

A global campaign for the right to health

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The People's Health Movement, a global network of civil society groups, researchers, activists and teachers involved in health, proposes the launch of a global campaign on the Right to Health.

PHM would like to invite civil society organizations, interested individuals and groups to participate in discussing the possibility of hosting such a campaign in South Africa. It would also contribute to building civil society for the Third People's Health Assembly, planned for 2010 at an African venue (to be determined). This edition of *Critical Health Perspectives* sketches the background to the campaign and some of the thinking behind it.

Background

Although the Alma Ata Declaration declared health as a human right almost four decades ago, the intervening years have seen health status and access to health care decline in many developing countries despite great advances in medical technologies worldwide.

Recent developments in international human rights law have opened up new opportunities to give effect to the provisions of the International Covenant on Social, Economic and Cultural Rights with regard to the right to health.¹ In line with our national commitment to human rights, post-apartheid South Africa ratified the ICESCR in 1994. When a country ratifies a UN covenant, it becomes legally binding in that country. Rights to health care are also enshrined in our Constitution.

Article 12.1 of the ICESCR specifies '*the right of everyone to the enjoyment of the highest attainable standard of physical and mental health*'. To achieve this, the government must at least take the steps 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 access to all medical service and medical attention in the event of sickness.

In August 2000, *General Comment 14* further clarified these core obligations of the state in regard to health.² It interprets the right to health "*as an inclusive right extending not only to timely and appropriate health care but also to the underlying determinants of health, such as access to safe and potable water and adequate sanitation, an adequate supply of safe food, nutrition and housing, healthy occupational and environmental conditions, and access to health-related education and information, including on sexual and reproductive health*".

It highlights the following interrelated and essential elements of health care:

- a. *Availability*. Functioning public health and health-care facilities, goods and services, as well as programmes, have to be available, including hospitals, clinics and other health-related buildings, trained personnel receiving domestically competitive salaries, and essential drugs (defined by WHO Action Programme on Essential Drugs).
- b. *Accessibility*. Health facilities, goods, services and information about health have to be accessible and affordable to all, without discrimination, especially the most vulnerable or marginalized sections in the population, such as ethnic minorities and indigenous populations, women, children, adolescents, older persons, persons with disabilities and persons with HIV/AIDS.
- c. *Acceptability*. All health facilities, goods and services must respect the culture of

¹ www.unhchr.ch/html/menu3/b/a_ceschr.htm

² [www.unhchr.ch/tbs/doc.nsf/\(symbol\)/E.C.12.2000.4.En?OpenDocument](http://www.unhchr.ch/tbs/doc.nsf/(symbol)/E.C.12.2000.4.En?OpenDocument)

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individuals, minorities, peoples and communities, and be sensitive to gender and life-cycle requirements. They must observe medical ethics including confidentiality.

- d. *Quality.* As well as being culturally acceptable, health facilities, goods and services must also be scientifically and medically appropriate and of good quality.

A key aspect of the right to health is the participation of the population in health-related decision-making at the community, national and international levels.

Why campaign for the Right to Health?

As part of our constitutional commitment to realizing rights, the promotion of the right to health is a key obligation for the state and civil society. Health is one of a range of socio-economic rights, all interdependent and indivisible, essential for human well-being and development. For example, any attempts to meet the objectives of the Millennium Development Goals will have to do so by advancing the right to health, without which its ambitious targets cannot be met.

Unfortunately, we continue to see incidents where people's rights to health are violated. A campaign that focuses on the right to health will help to identify system failures, secure redress for those unfairly treated, and prevent future abuses from taking place.

Who would host the campaign?

Although the campaign has been initiated by the People's Health Movement, we believe that it should be owned by a coalition of civil society and other groups who believe in its objectives and philosophy. We are therefore starting a process of consultation involving as wide a range of organizations as possible. Like the Poverty Hearings, hosted jointly by the SA Human Rights Commission and SANGOCO in 1998, we believe partnerships between civil society groups and state bodies responsible for human rights can play an important role in advancing the realization of socio-economic rights in South Africa.

What form would the campaign take?

We envisage that the campaign would take a similar approach to the Poverty Hearings held some years ago. We would work to solicit testimony from ordinary South Africans who have experienced violations of their right to health both within the health care system and outside. We would also solicit accounts of positive steps taken to advance the right to health across a range of settings. The campaign would require careful planning, be timed to raise awareness prior to the hearings stage, and have sufficient broad-based participation to make it a powerful voice to policy makers.

The objectives of the campaign?

1. The campaign would aim to raise awareness in South Africa of what the right to health entails and advance people's understanding of how this right can be made a reality, not just in health care, but also in the provision of services that generate the conditions necessary for good health.
2. We also anticipate that the campaign might spur the strengthening of civil society organizations in health. Currently, civil society in the health sector is much weaker than in the 1980's when organizations campaigning for the right to health were a central component of the mass democratic movement. The campaign will help to re-establish vibrant civil society groups in the health sector.
3. The campaign would enable South African organizations to link up with international networks of like-minded health groups as part of the campaign, thereby building international solidarity and capacity to advance the right to health.