

Hauora - Everyone's Right

From macro to micro

Anton Blank reports on the symposium that Health Promotion Forum held at the Waipapa Marae, University of Auckland, 31 October, 2005

Even though the idea for this hui germinated long before events at Bangkok, this was our attempt to bring the human rights discourse home and localise it.

What we tried to do was open the day with a broad framework, which was then supported by ideas from other spheres. And in the process we covered issues for some of those groups who are most vulnerable.

The programme was as follows:

- **The human rights approach – tools for improving public health.** Alison Blaiklock.
- **Human rights, indigenous rights and Te Tiriti o Waitangi.** Riripeti Haretuku.
- **Applying a human rights approach in our work.** Cindy Kiro, Teuila Percival, Warren Lindberg, Philip Patston, Ruth De Souza.

Here's how Dr. Blaiklock explained the overarching framework

New Zealand has a historical commitment to human rights, and we can see this evidenced in things like:

- Te Tiriti
- Votes for women and the development of feminism
- The nuclear-free stance

There are also cultural values that we take for granted that paint a picture of a country naturally inclined towards human rights: the sense that New Zealanders have of egalitarianism, teamwork and compassion for example.

A critical thought

Everyone has rights, so we have to recognize and respect the rights of other people. Those rights do not come unencumbered however. If we expect to be free, we must also contribute to the development of the communities in which we live.

Conceptually human rights covers many bases but has a sense of wholeness, because at the core it is about defining humanity. We are concerned with maintaining the dignity of all people, and this means defining what rights *all people* have.

International treaties place binding obligations on states to ensure that:

- all people are given rights in the first instance
- those rights are made active in civil and legal life
- those rights are protected, not violated

When we think about translating this higher thought into our work in public health, what we mean is that all people must be able to enjoy the highest attainable standard of physical and mental health. This is at the core of our understanding of what it means to be human, and when we look across the globe we are clearly falling well short of what should be expected.

Minimum core obligations in health

- Public health strategy to improve health
- Transparent participatory processes
- Food, housing, sanitation and clean water
- Access to health facilities and essential drugs, especially for vulnerable groups

UN Committee on Economic, Social & Cultural Rights, General Comment 14/2000

A rights-based approach to public health

- Protects human dignity
- Ensures non-discrimination
- Promotes participation and accountability
- Provides a way of working out how to balance conflicting interests and needs
- Pays special attention to equity and those who are most disadvantaged

So how do these principles help us in our work? They shift the focus of our work to dealing with inequity and determinants – and provide tools for dealing with planning delivery and evaluation.

Hauora – Everyone’s right

Dame Sylvia Cartwright, the Governor-General, opened the symposium.

Excerpts from her opening speech:

“Human rights standards are not only a useful model, but a necessary tool when trying to enact cultural change and ensure social justice. Human rights models, be they local or derived from larger international initiatives, can also be useful tools in the pursuit of a healthier community. Almost invariably they are principles that have been developed over many years, with the collaboration of experts both academic and consumer, and have been widely accepted as a relevant measure for the improvement of human health and welfare. They are not dreamed up by those who wish to do good, but lack the knowledge and wisdom to achieve a practical outcome. They are values born of a depth of human experience. Identifying health as a human rights’ issue has long been part of the struggle for equity, here and internationally, be it for women’s rights, gay and lesbian rights, rights for the elderly, the disabled, indigenous peoples and increasingly for men too.

“Gender, ethnicity and economic status are clearly interconnected, especially when we are considering the issues that surround health legislation, education, access, resources and prevention.

“Poor health can also be the result of active or unintended discrimination. I am reminded of the words of Martin Luther King, Jr. who said that ‘of all the forms of inequality, injustice in health care is the most shocking and inhumane

“Here in New Zealand we face serious challenges in relation to our health. We are regularly saddened by reports of a diabetes epidemic, increased obesity, the spread of HIV/AIDS, and other preventable illnesses. We have new and frightening issues to face: rationing of health care, prevention of diseases, policies that suddenly are hampered by greater fear of the preventative than the illness, alternative providers peddling hope, finding the funding for ever changing technology and dampening demand from the wealthy to provide for the poor.

“It is axiomatic that when we are healthier, we are better able to participate in both the public and private lives in our communities, that healthier communities are more productive, and children are better cared for. Continued investment in health promotion is essential for those communities, which will see the value of disease prevention through education, legislation, support and treatment services, refuges, community and corporate responsibility, and a sense of solidarity - a sense that the health of the community is the responsibility of that community. These are all rights issues the right to the best care available, the right of equality of access; they are the rights both of the individual and of the community of which he or she is part. Health care without consideration of rights, will not meet the needs of either.

“Having spent much of my professional life observing the way in which luck and the concern and care of others for those less fortunate can make a real difference, I endorse and support the work you are doing. The organisations that make up the governing council and the membership of the Health Promotion Forum address many of the challenges facing this country and the world today.

“Yours is not an easy task, and yet the passion, the experience and the expertise you bring to forums like this one, the organisations you work for and with, the communities you serve are a powerful testimony to both the needs and the triumphs of health promotion in New Zealand today and in the future.”

Pulling the Threads Together

Dr. Mihi Ratima, Associate Professor, Maori Health, Auckland University of Technology, pulled the threads together nicely at the end of the day and gave us some pointers for practically applying the Human Rights framework:

Workforce development

Using the human rights approach will require awareness raising among communities, and activities to enhance the knowledge and skills of health promoters.

Sameness vs equity and social justice in health

We need to keep in mind that the goal is not sameness, that rather we are aiming to achieve equity and social justice for a range of groups

Diversity

Rights, like the right to health can be achieved and expressed differently. Using Maori as an example, the delivery mechanisms required to provide interventions for rural Maori communities are likely to be quite different from those used by a Remuera based PHO, and likewise what each community considers constitutes good health may also differ. For Maori, 'being Maori' and therefore being able to express oneself culturally as Maori is likely to be a key element of what it is to achieve good health.

Human rights audit/equity-focused health impact assessment

A useful tool to consider is the equity-focused health impact assessment, which is able to be used to gauge the impact of policies and programmes in all sectors in relation to health inequalities. The tool is recommended for use in the Bangkok Charter.

Achieving health as the basis for achievement of potential

The human rights approach provides use with a useful way forward towards the goal of promoting the achievement of health as a basis for the achievement of human potential.



A Conversation with Philip Patston

Philip Patston opened his address to the Hauora Forum with this thought from Edward De Bono:

“Any idea that does not raise a howl of protest is probably not a good idea”

And the most radical idea that Philip threw into the mix was this one:

“My spiritual belief is that my soul chose my life circumstance in order to raise human consciousness about diversity.”

Some of us may have problems with this idea of predestination, especially when your soul chooses to materialise within one of the most vulnerable groups in society. To Patston it means: “Because I believe that my soul chose that I be disabled, it means that I am no longer victim to my circumstances. I have a higher purpose. My existence is about what I *can* do, rather than what I don't have. My spiritual belief is that my soul chose my life circumstance in order to raise human consciousness about diversity.”

Here's another idea from Patston: dysfunction-phobia. He describes this as the fear or hatred of being able to function independently.

“Humanity is in denial that anyone, anytime, can lose function,” he said.

“In a society that values people for what they do, losing function means losing value. As a result, most people – even many disabled people, ironically – experience chronic and subconscious dysfunction-phobia. They feel like half a person because they don't have all the functionalities that society regards as normal.”

It's the old glass is half full view of the world. Day to day this means individuals in all their diverse forms are motivated by what they have, rather than what's missing. It's about personal empowerment. But these ideas have value further up the food chain too.

“By being realistic and honest about the variety in human beings’ capacity to function, we can make far more useful decisions about social policy and create value in society. In order to move forward constructively, each and every one of us needs to hold ourselves and each other accountable for the kind of world we create, instead of bickering over who is morally superior.”

All very interesting but how do these ideas fit into the Health and Human Rights discourse that is emerging? And whether we like it or not discrimination exists. There’s no level playing field. Groups like people with disabilities, Maori, children, women – they all experience discrimination. They don’t have the same access to wellness and health services that others do.

“It’s about the personal and political, not either/or. We need to look for change at every level. Oppressed people need to change their paradigm so they can go about changing their circumstance, and this means advocating for change at all levels. Human Rights is somewhere along the road from ignorance to collective self-responsibility,” Patston argues.

“As a concept it’s a tool that ensures equity. The problem we experience is that when diverse groups fight for equity, others assume that somehow they’re going to miss out on something – that by giving to one group we’re taking away from another. So when we ask communities to make buildings accessible for people with disabilities, we’re not saying make them inaccessible for others...”

Patston has effectively developed a strength-based approach to Human Rights, and for groups who are outside the square of the majority he believes it’s about figuring out how to succeed in a way that’s possible.

“When I was fifteen I didn’t know anyone who was older and disabled. I believe that young disabled people need to see me so they know what’s possible. It’s not about vanity. I believe if you are good at something, you have a duty to share it with other people.”

And it all comes down to education. The education system doesn’t work for anyone he argues – it teaches kids to compete at all levels.

“Right down to competing for attention in class. It sets up a hierarchy of achievement, rather than teaching people to work in groups.”

Among a string of joking references at the Hauora Forum Patston suggested he should be eradicated, to curb the spread of political correctness.

“Political beliefs range left to right – what is ‘correct’ from one political point of view will always be ‘incorrect’ from the other,” he said.

“It’s a stupid term that itself should be eradicated. I’m a disabled, gay, white man – what does that make me? Politically correct or incorrect?”