Dear friends, colleagues and comrades,

In 2000 India as a nation passed by its deadline of “Health for All” in silence. As healthcare providers and policy makers we are in a unique position to bring the experiences, problems and issues of the healthcare sector and of patients directly into law and policy. Through personal experience we have been in touch with the grassroots and can ‘feel’ rather than see the issues that affect healthcare in India. There are today several areas that we can, as a focus group discuss and debate:

**HIV/AIDS:** This issue has been debated and discussed at length in Parliament. As healthcare providers we are at the frontline of this epidemic and have seen its devastating effect on our country. Although the epidemic is over two decades old, we still see stigma and discrimination as a permanent feature. Healthcare providers across sectors do not have access to cheap and simple universal precautions like gloves and masks creating an obstacle in the treatment of persons living with HIV/AIDS. With treatment HIV-positive persons can live long and healthy lives; instead they remain ill and in hospital through their youth taking away from India its most productive population.

**Patents:** In 2005 we became a TRIPS compliant country – a move that has greatly threatened the provision of healthcare in our country not just to the poor but to all sections of society. The new patents law is something we should understand and discuss to see its impact on healthcare in India. As healthcare providers we can keep track of the progress of prices of life saving medication and as policy makers we can ensure that prices of these medications remain within affordable levels through the Drug Price Control Order. We should also be involved in discussing prescription protocols which give generic names for drugs rather than brand names.

**Insurance:** The move towards the privatisation of healthcare and patent regimes in medication means that India is inexorably moving towards a multi billion dollar health insurance system; a system that breeds on expensive and unaffordable healthcare and that we have seen from the experience in developed countries has healthcare providers in a stranglehold while simultaneously denying the insurance claims of patients on technical grounds. How can we protect India from this fate and ensure that healthcare providers and patients alike do not end up at the mercy of insurance companies?

**Medical Education:** India has produced some of the finest healthcare providers across
the world; yet the state of medical education within the country remains a topic of much controversy with fake universities, capitation fees etc. regularly capturing headlines. A discredited medical education system means a discredited healthcare system; we must take action to ensure quality and proper regulation of medical education in India.

Female Foeticide:

In India today there are an estimated 50 million missing girls. Often doctors have been characterised as the villains in perpetuating a problem that is really the outcome of social and cultural mores. We must ensure that laws and policies address the deep seated social stigma attached to the girl child and work towards gender equality and equity.

Quacks: The issue of ill qualified, under qualified and sham healthcare providers is one that has dogged us for decades. While there are moves to penalise these so-called ‘quacks’, we must also remember that often they are the only source of healthcare for many poor people. What problems does the healthcare sector create that pushes people towards this seemingly cheaper and more accessible option to get treatment? How can we ensure that alternate medicine systems are not characterised as quackery?

Disaster Management: With the devastation of the tsunami and the plight of victims of the October earthquake on both sides of the border, the necessity for disaster management and preparedness has been brought to the forefront. In any disaster or emergency, medical and paramedical services are critical in the saving of lives, in preventing the outbreak of epidemics and even preserving medical records to help family members identify their loved ones. How do we ensure that laws and policies place healthcare providers at the centre of any disaster management plan?

Friends, these are just some of the issues that confront the healthcare sector today. The time is ripe for us to come together as a Forum of Doctor MPs to talk to each other, share our experiences and to use our expertise and knowledge to influence laws, policies and practices. We can use this forum to reach out to the healthcare sector, patients groups and civil society creating a bridge with the Parliament to fulfil the constitutional guarantees of life and health. To take this idea forward, we propose a meeting to discuss legal-ethical issues related to HIV/AIDS such as public health strategies, discrimination, consent, confidentiality and access to treatment, during the first phase of Budget Session at [the Parliament Library].