Global Social Policy Forum: Introduction:
Reclaiming Primary Health Care - Why Does Alma Ata Still Matter? Or Can We Still Speak of the Relevance of Alma Ata?
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Introduction: Reclaiming Primary Health Care – Why Does Alma Ata Still Matter? Or Can We Still Speak of the Relevance of Alma Ata?

The last three decades have seen far reaching changes in health service systems across the globe. Rampant commercialization and health sector reforms have reshaped health services and have adversely affected the principles of equity and universality. There is growing evidence of increasing inequalities within and across countries in terms of health status and access to health services. This has contributed to the re-emergence of interest and focus on a primary health care approach that was articulated 30 years ago. Although the strategy was reversed by the selective primary health care approach, the idea has continued to be important both as a concept and a design for health systems. The Alma Ata declaration has thus provided a basis for the mobilization of peoples’ health movements that have been actively contesting the growing inequalities in health. In recent meetings on primary health care in Argentina in 2007 and in the context of development of primary health care in Africa there is a growing recognition of the importance of the primary health care approach for national health systems.

This forum brings together the voices of two generations of public health researchers and activists. These include those who were involved with agenda setting and the process of conceptualizing and designing the primary health care approach, and also those who have kept the idea alive in the networks from both the North and the South. We are pleased to have contributors Professor Debabar Banerji from India and Professor Vicente Navarro bring a critical perspective on the priorities and processes of the last 30 years. They recount the process that led to Alma Ata, and also analyse the politics of its
reversal and provide important insights on the politics and background of the 30 year process.

We might wish to ask if the Alma Ata declaration and consequently Health for All and primary health care have ever been just ‘any strategies or any principles’ and recognize how in spite of the neglect and ignorance by key actors such as the World Health Organization for almost two decades, primary health care and Health for All seem to remain on the global agenda. As Andrew Green argues, the broad principles that underpin the declaration are universal both in time and space, even though the values may not be universally shared. He reminds us sharply of this, as does Thelma Narayan in addressing how in 2000, with the World Health day theme on Safe Blood, any global commitments made were quietly set aside with emphasis on global public–private initiatives and Millennium Development Goals (MDGs).

Rebecca Hope, with Brian Nicholson and David Baguley, Abhay Shukla and Thelma Narayan have engaged with policy dialogue, people’s health movements and research by keeping the idea of primary health care central. Abhay Shukla has focused on the history and politics of Alma Ata and its importance in a globalized world. Thelma Narayan vividly highlights the role of various movements that have influenced Alma Ata and those that are influenced by it.

We need to recognize, however, that so far the idea of Health For All (HFA) has remained largely peripheral to dominant policy discourses at the global level. This is an issue that has been commented on by all the contributors. Andrew Green discusses this aspect effectively when he examines the scope of HFA in the current context of global politics, wherein the selective approach to primary health has been the dominant paradigm. Recent policy developments like the MDGs tend to focus on discreet outcomes rather than on broader aspects of development, and in terms of health, cover only those that are of importance to HIV/AIDS, under five mortality and maternal mortality.

However, we hope the anniversary of Alma Ata is no longer just a memorial to the values and priorities of 30 years ago, but perhaps can also be a recognition of the relevance of these values and principles in a longer struggle for the core principles of equity and universality in health policies across the globe.

**Biographical notes**

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