

## Cape Town Call to Action



We reaffirm our commitment to the People's Charter for Health and to the Cuenca Declaration, which are the foundational documents to this Call to Action.

This Call to Action will guide our work until the Fourth People's Health Assembly.

Our health has been devastated by neoliberal policies that are the hallmark of present day capitalism. The global health crisis is a consequence of the failure to address the social, political and environmental determination of health. The current capitalist crisis has several inter-related dimensions, among them: political, food, economic, financial and ecological. Its roots lie in the neoliberal model of globalisation.

The response of national and international institutions, to the current financial crisis, has been merely to 'restore the confidence' of the same institutions and financial markets that caused the crisis in the first place. Governments have enacted an 'austerity agenda' – cutting health and social spending - effectively deepening and reinforcing the very neoliberal economic model the crisis had so discredited, and handing even more power to finance capital.

There is a need to redesign our political culture and our institutions, both nationally and globally; to create relations based on solidarity; and to put in place the mechanisms of accountability needed to run the global political, economic and social structures in a manner that is just, equitable and sustainable.

### **Our Alternate Vision:**

- A reformed economic system that values every individual, not every dollar;
- Just, fair and democratic political and economic processes and institutions;
- Better and transformed global health governance that is free from corporate influence and the influence of unaccountable private actors;

- Equitable Public Health Systems that are universal, integrated and comprehensive, as well as provide a platform for appropriate action on social determination of health.

**What is to be Done:**

No change will happen without the mobilization of the people through the building of social and political power amongst people and communities. We commit ourselves to building alliances with others who seek progressive and transformative change.

We leave Cape Town determined to:

- set up new PHM circles
- energise, broaden and deepen the work of existing PHM country circles
- strengthen and develop the thematic circles of the PHM.

We leave Cape Town committed to:

- creating and communicating alternative visions, analyses, discourses and evidence;
- actively support and facilitate a range of campaigns.

We will continue and expand our global work around existing global programmes – suitably redesigned wherever necessary, namely:

- the Right to health campaign;
- the International Peoples Health University;
- the Global Health Watch;
- the Democratising Global Health; WHO Watch and Supporting the Restitution of the WHO.

We further commit ourselves to expand our global Right to Health campaign, a campaign that will be globally co-ordinated, but locally owned and driven.

## A. Preamble

After two years of participatory engagement and planning we, the People's Health Movement, have gathered 800 strong from 90 countries representing the voices of tens of thousands more in our movement across every continent in the world.

In Cape Town we have:

- strengthened and deepened our resolve and solidarity;
- expressed our outrage at the continuing global health crises embedded in myriad structural and socio-political inequities;
- developed principles for alternative economic, political and social order; and
- re-committed ourselves to work towards the world we have envisioned.

We reaffirm our commitment to the People's Charter for Health and to the Cuenca Declaration, which are the foundational documents to this Call to Action.

This Call to Action will guide our work until the Fourth People's Health Assembly.

## B. The Global Health Crisis

Our health has been devastated by neoliberal policies that are the hallmark of present day capitalism, and increasingly so by the global crisis of capitalism. The current crisis underpins the growing global health inequities within and between countries.

### Health crisis: Growing health inequities

The global health crisis is a consequence of the failure to address the social, political and environmental determination of health, resulting in an erosion of food sovereignty, in higher levels of poverty, as well as in a lack of fair and equitable access to water, housing, sanitation, education, employment and universal and comprehensive health services.

Ill-health and disability are being perpetuated by the aggressive marketing of unhealthy products such as tobacco, alcohol, junk food and beverages; by the pollution of our air, our land and water sources; by the colonization of lands and other natural resources; and by the forced eviction of vast numbers of people, including indigenous peoples, from their lands and homes.

We have heard how:

- small farmers are losing their livelihoods as a result of the dumping of subsidised foodstuffs from industrialised agriculture in the North;
- indigenous people are being herded off their land by the extractive mining industry and the struggles by communities that are affected are being criminalized;
- the health of workers is jeopardised by the absence of safety and regulations at the workplace, as well as by environmental degradation and pollution;
- poor people in dense urban settings are being driven to depend on junk food, available more cheaply than nutritious natural food;
- the relegation of women's health to only encompass maternity and family planning, on the one hand, and the concerted attack on women's reproductive and sexual rights, on the other, violates women's autonomy, personhood, dignity and human rights;
- women and young people are being denied the right to sexual and reproductive health services;
- migrants and displaced people suffer from xenophobia and from a lack of access to healthcare; and
- racism - social, institutional and structural - coupled with religious intolerance, disrupts the lives of people and prevents them from living a dignified life free of fear;
- children's rights are being undermined by denying them the conditions in which they can thrive and flourish.

Millions of families, particularly in low- and middle-income countries, are being denied access to comprehensive primary health care and universal health services by way of their poverty and the other many institutional barriers they face. In high income countries, there has been a continuing campaign to reduce funding and support for the public sector and to replace public services with those provided by the market. Moving health care out of the public domain makes it easier for large capitalist enterprises (big pharma, big insurance and biotechnology corporations) to increase sales and profits, working in close partnership with those who profit from the delivery of health services. The commodification of health has been intensified by the promotion of a reductionist, industrial, biomedical model.

The current global trade and investment regime (driven by multilateral, plurilateral and bilateral trade and investments agreements) is seriously undermining universal social entitlements and rights, as well as the power of states to regulate the activities' of corporations and of private financial institutions.

Access to affordable medicines has been compromised worldwide as a result of the WTO-TRIPS Agreement and the continuing pressure on developing countries to adopt TRIPS-plus standards through trade agreements and bogus anti-counterfeiting initiatives.

While we welcome the recent surge in interest in the concept of universal health coverage, we oppose the idea that this be achieved through the promotion of a minimalistic insurance model that would offer 'basic packages of care' and would operate within a market-based system of healthcare. We oppose attempts to use this approach to dismantle or undermine the public health system to promote corporate interests in health care delivery. Universal health coverage must be achieved through organized and accountable systems of high quality public provision of comprehensive primary health care and of a fully functional referral system governed by need of care.

The global health crisis also reflects a crisis in effective and accountable global health governance. The dimensions of this crisis include:

- The undermining of the World Health Organisation;
- The power exerted by a fragmented and uncoordinated health aid industry;
- The undue influence of unaccountable private corporations and foundations over health policy and programming;
- An approach that seeks to remedy the problems of structural inequality through a 'charity' model rather than through systemic and structural transformations.

## **The crises of capitalism**

### ***Genesis of the current crisis***

The current capitalist crisis has several inter-related dimensions, among them: political, food, economic, financial and ecological. Its roots lie in the neoliberal model of globalisation that emerged in the 1970s as a response to declining rates of profit and wealth accumulation in developed capitalist economies. It also included privatisation and commercialisation of public services, such as in health, education, water and energy supply and public transport. The model, in its endeavour to create a global market for goods and services, promotes the integration of global economies and the expansion and liberalization of global trade.

This model was forced upon developing countries through structural adjustment programmes, trade agreements and investment treaties, effectively legally locking many developing countries into the neoliberal paradigm which is highly inequitable and, at best, extremely inefficient in reducing poverty and meeting people's needs.

Meanwhile, the current development and aid industry merely sustains and reproduces existing social and political inequities.

Neoliberal globalisation has resulted in an immense concentration of power among a wealthy and corporate elite, who actively undermine democracy and social justice through their influence and through the corruption of national governments and international institutions. The present political crisis is rooted in the lack of accountable, transparent and democratic decision-making. Even in countries with progressive governments, spaces for democratic participation are being eroded and protest is being criminalized.

The war industry, having blighted lives in many parts of the world, is deeply embedded within the capitalist economic system. Imperialism has increased the use of its military might to maintain and expand its control over the political architecture, as well as the resources of the planet.

There is a need to redesign our political culture and our institutions, both nationally and globally; to create relations based on solidarity; and to put in place the mechanisms of accountability needed to run the global political, economic and social structures in a manner that is just, equitable and sustainable.

### ***The crisis today and its manifestations***

The current financial crisis is rooted in the de-regulation of banks that were allowed to become 'too big to fail', to increase their ratio of loans (debts) to assets, and to speculate heavily on currencies, on derivatives and on mortgages.

The response of national and international institutions has been merely to 'restore the confidence' of the same institutions and financial markets that caused the crisis in the first place. Governments have moved quickly to bail out the failing banks and have enacted an 'austerity agenda' – cutting health and social spending - effectively deepening and reinforcing the very neoliberal economic model the crisis had so discredited, and handing even more power to finance capital.

The ecological crisis is also a part of the capitalist crisis and mirrors the rise in global inequalities as characterized by the obscene over-consumption of a small minority that is overstressing the capacity of the planet, while a large majority are denied even their basic needs. The resources of this planet are being privatized and plundered in ways that are damaging and lethal for future generations. Public stewardship of our scarce resources is the only solution to the equitable protection of the planet.

Rich nations are passing on the burden of the ecological crisis onto poor nations through various mechanisms, including through the shifting of the impacts of the ecological crisis onto poor peoples. Coercive population control policies enacted in the name of climate protection are now violating women's rights. Many of the effects of overproduction and over-consumption and of climate change are felt by the world's indigenous communities, small-scale peasant farmers, poor people and the working classes. Although the planet is capable of providing for the needs of all its people, the current system of production and consumption only undermines the natural basis of life through a need for constant growth, leaving billions of people in poverty.

The annual Conference of the Parties (COP) meeting under the UN Convention on Climate Change has failed miserably to ensure the rapid reduction in the emissions of greenhouse gases. Under the domination of predatory transnational corporations the negotiations have sought to impose false solutions such as carbon trading, Reducing Emissions from Deforestation and Forest Degradation (REDD) and other market/financial incentives to safeguard continued profit margins and the continuity of economic growth.

The food crisis as evidenced by the existence of a billion hungry people and two billion overweight or obese people is a manifestation of a much larger and more pervasive malaise, caused by the loss of food sovereignty and of control by communities and poor nations over the use of their own resources. The food system is dominated by transnational corporations (big agribusiness and big food and beverage corporations). This has resulted in, among other things, mono-cropping and the replacement of food crops with crops for bio-fuels; a huge increase in the speculative trading of food grains; unfair trade agreements; and oligopolies in the food retail sector. The food crisis is now worsening as a consequence of 'land grabs', a new form of colonialism in which transnational corporations and sovereign wealth funds are acquiring large tracts of arable land in poor and often poorly governed countries – displacing domestic food production systems, as well as rural peoples from their lands. Meanwhile, hunger and malnutrition is being converted into a new market for processed ready-to-use foods (RUTF) and nutraceuticals, often assisted by the aid industry and multilateral organisations.

## C. Our Alternative Vision

PHM seeks a better world and offers a critical alternative. We believe that transformative and radical change is needed and can indeed be achieved. Our vision consists of a number of inter-related dimensions:

- A reformed economic system;
- Just, fair and democratic political and economic processes and institutions;
- Better and transformed global health governance;
- Equitable Public Health Systems.

### ***Reformed economic system***

We need an economic system that values every individual, not every dollar. The primary objective must be to maximise benefits to people – their health, their wellbeing, and their quality of life – not total output or income. It should be based on collaboration within and between communities and nations, not on competition, and should seek to minimise the use of environmental resources while fostering sustainable livelihoods for all. It will be socially directed rather than market driven.

Such an economic system will:

- encourage adequate, appropriate, equitable and sustainable consumption, with the least ecological and human impact, reflecting a commitment to future generations and harmony with the planet;
- replace existing global and regional trade and financial agreements with those that will eradicate food insecurity and malnutrition and will foster food sovereignty;
- be rooted in and have obligations towards local communities while being globally responsible;
- establish and develop worker controlled enterprises;
- create sustainable, dignified work opportunities that meet the basic needs of all;
- build solidarity between people;
- reverse the land grabs that have occurred; and
- be rooted in the effective measurement of societal progress on the basis of health, social and environmental indicators.

### ***Just, fair and democratic political and economic processes and institutions***

We need a new system of global governance, including in the different international trade and financial systems, that :

- places health, well-being, human rights and environmental sustainability at the centre of all policies;
- ensures genuine equality of influence at the heart of all decision-making;
- promotes democracy, accountability and transparency at all levels.

We need new systems of national governance:

- in which electoral democracy is not captured by capital or undue private influence;
- where forms of participatory democracy are integral to structures of governance;
- where people have adequate constitutional rights and protections, including the right to protest against conditions or practices that create social exclusion and oppression.

We seek a world in which governments will:

- work multi-laterally to reach peaceful resolutions to international conflicts

- refrain from imposition of their own policies and interests on other sovereign nations, whether through force or by economic pressures;
- be held accountable for the full implementation of the Universal Declaration of Human Rights and the Covenants on Political, Civil and Economic, Social and Cultural Rights.

A new system of global and national governance will include regulatory structures that, among other, ensure:

- fair and progressive taxation regimes within and between countries that will enable a transformative and equitable redistribution of resources and power;
- closure of tax havens and democratic reform and regulation of the international banking system;
- fair trade arrangements and agreements;
- a new regime for research and development that does not seek to monopolise knowledge in a few hands, prioritises the genuine needs of the largest numbers of people and sees local communities as equal partners in the research cycle;
- a new regime for the production, management and dissemination of knowledge and technology that prevents their private appropriation and promotes an open system of knowledge sharing.

### ***A better global health governance***

We seek a more coherent and accountable system of global health governance that is free from corporate influence and the influence of unaccountable private actors. We seek a radical rationalization and transformation of the multiple Global Health Partnerships and funds. We seek new and more accountable mechanisms for the management and allocation of global public finance, working with and through UN institutions.

The World Health Organisation must:

- follow its constitutional mandate to act as the directing and coordinating authority for international and global health;
- be fully and adequately funded by assessed and untied contributions from member States;
- be accountable to member states and the people of the world.

### ***Equitable and Public Health Systems***

Health systems should be:

- Universal, integrated and comprehensive, as well as provide a platform for appropriate action as regards the social determination of health;
- supported by a guarantee of the right to health in the national constitution;
- based on accessible, effective, gender-sensitive, youth-friendly and free comprehensive primary health care, accountable and appropriate to people's health needs, supported by fully functional referral systems governed by need of care;
- accessible to all, with no discrimination on the basis of gender, age, race, ethnicity, religion, economic status, sexual identity, disability, cultural knowledge, language or any other basis;
- welcoming of alternate cultural understandings of health and systems of healing, and not based solely on biomedical concepts of health and illness;
- properly and adequately publicly financed with public expenditure representing the major share of total health expenditures, as well as capable of protecting the population against the rising costs of health care;
- be able to retain local health workers within the national health system rather than losing them to international migration;
- built around an integrated network of public facilities responsible for providing comprehensive care, based on the principles of universality and equity;

- empowered to strictly regulate commercial health care providers (where present) within an ethical framework;
- participatory and responsive to peoples' needs through social participation in the formulation, implementation, monitoring and evaluation of policies;
- compatible with sound ecological principles and practices.

PHM will also work towards developing frameworks of analysis using its global community of public health practitioners, academicians and activists who can work on innovative and creative design solutions that will ensure more effective, efficient and equitable public health systems.



## **D. What is to be Done?**

This Call to Action was developed at and is directed to all delegates of the Third Peoples Health Assembly (Cape Town July 2012) and their fellow health and social activists from across the world.

### **D.1. Power to the People: Building the Movement**

No change will happen without the mobilization of the people. Power will not be given to the people unless we force it out from the political, corporate and financial elites; and hold our public institutions accountable and make them work in ways that are transparent and truly representative and that serve the public interest and social justice. All this requires the building of social and political power amongst people and communities.

The Third PHA celebrated the successes of the growing People's Health Movement, especially the development of new country circles in Africa. While we are a movement focused on health and are built mainly around health activism, we share many goals with other social movements that also seek a more just and sustainable world. In order to diminish the power of financial capital, democratize governance and defeat neoliberal economic policies, we need to build a more effective and broad-based social movement.

To this end, we commit ourselves to building alliances with others who seek progressive and transformative change. PHM is in a unique position to build alliances across existing movements, including those of informal and formal sector workers, the landless, indigenous peoples, women and youth.

We will build solidarity with those struggling against big dams, nuclear power plants, illegal mining, hazardous working conditions and others. We will work with the environmental justice movement. We will seek greater trans-disciplinary engagement with, among others, progressive economists, environmental scientists, lawyers, urban planners and political-social scientists.

We leave Cape Town determined to:

- set up new PHM circles
- energise, broaden and deepen the work of existing PHM country circles
- strengthen and develop the thematic circles of the PHM.

We leave Cape Town with a new and reinvigorated Global Steering Council that, among other, will improve communications within the movement, facilitate effective coordination across the movement and ensure organic linkages with regional and country circles. This will include facilitating the recruitment and support of PHM outreach workers to assist the development of PHM in countries and regions.

We will strive to foster and develop community-based struggles, campaigns and advocacy initiatives from local to national and global levels on multiple fronts, as well as develop the health movement in the coming phase.

### **D.2. Creating and communicating alternative visions, analyses, discourses and evidence**

We recognise that the neoliberal orthodoxy and the vested interests of the rich and powerful are heavily represented in the mainstream media. We recognise the power of the mainstream media and of corporate propaganda in shaping prevailing views and attitudes, and sustaining the belief that there is no alternative to the current political and economic system.

We recognize that many scientific journals and institutions of education and knowledge generation act to legitimize and sustain the current system and paradigm. We recognise the lack of investment in research, in monitoring and surveillance that can serve the interests of the poor and promote the global social justice and equity agenda that PHM stands for.

To this end we commit to:

- communicating alternative visions, analyses and discourses to the people, using a wide variety of media and communication techniques, especially those that engage people creatively;
- using the Global Health Watch as an instrument to communicate our alternative progressive analysis of the state of global health and our critiques of the current institutional framework for global health. We will work to improve the dissemination of the periodic GHWs both in English and in other languages using alternative media so as to reach a greater diversity of audiences. We will establish and maintain local and national health watches;
- expanding and extending the reach of the International Peoples Health University (IPHU) as a means of education, empowerment and mobilisation of young PHM cadres;
- expanding processes such as community-based monitoring to ensure health system accountability and community oriented action research.

### **D.3. Organising and planning to make change happen**

To make change happen, movement building and alternative analyses must be translated into concrete campaigns and programmes of action. Actions will need to be planned and organised at the local and national levels. As a global movement, we will seek to actively support and facilitate a range of campaigns, by:

- providing information and facilitating the sharing of information on the international context and country experiences;
- providing campaigning materials on issues of international priority;
- liaising and coordinating with organisations in different countries working on related issues;
- providing multiple fora for the sharing of experiences;
- supporting campaigns at the international level giving them wide publicity;
- actively mobilizing to oppose health damaging policies and actions of international organizations and of Northern governments.

To enable us to fulfil this role effectively, we will intensify our fundraising efforts, in order to strengthen the movement through:

- Increasing the capacity of young PHM activists through supporting more IPHUs;
- strengthening regions and countries through the recruitment of regional outreach coordinators;
- Increasing regional support to build the movement at the local and country level;
- Strengthening the global secretariat;
- Increasing the resources available for information, media and advocacy activities at the international and local levels.

We will continue and expand our global work around existing global programmes – suitably redesigned wherever necessary, namely:

- the Right to health campaign;
- the International Peoples Health University;
- the Global Health Watch;
- the Democratising Global Health; WHO Watch and Supporting the Restitution of the WHO.

### ***Developing a Global Campaign***

We further commit ourselves to expand our global Right to Health campaign. The campaign will be globally co-ordinated, but locally owned and driven. The campaign will integrate a number of specific elements, each addressing key concerns of PHM circles as well as the global movement. PHM circles will be encouraged to be part of the global campaign and to determine their level of engagement with specific issues based on their local priorities and local capacity. We propose the basic framework and proposed elements for the expanded global campaign in ***Annexure 1***.