional mandate which was no longer possible in the loose way we had worked up to then. We decided to hold a workshop in order to discuss how to strengthen links leading to an institutionalized framework for the group to carry on its activities. We elaborated an action framework for the implementation of the BCHP and identified the first strategic steps. We developed an MoU. We set up a website in order to strengthen our capacity to share information and planning joint actions, improve relationship with WHO which provided us a clearer role we can play at the Global Conferences. With the aim of acting in a more focused way we selected a theme, namely local wisdom in global development.

We realize that a lot has been done by NGOs in the area of health promotion but we don't know really what. If it becomes possible to share knowledge and learn from each other we can support each other in policy issues but also in fund-raising and other areas. Through using the combined capacity of NGOs we can multiply impact. We, NGOs have an extensive network and reach the grassroots. By sharing capacity we can share global tasks and have a global impact. This is the reason why we need a more structured approach and a formal framework.

The goal is to improve health by generating awareness of and bringing added value to existing efforts of NGOs in the promotion of health through strengthened advocacy, development of partnerships and sharing of best practices, initiatives and experience.

NGOs are invited to join the Platform and identify together commonalities and areas for joint actions.

Discussion about the H.P. Platform

Grace Lo commented an MoU could be difficult. NGOs would be willing to provide collaboration but not through an MoU which has a legal content and would require negotiations with Boards within NGO structures.

The added value of the Platform needs to be defined. What are the minimum expectations and why should an NGO submit info into a Website if they don't recognize the benefits. What can the Platform deliver and what are its resources?

It would be advisable to establish 1 or 2 main themes, as health promotion is almost too broad.

Dr. Galea noted that a successful example of a coalition is in the Philippines. After three workshops, discussion of documents, an MoU was drawn up to reflect 11 performance indicators. This attracted more than 40 agencies. Since then the Coalition has produced very active work. This could be a good model for the Advisory Group to use and to define a theme.

Dr. Galea wondered about other existing groupings and how the Platform could affect other networks. He again stressed the added value of the Platform.

ii. Presentation of website by Gabi Sozanski

Gabi noted that the idea of setting up the website was born after the 2006 Workshop, when the Strategic first steps were defined. It was decided to develop a formalized platform for networking and collaborative action in health promotion. The main objective was to create a visually simple and functional design which allows interaction.

Great advantage of the website: content management system, dynamic, functions can be extended. Technically, the framework is ready (www.ngos4healthpromotion.net). Documents of major importance have been uploaded, some links established. The intention is to launch Forum discussions on main themes in order to identify commonalities and ways of working for a better joint advocacy. Those who sign up commit themselves to participate in on-line discussions and share information and links.

An on-line survey has been launched through the website in order to set up a database and classify information. By signing up to the web-based platform, NGOs also join a large community and can take advantage of collective wisdom.

iii Survey Results by Xuanhao Chan

Xuan Hao noted that unfortunately no NGOs had completed the Survey and the Group should help define why this is, as a knowledge base is very important.

5. Local Wisdom

Introduction by Berhane. The importance of local wisdom in health promotion, to retain old, and traditional methods which can be sometimes more effective than other methods. Health Promotion is a broad theme and needs to be looked at from different angles so that it becomes more tangible. Local Wisdom could be anchored to Social Determinants.

Dr. Funke Bogunjoko, WHO. Her background – Primary Health Care Officer in WHO in Brazzaville. Worked with the IAC in Nigeria. Is currently at the African Desk, Country Office. WHO HQ.

Dr. Funke focused on one aspect - the multi faceted role of the woman. Her slide illustrated the many burdens and the role of the woman. Health promotion interfaces with poverty, literacy, health education. The theme of local wisdom is on the right track. There is added value in local wisdom.

It is important to see and know what is happening. We need to understand first the mentality of those we are trying to teach or help. We need to understand about local wisdom, to recognize the barriers and the many aims women face. For example, it is no good talking about stopping early marriages, if the local wisdom says that a girl should not menstruate in her father's house. We should recognize the power and authority of

mothers in law. If local culture says a woman should not show pain, then she will more likely die in labour because she is not allowed to give voice to pain.

Local Wisdom therefore should not just recognize the value of traditional methods but needs also to look at the many and specific barriers.

Funke opened our eyes to the fact that NGOs need to question and to listen, to learn also about local values, that Local Wisdom is multi faceted and that we should not go out with a set of benchmarks

6. Summary and Closure of Session

The purpose of the Brainstorming session was to bring together those NGOs who had expressed an interest in becoming more involved and to see how together we can work on the

1. Platform
2. Develop further the website
3. Conceptualise the theme of Local Wisdom

The aim now should be to

- a) Develop a Concept Paper on Local Wisdom
 - b) Use at the next Global Conference
- either as a Conference Paper
or, as the basis for a Workshop at the Conference

Next Steps

1. Finalise Notes of the Session
2. Share with those present
3. Plan for the next Session

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