

IPHU Savar, 15.11.2007

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Daily Report

The day started with a group work. 5 groups were built to work out questions for a life internet based World Bank discussion concerning “Ending poverty in South Asia within one generation”. After a discussion we blogged the questions on following issues:

- Legitimacy of the WB
- Track record of WB in reducing poverty in different countries.
- WB strategy for equity in developing countries
- Agricultural subsidies
- Definition of poverty
- Neglecting comprehensive PHC that addresses of social determinants of health and community mobilization

We discussed further issues that affect people like:

Privatization of health services, whether roads and education are considered productive and whether they contribute to poverty eradication. The group had different views on these things

After tea we heard reports from practice from Caroline and Nazmoon
Short summary from Caroline’s report from her work in her organization called Community Working Group on Health (CWGH) in Zimbabwe.

CWGH: began programme in 1998 to disseminate health information among people
The aims of CWGH work is to achieve health equity and accessibility of health services
There are three programs namely Civic Education on Health where communities participate in issues like health budget and prioritizing their health problems. There is an HIV and education program from a gender and sexuality perspective and the Adolescent Reproductive health program.

Issues discussed on CWGH work included;

-How CWGH engages the parliament about health issues lacking in the community. Parliamentarians meet the communities through CWGH work, there are pre-budget meetings and public hearings.

The members also take a critical eye on governmental health policies and how they affect the poor. CWGH writes position papers on these issues

Research is carried out by communities on the cost of health basket. This builds up to the issues they take up to policy makers for consideration in coming up with the health allocation.

Short summary of Nazmoon’s “report from practice” concerning her work in her organization called Naripokkho in Bangladesh.

Aim: Women empowerment, promotion and protection of women's right .Women Health and Reproductive rights are one of the main thematic areas of work.

Problems: Bangladesh has one of the highest rates of Maternal Mortality and Morbidity in the world. A continuous denial of women rights in Bangladesh makes it impossible to reduce maternal death in Bangladesh. Women have very less access to get treatment in case of emergency because of non availability of services in the public health system. Here especially the local health system is suffering more because of the non accountability of the local health authority and health service providers. Women are not using health care facilities usually, but as the last resort they use the facility, even than service is not provided adequately. So women have to die. Naripokkho wants to establish a mechanism to hold the accountability of the local health authority and health service providers to people specially to women.



For Details check the presentations available on the IPHU Website

After lunch Dr. Kashem Shaikh from GK reported about the GK health care services. Combined with reports from last day's excursions we discussed different aspects of the GK PHC services, the financing system of their health services and matters of sustainability. It was noted that GK has a very good system that takes needs of the poor and maternal mortality and infant mortality rates are lower than other non GK areas. The nutrition status of children is good.

Participants shared areas of good practices from other countries that could be adapted



by GK to maintain the quality work.

Afterwards we heard a value added, interesting lecture from Miguel San Sebastian (Umea International School of Public Health - Sweden) about Global Environmental Change and Health. This lecture contained many interesting information and was enrichment to the

course. Issues contributing to global warming were presented with a lot of evidence-based diagrams. Furthermore the impacts of global warming on different social groups and geographic regions were visualized in an impressive way. The presentation can be accessed on the PHM website.

The days deliberations ended at 1930 hours