

## Objectives

- To understand the background of Jan Swasthya Abhiyan (JSA)
  - To know about the basis of this campaign
  - To understand the key elements of this campaign
  - To view the impact of the campaign
  - To discuss future strategies of the campaign
- 

## 'Defending People's Health in the Era of Globalisation'

### *Formation of Jan Swasthya Abhiyan (JSA)*

18 National networks came together for the (People's Health Assembly) PHA process in India in early 2000

National and state workshops, people's health enquiries in about 200 districts, state health assemblies and people's health trains

National Health Assembly held on 30 Nov. – 1 Dec. 2000 had over 2000 delegates from 19 states; Indian People's health charter adopted

Decision to form a continuing campaign platform on 1 Dec. 2000 called 'Jan Swasthya Abhiyan' (People's Health Movement - India)

### **Why did a Right to Health Care Campaign Emerge in India?**

Serious deterioration in public health services and stagnant or declining public health budget since mid 80's

- Sharp rise in costs of unregulated private medical care
- Growing resistance to the negative social effects of globalization - liberalization

*When Policies Weaken - The Politics of Rights Gains Strength !*

### **Basis for the Campaign on the 'Right to Health Care'**

- The Right to Health Care in India is an implicit, vaguely defined right that must be made explicit, justiciable and operational.
- While 'Right to Health' (RTH) is the larger perspective, 'Right to Health Care' (RTHC) can be one focused campaign strategy.
- Movement for RTHC to be combined with advocacy for specific programmatic reforms and measures for strengthening the public health system

### **Launching of the Indian Right to Health Care Campaign**

- JSA organized National Public Consultation in Mumbai on 6th September 2003: 25th anniversary of 'Health for All' declaration
- Attended by over 250 delegates from 16 states
- Over 60 cases of 'Denial of Health Care' presented
- Chairperson, National Human Rights Commission hears cases of denial of health care and assures action
- State level action plans formulated, pledge to make
- Right to Health Care a fundamental right

### **Key Elements of the Campaign**

- Cases of 'denial of health care' documented in various regions based on a common proforma
- Participatory surveys of public health facilities such as Primary Health Centers (PHCs) and Rural Hospitals (RH) across the state, using a common checklist
- Based on this, 'District Public Hearings', each involving hundreds of people, Peoples' Health Movement (PHM) activists, health officials and expert panelists
- All information collected feeds into Regional public hearings in each of the five regions in collaboration with National Human Rights Commission
- Culminated in a National Public Hearing involving apex health officials from Centre and all states of the country in December 04
- National Human Rights Commission's (NHRC) National Action Plan to establish the 'Right to Health Care' and annual review of implementation of this plan by State Governments

## **A First Step in the Campaign**

### *Jan Sunwais' (Public Hearings)*

- Documentation of individual cases of denial of health care. Also structural denial of health care through surveys of various types of health facilities
- The 'People's Health Tribunal' is like a 'People's Court', attended by hundreds of community members, relevant health officials and 'judging' panel of prominent experts
- Testimonies by affected persons where basic health care has been denied; survey reports presented with recommendations
- Health officials allowed to respond, panelists give their opinion and 'judgment' in the end
- Widely covered by local media, identifies specific gaps and forms of denial, puts pressure on health department to make improvements

## **National Public Hearing on Right to Health Care**

- Attended by Central health minister, Chairperson of NHRC, apex health officials of 22 states and over 100 PHM delegates
- Five regional sessions, nine sessions on special health rights, national overview of health rights violations in the context of international and national obligations
- Leads to declaration of a comprehensive National Action Plan on the Right to Health by NHRC

## **Dialogue With Political Parties on Public Health Before General Elections**

- Programme on 12th March '04 in New Delhi - dialogue with various political parties to include 'Right to Health care' in their election manifesto.
- Release of JSA policy brief - 'Make health care a fundamental right!'
- Over 300 JSA delegates and expert panelists
- Parties which sent representatives: SP, CPI (M), CPI, CPI(ML), Lok Jan Shakti party. Major parties BJP and Congress agree but stay away; however Congress includes issues in manifesto
- Followed by rally for 'Save public health - Ensure people's Right to Health Care'

## **People's Rural Health Watch**

- Publication by JSA of Action Alert on NRHM in Nov. 05 analysing design and policy issues

- Launching of 'Peoples' Rural Health Watch' in Jan. 06 for social audit of the Mission in eight states over next two years
- State workshops, participatory surveys, policy critique, publication of state and national reports
- Objective - influencing design and implementation of the Mission in a pro-people direction

## National Health Assembly-II

### *'Defending People's Health in the Era of Globalisation'*

- 2000 delegates in Bhopal, 23-25 March 2007; Preceded by district, state health assemblies in Feb 07
- National preparatory workshop in Hyderabad 14-16 July 06 attended by about 200 JSA delegates
- Dissemination of booklets and identification of issues towards formulation of 'People's Health Plans'

## Booklets for NHA-II

- Globalisation and Health
- Health System Crisis and Alternatives
- New Medical Technologies
- Drug Policy Issues
- Women's Health Issues
- Campaign Issues in Child Health
- Health Issues of Marginalised Groups
- Towards Alternative People's Health Plan

## Some Outcomes So Far

- 'Guaranteed Health Services' now being mandated under National Rural Health Mission (NRHM) may be interpreted as health rights
- Charters of Citizen's Health Rights as part of IPHS and in NRHM framework
- State Public Health Services Act being drafted in one state, should be demanded in all states
- 'Advocacy for Right to Health Care' as a section in NRHM framework document, recognises RTHC
- Participatory Monitoring Committees (one-third CBO / NGO representatives) at all levels now provided for under NRHM – space to demand Health rights

- **Periodic Public Hearings** to be organised as part of NRHM involving Health officials, PRI representatives and CBOs / NGOs

### Strategy to Move Ahead

- Under the National Rural Health Mission (NRHM) launched by the Central Govt. from April 05, the govt. has promised substantial improvements in the health care services available in the rural areas. Guaranteed health services are supposed to become available in one-third of PHCs and CHCs across the country by 2007.
- About 270 Jan Surwais at the PHC level and 90 Jan Surwais at block level are planned in end-2007 or early 2008 - all under NRHM.
- This means a large number of mass events would focus concretely on the Right to health services, with official backing, (at least on paper).
- The final report of Peoples' Rural Health Watch (PRHW), a process set up by the JSA to monitor the availability of health services is also likely to be ready in early 2008. April 2008 would mark completion of 3 yrs of NRHM.
- Keeping all this in mind, it has been suggested that JSA should launch a second phase of the Right to Health campaign around April 2008. The campaign may be broadened to also include violation of health rights by private sector and dilution of health rights through Public Private Partnerships. Issues related to key health determinants such as nutrition, drinking water and environmental issues may also be raised, or support to existing partner campaigns would be strengthened.
- It has been suggested that this 'watchdog' function should be combined with proposing "people's alternative suggestions" towards Health Planning at various levels. It is hoped that this 'Strategy to Move Ahead' would take the movement for health rights to higher level.

