



Realizing Health for All

CHC's involvement with Makkal Nalavazvu Iyakkam

K. Ameer Khan

Community Health Cell (CHC) has been actively involved in the initiation, support and facilitation of the People's Health Movement. As one of the co-initiators of the movement at the international level that hosted the international secretariat early in the life of the PHM, CHC team members are on the National Coordinating Committee as well as the National Organizers' Committee of the *Jan Swasthya Abhiyan* (JSA is the Indian chapter of the People's Health Movement). More recently, the CHC teams in Karnataka and Tamil Nadu have been hosting the secretariats of the respective state chapters.

Early days of PHM

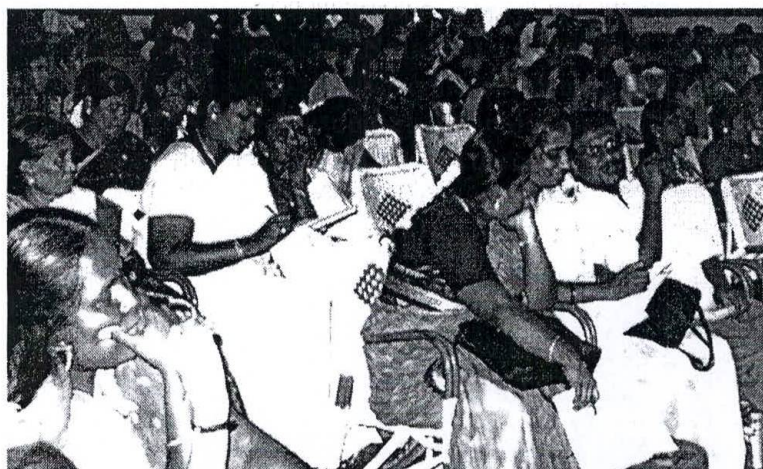
One of the first meetings that launched the pre-assembly process which led to the formation of the Jan Swasthya Abhiyan and the People's Health Movement was held in Chennai. It was facilitated by the Tamil Nadu Science Forum, the All India People's Science Network and CHC. During the pre-assembly mobilization activities, the Tamil Nadu Science Forum

coordinated the various PHC-level surveys and other activities including the first People's Health Assembly, prior to arranging a trainful of activists to Kolkata for the first National Health Assembly. A few members of that group also joined the national contingent to the first International People's Health Assembly in Savar, Bangladesh, where the People's Health Movement was launched. This set of activities galvanized the interest of civil society in Tamil Nadu in health. This mobilization also marked the ascendancy of the *rights approach to health* in civil society work.

Right to health care campaign

After National Health Assembly-1 in Kolkata, JSA initiated a national campaign on 'Right to Health' in 2004. As part of this campaign, JSA in partnership and with support from the National Human Rights Commission (NHRC) organized a series of public hearings on 'denial of health care' across the country in 2004. There were four regional and one national-level public hearings. CHC took responsibility to conduct

public hearings for the southern region. Through this opportunity, CHC facilitated the Makkal Nalavazvu Iyakkam (MNI) constituents to collect evidences, case-studies on the denial of health care. The MNI members motivated the community to present their testimonials in front of the NHRC's judges. A total of 65 case-studies of health care denial from Tamil Nadu alone were presented. Based on the hearings, NHRC evolved an Action Plan to realize the 'Right to Health'. This was submitted to the Central and State governments. Each state government was supposed to report back every two years regarding the progress made towards the



State Health Assembly of PHM in TamilNadu in March 2007

implementation of the action plan. MNI was requested to submit a response to the Tamil Nadu Government's report that was submitted in 2007. The CHC team played an active role in the evolution of this response.

Tsunami solidarity meeting of PHM in Chennai

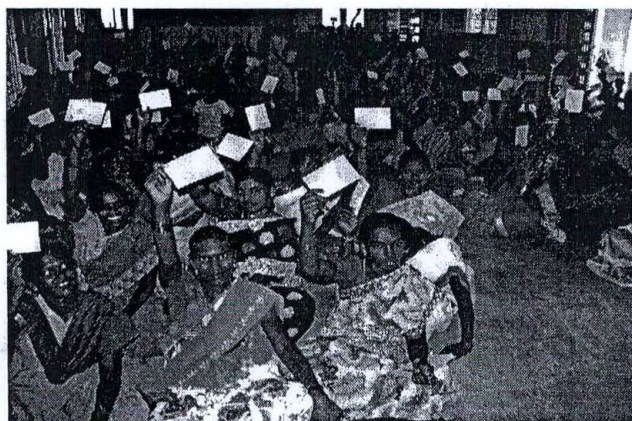
As part of the People's Health Movement's response to the Tsunami and after, in 2005 an international conference was organized in Chennai to show solidarity to tsunami victims. The conference demanded more transparent and quick relief for the victims. It analyzed many aspects of disaster relief and placed under the scanner the role of civil society organizations, funding agencies and the government. It emphasized that the primary focus needs to be on protection of the coastal people's rights.

NHA- II and building social sector alliance

In 2006, the JSA announced the holding of the Second National Health Assembly (NHA), in March 2007. Around this time, in 2006, CHC took the responsibility of co-convenorship of the Makkal Nalavazhvu Iyakkam in TamilNadu.

The MNI had detailed discussions and evolved a new strategy for mobilization, and later on as part of the process came up with a new organizational framework too. The core strategy followed was to build towards the formation of a social sector alliance at the district level. This recognized the presence of different campaigns organized by different groups around different issues. All the groups including MNI were struggling to achieve a common vision of the social, economic, political and civil rights of the people. It was thus logical to come together to support each other. This formed the basis of both the short-term and long-term strategies of the MNI.

Four broad themes were chosen through discussion at different regional and state-level meetings. It was decided to collect evidence across the state based on these themes. The themes were food security, environmental security, public health services and the issues of people living with HIV/AIDS. The district groups were given freedom to choose one theme from among the set of themes based on the district's priority. A set of core values and skills, which the movement wants to achieve, included people's participation, surveys and using the findings of survey for mobilization and a rights approach to health. They provided the common threads in this campaign. This helped to bring



a wide variety of groups into the movement. This also ensured ownership of the campaign at the district-level since they had chosen the theme.

Surveys were conducted in most of the 17 districts that had groups coordinating at the district-level in at least one of the four themes. In this entire process, many state-level workshops, TOT programme for the activists, and steering committee meetings were held across the state. The meeting venues were spread over across the state to seed the ownership of the movement within all the members.

The Iyakkam conducted the state health assembly in March'07 where case-studies were presented. More than 250 people and many groups took part in the Assembly. Prior to the Assembly, MNI held a press meet at which it released its demands that were based on the mobilization activities done in the state.

MNI and NRHM

After this campaign, in 2007, MNI took responsibility for facilitating the "Community Monitoring and Planning (CMP)" pilot project process of National Rural Health Mission (NRHM) services in Tamil Nadu. The CMP process is one of the strategies to strengthen the health system with community participation.

Motivating communities to take part in the improvement of the health care system and make the health care providers to accept the community participation is a difficult process.

As a pilot process, MNI initiated the CMP activities in 225 villages across the Tamil Nadu state.

This process which started in May 2007 concludes in December 2008. Through this process, MNI is hoping to create a framework for mobilizing communities, spreading awareness regarding their rights, instilling confidence in them to demand their rights, collecting

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worldwide health movement. Creating a health-promoting school requires broad support and there is a role for everyone for building support for a Health-promoting school.

Some of the Activities:

- School Health Committee is formed in each school after orientation and discussion with the school and the Grama Sabha. The committee consists of representatives of children from each class, representative of teachers, of parents, of school development & management committee in the village, and project staff. The committee meets and prepares action plan for short terms and for one year.
- Each school plans activities for the school and also plans activities to be achieved together in collaboration with all the schools involved in the programme.
- The action plan includes child-to-child activities to impart the knowledge children gain on health, child-to-adult activities to impart the knowledge to family members and collective efforts in the school and in the village.
- The findings of School Health Check-up are presented to the Parents Committee and remedial actions were taken together.



School children on a rally to promote awareness

- School register is maintained to know the reasons of absenteeism due to health.
 - Networking with other health-promoting schools through newsletters for exchange of ideas.
- Fundamentally, we see a health-promoting school as a process to promote health among students, staff, families and community members. It is one of the ways the Holy Cross CRHP is reaching out to touch the lives of common people and the society in a holistic way and bring out their hidden potentials and ability to find solutions to their problems and misery. ■

(The author is Head, Holy Cross Congregation for South India, and member, Executive Committee of SOCHARA)

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relevant information and in preparing village level health plan as a logical continuation of the monitoring activities.

Dr. Binayak Sen release-campaign

Dr. Binayak Sen, health rights activist, who has been working with the poor and marginalized in Chhattisgarh State was arrested by the state government accusing him of having links with the naxalites. World-wide protests were launched by many groups to release him. As a part of that, MNI along with other groups, organized protest meetings and demonstrations, press conferences, public meetings and a cultural evening to protest his arrest. In addition, medical camps for the poor and marginalized as a symbolic way of continuing his work was facilitated. This campaign will continue till he is released from the prison.

Protecting public vaccine production units and strengthening rural health services

Recently, MNI initiated two campaigns: one was to restore vaccination at the village level and the other to reopen and restore production of national institutes of vaccine production. The TamilNadu government ordered

vaccination only at the PHC level in response to the death of 4 children following immunization, in April'08. Reflecting on the opposition to this move which will mean long travel at personal cost as well as large indirect costs, a state level campaign against this government order was launched in partnership with various groups.

The second campaign is against the central government order of closing three public vaccine production units from January'08. The three units are BCG Lab in Chennai, Pasteur Institute in Cunnore, the Nilgris, and Central Research Institute in Himachal Pradesh. A state-level campaign was initiated to demand the central government to restart the production of vaccines in the above three public units.

Through these two above campaigns, MNI reached many new groups and people to make them aware of their health rights and bring them into organized action to achieve these health rights. As part of these campaigns, MNI along with other groups motivated people to send more than 50,000 postcards each to Prime minister of India and Chief Minister of Tamil Nadu. ■

(Training and Networking Officer and former fellow, Community Health Cell, Tamil Nadu)