

### **Human Rights:**

- · Are guaranteed by international standards
- · Are legally protected
- · Focus on the dignity of the human being
- · Protect individuals and groups
- · Oblige states and state actors
- · Cannot be waived or taken away
- · Are interdependent and interrelated
- · Are universal

# Civil and political rights vs. Economic social and cultural rights



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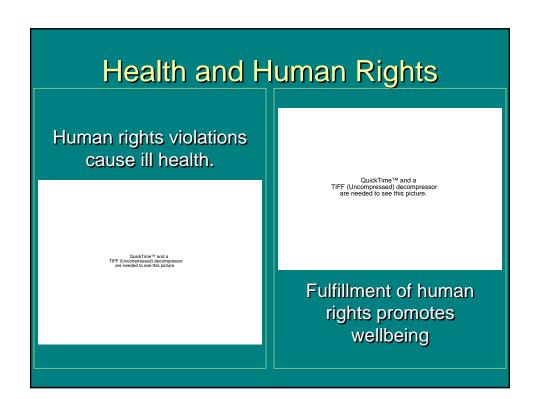
### Human Rights in Law

- International human rights treaties are binding on governments that ratify them
- Declarations are non-binding, although they contain many norms and standards that reflect principles which are binding in customary international law.
- United Nations conferences generate nonbinding consensual policy documents, such as declarations and programs of action.
- Nations may have their own human rights legislation

#### **Human Rights in Practice**

AKA "Human Rights Based Approach"

- Using human rights concepts to analyze situations and make decisions in daily life, eg. duty bearer and claim holder roles of stakeholders in a situation
- Using human rights standards to evaluate organizational or governmental programs and policies
- Using human rights as a framework for development



### Health and Human Rights

The Universal Declaration of Human Rights names education, food, standard of living, freedom from violence, participation in decision making, etc., as human rights.

Human rights are social determinants of health.

### Health and Human Rights

Health development can promote human rights

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From: A Health Handbook for Women with Disabilities. Jane Maxwell, Julia Watts Belser, and Darlena David. Hesperian Foundation, 2007.

# The Right to the Highest Attainable Standard of Health

# Article 12, International Convention on Economic, Social and Cultural Rights:

Ratified by 145+ countries

 The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.

# The Right to the Highest Attainable Standard of Health

Article 12, International Convention on Economic, Social and Cultural Rights:

- The steps to be taken by the States Parties to the present Covenant to achieve the full realization of this right shall include those necessary for:
- (a) The provision for the reduction of the stillbirth-rate and of infant mortality and for the healthy development of the child;
- (b) The improvement of all aspects of environmental and industrial hygiene;
- (c) The prevention, treatment and control of epidemic, endemic, occupational and other diseases;
- (d) The creation of conditions which would assure to all medical service and medical attention in the event of sickness.

#### **ICESCR General Comment 14**

- The RTH is related to and dependent upon the realization of other rights.
- The RTH includes health care AND the underlying determinants of health, inc. access to health education and information.



#### **ICESCR General Comment 14**

Four criteria by which to evaluate the right to health:

- 1. Availability
- 2. Accessibility
  · Non-discrimination

  - Physical accessibility
  - Economic accessibility (affordability)
  - Information accessibility
- 3. Acceptability
- 4. Quality

#### Special Rapporteur of the Commission on Human Rights on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health

#### Paul Hunt

- Gathers information on RTH
- Dialogues with and promotes cooperation between relevant actors
- Reports on the status of the RTH
- Makes recommendations on ways to promote RTH

www.ohchr.org/english/issues/health/right/index.htm

# The Right to Health in Practice: Accountability

- General mechanisms: fair elections, free press
- Human rights specific: inquiries by national human rights institutions
- Judicial: bills of rights
- Administrative: human rights impact assessments to help guide policy decisions

All these mechanisms are undeveloped compared to civil and political rights internationally and in most countries.

# Critiques of HR and Pitfalls of the HRBA

Strengths of a Rights Based Approach to Health

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# PHM Right to Health and Health Care Campaign

## PHM's Right to Health Platform

- Advocacy for RTH and Primary Health Care at international institutions, meetings.
   National circles do the same at national level.
- Research documenting effectiveness of PHC strategy
- Collaborate with efforts of affiliated organizations on social determinants issues
- All PHM activities are carried out with the principles of the charter in mind

#### The Global Health System Crisis

- Weakening public health systems
- Increased privatization of medical services
- Promotion of private insurance as financing for those who can pay, and as intermediary for indigent care
- Fragmented, donor driven programs typical where there is high level of poverty
- Shortage of health care personnel in poor areas worsened by "brain drain"
- Research, production, and distribution of medicine and technology driven by corporate profit

#### The Global Health System Crisis

- Technical solutions to health problems, ie. a vaccine for malaria or HIV/AIDS, are likely to fail because there is no system to implement them where most needed
- All of the trends make the implementation of PHC more difficult
- Public funds and personal wealth are increasingly transferred to private corporations
- Increased disparities in access to services and in health status
- A denial of the right to health and health care for the majority of the world's population

What is the situation in your country relating to privatization of health services or other health determinants?

#### What do we mean by "health care"?

- In the US = medical/clinical services
- In some other countries,
   = medical services + public health services
- In health rights groups, 'health care' is often contrasted with 'social determinants of health' as a less fundamental aspect of the RTH
- Primary Health Care means different things in US and internationally









### Campaign Overview - Phase 1

PHM country circles produce reports evaluating the RTHC in their countries. This process is a tool to:

- 1. involve diverse groups in PHM circles and build PHM in the country
- 2. lead participants to an understanding of the human rights framework

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### Campaign Overview - Phase 1

- develop lobbying and activist strategies to improve health policies, based on the evaluation
- increase local/national discussion of human rights impacts of government policies

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### Campaign Overview - Phase 1

- The Assessment of the Right to Health and Health Care at the Country Level -A PHM Guide
- Leads users through a 6 step evaluation of the national health system
- Contains basic information about the RTH

# Campaign Overview - Phase 2: Regional Assemblies

Participants from the same region, along with strategic allies, will meet to:

- 1. Share results of evaluations, policy demands and action plans.
- 2. Enable a dialogue between PHM and policy makers on the implementation of health system improvements.
- 3. Develop strategies for how PHM, at the global level, can support national demands for compliance with health rights.

#### Campaign Overview - Phase 3

Implement plans developed in the region assemblies:

- ? Lobbying/activism directed toward international institutions such as WHO, World Bank, Gates Foundation, corporations
- ? Submission of resolution or convention on the right to health at the WHO or UN
- ? Actions to change US role in promoting privatization, free trade, technical vs system research, "abstinence only" programs, etc
- ? Legal action

?????

# Why focus the campaign on the right to health care?

- Country committees need to have something in common to come together around in phase 2
- RTH is too broad
- Campaigns already underway on rights to education, food, water, housing, led by other groups
- Health system crisis needs to be addressed internationally

# Why focus the campaign on the right to health care?

- When PHM says "health care" it means
   Primary Health Care as defined in Alma Ata
   that includes addressing social determinants
- Campaign assessment guide focuses on clinical services, and outcomes for marginalized groups, but same analysis process can be applied to social determinants of concern in each country.

# Global level of campaign needs help with:

- Connecting RTHHCC with those other campaigns on social determinants
- Involving international NGOs
- Fundraising
- Website and communications

Questions? Ideas?