

Southern African Regional Network on Equity in Health (EQUINET)

Reclaiming the State: Advancing Peoples Health, challenging Injustice

THIRD SOUTHERN AFRICAN CONFERENCE ON EQUITY IN HEALTH
TROPICANA HOTEL, DURBAN, SOUTH AFRICA. JUNE 8 AND 9 2004



RESOLUTIONS

Noting:

- The 1997 Kasane meeting on Equity in Health that confirmed the commitment to equity in health at all levels in southern Africa; the 1999 Southern African Development Community (SADC) Protocol on Health, the 2003 Maseru Declaration on HIV and AIDS and the resolutions of the SADC Heads of States Summit on food security held in Tanzania, 2004;
- The formation of EQUINET and our work since 1998 in support of these commitments, to strengthen the understanding of, the evidence for, advocacy of and implementation of this policy commitment to equity and social justice;
- Our conception of equity and social justice in health, which aims to address unfair differences in health and in access to health care through the redistribution of the societal resources for health, including the power to claim and the capabilities to use these resources;
- The widening constituency we are building for equity and social justice in health amongst governments, parliamentarians, health professionals, trade unions and other organs of civil society, researchers and communities at national and regional level;
- The challenges posed by neoliberal globalisation to our values of equity and social justice, to government ability and flexibility to implement the public policies that we choose and to the public sector health and essential services and that are critical for our health;

The June 2004 EQUINET conference in Durban South Africa affirmed that we stand for:

- Equity and social justice in health;
- Public interests over commercial interests in health;
- International and global relations that promote equity, social justice, people's health and public interests;
- Increased unconditional resource flows from the North and fairer terms of trade;

**EQUINET THIRD SOUTHERN AFRICAN CONFERENCE
ON EQUITY IN HEALTH JUNE 2004, RESOLUTIONS**
continued

- Reduction and where possible restitution of flows of resources from South to North;
- A conception of human rights that affirms the agency of communities in claiming social and economic entitlements, the primacy of vulnerable groups and that captures African traditions of communitarianism;
- Equitable health systems that provide healthcare for all and redistribute and direct resources towards those with greatest needs;
- Rising investments in the state and public sector in health;
- Health (care) systems which promote collective, population oriented strategies for health and comprehensive primary health care;
- Trade and agricultural policies that ensure food sovereignty and household food security through land redistribution and investment in small holder farming in ways that promote gender equity and sustainable food production;
- At least 15% of government budgets invested in the public health sector, as committed in Abuja, together with debt cancellation;
- Progressive tax-based funding of health systems;
- Fair financing for health, in which the rich contribute a greater share of their income to health than the poor, with strengthened cross subsidies for solidarity and risk pooling;
- Equitable and affordable access to generic drugs, with application of essential drug policies across all health providers;
- Ethical and equitable human resource policies at national, regional and international level, backed by compensation for regressive south-north subsidies incurred through health personnel migration;
- Equitable public health and multisectoral responses to HIV and AIDS for prevention and health promotion, treatment and care and to mitigate the impact of the epidemic, particularly within and for young people and vulnerable groups;
- The expansion of access to anti-retroviral therapy for people living with AIDS in Southern Africa as an urgent priority, through funding and approaches that strengthen, and do not compromise, our public health services and systems;
- Democratic and accountable states, with full authority to exercise policy measures necessary to protect the health of people;
- Powerful and effective participatory and representative mechanisms at all levels of our health and social sectors and in the state more generally;
- Effective and accountable mechanisms for public and stakeholder contribution to decision making in health;
- Regional integration and co-operation within Africa to strengthen democratic states, advance the health of people and challenge injustices to health;
- Values based leadership across organisations working to promote equity in health.

The conference set out a programme of work and action for EQUINET and its partners to implement these goals.