

# THE CHARTER OF BRASILIA

During the **NATIONAL SEMINAR ON HUMAN DIVERSITY AND EQUAL RIGHTS IN THE NATIONAL HEALTH SYSTEM**, held by the Brazilian Ministry of Health in partnership with Social Movements, on May 8th to 11th 2009, representatives of State and Municipal Health Services Management, the Black Movement, Lesbians, Gay Men, Bisexuals, Transvestites and Transsexuals (LGBT), Communities of Religions of African Origin, Gypsies, the National Street Dwellers' Movement, Popular Health Movements, Peoples of the Fields, Forests and Waters, Teenagers and Young Adults, in consensus, drew up the following charter:

Whereas the capitalist development model, which generates inequalities and social injustice, taking away the meaning of people in favour of a market and profit oriented logic, determining the living, working and health conditions of those who live in cities and in rural, forest and riverine communities;

Whereas the historical processes in our society have structured themselves based on capitalism, patriarchy, sexism, racism, adultcentrism, obligatory heterosexuality and heteronormativity, which generate misogyny, asymmetrical gender relations, lesbophobia, transphobia, homophobia, ethnic and racial discrimination and all forms of prejudice;

Whereas religious fundamentalism advances as an ideological instrument that threatens the Secular State, violating human rights;

Whereas there is an absence of collective sociopolitical projects that nurture the social network based on the paradigms of solidarity and social justice;

Considering the relevance of ethno-racial, cultural, territorial and religious diversity and the relevance of the diversity of sexual orientation, gender identity and age, and the modes of producing life and working;

Considering the strengthening of popular health practices, including health education and healthcare as strategies that must be considered when fighting health inequities;

Considering the importance of social watch, in the formulation of policies and in accompanying National Health System management as a fundamental strategy for the consolidation and consecration of the right to health;

Considering the Integral Health Policies for the Black Population and for the Population of the Fields and the Forests, approved and agreed on by the different levels of the National Health System;

Considering the demands of Gypsies, street dwellers, LGBT, traditional peoples and communities, and other populations in situations of exclusion from access to or discrimination in the National Health System;

We, participants of the **NATIONAL SEMINAR ON HUMAN DIVERSITY AND EQUAL RIGHTS IN THE NATIONAL HEALTH SYSTEM**, demand:

1- The approval, official publication and implementation of the Policies and Operational Plans on diversity, namely: the National Policy for the Integral Health of Black People,

LGBT, The Peoples of the Fields, Forests and Waters, Street Dwellers, Traditional Peoples and Communities, and that they be amply publicized in the media, civil society and organized movements, and at all levels of the National Health System (NHS) management.

2- The guarantee of ample participation and social watch by these segments and people with regard to NHS management, as well as participation in the process of monitoring and evaluating the implementation of these policies throughout the different territories.

3- The immediate qualification and organization of the network of NHS services to provide humanized care, respecting the diversity and singular needs of these populations.

4- The guarantee of the participation of the diverse peoples and organized movements in the implementation of the Policies on Permanent Education and Work Management, and on Permanent Education on NHS Social Watch, including the issue of diversity as part of the process of educating health service managers, health workers and health advisory councillors, as well as in making working processes less precarious.

5- The recognition that through their diversity people produce knowledge, wisdom and practices regarding health, as well as the recognition of the need to strengthen popular education, with the aim of building a Popular Education Policy on health issues.

6- The guarantee of a specific budget and specific funding to permit the implementation of the policies at all levels of management.

7- Promotion of health research and studies in keeping with people's diversity, and that such research and studies be broadly publicized and widely available.

8- The guarantee of intersectorality in policy formulation, as well as in the management, planning and execution of the actions, as a means of making progress with people's right to health, reaffirming the need for intersectoral articulation to achieve NHS integrality.

We, subjects of diversity, reiterate our intransigent defence of the NHS, the principles of universality, integrality and equity as applied to healthcare and the inclusion of sexual and gender identity diversity, and multi-ethnic and pluricultural diversity in integral healthcare actions. Similarly we reaffirm that the NHS is **Humankind's Immaterial Cultural Social Heritage**, and has resulted from the fight of working people and popular movements for the right to health.

**Brasília, May 11th 2009**

# NATIONAL POLITICAL AGENDA

1. Guarantee the inclusion of the National Policy on Integral Health for the Black Population and the Population of the Fields and the Forests in the State and Municipal level Health Plans and to speed up the process of implementing Policies for populations excluded from the NHS, ensuring the commitment of all three NHS management levels.
2. Defend and publicize Equity as a political battle flag of the NHS.
3. Promote the creation of state and municipal bodies to fight health inequities.
4. Effectively implement the National Plan to Fight the AIDS Epidemic among Gay Men, MSM and Transvestites and the National Plan to Fight AIDS Feminization.
5. Include health service provision that contemplates the diversity and the specificities of the Brazilian population in the National Humanization Policy.
6. Create healthcare protocols that contemplate care and support for specific groups subject to health inequities.
7. Promote the recognition of traditional *terreiro*<sup>1</sup> communities, by the three levels of NHS management, as places where health promotion can take place.
8. Promote the intersectorality of actions and the transversality of healthcare for the diverse social subjects, through the different Brazilian territories.
9. Promote the development of environmental preservation strategies, guaranteeing the health safety of workers in the diverse communities.
10. Effectively implement health equity promotion actions in schools, in articulation with the Health and Education in Schools Programme and the Schools without Homophobia Programme.
11. Qualify and guarantee the actions provided for by the National Plan on Health in the Prison System.
12. Publicize and take part in the Rally in Defence of the NHS as a strategy to consolidate the Health Reform and the right to health.
13. Disseminate the contents and the actions discussed in this Seminar at the State and Municipal level, and broadcast them through all mass media.
14. Hold Regional Seminars on the Promotion of Health Equity, with the involvement of Health Managers and Health Councils, in a democratic and participative manner.
15. Increase social participation beyond the formal agreement-reaching and management spaces.
16. Guarantee the representation, on the Health Councils, of populations in situations of inequity, strengthening their participation.
17. Promote the recognition, by health service managers, of people's diversity, in guaranteeing the right to health and in encouraging the participation of all segments,

<sup>1</sup> Places where some Afro-Brazilian religions are practiced

including traditional communities and traditional peoples, people with disabilities and people living with HIV.

18. Implement Management Collegiates in NHS Health Centres, with popular movement representation.

19. Include the subject of combating health inequities in the processes of Permanent Education for health professionals, ensuring the reform of the syllabus and funding for these initiatives.

20. Build popular health education processes and a learning strategy for health managers and workers, and social movements.

21. Enhance university curricula to ensure that health professionals receive training on gender and ethnic issues and on the social determination of health, so that NHS professionals become more committed to diversity and health-illness processes.

22. Ensure the participation of social segments in the elaboration of the programmatic contents of humanization courses and other NHS programmes.

23. Train health professionals to use Brazilian Sign Language (*Língua Brasileira de Sinais - Libras*) when caring from people with communication disabilities.

24. Promote the defence of the NHS and Constitutional Amendment No. 29, in order to guarantee the right to health.

25. Assure sexual and reproductive rights as a means of preserving and promoting the health of heterosexual, bisexual and lesbian women, guaranteeing safe healthcare provision in cases of abortion and reducing, in particular, mortality among Black women.

26. Assure the human rights and the right to health of Black youth, with the elaboration of strategies to guarantee integral care (first aid and follow up), seeking to achieve: a) the reduction of the morbidity and mortality of this segment, which is the victim of the lethal action of the military, civil and federal police, municipal guards and paramilitary groups, justified in the name of fighting and repressing drug trafficking; b) assuring the rights of young people deprived of liberty or serving community sentences, or dependant on psychoactive substances, from the viewpoint of drugs being a public health issue; c) assuring the sexual and reproductive rights of young Black women.

27. Promote the participation of State Health Departments in the debate on the reformulation of the public security model with the aim of ensuring a Public Security Policy that preserves citizens' lives.

28. Guarantee the secularity of the State, respecting all the religions that comprise the Brazilian Nation.

29. Strengthen the presence of Gypsies, street dwellers, Black people, rural, forest and riverine populations, LGBT, traditional peoples and Afro-Brazilian communities, on NHS social watch bodies.

30. Include the *terreiro* ancestral wisdom as part of health practices, considering that historically *terreiros* have been the centre of health promotion.