PHILANTHROPY & GLOBAL HEALTH: OPPORTUNITIES FOR SUSTAINABLE IMPACT
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BREAKFAST AT THE UNIVERSITY OF GENEVA

Dr Benoît Dubuis
Director of Campus Biotech
PHILANTHROPY & GLOBAL HEALTH: OPPORTUNITIES FOR SUSTAINABLE IMPACT

BREAKFAST AT THE UNIVERSITY OF GENEVA

Mr Raymond Loretan
Chairman of the Diplomatic Club of Geneva
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BREAKFAST AT THE UNIVERSITY OF GENEVA

Ms Laetitia Gill
Executive Director of the Geneva Centre for Philanthropy, UNIGE
Geneva Centre for Philanthropy

Fostering action through academic research and teaching

www.unige.ch/philanthropie
The Geneva Centre for Philanthropy (GCP)

• **Filling a gap:** in and around Geneva high density of NGOs and philanthropy actors but lack of research and teaching platform

• **The aim of the GCP is two-fold:**
  - To encourage academic research and teaching in philanthropy
  - To transfer knowledge to meet the needs of practitioners

• **Philanthropy being pluridisciplinary by nature, our approach** is not limited to one discipline but encompasses law, management, finance as well as affective science, philosophy, value and ethics

• **Public-private partnership** between the University of Geneva and key players in Philanthropy
The Centre’s activities

To carry out its mission, the GCP focuses on 3 pillars:

**TEACHING**

- 1st course in Philanthropy: «La Philanthropie et ses principaux enjeux juridiques», Law Faculty, Master programme, Sept to Dec 2018. Open to the public

- **Masterclass 2018** with the CEPS et Swiss Philanthropy Foundation, 12-14 November 2018 (Full)

- **CAS in Grantmaking**, Faculty of Economy & Management, Sept. 2019

- **Cultural Philanthropy and the Law**, Master Course, University of Geneva and the Art-Law Centre, *Prof Renold/ Dr Bandle, from 2019*

- Course in **Behavioral Philanthropy** – from 2019
The Centre’s activities

RESEARCH & PUBLICATIONS

- CSR & Philanthropy
- Taxation and Philanthropy (joint-venture with OECD)
- Social Impact Bond (joint-venture with ICRC)
- Hybrid entities
- Cultural heritage
- Ethics
- Emotions & giving (Prof. Sander and Dr Cova)
- Water & Corporate Social Responsibility (CSR): The Path Towards Action (Prof. B de Chazournes/Dr Tignino)

EVENTS

- «Genève et la philanthropie: un état d’esprit?», Peter Maurer, Chairman of the ICRC and Olivier Fatio, honorary Professor of University of Geneva – 18 Sept 2018
- «Philanthropy, emotions and empathy: what links?» in partnership with CISA and Le Temps, 10 Dec 2018
Contact

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PHILANTHROPY & GLOBAL HEALTH: OPPORTUNITIES FOR SUSTAINABLE IMPACT

BREAKFAST AT THE UNIVERSITY OF GENEVA

Prof. Henry Peter
Head of the Geneva Centre for Philanthropy, UNIGE
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BREAKFAST AT THE UNIVERSITY OF GENEVA

Prof. Antoine Geissbuhler
Vice-Dean in charge of the humanitarian and international medicine, UNIGE

Club Diplomatique de Genève
Fondation pour Genève
UNIVERSITÉ DE GENÈVE
Prof. Antoine Geissbuhler, MD

Vice-dean, faculty of medicine, University of Geneva
Director, division of eHealth and Telemedicine, Geneva University Hospitals
Director, innovation center, Geneva University Hospitals
Dr. Kamga, public health and medical informatics expert

Dr. Etoa, general practitioner, trained in tele-ultrasonography
Tele-ultrasonography from the district hospital of Kolokani (Mali)

The images are reviewed by a radiologist (300 km away)

The patient can be managed locally.
Training by local experts

Dr Massaquoi webcasts a course from Monrovia (Liberia)

1000+ courses in French
150+ in English
50+ in Spanish
40+ in Portuguese
50+ in Russian
Medical education reform in Kyrgyzstan

Problem-based learning
Continuing education to retain young talents in remote hospitals
Phikal health center in East Nepal

50% of cases can be managed with remote medical expertise
Higher education of Somali refugees in the Dadaab refugee camp in Kenya

Medical capacity building via eLearning with credits from University of Geneva
Discussion thread

Edward Wayi

I have seen the case and all that can be done is meshed split thickness graft. It should take without much problem. Unfortunately, the wound is too big, so you need to have mesher rather than doing hand meshing.

© 2013-11-19 10:36

Pierre Quinodoz

Helo Ahuka

We can put a skin graft with wide mesh. Pierre and Alberto

© 2014-01-17 15:17
South-South cooperation

Professor Touré, from Mali, trains doctors and midwives in Mauritania
Centers of excellence

Dr Bagayoko, MD, PhD, with three of his graduating students at the University of Bamako, Mali
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BREAKFAST AT THE UNIVERSITY OF GENEVA

Mr Firoz Ladak
CEO of the Edmond de Rothschild Foundations
Firoz LADAK
CEO

Club Diplomatique de Genève
September 2018
Our Mission

Empowerment for an inclusive and collaborative society

Empowerment
Inclusion
Collaboration
7 GENERATIONS

10 FOUNDATIONS in 5 COUNTRIES

100 PROJECTS in 15 COUNTRIES
What We Do
Capacity Building & Harnessing Leadership

Entrepreneurship  Arts  Health  Expertise in Philanthropy
Network

PARIS
- Fondation Ophtalmologique A. de Rothschild
- Institut de Biologie Physico-Chimique
- Fondation OPEJ

GENEVE
- Fondation Maurice et Noémie de Rothschild
- Fondation Edmond de Rothschild
- Mémorial A. de Rothschild

CAESAREA
The Rothschild Caesarea Foundation

MADRID
Fundación Ariane de Rothschild

NEW YORK
The Edmond de Rothschild Foundation
A Legacy Transformed

**VISION**
- FOCUS on key mission drivers
- DETERMINE key areas of interest and expertise
- TRANSFORM governance to maximize effectiveness
- HARNESS charitable legacy towards strategic philanthropy

**ACTION**
- BUILD a lean and professional team
- OPTIMISE budget allocation
- APPOINT new board members with proven added value
- SELECT best-in-class partners
- INVEST in targeted communication
- CONSTRUCT dedicated impact tools
How We Work

CO-DEVELOPMENT

Operating

Disruption

Entrepreneurial Drive

Cross Fertilization

Patronage
THE CHALLENGE (Think Big)

- **Broadening online education** to massive audience of university students in Africa
- Outreach, content upgrade and filling the digital gap
- Matching skills with **employment and entrepreneurship**
How We Work - MOOCS4AFRICA (2/4)
Co-developing solutions for higher-education digitalization in Africa

**PARTNERSHIP MODEL AND STAKEHOLDERS**

**CORPORATES**
- Insights on skill gap
- Local apprenticeship programs

**DIRECT BENEFICIARIES - RESCIF UNIVERSITIES, STUDENTS AND TEACHERS**
- 22 North / South institutions
- Collaboration
- MOOCS production

**DEVELOPMENT ORGANISATIONS**
- Technical and financial support
- Advisory

**HIGHER EDUCATION MINISTRIES**
- Facilitating local implementation

**PROGRAM MANAGEMENT**
- Program management and stakeholder coordination

**PROGRAM STRATEGIC PARTNERS**
- Core funding, strategic insight, network and local knowledge
- Skills transfer
- Advocacy

**CODEV**

**EDMOND DE ROTHSCHILD FOUNDATIONS**

**ÉCOLE POLYTECHNIQUE FÉDÉRALE DE LAUSANNE**

**AGENCE UNIVERSITAIRE DE LA FRANCOPHONIE**

**THE WORLD BANK**

**RESCIF**

**CAINE 2000**

**IN-TOUCH**
How We Work - MOOCS4AFRICA (3/4)
Co-developing solutions for higher-education digitalization in Africa

HEALTH & ENGINEERING MOOCs

URBAN ENVIRONMENT MANAGEMENT
• African cities: Environment and Sanitation
• Introduction to Household Water Treatment and Safe Storage
• Sanitation Technologies and Systems design

NEUROSCIENCES:
• Cellular Mechanisms of Brain Function
• Reconstruction and simulation of neural tissues
• Nature in code: Biology and Javascript
How We Work - MOOCS4AFRICA (4/4)
Co-developping solutions for higher-education digitalization in Africa

**ACTIVITIES**
- MOOCs production (collaborative)
- **Skills transfer** & Teaching engineering
- Certification
- Advocacy

**OUTCOMES**
- **22 North / South universities** participating (RESCIF)
- **220 000 students** registered (25% in Africa)
- 51 MOOCs
- 65 teachers and technicians
- **3 MOOCs factories** (Ivory Coast, Senegal, Cameroon)
- Development of **certified curriculum** (Certificate of Open Studies), and Apprenticeship
- Institutional reinforcement (World Bank, AUF, private foundations, ministries)

**IMPACTS**
- Integration of MOOCs content in engineering curricula
- Leading to **modernization & organizational change** of African universities
- Growth of market demand for certified students
- Trigger for **higher public resources** allocated for digital training
How We Work - 2\textsuperscript{ND} Chance: a case study

Private philanthropy harnessing skills and engagement towards greater impact

- Identifying proven track record (DDC), outstanding skills and drive for change of Swiss doctors
- Assessing urgent needs in reconstructive surgery and socio-economic consequences
- Determining potential for greater impact

2013-2014: Selection

- Organizational efficiency, governance and result-based management (Geneva)
- Implementation of strategic plan & objectives
- Validation of medical/scientific curriculum through institutional partnership (COSECSA, College of Surgeons of East, Central and Southern Africa)
- Extension of financial support from private foundations & City of Geneva

2014-2015: Pilote

- Pilote phase to deepen sustainability and accelerate South/South best practices

2016-2018: Consolidation

- Model replication from Southern/Eastern Africa to West Africa
- Towards greater policy impact

2019- : Scale up
PHILANTHROPY & GLOBAL HEALTH: OPPORTUNITIES FOR SUSTAINABLE IMPACT

BREAKFAST AT THE UNIVERSITY OF GENEVA

Dr Pierre Quinodoz
Reconstructive Surgeon and Chairman of 2nd Chance
The 2nd Chance « adventure »
Reconstructive Surgery for Life Reconstruction
1. Reconstructive surgery – what are we talking about?
«Plastic, Reconstructive and Aesthetic Surgery specialists»
What is plastic reconstructive surgery?

A surgery built on war wounds

World war I, World war II:
What is plastic reconstructive surgery?

Titre Suisse : «Spécialiste FMH en Chirurgie Plastique, Reconstructive et Esthétique»

Today the speciality has a very long cursus with high specialization and a minimum of ten years of formation including full training in general surgery.

However most of general surgeons around the world have no training in plastic reconstructive surgery and many patients are left without treatment.
1998: Bombings US Embassies in Nairobi and Dar es Salaam
Swiss Government Development Cooperation (SDC) program for reconstructive surgery activities

1999 - First course in Tanzania one year after the bombing

For the first time, a real reflexion about people reconstruction.
Most common plastic & reconstructive procedures

- Congenital malformation
- Trauma reconstruction
  - natural disaster
  - war
  - violence against women
  - burn
  ...
- Infectious disease reconstruction
  - leprosy
  - noma
  ...
- Tumor reconstruction
- Neglected disease

**Reconstructive surgery has nothing to do with aesthetic surgery!**
Congenital malformations
Acute burns
Chronic burns
Trauma: Kruckenberg’s operation
Reconstruction work has been slow in Barpak, a village at the epicenter of the earthquakes.

Google Syria’s
Association was created in 2010

No touch & go

“we train, treat & advocate”
Where do we help?
Why so many countries

**IN EAST AFRICA**
COSECA COUNTRIES

34 Reconstructive Surgeons

**IN SWITZERLAND**
7’000’000 people:
178 Reconstructive Surgeons
2\textsuperscript{nd} Chance

A unique Swiss model for bringing reconstructive surgery at the forefront of international cooperation and South-South sustainability
2015: Memorandum of Understanding between 2\textsuperscript{nd} Chance and COSECSA (College of Surgeons of East, Central and Southern Africa)
2nd Chance: School of reconstructive surgeon, e-learning web site with videos and text books
Cleft Lip and Palate
Cranio-facial clefs

Reconstructive surgery for life reconstruction

Edited by: Dr. Alberto Musolas
Collaborators: Dr. Anet Mengiste, Dr. Quinodou, Dr. Lionel Dumont, Dr. Edward Wei
Illustrations by: Roger Torres, Alberto Musolas
• Support surgeons (grant) to follow the curriculum of reconstructive surgery
  Building of an active network of African plastic surgeon
  Collaboration with NGO working in plastic surgery
    (smile train, mending face, operation restore hope)
  Building of an active network of African plastic surgeon

2nd Chance Somalie
- June 2018
Facilitation of management of patient necessitating complex treatment (South-South cooperation, telemedicine)
2016: Major Partnership Agreement with University of Geneva
Improving collaboration through international institutions
Advocating for surgery:
«Is reconstructive surgery an essential surgery?»
Figure 3. Comparison of Leading Causes of Mortality

Deaths per Year (in Millions)

- HIV/AIDS, TB and Malaria: 2.87
- Surgical Conditions: 16.9

Surgical conditions kill more people each year than HIV/AIDS, TB, and malaria combined. Disparities in access to safe, quality emergency and essential surgical care and unmet surgical needs result in increased death and disability.

Source: Meara, et al. 2015, and WHO Global Health Estimates 2015
Total Global Burden of Disease

- 28-32% Surgical Conditions
- 33.9% Non-Communicable Diseases
- 23.9% Maternal, Child, Communicable, and Other
- 34.6% Injuries

Global Burden of Disease from Surgical Conditions

Source: Shrime MG, Bickler SW, Alixare BC, et al., 2015, and Rose et al., 2013
Futur perspectives for 2nd Chance

2nd Chance model replication for Western and Central Africa

January 2019: Memorandum of Understanding between 2nd Chance and WACS (West Africa College of Surgeons)
Thank you!

2nd-chance.org
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