The Alliance for Health Policy and Systems Research works to improve the health of those in low- and middle-income countries (LMICs) by supporting the generation and use of evidence that strengthens health systems. As an international partnership hosted by the World Health Organization, we work together with organizations around the world.
We advance knowledge
PAGE 8

We catalyse change
PAGE 12

We empower leaders
PAGE 16

We have impact
PAGE 19

2022 FINANCES AND DONORS PAGE 21

GOVERNING BODIES PAGE 22
Tracking progress on the strategic plan

After outlining a new five-year strategic plan in 2021, the Alliance has been working this year to broaden its horizons beyond traditional health systems to consider the wider determinants of health. To help track our progress on advancing knowledge, catalysing change and empowering leaders, we have developed a set of key performance indicators.

The charts below present the five-year targets, a progress marker for the end of year two and an indication of where that indicator currently stands. The Alliance is meeting or exceeding the pace needed to reach the five-year targets on five out of ten indicators. In fact, the full five-year target has already been achieved for collaborations (there are already 32 with a target of 25) and for the number of researchers supported (202 out of 200). The five-year target has nearly been met for the number of journal articles supported (197 out of 200).

### Strategic objective 1. We advance knowledge.

The Alliance will stimulate the generation and synthesis of policy-relevant health systems knowledge, encompassing evidence, tools and methods.

#### Must accomplish actions

<table>
<thead>
<tr>
<th>Supporting generation and synthesis of HPSR evidence for stronger health systems</th>
<th>Developing methods, frameworks and concepts to build the field of HPSR</th>
</tr>
</thead>
</table>

### KPI Legend

- **Where we should be at the end of year 2**
- **What we've achieved by the end of year 2**
- **FIVE YEAR TARGET**

#### Tracking progress on the strategic plan

- **# of externally peer reviewed research publications**
  - FIVE YEAR TARGET: 80
  - WHERE WE SHOULD BE: 200
  - WHAT WE’VE ACHIEVED: 197

- **# of methods, tools and frameworks developed**
  - FIVE YEAR TARGET: 3
  - WHERE WE SHOULD BE: 8
  - WHAT WE’VE ACHIEVED: 4

- **# of new and existing research grants**
  - FIVE YEAR TARGET: 40
  - WHERE WE SHOULD BE: 100
  - WHAT WE’VE ACHIEVED: 72
Strategic objective 2. We catalyse change.
The Alliance will promote the dissemination and use of health policy and systems knowledge to improve the performance of health systems.

Must accomplish actions

<table>
<thead>
<tr>
<th># of collaborations within WHO and with other partners</th>
<th>10</th>
<th>25</th>
</tr>
</thead>
<tbody>
<tr>
<td># of decision-makers equipped with HPSR tools and knowledge</td>
<td>300</td>
<td>750</td>
</tr>
<tr>
<td># of times that Alliance supported research programmes have influenced policies</td>
<td>20</td>
<td>50</td>
</tr>
<tr>
<td># of media stories about Alliance-funded research</td>
<td>11</td>
<td>50</td>
</tr>
</tbody>
</table>

Strategic objective 3. We empower leaders.
The Alliance will facilitate the development of capacity for the generation, dissemination and use of HPSR knowledge among researchers, policy-makers and other stakeholders

Must accomplish actions

<table>
<thead>
<tr>
<th># of researchers supported</th>
<th>80</th>
<th>200</th>
</tr>
</thead>
<tbody>
<tr>
<td># of institutions based in LMICs using methods, tools and frameworks developed by the Alliance</td>
<td>14</td>
<td>35</td>
</tr>
<tr>
<td># of instances where Alliance support has enabled an institution to increase the generation of HPSR</td>
<td>20</td>
<td>50</td>
</tr>
</tbody>
</table>

Not reported in 2022
Where we work

We advance knowledge

<table>
<thead>
<tr>
<th>PROJECT TITLE</th>
<th>GRANTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Citizen-responsiveness and empowerment in health insurance programmes</td>
<td>7</td>
</tr>
<tr>
<td>Transitions from external financing</td>
<td>6</td>
</tr>
<tr>
<td>Country case studies on primary health care in the context of COVID-19</td>
<td>49</td>
</tr>
<tr>
<td>TOTAL GRANTS</td>
<td>62</td>
</tr>
</tbody>
</table>

We catalyse change

<table>
<thead>
<tr>
<th>PROJECT TITLE</th>
<th>GRANTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health policy analysis for taxes</td>
<td>8</td>
</tr>
<tr>
<td>HPSR and climate change</td>
<td>6</td>
</tr>
<tr>
<td>Country-led implementation research for UHC</td>
<td>3</td>
</tr>
<tr>
<td>Building institutional capacity for HPSR and delivery science</td>
<td>8</td>
</tr>
<tr>
<td>Heightening institutional capacity for governments to use health research</td>
<td>3</td>
</tr>
<tr>
<td>SYSTAC small grants</td>
<td>5</td>
</tr>
<tr>
<td>TOTAL GRANTS</td>
<td>33</td>
</tr>
</tbody>
</table>

We empower leaders

<table>
<thead>
<tr>
<th>PROJECT TITLE</th>
<th>GRANTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health policy analysis fellowship</td>
<td>10</td>
</tr>
<tr>
<td>Strengthening capacity for HPSR in francophone Africa</td>
<td>10</td>
</tr>
<tr>
<td>Women's publication mentorship programme</td>
<td>13</td>
</tr>
<tr>
<td>Young NCD researchers</td>
<td>8</td>
</tr>
<tr>
<td>Young professionals</td>
<td>4</td>
</tr>
<tr>
<td>Alcohol research mentees</td>
<td>7</td>
</tr>
<tr>
<td>TOTAL GRANTS</td>
<td>52</td>
</tr>
</tbody>
</table>
2022 by the numbers

15 ongoing projects
145 grants in
80 countries around the world

Publications
- 89 peer-reviewed journal articles
- 51% of journal article lead authors are women
- 53% of journal article lead authors are from LMICs*

* Includes journal articles supported through open calls for journal supplements and articles where the lead author is Alliance Secretariat staff. More than 90% of commissioned primary research is with researchers from LMICs.

Communications
- 21% increase in Twitter followers
- 47% increase in Facebook followers
- 112% increase in LinkedIn followers
- 40% increase in website visitors
- 180 new members of the Alliance Hive
Message from the Board Chair

I am delighted to have been appointed as the new Chair of the Board of the Alliance for Health Policy and Systems Research. I have been a long-time advocate for the importance of health systems research in improving health and well-being, and I believe that the Alliance is uniquely positioned to help achieve this goal. I am particularly excited about the Alliance’s focus on bridging the gap between researchers, policy-makers and practitioners, and its commitment to ensuring that health systems research is accessible, relevant and actionable.

The breadth of work contained in this Annual Report is testament to this. I congratulate all the Alliance’s partners and its Board, Scientific and Technical Advisory Committee and Secretariat on these achievements. I also thank and recognize the service and stewardship of my predecessor as Board Chair, Professor David Peters, under whose leadership the work contained in this report was undertaken. David contributed so much over many years to the Alliance and leaves a strong legacy on which I look forward to building.

In my time as the Prime Minister of New Zealand – and indeed during my earlier role as Minister of Health – I was committed to improving the health of all New Zealanders. During my tenure, we introduced measures to reduce tobacco use, including restrictions on advertising, promotion and sponsorship, as well as increased taxes on tobacco products. This experience highlighted to me that health issues are complex systems problems that are deeply interconnected with social, economic and political factors. I came to understand that, to achieve meaningful and lasting improvements in health, we must address these underlying systems issues, and that this requires a multi-disciplinary, politically aware and evidence-based approach – something that the Alliance excels in.

We are at a crucial moment in global health: halfway to the Sustainable Development Goals and with renewed commitment to achieving Universal Health Coverage. And yet, the interlinked crises of COVID-19, climate change, conflict and cost-of-living have left the world far off track to achieve these goals. I am confident that the Alliance, with it focus on health policy and systems research, can make an important contribution to reversing this tide.

– HELEN CLARK
Message from the Executive Director

I started my tenure as Executive Director of the Alliance for Health Policy and Systems Research on 1 November 2022, so I can take little credit for the impressive range of work chronicled in this annual report. I would like to acknowledge the leadership of my predecessor, Dr Abdul Ghaffar, who stewarded the Alliance for 12 years, building both the organization and the field of health policy and systems research. The strong institution that I have inherited is a testament to his dedication and hard work, and a quick read through this annual report confirms the important work that the Alliance has been doing: from advancing the field through its recent flagship report to important capacity strengthening initiatives in countries.

As I take on this role, I am keen to build upon the great foundation that has been established over the Alliance’s first twenty-five years. I see this as an important moment of transition for the organization, and for the health policy and systems research community. My first day in this role involved me flying across the Atlantic to join the team at the Seventh Global Symposium on Health Systems Research in Bogotá, Colombia. There I was able to check in with this community to get a sense of the critical issues in the field in this era of crises – and the role the Alliance can play in addressing them.

In this shifting global landscape, we are consulting widely and working with our Board and Scientific and Technical Advisory Committee members to articulate new strategic priorities for the Alliance. In the coming year, we will have more details. I am committed to strengthening the Alliance’s role as a leader in health systems research and as a trusted partner in finding solutions to pressing challenges at both national and global levels. I also recognize the importance of continuing to support the professional development and capacity strengthening of those in the health systems research community – there is no substitute for locally generated research on locally identified priorities.

I feel both great fortune and great responsibility in becoming the Alliance’s Executive Director and look forward to the continuing support of our community and all our partners. I believe that the Alliance has a unique role to play in advancing towards health equity, and I am eager to work together to ensure that our work has the greatest possible impact.

- KUMANAN RASANATHAN
We advance knowledge

The field of health policy and systems research continues to evolve. While the focus on strengthening health systems remains central, health policy and systems research increasingly recognizes the importance of other sectors in creating healthy societies.

The Alliance works to build the field by supporting cutting-edge, policy-relevant research to help solve local health challenges. It also generates thinking on novel methods, frameworks and approaches to help advance the field.
The shift from health systems to systems for health is more than just semantics. [...] It represents a much needed step change to enabling more people to live healthier and longer lives with dignity and well-being.

- PROF KENT BUSE
The George Institute for Global Health

The latest flagship report from the Alliance, Systems for health: Everyone has a role, calls for a reimagining of health systems as systems for health. This new approach aims to create healthy populations and health security while also supporting universal health coverage. The report defines systems for health as systems that are ready to respond to future health threats, taking into account the social, economic, environmental and commercial factors that affect health. To establish systems for health, the report highlights four critical elements: building trust, engaging communities, working across sectors, and going beyond national boundaries. The report emphasizes the need for a comprehensive approach to health that considers all the factors that impact health, including non-medical factors like poverty, education and the environment. By focusing on these elements, the report aims to create more robust, resilient and equitable health systems that work for everyone.

The report was launched at HSR2022 in Bogotá, Colombia, and has already been cited as an illustration of the Alliance’s ability to alter the discourse and shape the field of HPSR.
PRIMARY HEALTH CARE

We are so proud of the achievements so far and feel confident that our joint work shall help shape the PHC agenda in our region.

- AWAD MATARIA
Director Universal Health Coverage/ Health Systems
WHO Regional Office for the Eastern Mediterranean

Following a consultation with policy-makers in the summer of 2020, and an evidence review published in Health Policy and Planning, the Alliance is collaborating with several WHO regional offices to conduct PHC case studies in the context of the COVID-19 pandemic in close to 50 countries. These case studies build on twenty original PRIMASYS case studies on PHC.

A handful of the case studies were presented in Cairo, Egypt, during the WHO Regional Office for the Eastern Mediterranean’s celebrations of Universal Health Coverage Day. In 2023, the Alliance is planning to publish these case studies and ensure they are closely linked to supporting ongoing in-country policy processes.

MAKING INSURANCE RESPONSIVE TO CITIZENS

Publicly funded insurance programmes now cover millions in low- and middle-income countries, yet many still struggle to access quality care.

Limited information, navigating access to care, and a lack of accountability from providers are all barriers being addressed through various initiatives by governments and civil society organizations (CSOs). The Alliance and the WHO Department of Health Governance and Financing supported research to understand how these initiatives have empowered citizens to exercise their health insurance entitlements in Bosnia and Herzegovina, Colombia, Ghana, India, Indonesia and Nigeria.

Studies have shown that government-run initiatives often face low awareness, inadequate funding and staffing, conflicts of interest and unsuitable regulations. While CSO-run initiatives have raised awareness and ensured individual access to services, their location outside the public health system limits their ability to effect policy and legal changes. Findings from these studies have informed policy changes in Bosnia and Herzegovina and have been well-received by senior officials in Indonesia. The Alliance's continued support has strengthened the capacity of researchers to conduct high-quality health systems research and disseminate findings at the highest levels of government.
Peace and health are inextricably connected, and the two must go hand in hand if we are to offer people basic protections and build secure and healthy societies.

- Dr Tedros Adhanom Ghebreyesus
  Director-General of the WHO

The Alliance supported eight special issues this year. Several are targeted at building the field, such as the special issue on Health for peace. It informs a new and growing body of work and was produced in partnership with WHO colleagues, reflecting the priority for this work by the WHO Director-General. Similarly, the special issue on Systems thinking: strengthening health systems in practice builds upon recent partnerships that the Alliance has fostered to revitalize a community of practice around systems thinking for health. Others, like the special issue on Compassionate and respectful care in Ethiopia are a result of research projects supported by the Alliance.

Compassionate and respectful care in Ethiopia
Ethiopian Journal of Health and Biomedical Sciences

Systems thinking: strengthening health systems in practice
Frontiers in Public Health
https://www.frontiersin.org/research-topics/25575/systems-thinking-strengthening-health-systems-in-practice#articles

Rapid reviews for health policy and systems decision-making: more important than ever before
Systematic Reviews

Advancing learning health systems: Lessons from the African Health Initiative
Global Health: Science and Practice
https://www.ghspjournal.org/content/10/Supplement_1

Learning health systems
BMJ Global Health
https://gh.bmj.com/content/7/Suppl_7

Health for peace
BMJ Global Health
https://gh.bmj.com/content/7/Suppl_8

Advancing rehabilitation through HPSR
Bulletin of the WHO
https://www.ncbi.nlm.nih.gov/pmc/issues/419724/

Making health insurance responsive to citizens
BMJ Global Health
https://gh.bmj.com/content/7/Suppl_6
Other key articles from the year

**Strong health systems are learning health systems**
By Kabir Sheikh and Seye Abimbola in PLOS Global Public Health
https://doi.org/10.1371/journal.pgph.0000229

**Whole of government and whole of society approaches: call for further research to improve population health and health equity**
By Flaminia Ortenzi, Robert Marten, Nicole B Valentine, Aku Kwamie and Kumanan Rasanathan in BMJ Global Health
https://gh.bmj.com/content/7/7/e009972

**Health policy and systems research capacity development to support maternal, new-born, child and adolescent health in West and Central Africa**
By Irene Agyepong, Edwine Barasa, Kabir Sheikh, Uta Lehmann, Lucy Gilson, Yawa Dahoui, Sue Godt and Issiaka Sombie in Ghana Medical Journal

**Implementation research on noncommunicable disease prevention and control interventions in low- and middle-income countries: A systematic review**
Celestin Hategeka, Prince Adu, Alissa Desloge, Robert Marten, Ruitai Shao, Maoyi Tian, Ting Wei and Margaret E. Kruk in PLoS Medicine
https://doi.org/10.1371/journal.pmed.1004055

**Rethinking external assistance for health**
By Zubin Cyrus Shroff, Susan Sparkes, Maria Skarphedinsdottir and Kara Hanson in Health Policy and Planning
https://doi.org/10.1093/heapol/czac030

**Strategies to promote evidence use for health programme improvement: learning from the experiences of embedded implementation research teams in Latin America and the Caribbean**
By N. Ilona Varallyay, Caitlin Kennedy, Sara C. Bennett and David H. Peters in Health Research Policy and Systems
We catalyse change

There are persistent inequities in health and well-being globally, and current approaches and solutions are often inadequate in addressing these complex health challenges.

By convening different stakeholders and bringing evidence to policy discussions, the Alliance aims to catalyse change and drive progress towards improved health outcomes and reduced health inequities.
Catalysing change in 2022

HSR2022 is a good platform to bring diverse stakeholders and enable dialogues on issues that matter to strengthening national health systems. Such a multi-stakeholder dialogue is a step towards enhancing trust, discussion and collective problem solving.

- MEENA PUTTURAJ
PhD candidate, Institute of Tropical Medicine

Health Systems Global organized the Seventh Global Symposium on Health Systems Research in Bogotá, Colombia, in November with support from the Alliance. The symposium brought together around 1250 participants in person, with a further 500 joining online.

By organizing five satellite sessions, coordinating two networking sessions and participating in three organized sessions, the Alliance had a strong presence at the symposium. It also supported the participation of a number of women mentees and a handful of other grantees to attend. The symposium was an important moment to reconvene the HPSR community following the virtual-only symposium in 2020 due to the impact of COVID-19.
BUILDING INSTITUTIONAL CAPACITY FOR HPSR AND DELIVERY SCIENCE (BIRD)

This programme is a new way to promote better interactions between policy-makers, researchers and other stakeholders that are introducing evidence as an input for policy-making.

- PROF. CHHEA CHHORVANN
  National Institute of Public Health, Cambodia

This initiative worked across seven countries, developing an institutional mentorship approach between the K2P Centre, at the American University of Beirut and six mentee institutions across all WHO regions, to strengthen institutional capacities for evidence-informed decision-making. This involved one in each WHO region undertaking institutional needs assessments, developing tailored coaching, strengthening policy networks through dialogues and briefs, developing curricula and initiating policy fellowship programmes within each country.

BIRD has generated many important knowledge products within each country and has also yielded important cascading effects across the six mentee institutions, including: being invited by neighbouring countries to replicate the programme (Georgia with Armenia and United Arab Emirates with Jordan); being selected to coordinate a national health research conference (Trinidad and Tobago); and informing debates in parliament, and being identified as trainers for the newly established policy analysis unit within the health ministry (Indonesia).

HEALTH POLICY ANALYSIS FOR HEALTH TAXES

Health taxes are indispensable policy tools to improve public health, save lives, and generate resources to invest in health, nutrition and other development priorities.

A lack of appreciation for political challenges can hamper national adaptation and adoption of health taxes. This is despite these taxes being one of the most effective tools for tackling the use of harmful products like tobacco and alcohol, which contribute to the increasing burden of noncommunicable diseases in LMICs.

The Alliance has been supporting eight health policy analysis studies on health taxes in Bangladesh, Ethiopia, Ghana, Indonesia, Nepal, Pakistan, Peru and Viet Nam. The teams are now finalizing their case studies examining how political economy factors influence and frame the design, adoption and implementation of health taxes. These case studies will form part of a special issue of BMJ Global Health planned for 2023. This work is being conducted in collaboration with an Inter-Agency Working Group (IAWG) on Health Taxes and the WHO Working Group on health taxes led by the WHO Health Promotion and Health Systems Governance and Financing departments.
While many health system policy-makers recognize the challenge of climate change, they do not always know exactly what to do or how to do it. Many simply do not know where to start.

The Alliance established a new project to identify how health systems policy-makers and managers are responding to climate change and to share lessons on how countries can overcome existing barriers.

In collaboration with the WHO Environment and Climate Health Department, this project has begun to synthesize evidence to respond to the climate crisis and move towards climate-resilient, low-carbon and sustainable health systems. Using mixed-method approaches and working closely with national health policy-makers, the results are expected to improve health policy as well as broader resilience. The Alliance selected six country research teams to carry out this work in Bangladesh, Guyana, the Islamic Republic of Iran, Mozambique, Nepal and Peru.
We empower leaders

The Alliance invests in the skills and structures necessary to inform and guide health policies and systems grounded in evidence.

At the individual level, our capacity strengthening efforts enhance the competencies of health researchers and policy-makers, allowing them to produce and use high-quality research. At the institutional level, we work to improve the governance, processes, and systems that support evidence-informed policy-making.
Empowering leaders in 2022

5
LMIC-based mentor institutions or technical support centres are strengthening capacities

2
Online courses now available

STRENGTHENING HPSR CAPACITIES IN FRANCOPHONE AFRICA

Francophone researchers remain under-represented in peer-reviewed publications and global HPSR fora.

To address the capacity gap of HPSR researchers in francophone Africa, the Alliance initiated a two-phase capacity initiative to support both individual and institutional capacities. In its first phase, the Laboratoire d’Etudes et de Recherche sur les Dynamiques Sociales et le Développement Local (LASDEL) in Niger, developed a six-month HPSR training programme for mid-level faculty drawn from across the region. They adapted Alliance materials in implementation research and systems thinking and used their own expertise in socio-anthropological research methods to provide training on HPSR methods, scientific writing and mentorship. In its second phase, the programme invited the 10 trained fellows to submit proposals to develop HPSR training and research programmes at their home institutions.

It is expected that this programme will, over the next two years, strengthen teams of HPSR educators and researchers to be able to offer HPSR training in the region, and account for a notable increase in the number of masters’ level students exposed to HPSR concepts taught locally in French.
I found this opportunity valuable as it will guide me to learn systematically how to spread knowledge that I believe is a cornerstone in formulating evidence-based, effective policies.

- FATEN ASDA
Mentee

Now in its third cohort, this initiative paired first-time women authors from India, Kenya, Liberia, Malawi, Nigeria, Peru, Yemen and Zimbabwe with mentors for one-to-one engagements that supports them through the process of submitting their manuscripts for publication. The programme is conducted in partnership with Health Systems Global and the academic journal Health Policy and Planning.

The programme aims to launch its special journal supplement in November 2023. The issue is co-edited by two researchers from Latin America, as this year’s initiative was linked to HSR2022 held in Bogotá, Colombia. In its third cohort, the programme has adopted several lessons from its previous iterations, including building in more support from the journal, increasing timeframes to allow more interactions between mentor-mentee pairs – as well as across the cohort – and more opportunities for reflection. HSR2022 provided an occasion for a face-to-face working session of mentor-mentee pairs, as well as a public panel featuring the programme’s experience to date. The result is a set of higher quality manuscripts of significance to the field of HPSR as compared to previous years.

COURSES, MODULES AND A NEW E-LEARNING PLATFORM

Making health policy and systems research methods and approaches accessible for all.

The Alliance Courses platform was launched at HSR2022 and is open and accessible to all free of charge. The platform includes a mix of standalone courses and modules. Each has a knowledge check that, once passed, produces a certificate of completion. The platform launched publicly with its first course, ‘Embedded implementation research for health programme managers’. A course on ‘Learning health systems’ is being piloted in partnership with the Universitas Gadjah Mada in Indonesia. Additionally, the Alliance has been working with a team from Delhi, India, to convert a selection of its existing readers and manuals into a set of introductory modules for the new Alliance online platform for teaching and training.
We have impact

The Alliance fosters sustainable capacity for health policy and systems research at the local level.

Our projects are designed not just to inform specific policy processes, but also to create a legacy of research excellence and innovative thinking that can continue to drive change long after the project has ended.
TIMOR-LESTE: USING SYSTEMS THINKING APPROACHES AT THE DISTRICT LEVEL

The Systems Thinking for Strengthening District Health Systems (ST-DHS) project has been working in Timor-Leste since 2020 to strengthen routine district management through the use of systems thinking tools and approaches in two districts (Dili and Viqueque). Based on the successful use of systems thinking as part of the vaccination roll-out during the COVID-19 pandemic, the national health ministry, with the support of an Australian nongovernmental organization, has adapted training curricula for district managers based on the experience of the ST-DHS. The health ministry is training an initial cohort of 30 managers in systems thinking from across the country.

KENYA, MALAWI AND UGANDA: FOSTERING INSTITUTIONS FOR EVIDENCE USE

Heightening Institutional Capacity for Government Use of Health Research (HIGH-Res) has been working over the last three years to strengthen existing structures for evidence use within ministries of health in Kenya, Malawi and Uganda. This included testing a suite of interventions, such as getting research technical working groups within health ministries functional, training research focal persons, developing evidence synthesis and rapid review mechanisms, writing evidence dialogues into health ministry annual workplans, creating health ministry-led policy streams during local science conferences, and developing evidence-informed decision-making curricula at government training institutions. In Kenya, this has involved training 84 health ministry and KEMRI staff on systematic reviews, and further mentoring 12 health ministry staff in-depth. So far, seven policy briefs have been produced. Of these briefs, two were used to inform health ministry policy decisions: the first informed the breast cancer screening guidelines 2021-2025; the second informed policy on countering misinformation and myths undermining the uptake of COVID-19 vaccines.
The Alliance gratefully acknowledges core financial support in 2022 from the Norwegian Agency for Development Cooperation (Norad) and the Swedish International Development Cooperation Agency (Sida).

Other donors and those supporting specific ongoing activities in 2022 include the Bill & Melinda Gates Foundation; the Department of Health and Social Care, United Kingdom of Great Britain and Northern Ireland; Gavi, the Vaccine Alliance; the Medical Research Council (MRC); and the Republic of Korea. We also received specified funding from the Ministry of Foreign Affairs, Sweden and the Norwegian Agency for Development Cooperation (Norad).
Governing bodies

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Marta Feletto, Technical Officer

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Solip Ha, Young Professional (Health Systems Research)

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Robert Marten, Strategy and Partnership Officer

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Kabir Sheikh, Policy Advisor

Zubin Shroff, Technical Officer

John Warriner, Technical Officer

Yasmine Yahoum, Team Assistant

Sonam Yangchen, Young Professional (Health Systems Research)

NOTE: People listed in this section served on the Board or STAC or were employed by the Secretariat at some point during 2022. They do not necessarily reflect the current composition of these bodies.