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NGO response to Jakarta Declaration

Report of the NGO Briefing
held at the World Health Assembly,
Geneva, 13 May 1998

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NGO RESPONSE TO JAKARTA DECLARATION

This report is the record of an NGO briefing held during the 1998 World Health Assembly, in Geneva, 13 May 1998. The aim of the briefing was to highlight some of the ways NGOs are participating in the follow up to the Jakarta Declaration, whilst at the same time collaborating with other NGOs, UN Agencies or the Governments.

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Berhane Ras Work – Moderator of the Briefing

(President, Inter-African Committee)

It is my privilege to moderate this afternoon's briefing on the Jakarta Declaration and the response made by NGOs, WHO and Governments.

This is a very important occasion for us all. It is well accepted in the field of health promotion that partnership is vital. Too often the intention to co-operate with a broad spectrum of public opinion is there but the reality is something different.

NGOs are being asked for their advice and support more and more and NGOs themselves are constantly looking for ways to relate to United Nations Agencies and Governments. We are particularly fortunate to work with Dr. Desmond O'Byrne and WHO. Dr. O'Byrne has our special thanks for organising this Briefing and keeping us all involved and informed about the follow up to the Jakarta Conference.



The new Director General, Dr. Gro Brundtland has sent the following message:

"Dr. Brundtland sees the importance of establishing close-co-operation with NGOs working in the field of health. The WHO Transition Team, together with Dr. Brundtland is doing in-depth studies on how to improve collaboration with key players, like NGOs in the health sector."

At the international level, with support from the UN Secretary General and the UN Secretariat, it is becoming easier to see the importance of partnership with NGOs. This understanding is the first step toward implementing cooperative agreements that bring results in areas such as health promotion.

Major problems still remain at the national and local level where the promotion of health education is essential. It is here that cooperation between WHO officials and grassroots organisations is so important. WHO country representatives at this Briefing could offer important insights.

In bringing the Briefing to a close, Mrs. Berhane Ras-Work hoped that the present dialogue would be the first of many linking stakeholders, both large and small, in the Jakarta Declaration in a joint effort to promote health education.

The Inter-African Committee works on traditional practices affecting the health of women and children, with a network of affiliates in 26 African and 4 European countries. The IAC also represents thousands of volunteers from high African government officials to traditional leaders and young women in rural African villages who are determined to ensure the health and well being of women and children.

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Dr. Halfdan Mahler, M.D.

(former WHO Director General)

You have one big problem with health promotion, namely that it is very gender insensitive. Health promotion requires very horizontal thinking and action, and most men are very bad at that. I speak from my own childhood experience where the women in my village knew exactly how to think multisectorally. The males, all of them, always were like the experts who have a lot of fun telling you why nothing can be done. This is in my opinion a real problem.

Emotionally, I have always had a "feel" for health promotion, since tuberculosis was my professional background. The resistance against health promotion is still strong in the traditional health professions though the nurses are coming much more naturally to it than the medical profession. But, the medical profession has so much more power in most countries than the nursing profession has. You have my true admiration for having come from a very small beginning to as far as you have come with health promotion, not only at Ottawa, Adelaide, Sundsvall and Jakarta, but in practical applications.

The NGOs are beautiful and powerful when they come to big international conferences, in Cairo, Copenhagen, Vienna etc. But, when they come back to their own countries they don't get together in national networks. If you want to have political clout then the NGOs have to learn that horizontalism also when they come home from the big international conferences. I am sure all of you have done "something" but much more is required. Because, when it comes to health promotion, then it is really true what I always have been obsessively saying **health is politics and politics is health on a large scale. If you really want to move healthy public policies forward in a big manner then you have to have the political dynamite that is necessary to move these immovable mountains that politicians normally are.**

So I have always been wondering how you get such ammunition. How would you be able to make all this abstract horizontalism reasonably concrete.

Many intellectual people can speak for days about human rights but when you stand in an Indian village, as I did the other day, and there was a woman who asked me "We have heard that health and human rights go together, could you please explain that" I found it very difficult. The same thing goes for health promotion. In order to make it truly concrete for both ordinary and sophisticated people **you need to find a way of having a programme from the global to the local level and from the local to the global level which is based on getting a constant feedback from "some operations research"**. That sounds fanciful but you need to have something done with scientific discipline so you are sure and can show that it works, and that you can fight on from that level of ammunition. I am grateful that I am allowed to be here today.

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