

PHA3 DAILY NEWSBRIEF

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• 10 July 2012

WORKSHOP EXAMINES HEALTH RIGHTS OF PEOPLE WITH DISABILITIES

Contributed by Sunil Deepak

The workshop on the right to health of persons with disabilities held on 8 July 2012 saw persons with disabilities, academics and persons from community-based rehabilitation (CBR) and disability programes come together to discuss barriers to access to health services. The speakers included Dr. Eugene Mahlehle from the WHO, Prof. Leslie Swartz and Prof. Sooraya Maart.

Persons with disabilities face continuing barriers to access specific rehabilitation services and also the general health services. Barriers are not only physical; they are also created by attitudes, lack of skills, communication, lack of transport, poverty, lack of information and many others.

In all groups of persons who face discrimination, from the ethnic groups to poor, women and GLBTI groups, there are persons with disabilities who face even greater barriers. They are the silent and forgotten minority. Unless health workers and service providers can go out to look for them and engage them in a dialogue, it will not be easy to understand the barriers that they face. As one disabled person said, "If we, all the

persons with disabilities, were together in a country, we would be the third largest country of the world."

planning health promotion, ask yourself whether your messages are accessible to blind persons and deaf persons. If you are planning reproductive health services, remember that women and disabilities also need them. Any health care activity you are involved in, ask yourself: Are children, adults and elderly persons with disabilities able to access it? A world that is inclusive of needs of persons with disabilities will be a better place to live for everyone.

The Convention Right of Persons with Disabilities provides for the right to health for persons with disabilities. Neoliberal globalization and the economic crisis are also affecting the already insufficient services for with disabilities. persons Persons with disabilities, their organisations, persons and organisations involved in CBR other disability and rehabilitation programmes need to join forces with the People's Health Movement and other movements and ask for universal access health to services and right to health for

Attention:

Accommodation Closing

UWC accommodation will close on 11 July. Anyone staying at the residences must vacate by 10:00 on 12 July.

Airport Transfers

Airport transfers have been arranged through 12 July. Please check the notice board or contact Ingrid for further information.

March in Cape Town

PHA3 delegates will march in Cape Town on 11 July. Buses will leave from the Main Plaza area at 12:30.

African Music Evening
Today, 20:00 (student center)

Exhibitions

1-in-9 Campaign UWC Library Streettalk UWC Library Mamelani GH1 Foyer Upper

PHM Merchandise for Sale T-shirts, Notebooks, GHW3

Contribute to this Newsletter pha3newsletter@gmail.com



UK PEOPLE'S HEALTH ASSEMBLY CONVENES TODAY

Contributed by Dave Rogers

PHM-UK convenes the first UK People's Health Assembly today at Nottingtam Trent University. The event aims to create a forum for individuals and organisations to develop a global social health movement in the UK. A key aim is to demonstrate how issues around health and health equity can provide an important and strategic platform for action for wider networks and campaigns, against poverty, against welfare cuts, and in solidarity with other social movements. Participants will work together during the assembly with the ultimate aim

of producing the first draft of a UK People's Health Manifesto – intended to be a collective vision for a better global society.

Dr. Linda Gibson noted that this event should bring stakeholders from all sectors together to "discuss how to move collectively to overcome the barriers towards achieving health for everyone." Dr. Roy Smith expects that "the event will be a great opportunity to highlight various aspects of globalisation and the impacts they have on health." And Dr. Anuj Kapilashrami, commented: "In the current wave of

neoliberalism and conservatism, fundamental rights to health, livelihoods, and social welfare are under threat only an alternative and radical people's movement founded on principles of equity, justice and community participation can address the diverse challenges we face today."

Speakers include John Lister, health journalist and director of London Health Emergency and Allyson Pollock, Professor of Public Health Research and Policy, author of NHS plc and co-author of The New NHS: A Guide.

ACTIVISTS FORM EXTRACTIVE INDUSTRIES WORKING GROUP

The PHA3 has served as an extremely unique opportunity for those fighting against the practices of extractive industries and the detriment they cause to health and the environment to unite as one under this cause.

On 7 July, workshops organized separately by PHM-USA, Network Movement for Justice and Medico International discussing health and environmental justice came together to discuss extractive industries such as mining, gas and oil and their negative consequences on health and the

environment. Over a dozen countries from every continent were represented at the meeting. During the workshop, it became quite clear that communities across the world are suffering the same injustices and it would serve everyone well to come together to form a stronger and united voice against these practices.

As a result of the meeting, attendees have come together in an effort to form a People's Health Movement Working Group to share strategies and experiences and also support each other's

struggles against the human suffering caused by extractive industries. The group aims to develop a global campaign against the impact of extractive industries on health.

Ultimately, the group will work to bring an end to extractive industries and in the meantime work to ensure that the social, environmental and health costs of these practices are not borne by corporations who cause the damage and not be a burden that must be borne by poor, marginalized and indigenous populations.

