

Commission D: Inequitable Access to Health Care 29 November 2011, ICCG - Geneva

Concept note

Objectives

Commission D on Inequitable Access to Health Care with a focus on women and children is aimed at fostering a common understanding on the role of National Societies and their Governments in eliminating health inequities.

International Conference participants are invited to discuss the best ways to dismantle barriers to health, especially those detrimental to vulnerable women and children.

Rationale

Health inequities, sometimes referred to as health inequalities, are "unfair and avoidable differences in health status seen within and between countries". Health inequities are systematic: they usually affect particular groups of people and they occur across the social gradient. The most vulnerable people have the least access, not only to health services, but also to the resources that contribute to good health.

The Red Cross Red Crescent, whose mandate is to help the most vulnerable, and their Governments are committed to eliminating health inequities, yet this requires a broad range of measures and presents numerous challenges. The International Conference will (1) discuss and adopt resolutions on health inequities, (2) discuss in Commission D ways to further improve health quity, and (3) launch the report *Eliminating health inequities: Every woman and every child counts*.

Guiding questions

- How can National Societies, with their close ties to vulnerable communities and their extended network of dedicated volunteers, best contribute to dismantling barriers to health care?
- How can National Societies support States and Government policies to eliminate health inequities?

Practical details

The Commission will meet in two sessions, as shown in the table below:

| Activity | 9:00 -11:30 am | 16:00 – 18:30 |
|---|---|---|
| Welcome/introductions | Fatima GAILLANI, President of the Afghan Red Crescent Society | |
| Eliminating health inequities: why focus on women and children? | Gerry Elsdon, IFRC TB goodwill ambassador | |
| Health inequities in the world | Carole Presern, Director of Partnership for mother, newborn and child health PMNCH, hosted by WHO | |
| Case study 1: | Sexual and reproductive health rights of people José di Bello Sub-director for Health and HIV/AIDS Argentina Red Cross | Women empowerment through Education Dr.Yahya Tomoum Health department Egyptian Red Crescent |
| Case study 2: | Addressing health inequities in urban settings (Dhaka) Dr Mohammed Serajul Akbar Chairman of Bangladesh Red Crescent | Eliminating barriers to health for the ageing population Cornelia Hackl Health and social services Austrian Red Cross |
| Case study 3: | National Society Partnerships in Promoting Health Equity Ms. Susan Johnson, Director General International Operations Canadian Red Cross | Eliminating barriers to health for indigenous people Dr. Bayardo Bolaños President of the Ecuador Red Cross Junta Provincial Imbabura |
| Discussion | All - Moderated by Chairperson | |
| Closing remarks | Delivered by Chairperson | |

Reference documents

Background report and draft resolution on health inequities: reducing the burden on women and children

Eliminating health inequities: Every woman and every child counts., Report, Document prepared by the International Federation of the Red Cross Red Crescent Societies, Geneva, November 2011