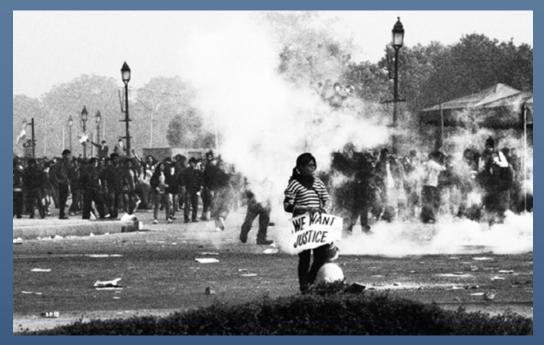
C.4: Gender-based violence



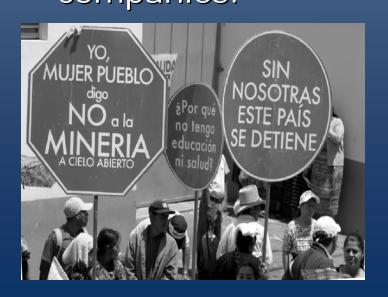
- The elimination of gender-based violence requires addressing societal issues related to power and dominance, access to resources and entitlements, among others.
- Law and guidelines on gender-based violence must incorporate a health system response.

C.5: Community led sanitation

- 'Community Led Total Sanitation' (CLTS) is proposed by powerful international agencies and NGOs as a response to the rapidely escalating sanitation crisis.
- The strategy can represent a 'victim-blaming' approach to a basic health issue and human rights.

C.6: Extractive industries

- The evidence demonstrating the causal relationship between exposure to mining hazards and adverse health outcomes is denied and suppressed by industry advocates.
- Governance structures are grossly inadequate in the face of tremendous power imbalances that exist between communities and mining companies.



	South Africa	Russia	Australia	Ukraine	Guinea
Mining as a % of GPD	18	33	10	6	26
Top mining companies	BHP Billiton Anglo American Impala Platinum	Norilsk Nickel Mining Amur Minerals Corp. Anglo American Platinum Ltd	BHP Billiton City Giold	Anika LLC Black Iron Inc.	Newmont Mining Corp. Affinor Resources Inc. Alcoa Inc. Anglo Aluminum Corp.
Mineral reserves	\$2.5 trillion	\$794 billion (iron ore)	\$737 billion	\$510 billion (iron ore)	\$222 billion (bauxite)
Mined minerals	Coal Cromium Diamond Gold Platinum	Aluminium Bauxite Coal Copper Diamond Gold Iron ore Nickel Steel	Bauxite Diamond Gold Iron ore Uranium Zinc	Aluminium Coal Diamond Gold Iron ore Uranium	Bauxite Diamond Gold Iron ore Uranium

Section D: Watching

Reforms of the World Health Organisation – designed to strengthen the WHO or to legitimise its donor driven character?

Focus on some key global institutions that are impacting on people's health care?

What are the global processes that we multiple need to 'WATCH'

(IGNOU ROAD) NEW DELHI-110068

D.1: WHO reform

- WHO is under pressure to retreat into a technical role and withdraw from effective engagement with the political and economic dynamics of the global health crisis.
- The financial crisis the institution faces further compromises its capacity to engage meaningfully.
- Increase in 'tied' contributions to close to 70% of WHO's expenditures has further tied its hands.



- Proposed financing dialogue reinforces the trend of increased donor influence.
- Governing bodies and Secretariat under threat of improper influence from non-state actors.

D.2: NGOs in service delivery

- Current hegemonic discourse abhors utopian thinking by demanding realism; 'pragmatism' guides many NGOs today.
- Dependence on donor funding creates a threat of agendas being set by donors, creating a new 'business model' for NGOs.
- Donor driven cooperation focuses on the provision of tools to cope with adversity not mobilise against unjust power relations.



D.3: Private sector influence on public health policy

- Public–private partnerships provide platforms to influence policies and strategies on public health.
- Conflicts of interest get legitimized by constant interaction between public and private actors
- Private foundations and corporations are increasingly engaging in these relationships.
- Public policy-making influenced by private actors accountable only to their board members.
- Nexus between private foundations, consulting and accounting firms, private industry and global public–private partnerships.

D.4: TRIPS Agreement

- The Trade Related Intellectual Property Rights (TRIPS) forced developing counries to allow patents on medicines.
- Under pressures from developing countries and civil society, 'health safeguards' designed to mitigate the adverse impact of a strong patent regime were introduced.



 After two decades there is mounting evidence that use of these safeguards is extremely challenging

D.5: Cholera epidemic in Haiti

- Popular consciousness of the epidemic is based on a fabricated narrative which centers on the refugees affected by the January 2010 earthquake.
- Evidence links epidemic to occupation enforced by of MINUSTAH troops.



Any fundamental changes in Haiti depend on the end to intervention by foreign governments and occupation of Haiti

D.6: IFC's 'Health in Africa'

- Through its Health in Africa initiative, the World Bank's International Finance Corporation works at odds with fundamental tenets of universal Access to care
- Of particular concern is the lack of focus on the poor. The initiative has also failed to mobilize targetted levels of investment.
- The Bank's response to the mid-term evaluation of the initiative fails to show evidence of a committement to a pro-poor, evidence-based approach.