Don't forget health when you talk about human rights

Last week, Human Rights Watch (HRW) released World Report 2015, their 25th annual global review documenting human rights practices in more than 90 countries and territories in 2014. The content is based on a comprehensive investigation by HRW staff, together with in-country human rights activists. In his opening essay, HRW's Executive Director, Kenneth Roth, writes, "The world has not seen this much tumult in a generation... it can seem as if the world is unravelling". Indeed, this 656-page report is a grim read in a year marked by extensive conflict and extreme violence. But when one delves deeper, there is a hidden story that often does not make the headlines. That story is the health dimension of human rights. Viewed through the lens of health, the report contains several compelling and disturbing themes.

First, the countless attacks on health-care facilities and health workers in conflict and crisis settings. Examples are legion. The targeted killing of more than 70 polio vaccination workers in Pakistan and Nigeria by militant groups. Fear of Ebola in south-eastern Guinea when the virus emerged in early 2014, prompted attacks on treatment centres (the most notable attack was the brutal murder of six health workers and journalists). In conflict zones, violations of human rights and international humanitarian law have been seen with arrests of health workers providing care to government protesters (in Bahrain and Turkey), and the indiscriminate bombing of hospitals, killing and injuring health workers (in Syria and the Gaza Strip). The pressure on nations to stop these attacks has been mounting. In late December, 2014, the UN General Assembly passed a resolution calling for concerted and specific actions by States to protect health workers from violence and to assure patients access to health care in situations of conflict and insecurity.

Little attention was paid to the rights violations that occurred during the early stages of the Ebola response in west Africa, especially from imposed quarantines. These interventions only reinforced fear and mistrust at a time when health providers needed to strengthen a community-based response. According to HRW, access to routine health services within the quarantine zones was limited, breaching international human rights law. Furthermore, there have been reports of increased sexual risk taking because of the collapsed economy, including areas under quarantine and among young people who

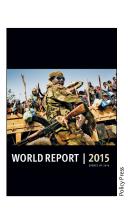
were excluded from school because of the epidemic. There have also been accounts of increased sexual violence against children in Sierra Leone.

Gender-based violence and the violation of women's and girls' reproductive rights were also prominent in 2014. Gender-based violence is widespread and the report is littered with examples of rights abuses worldwide. These cases include countries where abortion is illegal and access to reproductive services is limited, such as in countries in Latin America. Involuntary sterilisation (in India and Uzbekistan) are common and are often done without a woman's informed consent and in unsafe medical facilities.

Mental health care in many countries is dire, especially for individuals living with other disabilities. In India, fewer than 20% of people who need mental health care have access to treatment. Because of stigma and lack of services, families are unable to cope, which often leads them to abandon or institutionalise relatives with disabilities. There is also inadequate access to palliative care. The report highlights the situation in Armenia where needlessly complex prescription and procurement of opioid drugs means endless suffering for terminally ill patients due to the absence of pain medicines. Encouragingly, the 2014 World Health Assembly unanimously adopted a ground-breaking resolution that urges all countries to integrate palliative care into their health systems. India, Kenya, and Ukraine are countries in which progress has been made, but challenges remain, especially in the scarcity of trained health-care workers in palliative care.

Other rights violations against health include poor access to clean air and water. Toxic pollution is a serious threat to health worldwide, mostly affecting the poor and the powerless, and the report shows that governments have been slow to respond.

This latest HRW report is an important call to arms to protect health as a fundamental human right. It is a pity that HRW did not identify health as a core element in its analysis, not only as part of a comprehensive package of human rights protections but also as a necessary component of resilient human security. Their analysis should prompt all governments and international health organisations to reflect carefully on their actions to make health a core responsibility and right of all citizens. ■ The Lancet



For the **Human Rights Watch World Report 2015** see http://www.hrw.org/world-report/2015/