

# **UN Commission on Human Rights**

**Agenda item 10**

**Economic, Social and Cultural Rights**



**Statement  
by  
the  
World Health Organization**

**Geneva, 1 April 2003**

WHO's Director-General, Dr Gro Harlem Brundtland, addressed the Commission on Human Rights on March 20<sup>th</sup>, pledging WHO's continued commitment to health and human rights and the right to health, in particular. As she outlined in her speech, WHO's agenda on health and human rights has evolved since the founding of our Constitution, which sets out the enjoyment of the highest attainable standard of health as a fundamental right of every human being, over fifty-five years ago. Today, health as a human right is more relevant than ever before.

This increased recognition of the importance of the right to health has manifested itself in the appointment of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health. We congratulate the Commission on Human Rights on his appointment. We also welcome efforts taken within the UN human rights system to advance other economic and social rights essential to health, such as the adoption of General Comment 15 on the Right to Water by the Committee on Economic, Social and Cultural Rights.

The key themes of the Special Rapporteur on the Right to Health, poverty and discrimination are central to the enjoyment of the highest attainable standard of health. We look forward to working closely with him to ensure a more widespread understanding and application of the right to health. Specific collaborative projects on the right to health, include work on indicators and poverty reduction strategies.

WHO is committed to the attainment of the United Nations Millennium Development Goals. Health is a means to reduce poverty and attain sustainable economic development. This is one important reason why we support them. Another is because we regard them as an important step in the progressive realization of the right to the highest attainable standard of health.

Access to essential drugs is one of the most cost-effective elements of modern health care and the Millennium Development Goals include access to essential medicines as one of the 17 health-related indicators. Access to essential drugs also constitutes an important element in the fulfillment of the right to health. Today, over one-third of the world's population, and over half the population of the poorer countries in Asia and Africa, still lack access to essential medicines. In over 30 countries public spending on medicines is still less than two dollars per head per year on account of unaffordable prices and unreliable supply systems.

With globalization, free trade in goods and services, the development of increasing sophisticated health care technologies, and the revolution in information technology, many new issues have emerged in global health. Of particular concern to WHO and its Member States is the complex relationship between innovation, intellectual property rights and public health. International law provides an important framework for addressing all these issues. The fundamental health right to the highest attainable standard of health should be at the centre of this framework.

This takes me to the concept of human security, so eloquently referred to by the High Commissioner for Human Rights in his opening remarks to the Commission on Human Rights, as essentially being about the fulfilment of human rights- civil, cultural, economic, political and social. Health knows no boundaries, whether they be national, social or political. And the right to health is interdependent with all other human rights. Think of civil and political rights such as freedom of information and equality. We know that in societies where there is freedom to seek, receive and impart health information, it is more likely that there will be an effective response to public health threats. We know that equality between women and men means better health for society as a whole.

This recognition of health in the broader societal context stems from a recognition that the diseases we deal with today represent complex social challenges. HIV/AIDS has paved the way for this awakening. Each day, more than 15,000 people become infected with HIV. Access to treatment is thus critical. This includes clinical management, nursing care, counselling and social and psychological support. There is also a growing body of evidence that shows its possible to deliver care and treatment for people living with AIDS in resource-poor settings. But access to treatment depends equally on building public awareness and fighting the taboos associated with the virus. HIV testing

and voluntary testing must be made easily available and free from stigmas. Counselling must be easily accessible, confidential and non-judgmental.

Or take mental health. Our experience and lessons learned have lead WHO to call for action to reduce stigmatisation, discrimination and violations of the rights of persons with mental disabilities, including institutionalised stigmatisation caused by the placing of psychiatric hospitals away from public regard. Mental health must be integrated into the general health care system and treatment costs made affordable for all those in need.

Our horizons in public health continue to expand. As we recognize an increasing number of conditions in society which influence people's health, violence has emerged as a leading cause of death and ill health. Every day, an estimated 4 500 people die from acts of violence around the world. Others are left with physical and psychological damage that often persist a lifetime. The first World Report on Violence and Health, released last October, sounds the alarm. It documents the magnitude and vast consequences of violence and analyses responses across the world. The launch of the report was the first step of the Global Campaign for Violence Prevention. The main message of the campaign is that by studying and intervening on its causes, violence can and should be prevented. We hope that the Campaign will encourage the development of violence prevention programmes and policies as well as stimulate recognition of the impact of violence on the enjoyment of health as a human right.

To conclude, Madam Chair, WHO would like to assure Governments that we are ready to support them in integrating human rights in health. We will provide assistance as countries develop human rights sensitive health policies, programmes, and legislation.

Health as a human right has been neglected. In this respect we welcome the consideration of an optional protocol to the International Covenant on Economic, Social and Cultural Rights and the development of an International Convention on Protection and Promotion of the Rights and Dignity of Persons with Disabilities. We see these new developments as positive signs that attention to health is growing from the human rights community, and look forward to continuing working closely with the Office of the High Commissioner and other relevant partners in the UN system, and beyond.

Thank you.