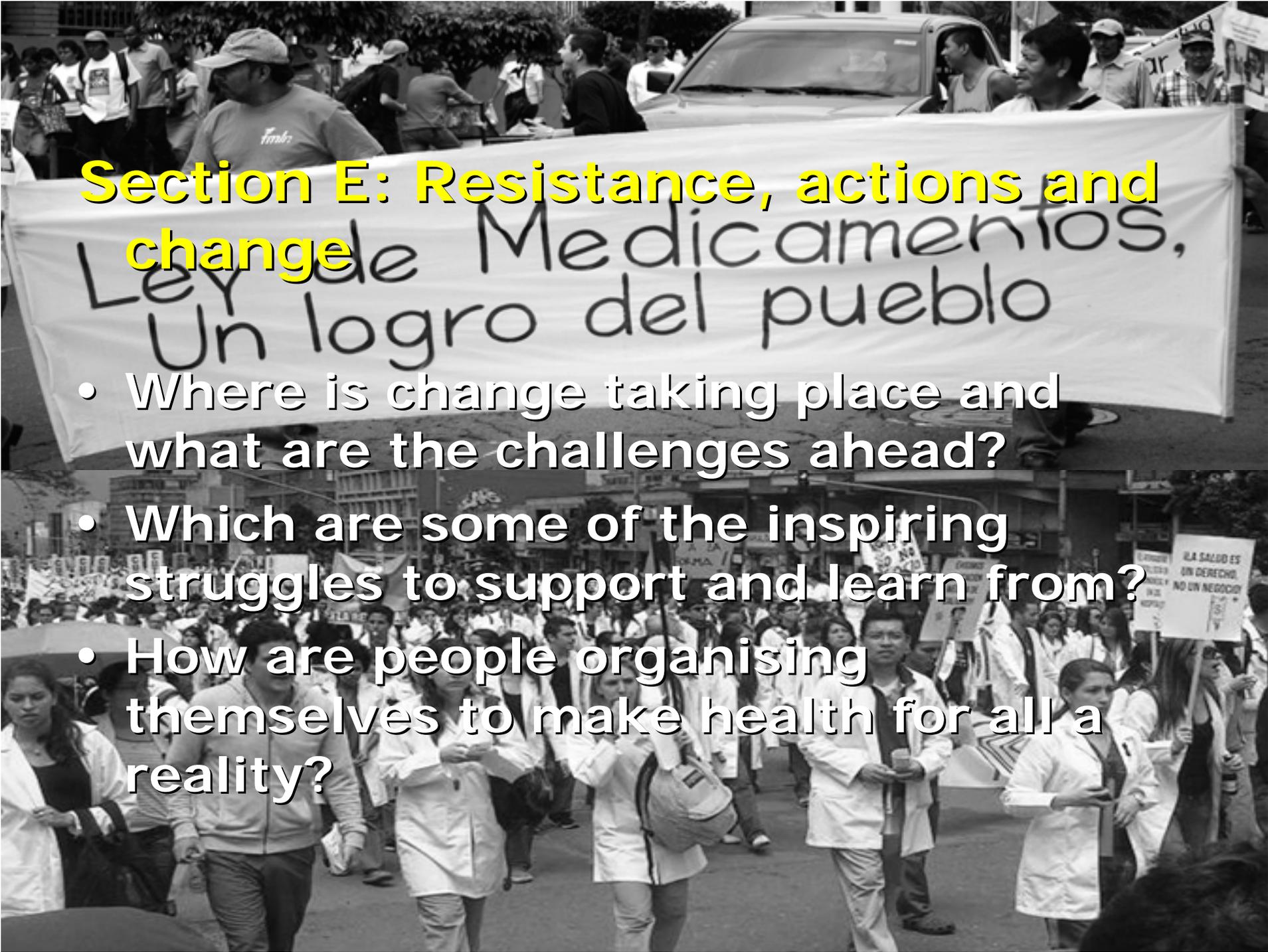


# D.7: Offshoring clinical trials

- ◆ There is a growing trend of clinical trials being 'offshored' to developing countries.
- ◆ Case studies reflect common trends in preferred destinations: weak regulatory systems and vulnerable populations – as pliant pool of clinical trial subjects.
- ◆ Gross rights and ethical violations reflect a nexus between pharmaceutical MNCs, domestic regulatory agencies, doctors leading the trials and regulatory agencies in the North.

## Most frequent ethical violations:

- *Exploitation of people's vulnerability;*
- *Absence of free and informed consent;*
- *Improper use of placebos;*
- *Absence of compensation norms in cases of serious adverse events;*
- *No access to treatment at the end of the trial.*



## Section E: Resistance, actions and change

- Where is change taking place and what are the challenges ahead?
- Which are some of the inspiring struggles to support and learn from?
- How are people organising themselves to make health for all a reality?

# Social Change and Health

- ◆ Several Latin American countries have witnessed significant social and political changes. They represent different kinds of experiments attempting to chart a course that challenges and rejects the neoliberal framework.
- ◆ This contestation plays out in the health sector as well, with entrenched neoliberal ideas being questioned and replaced by 'communitarian' and 'intercultural' approaches.



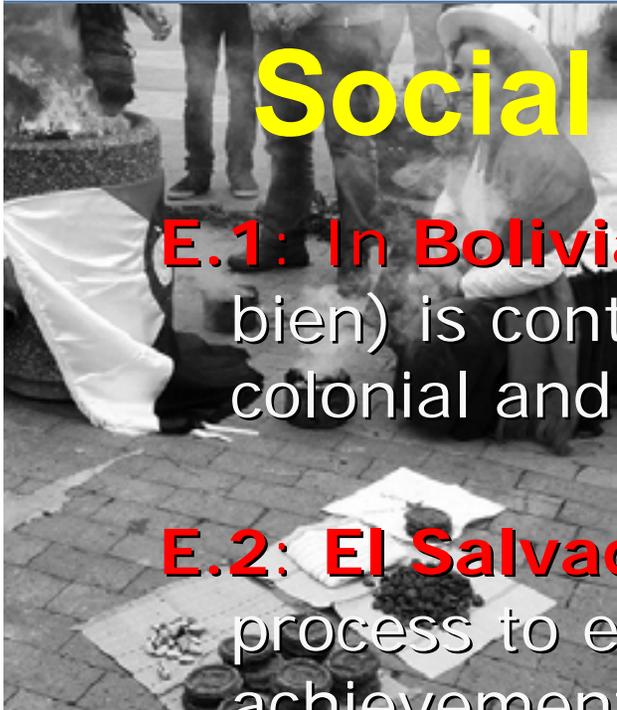
*Julia Ramos, executive secretary of the Bolivian Peasant Women's Confederation Bartolina Sisa; indigenous people now lead social transformation in Bolivia.*

# Social Change and Health

**E.1: In Bolivia** the concept of 'living well' (vivir bien) is contributing to the dismantling of colonial and neoliberal legacies of the past.

**E.2: El Salvador** is embarking on a challenging process to ensure the irreversibility of the achievements made after the installation of a 'left' government in 2009.

**E.3: Venezuela** faces the onslaught from the imperial US government and its allies in the country (the oligarchy, private media, the Catholic Church hierarchy, and a section of conservative political parties).



# Resistance to Neoliberal Reforms

- ◆ In **Colombia (E.4)** and **Peru (E.5)** neoliberal hegemony is being challenged by popular movements; contestation is apparent in the struggles against reforms to the health system.
- ◆ Key lessons lie in the new social alliances that have been forged and the role played by health professionals.



# Resistance to Neoliberal Reforms

**E.6:** The global economic crisis has impacted people's lives **in Europe**. Waves of protests and resistance movements have swiped large parts of the continent.

- ◆ These target austerity packages imposed by the 'Troika, as well as EU–US negotiations for a new free trade agreement - the Transatlantic Trade and Investment Partnership, TTIP.

**E.7:** A linked case study of **Halkidiki** – a community in Greece which collectively rose up against a gold mining project.

- ◆ Experience has led people to believe that the natural state of humans is not selfishness, but cooperation and solidarity.



## E.8: Right to Food in India

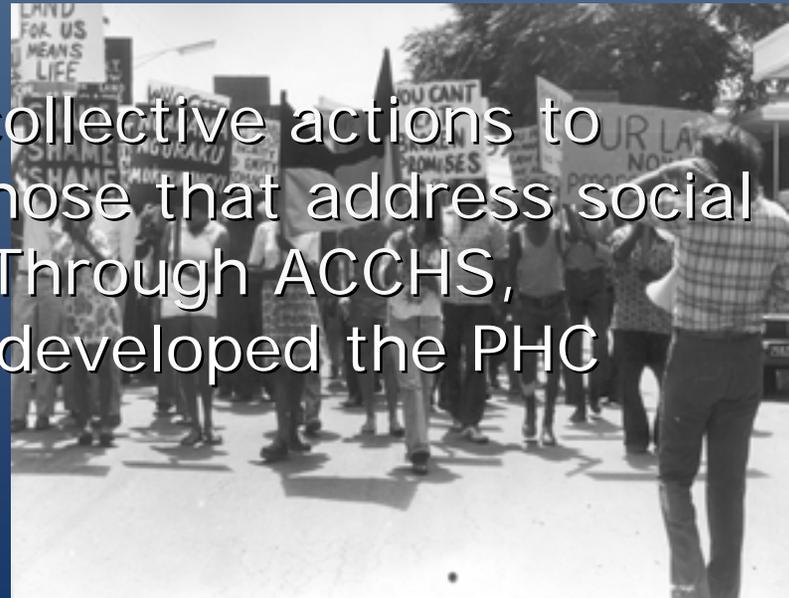
*'Everyone has a fundamental right to be free from hunger and the primary responsibility for guaranteeing basic entitlements rests with the state'.*



- ◆ The RTF campaign's experience highlights the strengths of a wide network - with members across the country representing different social groups - coming together on one issue.
- ◆ Experience also points to difficulties in engaging with the state and the public at large on structural causes.

## E.9: Aboriginal community controlled health services (ACCHS)

- ◆ The movement for ACCHS has been a key vehicle for the community's engagement in the struggle for health.
- ◆ This struggle combines collective actions to access healthcare with those that address social determinants of health. Through ACCHS, Aboriginal peoples have developed the PHC model in Australia.



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