

II CONFERÊNCIA INTERNACIONAL SOBRE DETERMINANTES SOCIAIS DA SAÚDE EM MOÇAMBIQUE



**JUNTOS CONSTRUINDO UM SISTEMA NACIONAL DE
SAÚDE INCLUSIVO, ACESSÍVEL E RESILIENTE
PERANTE OS NOVOS DESAFIOS LOCAIS E GLOBAIS**

22, 23 e 24 de Novembro de 2022

Centro de Conferências da TemCEL - MAPUTO



Painel 7: ACTIVISMO PELO DIREITO À SAÚDE



Apresentação 1:

**Os movimentos e redes internacionais
na defesa do Direito à Saúde.**

Painelista: Tinashe Njanji

Organização: PHM

24 de Novembro de 2022



Health for ALL now!
People's Health Movement
South Africa

“INTERNATIONAL MOVEMENTS AND NETWORKS IN DEFENSE OF THE RIGHT TO HEALTH”.

TINASHE NJANJI

**THE PEOPLE’S HEALTH MOVEMENT
SOUTH AFRICA – COORDINATOR**

**24 November 2022
Maputo**



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WHY WE NEED MOVEMENTS AND NETWORK

LEAD TO SOCIAL CHANGE TO PROMOTE HEALTH EQUITY
THROUGH MULTIPLE PATHWAYS INCLUDING
ADVOCATING FOR POLICY CHANGE, PROGRAM
IMPLEMENTATION, COMMUNITY DEVELOPMENT, AND
THE BUILDING OF SOCIAL MOVEMENTS

- THEY IMPROVE POPULATION HEALTH AND CHALLENGE
HEALTH INEQUITIES, WHETHER DIRECTED AT HEALTH
SYSTEMS OR AT SOCIAL, ECONOMIC, POLITICAL, AND
ENVIRONMENTAL DETERMINANTS OF HEALTH.

Movements more crucial and vital at this juncture where the goal of Health for All is receding in the face of economic and ecological problems, including the COVID-19 crisis, where life expectancy is declining in some parts of the world, and most people are living under unhealthy conditions that infringe their rights and dignity. At the same time inequality gap is constantly widening.

THE PEOPLE'S HEALTH MOVEMENT

From its foundation, the PHM has consistently argued that 'the struggle for health is a political struggle', one 'which challenges the fundamental practices of our society and the trends which shape them

The People's Health Movement (PHM) was formed in 2000 and drew inspiration from the Alma Ata Declaration on Primary Health Care's 'Health for All (1978). Since then PHM has been an active part of a global counter-hegemonic social movement.

The PHM is a global network of activist organisations that came about after the realization of the failure to achieve Health for All by the Year 2000, a goal set in the 1978 Alma Ata Declaration of Primary Health Care



THE PEOPLE'S HEALTH MOVEMENT (PHM)

Works globally to coordinate grassroots struggles around the right to health and to educate people about their rights. We have working closely with groups that include health workers, the academics; nat and internat organisations such as trade unions and civil rights movements; community-based organisations and grassroots activists; and groups of people, such as women's groups and people with a disability.

From its inception, PHM has worked in campaigns in over 40 different policy areas. Some of the extensive and diverse policy areas included: erefugee health and rural health, water and sanitation, access to medicines, decent housing, health Systems, and Sustainable Development Goals.



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WHERE DO WE WORK AND OUR BIRTH?

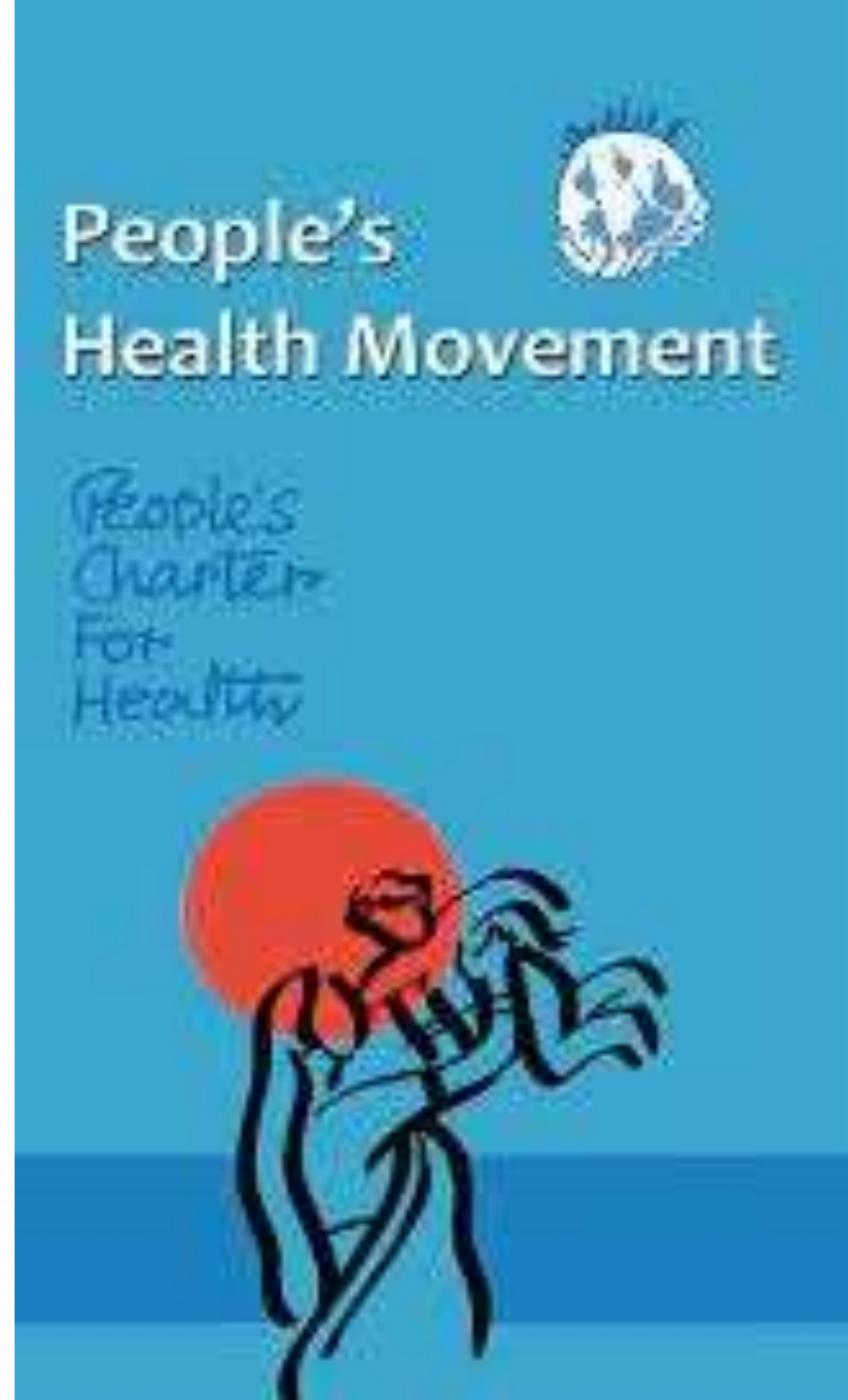
We work around the world, particularly from low and middle-income countries (L&MIC). We currently have a presence in around 70 countries. Guided by the People's Charter for Health (PCH), PHM works on various programs and activities and is committed to Comprehensive Primary Health Care and addressing the Social, Environmental and Economic Determinants of Health.

- THE WORLD IS FACING A GLOBAL HEALTH CRISIS CHARACTERIZED BY GROWING INEQUITIES WITHIN AND AMONG NATIONS AND MILLIONS OF PREVENTABLE DEATHS, ESPECIALLY AMONG THE POOR. THESE ARE IN LARGE DEGREE DUE TO UNFAIR ECONOMIC STRUCTURES WHICH LOCK PEOPLE INTO POVERTY AND POOR HEALTH. IN 2000, CONCERNED ACTIVISTS, ACADEMICS AND HEALTH WORKERS GOT TOGETHER FOR THE FIRST PEOPLE'S HEALTH ASSEMBLY. THE PEOPLE'S CHARTER FOR HEALTH (PCH), OUR FOUNDING DOCUMENT WAS DEVELOPED AND PHM WAS BORN.



THE PEOPLE'S CHARTER FOR HEALTH (PCH)

- OUR FOUNDING DOCUMENT AND THE FRAMEWORK WITHIN WHICH PHM ACTS. IT IS BOTH A TOOL FOR ADVOCACY AND A FRAMEWORK FOR ACTION. BY ENDORSING THE CHARTER ONE BECOMES PART OF PHM. THE PCH ENDORSES THE [ALMA ATA DECLARATION](#) AND AFFIRMS HEALTH AS A SOCIAL, ECONOMIC, AND POLITICAL ISSUE BUT ABOVE ALL, A FUNDAMENTAL HUMAN RIGHT.



COUNTRY CIRCLES

- ON COUNTRY LEVEL, PHM MANIFEST IN THE FORM OF GROUPS COMING TOGETHER NATIONALLY OR LOCALLY.
- COUNTRY CIRCLES OR SOMETIMES CALLED 'LOCAL CHAPTERS' GROW ACCORDING TO THE COUNTRY'S NEEDS; THEY ARE MOST OFTEN LOOSE NETWORKS THAT COME TOGETHER FOR JOINT ACTION AROUND SPECIFIC ISSUES BUT CAN BE FORMALISED AND LEGALISED AS AN ORGANISATION.
- There is no set way on how PHM organises locally as this depends on the local context, chosen activities and the circumstances of the people building PHM.



REGIONAL PHM

- REGIONALLY, PHM AIMS TO BUILD COALITIONS AND NETWORKS TO ENCOURAGE SUPPORT, SHARING AND LEARNING.
- REGIONAL COLLABORATION ALSO OFFERS A PLATFORM FOR ORGANISING AND ADVOCACY ON REGIONAL AND GLOBAL HEALTH GOVERNANCE. IT BUILDS SOLIDARITY AROUND ISSUES SPECIFIC TO THE REGION AND A STRONG BASE FOR ACTION (LOCALLY, REGIONALLY AND GLOBALLY).

THE MAIN TASKS FOR REGIONAL STRUCTURES ARE:

1

Supporting
country circle
development

2

Supporting
communication and
collaboration
between countries

3

Supporting two-way
communication
between countries and
global actions and
structures

4

Strengthening
representativeness
and mutual
accountability

- THE CORE WORK OF PHM IS THAT OF ITS CONSTITUENT PARTS, IN PARTICULAR THE COUNTRY CIRCLES AND THE INTERNATIONAL NETWORKS.
- AS A NETWORK ORGANIZATION, IT PROVIDES COMMUNICATION CHANNELS AND OPPORTUNITIES THAT LINK THE VERY DIVERSE ELEMENTS OF THE LARGER MOVEMENT.

- PHM Global also supports ad hoc policy work and campaigning on various issues and topics on the global policy agenda.
- There has been a continuous flow of publications, submissions and statements arising from this kind of policy coordination.



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PEOPLE'S HEALTH ASSEMBLY

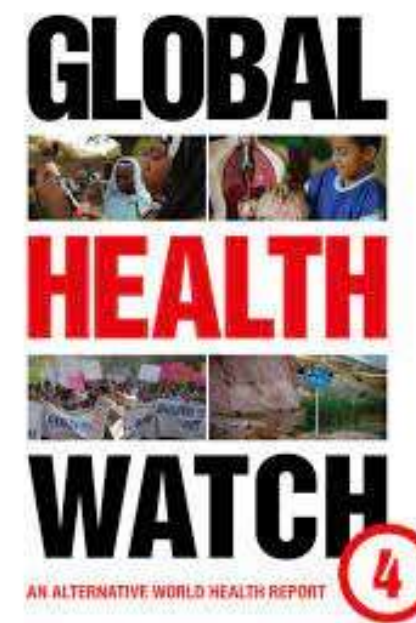
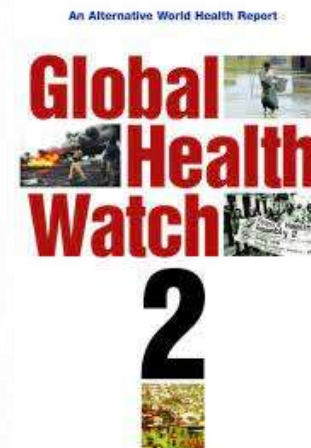
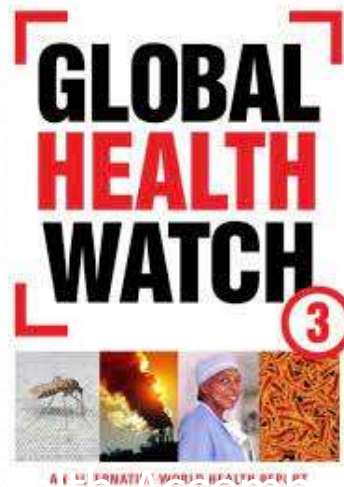


- HELD APPROXIMATELY EVERY FIVE YEARS, WHICH DRAWS IN CIVIL SOCIETY ORGANIZATIONS AND NETWORKS, SOCIAL MOVEMENTS, ACADEMIA AND OTHER STAKEHOLDERS FROM AROUND THE GLOBE.
- THE PHA PROVIDES A UNIQUE SPACE FOR SHARING EXPERIENCES, MUTUAL LEARNING AND JOINT STRATEGIZING FOR FUTURE ACTIONS.
- THE FIRST PHA WAS HELD IN SAVAR, BANGLADESH IN DECEMBER 2000 AND WAS ATTENDED BY MORE THAN 1453 PEOPLE FROM 75 COUNTRIES; THE PEOPLE'S CHARTER FOR HEALTH WAS DEVELOPED AND ENDORSED AT PHA1.

The second Assembly was held in Cuenca, Ecuador in July 2005 and attended by 1492 people from 92 countries.

3rd Assembly was held in Cape Town attended by about 1000 people from over 90 countries.

[4th People's Health Assembly](#) was held in Bangladesh in 2018 attended by 2000 people from over 70 countries



INTERNATIONAL PEOPLE'S HEALTH UNIVERSITY (IPHU)

- PHM'S MAIN EDUCATIONAL AND RESEARCH PROGRAM.
- THE IPHU HAS ORGANIZED OVER 25 SHORT COURSES ENTITLED 'THE STRUGGLE FOR HEALTH' OF 2-WEEK DURATION EACH. THE COURSES HAVE BEEN ORGANIZED IN OVER 15 COUNTRIES SO FAR, IN 9 LANGUAGES AND ATTENDED BY ABOUT 1500 HEALTH ACTIVISTS FROM MORE THAN 60 COUNTRIES. MANY OF THESE PARTICIPANTS FORM THE CORE OF COUNTRY CIRCLE ORGANISING AND ACTIVITIES.



WHO WATCH

- PHM IS PART OF A WIDER NETWORK OF ORGANIZATIONS COMMITTED TO DEMOCRATIZING GLOBAL HEALTH GOVERNANCE AND WORKING THROUGH THE WHO-WATCH PROJECT.
- PHM FOLLOWS CLOSELY THE WORK OF WHO, BOTH THROUGH THE WORLD HEALTH ASSEMBLY AND THE EXECUTIVE BOARD.
- A TEAM OF PHM VOLUNTEERS ATTENDS WHO BODIES' MEETINGS – FOLLOWING THE DEBATE, TALKING WITH DELEGATES, AND MAKE STATEMENTS TO THE EB.



PHM's commentaries cover most of the agenda items of the WHO bodies' meetings including a note on the key issues in focus, a brief background, and critical commentary.

PHM developed the Health For All Campaign as its central campaign and to serve as an umbrella for more specific activism around priority social determinants of health, called Thematic Areas.

PHM's Thematic Areas and sub-themes have shifted over the years, depending on the focus of PHM activist interests, initiatives of global governance organisations, and the broader context of the struggle for health.

THE THEMATIC AREAS

- GENDER JUSTICE AND HEALTH
- ENVIRONMENT AND ECOSYSTEM HEALTH
- NUTRITION AND FOOD SOVEREIGNTY
- TRADE AND HEALTH
- EQUITABLE HEALTH SYSTEMS
- WAR AND CONFLICT, OCCUPATION AND FORCED MIGRATION AND HEALTH

PHM believes that the thematic circle on War and Conflict, Occupation, Forced Migration & is a priority, not only as a determinant of health and the vulnerability of those affected, but also due to the level of conflict and displacement occurring around the world, with one in seven people in the world living in fragile or conflict-affected countries (Curtis, 2019), and almost 80 million people forcibly displaced (UN News, 2020).

The vision for the War and Migration and Health Thematic Area is that migrants' and refugees' health rights are upheld

GENDER JUSTICE AND HEALTH

The vision of this thematic circle is to create accountable and equitable health policies and health systems in the context of intersectional justice, and to enhance access to quality public healthcare, including sexual and reproductive healthcare that is premised on intersectional justice.



- THE SHORT-TERM GOALS FOCUS ON INTEGRATING A GENDER AND INTERSECTIONAL JUSTICE LENS INTO PHM'S BROADER WORK, AND CAPACITY BUILDING AMONG ACTIVISTS.
- GREATER DIVERSITY AND MOMENTUM OF THE GENDER JUSTICE AND HEALTH CIRCLE FOR CROSS-MOVEMENT CONVERSATIONS AND MOVEMENT BUILDING.
- ENHANCED COMMUNICATION, AND SUSTAINED PARTICIPATION IN THE CIRCLE INITIATIVES TO BUILD SYNERGY ON ADVOCACY AND SOLIDARITY EFFORTS.
- CONSOLIDATION AND REGULAR CAPACITY BUILDING AND ADVOCACY ACTION INITIATIVES TO STRENGTHEN PERSPECTIVES ESPECIALLY OF YOUNG ACTIVISTS, RESEARCHERS, ADVOCATES, ETC.

ENVIRONMENT AND ECOSYSTEM HEALTH

PHM has worked on environment and ecosystem health for a number of years. Activism on extractivism has the most momentum, and is especially strong in the Latin and North American regions, though activists in other regions are also involved in extractivism issues and the thematic area generally.

PHM has recognized and is increasingly addressing the climate crisis, and expects that work to strengthen in the immediate and foreseeable future.

The vision of the thematic area is the recovery of the natural environment and ecosystem and its contribution to health.

The short-term goals relate to the inclusion of more activists in the space and a more unified voice on the issues within PHM. Short-term goals for Environment and Ecosystem Health-

Increased grassroots voice and activism within PHM to include more voices that expand vision beyond a European / WHO focus.

Greater voice and activism among the younger generations, women, and indigenous peoples within PHM.

NUTRITION & FOOD SOVEREIGNTY

Nutrition and Food Sovereignty has historically been a very strong area for PHM, but with the loss of some activists in the space, PHM is working to re-energize the work.



The vision is the creation of an equitable and fair food system based on the inalienable people's right to food and adequate nutrition; politicization of food and nutrition issues, i.e., increasing the political as opposed to technical communications drive on these issues; broad awareness and activism about the negative links between food and financial systems including about the undue corporate influence and flaws of current PPP and multi-stakeholder solutions; and successful resistance to the technical and individualized vision of nutrition by correcting misinformation fed to the public on how to make the food system more equitable.

Short-term goals for Nutrition and Food Sovereignty

- Increased capacities of PHM cadres in food and nutrition work, including active use of mass media and social media to engage beyond PHM.
- PHM activities linked and joint actions developed with other organisations active in the food and nutrition area.
- PHM contributes to convergence and strengthening of broader struggles and provides inputs in its areas of expertise.
- Increased understanding of the political economy of food and nutrition among activists broadly.

TRADE AND HEALTH

We recognise the need to develop our own understanding of the health implications of trade and investment agreements and the practical strategies and skills of engaging in trade and health activism. PHM commits to:

Developing a web portal providing access to various reports and papers dealing with different aspects and at different levels of detail; • collecting, developing and disseminating stories and trade and health activism (Uruguay, Croatia, ACTA, FTAA, MIA, etc).

Organising a program of webinars and information sheets around key topics such as medicines policy, TRIPS and access, food trade, trade agreements and healthy systems, ISDS and health;

Organising further IPHUs around trade and health, including access to medicines;



EQUITABLE HEALTH SYSTEMS

THE HEALTH SYSTEMS THEMATIC AREA IS ONE OF PHM'S STRONGEST, WITH BROAD PARTICIPATION ACROSS COUNTRIES AND REGIONS.

THIS THEMATIC CIRCLE HAS A WIDE-RANGING FOCUS, AND ITS WORK IN THESE BROAD AREAS HAS BEEN DIVIDED INTO SIX SUB-THEMES:

PRIVATISATION, AND RESISTANCE TO PRIVATISATION,

CORPORATE WATCH,

INNOVATIVE ATTEMPTS IN PHC,

HEALTH WORKERS DAY,

HEALTH RIGHTS.

THE IRISH GLOBAL HEALTH NETWORK

- IS AN INDEPENDENT NETWORK OF PEOPLE FROM DIFFERENT BACKGROUNDS, SECTORS AND DISCIPLINES WHO ARE CONCERNED WITH HEALTH INEQUITIES AND ISSUES THAT IMPACT ON THE HEALTH AND DEVELOPMENT OF POPULATIONS AT A GLOBAL LEVEL, WITH A PARTICULAR COMMITMENT TO THOSE LIVING IN LOW- AND MIDDLE-INCOME COUNTRIES.**
- ESTABLISHED IN 2004, THE IGHN HAS WITHIN ITS MEMBERSHIP HEALTH AND DEVELOPMENT PROFESSIONALS AND OTHERS WITH AN INTEREST IN AND A COMMITMENT TO INFLUENCING EDUCATION, ADVOCACY, AND POLICY WORK WITHIN THE NGO SECTOR, HEALTH SECTOR, AND ACADEMIA.**
- ITS MEMBERSHIP IS BOTH LOCAL WITHIN IRELAND AND GLOBAL. MEMBERSHIP IS OPEN TO ANY INDIVIDUAL WHO HAS AN INTEREST IN GLOBAL HEALTH, REGARDLESS OF DISCIPLINARY BACKGROUND.**

• THE PEOPLE'S VACCINE ALLIANCE

IS A GLOBAL MOVEMENT OF ORGANISATIONS, WORLD LEADERS AND ACTIVISTS UNITED UNDER A COMMON AIM OF CAMPAIGNING FOR A "PEOPLE'S VACCINE" FOR COVID-19 THAT IS BASED ON SHARED KNOWLEDGE AND IS FREELY AVAILABLE TO EVERYONE EVERYWHERE. THE PEOPLE'S VACCINE ALLIANCE IS SUPPORTED BY OVER 2 MILLION ACTIVISTS WORLDWIDE AND 175 FORMER WORLD LEADERS AND NOBEL PRIZE WINNING SCIENTISTS.

COVID-19 PEOPLE'S CAMPAIGN

- THIS IS AN ALLIANCE OF SOCIAL MOVEMENTS, TRADE UNIONS, COMMUNITY ORGANISATIONS AND NGOS UNITED BY THE COVID-19 PROGRAMME OF ACTION THEY ALL ENDORSED. THEY HAVE ACTIVISTS WORKING GROUP SUCH AS HEALTH, EDUCATION, BASIC NEEDS ECD ETC
- THE C19 PEOPLE'S COALITION IS COMMITTED TO ENSURING THAT THE SOUTH AFRICAN RESPONSE TO THE COVID-19 VIRUS IS EFFECTIVE, JUST, EQUITABLE, AND MEETS THE NEEDS OF THE MOST MARGINAL IN OUR UNEQUAL COUNTRY.

SOME MOVEMENTS AROUND HIV/AIDS

Formed in New York. As “an organization that aimed to combat ‘the government’s mismanagement of the AIDS crises,’” ACT UP was able to speed up the approval process of HIV drugs, lower the prices of ARVs, and spark a larger movement of public participation in consumer health policy. ACT UP utilized “a model featuring direct action, self-empowerment, and self-education... [drawing] a broad spectrum of people and [uniting] them into a cohesive organization”

2004 and 2008 **STOP AIDS Campaigns**: During both the 2004 and 2008 election seasons, a coalition of AIDS activist groups including Health GAP, the Global AIDS Alliance, and the Student Global AIDS Campaign (SGAC), collaborated to get commitments from presidential candidates for increased global AIDS funding. By coordinating their efforts, the coalition was able to have activists present at many key election events. Using the tactic of “bird-dogging,” when audience members repeatedly asked candidates to commit to a cause, they were able to confirm a pledge to global AIDS funding. The campaigns were a great success, resulting in multiple commitments from candidates and ultimately an increase in funding

TREATMENT ACTION CAMPAIGN (TAC)

- WAS FOUNDED “TO CHALLENGE BY MEANS OF LITIGATION, LOBBYING, ADVOCACY, AND ALL FORMS OF LEGITIMATE
- MOBILIZATION, ANY BARRIER OR OBSTACLE, INCLUDING UNFAIR DISCRIMINATION, THAT LIMITS ACCESS TO TREATMENT FOR HIV/AIDS IN THE PRIVATE OR PUBLIC SECTOR.” SIMILAR TO ACT UP, AND EVEN WORKING COLLABORATIVELY, TAC’S APPROACH INCLUDED A STRONG EMPHASIS ON “TREATMENT LITERACY” AS WELL AS EDUCATION ON SOCIAL AND ECONOMIC RIGHTS AMONG AFFECTED COMMUNITIES. TAC LEVERAGED ITS BROAD, DIVERSE GRASSROOTS CONSTITUENCY TO ACHIEVE LARGE-SCALE POLITICAL OUTCOMES. TAC AND ACT UP, UTILIZING SIMILAR APPROACHES, AND SUPPORTING ONE ANOTHER IN THE PROCESS, CREATED A SUCCESSFUL TRANSNATIONAL ACTIVIST MOVEMENT (343-345).



**TREATMENT
FOR ALL NOW**

**20 MILLION MORE
NEED TREATMENT**

**DON'T
BARE KIT**

**MISSING
COMMUNITY
HEALTHCARE WORKERS**

**SOME
GENDER
JUSTICE**

**AIDS
TREATMENT
IS
NOT
THE
ANSWER**

AIDS

AIDS

AIDS

AIDS

AIDS

AIDS

**AIDS
STILL
KILLS**

AIDS

**AMINGU
GIV DLO**

**WOLLA
WELAPME
MAITE**

**AIDS?
NOT EVEN
HALFWAY**

**GCINA
156 THENS**

**MISSING
500M MORE
FROM USA TO FIGHT AIDS**

**AIDS
STILL
KILLS**

AIDS

HIV

HIV

HIV

HIV

HIV

HIV



I believe that health, poverty and inequity are closely linked and that to achieve Health for All requires equity within and between countries, rich and the poor, the healthy and the weak!



Aluta continua

Thank You

**muito
obrigado**

**Asante
sana**



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