

Global Health Watch 4: A Call for Case Studies

About Global Health Watch:

The Global Health Watch is an alternative World Health Report that incorporates the voices of marginalized people and civil society into discussions around social justice and global health. Global Health Watch aims to:

- Monitor the activities of global institutions
- Shift the health policy agenda to recognize the political, social and economic determinants of health
- Provide a forum for global civil society to question and challenge the influence of neoliberalism on health and global health policy
- Make recommendations for change and highlight alternatives

How you can contribute:

The GHW coordinating group has identified broad areas to be covered in the 4th issue of the Watch, which is officially *scheduled for release in October, 2014*. We are now seeking your assistance in sourcing case studies that can add value to each of these important topics. These case studies and testimonies will form part of the electronic accompaniment to the development of the Watch and in some cases may also appear in the electronic or print edition of the Watch. The case studies will amplify and give a more personal voice to the contents of the Watch. They will also make the issues more accessible and meaningful to readers who may be able to see their own experiences reflected in the experiences of others.

Contact Us:

All enquiries and case studies should be submitted to:
ghwcasestudies@yahoo.in

For more Information about the Global health Watch, please visit:
<http://www.ghwatch.org/>

Global Health Watch



Health for All Now!
People's Health Movement

Guidelines and Criteria for Submissions

- We are looking for short and concise submissions of 500 - 2000 words. These can either be stories (personal story or reflections written in your own words) or case studies (synthesis of experiences which may include direct quotes illustrating an issue or a number of issues);
- They should be relevant for people's health, and reflect a personal or group experience;
- They should cover issues broadly falling within the framework of the GHW themes (see attached);
- Statistical information should not be used except in support of case studies/testimony and in which case it should be kept to a minimum;
- Please avoid academic and scientific jargon. The testimonies need to be accessible and readable
- If possible they should have a narrative / story telling character

Please indicate:

- Your organisation (if you are part of one)
- Your locality/country/region
- Whether you want your submission to be anonymous and why

The publication will be freely downloadable from the net so effectively there will be no copyright. Please inform us if your story or case study has been submitted / published elsewhere. Also please make sure that there are no personal details that anyone would not want made public; names and place names can be changed.

The editorial collective of the GHW will consider submitted stories and case studies for inclusion on the website or within the electronic and/or print edition of GHW4 (with a specific focus on human interest stories). The GHW editorial reserves the right to edit all submissions. Not all stories and case studies will be accepted for a variety of reasons including space and consistency.

Please note that case studies and stories posted on the website will have the following disclaimer:

"The views expressed do not necessarily represent those of the editors of the GHW. While we make every effort to ensure that all facts and figures quoted by authors are accurate, the GHW and the editors of GHW cannot be held responsible for any inaccuracies."

General Chapterization of Global Health Watch 4

| Section | Topic |
|--|---|
| A. Political & Economic Architecture | • Neoliberalism Today |
| | • Europe in Crisis |
| | • 'Left' Experiences (<i>focus on Latin America</i>) |
| | • Change in the Middle East and role of imperialism |
| | • Development discourse, MDGs and alternate discourses |
| B. Health Systems | • Building health system and UHC proposal |
| | • Case studies: building or destroying health systems (<i>with a focus on some of the following: Brazil, El Salvador, Paraguay, Rwanda, South Africa, Iran, UK, Mexico</i>) |
| | • Updates from GHW3 (<i>specifically China and India</i>) |
| | • Private (commercial for-profits, including insurance, HMOs) sector and regulation |
| | • Not-for-profit (faith based) health sector |
| | • Health Workforce in the context of the health worker crisis |
| | • Re-conceptualisation of Community health workers |
| | • Medical devices |
| | • Crisis in maternal and reproductive health (<i>with a focus on Africa</i>) |
| • Emergency & speciality care: the role of public systems | |
| C. Beyond Health Care | • Nutrition and Food sovereignty |
| | • Extractive industries |
| | • Sanitation (<i>UNICEF initiative case study</i>) |
| | • Current policy approach to Non Communicable Diseases/ the NCDs agenda in the context of global health governance |
| | • Gender and Health (<i>focus on violence</i>) |
| | • Social protection floors |
| | • Ground water pollution and depletion |
| D. Watching | • WHO reforms with reference to various debates around it |
| | • Climate mitigation and health |
| | • Corporatization of NGOs |
| | • International trade, investment and IP agreements |
| | • Consultancy Organizations |
| | • Big companies (<i>Novartis, Coca Cola, and other food corporations</i>) |
| | • Philanthrocapitalism and the Gates Foundation |
| | • The Influence of Journals on Global Health |
| | • Human Rights Council |
| | • Refugee crisis and interventions in health (<i>with a focus on UNRWA, Lebanon, Syria, Haiti</i>) |
| | • Impact of US led war on drugs |
| | • Role of the IMF in the Middle East post 'Arab Spring' and impact on health |
| | • Clinical Trials in developing countries |
| • South-South cooperation – BRICS/IBSA | |
| E. Resistance, Struggles and Alternatives | • Crisis and Response in Greece |
| | • Right to Food Campaign in India |
| | • 'Good living' from Latin America (<i>with a focus on Bolivia</i>) |
| | • Health and Occupation (<i>case study from Palestine</i>) |
| | • Struggle around health in the Middle East |
| | • Access to health for social change (<i>focus on Venezuela, Bolivia, El Salvador, Ecuador</i>) |
| | • Resistance against neoliberal reforms |
| | • Erosion of social security and Struggles in the 'North' (<i>focus on Spain, Germany, and other European countries</i>) |
| • Traditional systems/ counter hegemonic inter-culturality | |