

JANAAROGYA ANDOLANA

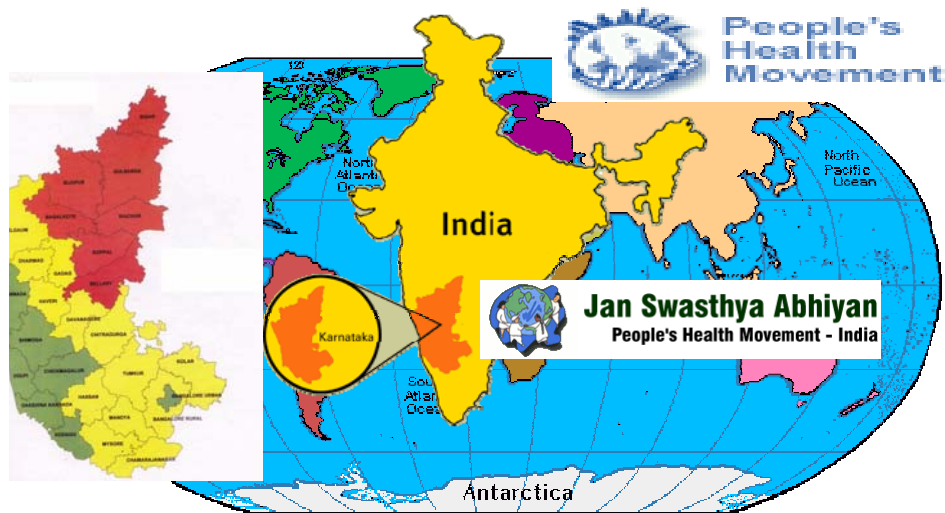
PHM-KARNATAKA, INDIA



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Secretariat
Janaarogya Andolana – Karnataka (PHM)

KARNATAKA- AN INTRODUCTION



KARNATAKA- PEOPLE & HEALTH

- Area :1,91,791 sq.km.
- Karnataka Population: 6.8 crore (68 million)
- Urban Population 33.98%
- Rural Population 66.01%
- **Sex Ratio** 964 females per 1,000 males

Health Services

- Subcentres: 8143
- Primary Health Centres (PHC): 1676 + 9 (urban)
- Community Health Centres (CHC): 249
- Primary Health Units (PHU): 583
- 22,000 practicing doctors in the State
- bed strength 43,479
- About 2000 with the private hospital have the same number of bed strength.

JANAAROGYA ANDOLANA- THE BEGINNING People's Health Dialogue and preparatory workshop (2000)





JANAAROGYA ANDOLANA- THE PARTNERS



- All India Janvadi Mahila Sanghatane (AIDWA)
- Community Health Cell (CHC)
- Bharat Gyan Vigyan Samithi (BGVS)
- Catholic Health Association of Karnataka (CHA-Ka)
- Christian Medical Association of India (CMAI)
- Drug Action Forum –Karnataka (DAF-K)
- Federation of Voluntary Organizations Working for Rural Development Karnataka- (FEVORD-K)
- Vivekananda Foundation (VF)
- Foundation for Revitalization of Local Health Traditions (FRLHT)
- Janodaya
- Joint Women’s Programme (JWP)
- Karnataka State Medical & Sales Representatives Association (KSMSRA)
- Karnataka Kolegeri Nivasigala Samyuktha Sanghatane (KKNSS)
- Mahila Samakhya –Karnataka (MSK)
- New Entity for Social Action (NESAs)
- Voluntary Health Association of Karnataka (VHAK)
- Family Planning Association of India (FPAI)

FROM DAVANAGERE TO BANGALORE -
THE JOURNEY SO FAR.....

**1st KARNATAKA STATE PEOPLE’S
HEALTH ASSEMBLY**

**DAVANGERE ON 26TH & 27TH
NOVEMBER 2000**

FROM DAVANAGERE TO
BANGALORE- THE JOURNEY SO
FAR.....

- **Participation in 1st National & International
People's Health Assembly**



FROM DAVANAGERE TO BANGALORE -
THE JOURNEY SO FAR....

**CELEBRATION OF PEOPLE'S
HEALTH DAY**

**APRIL 7TH 2001 &
ANNUALLY THEREAFTER**

**tobacco control & alcohol
prohibition.....**

FROM DAVANAGERE TO BANGALORE- THE JOURNEY SO FAR.... CAMPAIGNS ON

**Access to
essential drugs,
right to food,
right to
health.....**



strengthening the primary health care....



FROM DAVANAGERE TO BANGALORE - THE JOURNEY SO FAR...

2nd STATE PEOPLE'S HEALTH ASSEMBLY



**AT BANGALORE ON
7TH JULY 2005**

United Nations Development Programme (UNDP)

“..will go down in history not as a decade of accelerated human development, but as a decade of lost opportunity, half-hearted endeavours and failed international cooperation.”

– Human Development Report 2005



Health for ALL!!!

- Declaration of WHO in 1978 – **health for all** by 2000 A.D.
- Health for All – possible only through primary health care.
- India's model of primary health care – inspired and informed the world community.

Remember...

Health is a fundamental human right for
ALL!!!

- It is part of right to life with dignity guaranteed by the constitution in Article 21.

BUT....

For a vast number of people Healthcare is not accessible... Only at the extreme stage they are forced to seek healthcare...it's too late...

Healthcare is the 2nd largest cause of borrowing in rural areas (from the SHGs)

Health spending is the second leading cause for indebtedness and impoverishment!!!

Primary Health Care in Karnataka

- About 1700 Primary Health Centres (PHC)
 - cornerstone of public healthcare system
- 1 PHC for 30,000 population
- 1 Sub-centre for 5000 population
- Functions
 - Basic health care
 - Maternal & child care, Immunisation
 - Nutrition
 - Health education and so on.

Primary Health Care in Karnataka

- Karnataka – 68 million population with 30 districts; about 60% literacy
- Booming IT sector, BPOs, Silicon city...
- About 1700 PHCs (1:40,000)
- ~ 8,000 subcentres
- ~68,000 registered medical doctors (1:1000) + Ayurveds & Homeopaths.
- Every year 3,000 MBBS allopaths doctors in Karnataka
- ~25 medical colleges

Primary Health Care in Karnataka

Karnataka

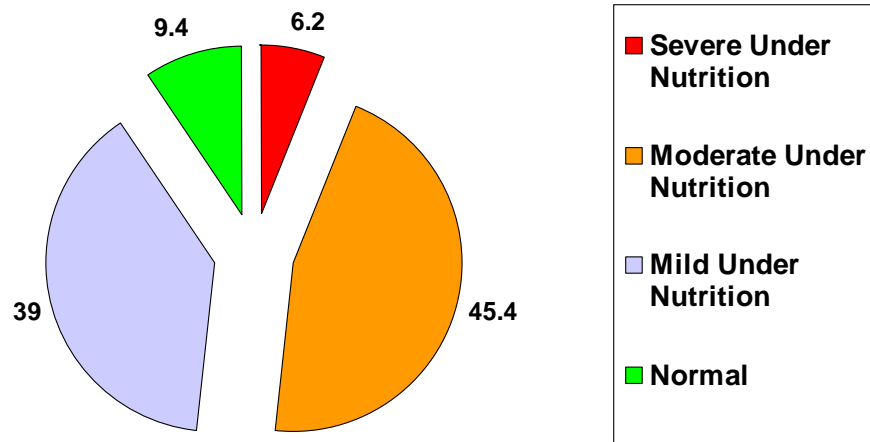
Should have attained

Health For All

at least by 1999!

However.....

Nutrition status of children in Karnataka



90.6 % children around us are UNDER-NOURISHED.

- Karnataka Vision 2020 document

Right to Primary Healthcare Campaign

- **People's health campaign: campaign to revitalize PHCs**
- **93 PHCs surveyed – in 12 districts (2006)**
- **Occasion to train people on RTH perspectives**
- **Organised people – occasion to strengthen PHM**
- **Awareness campaigns**
- **Used Right to Information Act to get information**
- **Dialogue with the local health officers,**
- **Signature campaigns, letter campaigns**

•A well functioning public health system is the only way to ensure health rights for people.

The Process of the Campaign

- **April 6, 2006 – World Health Day Dialogue failed**
- **April 25, 2006 State level review meet - Everyone pledged that PHCs should be revitalised – Result is : RIGHT TO PRIMARY HEALTHCARE CAMPAIGN**
 - **Anger was turned into mobilisation**
- **Health is our fundamental human right was the slogan**

Strategies and Process contd.

April 25, 2006 – main decisions:

- **Strengthening District Level RTH Forum through JAAK – district level health workshops, trainings**
 - **Evidence gathering on PHCs and dialogues with the Health system to revitalise PHCs – surveyed 93 PHCs**
 - **Preparation on materials on PHC and Right to Health in Kannada**
 - **Trainings to numerous organisations on RTHC**
 - **Constant mobilising and energising in the District levels**

Strategies and Processes

8 months of initial process – District Health Plans

- **18 districts trainings meetings**
- **Number of booklets, pamphlets prepared**
- **State level planning and review meeting – every 2 months**
- **For 85 activists 2 days of State level workshop (Dec 17-18, 2006)**
- **Preparation of a right to health songs CD (sung by PHM partners)**

PHC at Haveri, Karnataka



Diseases affecting PHCs

- Severe staff shortage (doctor, nurse, other health human resources)
- Under-funded health system – shortage of essential medicines, equipments)
- Poor or absent infrastructure (water, toilets, electricity etc.)
- Rampant corruption
- Irrational geographical distribution of PHCs
- No basic facilities to the Health Staff
- Neglect by the Government – lack of political will
- Lack of awareness among people about health rights

A WEAK, FAILING, UNATTENDED, NEGLECTED PUBLIC HEALTH SYSTEM.. Required diagnosis and treatment

Health Rights Demand Day Feb.1, 2007 - 17 districts



Chitradurga

**National Rural Health Mission
September 4,2007 – workshop by JAAK**



Solidarity with other campaigns

- **Essential Drug List of Karnataka Preparation**
- **Representation on RTH in various Human Rights Fora and meetings**
- **2005 against amendments in Indian Patents Act 1970**
- **Campaign against Novartis on Gleevec drug**
- **Right to Food security and campaign against Water Privatisation**

Health Rights Demand day

- 29th Oct 2007
- 17 districts of Karnataka
- Mass action and Mass petition to demand healthy health system
- JAAK delegation dialogues with the Director of State Health Services on 12th November, 2007

Health Rights Day 29 Oct 2007

