

Health for who and by who?

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Who is responsible for producing/ maintaining or improving an individual's health- in light of the fact that s/he is also a member of a family, a society and a nation? Without waiting for a response, let us pose another question, a contextually different question. Who produces fruits or for that matter sheaves of wheats or paddies, corns of maize or vegetables? The theologians would say God. We the mundane would say - a farmer. Going back to the first question now - what would be our expected answer? (1) In all probability it might be that health is produced by the health department of a nation or a team of physicians, nurses and paramedics. This is a subconscious reflection of our belief, produced by our age-old attitude of reliance on supply side offerings for ensuring ours- peoples desired level of health. The scheme is failing, and we know it, which however, is seldom pondered over; as we are drunk on the belief that it is the health system which produces health. Although we know that our attainments are not fitting our plans, budgets, expenditures or expectations, we do not see any reason to change our mental model. It is time now for the World Health Organization to review its building blocks of the health systems, all six of which are supply driven. Inclusion is needed of the demand side aspects to complete the jigsaw puzzle. It is futile to open a variety store around the corner without rousing interest of the prospective beneficiaries (2). A system is not a system until it has a product. In the health systems it is 'health of the people'.

The 1978 Alma Declaration on primary health care pronounced 10 moot paragraphs. Paragraph VI includes partly, the strategy to attain health through providing primary health care. Additional strategies have been mentioned in point 5 of paragraph VII, which in an unequivocal term states that primary health care "requires and promotes maximum community and individual self-reliance and participation in the planning, organization, operation and control of primary health care, making fullest use of local, national and other available resources; and to this end develops through appropriate education the ability of communities to participate;" Article 25 of the 1948 Universal Declaration of Human Rights: "Right to an adequate standard of living" also quite clearly underscores that "Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control" (3,4). The words "individual self-reliance" and "everyone" respectively appear in the two Declarations. Paragraph VI of the Declaration on primary health care also states that "Primary health care is essential health care based on practical, scientifically sound and socially acceptable methods and technology made universally accessible to individuals and families in the community through their full participation."

There is no need, as it appears from the above quotes, to reemphasize on the importance of individual, family and social involvement for organizing health care, primary health care to be more specific, for individuals, families and societies. As it appears, there are three levels, understanding of importance of which is imperative for organizing a successful primary health care system. We need to work at every level for ensuring 'health' indeed-

health at individual level, at family level and at social level. The need to understand the difference is warranted, as the requirement at each level is different. The difference basically is that of dynamics and practices and inter-relationships. Examples of the dynamics, practices and inter-relationships between individuals, within families and within the societies are too obvious to explain. For example, in families neither the needs nor the entitlements of the members are equal. An anomalous distribution of health benefits within a family irrespective of the reasons may result in unfavorable health outcomes among the different members of the same family. So, involvement of individuals, without understanding family dynamics will cater unduly staggered individual benefits. Social dynamics and norms, which determine social inclusions dictate enjoyment of health outcomes to families, which may be quite skewed, if the social psyche is regressive.

The solution to all these challenges is involvement of individuals, communities and decision makers at operational levels, as has been exhorted in the Declarations of the Human Rights and that of Primary Health Care. The involvement however, has to hinge on the belief that people's health should be in people's hands and not in anybody else's hands. Others may and should play supportive roles and roles for creating and managing a platform which will be then shared by individuals, societies and politicians inclusively. In other words, policy makers and managers will have to organize health care for the people- the individual, the family and the society, through a network of all the relevant parties and stakeholders to play inclusive roles.

Time and again we have read, and we keep on reading the importance of involving those who are the beneficiaries of health. In fact, nobody else could be more interested in their health than they themselves would be. But while we read the lines, we barely read between the lines, if not, why then we still should rely on the supply side pushes only and not work towards involving the people in organizing a system for people's health?

Examples of the efforts to involve the community in managing health system remained as efforts only. Without any deep understanding of why and how to involve the community meaningfully or effectively by those who are at the helms now, these efforts will remain as half-hearted examples. Everyone needs to believe first that without involving individuals, families and communities the efforts for ensuring and improving the health of the people will not succeed.

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