

**Thematic Hub on ‘Patients’ Rights and Private Medical Sector
Accountability-Associated with Community of Practitioners on
Accountability and Social Action in Health (COPASAH)**

Brief report of the workshop in People’s Health Assembly

**‘Enforcing Public Accountability of Private
Healthcare Sector and Safeguarding Patient’s Rights’**

Organized by

**Support for Advocacy and Training to Health Initiatives (SATHI)
and**

Centre for Health and Social Justice (CHSJ)

Venue-

BRAC CDM, Savar, Dhaka, Bangladesh

Date-

17th November 2018

Time-

2.30 pm to 4.30 pm

Partners:

Support for Training and Advocacy to Health Initiatives (SATHI): is an Indian civil society organization based in Maharashtra state working in the health sector since 1998, which has been a pioneer in the area of promoting community and social action for health rights in India. Through its consistent promotion of participatory action and advocacy together with policy research, SATHI has been able to give prominence to the issue of patients' rights and regulation of private medical sector within Maharashtra state, and also at national level in India. SATHI has been contributing to strategies of the health movement for social accountability and responsiveness of private medical providers, since over a decade. This strategy has been based on a combination of three complementary approaches: enabling civil society organizations and activists to demand protection of patients' rights in the private medical sector; creating a voice in favour of rational health sector regulation within the medical profession; and engaging with the State government to promote and shape regulation of the private medical sector, with emphasis on social accountability and participation

Centre for Health and Social Justice (CHSJ): Centre for Health and Social Justice (CHSJ) is a national civil society resource organization working on policy issues related to social justice perspective-oriented governance and accountability primarily in the domains of health justice and gender justice. CHSJ focuses on networking, capacity building, research and evidence-based advocacy as primary strategies in its work which is grounded in 10 states on different themes. CHSJ seeks to strengthen governance and accountability in public health and gender justice through technical support, research, and policy advocacy. It is registered as a Charitable Trust with headquarters in New Delhi and field interventions in more than 10 states of India. Community action for Health rights, reproductive and sexual health rights, masculinities and gender form the predominant themes of CHSJ's intervention at present.

Introduction

In many low and middle-income countries (LMICs) especially in South Asia and Africa, the private for-profit healthcare sector is playing pivotal role in providing healthcare. This has created many opportunities for better healthcare as well as posed significant challenges regarding quality, affordability of care, ethical practices and patient's rights. With this, there is growing discourse of need for social accountability of private medical sector and to protect patient's interest in healthcare set ups, especially protection of patient's rights. However, there is a need for a platform bringing together activists and practitioners, which would help develop the discourse on accountability of the private for profit medical sector. In this regards, Thematic Hub on "Patient's Rights and Private Medical Sector Accountability" associated with COPASAH initiated in 2017-18, as a platform for promoting networking as well as facilitating exchange of experiences and perspectives among civil society organizations and networks working on issues related to private health sector regulation and patient's rights, with a focus on South Asia and Africa.

COPASAH (Community of Practitioners on Accountability and Social Action in Health) is a global network of community of practitioners who share a community –centric vision and human rights-based approach to health, health care and human dignity. (For more details see www.copasah.net).

The Thematic Hub works through organizing global thematic webinars, networking and alliance building mainly in South Asia and Africa, regional consultations, and capacity building of activists. As part of it, workshop on 'Enforcing Public Accountability of Private Healthcare Sector and Safeguarding Patient's Rights' was organised during People's Health Assembly at BRAC CDM, Savar, Dhaka in Bangladesh on 17th November 2018. It was jointly organised by SATHI (Support for Advocacy and Training in Health initiatives) and CHSJ (Centre for Health and Social Justice).

The overarching objective of the workshop is - to share experiences and discuss campaign and advocacy strategies to enforce public accountability of private-for-profit actors in health care, with focus on safeguarding the rights of patients.

In general, there is a lack of core constituency on the accountability of the private-for-profit (PFP) health care sector and it is necessary to develop social coalitions to promote patient's rights and demand regulation of the private health sector. Despite contextual variables, grievances concerning the private health care sector is a worldwide phenomenon especially in

LMICs and therefore there can be no better time than now to bring together such dissenting voices. People's Health Assembly provided a good platform to share country-level experiences and enhance mutual learning and ability to initiate collective action.

More than 70 health activists associated with People's Health Movement from India, Nepal, Sri Lanka, Bangladesh, Uganda, Rwanda, Kenya, South Africa participated in this workshop.

This workshop was an attempt to find common areas of concerns, discuss strategies to challenge unaccountable practices in the private health sector and locate individuals and institutions who are willing to undertake collaborative campaign activities at the national and the regional level. This was more of action and advocacy-oriented workshop, and was not limited only to framing challenges related to the regulation of the private health sector.

The Panellists in this workshop were as follows-

- 1. Dr Abhay Shukla- India**
- 2. Dr Abhijit More- India**
- 3. Dr Sharad Onta- Nepal**
- 4. Dr Manuj Weerasinghe- Sri lanka**
- 5. Dr Masud Zayed- Bangladesh**
- 6. Dr Fredrick Oluga- Kenya**
- 7. Sasha Stevenson- South Africa**
- 8. Aggrey Alusso- Kenya**

Dr Abhay Shukla- India- Senior health activist from SATHI, Thematic Hub of COPASAH and Convenor of PHM-India

Dr Abhay Shukla welcomed all. He made a detailed introductory presentation about nature of private for-profit healthcare sector in LMICs especially in South Asia while drawing attention towards dominance of private providers in service provision, growing commercialisation and corporatisation of healthcare, various kinds of medical malpractices in India. He also emphasised the urgent need to mobilize citizens to protect patient's rights and

demand socially responsive, accountable, participatory regulation of private healthcare providers. His presentation set the context for overall discussion within the workshop.

Dr Abhijit More- India- Health activist from SATHI, Thematic Hub of COPASAH and PHM-India

Dr Abhijit More shared various campaign strategies deployed by PHM- Maharashtra in India to demand legislation to protect patient's rights and participatory regulation of private healthcare sector in Maharashtra state in India.

Dr Sharad Onta- Nepal- Public Health physician and Professor at the Department of Community Medicine and Family Health of Institute of Medicine, Tribhuvan University, Kathmandu

Dr Sharad Onta talked about Public Health Act in Nepal which is applicable to entire healthcare sector, both public and private, in Nepal. He explained skewed distribution of private healthcare facilities with much concentration in urban areas in Nepal. This poses significant problem in accessing healthcare considering hilly terrain of majority part of Nepal. He emphasised the need of regulation to distribute healthcare services where they are needed most. Rising cost of care is an area of concern in Nepal. 10% Nepalis citizens are pushed below poverty line owing to out of pocket healthcare expenditure. He emphasised regulation to contain cost of private healthcare. He also talked about need of regulation to curb irrational use of medical technology especially in diagnostics.

Dr Manuj Weerasinghe- Sri lanka- Head Department of Community Medicine, University of Colombo and PHM- Sri Lanka

Dr Manuj Weerasinghe spoke in detail about status of Private Health Services Regulatory Council Act in Sri Lanka. This council has no representative from the patient's rights groups and taken over by the vested interests from private hospital lobby. There is poor implementation of the act. The dual practice of the doctors working in public health system has resulted into formation of a vested interest group which opposes any effective regulation of private providers which accounts for 50% of outpatient care in Sri Lanka. He also talked about FDI in Healthcare sector in Sri lanka which receives various perks like tax holidays and

FDI regulations prevent domestic laws being applied to such investors in healthcare in Sri Lanka. He emphasised on need for effective regulation to control rising cost of private healthcare and supply induced demand for irrational use of medical technology leading to moral hazards and unnecessary financial burden on patients.

Dr Masud Zayed- Bangladesh- Health Action Forum

Dr Masud Zayed talked about concerns regarding proliferation Public-Private Partnerships in healthcare sector in Bangladesh without adequate regulatory and social accountability mechanisms. He also talked about establishment of rising number of corporate hospitals in Bangladesh from companies based in India, Singapore, Malaysia etc. Many political leaders and business persons are venturing into private healthcare sector by opening up big private hospitals. There is no regulation of private hospitals and no protection of patient's rights. He also emphasised cost regulation and mechanisms to measure outcome of private health facilities.

Dr Fredrick Oluga- Kenya -Secretary General, Kenya Medical Practitioners, Pharmacists and Dentists' Union (KMPDU)

Dr Fredrick Oluga talked about private for-profit nature of majority of faith-based hospitals in Kenya. There is growing commercialisation of these hospitals. The regulatory mechanism is present it is small in capacity and that too elite captured. Cost of the healthcare services is out of the scope of regulatory mechanism. He also talked about increasing public discussion about medical malpractices, negligence and perils of unregulated private healthcare sector in Kenya. He also spoke about rising medical tourism and fraud in the name of insurance in healthcare sector. He emphasised on need to build a campaign on second opinion.

Sasha Stevenson- South Africa- Attorney at SECTION27

Sasha Stevenson talked about existing regulatory mechanisms for private healthcare services in South Africa which has been successful to some extent in checking provider's corruption. But there is lack of regulation of cost of care, quality of care. She informed that the much talked about provision of 'certificate of need' to set up a private healthcare facility in any geographical area is not implemented. She also shared their campaign experience of using competition laws to bring some regulation of very high cost prices and quality of care by providing evidence to government authority to investigate and act upon it.

Aggrey Alusso- Kenya- Open Society Initiative for East Africa

Aggrey Alusso talked about need for data protection and changing neoliberal paradigms. He also talked about growing interest of international venture capital firms, aid agencies for Public Private Partnerships especially in health technology, diagnostics in healthcare field. He emphasized that the accountability of private healthcare sector is not equal to corporate social responsibility.

Open discussion-

Panel discussion was followed up with questions and answer session with participants. The overall discussion revolved around the need for documenting stories of patient's rights violations, medical malpractices and publishing them for wider dissemination. The participants also agreed on need for networking of CSOs, health activists, researchers, doctors from African region and South Asian region to share knowledge, strategies, resources for advocacy towards regulation of private healthcare providers and protection of patient's rights. Participants also expressed need for capacity building for health activists with requisite information. Many participants expressed their desire to join Thematic Hub and some of them showed willingness to organise meetings in their country on this issue.

In the end, many participants expressed their willingness to attend COPASAH Symposium in Delhi in 2019 and carry forwards the discussions around the theme of private sector regulation and patients' rights.