

Ahimsa Renaissance Movement

Learning from the crisis: a manifesto for a new life

"Be the change you want to see in the world"

Gandhi.

The COVID-19 crisis must be an opportunity for a change. Things cannot go back to normal, if "normal" means "what it was before the outbreak." Each of us is an actor in this change, and we should not be reluctant to acknowledge it.

The launch of this new initiative is an attempt by the Ahimsa Renaissance Movement, or ARM, to establish a new impetus for change based on what we have learned from this crisis—what we want to share with newer generations, with our children and grandchildren. The engagement of the young will be crucial in the changes to come; and all of us need to share our knowledge and contribute, to show that we are a willing part of that change.

We strongly need leaders and committed partners.

ARM is a movement seeking to bring together many of the groups traditionally perceived as in opposition to one another—rich and poor, young and old, charities and profit-driven companies, local and global organizations—in an atmosphere of tolerance, respect, compassion, fraternity, sharing, listening and open-mindedness, to provide concrete solutions to the world's most pressing health problems.

What will be the outcome of this initiative?

We want to apply the lessons of this crisis and use the force of Ahimsa's established global network to bring together concrete proposals that help shape tomorrow for the better.

Five initial avenues for action have been chosen: the fight against COVID-19; tuberculosis, a disease of poverty; the elimination of cervical cancer; the empowerment of women; and the reconciliation of traditional and conventional approaches to medicine in the context of a global "One Health" approach.

ARM does not want to create new silos or to compete with other initiatives, but to collaborate, bringing together all those, from across the whole of society, who are willing to participate.

Who do we want to influence?

Decision-makers from each generation, with long term vision and the will to improve the global environment, who are looking for wisdom and ways to act for the common good.

Learning from the crisis: our manifesto for a new life

In this first year, ARM aims to take opportunities presented by the COVID-19 health crisis to address specific topics that help us rethink and remodel the global health landscape.

How can we rebuild new fundamentals and innovative partnerships through concrete “glocal” (global/local) showcase projects?

The global North needs to rethink its relationship to the South, **combining bottom-up local solutions with top-down approaches (a “glocal” perspective). We need to give voice and visibility to local initiatives**, listening to expertise from the field and addressing specific local needs. Doing this, we can answer a number of pressing questions:

How can we reimagine the global health landscape in the post-pandemic world?

What new models of leadership and partnership will emerge?

Can we find better ways of balancing collaboration and competition, especially around access to healthcare for the poorest in the world?

How can we engage the youth?

What is the future role of innovation, of digital information and communication, in making good health contagious?

Specific projects, especially for the most vulnerable

ARM will identify projects that have developed successful models that have been shown to have a positive impact on community conditions. We will review and analyze current programs in the field which:

- Are directed toward improving health in the community
- Are reaching or exceeding their expected results
- Can be replicated in other communities
- Have models that allow independent decision-making
- Have access to traditional and modern medicine
- Respond to market access needs
- Are designed to take their cultural context into account.

At this stage, we propose five specific action areas that are particularly relevant to the most vulnerable:

The impact of Covid-19 on extreme poverty

It is estimated that the COVID-19 pandemic will push an additional 88-115 million people into extreme poverty this year, with the total rising to as many as 150 million by 2021, depending on the severity of the economic contraction.

"The pandemic and global recession may cause over 1.4% of the world's population to fall into extreme poverty"

David Malpass, President of World Bank Group

Tests and treatments are not the only pieces of the puzzle. To respond to this situation, we also need to:

- Build health systems that foster market access to prevention, testing, treatment and monitoring
- Amplify the voices of those who seek unity and cooperation in order to protect all people, including the most vulnerable
- Develop innovative models to ensure that essential medicines and vaccines are affordable and available to everyone, no matter where they live.

TB, a disease of poverty

The countries with the highest rates of TB are also some of the poorest and/or most unequal societies. TB is more common in countries where many people live in absolute poverty because those people are more likely to:

- Live and work in poorly ventilated and overcrowded conditions that provide ideal conditions for TB bacteria to spread
- Suffer from malnutrition and disease (particularly HIV), which reduce resistance to TB
- Have limited access to healthcare: just one person with untreated infectious TB can pass the illness on to 10-15 people annually.

Cervical cancer

Cervical cancer is rare in that it is a disease for which we already have a holistic solution involving diagnostics, treatment and vaccines, for which we need to develop a holistic approach.

This project is connected with the WHO launch in November 2020 of the Global Strategy to Accelerate the Elimination of Cervical Cancer.

"Cervical cancer is one cancer the world can actually eliminate: it's time to do it."

Dr. Tedros Adhanom Ghebreyesus, DG WHO

Empowering women to fulfil their potential within their communities

Women are an important part of the international development agenda. Empowering women and promoting gender equality are enshrined as global development objectives in the new Sustainable Development Goals (SDGs).

"If non-violence [Ahimsa] is the law of humanity, the future belongs to women. Who can appeal to the hearts of men with greater sensitivity and efficacy than women?" Gandhi

How traditional and conventional medicine can be reconciled in the context of a new global “One Health” approach

“Countries aiming to integrate the best of traditional and conventional medicine would do well to look not only at the many differences between the two systems, but also at areas where both converge to help tackle the unique health challenges of the 21st century. In an ideal world, traditional medicine would be an option offered by a well-functioning, people-centered health system that balances curative services with preventive care”.

Dr Tedros Adhanom Ghebreyesus, DG WHO

Without a transformative change in the global approach to dealing with infectious diseases, future pandemics will emerge more often, spread more rapidly, do more damage to the world economy and kill more people than COVID-19. They will come from, and affect, the interactions between human health, animal health and the environment.

Experts agree that reshaping the pandemic context is possible, but that it will require a seismic shift in approach from reaction to prevention, and convergence between traditional and conventional approaches to medicine.

Ahimsa wants to bring together representatives of both approaches to demonstrate how they can be effective **not in opposition, but as complementary arms of unified approaches.**

Taking care of the environment is another key element of this topic.

Role of faith-inspired organizations and the Mobile Health Alliance

To find projects in all of these areas, ARM will make use of the Ahimsa network, which has been in existence for over 30 years, stretches all around the world, and includes partners working on access to health care for the poorest in places where health structures such as hospitals, clinics and dispensaries are severely stretched or nonexistent.

We will work with two partner networks in particular.

The faith-inspired organizations (FiOs) that are often closest to the poorest

Faith inspired organizations can be considered a mandatory crossing point through which to reach many of the world's most vulnerable people. They are among the most important service providers in the most troubled and remote regions; they represent substantial sources of finance and human resources; and they should be seen as active, creative participants in the health arena.

Despite this, FiOs rarely participate meaningfully in the major partnerships on global health established by the key international organizations. There are few approaches or frameworks that integrate this large segment of the global health sector, trace future paths for collaboration, or include it meaningfully in global health efforts to achieve Universal Health Coverage.

Over the past seven years, Ahimsa developed a strong network across the field of global health and faith-inspired communities. In collaboration with the World Faiths Development Dialogue (WFDD), Ahimsa has organized a series of high level forums around topics including the social entrepreneurship, service, and innovative dimensions of the work of faith based communities, and the engagement of faith-inspired communities in local and national health system governance.

[Learn more about the FIOs](#)



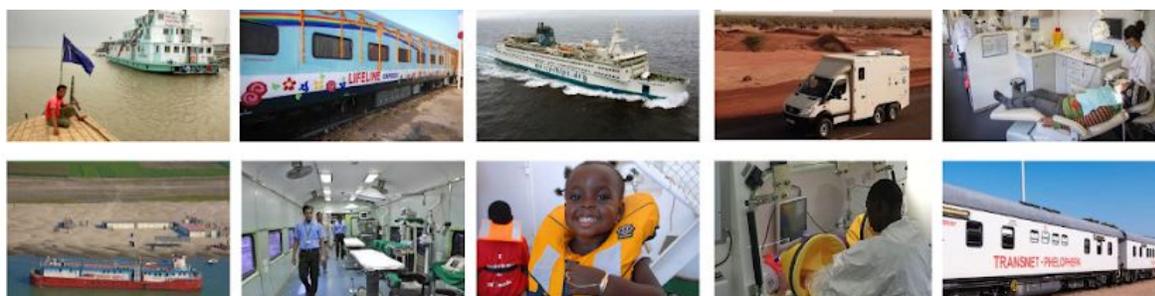
The Mobile Health Alliance (MHA): a global partnership of mobile health forces

“On land, at sea, and in the air: quality health services are on the way”

Illness is universal, but access to healthcare is not. A number of organizations around the world have set out to remedy this by providing mobile health solutions that travel to the communities that need them, dispensing services in innovative ways including from specially fitted boats, trains and mobile labs. During the Ahimsa Forum in 2019, the paths of a number of such organizations crossed to form a new network: a global consortium of mobile health providers, the Mobile Health Alliance (MHA).

Spread across the globe, with strong local footprints in over 20 countries, these partners set up an open collaboration platform to share best practices and expertise on innovations that have been implemented successfully in different contexts, together reimagining the ways in which healthcare can be provided to patients in resource-poor settings. Working in different approaches tailored to different contexts, they share a vision of universal health coverage in a world where all people, including the hard to reach and most marginalized, have equal opportunities to live a healthy life of dignity and hope.

[Learn more about the Mobile Health Alliance](#)



The Role of Art



Renaissance: Japanese kanji by Setsuko Klossowska de Rola

Since its creation, Ahimsa has always wanted to devote part of its work to the artistic and cultural diversity of the countries with which it works.

Cultural preservation

“This is something special about Ahimsa. There are so many movements about health, physical health, but it is very rare to combine this with consideration of spirit, mind and art. To find an organization that takes this view... it’s quite unique. And that is why I am so happy to be in it...it’s the vision of all connected, it’s a very profoundly rooted worldview. The Ahimsa foundation, with its focus on health beyond just physical health, which acknowledges the importance of the spiritual, attracts me a lot.”

Setsuko Klossowska de Rola, UNESCO Artist for Peace

Whatever our differences, we must maintain our traditions, our diversity, the beliefs of our cultures, and the things which give us meaning and purpose in life.

“Our differences are indeed strengths from which we must build our future, not difficulties behind which we must hide.”

JF de Lavison

Art helps bridge different cultures, and we must put culture at the forefront of peace-building.

How ARM will work

- ARM will hold three research meetings and two virtual research meetings every year, and run a yearly [fellowship program](#).
- The organization will hold five conferences or topical meetings each year: for example, on 10 December 2020, ARM has set up a dialogue between **Michael Møller**, former Under-Secretary-General of the United Nations and the 12th Director-General of the United Nations Office at Geneva, and **three young leaders from around the world**. Together they will discuss **"The Covid-19 epidemic: how to transform this crisis into an opportunity."**
- Ahimsa will run an annual "Provocative Forum" inviting new initiatives for change that reconcile theory and practice by proposing concrete projects in the field.
- ARM will issue three newsletters a year with articles from all around the international Ahimsa network.

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