

Right to Health and Health Care Campaign
PRIORITY HEALTH ISSUES

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AS IDENTIFIED BY PHM CIRCLES IMPLEMENTING
THE RIGHT TO HEALTH AND HEALTH CARE CAMPAIGN
(Taken verbatim from their reports, October 2010)

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PHM's Right to Health Commission evaluating the Right to Health and Health Care Campaigns (RTHC) has identified themes that are common among the many campaigns that are under way in 17 PHM circles around the globe.

As reported by the circles currently conducting a Campaign (through a written survey and follow up Skype interviews), the issues of human rights relevance mentioned by them have been grouped and classified in order to show where Campaign priorities lie as seen from their perspective. The idea is to channel efforts and provide united global action points to the PHM Right to Health and Health Care Campaigns worldwide.

Following is a list of these themes with a brief description of each, as well as examples of how these were highlighted by in PHM circles currently conducting a RTHC. The RTH Commission has taken these into consideration and will propose five global themes for the Campaign for future global action based on findings of the same.

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RIGHT TO HEALTH

PHM was founded on the principle that health is a fundamental human right. As noted by the several international conventions and charters, every human being should have access to health in a non-discriminatory and affordable way. The Right to Health and Health Care Campaign will focus on actions towards securing the right to health for all—within all sectors and groups and ensuring that a gender and equity perspective is applied.

Within this theme, the following issues were mentioned:

- Child rights (Congo)
- Right to health of women (Congo, Mali, Cameroun)
- Advocacy and lobby for the right to health in the constitution (Kenya, Niger, South Africa, Zimbabwe)
- Role of dispensaries in the promotion of the right to health (Morocco)
- Right to health violations reporting by health staff (Cameroun)
- Discrimination and access to health care (Guatemala)
- Health rights of sex workers (South Africa)

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PRIMARY HEALTH CARE

The revitalization of primary health care is a central approach to answering the health problems of the world as noted in the Alma Alta Declaration as well as in the People's Charter for Health. Primary health care covers a wide range of activities around health, but essentially begins with the people, addressing the people's needs and the conditions that affect their health.

The following issues were identified relating to this theme:

- Right to essential medicines (Pakistan)
- Access to a minimum package of health care provided by the state through Basic Health Units (Pakistan)
- Health coverage to minorities and scheduled casts (Pakistan)
- Lack of medicines (Eastern Democratic Republic of the Congo)
- Community participation in the reform of the health sector and of primary health care (Democratic Republic of the Congo)
- Maternal and child health (Morocco)
- National health coverage (Djibouti)
- Essential health services (Nepal)
- Free health services (Nepal)
- Free maternity services (Nepal)
- Public health care (Argentina)
- Improvement of the welcoming in health centers (Niger)
- Primary health care (Bolivia)
- Hygiene of health centers (Niger)
- Reproductive health (Eastern Democratic Republic of the Congo)
- Child mortality (Djibouti)

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SOCIAL DETERMINANTS OF HEALTH

The social determinants of health are basic conditions that can be approached head on to improve the health of our communities. Social disparities and inequalities should not exist, and addressing the social determinants of health will create the necessary balance and open the pathways to attaining equal access to health and health outcomes.

For this theme, the following issues were reported:

- Sanitation (Democratic Republic of the Congo)
- Focus on social determinants of health (Kenya, South Africa)
- Shortage of food, water, and sanitation (Zimbabwe)
- Clean water (Argentina)
- Food security (Bolivia)
- Sanitation (Eastern Democratic Republic of the Congo)

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INSUFFICIENT FUNDING FOR PUBLIC HEALTH

It is understood that the public health sector is essential to achieving the far-reaching challenges to the health of our communities, as well as sustaining any progress made and successes achieved. Without proper financial support of public health establishments, professionals and programs any goals set are merely unreachable. The RTHC aims to draw attention to the fiscal neglect of the public health sector by governments.

Here, the following issues were mentioned:

- Failure to appropriately pay health staff (Eastern Democratic Republic of the Congo)
- Failure to pay incentives to care givers (Eastern Democratic Republic of the Congo)
- Struggle for the creation of budget lines in favor of the fight against malaria and HIV (Democratic Republic of the Congo)
- Lobbying activities to increase the local budget for health (Senegal)
- Commitment to the 15% allocation for health according to the Abuja Declaration (Zimbabwe)
- Cost of health care and human resources for health (Eastern Democratic Republic of the Congo)
- Lobby for budget allocation in line with international conventions (Togo)
- Lobby for budget allocation towards the primary health care approach as per national policy (Democratic Republic of the Congo)

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HIV/AIDS, TB AND MALARIA

While HIV/AIDS, TB and malaria can be prevented, too many people are unreasonably becoming infected with and are unnecessarily suffering from the effects of these diseases. Treatment is available, but often not affordable or not accessible. Patients are treated harshly or are simply ignored. The RTHC aims to overcome the barriers to education, prevention and treatment, as well as to the violation of the rights of those suffering with these illnesses.

Demonstrating activity around this theme, the following issues were reported:

- Rights of people living with HIV, malaria and TB (Democratic Republic of the Congo)
- HIV prevention and control (Kenya)
- Lobbying activities for HIV as a Millennium Development Goal (Morocco)
- Lobbying for the decentralization of antiretroviral access (Zimbabwe)
- Malaria (Burkina Faso)
- Action days against malaria and TB (Gabon)
- African Day of Malaria (Djibouti)
- Improvement of hospital conditions for people with TB (Niger)
- Orphans with TB (Niger)
- Access to treatment for people living with HIV (Niger)
- HIV/AIDS policy (South Africa)

- Lobby for the rights of people living with HIV (Democratic Republic of the Congo)

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TRAINING OF HEALTH PROFESSIONALS

To successfully meet the health needs of communities, there must be adequate staff and such staff must have the training and skills necessary to treat patients. In many places, there is a lack of health professionals or properly trained staff. The RTHC hopes to address these issues and ensure that all professionals and staff—whether they be doctors, nurses, community health workers or others—are properly trained and can effectively serve their communities.

The following issues were identified:

- Lack of doctors (Eastern Democratic Republic of the Congo)
- Strengthening the capacities of staff in the health sector (Democratic Republic of the Congo)
- Strengthening staff in peripheral areas (Democratic Republic of the Congo)

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INFRASTRUCTURE DEFICIENCIES

Essential to a working public health system and to the health of the community it serves is a dependable, safe infrastructure. Facilities in the form of buildings, equipment and transport are indispensable to maintain services and positive health outcomes of all.

Within this theme, the following issues are being addressed:

- Failure to rehabilitate health facilities (Eastern Democratic Republic of the Congo)
- Construction of health infrastructure (Eastern Democratic Republic of the Congo)

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MISCELLANEOUS

Many more issues being tackled and to be considered were raised in the reporting as well. These include:

- Struggle against the use of tobacco (Gabon, Burkina Faso)
- Prevention of new diseases (Togo)
- Health of ecosystems (Argentina)
- Controlling dengue (Argentina)
- Impact of trade agreements on health (Bolivia)
- Xenophobia (South Africa)
- National health insurance (South Africa)
- Global Day of Health (Djibouti)
- Celebration of Global Malaria Day (Democratic Republic of the Congo)
- Health sector reform (Democratic Republic of the Congo)

- Right of industrial labor to be covered through Employees Social Security Institutions (Pakistan)
- Safety of injections (Congo, Mali, Togo)
- Lack of hospitals (Eastern Democratic Republic of the Congo)