

## Can Right to Health Help Policy Makers to Address Maternal Mortality?: A Short Communication

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### Introduction

In general, Right to health means government is responsible for making an enabling environment that may ensure health of everybody as much as possible which has been protected in various international and regional human rights treaties as well as national constitutions all over the world [1]. The Universal Declaration of Human Rights states in Article 25 that “everyone has the right to a standard of living adequate for the health of himself and of his family”. Since then, the right to health has become widely accepted as a fundamental human right [2]. In international human rights law, Right to health has been referred as “the right to the highest attainable standard of health” that requires set of social measures ensuring attainment of this right interpreted in Article 12 of the ICESCR (International Covenant on Economic, Social and Cultural Rights) and endorsed by 145 countries. General Comments adopted by Committee on Economic, Social and Cultural Rights clarified the nature and content of individual’s rights and obligations of states. The Committee interpreted the right to health as an “inclusive right” extending not only to timely and appropriate health care but also to the underlying determinants of health. The committee has developed guidance on key elements of the right to health including the availability of functioning public-health facilities, goods, services and programs; their physical and financial and nondiscriminatory accessibility; their acceptability in term of gender-sensitivity, culturally appropriateness and confidentiality and good quality in scientific and medical terms [3].

UN Special Rapport on the right to health has further strengthened the promotion and protection of right to health at international level. The Special Rapport has greatly contributed to the advancement of health and human rights by raising awareness of critical health issues, such as maternal mortality [2]. Despite longstanding international commitments to reduce maternal mortality, so far progress has been unsatisfactory. High maternal mortality and morbidity rates reflect one of the shocking failures of development [4]. It has been recognized that reducing maternal mortality is not just an issue of development, but also an issue of human rights. Maternal mortality occurs when there is a failure to give the rights of women to health, equity and equality [5]. The right to health cannot be realized overnight and is subject to progressive realization and resource availability. Due to adequate resource availability, expectations are higher from high-income countries than of middle and low income countries [6].

### Maternal mortality as a human right issue

Currently maternal mortality has emerged as a human right issue [7] mainly due to its preventability [8,9]. Avoidable mortality and morbidity as a result of pregnancy and childbirth is connected to a number of human rights that include the right to nondiscrimination, information, education, life survival and the right to the highest attainable standard of health [10]. Certain freedoms and entitlements arise from the right to health including freedom from discrimination, harmful traditional practices and violence and entitlement to a system that protects health by providing opportunity to everybody to enjoy the highest level of health and right to prevention, treatment and control of diseases. The Convention on the Elimination of All Forms of Discrimination against Women has asked the states to ensure

that women should have appropriate services during pregnancy, childbirth and the post-natal period including family planning and emergency obstetric care. It is required that state should ensure safe motherhood for the reduction of maternal mortality and morbidity [11] as its prime obligation [12]. The non-fulfillment of this obligation may be considered as denial of the right to health and can be assessed through government commitment, appropriate government policies and implementation of interventions for the realization of right in the health system of country [13].

Despite commitment to the right to health in international treaties, national laws and policies, health inequity and social injustice is prevalent in health systems. Practically the right to health has failed as planning tool while inability of health policy to express the right to health has led to the consideration of alternative human rights mechanisms in order to facilitate equitable provision of health services [14]. A rights-based approach to health refers to “the processes that use human rights as a framework for health development and assessment while addressing the human rights implications of any health policy, program or legislation”. Right to health is one of the ingredients of it. Key elements of rights-based approaches are comprised of “Inclusion and non-discrimination, Participation and empowerment of women and men within communities, holding duty-bearers accountable for fulfilling their obligations to respect and uphold rights and progressive realization of rights” [15]. The persistent inequities lead women to experience social, economic, cultural and health system barriers to access healthcare during pregnancy and childbirth which sometimes leads to avoidable deaths. This symbolizes violations of women’s rights to equity, life and health.

Equity in health defined as “absence of systemic disparities in health between groups with different levels of underlying social advantage of disadvantage-that is wealth, power or prestige”. The definition has supported concept of the right to highest attainable standard of the health that indicates the health status of the most socially deprived group. Comparison of health and its social determinants between more and less privileged social groups is required for the assessment of equity in health which is necessary for the assessment of direction of policies while addressing social justice in health [16].

### Conclusion

It can be concluded that Right Based Approach can be used for the identification of areas and services requiring improvement and to address the equity and social justice during policy formulation and planning related to maternal health. The right to health can play pivotal and positive role for advocacy while making health policy into practice. Policy makers and health personals can use the right based approach for planning equitable programs for the strengthening of health systems and placing important health issues like maternal mortality in national agenda.

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