THE RIGHTS TO FREE HEALTH CARE

What Does It Mean to Be A Beneficiary of the Free Health Care in Rural Sierra Leone? A Case Study from four chiefdoms in the Kailahun District...

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This image depicts a vulnerable girl and a lactating mother struggling to receive free health care benefits in Kangama, Kailahun District. These girls are being deprived from development because of their present conditions, being denied from going to school during pregnancy, if action is not taken now, poverty will increase, therefore, We 're calling on government, international partners, Donors, and civil society to pay close attention on how women and girls suffer in rural communities because of lack of facilities, corruption and non-transparency in the Free Health Care sector.

Extract: "To be a beneficiary of the Free health care means a lot among other things not only from being entitled to receive services but also to becoming awareness of the initiative; knowledgeable of those entitled to provide services; familiar with the contents or provisions of the initiative and know effective sources through which one can access information about the initiative."

Beneficiaries of the FCHI as declared by government in April 2010 were supposed to be Pregnant women, lactating mothers, and Under- fives kids. Later Ebola survivors and People with disability were included to receive the initiative.

Basically, our focus in this article is to draw our readers attention to not only those who are the beneficiaries, but what does it mean to be a beneficiary of the Initiative in remote rural communities like Jimila, Borbu, Gbalahun, Buedu, Kangama, Bomasadu, Fowa, Ngopi, Dia etc in the Kailahun District where road conditions are poor, infrastructure dilapidated, no communication network, high rate of teenage pregnancy, poverty, poor service delivery among others.

Unlike the big cities where lot of people are aware of their rights to receiving the service, it is not so in rural communities where a mother would have to travel miles on foot to a PHU, professional doctors are not available to provide quality service, nurses are not paid on time. Being a beneficiary of the free health care in rural communities means a pregnant mother who live way in Dia or Kangama village would have to suffered the pain of traveling miles for the whole day only to be given a single dosage of paracetamol, a lactating mother wait in pain until free drugs are supplied etc. the poor farmer would be asked to pay money in order for his pregnant wive to receive emergency treatment...

To make the picture very clear, read testimonies of few beneficiaries we met.

A lactating mother explained!

"The free health care is good for us, but it is faced with many challenges, particularly for my chiefdom where the roads are bad, the health workers are not monitored and majority of us are illiterates. When you go to the health center, they will give you all sorts of excuses just so that they would not treat you free of charge. But the moment you give the money, the drugs will instantly become available. This has been the reason why we prefer to go to our native doctors. But with the knowledge we have gained, we now know also that it's our right to monitor these health centres and their staff"

A 17 year old teen girl explained to us;

My baby was crying a lot, and had fever. Hospital had no drugs for him. The free drugs is finished for now. You need to pay money. They chased me away. I don't know who to tell!

More over, Kailahun District is a district in the Eastern Province of Sierra Leone. As of the 2015 census, the district had a population of 525,372. It is popularly described as a spill over town which has been the boiling point for two major disasters that took the lives of thousands Sierra Leoneans leaving many homeless and vulnerable across the country. Recently, the community suffered the hit of Ebola that later spread to other communities including Freetown. Since then, Kailahun and its communities have suffered a perennial health problem to that of infant and maternal health, high level of teenage pregnancy, etc. The district and its environs have not still recovered from the shocked/damaged of Ebola disease on their families and the health systems.

Imagine yourself living in that community where accessibility to quality medical facilities are minimal. Are those entitled to receive free health care services really benefiting from the initiative? Are pregnant women and girls accessing the service free of charge? Providing answers to these questions will point to the fact that beneficiaries of the FCHI living in remote communities go through a lot in their quest to receiving quality medical treatments.

It was due to this prevailing situation that GoSL in partnership with international organizations (UNICEF) introduced the Free Health Care Initiative (FHCI) geared at abolishing user-fees and providing free health services and drugs for children under-5, lactating mothers, and pregnant women in all government health facilities across country. This initial goal was a reduction in infant and maternal mortality rate. Around the world, many countries are parties to the sustainable Development Goals; working hard to achieve global Reduction in maternal mortality remain at the heart of emerging economies.

We Are writing on this topic because of our current research work, monitoring and prior experience in working and developing advocacy strategies to promote quality health care delivery to rural communities. We have worked with local communities, leaders, stakeholders, farmers, teachers, nurses and women across the country.

As an organization that promotes human rights and good governance, we believe that by providing free and efficient health care services, government is upholding the citizens fundamental human rights ensuring health and well-being for all. It is not an exaggeration to say rural people suffered a lot in terms of access to health facilities, and in terms of receiving efficient and quality services.

But what is right to health? According to international statues and definitions, The human right to health means that everyone has the right to the highest attainable standard of physical and mental health, which includes access to all medical services, sanitation, adequate food, decent housing, healthy working conditions, and a clean environment. According to section 8, sub section (3 d) of the Sierra Leone 1991 Constitution, the "state shall direct its policy towards ensuring that...there are adequate medical facilities for all persons, having due regard to the resources of the state".

What is Right to Health and Health Care?

The right to health means that everyone has the right to the highest attainable standard of physical and mental health, which includes access to all medical services, sanitation, adequate food, decent housing, healthy working conditions, and a clean environment. Therefore, the rights to health guarantees

- A system of health protection for all.
- Everyone has the right to the health care they need, and to living conditions that enable us to be healthy, such as adequate food, housing, and a healthy environment.
- > Health care must be provided as a public good for all, financed publicly and equitably.
- > The right to health care means that hospitals, clinics, medicines, and doctors' services must be accessible, available, acceptable, and of good quality for everyone, on an equitable basis,

where and when needed. The design of a health care system must be guided by the following key human rights standards:

- Universal Access: Access to health care must be universal, guaranteed for all on an equitable basis. Health care must be affordable and comprehensive for everyone, and physically accessible where and when needed.
- Availability: Adequate health care infrastructure (e.g. hospitals, community health facilities, trained health care professionals), goods (e.g. drugs, equipment), and services (e.g. primary care, mental health) must be available in all geographical areas and to all communities.
- > Acceptability and Dignity: Health care institutions and providers must respect dignity, provide culturally appropriate care, be responsive to needs based on gender, age, culture, language, and different ways of life and abilities. They must respect medical ethics and protect confidentiality.
- > Quality: All health care must be medically appropriate and of good quality, guided by quality standards and control mechanisms, and provided in a timely, safe, and patient-centered manner

In conclusion, Network Movement for Democracy and Human Rights would also want to draw readers attention to the fact that The right to health entails the following procedural principles, which apply to all human rights:

Non-Discrimination: Health care must be accessible and provided without discrimination (in intent or effect) based on health status, race, ethnicity, age, sex, sexuality, disability, language, religion, national origin, income, or social status.

Transparency: Health information must be easily accessible for everyone, enabling people to protect their health and claim quality health services. Institutions that organize, finance or deliver health care must operate in a transparent way.

Participation: Individuals and communities must be able to take an active role in decisions that affect their health, including in the organization and implementation of health care services.

Accountability: Private companies and public agencies must be held accountable for protecting the right to health care through enforceable standards, regulations, and independent compliance monitoring.

- **Universality:** Everyone must have access to equal high-quality and comprehensive health care.
- Equity: Resources and services must be distributed and accessed according to people's needs. We get what we need and give what we can.
- **Accountability:** The health care system must be accountable to the people it serves.
- **Transparency:** The health care system must be open with regard to information, decision-making, and management.
- **Participation:** The health care system must enable meaningful public participation in all decisions affecting people's right to health care.

For more information on this article visit NMDHR @ 148 Circular Road, Email: nmdhr1@gmail.com. Website: www.nmdhr.org

The Human Right to Health is protected in: Article 25 of the <u>Universal Declaration of Human Rights</u>

Article 25 of the <u>Oniversal Decidation of Hullian Rights</u>

Article 12 of the <u>International Covenant on Economic</u>, <u>Social and Cultural Rights</u>

Article 24 of the <u>Convention on the Rights of the Child</u>

Article 5 of the <u>Convention on the Elimination of All Forms of Racial Discrimination</u>

Articles 12 & 14 of the Convention on the Elimination of All Forms of Discrimination Against Women