Regional Conference on Best Practices of Prison Management in the Caribbean

Kingston, JAMAICA 2011

HUMAN RIGHTS & HEALTH



Article 25

1. Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control.

The Universal Declaration of Human Rights

Adopted and proclaimed by General Assembly resolution 217 A (III) of 10 December 1948, United Nations



Article 25

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PANAMERICAN HEALTH ORGANIZATION (PAHO):

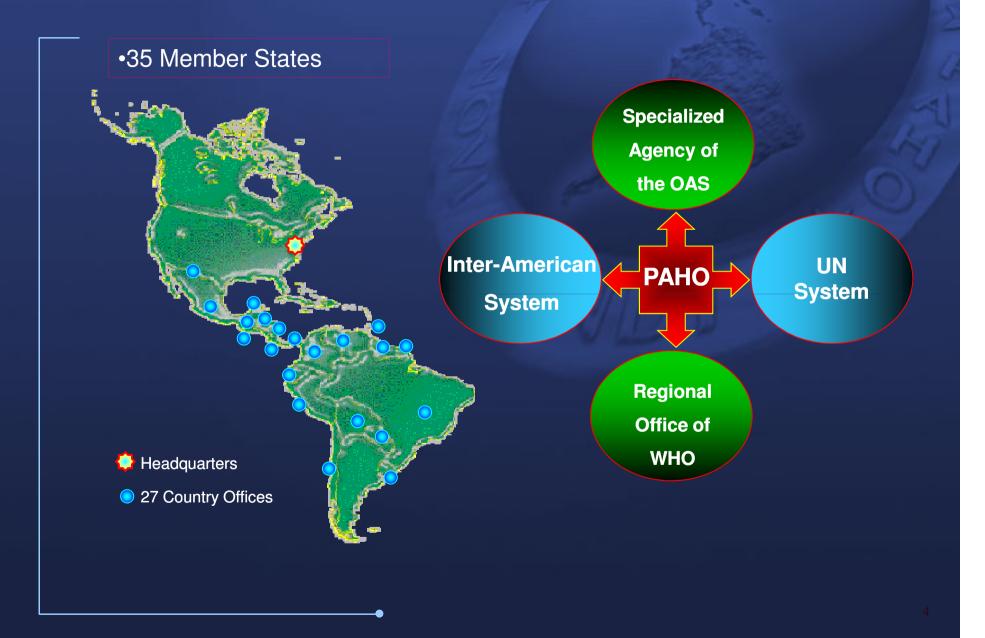
WHO ARE WE?



CONSTITUCIÓN DE LA OPS:

The fundamental purpose of the Pan American Health Organization shall be to promote and coordinate efforts of the countries of the Western Hemisphere to combat disease, lengthen life, and promote the physical and mental health of the people.

PAHO in the AMERICAS: Since 1902



"The use of international human rights principles, treaties and standards is seen in PAHO and WHO not as an optional tool to promote and protect public health, but as <u>an essential strategy</u> to improve the health of the people around the world"

Dr. Mirta Roses

Georgetown Law Center, October 2006

Director Pan American Health Organization/Regional Office of the World Health Organization (PAHO/WHO)

The RIGHT to HEALTH

WHO Constitution (1946): "...The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief, economic or social condition..."

International Covenant on Economic, Social and Cultural Rights (Article 12)

Protocol of San Salvador (Article 10)

What are our global mandates ensuring the health and other rights of persons deprived of liberty?

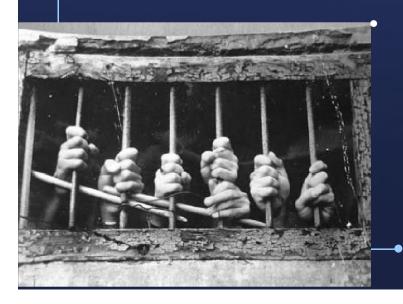
- Universal Declaration of Human Rights
- International Covenant on Economic, Social and Cultural Rights
- International Covenant on Civil and Political Rights
- Convention on the Rights of the Child
- Convention to Eliminate all Forms of Discrimination against
 Women
- Convention against Torture
- Convention on the Rights of Persons with Disabilities

REGIONAL CONVENTIONS

- American Convention on Human Rights (IACHR);
- Additional Protocol to the American Convention on Human Rights in the Area of Economic, Social and Cultural Rights*;
- Inter-American Convention on the Elimination of all Forms of Discrimination Against Persons with Disabilities*; and
- Inter-American Convention on the Erradication of violence against Women (Belem do Para)

HUMAN RIGHTS IN PAHO STRATEGIC PLAN 2008-2012

• <u>Strategic Objective 7</u>: Addresses social and economic factors that are health determinants and it is intended to pave the way for policies and programs that improve equity in health and incorporate pro-poor, gender sensitive, <u>human rights based approaches</u>.



International Human Rights Law:

International and regional treaties, covenants and standards; and Measures by which to evaluate success and <u>clarify the accountability</u> and responsibilities of stakeholders.

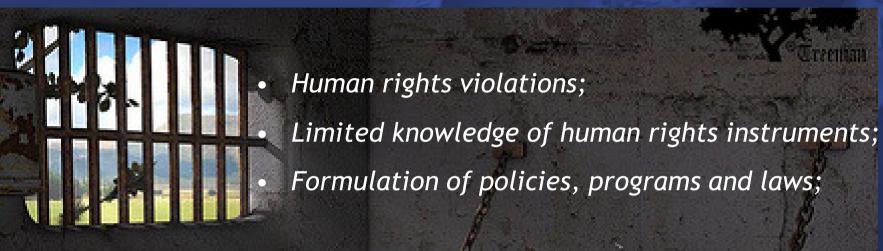
REGIONAL EXPECTED RESULTS AND INDICATORS

- RPR 7.4: Human Rights based approaches promoted in PAHO
- PAHO Indicator 7.4.1: "Number of countries using 1) international and regional human rights norms and standards; and 2) tools and technical guidance documents produced by PAHO/WHO to review and/or formulate national laws, policies and/or plans that advance health and reduce gaps in health equity and discrimination."

LINKS BETWEEN HEALTH AND HUMAN RIGHTS OF PERSONS DEPRIVED OF LIBERTY (CD 50/12)

- Violations of human rights can adversely affect the health of individuals and groups;
- Health policy, planning, programs and legislation can serve to protect basic human rights and fundamental freedoms; and
- The enjoyment of health and the exercise of human rights are synergistic





- Limited participation of civil society;
- Lack of coordination among relevant ministries and
- Limited implementation of national mechanisms to protect human rights in health services

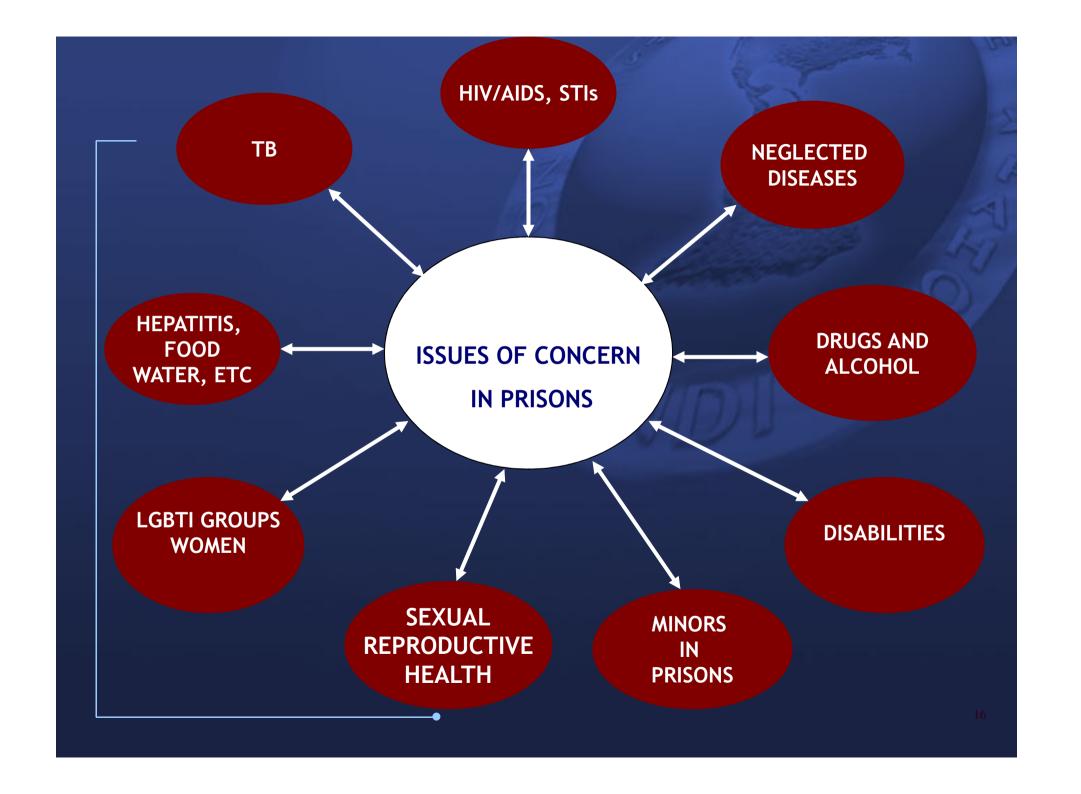
TRENDS (CD 50/12)

- Growing demand for technical cooperation from the secretariats of health;
- Growing demand for technical collaboration from the parliaments, courts and human rights offices; and
- Role of UN/OAS human rights committees, organs and rapporteurships on public health

PAHO RESOLUTION "HEALTH AND HUMAN RIGHTS" (CD 50.R8, 2010)

- To strengthen the technical capabilities of government health agencies;
- To strengthen the technical capacity of the health authority to provide support for the formulation of health policies and plans;
- Capacity building for health workers;
- Technical collaboration with national parliaments and courts;

- Dissemination of information among civil society organizations;
- To facilitate PAHO technical cooperation with the human rights committees, organs and rapporteurships of the UN and the Inter-American systems;
- Collaboration and research with academic institutions and the private sector; and
- To promote the sharing of good practices among countries to prevent the stigmatization, discrimination and exclusion



WHY IS IT IMPORTANT TO ADDRESS THE RIGHT TO HEALTH IN PRISONS?

OBJECTIVE

TO IMPROVE PUBLIC HEALTH BY IMPROVING HEALTH IN PRISON

HEALTH AND
OTHER HUMAN
RIGHTS IN
PRISON

PUBLIC HEALTH



ISSUES OF CONCERN in prisons?



COMMUNICABLE DISEASES: HIV/AIDS

- Discrimination, social isolation, violence and other abuses to human rights;
- Lack of information on the disease, stigmatization on certain groups (sexual workers, drug users and LGBTI)
- ✓ Need to adopt a preventive approach: free treatment, nondiscriminatory measures based on the fact of being infected

COMMUNICABLE DISEASES: TB

- Lack of detailed and complex studies on TB in prisons despite its importance;
- Prisons are not closed settings (custody personnel, visits, etc)> public health issue;
- Discrimination and aggravated situation (TB is not part of the sentence; deaths as a result of not being treated is not part of the sentence either);
- Co-infection TB/HIV: control of TB needs to be considered taking into account prevention and control of HIV;
- ✓ Need to assess the impact of deficiencies of the judicial systems in the context of TB in prisons

COMMUNICABLE DISEASES: NEGLECTED DISEASES

- Lack of accurate information on these diseases (dengue, leishmaniasis, leprosy, lymphiatic filariasis, onchocerciasis, etc);
- Stigma and discrimination against persons deprived of liberty living with neglected diseases;
- ✓ Need to conduct studies analyzing specific circumstances in which these diseases develop in the context of prisons;
- Need to promote cooperation among countries to identify best practices on how to combat these diseases

MENTAL HEALTH, ALCOHOL AND DRUG ADDICTION

- ✓ Lack of mental health personnel
- ✓ Harmful consequences in the health of persons deprived of liberty (HIV, hepatitis, other infections, suicide and injuries...)
- ✓ Need to adopt necessary measures to guarantee access to assistance for the treatment of these addictions in prisons
- Promote information and exchange of positive experiences and technical cooperation among Member States
- Need to implement activities and workshops for rehabilitation and for preventing new cases of addiction
- Need to involve civil society and other key actors

YOUTH AND ADOLESCENTS: (ref to SEXUAL REPRODUCTIVE HEALTH)

- Vulnerability of youth and adolescents deprived of liberty and the impact of this situation in their mental and physical health;
- ✓ Lack of provision of services affecting sexual and reproductive health of adolescents (HIV, pregnancy tests, etc.)
- Special situation of vulnerability of trans population in prisons (stigmatization, discrimination, sexual violence, victims of serious human rights violations)
- Urgent actions needed to avoid critical situations (minors in adult centers)

Other vulnerable groups in prisons:

- Women and children: victims of persecution and violence in prison; sexual abuse; CRC general debate: important to analyze different situations in countries and learn on best practices;
- Persons deprived of liberty living with disabilities (including mental health)
- LGBTI people in prisons: high levels of discrimination in prisons because of their sexual orientation, gender identity and gender expression; high level of selective persecution. Limited access to health care services.

RECOMMENDATIONS

- Contemplate health in prisons as an issue of public health. Coordinate efforts among different ministries and engage civil society;
- ✓ Need for Conscious-Raising and Training on human rights;
- Legislation, policies and programs should incorporate specific needs in prisons taking into account vulnerable groups;
- Cooperate with human rights mechanisms working in the field of persons deprived of liberty (visits, TBs, SRs);
- Strengthening the implementation of the Istanbul Protocol;
- Promoting studies and analysis that contribute to eliminating discrimination against persons living with communicable diseases in prisons, including neglected diseases;
- Involvement of media, civil society, different organizations and other stakeholders









DERECHOS HUMANOS Y SALUD



Artículo 25

1. Toda persona tiene derecho a un nivel de vida adecuado que le asegure, así como a su familia, la salud y el bienestar, y en especial la alimentación, el vestido, la vivienda, la asistencia médica y los servicios sociales necesarios; tiene asimismo derecho a los seguros en caso de desempleo, enfermedad, invalidez, viudez, vejez y otros casos de pérdida de sus medios de subsistencia por circunstancias independientes de su voluntad.

Declaración Universal de Derechos Humanos Adoptada y proclamada por la Asamblea General en su resolución 217 A (III), de 10 de diciembre de 1948, Naciones Unidas











Pan American Health Organization



Regional Office of the World Health Organization

http://www.paho.org

THANK YOU GRACIAS



