



Networks

Health Poverty Action

Health Poverty Action's role is to strengthen poor and marginalised people in their struggle for health.

We have grassroots programmes in 13 countries in Asia, Africa and Latin America as well as seeking to influence policy and practice at all levels. Most of our roughly 500 staff are based locally and come from the populations they serve.

Health Poverty Action has a distinct approach, summarised as a combination of three factors:

- 1. We emphasise the need for justice rather than charity.**
We work to tackle not just the symptoms of poor health, but its root causes. In particular, we recognise the profound importance of the social and economic determinants of health – hence our name, Health Poverty Action.
- 2. We prioritise those missed out by others.**
Development initiatives exhibit a natural tendency to cluster together, the same factors leading numerous organisations to the same areas. This leaves large populations with almost no support at all. They may be living in hard-to-reach areas, or are difficult to support for some other reason.
- 3. We specialise in providing a holistic approach.**
This is especially important for the poorest and most marginalised with little support. They face so many threats to their health. Tackling one in isolation might give the appearance of success, while in reality doing little more than changing the cause of death. Tackling numerous factors together can bring lasting improvements – and also give rise to creative linkages and innovations.

Our work falls into four broad categories:

- 1) In-country development programmes
- 2) Influencing policy and practice
- 3) Responding to emergencies
- 4) Provide consultancy & other contracted services

Health Poverty Action sees itself as having been born out of the primary health care movement, a few years after Alma Ata. The People's Health Movement's history, analysis and positioning

therefore strongly resonate with those of Health Poverty Action. Our growing role within PHM is now a fundamental part of our identity, and we see it as our primary global network.

We have agreed at Board level that (unless a specific decision is made otherwise), Health Poverty Action's policy analysis and positions will be guided by those of the PHM and Global Health Watch. We will contribute to the latter's formulation in return.

www.healthpovertyaction.org