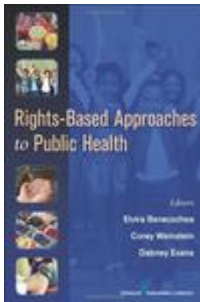


Public Health and Human Rights: Realigning Approaches to Improve Global Health Problems

A review of



Rights-Based Approaches to Public Health

by Elvira Beracochea, Corey Weinstein, and Dabney P. Evans (Eds.)

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At a time of heart-crushing stories of human deprivation due to regional conflict, forces of nature, or uncaring and at times immoral state policies, the world's attention turns to the public health community for problem assessment and effective deployment of resources and programs to stabilize critical conditions on the ground. With great timing, the editors of *Rights-Based Approaches to Public Health* offer a targeted and innovative strategy to combat global health problems. Balanced, comprehensive, and steeped in the historical traditions of human rights, the book persuasively moves the reader from abstract conceptions of inalienable human rights to evidence-based, pragmatic solutions that highlight the systematic integration of human rights principles in human development work.

For the audience of public health students, seasoned and novice public health professionals, health care practitioners, and policy experts, the editors provide an overview

of a rights-based approach that is elegant in simplicity and highly executable in design, referencing the UN's (2000) General Comment 14 on the Right to the Highest Attainable Standard of Physical and Mental Health: "Every human being is entitled to the enjoyment of the highest attainable standard of health conducive to living a life of dignity" (para. 1).

The editors and authors present a framework for a rights-based approach that is normatively based on international human rights standards and that cannot be easily dismissed as political in nature or hegemonic. Most important, the editors charge some of the world's most respected public health practitioners and human rights advocates to craft sensible methods of operationalizing the basic human rights principles outlined in the UN's (2003) *Human Rights-Based Approach: Statement of Common Understanding*, which posits that human rights are universal, inalienable, interdependent, and interrelated. In essence, they have created a veritable "how-to" guide that, when implemented, can in sustainable fashion uplift the human condition worldwide.

Universality of Rights-Based Approaches: Uniting Us All?

As detailed by the editors, a cardinal feature of a rights-based approach is its timelessness and universality, increasing its appeal to professionals who labor to keep the plight of marginalized communities on the global radar screen. By using the universal language of rights-based approaches, public health professionals may be better positioned to leverage greater social and political capital and enhanced resource allocation for their cause. Striking examples of rights-based approaches in diverse settings are outlined in the book, from demands for water rights in Haiti to conflict-affected settings such as the Gaza Strip and advocacy of children's rights in Kosovo.

If the dramatic contemporary examples outlined in the book are not sufficient, the authors could easily extend the discussion further and call attention to the severe drought and attendant famine in Somalia, where the UN's Food Security and Nutrition Analysis Unit (2011) found that nearly 250,000 people continue to face imminent starvation, or the Democratic Republic of the Congo, where U.S. researchers note that more than 400,000 women are raped each year (Peterman, Palermo, & Bredenkamp, 2011). In all instances a rights-based approach can reverse the erosion of socioeconomic stability that fosters such injustices while holding the state accountable for protecting and fulfilling the rights of individuals in affected communities.

Inherent in a rights-based approach claim that individuals have the right to the highest attainable standard of health is the realization that health professionals cannot disentangle physical health from the myriad social and economic factors that influence health. If a rights-based approach empowers rights holders in asserting that human rights are universal

and inalienable, then it is the incumbent responsibility of the duty bearer—entities sanctioned to protect society—to ensure the fulfillment of those rights. This conceptual framework is in contradistinction to traditional needs-based approaches, whose altruistic intent and actions may be perceived as both patronizing and lacking in accountability, and thus not amenable to legal redress in the event of adverse outcomes.

Marrying Rights-Based Approaches to Health Care Reform

A critical chapter for U.S. readers (Chapter 4) is “A Rights-Based Approach to Health Care Reform.” In the United States, profligate health care spending has not translated into improved health outcomes when compared with those of other developed countries. A fundamental, if not fatal, flaw in the U.S. health care delivery system is the disconnect between the high-quality acute, specialty care available to some who have the ability to pay in a system rooted in free enterprise and the haphazard primary and preventive care that is unevenly distributed across locales. Although unintended, this result is not unexpected in a country that has failed to embrace a full definition of *health*.

The divide on the proper role of government in health care in the United States was presaged in the response to the World Health Organization’s (1946) definition of *health*, promulgated in the 1948 UN convention:

a state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity. . . . Governments have a responsibility for the health of their peoples which can be fulfilled only by the provision of adequate health and social measures. (p. 2)

This provision was rebuffed on the grounds that it was outwardly socialistic in intent and lacked legal standing, on the basis of the interpretation that health care was not among the enumerated rights in the U.S. Constitution.

The perennial argument surrounding the government’s role in health care has since devolved into rants about market-based reforms as opposed to moral-based claims of health care as a right for every citizen. Such a false dichotomy only promotes greater social division; consensus will be gained when every country affirms the connection between health and human rights. A rights-based approach to health, which has been relatively absent from the contemporary discourse on health reform, could effectively realign staunch political forces around the unassailable conceptual framework of health as a public good rather than a commodity.

The rights-based approach permits a more nuanced view of the roots of health inequities; consequently, more systematic steps can be taken to ameliorate inequities since a

framework exists that addresses the social determinants of health. *Rights-Based Approaches to Public Health* outlines several international treaties, such as the 1977 International Covenant on Economic, Social, and Cultural Rights, which would reduce stillbirth rates and infant mortality by paving the way for special protection for mothers in the childbirth period. Although the United States signed the treaty, it did not ratify it and so failed to allocate the requisite resources to enforce the treaty.

Hopefully there will be greater U.S. embrace of the UN's Millennium Development Goals—explicit milestones for the realization of global human development that offer an opportunity to reduce health inequities by spurring economic development. The United States, in its effort to reduce health inequities as outlined in the Centers for Disease Control and Prevention's (2011) "Health Disparities and Inequalities Report," will find willing partners in realizing two seminal Millennium Development Goals: reducing child mortality and improving maternal health.



Limitations of Rights-Based Approaches

The authors and editors of *Rights-Based Approaches to Public Health* rightfully acknowledge that the still-nascent field of rights-based public health has limitations that have constrained its widespread adoption. Rights-based approaches rest on the belief that individual empowerment and restored human dignity can be ensured through programmatic efforts that address the social determinants of health. Social determinants of health, as espoused by the World Health Organization's Commission on Social Determinants of Health (2008, p. 2 of Executive Summary), are "the conditions in which people are born, grow, live, work and age In their turn, poor and unequal living conditions are the consequence of poor social policies and programmes, unfair economic arrangements, and bad politics."

Criticism abounds that such an approach is too costly, time intensive, and inherently difficult to measure since it involves restructuring the social fabric of disadvantaged communities and raises the potential for conflicts due to encroachment on national sovereignty. There is correspondingly a lack of solid evidence supporting the effectiveness of rights-based approaches. Finally, a rights-based approach in public health can come across as canonical, even prescriptive in its assertion that individual rights warrant the same protection as societal ones (Berman, 2008).

The book concludes, in powerful tones, that rights-based approaches provide public health professionals the framework and the infrastructure to address the needs of vulnerable populations and society at large. Public health students, academicians, and both medical and public health practitioners should feel empowered to act with this transformative approach that asserts the dignity of humankind.

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