The Continuum of Health and Human Rights Issues

Rob Moodie, MBBS, MPH

A Report on the Seminar on Health and Human Rights at the Macfarlane Burnet Centre for Medical Research, December 3, 1994, Melbourne, Australia.

A continuum of health and human rights issues ranging from the most intimate situations, such as the patient-health practitioner relationship to the relationship between the state and its citizens, was described by Bebe Loff in her opening address to the Seminar on Health and Human Rights, organized by the Macfarlane Burnet Centre for Medical Research. Using ethical principles identified by the philosopher Jonathan Glover, she explained that even minor expressions of disrespect toward others, often disguised as being in that person’s or the public’s interest, can lead to desensitization, devaluation of the individual’s inherent self-worth, and to wider and more systematic abuses.

The Seminar followed the First International Conference on Health and Human Rights, held in Boston at Harvard University in September 1994. The Seminar explored a wide range of health and human rights issues. Diane Otto of the Faculty of Law at Melbourne University explained how she believes interest in health and human rights originated in an end to the Cold War, which resulted in moving beyond civil and political rights to a
broader discourse on social, economic, and cultural rights. Traditional views of rights have been challenged by developing countries, who argue for rights of development; environmentalists, who argue for the rights of future generations; and feminists, who expose gender bias in current articulations of rights. Growing influence of the market on provision of health care, and the participatory, rights-based model used in response to the HIV/AIDS pandemic, are two other reasons for increased interest in health and human rights.

Winnie Chikafumbwa, Founding Director of the National Association of People with AIDS in Malawi, spoke of her own ongoing confrontation with discrimination as an HIV-positive person. She discovered she was HIV-positive after the birth of her fourth child. Her husband deserted her; she lost her job and was advised to keep silent about her illness.

Another speaker was Ian Anderson, Medical Director of the Victorian Aboriginal Health Service. He explained that Aborigines, more than any other group in Australia, have been acutely aware of abuses of their human rights and of the impact it has had on community and individual health. He explained how these abuses were initially framed in the biological terms of social Darwinism, with “Europeans at the top and Aborigines at the bottom.” Subsequently, cultural rather than biological terms were used to explain abuses of human rights. Continuing discrimination is currently being framed as the “special needs” of Aboriginal people—and as a result, resource allocation is considered a special gift, rather than a right.

Mr. Justice Michael Kirby, Special Representative of the UN Secretary General on Human Rights in Cambodia, said that development of human rights for people in the Asia-Pacific region must go hand-in-hand with ensuring their right to health and well-being. He noted that Cambodia has suffered rights abuses at every stage of the continuum, and made health rights recommendations in four areas. These include the continuing and urgent need to upgrade the infrastructure and delivery of health services, the priority that must be given to HIV prevention, the need to develop essential drug policies and practices, and the need to create land-mine awareness education and mine clearance.

In addition, the Seminar examined issues of war and health, lessons learned from the HIV epidemic, and the increasing im-
The seminar was also concerned with local abuses of human rights within the Victorian health care system. Participants spoke of a climate of fear, in which health workers avoid speaking out for fear of dismissal, and innovative public health programs such as those for HIV prevention and hospice care are undermined. This was a stark local illustration of the health and human rights continuum, in which small abuses gradually dismantle accepted norms, and eventually lead to wider and systemic human rights abuses.

The Seminar has already led to the development of a postgraduate health and human rights course to be conducted later this year in Melbourne. Plans made at the Seminar will contribute to the establishment of a research and advocacy group based at the Macfarlane Burnet Centre and to linkages with other international groups concerned with health and human rights such as the François-Xavier Bagnoud Center for Health and Human Rights and Physicians for Human Rights—both based in Boston, USA.