Global Health, Global Governance and Human Rights— A Complicated Convergence in a Complicated Time

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Overview

➢ Defining terms

➢ People

➢ Communities

➢ Governments and approaches to law in the Corona response

➢ Global norms and standards

➢ Learning from the past and moving forward

Broadly Defining My Terms

Global Health

➢ "The term stresses the commonality of health issues and **requires a collective (partnership-based) action.**" Global Health Education Consortium, Global vs. International, http://globalhealthedu.org/Pages/GlobalvsInt.aspx

➢ "Those health **issues that transcend national boundaries** and governments and call for actions on the global forces that determine the health of people." Kickbush I. The Need for a European Strategy on Global Health. Scand J Public Health, vol. 34, pp. 561-5 (2006)

➢ "Worldwide improvement of health, reduction of disparities, and protection against global threats that **disregard national borders**." Macfarlane SB, Jacobs M, Kaaya EE. In the Name of Global Health: Trends in Academic Institutions, J Public Health Policy, vol. 29, pp. 383- 401 (2008)

➢ "An area for study, research, and practice that **places a priority on improving health and achieving health equity for all people worldwide**." Koplan JP, Bond TC, Merson MH, Reddy KS, Rodriguez MH, Sewankambo NK, et al. Towards a Common Definition of Global Health, Lancet, vol. 373, pp.1993-5 (2009)

➢ "**Collaborative trans-national research and action** for promoting health for all." Beaglehole R, Bonita R. What is Global Health? Global Health Action, vol. 3, pp. 5142 (2010)

Global Governance

➢ Global governance encompasses the totality of institutions, policies, norms, procedures and initiatives through which States and their citizens try to bring more predictability, stability and order to their responses to transnational challenges.

➢ The coming together of diverse actors to coordinate collective action

➢ The leading institution responsible for global governance today is **the United Nations** which is made up of sovereign nation states and works through a range of agencies and associated institutions (e.g. WHO; UNDP; UNAIDS; UNICEF etc..):

    ➢ Responsible for peace and security, justice and mediation systems for conflict, unified standards for health, trade, industry, sustainable development, and human rights.

Human Rights

➢ Human rights:

➢ are primarily about the relationship between the individual and the state

➢ are universal, interrelated and indivisible

➢ imposes on governments the obligation to respect, protect and fulfill human rights

International Human Rights Law

➢ International human rights law:

➢ defines what governments can do to us, cannot do to us, and should do for us

➢ is meant to be equally applicable to everyone, everywhere in the world, across all borders and across all cultures and religions

➢ consists of the obligations that governments have agreed they have in order to be effective in promoting and protecting our rights

International Human Rights Documents

1948: Universal Declaration of Human Rights (UDHR)

Treaties: Legally binding on nations that have ratified

1965: International Convention on the Elimination of All Forms of Racial Discrimination

1966: International Covenant on Economic, Social, and Cultural Rights

1966: International Covenant on Civil and Political Rights

1979: International Convention on the Elimination of All Forms of Discrimination Against Women

1985: Convention Against Torture

1990: Convention on the Rights of the Child

2000: Convention on the Protection of Migrant Workers and their Families

 2006: Convention on the Rights of Persons with Disabilities

2006: International Convention for the Protection of All Persons Against Enforced Disappearances

Internationally Agreed to Human Rights Relevant to Health

- The right to life, survival, and development
- The right to equality and non-discrimination
- The right to travel
- The right to bodily integrity and security of the person
- The right to an identity
- The right to privacy
- The right to seek, receive and impart information

- The right to food
- The right to housing
- The right to social security
- The right to be free from torture
- The right to association
- The right to the benefits of scientific progress
- The right to education
- And.. the right to health

Are All of These Rights Currently Being Protected in Government Responses to the Coronavirus?

Current Realities

People, Communities, and Nation States

How Are We Adjusting?

- ➢ Physical distancing?
- ➢ Handwashing?
- ➢ Mask wearing?
- ➢ Shelter in place?
- ➢ Mental health?

How it spreads

amref health africa

➤ Most of these droplets fall on nearby surfaces and objects - such as desks, tables or telephones. People could catch COVID-19 by touching contaminated surfaces or objects – and then touching their eyes, nose or mouth.

When someone who has COVID-19 coughs or exhales they release droplets of infected fluid.

Staircase   Elevator buttons   Gadgets   Contaminated or partially cooked food

➤ An infected person can have contaminated hands, face and clothes and physical contact can transmit the disease

WHO Recommendations

Wash your hands

Wash your hands with soap and running water when hands are visibly dirty

If your hands are not visibly dirty, frequently clean them by using alcohol-based hand rub or soap and water

World Health Organization

Protect yourself and others from getting sick
Wash your hands

- after coughing or sneezing
- when caring for the sick
- before, during and after you prepare food
- before eating
- after toilet use
- when hands are visibly dirty
- after handling animals or animal waste

World Health Organization

Protect others from getting sick

When coughing and sneezing cover mouth and nose with flexed elbow or tissue

Throw tissue into closed bin immediately after use

Clean hands with alcohol-based hand rub or soap and water after coughing or sneezing and when caring for the sick

World Health Organization

Protect others from getting sick

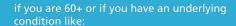**Avoid close contact when you are experiencing cough and fever**

Avoid spitting in public

If you have fever, cough and difficulty breathing seek medical care early and share previous travel history with your health care provider

World Health Organization

Be SAFE from #coronavirus

if you are 60+ or if you have an underlying condition like:

- **Cardiovascular disease**
- **Respiratory condition**
- **Diabetes**

by avoiding crowded areas or places where you might interact with people who are sick.

Learn more to Be READY for #COVID19: www.who.int/COVID-19

UNITED NATIONS   World Health Organization

Maintain Social Distancing

Maintain at least 2 meters (6 feet) distance between yourself and anyone who is coughing or sneezing.

Social (Physical) Distancing and Public Transport

- The government of Kenya restricted 'matatu' passenger numbers to 8.

- Owners doubled the fares to make up for lost profit…and many people now can't afford to travel.

What If You Were Here?

Should There Be Pre-Conditions to a Government 'Shelter in Place' Order?

- Access to water and sanitation facilities?

- Access to food?

- Access to medicines?

- Alternative income?

- Minimum space per person?

- Assured safety?

NEW POLICE POWERS

£60 FINE

YOU MAY BE FINED IF YOU DON'T STAY HOME TO PROTECT THE NHS AND SAVE LIVES

A Medical and Public Health Response

- Testing

- Contact tracing

- Isolation and quarantine

- Care and treatment

- Provision of masks and PPE

- Provision of water and soap

- Secure access to nutritious food, needed medicines etc.
  - *But even this was a reality, is it enough?*

PATHOLOGISTS
LANCET
KENYA (PLK)
Key to diagnostic excellence
Maabara ya Kisasa

COVID-19
Drive Through Sampling
(patients served while in their car)

Cerba Lancet
Africa

For patients who require COVID-19 testing and are driving to our laboratory, we are now offering drive-through services at our selected facilities.

The patient should call our customer service centre on **0703 061 000** or the Wellness Manager - **0700 693 956** or our Home Collection consultant - **0743 575 844**, to give an advance notification on when they shall present for sampling.

A trained lab personnel wearing appropriate Personal Protective Equipment (PPE) will be assigned tto collect the patient sample when the patient is in the car, without a need for the patient to leave the car and enter into the laboratory.

Siracusa Principles

Limitation of most rights for public health reasons is acceptable but can only be a last resort carried out after rigorous consideration of the following criteria:

- the restriction is provided for and carried out in accordance with the law;

- it is in the interest of a legitimate objective of general interest;

- it is strictly necessary in a democratic society to achieve the objective;

- there are no less intrusive and restrictive means available to reach the same objective; and

- the restriction is not imposed arbitrarily, i.e. in an unreasonable or otherwise discriminatory manner.

Global Norms and Standards

Addressing COVID From a Rights Perspective

Rights in the Time of COVID-19 — Lessons From HIV for an Effective, Community-led Response – UNAIDS March 2020

- Engage affected communities from the beginning in ALL response measures—this builds trust, ensure suitability and effectiveness, and to avoid indirect or unintended harms and ensure the frequent sharing of information.

- Combat all forms of stigma and discrimination, including those based on race, social contacts, profession (healthcare workers), and those directed towards marginalized groups that prevent them from accessing testing or care.

- Ensure access to free or affordable screening, testing and care for the most vulnerable and hard to reach.

- Address barriers to people protecting their own health and that of their communities: fear of unemployment, healthcare costs, presence of fake news/misinformation, lack of sanitation infrastructure and so forth.

- Restrictions to protect public health must be of limited duration, proportionate, necessary and evidence-based and reviewable by a court. Put in place exceptions where necessary for vulnerable groups and to ameliorate the consequences of such restrictions. Blanket compulsory bans are rarely effective or necessary. Individuals should not be criminalized for breaching restrictions.

- Support and protect health care workers. Be kind to each other. Join and support efforts that build trust and amplify solidarity, not sanctions.

- Countries must work to support each other to ensure no country is left behind, sharing information, knowledge, resources and technical expertise.

Addressing Human Rights as Key to the COVID-19 Response – WHO April 2020

- There is a need for governments to put into place human rights-based approaches to address COVID-related:

  - stigma and discrimination;

  - violence against women,

  - support for vulnerable populations;

  - quarantine, isolation and restrictive measures;

  - shortages of supplies and equipment.

- Highlights also human rights obligations with regards to global cooperation and technical support to address COVID-19.
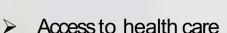
UN Secretary General António Guterres
23 April 2020

The COVID-19 pandemic is a public health emergency — but it is far more. It is an economic crisis. A social crisis. **And a human crisis that is fast becoming a human rights crisis.**

- Human rights responses can help beat the pandemic, putting a focus on the imperative of healthcare for everyone. But they also serve as an essential warning system — highlighting who is suffering most, why, and what can be done about it.

- We have seen how the virus does not discriminate, but its impacts do — exposing deep weaknesses in the delivery of public services and structural inequalities that impede access to them.

- **Against the background of rising ethno-nationalism, populism, authoritarianism and a pushback against human rights in some countries, the crisis can provide a pretext to adopt repressive measures for purposes unrelated to the pandemic.**

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Human Rights at the Heart of Response COVID-19 GUIDANCE , OHCHR: 13 May 2020

- Access to health care
- Emergency measures
- Leaving no one behind
- Housing
- Persons with disabilities
- Older persons
- People in detention and institutions
- Information and Participation
- Stigmatisation, xenophobia, racism
- Migrants, Displaced People, and Refugees
- Social and Economic Impacts
- Food
- Privacy
- Children
- Youth
- Gender

- Water, sanitation and hygiene
- Indigenous peoples
- Minorities
- Business and Human Rights
- International and Unilateral Sanctions
- Trafficking
- International Cooperation and Solidarity
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The Proliferation of Human Rights Guidance on COVID-19 Mitigation

➤ The 56 United Nations special procedures, 10 U.N. human rights treaty bodies, three principal regional human rights systems (each with various components), and their respective "parent" intergovernmental organizations have collectively put out **more than 150 statements** on respecting human rights during the pandemic since late February. They compete for limited attention, jostle for primacy, and assert the relevance of their authors.

➤ *Eleven ways* to address children's needs. "*Ten key principles*" to respect freedom of association and assembly in a pandemic. *Nine ways* "to uphold women's rights" during the pandemic. *Eight recommendations* for respecting the rights of migrants. *"[S]even crucial aspects"* of preserving the independence of the judiciary… etc..

Lisa Reisenberg. International Justice Resource Center (IJRC) May 2020

Why Human Rights Matter

➢ Human rights grew out of crisis – there was a recognition of the need for some basic societal rules applicable everywhere, for everyone, at all times.

➢ They are voluntary commitments that have been made by all governments of the world.

➢ They provide an international legal framework within which the world is meant to operate.

➢ This can feel particularly important in times of crisis.

A Human Rights Investigation of the COVID Response

➢ Human rights challenge the distribution of power by valuing everyone equally

➢ They require that we interrogate:

- What are the historical reasons we are here? What is the economic, social, cultural and political backdrop to this public health emergency?

- What's wrong with our systems that inequality is as massive and entrenched as it is?

- How can we address this challenge in ways that reduce rather than foster inequalities?

- How can we hold our governments to account for how they respond in these times of emergency? And beyond?

Optimizing Public Health and Human Rights

Optimal Health and Human Rights Outcome

Human Rights Quality

Public Health Quality

Moving Forward: Big Picture

➢ COVID has raised awareness of existing inequalities in all of our countries and across the globe

➢ Public health, whether local or global, is rarely separable from politics

➢ The concepts of health and security, within our countries and at the global level, are increasingly intertwined

➢ Health is and must be fully recognized as a right

➢ The critical role of multilateralism and global structures is clear

➢ The need for global solidarity has never been greater

Thank You!

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