



Essential Services Campaign 2007 Toolkit

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The campaign

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Dear Oxfam Campaigner

Thank you for downloading this toolkit.

Classrooms with teachers. Clinics with nurses. Running taps and working toilets. Essential services transform people's lives. It is a scandal that anyone lives without them in 2007. Yet millions of families do.

Health care and education are basic rights that everyone is entitled to, and yet vast numbers of people are consigned to live in poverty.

Below is information, ideas and tips on how you can campaign for poor people in developing countries to access health care and education. By getting involved in Oxfam's Essential Services campaign, you can help end poverty.

Good luck!

Oxfam.

Healthcare and education: the current situation

The lack of essential services set the poverty trap: people cannot escape poverty when they cannot read or write, are wasted by ill health, or have to spend hours a day fetching water.

Killer Education facts:

- There are over 80 million children who can't go to school, the majority of whom are girls.
- The average African 16 year-old-girl has had less than 3 years of schooling.
- There is a global shortage of 2 million teachers.

Killer Health facts:

- A mother dies every minute in childbirth because she can't get proper health care.
- Diarrhoea is the biggest killer of under-fives in poor countries, claiming 6000 lives each day
- HIV and AIDS claims 8000 lives each day. That's 3 million lives each year.
- There is a global shortage of 4 million health workers.

Health care and Education: The main problems

- Fees to use education and health care services do not work: they exclude poor people from the services they need the most.
- There aren't enough health workers and teachers in poor countries. This is because wages aren't enough to live on, and professionals are being drawn towards the private sector or overseas to better paid jobs.
- Only governments can deliver a nation-wide health care or education service. NGOs, charities and the private sector can plug holes in a system, but can't deliver a national service in the long term.

Case studies: services in despair

The burden on health workers and teachers in the public health systems of poor countries is immense. With huge demands for their work, a lack of equipment to use and wages below the cost of living – doctors, nurses, midwives and teachers a huge burden to bear.

"I continue to work because I love the children. It's not for the money, because the salary is unfair and our pension is rubbish. My salary is 1,600 cordobas a month. Over half is spent on water, electricity and the telephone. The rest goes on rice and beans. There's nothing left for a bit of meat or even medicine." Imelda, 58 year-old teacher from Leon, Nicaragua.

"The shortages of nurses are really bad. You have to keep going even though you are very tired. I work from 4pm until 7.30am the next morning. That's 16 hours. There are five of us on the paediatric ward, and usually we have 200 – 300 kids. And I do day shifts covering for when we don't have enough people. We are hard-working; we are sweating. We keep going – what else can we do?" Midwife in Lilongwe hospital, Malawi.

And just as the situation for workers seems impossible, so is the situation for the poor people who desperately need these services.

“My wife died a few months ago. Very probably from malaria because she had a lot of fever and was also vomiting. But I don’t know, since she never went to the health centre as we didn’t have enough money. I don’t even have enough to feed my two children, so how could I have paid the price of a consultation? I thought that she would eventually get better. That didn’t happen. After four months in that state, she died.” Révérien, Burundi

“My family used to live in the countryside. But when my older sisters got married we struggled to pay for the weddings so we moved to the city. Here, we just work all day and we don’t go to school any more or have friends.” Lakshmi, 15 years old, from Hyderabad, India

Health care and education: The solutions

Rich countries need to:

- Keep the promise to give 0.7 per cent of their national income as foreign aid, and allocate at least 20 per cent of that aid to basic services.
- Ensure this aid is long-term, predictable and coordinated, including further debt cancellation.
- Work with poor countries to recruit, train and retain 4 million more health workers and 2 million more teachers.

Developing country governments need to:

- Make sustained investments in essential education and health care services.
- Abolish user fees for basic health care and education so that poor people can use them.
- Prioritise services for women, who trail far behind men in accessing both healthcare and education.

Case studies: hope for health care and education

Malawi

The UK Government has been working closely with Malawi's Ministry of Health to tackle the country's severe human resources problem. In 2004, the Ministry produced a six-year human resources relief programme, which is 90 per cent funded by the UK and the Global Fund for HIV, Tuberculosis and Malaria.

The assistance is funding 50 per cent increases in the salaries of 5,400 health workers, recruitment of 700 new health staff (with a planned doubling of health workers in six years through expansion and improvement of training schools and trainers), and the plugging of critical gaps with specialist expatriate volunteers while more Malawians are being trained.

"The top-ups and locum system have helped. At least we can receive additional nurses and clinicians from other hospitals whom come for relief duties. Before, maternal mortality was a big problem and nurses had no time to monitor pregnant women. So now pregnant women are being served better." Moses Ngwira, deputy district health officer and clinical officer in Dowa District Hospital.

Liberia

Liberian youths are packing Liberia's public primary schools under a free compulsory education program introduced by President Ellen Johnson-Sirleaf. By the end of the war in 2003 more than half of school-age children did not attend school, according to UNICEF, and prior to 2006, only 95,000 children attended primary school. But now that education is free that trend is changing.

"From the statistics so far we have between 400,000 to 500,000 kids now in primary schools, especially at the public schools. This figure is enormous and at the moment we need more benches, teachers and classrooms to ease the congestion." Education Minister Joseph Korto.

The Essential Services campaign: what you can do

What we are calling on the UK government to do?

The essential services campaign is currently calling the UK Government to:

- Make a time-tabled plan to dedicate the promised 0.7 per cent of their budget to international aid.
- Ensure 20 per cent of this money goes towards health care and education, especially recruiting, training and paying better salaries to 4 million more health workers and 2 million more teachers.

Why more workers?

The desperate lack of workers has made this issue a priority for the Essential Services campaign. Unless there are more doctors, nurses and teachers, people won't be able to access decent health care or education – even if they can afford it. This doesn't make any of the issues such as user fees any less important, but we need to make one ask at a time. We will focus on the other issues highlighted above as the year continues.

Why now?

Like 2005, the 2007 G8 summit in Germany has put Africa and poverty at the top of its agenda. Over the next few months, G8 governments will be meeting to determine what they want to discuss at this meeting, and what decisions they want to make.

Oxfam and its campaigners need to demonstrate to the UK Government that the G8 needs to deliver the 0.7 per cent promise, and that this money needs to go towards the health and education services of poor countries.

Suggested activities

Below are some ideas for how you can learn more about the issues and make sure the UK government keeps its promise. They are only suggestions, and if you think of other ideas, we'd love to hear them!

5 minute actions

- complete the campaign e-action at www.oxfam.org.uk/missingworkers, and get 10 friends to do the same.
- Put information about the campaign in your local/campus doctor's surgery or NHS walk-in centre
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One-hour actions:

- start a book club, and have your group of friends read and discuss books that address issues of poverty in Africa, Latin America and SE Asia.
- Organise a panel discussion or public debate, or host a talk by a returned VSO volunteer or gap-year student.
- Meet your MP and ask what they can do to ensure the UK government keeps its promise

- Meet your MEP and ask what the EU can do to ensure the aid it gives to developing countries is long-term aid.

One day/longer actions:

- Have a home “film screening” of a movie that addresses some of these issues, such as *The Constant Gardener* or *The Motorcycle Diaries*.
- Start an on-line photo gallery on flickr of pictures of health care and education in developing countries. Get your friends, family, workmates to add their pictures.
- Organise a “free healthcare” day or session at work or university, where people can use different health services such as eye check-ups, general blood pressure tests, massage, have fitness tests. People can learn about the campaign whilst sampling health services.
- Build the world’s largest textbook (or just a large text book!), by getting people in your workplace, university, school, or your friends and family to write messages to the UK and other governments as to why they should keep their promise for more aid to developing countries, and why this needs money needs to go to education and health care. Deliver it to your local MP.
- Do a university pledge, where you will do an action (such as you will run 10 km, or you won’t eat chocolate for two weeks) if 50 or 100 others agree to, in the name of better health care and/or education in developing countries. People can learn and get passionate about the issues, sign up to the campaign.

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