



**TheNetwork**  
for Consumer Protection

Annual Report 2004



the  $\mathbb{R}^n$  is a linear space over  $\mathbb{R}$  with the usual addition and scalar multiplication. The inner product is defined by

$$\langle x, y \rangle = x_1 y_1 + \dots + x_n y_n \quad (1)$$

and the norm is defined by  $\|x\| = \sqrt{\langle x, x \rangle}$ . The norm is induced by the inner product.

The inner product is bilinear and symmetric. The norm is positive definite and satisfies the triangle inequality.

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### About the Network for Consumer Protection

# Message from the Chairman

TheNetwork for Consumer Protection is a story in progress. It began in 1991, following the Imodium drops disaster that took the lives of several children, as a campaign by a small group to promote 'rational use of medication in Pakistan'. Centred on the UK-based NGO, Oxfam, the campaign quickly gathered momentum and took the shape of a civil society organization that quickly attained independent credibility.

Although the emphasis on drugs and public health remains, TheNetwork has broadened its base and is now, in many respects, the leading consumer rights organization in Pakistan. The only voting member from Pakistan of Consumers International-the global umbrella body of 250 consumer organizations from 115 countries-it has evolved, over time, a civic model of protection that is alive to the peculiarities of consumers in Pakistan.

Since 1991, TheNetwork has been investigating and raising critical issues of public policy that structurally impinge on the human, constitutional and consumer rights of citizens, revealing the motivations of profit that increasingly drive our world and our choices, and that often compromise public interest. This public interest became further defined for TheNetwork in 2002, when the organization began to gather associate members, all paying annual membership fees, to lend their voices to the policy advocacy effort-TheNetwork is proud to have today the support of over 1,200 members across the country.

Like every good story, TheNetwork's tale has been one of people. Its Board of Directors has steered it to maintain a credible continuity in mission, which was a particularly critical need in 2004, when TheNetwork's founding Executive Coordinator, Dr. Zafar Mirza, bade farewell to the organization and was succeeded by Mr. Ali Qadir. The team and Board of TheNetwork, supported by members and partners, have sailed smoothly through this significant moment in the organization's history and today look forward to continuing the momentum and process of institutionalisation of consumer protection in Pakistan. Our primary donor partner, the Department For International Development, UK, deserves special thanks for actively supporting the mission and growth of TheNetwork since 2000; many other friends, donors and civil society organizations have also bolstered us.

The story of TheNetwork continues, as does the need to protect the rights of consumers to medicines, health services, consumer products and justice. It is a story written by many authors...that needs many more to imagine and shape a world in which consumers can live long, safe and healthy lives.

# Executive Coordinator's Message

The past year has been an eventful one for TheNetwork for Consumer Protection. During the year, TheNetwork ended Phase I of its major project, Consumer Protection in Health, with the Department For International Development (DFID) and began Phase II. The new phase comprises greater emphasis on the evidence-base of TheNetwork's policy advocacy agenda, greater engagement with the policy community-particularly including civic actors-and further strengthening of the individual associate membership program.

The achievements of the year have been many, from campaigning for the banning of dangerous drugs, to active advocacy for development and implementation of provincial consumer protection legislation, and from lobbying for the ratification of the Framework Convention on Tobacco Control to increase in paid membership. During 2004 TheNetwork also concluded the year-long project with The Asia Foundation, Strengthening Democratic Development in Pakistan, by printing 14 booklets on governance issues from a consumer perspective.

However, these successes only serve to identify, in stark contrast, the road that needs to be travelled for consumer protection. The rapidly increasing pace of privatization and liberalization is coupled with an increasing commercial presence in the media through advertising, putting consumers at risk. Regulatory power is neither increasing nor allowing equity considerations in this structural economic shift. The system of governance still does not adequately cater to the basic right of consumers to redress of their grievances, nor to their political right to participation in policy and decision-making.

It is to address these, and related, matters that TheNetwork began in 2004 to take a longer-term perspective of its mission, and began its work towards institutionalisation of a critical, consumer-centred voice in policy making in Pakistan. An Output-to-Purpose Review of TheNetwork by a mission fielded by our major partner, DFID, found that TheNetwork was moving well towards its outputs and purpose of Phase II. An externally facilitated strategic renewal exercise of the team followed up on the review at the very end of December, and emphasized the need for enabling demand for protection of consumer rights.

The renewal exercise also took place in the context of a major institutional development. This was the departure in 2004 of our founding Executive Coordinator, Dr. Zafar Mirza. Zafar's departure from TheNetwork was a momentous, and emotional, occasion for all of us. The members of our Board of Directors, the entire team of TheNetwork, our partner civil society organizations, and our donor partners-primarily DFID-supported the organization successfully through this unique transition. Zafar's words as he left TheNetwork were: "14 years ago, I joined an organization; today I am leaving an institution."

# Institutionalising Consumer Protection

The membership of Consumers International, which began with five Western countries in 1960, has swelled to 115 nations from all over the world. As distinct from industrialized nations, consumer protection in developing countries emphasizes the right to satisfaction of basic needs liking to the overwhelming context of poverty. Comprehensive consumer protection policies and laws in many developing countries, including in South Asia, address this in the context of the UN Guidelines for Consumer Protection 1985.

While Pakistan too is a signatory to the Guidelines, the country has not developed a consumer protection policy to date. Some consumer protection laws do exist, including the Islamabad Consumer Protection Act 1995, the NWFP Consumer Protection Act 1997, the Punjab Consumer Protection Act 2005 (January) and components of legislation concerning food, drugs, anti-trust activities and monopolistic trends. However, their implementation, as for most social legislation, is by and large negligible. In the absence of comprehensive, implemented legislation and policy, Pakistani consumers remain vulnerable to negligent, even unethical, practices of the corporate, business and public sectors.

TheNetwork is supporting both the 'supply side' and the 'demand side' of consumer protection in Pakistan by providing technical assistance in the drafting of consumer protection laws and implementation plans; informing and organizing consumers so they can collectively exert pressure for pro-consumer policies and action; and facilitating consumer complaints and undertaking public interest litigation to activate the redress channels that do exist.

## **Consumer protection laws facilitated**

TheNetwork assisted the Government of Punjab to draft the Punjab Consumer Protection Act, 2005, and also worked with civil society groups to develop detailed recommendations regarding the Sindh Consumer Protection Bill, 2005.

To activate consumer protection laws in NWFP and Islamabad, TheNetwork filed a case under the Islamabad Consumer Protection Act, 1995 (ICPA), and worked closely with both administrations to identify implementation needs and address gaps in both Acts. TheNetwork also provided assistance to the Ministry of Health (MoH) to include a consumer complaints section in the proposed Disposable Medical Devices Act, 2004.

## **Consumers informed**

Striving to empower consumers to assert their rights, TheNetwork continued to regularly publish and disseminate its four bi-monthly magazines during 2004, distributing over 35,000 copies of its publications in all.



- **Sehat aur Sarfeen** is a 24-page Urdu magazine aimed at informing consumers and making them critically aware of issues in health and medical practice.
- **Drug Bulletin** is a 20-page English bulletin that aims to promote critical awareness in prescribers for rational use of medicines, and provides current, national and international information on drugs, therapeutics and related issues.
- **Consumer Wise** and **Sarfeen** are 52-page English and Urdu magazines, respectively, aimed at monitoring state, corporate and market activities affecting consumers, protecting consumer rights, and promoting responsible consumer behaviour.

Published stories were adapted and quoted by numerous parties, including journalists, legislators, Government officials and health/ community workers. The International Society of Drug Bulletins, of which TheNetwork is the only Pakistani member, ran an article on TheNetwork's Drug Bulletin in its newsletter and quoted from Drug Bulletin in a subsequent issue.

In the interests of sustainable reporting on consumer issues, TheNetwork also conducted a workshop for 40 journalists in Islamabad to sensitise them to consumer rights and issues and motivate them to contribute regularly to TheNetwork publications.

### **Consumer movement rallied**

As a membership organization, TheNetwork provides its members information and helps them to mobilize to assert their rights as consumers.

In 2004, 686 additional members joined TheNetwork, bringing the total membership to 970 by 31 December. Apart from attending various meetings and maintaining TheNetwork's outreach stalls at public events, TheNetwork members participated in the organization's campaigns, including one to ban Vioxx® and remove it from the market, and in drafting a Patients' Rights Charter for Pakistan. During the year, members also served on the Abbottabad district drug price control committee, and engaged with the Government Task Force on Electricity Tariffs to convey the consumer perspective.

TheNetwork supported its members by sending them free publications and campaign materials, helping to organize three member meetings, streamlining internal support for membership, publishing a members' newsletter, and responding to their questions and comments.

### **Redress channels activated**

Persistent apathy at both the demand and the supply end of consumer protection has caused a vicious cycle to set in, where the abuse of consumer rights has become a norm because few question it. Individuals who do wish to complain find themselves confronted with discouraging odds.

To help break this cycle, TheNetwork established a Consumer Complaint Cell (CCC) in Islamabad in 2002 that invites consumer complaints, takes them up with concerned agencies, and facilitates aggrieved consumers in obtaining redress through negotiations or legal means. Where a complaint raises a significant public interest issue, the CCC also pursues it with litigation.

During 2004, the Islamabad CCC received 866 complaints from the public, bringing the total number of complaints received to 2,600 (Table 1). Of the 866 complaints processed during the year, 627 were settled out of court and six cases were handled in court. A complaint against contamination of the Rawalpindi Water Reservoir received significant media attention, while approximately 25,000 consumers benefited when a complaint against a utility was successfully resolved with the intervention of the Oil and Gas Regulatory Authority.

During the year, TheNetwork also launched a new CCC in Peshawar, which began to receive and process complaints immediately. To expand the outreach of the CCCs, TheNetwork also advertised them on radio, conducted a launching seminar in Peshawar, and engaged with elected officials to encourage complaints.



Table:1 Complaints received by CCC in 2004

| Complaint Category           | No. of Complaints |
|------------------------------|-------------------|
| Adulterated food             | 4                 |
| Breach of contract           | 1                 |
| Contaminated water           | 6                 |
| Environment                  | 136               |
| Excessive pricing            | 17                |
| Fraud                        | 25                |
| Fake warranties              | 2                 |
| False and defective products | 2                 |
| Inadequate services          | 328               |
| Medical negligence           | 25                |
| Monopolistic behaviour       | 0                 |
| Restrictive trade practices  | 0                 |
| Spurious drugs               | 0                 |
| Substandard quality          | 8                 |
| Utility services             | 222               |
| Unfair trade practices       | 33                |
| Unethical advertisement      | 1                 |
| Out of ambit of CCC          | 56                |
| Total                        | 866               |

### **Fatal Error: the Riaz Bibi Medical Negligence Case**

When Lal Zameer took his wife, Riaz Bibi, to Cantonment General Hospital, Rawalpindi for the delivery of their baby, he thought he was placing her in safe hands. He could not have been more wrong. During the caesarean operation that followed, a healthy baby was delivered, but the doctor neglected to remove one abdominal sponge. After the surgery, despite Riaz Bibi's constant complaints about a pain in her stomach, the doctor refused to check her. Riaz Bibi was discharged even as gangrene spread through her body. After a few of days of excruciating pain and unsuccessful attempts to get help from two major hospitals in Islamabad and Rawalpindi, the suffering 36-year-old was admitted in critical condition at the Pakistan Institute of Medical Sciences (PIMS), Islamabad. Doctors took immediate action but it was already too late. Riaz Bibi lapsed into a coma. A few weeks later, she was dead.

Horrifying as this story is, it is not uncommon in Pakistan. In public as well as private medical facilities, patients are frequently subjected to medical negligence. In 2004, TheNetwork's CCC helped Riaz Bibi's devastated family to take legal action against her negligent doctor. The evidence of the plaintiffs has been recorded, and the gynaecologist who recovered the sponge from Riaz Bibi's abdomen has deposed before the Court. The defendants' evidence is to be recorded and the Court's decision expected in fall 2005. This is a milestone case in the legal history of Pakistan as no precedent or case law is available on the issue of medical negligence.

# Promoting rational drug use

Poor consumers in Pakistan are burdened by high prices and low or irregular availability of essential drugs on the one hand, and reliance on out-of-pocket expenditure on the other. Although generic drugs help to lower the price barriers to essential medicines, their quality is questionable, as highlighted by a study on Ofloxacin in which TheNetwork participated in 2004. Unfortunately, poor quality or unknown health risks are not restricted to generics; branded drugs, such as Vioxx® mentioned below, can also wreak havoc on patients' health.

Prescribers could help by promoting rational drug use-cost-effective provision of the right drug in the right dose at the right time and to the right patient. Unfortunately, this concept is not yet widely understood in Pakistan; nor do prescribers have complete information about the many drug brands available in the market. This, coupled with unethical and aggressive promotion of drugs through prescribers, results in unnecessary costs and, in some cases, compounded health problems.

Pakistan's 1.2-billion-dollar pharmaceutical industry is crucial for the country's health as well as its economy. Since these two interests can and do conflict, it is doubly important that the industry be regulated in a manner that is transparent and that balances and protects the interests of stakeholders.

TheNetwork's Pharmaceuticals Project is a research and advocacy initiative that aims to improve access, quality and safe use of pharmaceutical products that directly affect the health of poor people in Pakistan by mounting pressure on the Government, industry and prescribers to responsibly meet consumers' drug needs. TheNetwork serves as a clearinghouse of information on pharmaceutical issues in Pakistan, educating and informing all stakeholders. The outcomes it seeks are rational use of medicines; adaptation of the essential medicines concept in the provider community; and development of a pro-consumer national drug policy as well as improved drug laws, supported by a strong, effective and credible regulatory and institutional framework.

## **Access to essential drugs monitored**

TheNetwork regularly monitored and reported on the availability of essential drugs (EDs) in the country. The findings of surveys were published in the bimonthly Drug Bulletin and shared with the Ministry of Health as well as the press (Table 2). Leading daily newspapers published information about missing EDs provided by TheNetwork. In addition, TheNetwork contributed to the Ministry of Health's drug availability monitoring group.

TheNetwork's consulting arm, Health and Development Services (HDS), participated in a study on international drug price comparison. The study was commissioned by Health Action International (HAI) as part of the 'WHO/HAI Project on Medicine

Prices - Drug Pricing Survey in Pakistan', and is aimed at assessing the availability, prices and affordability of selected medicines in the country, in the public as well as private sector.

Table:1 Complaints received by CCC in 2004

| Survey       | No. of Drugs on National ED List | Available (% of Total NEDL) | Unavailable (%) | In Short Supply (%) | No Responses (%) | No. of Drugs with No Alternatives |
|--------------|----------------------------------|-----------------------------|-----------------|---------------------|------------------|-----------------------------------|
| Jul-Oct 2003 | 455                              | 40.03                       | 34.74           | 20.73               | -                | 13                                |
| Apr-Jun 2004 | 455                              | 40                          | 30.43           | 21                  | 8.57             | -                                 |
| Oct-Dec 2004 | 455                              | 38.8                        | 29.1            | 26                  | 6.1              | -                                 |

## Drug safety monitored

TheNetwork also kept up rigorous international monitoring of safety aspects of drugs and other health related products. Safety alerts were conveyed to the general public through all of its magazines, and were sent to the Ministry of Health and the press for follow-up and wider dissemination. TheNetwork also conducted a number of media briefings on banned drugs in Peshawar, Lahore, Quetta and Karachi.

TheNetwork mounted a vehement campaign against the registration and availability of Vioxx®, a drug for arthritic pain produced globally by Merck & Co Inc, USA, which was found to be linked with increased risks of heart attacks and death. Some 2,500 campaign letters were written to members of the national and provincial assemblies, the judiciary, TheNetwork's own members, and prominent citizens and political parties, etc. In addition, 10,000 campaign posters and 50,000 leaflets were distributed throughout the country. The campaign drew positive support from the print and electronic media and eventually contributed to the banning and withdrawal from the market of all 44 analogous brands of Rofecoxib in Pakistan by the Ministry of Health.

A study initiated by TheNetwork in collaboration with a group of researchers, under which 34 brands of the antibiotic Ofloxacin were tested, revealed alarming differences in the antibacterial activity of various brands of the drug, including brands of multinational giants. The study was published in the October-December 2004 issue of Pakistan Journal of Medical Sciences (Vol. 20, No. 4), and its findings were further publicised by TheNetwork through reports in its periodicals, dissemination of reprints of the original article and press releases.

## Capacity building for rational drug use

In collaboration with the Punjab University, Ministry of Health, International Network for Rational Use of Drugs (INRUD) and World Health Organization (WHO), TheNetwork acted as local host of the **WHO International Course on Promoting Rational Drug Use (PRDU)** in April-May in Islamabad. The prestigious PRDU course is conducted annually, but this was the first time it was conducted in Pakistan and

hosted by a non-governmental organization. The course focused on approaches of studying and remedying inappropriate drug use, including problems with ways in which drugs are prescribed, dispensed and consumed, and practical methods for changing inappropriate drug use behaviour. The two-week course was attended by 23 professionals, including physicians, pharmacists, concerned government officials, health scientists and legislators from Afghanistan, Bahrain, Brunei, Egypt, Iraq, Libya, Oman, Pakistan, Singapore, Uganda and Yemen.

### **Consumer protection against drug patents**

Since the conclusion of the Agreement in Trade Related Aspects of Intellectual Property Rights (TRIPS), patents have been among the most hotly debated topics concerning access to essential medicines. During 2004, TheNetwork became a member of a high-level advisory committee on intellectual property rights constituted by the Ministry of Commerce to recommend amendments in the Patent Ordinance (revised) 2002. TheNetwork also lobbied selected members of the Senate to stop the process of amendments in the revised Ordinance, which would have reduced Pakistani consumers' access to medicines.

### **Study on traditional and complementary medicines and nutraceuticals (Too Long)**

TheNetwork collaborated with Consumers International to conduct the Pakistan component of the regional 'Research on the Use of Traditional and Complementary Medicine (TCM) including Nutraceuticals' project. The project is being implemented by consumer organizations in nine countries in the Asia Pacific region. Its aim is to gain an insight into current supply and utilization of TCM products and nutraceuticals, their advertisement, and existing regulatory frameworks. In particular, the study explores the nature of products and information provided about them by the manufacturer; consumers' perception of the products; marketing strategies being used; and the current regulatory framework.

# Resisting Corporate Tobacco

Tobacco-related diseases claim about 100,000 lives in Pakistan every year. Despite crippling poverty, low access to quality health care, and eventually unbearable economic and health costs, smoking rates and the tobacco death toll are rising in the country. This is mainly because the tobacco industry, confronted with stricter controls in the developed world, is aggressively marketing and unethically advertising its products in developing countries. Since 2000, TheNetwork's Tobacco Free Initiative - Pakistan (TFI) has lobbied hard for the Government's signing and ratification of the WHO Framework Convention on Tobacco Control (FCTC) as a precursor to effective legal controls on tobacco. These include measures to control direct and indirect tobacco advertising, create price and non-price pressures against tobacco consumption, and ensure consumers' right to a tobacco-free public life.

## **Facilitation of FCTC ratification**

A milestone achievement in 2004 was the Government's ratification of the FCTC, which represents national recognition of tobacco as a negative public health determinant, and opens the door to stricter controls.

TheNetwork played an active role in helping the Government to take this step, working closely with the MoH and WHO, participating in meetings as a civil society representative and helping to raise a public voice in favour of the FCTC in collaboration with the Pakistan Anti-Tobacco Coalition (PATC)-a group coordinated by TheNetwork comprising of 16 organisations and 150 individuals- and the Pakistan Chest Society.

## **Assistance in implementation of Tobacco Ordinance**

The Government promulgated the Prohibition of Smoking and Protection of Non-smokers Health Ordinance 2002 in June 2003. Independently and as a statutory member of the Committee for Tobacco Advertisement Guidelines, as well as the Committee for Implementation of 'Prohibition of Smoking and Protection of Non-Smokers' Health Ordinance' and the Smoking Control Health Program in Pakistan, TheNetwork has been involved in implementation of the Ordinance.

Collaborating with MoH, TheNetwork participated in workshops to develop Provincial and District Plans of Action for implementing the Ordinance. In addition, TheNetwork developed a Model Implementation Plan for Rawalpindi and Islamabad and shared it with MoH as well as PATC members. TheNetwork also published a range of awareness materials, including a booklet containing an Urdu translation of the Ordinance, posters, stickers, and pamphlets, and disseminated these to 102 banks, 55 hotels and restaurants in Islamabad, 150 national NGOs and 73 TheNetwork members in Rawalpindi and Islamabad. In addition, TheNetwork provided MoH recommendations for amendments in the Tobacco Ordinance so that a comprehensive ban on tobacco advertisements in the media could be enforced.

## **Participation in National Action Plan for Non-Communicable Diseases (too long)**

MoH in collaboration with WHO and an NGO, Heartfile, prepared a National Action Plan for Prevention and Control of Non-Communicable Diseases (NCDs), which are estimated to cause 25 percent of all deaths in Pakistan every year. Since tobacco consumption is a well-established risk factor for most NCDs, TheNetwork was engaged as the key technical resource for developing the tobacco control component of the plan.

## **Tobacco ads and sponsorship thwarted**

TheNetwork successfully lobbied the Organizing Committee of the 9th South Asia Federation (SAF) Games, which were declared Tobacco Free Sports where sponsorships and advertising by the tobacco industry were banned. A Walk for Health was also organized with the SAF Games Organizing Committee. TheNetwork also lobbied against the tobacco industry's proposal to sponsor the beautification of the Federal capital.

In 2004, TheNetwork continued to assist the Government to maintain its time restrictions on the airing of tobacco advertisements in the electronic media, despite active pressure sponsored by the tobacco industry. Lobbying against a plea of the state-owned television channel, Pakistan Television Corporation (PTV), to relax these restrictions, TheNetwork mobilized wide-ranging support and contributed to the eventual rejection of the plea. Subsequently, TheNetwork initiated lobbying for stronger restrictions on advertisements in the print media within the provisions of existing law.

To help reduce public demand for tobacco, TheNetwork finalized a paper on the effects of tobacco on the poor. On World No Tobacco Day, TheNetwork highlighted key issues through newspapers, a special radio program, and televised interviews and documentaries, and co-hosted seminars in Islamabad and Peshawar. The relationship of tobacco with increasing poverty was highlighted. TheNetwork also collaborated with MoH in organizing the tobacco section of a Conference on Healthy Lifestyles

# Protecting Baby and Child Consumers

Breastfeeding saves the lives of 1.5 million infants every year and protects the health of millions more against malnutrition, diarrhoea and other illnesses. Nevertheless, in Pakistan, which has the highest infant mortality rate in South Asia, only 16 percent of infants are exclusively breastfed until the age of three months.

TheNetwork has been lobbying since 1996 to protect the practice of breastfeeding from inadequate restrictions on the baby food industry, which continues to be engaged in unethical promotion of breastmilk substitutes. The advocacy has relied on the International Code of Marketing of Breastmilk Substitutes, 1982, endorsed by Pakistan along with 118 other countries.

The WHO/UNICEF Code was translated, albeit weakly, into national legislation as the 'Protection of Breastfeeding and Child Nutrition Ordinance, 2002', which restricts promotions by manufacturers of the 160 breastmilk substitutes and supplements available in the country.

## **Assistance in implementation of Breastfeeding Ordinance**

In 2004, TheNetwork provided technical assistance to the Ministry of Health to finalize rules and regulations of the Ordinance and catalyse implementation. Pilot implementation of the Ordinance was also initiated in this regard at three hospitals in Islamabad and Rawalpindi, so that an effective implementation plan could be developed and shared with the Government.

To increase consumers' awareness of their rights under the Ordinance, TheNetwork also published a poster on important hospital-level provisions of the Ordinance, disseminating it for display at 700 health facilities around the country, and raising public awareness through a number of channels. During World Breastfeeding Week, TheNetwork collaborated with other organizations to produce a World Alliance for Breastfeeding Action (WABA) handout on breastfeeding and the UNICEF-WABA Golden Ribbon Movement. TheNetwork is the only civil society member of the National Infant Feeding Board (NIFB), established under the Ordinance to investigate violations, disseminate relevant information, and provide policy advice and guidelines to the Government as well as to health workers and the general public.

In 2004, TheNetwork shared a policy brief on breastfeeding protection with women Members of the National and Provincial Assemblies, and Government officials. Upon invitation, TheNetwork also contributed in the Nutrition Section of the Tenth Five-Year Plan (2002-2007), focusing on breastfeeding protection and food regulations.

## **Need for mother-friendly laws and workplaces highlighted**

Although women comprise 25 percent of the workforce in rural areas and 19 percent in urban areas in Pakistan, they are offered little protection through maternity

legislation and mother-friendly workplaces. In 2004, TheNetwork undertook a preliminary review of maternity legislation, including recommendations of the International Labour Organization and local laws to identify model provisions and gaps in existing national legislation.

In addition, TheNetwork developed Guidelines for Mother-Friendly Workplaces, implemented them at its own office, and introduced them to 44 other organizations working on issues pertaining to the rights and health of women and children.



# Making Drinking Water Safe

Water is among the most basic human needs, and the most widely supplied and used public utility. The UN Human Rights Declaration, the Constitution of Pakistan and the Consumers International Charter all deem access to safe drinking water a fundamental human, civil and consumer right, respectively. However, not only is access to drinking water a major problem in Pakistan, but, in the absence of binding or practical quality standards, unsafe water leads to 40 percent of communicable diseases and 60 percent of infant deaths, as well as epidemics that sometimes result in lifelong disabilities and large-scale deaths. Consumers have little information about the quality of water they drink, and in this respect are vulnerable even to private bottled water suppliers.

## **Development of a national drinking water policy**

During 2004, TheNetwork continued its efforts to highlight the need for a national drinking water policy at various forums and with the public. TheNetwork was also nominated a member of the National Coordination Committee on Water and Sanitation, formed under the aegis of the Pakistan Environmental Protection Agency; UNICEF and the Ministry of Health are among the other members. Within the Committee, TheNetwork was assigned the responsibility of coordinating the preparation of a national policy document.

As part of the policy dialogue, and based on existing, voluntary, national drinking water standards, TheNetwork developed mandatory minimum quality standards to be applicable at the district/tehsil level. These were submitted for review to the Pakistan Council for Research in Water Resources (PCRWR) and to the Coordination Committee. At the same time, TheNetwork also began to study the largely inconsistent and inequitable situation of water billing in the country, in preparation for inclusion in a national drinking water policy.

Since drinking water supply is the responsibility of local governments as per the Local Government Ordinance 2002, a rationale for amending the law to improve public water supply was also prepared.

## **Public water supply monitored**

In 2004, TheNetwork continued regular testing at public water sources in Islamabad and Rawalpindi to ascertain water quality and safety for human consumption, and share this information with the water supply agencies as well as consumers. In all, 49 tubewells were tested in Islamabad and 36 tubewells in Rawalpindi. The monitoring results, and observations on key water sources in the area, were shared with the Capital Development Authority (CDA) and Water and Sanitation Authority (WASA), Rawalpindi.

# Quest for a National Health Policy

Owing to persistent weakness in the formulation and implementation of public health policies, a basic need of Pakistani consumers-health-remains unfulfilled. TheNetwork is striving to facilitate the Government in developing a participatory and evidence-based health policy from a civil society perspective.

## **Efforts to develop the demand for a health policy**

TheNetwork published 'Pakistan's National Health Policy - Quest for a Vision', an analysis of issues and constraints in the formulation and implementation of various health policy documents in Pakistan. The book, launched in October, includes a model to demonstrate how an evidence-based and comprehensive health policy could contribute to broader development ends, and concludes with recommendations to overcome policy-related obstacles. Based on the book, TheNetwork has begun working for a holistic, pro-poor health policy, focusing on channelling civil society demand for such a policy. A strategic plan was finalized, and formal linkages were made with the National Health Policy Unit in the Ministry of Health.

As part of this 'demand' for a pro-poor health policy, TheNetwork contributed substantially to the health-related sections of the 10th National Five-Year Plan, advised on two high-level committees on the national health vision and intellectual property rights (specifically, drug patents), and participated actively as a member of the technical committee for the National Health Conference 2004.

## **Study for devolution of health care**

TheNetwork is conducting a health care system survey and assessment to support the ongoing 'devolution' process in the health sector by equipping the responsible institutions with comprehensive and accurate data about the supply and demand side of local health services. In 2004, TheNetwork completed further assessments of two Union Councils of Gujranwala in Punjab. Based on this pilot testing, TheNetwork is finalizing a unique survey methodology for widespread use by local governments in health planning and intervention.

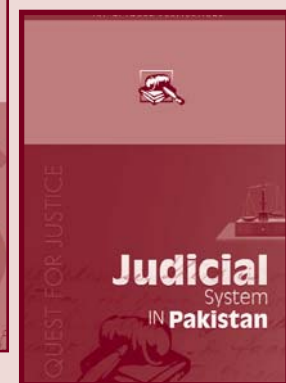
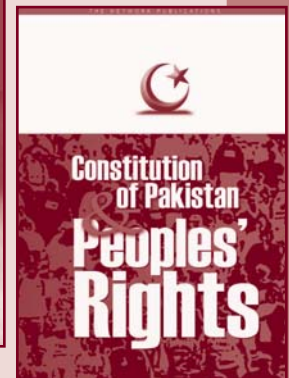
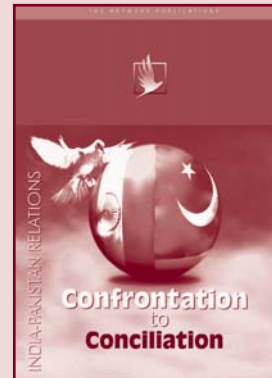
## **People's Health Movement brought to Pakistan**

During 2004, TheNetwork played a leading role in launching the People's Health Movement (PHM) in Pakistan. PHM is a global coalition of health activists and civil society organizations advocating public health policies that ensure 'Health for All'. To launch the movement, TheNetwork invited the Global and Indian Coordinators of PHM to Pakistan and jointly arranged events such as seminars, a community meeting and meetings with the academia in Islamabad, Lahore and Karachi. The launch of PHM was attended by civic actors and representatives of the Government and international development agencies.

# Democratic Development in Pakistan

In August 2003, TheNetwork became a partner in the Asia Foundation-led Supporting Democratic Development in Pakistan (SDDP) project, aimed at facilitating more informed and effective advocacy for democratic reform. The project was implemented by a consortium of civil society organizations and completed in 2004. TheNetwork's role in SDDP was to stimulate informed citizen demand for better governance by providing relevant information.

During 2004, TheNetwork published 13 issue papers to broaden citizens' knowledge and understanding regarding important policy issues. These publications continue to be in great demand as they address topical issues in an understandable fashion.



Annual Report, 2004

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## Advocating democratic development: 13 papers by TheNetwork

*Constitution of Pakistan and Peoples' Rights* by Nazeer Ahmad

*Aaen-e-Pakistan aur Awaam kay Huqooq (Urdu version of Constitution of Pakistan and Peoples' Rights)* by Nazeer Ahmad (translated by Waheeda Malik)

*Political Parties in Pakistan: A Long Way Ahead* by Nazeer Ahmad

*Quest for Justice: Judicial System in Pakistan* by Foqia Sadiq Khan

*Husool-e-Insaaf aur Pakistan ka Adaalati Nizaam (Urdu version of Quest for Justice: Judicial System in Pakistan)* by Foqia Sadiq Khan (translated by M Y Khan)

*Preempting Poverty: Social Security in Pakistan* by Haniya Aslam

*Women on Trial: Gender Violence in Pakistan* by Tahir Mehdi

*India-Pakistan Relations: Confrontation to Conciliation* by Ayesha Siddiq

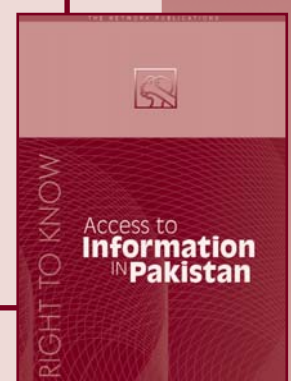
*The Unholy War: Religious Militancy and Sectarian Violence in Pakistan* by Zaigham Khan

*In Search of Shelter: Housing Problem in Pakistan* by Arif Hasan

*Right to Know: Access to Information in Pakistan* by Zafarullah Khan

*Struggle Without End: Industrial Relations and Labour Rights in Pakistan* by Zeenat Hisam

*Land, Peasants, and Poverty: Equitable Land Reforms in Pakistan* by Mazhar Hussain Arif



# Working the TheNetwork

By the end of the year, a 60-person team was running TheNetwork, one-third of whom were women. Continuing its focus on attracting and retaining women staff members, TheNetwork commenced a special pick-and-drop and a day care for women staff. A Code of Conduct for Gender Justice at the Workplace was also adopted. Institutionalisation such as this remained a focus, with the Board approving a revised, gender-audited Compendium of Management Policies and Procedures, and the organisation instituting a programme monitoring and evaluation (PME) system.

## **Change in leadership**

In 2004, following the 17th Board meeting, TheNetwork welcomed Ali Qadir as its new Executive Coordinator. Mr. Qadir has over a decade's experience of working in Pakistan's development sector, including in national and international NGOs, higher education management and reform, and as a consultant.

## **Green light from DFID's review team**

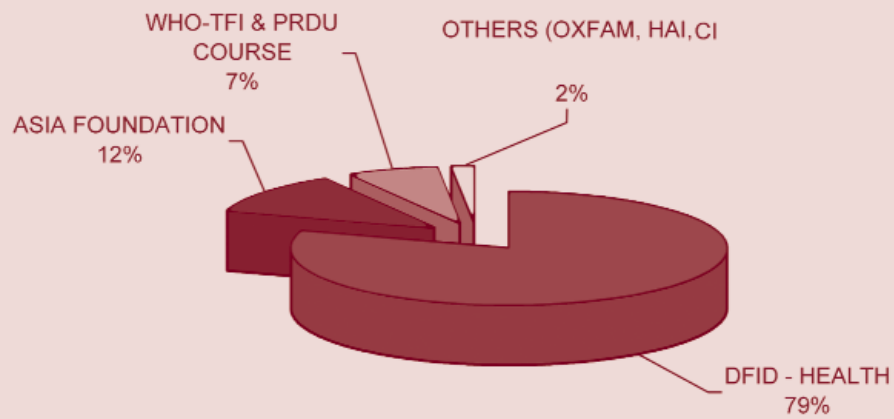
In April 2004, TheNetwork entered Phase II of its programming, which entailed a shift in emphasis towards macro-level policy and legislative initiatives, as well as the challenges and opportunities emerging with the ongoing power devolution in the country. TheNetwork's primary donor, the Department for International Development, UK (DFID), conducted a positive review of TheNetwork's performance against its intended purpose and outputs in November 2004.

## **Consultancy work**

During 2004, TheNetwork undertook considerable consultancy work under a specially created wing, Health and Development Services (HDS). Projects that were conducted or commenced during 2004 included the Promoting Rational Drug Use course in Islamabad for the World Health Organization; a study on the use of traditional and complementary medicines including nutraceuticals for Consumers International; a study on improving nutrition in schools for Consumers International; and a survey on drug pricing in Pakistan for WHO/Health Action International. In addition, HDS streamlined its internal logistics and communications, and explored opportunities with the National Tuberculosis Programme, Punjab Rural Support Programme, Heartfile and Plan Pakistan.

# Financial Report

## PROGRAM EXPENSE FOR THE YEAR 2004



■ DFID - HEALTH  
□ WHO-TFI & PRDU COURSE

■ ASIA FOUNDATION  
□ OTHERS (OXFAM, HAI, CI)



# Staff Group Photo





# About The Network for Consumer Protection

TheNetwork for Consumer Protection is an independent, not-for-profit, public interest organization working for the promotion and protection of consumer rights in Pakistan since 1991. The need for TheNetwork arises in an increasingly capitalistic world where enterprises are overshadowing states, and where the role of people as citizens is giving way to their role as consumers. In this world, we envision a society where consumer rights are respected and where consumers are involved in decision-making that affects them, have access to a just system of redress, and act as responsible members of society.

TheNetwork works to advocate consumer-friendly laws and policies, and empower consumers to protect themselves by providing them with relevant information.

TheNetwork focuses its interventions in key areas of Pakistan's health sector where the implications of state or business negligence are particularly grave. In addition, TheNetwork also intervenes in the cross-cutting arenas of consumer policy and law, and access to justice. TheNetwork is a membership organization, which also operates Pakistan's first-ever independent Consumer Complaint Cell.

TheNetwork is a member of Consumers International. It is registered under the Companies Ordinance 1984 and maintains a fully functional office and Consumer Complaint Cell (CCC) in Islamabad as well as a CCC in Peshawar.

The UN Guidelines for Consumer Protection 1985 and the Consumers International Charter recognize

## **8 Fundamental Consumer Rights:**

- Satisfaction of basic needs
- Safety
- Information
- Choice
- Representation
- Redress
- Consumer education
- A healthy environment