

Health and Human Rights: An Inseparable Synergy

by Priya Prakash

For the health policy to become more than health care policy, corresponding statistical systems will be necessary to provide the informational foundations to all concerned; e.g. an overall measure of health status (not only mortality) with reference to other indicators such as Gross Domestic Product or Consumer Price Index and other environmental factors such as levels of pollution and purity of water and foodstuff.

If the right to life is the most basic of all human rights, it follows that the right to health and health care are fundamental rights because you are denied medicine, clean drinking water or adequate nourishment is just as much a violation of your right to life as it is to die from a death squad bullet. Yet the right to health and health care has not been given priority by the human rights activists.

Despite the rhetoric of the indivisibility of all human rights, there is emphasis in the rights movement on such violations as torture, extra judicial executions, disappearance, and political imprisonment. Only now a strong pressure from developing countries' importance of social and economic rights have been acknowledged as important. Reason is not very far to understand, since society considers that basic amenities for quality of life are taken in the developed countries for granted as part of civic life, whereas the developing countries are still as in their endeavour to provide basic like clean drinking water, clean wholesome, unadulterated food items, have only started taking faltering steps towards these objectives.

There are more health problems in our country due to pollution in the air, water and food that is generating an under-nourished, lethargic and depressed population. These invisible enemies of the countries would cause irreparable damage to a whole generation of people.

The health care, where available, is to be regulated as per the standards, and code of conduct prescribed by the medical ethics, under supervision of the Indian medical council. Deviations in services and unethical practices, negligence by doctors are now also attracting

action under the consumer forum. But at this stage without going in the question of extent of coverage under the country's health-care system, the effort in this paper is to see the symbiotic relationship between the availability of life-nourishing elements and basic minimum services as part of development programs undertaken by the government and human rights, so that for people receives conservation of life in its optimum and efficient energies.

There has been a strong conservatism in the health profession. A part of elite in their society, doctors, do not desire to challenge established authority, as well as a naive assertion that health care be kept out of politics in other words preventive health care in the domain of sanitation and hygiene are kept out, divorced from medical domain, as only administrative concern.

Three concrete relationships that require investigation are first, the potential impact of health policies and second, the health impact of human right violations; and third how protection and promotion of health is inextricably linked to the protection and promotion of human rights. In this enquiry by bringing together the health and human rights activists, communities would open the way for interdisciplinary discourse that will broaden our understanding and awareness of these linkages.

The three essential ingredients that are considered the

bare minimum requirements for minimum quality parameters for human life are housing, safe drinking water, and fuel for food, these also form integral part of development program for poverty elevation schemes in the country. The Rajiv Gandhi's technology mission for safe drinking water has done extensive work but still 45 per cent of the rural house holds are without access to drinking water. Coupled with the problem of sewage disposal and most homes lacking toilet facilities compound the health problem. Gastrointestinal infectious diseases are among the most common diseases spread especially among infants and children. Other diseases like scabies and skin infection are also common due to lack of clean water required for personal hygiene. WHO designated "Decade of Clean Water Supply and Sanitation" which terminated in 1990 as had a major focus of the WHO program of "Health for all by the year 2000" and country should take full advantage of this to expand the coverage to facilitate specially the vulnerable sections of the society.

The largest number of absolute poor live in India. One of every three persons in the world lacking safe drinking water in an India. Every fourth person in the planet dying of water-borne or water-related diseases is an Indian. Question therefore arises whether the residents of the village lacking drinking water facility could take up the matter in a judicial forum on

their own behalf and on the general issue of denial of clean drinking water, as a fundamental human right?

The issue of environmental pollution, and impact on health of the communal has been facilitated in the IWT. The International Water Tribunal (IWT) is an independent forum for adjudicating water issues, initiated by 11 environmental organisations in the Netherlands and supported by approximately 90 European environmental organisations. This is funded by Dutch Government and non-governmental organisations and to some extent by the Green party in Germany and has been hearing petitions from several communities in Europe, Israel. The IWT jury is composed of independent panelists, assisted by a group of experts in the field of economics, international environmental law, biology, geology, public health, resources assessment and ecology. The cases listed by the IWT must be scientifically documented and presented in writing to the jury. The plaintiff and defendant are invited to argue their case before the tribunal. IWT judges determine responsibility and make recommendations to responsible parties to end unacceptable practices.

In India, the environment lobby has been actively pursuing cases of water pollution and other environment related cases in the legal forum with considerable success, but the question of human right and linkage with health hazards has not been taken up. Such

cases would be fit to be taken up with scientific factual data that establishes an evidence to derive at a conclusive relation and impact of use of polluted water on the residents of the effected area, and establish a case for justifiable human and fundamental "right to life" and as a charge on the administration.

An other non-medical care health related question that is worth pondering is why are some people healthy and others not in the same or similar environment. The determinants of health it is asserted of population could also lie in the social and economic environment, external to the health-care-system, that exert a major and potentially modifiable influence on the health of populations through biological channels that are now beginning to be understood. Studies show that, one such factor could be 1) job hierarchy correlated with mortality. It is observed that as employment grade or rank increase, mortality rate declines.

2) Another factor is changes in individual lifestyles and risk factor modification leading to interaction between the social environment and the individuals and variations in health arising from different life-cycle stages. 3) Life cycle is also related to the economic status positively related to increase in life exceptionally.

The scientist researchers advocate following changes in the health care policies 1) the integration of population health and cost effective ac-

countability into self-regulating function of the medical profession; and 2) development by the local government of a system, so that expenditure caps on medical care, are linked to health status of population. 3) availability of health-related information for preventive health care.

That is besides, beyond regulating the medical profession to ensure population health outcome, it also requires focusing public policy makers on path of improving health that reaches beyond medical care. For the health policy to become more than health care policy, corresponding statistical systems will be necessary to provide the informational foundations to all concerned; e.g. an overall measure of health status (not only mortality) with reference to other indicators such as Gross Domestic Product or Consumer Price Index and other environmental factors such as levels of pollution and purity of water and foodstuff.

A major political party has dramatically announced to renounce hartal as a political weapon and not call for hartals in the future — even while in the Opposition. It is a noble gesture. But mere declaration and continuous repetition will not dislodge hartals. There are several implications in this decision or proposal, which have to be examined and sorted out, for others to understand, accept, and follow.

To undertake this huge task of conversion to normal behaviour, of a habit deeply embedded in the society inside different professions, and trade bodies, the political leaders have to take the initiative. Political hartals is just one aspect of the whole spectrum, but politicians, have the power to provide the lead or innovation, which is later followed by other groups, according to the 'trickle-down' process observed in other fields also (technology, trends, fashion and style, dress, language, mores).

The hartal virus from politics has infected other areas of the society. The anti-hartal campaign has many dimensions. The trade union strikes began sometimes after the start of the industrial revolution as the factory work forces in human resources provided tremendous concentration of power for manipulation, exploitation and bargaining.

Hartals can hardly be controlled or contained by mereious announcements and thunderous rhetorics, and then hope for the best, because one person or one party or group is not involved. Today politics has become a very sensitive issue affecting all citizens, including those who are not political activists. The no-hartal call is naturally getting political mileage and publicity out of this resolution or propaganda (the real nature will be revealed later, involuntarily). This concept is at present in the proposal stage; hence it has to be treated as such.

First the co-workers have to be won over inside the organisation, at all the hierarchical stages; then the roots outside in the society have to be pulled out one by one (use an insecticide, pesticide, or antibiotic) so that the hartal is stopped, to teach their adversaries some lesson? When something becomes a weapon, how to carry out the de-armament process? The deterrent and checks and balances have to be identified, and activated to every one's satisfaction. Platitudes will not remove the bane or hartals.

This campaign will need the involvement of the 'hartal leaders' in the other sectors (trade and labour unions, associations, student bodies, etc) at the top-level decision-making, planning and decontamination programmes. Unilateral decision is impractical, and may not work. The idea is good, and all welcome it. How to implement it? Removing political hartal is not the end but the beginning of a cleansing process in entrenched mind-set of defaulter sectors.

Each person interviewed publicly will denounce hartal, regardless of political or apolitical.

Deculturing Hartals

by Alif Zabir

HARTAL is a culture. A new culture is not easy to nurture and develop. It is a slow and evolutionary process, once it is mentally accepted (same for style, fashion). Hartal have many binding and auxiliary forces (which change the cultural environment for adaptability).

Any social change is a complex process, involving many factors, human and infrastructural. A culture has roots. To contain or remove an undesirable culture, the roots, every strand of it, have to be removed. It is an easy and quick process?

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To undertake this huge task of conversion to normal behaviour, of a habit deeply embedded in the society inside different professions, and trade bodies, the political leaders have to take the initiative. Political hartals is just one aspect of the whole spectrum, but politicians, have the power to provide the lead or innovation, which is later followed by other groups, according to the 'trickle-down' process observed in other fields also (technology, trends, fashion and style, dress, language, mores).

The hartal virus from politics has infected other areas of the society. The anti-hartal campaign has many dimensions. The trade union strikes began sometimes after the start of the industrial revolution as the factory work forces in human resources provided tremendous concentration of power for manipulation, exploitation and bargaining.

Technically — applying the energy principle to a system — how much energy is required to remove some evil force something from a system long embedded in the society? The additional energy required is proportional to the energy input injected earlier and thereafter stored potentially to generate hartals. Hartal is a mass movement containing huge potential and kinetic energies, which have to be dissipated properly (without short-circuiting), which invite retaliation. Sermons have low-energy content.

The mentality has to be re-oriented — not an easy task in an undisciplined society wallowing in poverty and illiteracy. The whole operation has to be planned properly (with consensus) because human and psychological issues are involved, in the order of lakhs of people engaged in hartal campaigns. Another vital question: what are the guarantee and the punishment if the no-hartal principle is revoked unilaterally at a future date due to 'circumstances beyond control', as the present opposition is claiming, and has threatened non-stop hartal, to teach their adversaries some lesson? When something becomes a weapon, how to carry out the de-armament process? The deterrent and checks and balances have to be identified, and activated to every one's satisfaction. Platitudes will not remove the bane or hartals.

Therefore the no-hartal concept has to be approached in a pragmatic manner and the detailed plans of the project have to be drawn up for implementation by the proposers, and the public in general. A national consensus appears to be mandatory. First consensus, then talk about 'no-hartal'.

The concept of 'freedom' is also illusory after two decades, as we could not handle the consequences in a practical manner. Time and again we have failed to separate reality from dream.

Is Truth the First Casualty?

Newsgathering organisations in the West are increasingly trying to train their correspondents to handle themselves in places where their lives may be in danger. A Gemini News Service correspondent reports on his experience of one such training programme, and on what difference it might make to coverage of the more troubled areas of the world.

Peter Moszynski writes from London

When confronted by men with guns, so what they say. They can get very unhappy if you don't, and that can really spoil your day.

Truth is the first casualty of war, and journalists are increasingly targets themselves. Many media companies now try to train staff to cope better in dangerous situations: war zones, civil unrest and other hostile environments. Training newsgatherers visiting high-risk areas is a growth industry: most organisations now find it essential for insurance purposes.

After some years working in Africa I have been in a fair share of hostile places: wars, civil disturbances, humanitarian emergencies, as well as encountering the regular difficulties posed by extreme climate and venomous critters.

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