TomPaine.com Progressive insight and action. Every day.

A Project of the Institute for America's Future

A Human Right To Health

Alan Jenkins, TomPaine.com

October 09, 2007

Alan Jenkins is Executive Director of <u>The Opportunity Agenda</u>, a communications, research, and advocacy organization with the mission of building the national will to expand opportunity in America.

<u>News coverage of President Bush's recent speech</u> to the United Nations General Assembly has focused on his announcement of economic and political sanctions against Myanmar. But the real news about the president's speech is that he chose as a central theme the <u>Universal Declaration of Human Rights</u>, which he described as "a landmark achievement in the history of human liberty." In particular, the president focused on Article 25 of the Declaration, which provides in part that "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 president's focus on Article 25 was remarkable for at least two reasons. First, although the United States played an important role in crafting the Universal Declaration almost 60 years ago, our government has, since the time of the Cold War, distanced itself from the economic and social rights embodied in Article 25, at times denying that they are rights at all. And second, less than two weeks after delivering the speech, Bush vetoed legislation that would have expanded the popular State Children's Health Insurance Program (SCHIP) to cover more of America's 9 million uninsured kids.

The world's nations adopted the Universal Declaration in 1948 after the Great Depression, World War II, and the horrors of the Holocaust. Eleanor Roosevelt was a driving force behind the document as a member of the United Nations' Human Rights Commission. And the final product reflects FDR's vision of an <u>"Economic Bill of Rights"</u> for America that included "the right to adequate medical care and the opportunity to achieve and enjoy good health." The Declaration reflects America's tradition of inalienable rights to life, liberty, and the pursuit of happiness, as well as the American people's embrace of fairness, dignity, and opportunity for all.

Bush invoked Article 25 to praise U.S. efforts to fight hunger, AIDS and malaria in Africa, noting that deaths of people from malaria, "the vast majority of them children under the age of 5 years old," are unnecessary because "the disease is preventable and treatable." This is true, and should continue to be an important U.S. and global priority.

But the president was silent about the 18,000 Americans who, according to the Institute of Medicine, die every year of preventable or treatable diseases because they lack health insurance. When it comes to uninsured children, working families bear the greatest burden: In 2005, more than 69 percent of uninsured children in the United States lived with either one or two full-time workers. For these and other American families, Article 25's guarantee of a "right to a standard of living adequate for the health and well-being of himself and of his family" is illusory.

The president said he vetoed the child health bill because it was too expensive and would lead to government-run health care. But that fundamentally misunderstands what a human right is. Recognizing a human right to health care, as the Universal Declaration of Human Rights does, means prioritizing fulfillment of that right over other objectives. And paying for it. To be sure, a country's financial resources are relevant to the calculus; poor countries are expected to move incrementally towards satisfaction of the right when they cannot fulfill it immediately—a notion called "progressive realization." But rich countries like the United States have the means and the responsibility to provide quality health care to everyone within their borders—today. With U.S. spending on the war in Iraq topping <u>\$200 million a day</u>, it's both unseemly and inaccurate to suggest that the cost of satisfying the right to health care is too high.

Acknowledging the human right to health care does not resolve whether the government should be the chief provider of health insurance for Americans. But it does make government responsible for ensuring that all Americans have access to health care. The vast majority of Americans believe in that obligation as well. As The New York Times <u>recently reported</u>, "a majority of Americans say the federal government should guarantee health insurance to every American, especially children, and are willing to pay higher taxes to do

it."

Fulfilling Article 25 of the Universal Declaration in America will require more than expanding SCHIP. To meet human rights standards, our health care system must be universal, affordable and equitable. It must include all Americans and address <u>existing</u> <u>disparities in health care</u> based on race, gender, income and other aspects of what we look like or where we come from.

Human rights are about ending repression in Myanmar and malaria in Africa, but also about dignity, fairness and opportunity here at home. As Eleanor Roosevelt explained almost six decades ago:

"Where, after all, do universal human rights begin? In small places, close to home — so close and so small that they cannot be seen on any maps of the world. Yet they are the world of the individual person; the neighborhood he lives in; the school or college he attends; the factory, farm, or office where he works. Such are the places where every man, woman, and child seeks equal justice, equal opportunity, equal dignity without discrimination. Unless these rights have meaning there, they have little meaning anywhere. Without concerted citizen action to uphold them close to home, we shall look in vain for progress in the larger world."