

The contribution of Civil Society Engagement to the achievement of Health for All (CSE4HFA)

Research undertaken by People's Health Movement with the support of
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South Africa, India, Democratic Republic of Congo, Italy, Brazil and
Colombia and global

In a nutshell

- Between 2014-2018 People's Health Movement (PHM) undertook a large multi-centre study exploring 'civil society engagement in the struggle for health for all' (code for 'health activism')
- The study was funded by IDRC, Canada
- Over four years, 130 researchers in 10 countries produced 50 research reports
- In this presentation
 - Brief overview of the research (problem, assumptions, research strategy)
 - Focus on the findings in relation to the five 'domains' of activist practice
 - movement building
 - campaigning and advocacy
 - capacity building
 - knowledge generation
 - critical policy engagement

Research problem: Global health crisis

- ‘Health for All’ means
 - access to decent health care for all
 - living conditions (in which we grow, learn, work, play, and grow old) which enable good health for all
- There have been some measured improvements
 - technological developments and trickle down access;
 - economic development in China; but
- In absolute terms Health for All is as far away now as it was in 1978 and the health gap is widening

The unfulfilled promise of Health for All

- Origins of HFA
 - follow up of Alma-Ata
 - link to the NIEO
- Evolution of health policy at the global level
 - the optimism of PHC and the NIEO
 - the debt crisis and structural adjustment
 - 'Investing in health' 1993
 - Uruguay Round (1986-94) leading to WTO
 - 2001 Doha ministerial
 - WHO's Macroeconomics and Health report 2001
 - MDGs and the GPPPs
 - SDGs
- What has been achieved?
 - mortality: general improvement but widening gap
 - immunisation
 - water and sanitation
 - malaria: decline has stalled
 - nutrition: stunting remains prevalent in SEA, EMR and Africa

Globalisation as context

- Health risks (barriers to Health for All) are always local but are increasingly shaped by global structures (imperial powers with global reach, transnational corporations, trade and investment agreements)
- Global governance is largely controlled by a small political, bureaucratic and corporate elite, and that control exercised *in the interests* of that elite
- Achieving Health for All will require a *democratisation* of global governance
- Presently the global elite ('transnational capitalist class' - coherent, self-conscious, well networked) confronts a dispersed, incoherent and poorly networked assemblage of national working classes, middle classes and marginalised classes – divided by language, ethnicity, nationality, religion, gender and class
- Democratisation of global governance will require a *convergence* of these disparate constituencies: stronger solidarity, richer networking, collaborative action
- The global Health for All movement reflects and contributes this convergence: listening across difference, expressing solidarity across boundaries, collaborating in action

Research strategy

- Five domains of activist practice provide the main themes of this research
 - Movement building and networking
 - Campaigning and advocacy
 - Capacity building
 - Knowledge generation and dissemination
 - Critical policy engagement
- Overlapping, interdependent, synergistic
- Participatory action research
 - stage 1 – describe and evaluate one or more ‘episode/s’ of social movement practice
 - reflect and discuss (locally and in regional workshops)
 - stage 2 – embark on a new engagement, drawing from such reflection and discussion
 - document, reflect, discuss **and learn** from the new engagement

Data collection

- Six PHM country circles recruited as research partners
 - researching 'episodes' of civil society engagement in accordance with the logic of participatory action research
 - adapting broad research framework to local priorities
 - recognising research as movement building and capacity building
- Global studies
 - literature review of social movements
 - historical review of the global 'HFA movement'
 - evaluation of Global Health Watch
 - evaluation of International People's Health University
 - evaluation of WHO Watch
 - analysis of personal narratives from long standing activists within PHM
- Specific one-off projects
 - review of sequence of IPHU's in El Salvador
 - review of Ghana experience in policy dialogue around global governance

Movement building

- Attend to all levels of the movement: individuals, relationships, communities, organisations and networks
- Understand the pathways to activism
- Community building, including mutualism, is part of movement building (community based service programs or demands for state action)
- Collaboration with the state: a matter of judgement
- Social movements have deep roots; know your history
- Leadership is necessary but so is accountability
- Build constructive links between the HFA movement and broader political movements
- Convergence (solidarity, networking, collaboration) is key element of movement building in era of globalisation

Campaigning and advocacy

- Campaign strategies bring together theories of change, forms of action and response to contingency
 - strategy is contingent
 - theories of change inform strategy
 - many different forms of action
 - planning for action: various considerations
 - resources (people, information, money)
- Balance policy advocacy with structural critique ('critical policy engagement')
 - policy analysis: packaging demands which are implementable
 - addressing the configurations of power
 - addressing the immediate issues in ways which will also contribute to structural change
- Networking for campaigning is empowering but requires investment and compromise
 - networking can extend the reach and impact of the campaign
 - but networking can be very challenging
 - clear objectives are important but they are not always self-evident, can change over time and may be subject to disagreement among campaign partners

Capacity building

- Beyond individuals, think relationships, think organization, think culture
- Think about capacity building in relation to pathways to activism
- Build on informal learning opportunities as well as organizing formally structured training programs
- Link curriculum planning to practice opportunities
- Bringing 'body knowledge' into discourse (through popular education and 'systematization of experience') makes such knowledge available for sharing and building upon
- Avoid expert domination: value trust, reciprocity and dignity

Knowledge generation, access and use

- New information flows can be empowering, including:
 - scientific, technical and legal knowledges, and
 - indigenous knowledges, such as Central American indigenous cosmovision, provide resources for new ways of understanding ourselves in the world.
- Producing the knowledges that the activists need is a core social movement strategy, including:
 - academic research,
 - research synthesis,
 - learning from activist practice,
 - bringing lived experience into discourse, and
 - re-appropriating history, culture, identity.
- Knowledge sharing is a core social movement strategy, exemplified by
 - Global Health Watch, but attention is needed to
 - media, methods and language, and awareness that
- Knowledge sharing is embedded in relations of solidarity and relations of power

Critical policy engagement

- Critical policy engagement
 - balancing policy dialogue with structural critique
- Critical policy engagement at the national level deals with
 - national issues *and*
 - issues which have international ramifications
- Critical policy engagement at the global level
 - linked to complementary advocacy at the national level

Broader conclusions

- The Health for All movement is making a difference;
 - changing political environments means that the efforts of health activists vary between resisting backslide and achieving positive net improvements
 - attribution of influence among different agents is uncertain
 - the movement could be more effective; we can learn from our experience
- Analysis and strategy must attend to all ‘fields of practice’:
 - ethical and cultural work for ourselves
 - understanding and solidarity with our constituencies
 - political economy in relation to the structures
- ‘Convergence’ (solidarity, networking, collaboration) is a key element of movement building in the era of globalisation:
 - listening to the lived experience of ‘the other’
 - developing shared analyses and synergistic strategies
 - overcoming divisive preconceptions (racism, sexism, xenophobia, Trumpism)
- The ‘macro micro principle’ (addressing the local in ways that contribute to redressing the broader, longer term, structural forces) is difficult (levers, agency, understanding)
- Political movements also contribute to historical change; need to have regard to the relationships between social and political movements