

I would like to think that you often ask yourself – as I do – what all of us could do better to achieve greater justice, given that most of us work in or with countries with appalling social inequities. Allow me to share with you some of my thoughts on this.

I see our role as helping put in place social processes and mechanisms that will drive sustainable human rights-based policies and practices in health and nutrition. These need to be part of how we help to instill a new will and commitment in decision-makers to change underlying preventable structural inequities in society.

We can come to this from an ethical motivation, or else from a political motivation. Both stances drive us to become more involved in lessening inequities. They should both propose, not packages of universal solutions, but paths to follow to get things that need to be done done, specifying by whom, with whom, and against whom.

Living as we do in a mean, unfair and selfish world, I believe we need to graduate from the ‘universal package’ approach to the ‘paths to follow’ approach. Let me explain why.

The human right to nutrition.

Rights are different from needs. Aid and development policies and programmes based on the concept of need, as they almost invariably are, see the malnourished child as an object. Needs do not necessarily imply duties or obligations, but may invoke no more than promises. In the rights-based approach, the malnourished child is seen as a subject with legitimate entitlements and claims. Rights always imply, and carry with them, duties and obligations.

Human rights concepts applied to nutrition have evolved since the 1980s. Early thinkers began by claiming an inalienable ‘right to food’ of all human beings. But after the worldwide adoption of the UNICEF-proposed conceptual framework of the underlying and basic, as well as the immediate causes of malnutrition, it became clear that food security was only one element of nutritional well-being. This led to the coining of the concept of the ‘right to nutrition’ (meaning adequate nutrition), addressing all causes of malnutrition. This in turn led others to pursue a yet

more ambitious aspiration for the 'right to development'.

The concept of 'the right to nutrition' has been opposed by the governments and other policy-making bodies in high-income countries, particularly the US. Also, the US concept of human rights differs substantially from much of the rest of the world. In the US, civil and political rights carry more weight than economic, social and cultural rights. The US government also objects to the idea that rich countries have obligations towards impoverished countries, despite the rich continuing to be responsible for their impoverishment and for infringing their economic, social and other rights.

Why inequity is perpetuated by the neo-liberal ideology.

'AS WITH SLAVERY, THERE ARE ETHICAL LIMITS TO THE TOLERATION OF EXTREME POVERTY'

Those responsible for the current process of globalisation, with its progressive accumulation and concentration of economic and political capital, see human rights as a threat, because the human rights-based approach is an alternative to neo-liberalism: It has divergent and rival imperatives and justifications.

Conversely, the human rights based-approach sees neo-liberalism as a political and economic system out of control, which creates uncertainty and dependency, brings about fear, aggression, and fundamentalism, and makes ever-expanding spaces for private interests. Neo-liberal politicians and economists push for the rights of individuals (for example, property), limited state activity, and for a free-wheeling market, and say that the poor are responsible for their own poverty. Hidden in the unacceptable current social differences and social injustices clearly is the neo-liberal ideology, with much money, much poverty, much silence, much omission, much disdain, much disillusion.

Often, policy-makers in rich donor countries accuse human rights activists of not being preoccupied with issues of bad governance in poor countries. We counter-argue that political outcomes are not only determined by the interaction between content matters (policy) and institutional structures (polity), but by raw political interests (often post-colonial interests in the case of donors)...and those are the ones that need to be addressed.

In policy circles, concepts tend to be discussed sometimes ad-nauseam, but they are only rarely implemented in reality. Those that have the power to define what poverty is, also have the power to define its causes, and thus to decide to act on what they see as solutions. Those in charge in rich countries think and act as if only their small cut-out of reality is the real valid one. They deny other dimensions of perceived reality.

In opposing this latest manifestation of globalisation, i.e., capitalism gone to its extreme, what is missing is an integration of the multiple international human rights obligations and, in the process of negotiating, among other issues, address debt relief and free trade agreements. Existing arrangements are the result of poorly negotiated multilateral or bilateral compromises. There is an asymmetry in the bargaining power that rich and poor countries bring to these negotiations. It is thus urgent to carry out human rights impact assessments in the contexts of debt and trade, especially their effects on women and on other vulnerable groups. Additionally, we must confront the unequal distribution of power structure within governments.

In other words, globalisation, unequal representation, free-wheeling markets, dependency, the neo-liberal political and economic ideology, the debt crisis, and international 'free trade' agreements, all limit national human rights policy space, as well as policy space for nutrition. This amounts to an outrage. As with slavery, there are ethical limits to the toleration of extreme poverty.

Nutrition professionals and the myth of the market.

‘THE BASIC AND STRUCTURAL CAUSES OF POVERTY ARE THE MAIN DETERMINANTS OF PREVENTABLE ILL-HEALTH, MALNUTRITION AND PREMATURE DEATHS’.

Why are then nutritionists in their profession still not committed to a human rights philosophy? Such a commitment does give us the best chance to counter the increasingly negative impacts of globalisation in its current form, which is creating and accelerating poverty – most often with malnutrition as an outcome. At the same time, globalisation is creating growing disparities, exclusion, unemployment, marginalisation, alienation, environmental degradation, exploitation, corruption, violence and conflict, all of which in one way or another impinge on nutrition.

People who are being marginalised by globalisation today are being pushed to the limit, and they need to channel their frustrations into positive action. But people who happen to be poor are still being offered top-down social services and are thus not really active claimants of their rights.

Are we part of the problem?

The human rights approach introduces or reinforces a crucial missing element in

development work: people forcefully demanding what are their inalienable rights. This is its added value in all work being done in the area of nutrition. So why has it not generated more enthusiasm?

The rights-based approach takes the entitlements of those being marginalised as its starting point. Human rights and equity go hand in hand. The rights-based approach thus focuses on the basic and structural causes of poverty, which are the main determinants of ill-health and malnutrition.

There is still a segment of the human rights community that thinks that world order issues can be settled without confronting the power issues that are still slanted against the welfare of the majority of the marginalised. But is this a contradiction?

The Millennium Development Goal of halving worldwide malnutrition rates by 2015 will not be achieved through the piling up of yet more 'benevolent' free market policies. We are being sold a mythical utopia in the absurd belief that ultimately a global 'free market' will cater to everybody's needs and make everybody happy. I ask: How much are nutrition professionals influenced by this myth?

How we can be part of the solution.

Because of the gross flaws of globalisation, a more humane global governance is now needed – more than ever.

There is no need to argue about whether globalisation or bad governance is the most important cause of human rights violations. The human rights approach shows us what states should do or should not do. When they fail the test, many governments complain of being victims of a global process as an excuse for not implementing their obligations.

How much of their general budgets governments devote to nutrition, to health, to food security, to education and to poverty alleviation is of substantive human rights concern. So is how such expenditures are distributed among the various socio-economic population groups. Governments violate human rights when they fail to offer adequate and participatory health and nutrition services to the poor.

To take a very real current issue as an example, if the provision of such services are privately organised, governments still remain responsible for the egalitarian and quality provision of the same. But do they accept this responsibility? Mostly they do not. Short of opposing it, civil society watchdog groups should be monitoring the privatisation of public goods and denouncing its shortcomings more forcefully.

A human rights-focused analysis of statistical data should examine to what extent various expenditures on nutrition and other social services are equitably distributed

among the diverse socio-economic groups. The same watchdog groups have a role in scrutinising the actions funded to make sure they ‘respect, protect and fulfil’ the human rights of the poorest.

Are governments the sole holders of human rights duties? Legally, the answer is yes – governments are the actual signatories of the respective covenants. But, in reality, there are indeed other duty bearers.

Take the example of children as rights holders. The duty bearers of children’s rights are, first and foremost, the immediate care-giver (the mother or other), followed by the family or household members, the community and neighbours, and then local, sub-national, national and international institutions. These all amount to a web of complementary duty-bearers.

This points to nutrition, and the responsibility of its professionals. Together with empowered community leaders, and working with civil society organisations, we need to ensure duty bearers’ responses at all these levels.

What then is to be done?

This is the theory. The challenge right now is to convert these concepts into working programmes, where people’s claims are forcefully exerted as their inalienable right.

The recognition of the fundamental right to nutrition of all humanity is the ethical and political basis of the overall approach nutrition professionals should embrace. But proper understanding of this right has largely so far been confined to international institutions specifically engaged with human rights issues, especially United Nations agencies. How much can these agencies shift current and upcoming nutrition programmes to a human rights focus? Perhaps quite a bit. But all actors, including health professionals, need to see the picture.

One first challenge will be to create a common language to be used by UN and other international agencies, governments and their agencies, professional and civil society organisations, and the beneficiaries. The language needs to be primarily based on social commitments to human rights, and on raising the level of responsibility of the different actors, as more active claim holders and as more responsive duty bearers.

Most governments unfortunately suppose that the recognition of the right to nutrition would interfere with their current policy choices. But states have already signed covenants that guarantee respect of the right to nutrition under any circumstance, irrespective of their resources. While certain aspects of the rights approach can be implemented progressively, governments need to be made to understand that there is a minimum core of rights that all states simply have to uphold.

A second challenge is to make the human rights approach concrete and to give it substance. The field of nutrition is, for sure, an inescapable candidate. For nutrition

professionals, human rights objectives need to be better singled out, defined and refined. The right to nutrition has yet to acquire a concrete meaning and reality. This is an immediate responsibility for all nutrition professionals. Effectively mainstreaming human rights in all nutrition activities remains a challenge of enormous dimensions. The challenge is political. First, nutrition professionals need to see that the human rights approach is crucial and fundamental. For many of us, this involves new thinking and recognition and acceptance of a new conceptual framework.

Personal illness, population health and the medical impediment.

‘HEALTH CARE IS INCREASINGLY USED AS A SUBTLE, WIDESPREAD INSTRUMENT OF SOCIAL CONTROL’.

Nutritionists are not helped when, as is now usual, they are trained in the context of modern Western medicine. This treats disease at the individual level, rather than promoting community health. It attributes the causes of illness to faulty individual behaviour or natural misfortune, rather than to social injustice, economic inequity, and oppressive political systems that disregard people’s human rights.

Malnutrition packs the equivalent of the Twin Towers September 11 death toll every 3½ hours. Differences include that most of the victims are small children, and that practically all the deaths follow weeks of tortuous misery. A larger number of children do not die, but are left disabled or seriously ill. A substantial percentage of malnourished children are child labourers.

Currently, only about 10 per cent of overseas development aid goes to health and nutrition projects and programmes in lower-income countries. This means that external funding for health care and nutrition in all these countries amounts currently only to slightly more than \$US 8 billion a year. Furthermore, health care in impoverished countries is increasingly used as a subtle, widespread instrument of social control.

The gaps in health and nutrition equity worldwide - in terms of numbers of those affected by preventable ill-health and malnutrition - continue to widen. Health and nutrition are more about power imbalances, than about morbidity and mortality. They are more about control over the basic determinants of ill-health and malnutrition, than about the treatment of diseases and the rehabilitation of the malnourished.

The right to nutrition and the fight for this right.

‘WE NOW NEED TO COMMIT OURSELVES TO THE NEW AGE OF THE HUMAN RIGHT TO NUTRITION’.

Making human rights basic and central to the work of nutrition professionals involves the need to demand many things. Among these are:

- That economic and physical access to basic community-based nutrition services be equally guaranteed for girls, women, the elderly, minorities and the marginalised.
- That steps be taken progressively to achieve all human rights (the right to nutrition being the point of departure for nutrition professionals).
- That the private sector (national and transnational) be made to comply with human rights dispositions.
- That accountability, compliance and institutional responsibility be required from relevant duty bearers in all processes aimed at improving nutrition.
- That administrative decisions in nutrition programmes are in compliance with human rights obligations.
- That governments' resilience to embark in meaningful nutrition interventions be differentiated from their inability to comply.
- That, if unable to comply, governments be required to prove that there are reasons beyond their control that stop them from fulfilling their responsibilities.
- That national strategies on the right to nutrition be adopted, using and defining clear, quantified verifiable benchmarks.
- That the implementation of national nutrition strategies or plans of action be transparent and decentralised, and include people's active participation.
- That the same plans progressively also move towards eliminating poverty, the main determinant of malnutrition.
- That new legislation on the right to nutrition be developed involving civil society in its preparation, enforcement and monitoring.

If the above demands are met, the added value of the rights-based approach to nutrition will be such that:

- Beneficiaries will become active claimants of their rights.
- Claims will be made more forcefully (making governments effectively liable).
- This will stress the international and national legal obligations of states.
- The right to nutrition will be the foundation for relevant programme decisions.
- This will move discussion from charity/compassion to the language of rights and duties.

In short, the human rights approach enhances the scope and effectiveness of nutritional, social and economic corrective measures by directly referencing them to what are already being universally accepted obligations found in related UN covenants.

These obligations are in competition with obligations stemming from other rights, especially when resources are scarce. But the duty to fulfil the right to nutrition does not depend on an economic justification, and does not disappear because it can be shown that tackling some other problems is more cost-effective.

To put things in a historical perspective, in the basic human needs-based approach, beneficiaries had no active claim to their needs being met. The human

rights-based approach gives such claims legal and political status and force.

We nutrition professionals all need to commit ourselves, in our teaching and our practice, to the new age of the right to nutrition.

cschuftan@phmovement.org

www.phmovement.org