Health Care is a Human Right

Using Human Rights for Health Care Advocacy

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Human Rights: A Useful Frame and Tool Set?

- Organizing and movement-building
- Public education
- Communications and messaging
- Policy advocacy
- Legal advocacy
Vermont Case Study

After years of organizing by the Healthcare Is a Human Right Campaign, Vermont is now the first U.S. state…

✓ with a law for universal, publicly financed health care
✓ with human right to health care principles in law
✓ with a commitment to providing health care as a public good
✓ with a broad-based human rights movement for health, education, housing, work, and a healthy environment
What Worked: Human Rights in Organizing

- **People-centered:** listening, storytelling, surveying, peer education, testifying

- **Unifying:** common ground, inclusive, respecting differences, tackling power relations, democratic decision-making

- **Participatory:** bottom-up, organizing, mobilizing, claiming rights

Vermont
What Worked: Human Rights in Policy Advocacy

- **Changing the debate:** health care as a collective right
- **Leading with values:** principles of universality, equity, accountability, transparency, participation
- **Changing policy priorities:** upholding human rights standards
- **Developing political agency:** people’s presence in the legislature
Key Lessons from the Vermont Model

- identify people’s **needs** and elevate the voices of the crisis
- claim **rights** and recognize government **obligations**
- support people’s **agency** in effecting political change
- foster **unity** across issues and communities
- start changing **power** relations
Using Human Rights: What’s in the Toolbox?

- **Frame:** needs, rights, government obligations
- **Principles:** advocacy grounded in values
- **Standards:** value-based tools for analysis
The Human Right to Health

- Governments have an obligation to respect, protect, and fulfill our universal right to a system of health protection.

- Everyone has an equal right to the facilities, goods, services, and conditions necessary for the realization of the highest attainable standard of health. This includes:
  - equitable access to appropriate health care
  - healthy food & water, adequate housing, a safe workplace, a healthy environment, etc.
Other Advocacy Frames

- **Cost-saving frame:** single-payer advocacy
- **Defensive frame:** against Medicare cuts etc.
- **Legal frame:** client-focused advocacy on Medicaid etc.
- **Social determinants frame:** focus on underlying causes beyond health care
- **Disparities or civil rights frame:** focus on non-discrimination, inclusion, equality (procedural)
- **Group or issue specific rights frame:** women, immigrants, reproductive rights
Campaigns Based on Values or Solutions?

- Every campaign is a battle over the framing of an issue between those who hold power and those seeking change.
- Facts & figures for a technical policy solution do not create a long-term commitment from people to fight for social change.
- We must frame an issue in a way that engages people directly and deeply.
- We must have an understanding of a problem’s root causes, so that our solution addresses common roots, not symptoms.
Value-Based Campaigns

- **Value-based:** health care advocacy as a struggle for human rights against a profit-driven market system.
- **Consciousness-raising:** people analyze their position, conditions and power in society.
- **Collectivity beyond self-interest:** from interest group actions to a struggle based on values and principles.
- **Transformational:** from advocacy for a specific policy to a struggle for rights, with a unifying vision and guiding principles.
Current Frame: Health Care as a Commodity

- **Market-based system**: care is sold through insurance plans
- **Insurance industry**: incentivized to maximize profit, not care
- **Rationed access to care**: access based on payment, health status, age, gender, race/ethnicity, immigration status, geographical location

- **Exclusion and inequity**:
  System has separate tiers for different categories of people receiving different levels of care
Human Rights Frame: Health Care as a Public Good

- The right to health care entails a government obligation to ensure everyone can exercise this right on an equal basis.
- Health care is a public good that belongs to all and is overseen by the people. It must be financed and administered publicly, and should be free at the point of access.
- We get the care we need, and we pay what we can.
Rights-Based Health Care Advocacy

- Change prevailing policy paradigm:
  - Commodity, privilege $\rightarrow$ human right
  - Private profits $\rightarrow$ public good
  - Individual responsibility $\rightarrow$ government obligation

- Change health care financing:
  - Coverage $\rightarrow$ care
  - Private market and subsidies $\rightarrow$ public, tax-based
  - Segregated access, different levels of care $\rightarrow$ direct access to comprehensive health care for all
Standards of the Right to Health Care:

The right to health care means that health facilities, goods and services must be **accessible**, **available**, **acceptable**, and of good **quality** for everyone, on an equitable basis, everywhere.

- **Analytical focus on specific policy solutions**
Human Rights Principles

Universality: Everyone must have access to equal high-quality and comprehensive health care.

Equity: Health care resources and financing must be shared equitably; everyone gets what they need and pays what they can.

Accountability & Transparency: The people must be able to oversee the provision of health care as a public good.

Participation: Government must support people’s participation in decisions about how their right to health care is ensured.

- Normative focus on basic values
Principles and Standards

Universality
Everyone is included and can meet their needs

Equity
Everyone contributes what they can and gets what they need

Transparency
All information related to decision-making should be clear and accessible to all

Accountability
The people are able to oversee and guide how government is protecting and fulfilling our rights

Participation
Everyone has a meaningful say in how decisions that impact us are all made
Using the Principles in Advocacy

**Universality:**

- Universal means everyone – including immigrants
- Universal care means care for our entire body – no “benefits packages”

**Equity:**

- Equitable financing – based on ability to pay, public, tax-based, free at the point of service

- Unity across issues and identities, structural approach, focus on changing power (not just policy)
Using Principles and Standards: Assessment Tools

- Would the system provide healthcare to all?
- Would the system eliminate different tiers of access?
- Would payment be collected independently from the use of care?
- Would people pay for health care based on their ability to pay?
- Would the system take into account that some communities and individuals need more care and different services than others?
- Would the system ensure that communities are involved in determining how their health needs are met?

- Analytical and normative principles combined: offer moral high ground, steer away from trade-offs, simple to use
Why Human Rights?

Because human rights...

- arise from people’s needs
- are claimed in people’s struggles
- prioritize most disadvantaged groups (race, class, gender)
- reflect shared values and offer principles
- place people at the center of practice and policy
- build the power of the people
Using Human Rights to Build a Movement

Human rights denials are neither accidental nor isolated.

Human rights principles serve as:

- a compass for a unified human rights movement
- a rights-based framework for policy demands
- a tool for analyzing structural causes and solutions
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