



## GLOBAL ALLIANCE ON WAR, CONFLICT & HEALTH

### FOUNDING DOCUMENT\*

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*\* This document was developed by the Alliance’s Executive Committee (Samer Jabbour, Amy Hagopian, Marian Abouzeid, Karl Blanchet, Marion Birch) on behalf of the Founding Steering Group and Secretariat (2019-2021) and has been updated to reflect new developments and structures in the Alliance as of June 2022.*



## Background

Wars and conflicts are among the most important issues of our times. In the 20<sup>th</sup> century alone, an estimated 231 million people, more than half of whom were civilians, lost their lives in conflict.<sup>1</sup> Between 2006 and 2016, total deaths attributable to conflict increased by 264%.<sup>2</sup> More wars and conflicts are underway now than at almost any time since World War 2. Many of these conflicts are intra-state, complex and protracted, with involvement of regional and international parties including state and non-state actors, rendering resolution difficult. The effects extend far beyond the battle zones and persist long after the last shots have been fired. Wars and conflicts exact a profound toll on health: in addition to direct deaths, injuries and psychological trauma, they destroy health and social systems and deprive populations of healthcare, resulting in indirect deaths, infectious disease outbreaks, and a large burden of avoidable ill health due to treatment forgone and lack of basic necessities such as food, clean water and shelter required for a life of dignity and health. With destruction of crucial civilian infrastructures and loss of livelihoods, wars and conflicts induce mass population displacement, now at an unprecedented level of 71 million worldwide, and place tremendous pressures on an overburdened humanitarian system. Furthermore, wars and conflicts are key impediments to achieving the Sustainable Development Goals (SDGs). While this is most obvious with regards to SDG 16 on Peace, Justice and Strong Institutions<sup>3</sup>, wars and conflicts can undermine progress on every other SDG. Addressing this profound and avoidable global toll of wars and conflicts requires a global collaborative effort premised on strong and equitable partnerships and inclusive, multidisciplinary and multisectoral engagement.

## The origins of the Alliance

Many individuals, organizations, and initiatives have made several common critical observations, and identified a shared set of unmet needs, regarding the current status of war, conflict and health globally:

- There are many individual or single-center initiatives (in research, scholarship, advocacy, and practice) from across the world in the area of war/conflict and health. Whilst increasing in number, these efforts remain insufficient and the field is underdeveloped given the sheer burden of wars/conflicts in our world today.<sup>4</sup>

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<sup>1</sup> Milton Leitenberg. Deaths in wars and conflicts in the 20<sup>th</sup> century. 3<sup>rd</sup> edition. Cornell University Peace Studies Program. Occasional Paper #29. New York. Available at:

[https://www.clingendael.org/sites/default/files/pdfs/20060800\\_cdsp\\_occ\\_leitenberg.pdf](https://www.clingendael.org/sites/default/files/pdfs/20060800_cdsp_occ_leitenberg.pdf)

<sup>2</sup> Institute for Economics & Peace. Global Peace Index 2018. Measuring Peace in a Complex World. June 2018. Available from: <http://visionofhumanity.org/reports>

<sup>3</sup> SDG 16: Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

<sup>4</sup> Hagopian A. Why isn't war properly framed and funded as a public health problem? *Journal of Medicine, Conflict and Survival* 2017; 33 (2): 92-100 <https://doi.org/10.1080/13623699.2017.1347848>

- Crucially, many existing efforts are largely directed towards war/conflict-health dimensions, but less attention is afforded to peace-health dimensions.
- Research and scholarship on war, conflict and health is siloed. There are limited links with key related fields, e.g. conflict or peace studies.
- Researchers and institutions from the Global South are under-represented in this field, in leadership, research, publication and engagement, despite living the greatest burden of conflict.
- Attention and leadership from the global health and academic communities in the area of war/conflict and health is increasing, but insufficient.
- The focus of global health in relation to war and conflict is largely related to documenting the health effects and essential lifesaving operational activities during conflict. Little attention is paid to long term effects of war/conflict, prevention of war in the first instance, and peace-health links.
- There are no global collaborative platforms that: 1) address the full spectrum of issues regarding war/conflict and health; 2) have a broad, multi-disciplinary and multisectoral constituency; 3) bring together existing siloed functions and entities working in this field; 4) offer capacity-building resources and a platform to amplify the voice of scholars in the Global South and young professionals.

*The Lancet*- American University of Beirut (AUB) Commission on Syria: Health in Conflict<sup>5</sup> (LCS) and partners have conducted background research to examine the evidence and take stock of the field, with preliminary findings validating the aforementioned observations:

- A bibliometric analysis of literature on war and health published between 1946 and 2018 shows a growth trend but volume remains small considering the toll.
- A thematic scoping literature review shows local conflict-affected populations receive less research attention compared with veterans and active military personnel.
- A literature review exploring challenges of conducting research in/on war and conflict settings shows numerous contextual, methodological and administrative challenges, not least of which are safety considerations and ethical issues.
- A review of barriers to Global South research leadership demonstrates a range of obstacles, both internal to the Global South and related to resourcing, capacities and research infrastructures, and external factors, notably the nature of partnerships and engagement of the Global North.
- A timeline analysis of the field since 1970 shows a growth of major initiatives and scholarship collaborations. However, many such efforts have focused on specific issues and / or specific wars and several have been time-limited and short-lived.
- While globally there are a number of networks focused on war, conflict and health, many of these either address a specific issue and / or are tailored to a particular professional group or geographic constituency. The vast majority of such initiatives are headquartered in the Global North, and there are currently no global collaborative

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<sup>5</sup> *The Lancet*-AUB Commission on Syria website: <http://website.aub.edu.lb/lcs/Pages/home.aspx>



platforms with a broad focus on war, conflict and health that have a diverse, multisectoral membership.

- A mapping of current educational programs and research hubs show concentration in Western Europe and North America, with very few initiatives in the Global South.
- A mapping of the distribution of global health research funding reveals that major funders devote very few resources to the topics of war, conflict and health.<sup>6</sup>

Building on these observations and preliminary findings, in June 2018 the LCS convened an expert meeting at AUB to take stock of the field of war, conflict and health, identify critical gaps and key priorities, and outline a way forward<sup>7</sup>. Convening over 20 local, regional and international experts, the meeting culminated in a commitment by participants to launch a global collaborative platform on war, conflict and health. After extensive further discussions with a broad network of experts from across the world, a Founding Steering Group was assembled (**Appendix 1**). Steering the Alliance through the 2019-2021 founding phase, the Group includes representatives from both academic and humanitarian operational organisations, in addition to major journals; has strong Global South representation from all geographic regions, including women from and based in the South; and includes experts from diverse disciplines, ranging from the medical and population health sciences to international humanitarian law, humanitarian studies and conflict studies. Founding Steering Group members convened face-to-face for the first time at a meeting hosted by the Center for Global Health at Queen Mary University of London in June 2019<sup>8</sup>, which was also attended by Richard Horton, Editor-in-Chief of *The Lancet*. This meeting initiated the process of formally establishing a new collaborative platform, the *Global Alliance on War, Conflict and Health*.

To ensure an inclusive, participatory approach, a number of global, regional and national consultations were convened (**Table 1**) with the following objectives:

- Present the initiative, explain its background, and gauge interest
- Seek input into refining the mandate, scope, priorities, and program of work of the Alliance
- Review key local and regional needs
- Discuss ways in which interested individuals, institutions and organizations can engage with the Alliance
- Ensure that the Global South has a strong voice in shaping the Alliance

Consultations engaged a range of individuals including academics, researchers, advocates, humanitarian practitioners, as well as organizations such as academic institutions, UN agencies, humanitarian organizations, and civil society organizations.

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<sup>6</sup> The launch of the Research for Health in Humanitarian Crises (R2HC) funding mechanism in 2013 has addressed a key gap but needs remain vast

<sup>7</sup> See news story about this meeting: <https://www.aub.edu.lb/fhs/news/Pages/espm2018.aspx>

<sup>8</sup> See news story about this meeting: [http://aub.edu.lb/fhs/news/Pages/lcs\\_globalhealthalliance.aspx](http://aub.edu.lb/fhs/news/Pages/lcs_globalhealthalliance.aspx)



**Table 1: Global expert community consultations conducted to date<sup>9</sup>:**

| Date               | Place             | Hosted by   |
|--------------------|-------------------|---|
| 25 June 2019       | London, UK        | Medact  |
| 26 September 2019  | Amman, Jordan     | Eastern Mediterranean Public Health Network (EMPHNET) and Global Health Development |
| 11 October 2019    | Beirut, Lebanon   | Alliance Secretariat, American University of Beirut                                 |
| 5 November 2019    | Philadelphia, USA | Peace Caucus, American Public Health Association                                    |
| 4 December 2019    | Berlin, Germany   | Physicians for Human Rights   |
| 21-23 January 2020 | Gaziantep, Turkey | Syrian American Medical Society, Bahar organization                                 |

Consultations slated for 2020 were postponed due to COVID-19.

The origins of the Alliance will span three distinct phases.

During the *foundational phase* (2019-2021), the Alliance progressed its agenda through the work of an Executive Committee (comprising Alliance Chair Samer Jabbour, Vice-Chair Amy Hagopian, Executive Director Marian Abouzeid and members Karl Blanchet and Marion Birch) and through the Secretariat (jointly led by the Alliance Chair and Executive Director).

Starting in 2022, the Alliance entered a one year *transition phase*, during which formal institutional Secretariat hosts have been assigned and new interim governance structures and transitional leadership engaged. This includes new incoming Chairs, Secretariat institutions and new, shared co-Executive Director positions. An Interim Executive Board has also been formed. Building on the extensive legwork, partner outreach and business development activities of the foundational phase, the transition phase will take the Alliance through the formal launch and a period of set up leading to Alliance registration, establishment of final structures and election of Alliance officers, engagement of membership in Alliance work and expansion of membership to include individuals, and resource mobilization.

## The Global Alliance on War, Conflict and Health

### *Our mission and vision*

The Alliance is a global community aiming to strengthen action on wars/conflicts as threats to health, and uphold justice and accountability as the foundations for peace and health. The Alliance brings together researchers, academics, practitioners and advocates who work to promote the prevention of war and sustainable peace, mitigate the effects of war and conflict on health, and support health rebuilding during and after conflict. Through science, collaboration, capacity building and advocacy, the Alliance advances this field of scholarship and practice, builds leadership, promotes equitable partnerships, and amplifies the voice of those living the burden of conflict.

<sup>9</sup> Additional consultations planned for spring 2020 were put on hold due to COVID-19 pandemic



The vision of the Alliance is for *a world without war, where health is protected, justice upheld and peace promoted.*

### **What we aim to achieve**

The Alliance aims to strengthen global action, in scholarship, policy, practice, and advocacy on war, conflict and health, with specific attention to amplifying the voice of those living the burden of wars/conflicts and/or enduring the consequences of the absence of sustainable peace and justice. The Alliance works to achieve two sets of objectives:

#### *Supporting affected people and communities*

- Promote the prevention of war/conflict and sustainable peace as core health actions
- Mitigate the effects of wars/conflicts on health through strengthening humanitarian evidence and translation to policy and practice
- Promote, enhance and value the voice of affected communities as well as researchers and advocates working in affected countries
- Support health rebuilding during and after war/conflict towards sustainable peace and justice

#### *Advancing the field*

- Promote and scale up scholarship on war, conflict and health through building capacity at the institutional and individual levels, exchanging knowledge and advancing the tools of research, scholarship and practice
- Provide global leadership in this area through promoting a strong collective voice, developing and mentoring leaders, setting direction and advancing an inspiring vision
- Build sustainable partnerships based on equitable relations and a common agenda

### **What we will do**

The Alliance will be a global collaborative platform that works across six core pillars of activities:

- **Science**: The Alliance strengthens and promotes the evidence base for action and advances the science on war, conflict and health through promotion of members publications, convening conferences, issuing methodologically rigorous evidence-based reports, and arranging special issues with partner journals.
- **Leadership**: The Alliance provides global leadership on war, conflict and health through the totality of its activities, including through representing and promoting a

strong collective voice, investing in developing and mentoring emerging leaders, participating in global events, and setting direction and advancing an inspiring vision.

- **Networking, collaboration & partnerships**: Promote networking, collaboration & partnerships on an equitable basis to ensure that affected communities, researchers, and advocates, particularly in the Global South, have a strong voice and a visible platform.
- **Capacity building**: Conduct, facilitate and / or promote activities such as workshops, short courses, webinars and MOOC courses; develop a compendium of institutional and educational resources in thematic and technical areas of identified need, that address the training and professional development needs of people and institutions in affected low and low and middle income countries. The Alliance will work with member institutions to explore the feasibility of joint online degree programs on war/conflict and health offered as a priority to people in countries and regions affected by war/conflict.
- **Advocacy & diplomacy**: Use various knowledge translation tools and draw on trusted professionals and organisations from diverse disciplines and sectors, to improve the understanding of war/conflict, peace and health issues among the general public, politicians, media and other constituencies, and shift the general threshold of tolerance, such that war and conflicts are considered unacceptable, unnecessary and avoidable. Engage in high-level diplomacy, and push for stronger action at the local as well as the global levels.
- **Witnessing and learning**: Through special working groups, the Alliance provides a witnessing function on how local, regional and global actors respond to the needs of communities affected by conflict and learn the lessons for future conflicts, including in relation to conflict prevention and sustainable and just peacebuilding.

Notably, the Alliance is neither a research-producing body nor a service provider. Rather, the Alliance will bridge the gap between research, policy and practice. It will work to build the field of war/conflict and health, bring the hitherto relatively neglected issue of war/conflict, peace and health to the fore of the global health agenda, and build capacity and amplify the voices of those living the burden of war and armed conflict. This is perhaps more urgent and important now than ever in the COVID-19 era, which has again highlighted the importance of localisation and locally-led research and action.

### **Flagship activities**

The Alliance's flagship activities will include:

- Establishing a ‘Global Observatory on War, Conflict and Health’ with indicators to track progress and identify areas for focused advocacy and action.
- Publishing a biennial ‘Global Status Report on War, Conflict and Health’, which will have the ambition of becoming the state-of-the-art publication on the current situation of the field.
- Convening a biennial ‘Global Conference on War, Conflict and Health’ with the key objectives of bringing together diverse participants and facilitating the creation of a community of practice, sharing of knowledge and experiences, advancing scholarship, and bridging the research-policy-practice nexus.
- Issuing a ‘Global Mapping Report’ of actors, initiatives and funding in the area of war, conflict and health. The report, to be updated annually, will use a modified 4W methodology (Who is doing What, Where and When, with What resources and How) to provide a comprehensive picture of global actors and their work in this field.

### How we will achieve results

The Alliance uses a theory of change to describe how its programs and activities, through intermediary pathways/processes and causal assumptions, will lead to desired outcomes and eventual progress (**Figure 1**).



**Figure 1: Alliance theory of change model**





### *The evolving governance of the Alliance*

During the founding phase (2019-2021), the Alliance was led by the Founding Steering Group (comprising core and ex-officio members, **Appendix 1**) which was responsible for laying the foundations for the Alliance. An Executive Committee led the operationalisation of the Alliance agenda. During the initial founding phase, the inaugural Secretariat functions were shared between the Alliance Chair (Samer Jabbour) and administrative and support staff at the Lancet-AUB Commission on Syria and Faculty of Health Sciences, American University of Beirut, Lebanon, and the Executive Director (Marian Abouzeid, Deakin University, Australia). Additional ancillary support was also provided by several institutions represented among members of the Founding group, including Deakin University, the Geneva Centre of Humanitarian Studies, Queen Mary University of London and the University of Washington.

Until the formal elections are held by the General Assembly (comprising all individual and institutional members), an interim governance structure will facilitate business development activities and operational processes. Many members of the Founding Steering Group will continue to provide guidance and support for the Alliance (composition of the new 'Advisory Group' is provided in **Appendix 2**) but the day-to-day leadership and management of the Alliance will be provided by an Interim Executive Board which includes the new Alliance Co-Chairs, members of the founding Executive Committee, and other new members committed to the cause of the Alliance and who are able to devote the time/effort to move the Alliance forward during the transition phase (the composition of the Interim Executive Board is evolving. Current members are listed in **Appendix 3**). The Board sets the agenda and is the operational leadership of the Alliance and is aided by the multi-institutional Secretariat and incoming co-Executive Directors.

This Board is empowered to take the Alliance through the transition phase until permanent Alliance structures and organization are established based on a meeting of the Alliance General Assembly (comprising all individual and institutional members) where elections to Alliance posts are conducted.

As part of the transition phase, starting in 2022 the Secretariat will be a global multi-institutional collaboration jointly hosted by the American University of Beirut, University of Southampton, and the People's Health Movement. The Alliance Chairs and the Alliance co-Executive Directors are drawn from these institutions (**Appendix 3**). The Secretariat implements the agenda of the Alliance and is coordinated by the co-Executive Directors. As the Alliance evolves, it will activate various committees, working groups and taskforces to address specific needs, from the technical (working groups) to the organizational (committees and taskforces).



## *Membership of the Alliance*

Once launched and fully operational, the Alliance will be a member-based collaborative platform, open to individual members as well as institutional members who identify with the vision, mission, objectives and program of work of the Alliance. Members are, have or aspire to be working in this field or are simply interested in the work of the Alliance. Members will decide on the Alliance's permanent governance structure, elect officers to leadership positions, staff various committees, drive the establishment of thematic working groups, and contribute to various Alliance activities.

Alliance members can come from any setting and sector and any relevant discipline. Pending formal procedures for registering individual membership, the focus of the pre-launch phase of Alliance building has been on institutional membership. Many centers, groups, networks, and organizations have already signed up as Alliance members. A list of institutional members, over 100 entities as of June 2022, is available on Alliance website. Institutional members include academic institutions, humanitarian organizations, research centers, associations/ networks/societies, civil society groups and private sector entities.

Why join the Alliance as an institutional member?

- War/conflict and health is a topic of core interest to your institution
- Your institution would like to be part of a truly multi-disciplinary collaboration (addressing one of the main shortcomings we have identified in this field which is limited multi-disciplinary collaboration)
- Your institution works in one of the 'feeder fields' (conflict studies, displacement/refugee studies, IHL, health and human rights...) identified in the mapping as important to the foundation of the field of war/conflict and health
- Joining now allows your institutions to influence war/conflict and health as a nascent field of scholarship and practice
- Joining now opens the opportunity, particularly at this early stage of the life of the Alliance, for your institution to shape the Alliance through voting on permanent governance structure (which needs to be developed after the current interim founding period), joining committees and taskforces, and developing and executing the Alliance's program of work
- Alliance membership increases the global networks and collaborations for your institution
- Alliance membership increases international outreach/exposure for your institutions' outputs and activities



Note: Institutional membership does not carry any liabilities for institutional members. The institution decides how active it would like to be in the Alliance. There is no membership fee at this point.

## APPENDIX 1: Founding Steering Group and Secretariat, 2019-2021

| Name                                      | Affiliation   | Country                         |                   |
|---|---|---------------------------------|-------------------|
| Mihir BHAT                                | Founder and Director, All India Disaster Mitigation Institute   | India                           |                   |
| Karl BLANCHET                             | Professor, Faculty of Medicine, University of Geneva; Director, Geneva Centre of Humanitarian Studies   | Switzerland                     |                   |
| Camila BRAGA                              | Researcher, Center for Peace and Conflict Studies, University of São Paulo  | Brazil                          |                   |
| Rita GIACAMAN                             | Professor and Director, Institute of Community and Public Health, Birzeit University  | Palestine                       |                   |
| Amy HAGOPIAN (Vice Chair)                 | Professor, School of Public Health, The University of Washington  | USA                             |                   |
| Natasha HOWARD                            | Associate Professor, Saw Swee Hock School of Public Health, National University of Singapore  | Singapore                       |                   |
| Samer JABBOUR (Chair)                     | Professor of Practice, Faculty of Health Sciences, AUB; Co-Chair, <i>The Lancet</i> – AUB Commission on Syria   | Syria/Lebanon                   |                   |
| David McCOY                               | Institute of Population Health Sciences, Queen Mary's University of London  | UK                              |                   |
| Rabie NASSER                              | Co-Founder, Syrian Center for Policy Research   | Syria/Vienna                    |                   |
| Christopher ORACH                         | Professor, Makerere University School of Public Health  | Uganda                          |                   |
| Pierre PERRIN                             | Independent; formerly Chief Medical Officer, ICRC   | France                          |                   |
| Leonard RUBENSTEIN                        | Chair, Safeguarding Health in Conflict Coalition; Program Director, Conflict and Health, Center for Public Health and Human Rights & Professor of Practice, Johns Hopkins Bloomberg School of Public Health | USA                             |                   |
| Sameen SIDDIQI                            | Professor and Chair, Department of Community Health Sciences, The Aga Khan University, Karachi  | Pakistan                        |                   |
| Paul SPIEGL                               | Professor & Director, Center for Humanitarian Health, Johns Hopkins University  | USA                             |                   |
| Richard SULLIVAN                          | Professor and Director, Conflict & Health Research Group, King's College London   | UK                              |                   |
| <b>Ex-Officio members</b>                 | <b>Representing</b>   | <b>Role</b>                     |                   |
| <i>Partner journals</i>                   |   |                                 |                   |
| Marion BIRCH                              | Medicine, Conflict and Survival   | Co-Editor                       |                   |
| Tamara LUCAS                              | <i>The Lancet</i>   | Executive Editor                |                   |
| Sara PANTULIANO                           | Disasters   | Editor                          |                   |
| <i>Partner humanitarian organizations</i> |   |                                 |                   |
| Esperanza Martinez                        | International Committee of the Red Cross (ICRC)   | Head of Health                  |                   |
| Jehan BSEISO                              | Médecins Sans Frontières (MSF)  | Executive Director, MSF-Lebanon |                   |
| <b>SECRETARIAT</b>                        |   |                                 |                   |
| Name                                      | Affiliation   | Role                            | Country           |
| Marian ABOUZEID                           | Deakin University; The Lancet- AUB Commission on Syria; Faculty of Health Sciences, AUB   | Executive Director              | Australia/Lebanon |
| Gina CORDAHI                              | Faculty of Health Sciences, AUB   | Project administrator           | Lebanon           |

## APPENDIX 2: Advisory (formerly Steering) Group, 2022

| Name                                      | Affiliation  | Country  |
|---|--|--|
| Mihir BHAT                                | Founder and Director, All India Disaster Mitigation Institute  | India  |
| Camila BRAGA                              | Researcher, Center for Peace and Conflict Studies, University of São Paulo   | Brazil   |
| Rita GIACAMAN                             | Professor and Director, Institute of Community and Public Health, Birzeit University                                     | Palestine                                      |
| Natasha HOWARD                            | Associate Professor, Saw Swee Hock School of Public Health, National University of Singapore                             | Singapore                                      |
| Rabie NASSER                              | Co-Founder, Syrian Center for Policy Research  | Syria/Austria                                  |
| Christopher ORACH                         | Professor, Makerere University School of Public Health   | Uganda   |
| Pierre PERRIN                             | Independent (formerly Chief Medical Officer, ICRC)   | France   |
| Leonard RUBENSTEIN                        | Chair, Safeguarding Health in Conflict Coalition; Professor of Practice, Johns Hopkins Bloomberg School of Public Health | USA  |
| Sameen SIDDIQI                            | Professor and Chair, Department of Community Health Sciences, The Aga Khan University                                    | Pakistan                                       |
| Richard SULLIVAN                          | Professor and Director, Conflict & Health Research Group, King's College London  | UK   |
| <b>Ex-Officio members</b>                 | <b>Representing</b>  | <b>Role</b>                                    |
| <i>Partner journals</i>                   |  |  |
| TBD                                       | <i>The Lancet</i>  | Executive Editor                               |
| Helen young                               | Disasters  | Editor<br>USA                                  |
| <i>Partner humanitarian organizations</i> |  |  |
| TBD                                       | International Committee of the Red Cross (ICRC)  | Head of Health<br>Colombia/<br>Switzerland     |
| Jehan BSEISO                              | Médecins Sans Frontières (MSF)   | Executive Director, MSF-<br>Lebanon<br>Lebanon |

### APPENDIX 3: Interim Executive Board & Secretariat, 2022

| INTERIM EXECUTIVE BOARD |  |                       |               |
|-------------------------|--|-----------------------|---------------|
| Name                    | Affiliation  |                       | Country       |
| Marian ABOUZEID         | Alfred Deakin Institute, Deakin University   |                       | Australia     |
| James BATCHELOR *       | Professor & Associate Dean, Faculty of Medicine, University of Southampton   |                       | UK            |
| Karl BLANCHET           | Professor, Faculty of Medicine, University of Geneva; Director, Geneva Centre of Humanitarian Studies  |                       | Switzerland   |
| Amy HAGOPIAN * #        | Professor, School of Public Health, University of Washington; People's Health Movement (PHM) Thematic Circle on War and Conflict, Occupation and Forced Migration and Health |                       | USA           |
| Samer JABBOUR *         | Professor of Practice, Faculty of Health Sciences, AUB; Co-Chair, <i>The Lancet</i> – AUB Commission on Syria  |                       | Syria/Lebanon |
| David McCOY             | Research Lead, International Institute of Global Health (IIGH), United Nations University  |                       | Malaysia      |
| Ex-Officio members      | Representing   | Role                  |               |
| Marion BIRCH            | Medicine, Conflict and Survival  | Co-Editor             | UK            |
| SECRETARIAT             |  |                       |               |
| Name                    | Affiliation  | Role                  | Country       |
| Elsara Badri            | American University of Beirut  | Co-Executive Director | Lebanon       |
| Rebecca Brown           | University of Southampton  | Co-Executive Director | UK            |
| Jack Denny              | University of Southampton  | Co-Executive Director | UK            |

\* Alliance Co-Chairs

# Representing the PHM War and Conflict, Occupation and Forced Migration and Health



**Alliance Founding Steering Group, Secretariat members, and guests, meeting at Queen Mary University of London, June 2019**

L-R: Rita Giacaman, Pierre Perrin, Sameen Siddiqi, Paul Spiegel, Richard Horton, Richard Sullivan, Samer Jabbour, Amy Hagopian, Leonard Rubenstein, Marian Abouzeid, Gina Cordahi (Secretariat member, 2019-20), Marion Birch, David McCoy, Carlos Umana (guest), Jonathan Kennedy (guest).