

Maternal health in India

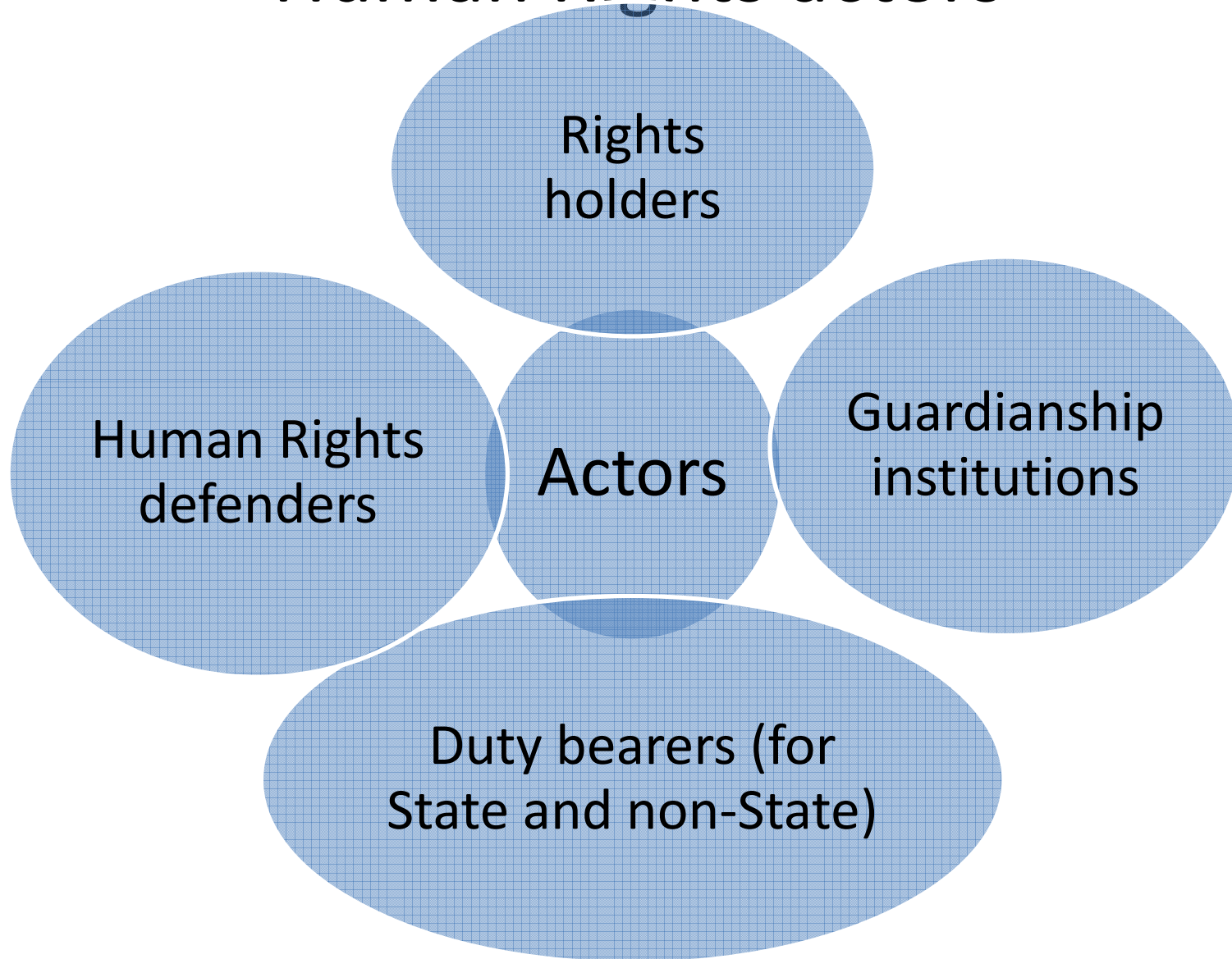
A Human Rights

Disaster

Maternal health: the problem

- Many promises, many programmes for 15 years; not much change on the ground
- M goes missing in MCH: vertical approaches child survival, child immunization and polio eradication take centre-stage, weakening health systems
- India has almost one-fourth of global maternal deaths : one woman dying each minute
- India is also a global provider of health services and health providers!!

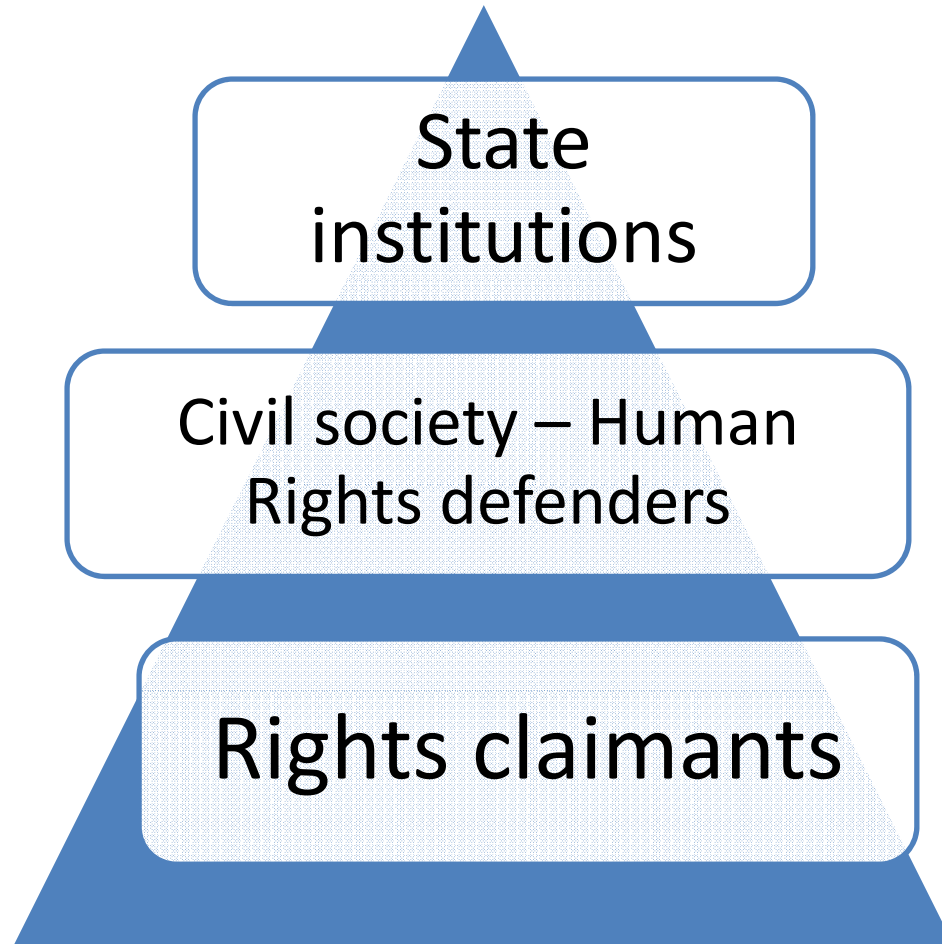
Human Rights actors



Some principles of rights based approaches

- Equality and equity – of gender, caste, class, location, education, sexual identity...
- Participation and inclusion – of those who have been deprived of access to decision-making
- Non-discrimination: Special attention to those who are marginalized
- Accountability: of those responsible for ensuring rights
- Human rights bases of choice, personhood, bodily integrity.....

Rights based approaches from which angle?



RBA as in state institutions: normative

- International agreements, treaties, obligations
- UN conferences, reviews and summits
- Development co-operation, donors
- National constitution, laws and rules
- Policy and programme action so as to –
 - ✓ Respect people's rights – do not violate
 - ✓ Protect people's rights – take action on state and non-state actors through the law
 - ✓ Fulfill people's rights to services and information

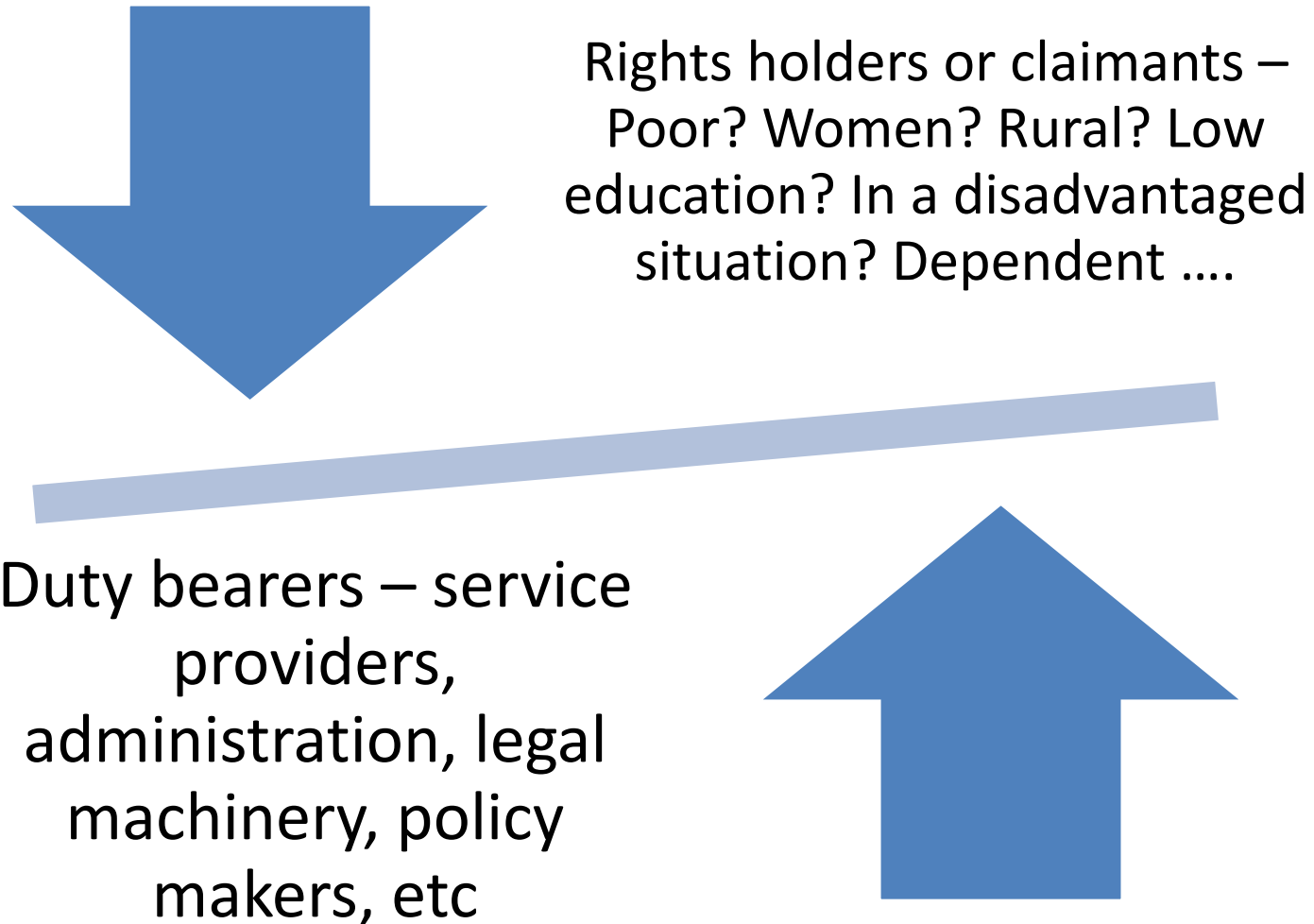
Civil society – human rights defenders

- Provide services to those who are deprived; provide information about rights
- Advocacy and campaigns for better laws, policies, programmes, and increased budgets
- Work with legislators, media, officials, providers
- Documentation of cases of rights violation and legal strategies - putting cases into court
- Gathering evidence (cases/data); submitting reports to state or guardianship institutions or treaty bodies
- Public hearings and tribunals with guardianship institutions (Commissions etc)

Rights holders – rights claimants

- Any awareness of rights or entitlements?
- Any sense of being equally human as others?
- Historical disadvantage – location, education, caste/race, class, skin-colour, religion....
- How to access or afford services?
- How to demand quality?
- How to identify oneself and negotiate entitlements with others more powerful?
- Where and how to complain if grievances? What chances of getting justice?
- Distant dream – participate in decision-making...

Unequal power relations in negotiating rights



Civil Society response

- Where are we focused - On state institutions, on civil society strategies, or on disempowered rights holders?
- Whose experience provides our evidence, our arguments, our recommendations – where do they stand with us?
- It is crucial to also empower the rights holders themselves - to build a group of rights claimants: through information, organization, local action

Users also need to directly negotiate rights



How shall we address maternal health?

- One woman dying each minute of preventable causes is a grievous human rights violation
- This is too grave a situation to be left to the state institutions alone
- We need to come together as civil society and pool our knowledge our skills and learning
- This needs a long term effort, strong cooperation and collective strategy development

Thank you!

Jashodhara

On behalf of Healthwatch Forum