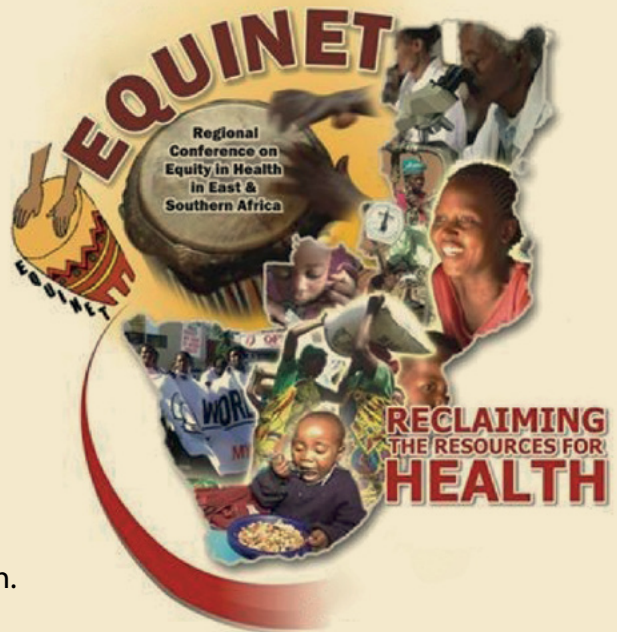


EQUINET: Regional Network for Equity in Health in East and Southern Africa

EQUINET Conference 2022 – Catalysing change for equity and social justice in health: Resolutions for action

Delegates at the EQUINET Conference 2022 comprised representatives of civil society organisations, community members, parliament, central and local government leaders and officials, trade unions, media, academia, researchers, and personnel from regional and international organisations. We came together virtually under the umbrella of the Regional Network for Equity in Health in East and Southern Africa (EQUINET) to deliberate the actions needed to **Catalyse change for health and social justice** in our region.

Our deliberations took place at a time of deep-seated and multiple crises that have decimated the basic foundations for the provision of public goods (the state, resources and collective agency) in our region, with the poor and marginalised communities left behind to shoulder the burden.



- **We are alarmed** by the deepening resource extraction from our region that harms our environments and depletes resources for current and future generations; from inequalities in health, wellbeing and access to services, especially in urban areas and with particular consequences for young people, that are exacerbated by harmful commercial practices; underfunding, privatisation and the commodification of public sector services; and from local to global political and economic systems that promote profit over people, disempower people and disrupt collective agency, dignity and social solidarity.
- **We are greatly concerned** by the limit and slow pace of action to address these challenges and make the change needed to promote equity in health and wellbeing at local, national and regional levels.
- **We recognise** that public sector-led health systems and comprehensive primary health care are central elements of the robust, redistributive and participatory states that are essential to meet our challenges, including from pandemic, conflict and climate injustice, and to address global drivers of injustice and inequity.
- **We unequivocally identify** the pivotal contribution that human rights, values of solidarity, collective organisation and social power make in supporting self-determined action towards social, economic and ecological justice.

Committing to reclaim our resources, our states and our collective agency and solidarity for health and social justice, and as a catalyst for political economies and systems that are rooted in values of equity, social justice, collective wellbeing and the protection of nature, we propose a set of inter-linked areas of action to address our most critical challenges and tap our assets for health.

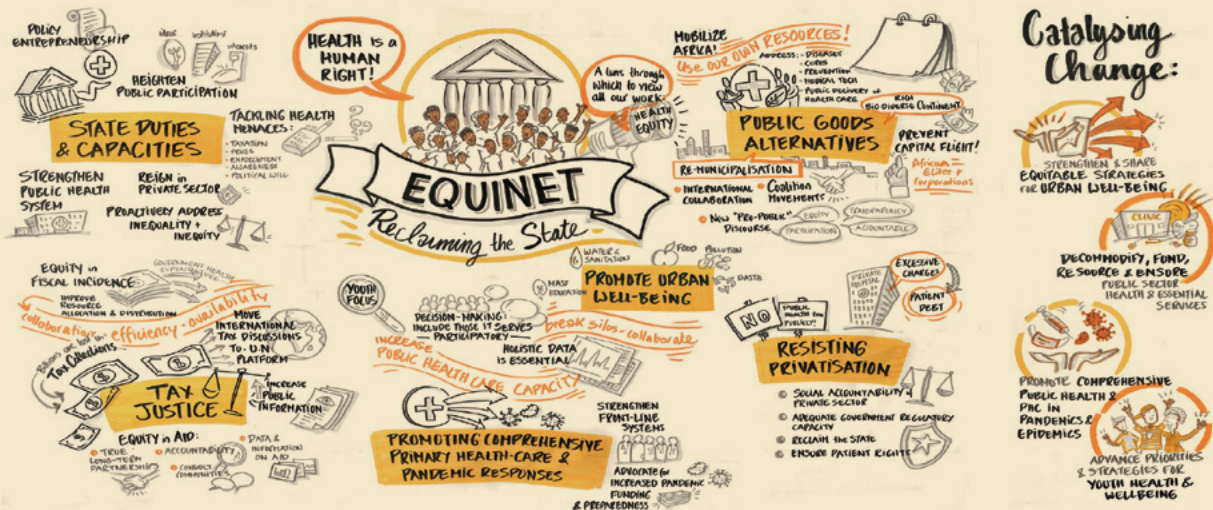
Building on our past 25 years, we understand that equity demands sustained, longer-term action. Over the next five years:

1. We will take action to:

- Build and amplify a clear and affirmative pro-equity, pro-public discourse, to affirm values, claim rights, resist inequity and demand action.
- Track and generate evidence and knowledge on inequities and rights violations in health and wellbeing, and on the opportunities for and feasibility of change that promotes social justice, and both sustained human and ecosystem wellbeing.
- Promote, demonstrate, advocate for, and contribute to the implementation of laws, policies, practices and reforms that promote equity in health and wellbeing.
- Build capacities, leadership and activism for communities to actively participate as agents of change; and for participatory democracy around the policies, laws and systems that are critical in catalysing equity-oriented change.
- Develop, sustain and work with pro-equity networks and alliances for action within and across countries in the east and southern Africa (ESA) region, in exchanges and engagement with other regions, and with global actors and in global processes.

2. We will give a particular focus to the following issues:

- Development and implementation of constitutional and legal provisions that protect the right to health and enable action on equity in health and wellbeing.
- Healthy living, working and ecological conditions and food sovereignty, particularly in relation to the extractive sectors, corporate practices, climate and eco-social justice, and urban wellbeing.
- Adequate and progressive public sector resourcing (financial, health worker, commodities, infrastructures) and fair allocation for comprehensive primary health care-oriented, universal, equitable, socially accountable public sector health, social and essential services, including for young people and in pandemics, together with disaggregated and publicly accessible information, monitoring and public health surveillance systems that integrate community evidence.
- Investment in local production of essential health products and tax justice, and the rule systems, measures and institutional reforms for this within the region and at global level.
- Regional counterproposals to paradigms, narratives, and local to global economic, political and procedural drivers of policies and practices that harm equity health and wellbeing and undermine participatory democracy in health systems and services.



More specifically, we will take the following actions for these key areas of focus:

a. **Build and amplify a clear, pro-equity, pro-public discourse to affirm values, claim rights, resist inequity and demand action.**

We will craft and share clear messaging internally in our network, amplify it through health literacy and on public platforms, and make more direct links with journalists, editors and digital 'champions' for outreach through networks and alliances in and beyond the region. In this we will pay particular attention to:

- Changing narratives and consciousness to advance health and access food and health care as a right.
- Promoting the 'right to protect' resources and to healthy cities and healthy lives, over the 'right to extract' resources without fair benefit.
- Building a 'pro-public' discourse to generate societal and political support for the critical role of decommodified public sector health and essential services for wellbeing.
- Monitoring equity in delivery on the commitments in the Sustainable Development Goals and international and regional commitments for all communities, making clear the public sector action and resources needed to fulfil obligations as duty bearers and the conditions for rights holders to claim rights.

b. **Track and generate evidence and knowledge on inequities and rights violations in health and wellbeing, and on change that promotes both sustained human and ecosystem wellbeing.**

We will expose the harm, inequities, rights violations and health and disease consequences in current experience, and future wellbeing risks, including:

- The harm caused by extractive industries depleting our resources for health and driving climate injustice.
- Deficits in universal access to safe drinking water, adequate sanitation, clean energy, and decent housing and safe communities, considering class, race, sex, age, residence, and social status.
- Violations of the right to food and the nutritional and chronic disease consequences of current food systems, including in pandemics.
- The current and future health and socio-economic costs of commercial determinants of health.

We will expose which communities and population groups in our region and in our countries bear the consequences of deficits in policies, laws and resources that impact on healthy living conditions – with particular concern for the deficits in and drivers of health and wellbeing in youth, migrant and cross-border populations and marginalised communities.

We will update and implement participatory and inclusive equity watches from local to regional level and use them to engage locally, nationally, within the region, and globally.

We will profile and demonstrate the value of alternative laws, policies, programmes, approaches and practices that promote social justice and equity in health and wellbeing, including:

- Integrating health impact assessment in large commercial and extractive activities to internalise social costs and raise immediate and long-term alternatives to these modes of production.
- Investments in universal access to safe drinking water, adequate sanitation, clean energy, decent housing, health services and safe communities, and in remunicipalising essential services.
- Food sovereignty, including through urban agriculture and control of harmful ultra-processed foods, particularly in young people.
- Fair, timely and equitable access to, and local production of safe and appropriate essential health products (EHPs) as essential public goods.
- Cross-sectoral, multidisciplinary, innovative and well-planned primary health care and holistic approaches that improve wellbeing.
- Progressive taxes and tariffs in countries and at global level that contribute to health, strengthened domestic (health) financing and resource pooling within national health insurance systems.
- Strengthened public surveillance, early warning, public information and response systems, and communication to and from community levels, including for prevention and response to epidemics, pandemics and emergencies.

Across all our evidence and knowledge generation activities, we will:

- Give profile to lived experience and organic knowledge by engaging multiple, community voices, including food producers, youth, civil society and social networks based in urban areas, and frontline health system and related sector voices and teams.
- Use inclusive, participatory research, community monitoring and photovoice, draw on social media and work across disciplines, organisations, and sectors to bring community evidence, analysis, experience and agency into decision making on health at local, national, regional and global levels.

c. We will promote and advocate for specific policies, laws and reforms, including:

- Inclusion of the right to health and health care in our national constitutions.
- Public interest national law reform, harmonised regional standards and improved monitoring, inspection and enforcement of standards in commercial practices, extractive industries, in private sector health services, protection of biodiversity and control of waste and pollution, on tax justice, local production of EHPs, promotion of healthy food systems and living and working conditions.
- More equitable and transparent planning, financing and allocation of services and utilities at district and community levels, and progressive remunicipalisation of essential services, to reduce spatial inequalities in access to key services for health and health-promoting living conditions in the region.
- Domestic government investment in research and development at higher learning institutions and in local producers and civil society to promote local innovation, demonstration, production, and expansion of EHPs and health-promoting technologies.
- National efforts to boost domestic revenue capacities, to avoid tax competition and expand wealth and progressive tax revenues; to increase barriers to illicit financial outflows; to assess and engage on global rules, systems and conditionalities that undermine public sector revenues and their equitable use, in alliance with tax justice movements and support of African negotiations for a fairer global tax system.
- Meeting governmental health financing targets, including the allocation of domestic financing equivalent to 5% or more of GDP to health systems, the Abuja commitment of above 15% of government spending on health, and reducing out-of-pocket spending below 15% of total health expenditure – while noting that this is not an excuse for high income country governments to avoid meeting development financing and international human rights obligations.
- Alternatives to privatising public sector health and social services during pandemics and other emergencies, and to imposing loan conditionalities that further erode public services.
- The implementation of integrated, one-stop, youth-friendly services including services that integrate youth experience and views for sexual and reproductive health, tobacco, alcohol and substance abuse, mental health, social protection and pandemic responses, and for their access to official documentation like birth certificates.
- Equity in digital access as a right.

d. We will build the capacities, leadership and activism needed to promote and engage in participatory democracy around the policies, laws and systems that are critical in catalysing equity-oriented change, including by:

- Adopting participatory and action-oriented value systems and ethos in promoting bottom-up approaches and in the actions identified above, including the direct voice, experience, confidence, self-esteem and resources of those affected and of young people.
- Building capacities for and implementing ethical community and participatory monitoring work, and comprehensive and participatory health impact assessments of key areas that are critical for equity.
- Gathering and sharing evidence on and strengthening active participation, mandated representation, voice, and agency in and input to decision making by communities and marginalised social groups – including through health centre committees, health literacy programmes, community monitoring, and peer support.
- Building forms of leadership and cadreship that promote collective power, consciousness and self-determined action and agency, and the values of solidarity and justice within the region, through activist training, mentorship, and exchange visits.
- Integrating in our capacity building, public health workers, including community health workers, officials and diplomats from the region and supporting efforts to harmonise core competencies for promoting health equity and universal primary health care-oriented health systems.
- Ensuring accountability of our governments and regional bodies in ESA in planning for and accelerating efforts to implement obligations and achieve commitments made under international and regional laws and policies.
- Building alliances with and sharing best practices from other regions globally, especially for south-to-south learning and alliances in knowledge sharing, policy options and in global engagement.

e. Finally, in developing and sustaining networks and alliances for action within and across countries in the ESA region, in exchanges and engagement with other regions, with global actors and in global processes, we will:

- Build alliances from the ground upwards across sectors, organisations, disciplines within and across ESA countries, with other regions and globally.
- Together with relevant social networks of young people, engage governments, policy and parliamentary actors and researchers to co-design regulatory, institutional and participatory measures to tackle immediate harms and promote the current and future health of young people.
- Bring our views onto new platforms, such as those on eco-social justice, climate justice, tax justice, and strengthen alliances in the region and continent with others with shared values to support advocacy and negotiation on global rules systems, funding and accountability mechanisms and rule systems that affect our ability to implement the actions for equity noted above.