



THE MUMBAI DECLARATION

from

**The III International Forum for the
Defence of the People's Health**

Mumbai, India

14-15 January 2004

(A Forum held before the World Social Forum, 16-21st January 2004)

PREAMBLE

We, the 700 delegates from 44 countries¹, gathered at the III International Forum for the Defence of the People's Health at Mumbai on 14th and 15th of January 2004, reaffirm the validity and relevance of the People's Charter for Health, the foundational document of the People's Health Movement, which describes increasing and serious threats to health in the early 21st century.

Since the Charter's adoption in December 2000 at the first People's Health Assembly, at GK Savar, Bangladesh, the health of the world's poor has worsened and more threats to people's health have emerged.

Social, political, economic and environmental threats to health identified as the basic causes of ill health and the inequitable distribution of health within and between countries have increased.

The III International Forum for the Defense of the People's Health provided opportunities to hear inspiring testimonies, from the world's poor and health activists:

- *Denouncing the denial of health to their communities and their efforts to overcome this injustice.*
- *Threats to health from the unfair system of global trade and the imperialist policies of developed countries including unjust wars and efforts to counter them*
- *The Demands for acknowledgement of health as a universal human right and the implementation of Comprehensive Primary Health Care as a strategy to achieve Health for All.*

The Forum recognized the particular discrimination suffered by many groups which makes achieving Health for All even more difficult. These included women, people with disabilities, sex workers, children living in difficult circumstances (including street children), migrant workers, people with mental disorders, Dalit people, Indigenous peoples in rich and poor countries, and all those affected by wars, disasters and conflicts.

The Forum demanded Health for All, Now! and reiterated that Another World in which health is a reality for All is necessary and possible.

The Forum brought together all the concerns and experiences shared into a **Declaration** for action, entitled "**The Mumbai Declaration**". This Declaration is an update on the state of people's health across the globe at the beginning of 2004 and calls on People's Health Movement, Civil Society and Governments to evolve action in six key areas to achieve the goal of "Health for All Now!" dream.

Social, political, economic and environmental threats to health identified as the basic causes of ill health and the inequitable distribution of health within and between countries have increased

- **End Corporate led Globalisation**
- **End war and occupation**
- **Implement Comprehensive and sustainable Primary Health Care**
- **Confront the HIV/AIDS epidemic with Primary Health Care and Health Systems approach**
- **Reverse Environmental damage caused by unsustainable development strategies**
- **End discrimination in the Right to Health**

End corporate-led globalization

Corporate-led globalization continues to be a major threat to health. Since the People's Charter for Health was adopted in 2000, the International Monetary Fund, the World Bank and the World Trade Organisation have continued to advance the economic health of corporations at the expense of global health.

The protection of intellectual property (through trade agreements such as the

Trade Related aspects of Intellectual Property Rights, TRIPS) and unfair trading practices (through the General Agreement on Trade in Services, GATS) have caused enormous damage to people's health.

The tobacco industry offers a clear example: Tobacco kills, yet transnational companies continue to target youth and marginalized communities with their tobacco marketing strategies.

The epidemic of privatizations of water, electricity, education and health care, imposed by Structural Adjustment Packages (SAPs), has limited access to or removed the foundation upon which public health is built.

Public-private partnerships, as promoted by World Bank, Global Funds and International health agencies including WHO, have removed responsibility for health from the public sector, essentially privatizing health and treating it as a commodity rather than a human right. User fees have further decreased people's access to health care services.

This Declaration;

Calls for Action by People's Health Movement and Civil Society to;

- Pressure the World Bank and the International Monetary Fund to acknowledge their culpability in the current health care crisis, especially the damage caused by Structural Adjustment Programs;

¹ Argentina, Australia, Bangladesh, Belgium, Brazil, Cambodia, Cameroon, Canada, Costa Rica, Cuba, Denmark, Ecuador, Egypt, France, Germany, Guatemala, Hong Kong, India, Iran, Italy, Kenya, Korea, Lebanon, Malaysia, Mauritius, Netherlands, Nicaragua, Nigeria, Norway, Pakistan, Palestine, Peru, Philippines, South Africa, Sri Lanka, Sweden, Switzerland, Tanzania, Thailand, USA, UK, Vietnam, Zambia, Zimbabwe.



- Build the Campaign “No To Intellectual Property Rights” in our traditional systems of medicine and our seeds, to resist the efforts of the WTO and translational corporations to patent, own and trade in them;
- Demand the representation and active participation of people's organisations, health workers, and farmers in policy-making processes related to Access to Health
- Expose, shame and stop government officials, academic institutions, and civil society organisations from accepting money from the tobacco and other industries which undermine public interest initiatives internationally and nationally.

Calls for Action by Governments

- Regulate the entry and behaviour of the corporate sector in the social services such as health, education, transportation, etc., and ensure that public health concerns always take precedence over trade agreements and corporate profit;
- Resist “TRIPS-plus” through bilateral or regional trade agreements driven by the United States government and the institutions it controls;
- Ensure negotiations on “Free Trade” treaties and the like are transparent and democratic and not conducted behind closed doors;
- Resist pressure to privatise health essential industries (health care, electricity, water and education) and renationalise these industries;
- Sign, ratify and implement the Framework Convention on Tobacco Control (FCTC);

End War and Occupation

Since 2000, war, occupation and militarism have become ever more devastating threats to people's health. The violent imposition of imperial will has led to death, injury, and social and environmental destruction for untold numbers of people.

Actions in support of international law and pro-health and against the war in Iraq; the occupation of Iraq and Palestine; the construction of the Wall in Palestine are urgently needed

This Declaration;

Calls for Action by People's Health Movement and Civil Society to;

Strengthen the international anti-war movement through:

- Building the global campaign: “No to War, No to WTO, Fight for People's Health”;
- Monitoring the impact of war, occupation, and militarization through a global “Occupation Watch”;
- Targeting corporations which benefit from the war in Iraq, invasions and military occupations and those that enrich themselves (e.g. arms industry, pharmaceutical and food companies) by fostering ill-health through a “Boycott Bush” campaign;
- Establish peace initiatives at various levels based on justice and equality.

Calls for Action by Governments

- Refuse to take part in unjust and imperialist wars and occupations
- Work for world peace as a key determinant of health.

Implement Comprehensive and Sustainable Primary Health Care

Since 2000, the Global Fund and other international health programmes of WHO, UNICEF and World Bank have continued to promote selective and vertical health programs which corrupt and weaken Comprehensive Primary Health Care as defined in the WHO Alma Ata Declaration.

Health professionals educated in the developing world and migrating to the developed world represent a transfer of billions of dollars from South to North. This unrequited training investment further burdens health

systems already suffering from a precarious lack of human resources. The “brain drain” flows not only from developing to developed countries, but also from the public to the private sector.

Traditional and alternative systems of medicine are vibrant parts of Comprehensive Primary Health Care. Traditional Birth Attendants provide the first and often the only access to reproductive health in many areas of the world. These knowledge and traditions should be validated and their skills reinforced through continuing education, and support to the revitalization of local health traditions.

New areas, relevant to Primary Health Care, not adequately addressed in the Alma Ata Declaration need to be promoted in an integrated way. These include gender, environment, disability, mental health and traditional systems of health.

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This Declaration;

Calls for Action by People's Health Movement and Civil Society to;

- Demand that universities and other training institutions incorporate Comprehensive Primary Health Care into the curriculum for all health professionals updated to address gender, environment, disability, mental health, traditional systems and other issues ;
- Lobby for widespread adoption of Community Health Workers and Traditional Birth Attendants as integral members of multi-disciplinary Primary Health Care teams.

Calls for Action by Governments

- Develop national policies on traditional and alternative medical systems and include them in national health programmes;
- Involve marginalised sectors in decision-making regarding policies that affect them;
- Strengthen health systems in the context of access, quality and equity;
- Establish Comprehensive Primary Health Care services based on the principles and strategies of Alma Ata outlined in this declaration and related to local needs and updated to address gender, environment, disability, mental health, traditional systems and other issues.

WHO has recently become stronger in its technical support to HIV/AIDS and has made an official commitment to pursue its 3 X 5 goal (3 million persons with AIDS receiving Anti-retroviral Treatment (ARV) treatment by 2005) through strengthened health systems.

PHM is concerned that the 3 X 5 initiative focuses on treatment alone, ignoring the complexity of the epidemic.

Calls for Action by WHO

To reaffirm the principles of Alma Ata and ensure that comprehensive approaches that focus on primary health care and strengthen health systems are the basis of all WHO global and regional strategies.

Confront the HIV/AIDS epidemic

The HIV/AIDS epidemic has continued to worsen since 2000, especially in Africa and increasingly in Asia and elsewhere. Spreading along migration routes related to globalization and to social and economic distress due to war, global trade and economic policies, HIV/AIDS is now associated with the resurgence of other communicable diseases of poverty, such as tuberculosis.

Access to ARV treatment has increased the life expectancy and quality of life of those who can afford it. The majority of AIDS patients being impoverished are denied access to treatment in violation of the principles of the international covenant on social, economic and cultural rights. Children

orphaned by HIV/AIDS and women who are more vulnerable take a heavy toll.

WHO has recently become stronger in its technical support to HIV/AIDS and has made an official commitment to pursue its 3 X 5 goal (3 million persons with AIDS receiving Anti-retroviral Treatment (ARV) treatment by 2005) through strengthened health systems. Yet addressing the HIV/AIDS epidemic requires contextual solutions. We are however, particularly concerned that;

- The 3 x 5 initiative focuses on treatment alone, ignoring the complexity of the epidemic;
- High drug costs can lead to long-term dependency on donors;

- There is inadequate involvement of persons living with and affected by HIV/AIDS and civil society in planning, implementation and evaluation

- There is inadequate budgetary and related commitments on improving health systems, particularly Primary health Care to provide drugs and general health services and information in the long term.

- There is inadequate attention to life skill education, women's health empowerment and utilization of traditional systems of medicine.

While endorsing concern about the HIV/AIDS epidemic, the need for Primary Health Care oriented and Health Systems strengthening approaches to other communicable and non-communicable diseases in an integrated way is urgently required.

This Declaration;

Calls for Action by People's Health Movement and Civil Society to;

- Continue campaigns for the rights of people in poor countries to receive ARV treatment delivered through comprehensive PHC services.
- Facilitate Public Interest Litigations to oppose changes in Patent laws that is expected to escalate the ART prices.
- Make the links between the spread of HIV/AIDS and the underlying societal determinants such as poverty, war, displacement and participate in efforts to redress these injustices



Calls for Action by Governments

- Develop a comprehensive Primary Health Care oriented and health systems' strengthening approach to address the HIV/AIDS epidemic through interventions, including:
 - Peer education that includes sexual and reproductive health and rights information;
 - Oppose stigma and promote respect of and care for people living with HIV/AIDS;
 - Increased access to basic services by people living with HIV/AIDS;
 - Immediate availability of ARV drugs;
 - Support those affected by the epidemic through empowerment.

Calls to WHO

- To evolve a comprehensive approach emphasizing Primary Health care and health systems' strengthening approaches including preventive information and services and ARV treatment;
- Work towards reduction of high drug costs;
- Enhance involvement of people, affected communities and civil society in its planning and initiatives through proactive dialogue.

Reverse Environmental Destruction

The People's Charter for Health recognized that environment, livelihood, and people's health are interconnected and environmental degradation is a major threat to global health. Since 2000, continuing environmental destruction has had a highly negative impact on health.

Rivers around the world, like the Abra in the Philippines and the Narmada in India, are in danger of being destroyed, as are the lives and health of the people and communities who depend on these rivers.

Toxins in pesticides, fertilizers, defoliants (such as Agent Orange and those of the "War on Drugs" of Plan Colombia), waste from US Military Bases (such as those in the Philippines), dust from exploded depleted uranium ordinance (such as that used in Iraq, Puerto Rico), and medical and nuclear waste as well as from mining run-off and exploration for petroleum; are all poisoning our environment and represent a critical hazard to health.

This Declaration;

Calls for Action by People's Health Movement and Civil Society to;

- Monitor environmental damage caused by unsustainable development strategies with specific focus on pesticides, industrial and military toxic wastes, etc.;
- Link PHM with other organisations working for environmental justice at the grassroots,
- national and international levels. Join them in their struggles and invite them to join in our struggle for the People's Health.

Calls for Action by Governments

- Pass legislation to ensure governments can hold corporations accountable for environmental damages.

Women's right to health, including sexual and reproductive health, is violated not only by current socio-economic and political structures but also by religious and cultural fundamentalism. Trafficking of women and girls is a major public health problem, little addressed by governments where the trafficking is most rampant

End Discrimination in the Right to Health

The People's Health Charter asserted the right to health for all people. We reaffirm this by noting that the marginalized groups listed below suffer particular and on-going health problems requiring urgent attention:

- Around the world, many **women** lack access to basic health care, endangering them and their families. Women's right to health, including sexual and reproductive health, is violated not only by current socio-economic and political structures but also by religious and cultural fundamentalism. Population control policies violated human rights, including the use of disincentives and such reprehensible practices as forced sterilization of women. Newer contraceptives and reproductive technologies often ignore hazards to women's health and other ethical and moral issues;
- **Trafficking of women and girls** is a major public health problem, little addressed by governments where the trafficking is most rampant;
- Sex-selective abortion is a misuse of technology that discriminates against the **girl child**;
- The rights of **sexual minorities and sex workers**, including access to health care, must be respected;
- The health and human rights of **persons with mental disorders** are currently ignored or inadequately addressed throughout the world. There is an urgent need to provide effective community based programs for persons with mental illnesses.



- The unjust social systems like caste in India and ethnic discrimination in other parts of the world have created a health apartheid and human rights reality for the **socially marginalised**;
- **Indigenous people** in developed and developing countries suffer health problems at a higher rate than the general population of the country in which they reside. As they are forced to follow the hegemonic cultural and development paradigms, they are being deprived of traditional knowledge and traditional systems of medicine and access to basic resources;
- The health and other human rights of **persons with disabilities** are currently ignored or inadequately addressed throughout the world;
- **Migrant workers** living and working in the developed and developing world suffer poorer health than the general population surrounding them. Their basic human rights are denied through lack of access to health, education, housing, etc.;
- **Children living in difficult circumstances**, such as street children, AIDS orphans, children of war, etc. face increasing discrimination. Corporate-led globalization only increases the poverty in which they live and robs them of a dignified future.

This Declaration;

Calls for Action by People's health Movement and Civil Society

- Make concerted efforts to incorporate all the above marginalized populations, the "unheard and unseen", into their networks and facilitate their access to and influence in mainstream discourse.
- Ensure gender equity within the movement and within their own networks and communities

Calls for Action by Governments

- Make concerted efforts to incorporate the needs of marginalized populations, the "unheard and unseen", in health and development strategies and social policies in a Right's context.
- Ensure availability of disaggregated data on health status and access to health services for different groups (age, sex, region, ethnicity etc.,) in the community to make discrimination to the right to health more transparent and enable actions to be taken.

IN CONCLUSION

We, the members of the People's Health Movement and the participants of the III International Health Forum for the Defense of People's Health commit ourselves to promoting the People's Charter for Health 2000 and the concerns and calls for action of the Mumbai Declaration 2004.

- **We believe that an Another World is Possible;**
- **A Healthy World is Possible;**
- **Health for All Now! is Possible;**

Join us – Endorse the People's Charter for Health 2000 – Endorse the Mumbai Declaration 2004

- **SIGN ON AND PROMOTE** the **People's Charter for Health** (visit <http://www.phmovement.org/charter/index.html>)
- **SUPPORT** the **Million Signature Campaign** demanding Health for All, Now! (visit www.TheMillionSignatureCampaign.org)
- **PROMOTE** the **Mumbai Declaration**



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