Chapter 10

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Building a Women’s Health Movement

Organizing for dependable and appropriate health care begins when women join together to identify changes they need in their communities and in their health services. In the process of fighting for these changes, women get to know each other and become stronger as they share ideas and abilities. They learn how to seek out allies who are willing to support their goals and help with time, resources, and skills the women may lack. Through planning, carrying out, and evaluating their struggles, women gain experience in strategizing to win short- and long-term goals. And women who have never before participated in community decision-making often become leaders.

Sometimes organizers are neighbors or members of a community group. Sympathetic health workers may also initiate change and invite community organizers to be involved. Sometimes local authorities will support community proposals, and other times there will be conflict. The focus might be on changing local conditions or customs, or it might be on challenging laws or government policies. Whatever the goals, when women work together for better health services in their community, they help to build the movement for women’s health.
Kamla, Ayesha and Leela are neighbors and mothers in Ahmedabad, India, who depend on the money they earn from occasional piece work to support their families. They are home-based workers, have no fixed employer, and have to pay for their own supplies. Cooking together at night, they realized they felt exhausted and in pain from their work. Ayesha, a garment worker, had constant back pain, while Kamla and Leela had trouble breathing after rolling incense sticks all day long. They decided to go to the clinic together. But the nurse and others at the health center did not offer the women any help for their problems. Although they were discouraged, the 3 women talked with other home-based workers and discovered they all had similar problems. Realizing they were not alone, the women agreed to work together to improve their situation.

The women took their concerns to the state labor office, but no one there would listen. They decided to seek help from the Self-Employed Women’s Association (SEWA), a union led by poor working women, to organize for their rights. SEWA organizers helped them develop a plan and a list of demands. With an even larger group of women, they confidently returned to the state labor office. Facing the well-organized women carrying their tools in hand, the labor secretary was pressured to support their struggle. He helped the group organize a conference on occupational health, which brought together leaders in labor and public health services. Working women led the discussions, and the conference helped them build valuable connections with experts and other activists, most of whom were men. Working together, they designed new and safer tools for their jobs, and other ways to improve working conditions.
Armed with new information and the support of their new allies, the women returned to the local health center and persuaded the health workers to help them. Kamla, Ayesha, and Leela took the health workers to visit women doing piece work at home to show how harmful the work was. After seeing the women’s working conditions, the health workers agreed to help organize for better occupational health policies and for better services in their own clinic.

The women realized they faced another obstacle. Although they had won better health care, they could not afford the medicines they needed. Through SEWA, and building on the example of other groups, they discovered that if each woman contributed a small amount of her savings, they could build a cooperative to provide low-cost, generic medicines. After some planning, the women brought their proposal to the Cooperative Registrar in their state. But the official turned them down!

Even though they were not allowed to register as a cooperative, the women continued to write letters and speak out in public, and more and more women joined their efforts. The SEWA members worked together to learn about nutrition, reproductive health, tuberculosis, and other common health concerns. Friendly experts helped them grow plants to make more affordable traditional medicines.

After 2 years, the registrar granted the women a permit for their cooperative. Since then, they have been recognized as an outstanding cooperative with their own low-cost community pharmacy. The cooperative also produces some traditional medicines, and a team monitors local health services to ensure they meet the needs of women and their families. Over half of the 1,400 members serve as community health workers, educators, and midwives. This cooperative, created and run by poor working women, has improved the health of countless families in the community, and strengthened the economic and political power of women.
Setting goals for organizing

When you begin organizing, it is important that your group set clear goals. You need to be able to tell others what you want to change and why the change is important. You may modify your goals or set new ones as situations change and you make gains along the way. The SEWA women’s first goal was to get the state labor authorities to recognize the problems they faced as working women. After succeeding in reaching this goal, they set a new goal to make medicine and health care more accessible. Over time, as they gain experience and power, and develop more relationships with other groups, they may set even larger goals.

Imagine the health services we want

To successfully establish goals, we need to envision as clearly as possible the changes we seek to make happen. But it can be hard for everyone, health care workers and community members, to imagine health services that are different from the way things are and how they have been for a long time. Here are some ideas and activities that can help a group create specific proposals for changes to health services.
You can use this activity to start a discussion to imagine what improved health services for women might be like. You may want to repeat this activity with different groups in the community, such as youth organizations, women’s groups, civic leaders, or health workers, and then share everyone’s ideas at a larger meeting.

### Activity: What would women’s ideal health services be like?

1. Ask the group to list the different kinds of women in the community who might have the least access to health services, or who might find the services inappropriate or unwelcoming. For example: young women, ethnic minorities, women with disabilities, women who speak other languages, or sex workers.

2. Ask the group to imagine how health services could be provided to all women, including those who may have the most difficulties now. How would health services be accessible, appropriate, and acceptable?

   Here are some other questions you might ask to help the group to imagine improved health services:
   - What kinds of support groups or classes would be valuable?
   - What kind of attitudes and information should health providers have?
   - What kinds of health tests and screening should be offered?
   - How could the health center provide services to women who live far away and cannot afford transportation?
   - How could health services improve care for women with long-term illnesses?

3. Write everyone’s ideas on a large piece of paper or a blackboard so the whole group can see them.

   Continue the discussion by asking who would be involved in these ideal health services. Ask questions such as: How could women of all ages have a voice and a way to participate in developing these services? How could men be involved in efforts to improve health services for women?

   To conclude, review all the ideas about making services more accessible, appropriate, and acceptable.

4. If there is time, ask people to work in pairs or small groups to create a picture, mural, collage of magazine and newspaper images, or a song or poem that reflects a vision of what health services would be like. This art can be shared with others in the community to promote discussion about improving health services for all.
A brainstorming activity such as the one on page 279, in which people imagine their ideal health services, is great for encouraging people to think big. After gathering participants’ ideas, the next step is choosing which ideas to work on first. These will become your goals. Start by grouping together ideas that are similar but expressed differently. For example, “We need midwives who speak our language,” and “We need more translators,” are very similar demands. You might also group ideas according to whether they are short- or long-term goals. See Make an action plan (page 26). Once all the ideas are clearly arranged on a large sheet of paper or a blackboard, you could try the activity, Voting with dots (page 225). That activity can help you sift through the ideas to find the ones people want to work on most.

**Build leadership and long-term strength**

Thinking about *how* you want to achieve your goals is almost as important as thinking about the goals themselves. How do you want your group to emerge at the end of the struggle? What do you hope to learn along the way? In what ways does your group aim to get stronger and more powerful in the process of fighting for its goals?

For example, when the 3 women in Ahmedabad started out, their goal was to get the health center to provide care for their work-related health problems. To achieve this goal, they found they needed to develop an alliance with a group that was already organized, they needed to get help from experts and activists, they needed to be able to confront those in power, and they needed to think of creative solutions to old problems (such as the high price of medicines).
Even if they had failed to get the health center to pay attention to them, they still would have made many gains. They got to know some health and safety experts, and they learned about workplace-related health issues. This enabled them to make some improvements in their working conditions. In the process, the women developed leadership skills and felt empowered to continue their struggle for better health care. As a result, they could see themselves as members of the community with a voice in decisions affecting their lives. These are huge achievements.

But what if the women had succeeded without any struggle at all? Imagine the 3 women walking into the health center with their requests, and having their problems solved right away. That would have been a major gain for the community, and the women would have been satisfied to achieve their short-term goal. But they would not have gained the valuable experience of building leadership, expertise, and power as a group — and these elements are key to winning long-term change.

If you are getting ready to campaign for a short-term goal to improve health services in your community, also consider goals that will strengthen your group’s organizing and leadership skills. Later, when you evaluate your strategy, in addition to judging how well you achieved your short-term goals, look at the ways you built your organization and gained power in the process. It is possible to lose a battle but still come out winning.

What are some steps we can take to help us achieve our long term goals?

We have many supporters, but they could be doing more. Maybe they can help us get the word out.

Long-term goals
- Develop new leaders, facilitators, and speakers
- Use our alliances with people and organizations to influence institutions
- Recruit more supporters
- Spread our message
Developing your strategy for change

Once you have set organizing goals, the next steps are figuring out who will be affected by what happens (sometimes called “stakeholders”) and deciding what actions you need to take to achieve your goals.

Know your opponents, look for your allies

In Kamla, Ayesha, and Leela’s story, the 3 women hoped the health workers would be their allies, but were disappointed when the health workers ignored their problems. Even if your goals are not controversial, people may oppose your ideas. For example, if you are part of a group that is working to open a youth clinic in a school, people might not support you because they:

- feel left out of the process. In this example, some parents and teachers may want to be involved but feel their opinions are not being heard.
- doubt the change that you propose is needed. For example, some doctors may not believe that youth need special health services, either because they don’t have the facts or because they don’t pay attention to anyone else’s point of view.
- feel that your goals conflict with local traditions and beliefs, or religious and moral values. For example, some parents and teachers may feel that making contraceptives available to young women will encourage them to be sexually active.
- feel that your goals threaten their livelihood, property, or social standing. For example, the owners of a pharmacy may oppose new health services if they believe they will lose business if young people can get free or low-cost medicines.

Money doesn’t grow on trees! Who do they think is going to pay for it?

I don’t know why they need their own special clinic when there is one in the city.

I hear they want to give away free condoms. I don’t want my daughter going there!
On the other hand, many people will support you because they feel strengthened and energized by your efforts. Your organizing could bring together many new allies who agree with your goals, as well as others who go along with it for practical reasons. **People may support you because they:**

- directly benefit from your goals. For example, students will be excited by the idea of a youth clinic with services they need and confidential care. They will support organizing efforts and will be happy that someone is stepping forward with confidence to make change.
- want to be a part of making change that matters. Health activists already involved in efforts to improve access to health care will support a youth clinic, as will others in the community who care about youth. They want to make the community and world a better place, and you are creating an opportunity for them to help.
- see the relationship between your goal and their own goals — even if the goals are different. For example, overworked nurses at the health center might see a school clinic as a way to ease their workload as well as improve everyone’s health. Supporting your organizing can help increase community awareness of the problems they face.
- see it could work in their favor. Sometimes a supporter may not even believe in your goal but sees how fighting on your behalf will bring other benefits. For example, the ministry of education staff may not agree with the need for a school-based clinic, but after seeing that health professionals, teachers, and parents support the proposal, they will support it to avoid controversy and gain a positive, problem-solving reputation.

A power map (see next page) can help you make a strategy by identifying your allies and your opponents, as well as people who are neutral or undecided.
Activity

Make a power map

A power map can be used to strategize, to identify important allies, and to make a plan to work towards a specific goal. This example shows how a youth group working to improve health services for young people could use a power map.

This activity can be done over the course of several meetings so the group can collect information to bring back and add to the map.

1. Write the change you seek in the middle of a large piece of paper, for example, “Create school-based youth clinic.” Draw a circle around it.

2. Identify the institutions with power to influence this change and write these around the circle. For example “School administration,” “Parents’ Association,” or “Ministry of Education.” Draw a second ring around them.

3. Think of a few people who are associated with these institutions and write down their names or titles — such as “School principal,” “Parent leader,” or “Ministry of Education delegate” — outside the circle. These are primary targets for your organizing work.

4. Discuss whether these people support (+), oppose (-), or are undecided (?) about the change you seek. Put a +, -, or ? symbol next to their names or titles. Draw a third circle around these.

5. Think about all the people who can influence the individuals who are opposed or are undecided, and write their names or positions in a new circle. For example, the youth group might write “Local physician,” “Religious leaders,” or “Ministry of Health delegate.” These are secondary targets for your organizing work. Draw lines connecting these people to others they can influence.

The clinic nurses don’t have enough time to see everyone who comes in every day. They might help us show the Ministry of Education that students need more resources.
Developing your strategy for change 285

Make a power map (continued)

6 Discuss whether these people are supportive (+), opposed (-), or undecided (?), and write symbols next to their names.

7 Carefully review the map of relationships. Ask the group to consider questions such as: Where are the allies (the people who are supportive)? How close are they to the institutions with power to influence the change we want to make? Where are the best opportunities for influencing key people in those institutions? It is also helpful to consider the benefits and risks of supporting your efforts for the different people and institutions on the power map. Understanding why they might oppose your efforts will help you develop a strategy to address challenges you might face.

8 With the information you have collected, make a plan for gaining the support of allies who can help you influence the individuals and institutions you need on your side in order to achieve your goal.

Repeating the power map activity every few months is a good way to continue evaluating whether the strategy is working and to adjust your plans to include new allies.
Different strategies for organizing

When Kamla, Ayesha, and Leela started talking with each other about their health problems, they were taking the most important first step in organizing. They were breaking out of their isolation and also building a shared understanding of a problem they faced. Next, they confronted people at the health center and in the labor office — people who had the power to help them change their working conditions and their access to health services. As they worked with SEWA, they discovered various strategies they could use to achieve their goal.

**Build consensus.** If politicians and health workers are cooperative and receptive, a group might try to build consensus to make changes that everyone can agree on without conflict. This tends to be easier than other approaches, but it only works if everyone already agrees about what changes are necessary. Kamla, Ayesha, and Leela tried to build consensus with the health workers at the clinic and also with the state labor office, but they found they could not. Instead, they had to pressure them into listening — also known as “taking power.”

**Take power.** Sometimes a group may need to take some power away from those who control decisions. They do this by using collective strength and public action to force those in power to give in. How does this work? Why would people in power give up some or all of their control over what happens? Often, those in power will shift their position, not because they have been persuaded by a moral argument, but because public pressure has left them no other choice. They realize that the cost to them of not giving in is greater than the cost of giving in. When Kamla, Ayesha, and Leela went to the state labor office, officials there lost nothing by turning them away. But when a large group of well-organized women showed up and made it clear they would not just go away, the labor secretary gave up some of his power. He accepted their demand, and the women gained power.

When a shoe factory closed in Honduras in 2010, the employees, who were mostly women, were fired without being paid the $2 million dollars collectively owed them. After a year of protest by the workers and their allies abroad, the owners paid the money owed, and provided a year of health insurance.
Make power. Even when excellent organizing manages to build consensus or take power, there are some situations where groups need to create a whole new structure outside of official channels. Although the SEWA women had forced the labor secretary to support their struggle, and although the health workers were now paying attention to work-related injuries and health issues, poor women in Ahmedabad still could not afford medicine. As organizers, they needed a strategy. They could try to build consensus with pharmaceutical companies by asking them to lower their prices. They could try to take power from those companies by forcing them to lower their prices. Or they could make power by creating an entirely different structure — a cooperative that could buy cheaper medicines in bulk and distribute them fairly.

Organizing to challenge public opinion about health services (or anything else) may cause a backlash — an organized campaign by your opponents to destroy your group and your goals. By building a new consensus, by aiming to take power from individuals and institutions, or by figuring out ways to make new power, you may face resistance, stigma, personal risks, or even physical threats. This can be very stressful and exhausting for the group and for each person involved. Often, however, people become even more committed, more united, and more creative in response.

Even if the struggle is not so difficult, people change as they get involved in organizing. They develop new relationships, new insights into their own power, and new ideas about what is possible. As you win (and sometimes lose) the various battles you choose to engage in, you also help to create the conditions for more and deeper change.

Creating a communication strategy

Clear communication with community members, allies, and decision-makers about your ideas, plans, and goals is essential for building support and influencing public opinion.

Know your audience

To inform, persuade, and inspire people to support you, you first need to understand what they already know, think, and feel about the issue and why. The more you are able to find out, the better prepared you will be to address their questions and concerns.

It is helpful to think about all of the different audiences or groups you are trying to persuade. Who supports your ideas already? Who is undecided? Who is opposed? This can help you in your advocacy efforts as you prepare arguments to mobilize supporters, and to change the opinions of others.
An opinion map is helpful for thinking about different audiences and how you can influence those who are undecided, those who oppose your ideas, and those who agree but could be more active in their support. This activity also helps a group develop specific messages for each audience, and plan the next steps the group will take.

**Activity**

### Make an opinion map

**To prepare:** Have the group review a power map (page 284) they have already made on the issue. Prepare a large sheet of paper with columns left to right for “Active Allies,” “Allies,” “Undecided,” “Opponents,” and “Active Opponents.”

1. Look at the institutions or groups on the power map and discuss the opinion of each on this issue, that is, how strongly they support or oppose your goal. Write the name of each group in the column that matches their opinion (for example, “Allies”) and any information you have about their concerns.

2. Ask the group to discuss what message about your issue would be most effective for influencing that specific group and who might help you communicate it.

3. To conclude, ask the group to identify action steps for developing a communications strategy for each group on the opinion map. For example, “more research to make convincing arguments,” or “find allies to influence more people.”

Here is an example of an opinion map, based on the same example of a school-based health clinic from the power map described on page 284:

<table>
<thead>
<tr>
<th>Support</th>
<th>Oppose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student government loves slogan: Your body, your health, your clinic</td>
<td>Parents</td>
</tr>
<tr>
<td>Supports school clinic to ease workload and improve health</td>
<td>Fear that access to birth control will make youth sexually active</td>
</tr>
<tr>
<td>TO DO: Distribute flyers with slogan all over school to build support among students.</td>
<td>TO DO: Find studies showing opposite is true. Write letters to the editor. Develop flyer for handing out in public.</td>
</tr>
<tr>
<td>Community health center</td>
<td></td>
</tr>
<tr>
<td>Ministry of Education</td>
<td></td>
</tr>
<tr>
<td>Trying to avoid controversy</td>
<td></td>
</tr>
<tr>
<td>Oppose clinic because of cost</td>
<td></td>
</tr>
<tr>
<td>TO DO: Delegate students and health workers to make case for school clinic.</td>
<td>TO DO: Make a sample budget (with help of local clinic) to show it is affordable.</td>
</tr>
<tr>
<td>TO DO: Enlist nurses to convince others of health benefits of school clinic.</td>
<td></td>
</tr>
</tbody>
</table>
Build your message

Whether you are speaking at a rally, making a presentation, talking with a reporter, writing a flyer, or posting on a website, prepare your message carefully. You may have to make different messages for different groups of people. For each message, consider two things: what are the one or two ideas you want your audience to remember, and how will sending this message strengthen your cause?

Messages to your allies should be calls to action that give simple, immediate, and specific ways to be involved. The best messages suggest multiple actions, such as signing a petition, sharing information via social media, or attending events. Keep your allies updated and engaged!

Messages to neutral parties, who have not made up their minds or do not feel strongly, require information that will help enlist them as allies. While this audience may already know about the issue, your job is to help them gain a new perspective and care more. What facts and figures might appeal to their values? Using personal stories and testimonies is particularly effective.

To convince people in Mexico City about the problem of women dying from unsafe abortion, we have a doctor speak because people will listen to a doctor. The doctor uses statistics, and then tells a real story about a young woman who died. People can imagine a sister or daughter facing the same situation as this young woman.

Messages to opponents respond to their criticisms. Anticipate their arguments and plan your responses. One effective way to respond to arguments or criticism is to refocus or reframe the discussion.

*Immigrants cost too much! With so many visits to the emergency room and no health insurance, the government ends up paying the emergency bills.*

*If we had preventive care, we would all be healthier, and not need emergency care!*

Your opponent might frame the issue by blaming or shaming those in need of health services.

You could reframe the message by showing how health care for all would help everyone.
Activity

Making advocacy messages that work

Use this activity to develop or improve your group’s advocacy message, and to prepare printed or written materials.

To prepare: Select several advertisements or political campaign messages from magazines, newspapers, or printed from websites. Post them on walls in different places in the room.

1. Form small groups and assign each group one of the messages. Ask the group to look carefully at the message and think about what they like about it and why it is informative, persuasive, appealing, and moving.

2. With everyone together, ask each group to share their ideas about the characteristics that made the messages work and communicate effectively. You can ask questions like these:
   - Is the message tailored to a specific audience?
   - What are the beliefs or attitudes commonly held about the issue and how does the message address those?
   - How does the message appeal to both logic and emotion so people understand and care?
   - What action does this message ask people to take?

3. Ask each small group to create a message related to your own group’s advocacy effort. (Remind them to think about who their audience is and how this message will inform, persuade, and move that audience to action.)

4. When they are ready, ask each group to share their message with the others. Then ask the large group to discuss each message, and give each other feedback.

Spread your message

Once you have decided who your target audiences are, decide where and how you will communicate your message: through mass media, such as the Internet, radio, or newspaper? By making posters? By giving performances, discussions, or speeches?

Mass media and public discussion tend to be very effective at reaching government officials, political leaders, and large audiences, while community art, posters, and performance tend to work well for local audiences who may have less access to print materials, or who usually do not participate in policy discussions.
Get media coverage. Find journalists who care about your issue. Develop an idea of the story you want them to create and how to present it. Since journalists often work on “popular” or current news, explain how your story relates to current headlines. Stay in contact with reporters and let them know how your story is developing. They may not respond at first, but if you can develop a relationship, they might write about you in the future. Most reporters only use a tiny piece of what you say, so be clear and to the point. If the conversation strays, bring it back to your main ideas. Don’t be afraid to repeat yourself! Role play keeping to your message by asking a friend to distract you with questions that are not about your message.

You can also write your own press releases, which are updates about activities your organization is doing, and send them to the media. Another option is to write letters to the editor, or you could make and distribute your own recorded talks, called “podcasts.” This is a good way to represent yourself in your own words.

Use public space. Create posters, street theater, and speeches to be shared in public. This can be a fun way of engaging your supporters and attracting new ones.

Mobilize through social media. Social media such as Facebook and Twitter can be a quick and compelling way to communicate with your allies. If you make a page for your organization, you can send updates, invitations, articles, videos, and pictures to your followers. Using social media, you can also communicate with similar groups far away to share ideas and build alliances. When working on a controversial project, consider using an anonymous profile for safety. You can do this by making a Facebook profile that does not have friends or pictures of members, but does include information on how viewers can get involved.

In the Kurdish area of Iran, a court punished a convicted abuser by making him wear a dress to publicly humiliate him. In response, women and men protested in the streets and one group, calling themselves “Kurd Men for Equality,” started a social media campaign in which they posted pictures of themselves in women’s clothing to challenge the idea that being a woman was humiliating.

Using social media to create safe zones for women

Eight of every ten Egyptian women report they face daily harassment on the street. To combat this, a group of people created the HarassMap, an interactive map where women can report where and how they have been harassed. The group uses Twitter and Facebook to collect reports and also communicate with volunteers doing community education in high-harassment neighborhoods. This outreach enables the volunteers to create “safe zones” in those areas, where women can go if they feel unsafe. The group also has a blog where they post more resources for people seeking help, including classes for self-defense.
Building a movement for the right to health

Throughout this book there are many examples of people organizing to improve the health and lives of women and girls. These efforts, on a global and local level, make up a large, diverse movement for the Right to Health for all. Thanks to many years of organizing, several international treaties now declare that women and girls have a right to the conditions they need to lead healthy lives (see pages 300 to 304). In addition to these international agreements, many countries have laws that, at least on paper, guarantee women and girls (and men and boys too) the right to health care and to the basic conditions for a healthy life.

The next few pages share some examples of strategies people from around the world have used to defend the right to health for all.

Hold governments accountable

Governments are responsible for ensuring that the rights of their citizens are respected. In many places, governments are also legally responsible for providing health care and other basic services, such as water and sanitation. Holding governments accountable for defending people’s rights and providing health care and other basic services can be a main focus of organizing.

Community health committees

In many countries, organizers have fought for and won the right to create community health committees. These committees often work with governments and health centers to decide what health projects should be funded. They may also help raise money for specific projects, such as training in health promotion. A health committee can evaluate the services a health center provides and offer feedback from the community. For example, a health committee might evaluate whether a death might have been prevented, respond to community complaints against a health center, and when needed hold the health center accountable.

A health committee should include community members who represent different experiences and opinions, especially those whose voices are not usually included in formal discussions about the way things that affect everyone in the community are done. It is important to set up a process for shared decision making among community members, health center staff, and other stakeholders to avoid struggles over who has the power to address complaints about the health services and to make decisions. One way to make sure everyone participates is to create ways for more experienced members of the committee to mentor those with less experience. Community members, including youth, need to learn how health systems and budgets work, so they can fully participate in decision making.
Disability activists design a more accessible city.

In Ekaterinburg, Russia, city officials developed a disability program to make buildings more accessible. But a group of people with disabilities realized that even though the government had been trying to help, many of the places they had changed were still hard for disabled people to use. So they formed the Freedom of Movement Society and met with city officials to give them a list of ways to make the city more accessible. The city officials allowed members of the group to join the city planning committee and had them design guidelines that architects could use to make buildings accessible.

- Braille signs
- Ramps
- Low sidewalks

Social audits

A social audit is a public evaluation of how well services, such as health care or education, are meeting the needs of the people they serve. A social audit can be a good way to make problems visible, generate media coverage, and develop demands for improvements. A social audit usually involves collecting information through interviews or surveys, and sharing the results publicly. Questions might include: Does everyone receive the same quality of care? Do the services offered meet all people’s needs? How are funds being used? Are essential medicines and supplies available?

If they are willing to participate, representatives from health center staff and local authorities can join community organizations to conduct a social audit.
Here is an example of a campaign using one type of social audit in India.

**People’s Health Tribunals improve health services in India**

A group of “lower-caste” women in Bangalore, India, were angry when they learned that their local health center received government money for basic health services that were not being provided. They joined with other activists and used a checklist to document the services and medicines offered, the hours the center was open, and what equipment was in use.

The campaign the women had joined, Jan Swasthya Abhiyan (JSA), then organized a People’s Health Tribunal. Sympathetic experts and allies acted as a panel of “judges” and listened to testimony about how people’s right to health had been violated. The women were proud and excited to be called as witnesses at the Tribunal and speak in front of nearly 1,000 people about what they found in the audit of their health center and their experiences of being denied care. Sharing their experiences and hearing the testimonies of other activists made them feel stronger and able to continue to demand improvements from the local health center.

During the next two years, People’s Health Tribunals were held in many parts of India. Then the JSA activists shared all the documentation they had collected with the Indian National Human Rights Commission. The Commission was convinced that the denial of health care was a critical human rights issue. With the Commission’s help, more than 100 JSA delegates and other experts testified in a public hearing with the national health minister and senior government officials. The hearing concluded with a declaration recognizing the right to health of all Indian citizens and a recommendation to increase the government health budget to ensure quality health care for all Indians.

While many changes have yet to be put into practice, the work of the women from Bangalore has already improved health care in India and has also inspired others. Health activists around the world have convened People’s Health Tribunals to examine violations of people’s rights from lack of health services, the devastating health effects of the mining and oil industries, and poverty wages paid to women workers in garment factories.
Budget accountability

Monitoring how public funds for health care are actually spent in your local clinic is another part of a social audit. Public discussion of how funding priorities are decided, and then whether the government allocates enough money for them, also holds governments accountable for supporting everyone’s right to health.

The organizing work of the community members in Vilcashuamán, Peru, in Chapter 2 is an example of successful organizing to have government funds permanently allocated for women’s health. Their organizing efforts helped others learn about the Peruvian health budget.

Learning about health budget leads to change in Peru

Women in another isolated community in Peru, hundreds of miles away, learned about the work of Vilcas Women’s Voices through radio shows and other networks. They learned they could get information on the Internet about how government funds should be spent. They discovered that even though their community was supposed to receive funds for women’s health services, the local health center did not provide those services. These women organized a march to the mayor’s office to demand more support for women’s health.

We know that you are supposed to be spending more on women’s health in our town! We demand equality and accountability!

How do you know anything about what we spend on women’s health?

The government publishes this information on the Internet!

Since then, this group has been able to hold local leaders accountable, and the health center has provided more health services for women.
Protect public health services

Organizing to improve health for women involves fighting discrimination, poverty, and government policies that do not prioritize the needs of women and girls. Often, it also involves fighting government policies that allow private companies to take over and profit from the basic services everyone needs to live and be healthy. In many countries — both rich and poor — governments have stopped providing health care, water, electricity, and other services. Instead, private companies have taken over these services even though they were built with public funds. This is called privatization.

Unlike governments, private companies are not accountable to the people they are supposed to serve and they do not allow women and men in the community to have a say in the way services are provided. Instead, companies charge as much as they can for services and they stop providing services that are not “profitable,” no matter how important or needed they may be.

Privatization allows the already rich to make even more profit while the health of poor women and their children suffers most of all.

Doctors advocate for people’s health: The marchas blancas (“white marches”) in El Salvador

In El Salvador, health workers have struggled to improve health services for everyone. Since the end of the civil war in 1992, health worker unions and their allies have resisted health care privatization, while fighting for health reforms and improved access to medicines.

In late 2002, public health system doctors and nurses went on strike to resist privatization of the public health system. Privatization occurs when governments pay private companies to provide services the government previously provided, or when the government sells off state property, such as schools or hospitals, to private companies. Some hospitals had already been partly privatized, and political pressure from the wealthy tried to force the government to contract private companies to run most of the health system. Although health care privatization was new in El Salvador, health care workers and patients knew what to expect. During the previous decade, the government-run energy and communications sectors were privatized, making services more expensive. Because of this experience, activists expected that private health care would cost more and reach fewer poor people compared to government-run services.
In response, the health care workers organized huge “white marches” where health care workers — many of them women — protested in their white coats and uniforms. Allies from peasant, student, labor, and women’s organizations at the marches also wore white in solidarity. Women’s groups were particularly active because they knew how important quality health care was for women and that the health workers supported women’s rights. The protest continued for 9 months with marches, vigils, roadblocks, and sit-ins all around the country. After that, the health care unions and the government signed an agreement that ended the privatization process.

Five years later, a major breakthrough occurred when a new political party came into power. The Farabundo Marti National Liberation Front (FMLN in Spanish) won the presidency, partly because of their popularity with groups fighting against privatization. With this support, the FMLN government reformed health care to increase access and quality for most of the population. They also passed a law that made medicines less expensive by breaking private corporations’ control of distribution and sales. This was all possible because of the years of educating, organizing, and protesting by health workers and their allies to defend the right to health care.
Support the struggle for health for all

Access to food, water, housing, education, safe and fairly paid work, and freedom from discrimination are conditions we all need in order to be healthy. They are also human rights and the foundations of a just society. International declarations and laws have recognized these as rights for all people. Regardless of the color of their skin, of whether they are from a poor or wealthy family, or live in a poor or wealthy country, all women and girls have the right to live healthy and productive lives.

Access to health care that meets all people’s needs is recognized as a human right. All women and girls have the right to health care that is available and affordable, that honors their traditions, and that meets their needs.

There are many ways to organize to improve women’s health and access to health care. The women of Vilcashuamán, Peru (Chapter 2) wanted to reduce the number of indigenous women who die in childbirth. They achieved this by setting goals and strategy, patiently developing allies, and constantly evaluating and learning from their work. The three women from Ahmedabad, India (Chapter 10) wanted to receive care for their work-related health problems. They achieved this by joining with a grassroots organization, SEWA, and working with them to build alliances with government labor officials, occupational health experts, health workers, and other working women.

Many efforts are described in this book, including communities re-examining gender roles, young people raising awareness about sexual health, artists using puppets to educate and mobilize people around HIV prevention, and neighbors figuring out how to make their communities safer from gender-based violence. These represent only a small fraction of the organizing efforts going on around the world!

In each of these efforts, people joined together to make change, built new leadership from the ground up, and developed connections and knowledge that will make them stronger in future struggles. They faced challenges and even threats, but by staying committed to their goals they saved lives, improved the health of many, and made their communities more just and equitable.
By sharing ideas and experiences, and failures and successes, the work of these organizers also has had a ripple effect — informing, inspiring, and supporting others. They may live close by in the same community, or far apart on the same planet. Women and men of all ages have become part of a diverse and widespread movement for the Right to Health for all. They — and we — invite you to join us.