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SPECIAL RAPPOREUR ON THE RIGHT OF EVERYONE TO THE ENJOYMENT OF THE HIGHEST ATTAINABLE STANDARD OF PHYSICAL AND MENTAL HEALTH

Panel discussion on climate change and the right to health

3 March 2016

Geneva
Mr. President,

Chairperson,

Deputy High Commissioner,

Distinguished Delegates, colleagues, and friends,

I am delighted to be with you today and to participate in this panel on the key issue of the impact of climate change and the right to health. I would like to thank the organizers for convening this timely panel and for inviting me to be part of these discussions.

With the Paris Agreement, adopted on 12 December 2015, the Parties to the UN Framework Convention on Climate Change responded to the calls of many to have a robust reference to human rights in the agreement. Even if the language included in the final text was not what many of us had hoped for, this makes it the first multilateral environmental agreement to explicitly recognize the importance of human rights.

But, Paris should be the beginning, the first step towards putting an end to what, in the words of Mary Robinson, former High Commissioner for Human Rights, is the “greatest single emergency of our lifetime”.

The right to health is an inclusive right, extending not only to timely and appropriate health care, but also to the underlying determinants of health, such as access to quality food, to safe and potable water and adequate sanitation, healthy occupational and environmental conditions, and access to health-related education and information.

Entitlements result from the obligation of States to provide adequate health services necessary for the realization of the highest attainable standard of health, including non-discriminatory access to a system of protection prevention, treatment and control of diseases. They also entail the equitable distribution of all health facilities, goods and services, and the meaningful participation of affected populations in health-related decisions that affect them.

The effects of climate change on the full enjoyment of the right to health already are alarming. They are threatening human health and well-being by increasing causes of morbidity and mortality. Climate-related changes such as heat, drought, flood, hurricanes, are associated with increased rates of cardiovascular disorders, respiratory, gastrointestinal, and renal problems. Environment determinants such as pollen, smoke, dust, stagnant water can lead to chronic ailments.
Climate change also has a negative impact on human dignity and security. Its human and environmental impacts include loss of land and housing, diminished quantity and quality of food production, food insecurity and malnutrition, and forced displacement.

Violence is a major public health concern, including collective violence, which is often linked to displacement and forced migration, armed conflict, State-sponsored violence, and organized crime. Beyond morbidity and mortality, violence damages the health-supporting services and infrastructure in society by limiting access to food, water and sanitation, and medical care. Violence also triggers the diversion of resources contributing to illness and death.

As climate change is intrinsically discriminatory, it perpetuates existing inequalities. Those most affected are the ones in vulnerable situations, the poor and marginalized. They are most affected not only by associated conflict, ill-health and disease but also by fragile and inadequate public health and health care systems, which are unable to cope with the threat-multiplying effects of climate change.

_Ladies and gentlemen,_

Often, the association of climate change and the right to health is limited the impact on physical health but the global community should pay more attention to its mental health dimension.

Climate change is not only affecting human physical health, it is also impacting on the mental health and well-being of individuals and communities affected. Poor physical health and ailments are associated with poor quality of life and psychological distress.

Climate-related disasters, such as floods or hurricanes, leave behind more than physical destruction. People who experience loss of homes or loved ones, or are exposed to life-threatening situations are at higher risk of developing stress and anxiety-related conditions, including post-traumatic stress disorder, or depression. The long-lasting trauma of such experiences, in particular on young children, has a severe impact on the quality of life and well-being of entire communities that should not be underestimated.

Forced migration can be a result of changes in habitats and ecosystems. Such population movements are generally associated with mental health conditions given the forced nature of the displacement, and the stress experienced. Host communities, including health care systems, need to be ready to respond to these complex challenges.
In the context of climate-related emergencies, States must ensure that health services, goods and facilities are and remain available, accessible, acceptable, and of good quality in order to protect and guarantee the full enjoyment of the right to health, especially for groups in vulnerable situations. Effective health responses should be human rights-based and guarantee equality in access, non-discrimination, participation of service-users, and accountability and transparency in health care.

*Ladies and gentlemen,*

States have a legal and a moral obligation to stop and mitigate risks associated to climate change and its adverse consequences to human rights, in particular the right to life and the right to health. And they should do so by ensuring policy coherence across all government sectors and institutions and guaranteeing all human rights, including the right to health, in their fight against climate change.

But for real change, we need bold commitment and a visionary leadership who is able to move beyond short-term gains and corporate greed to address a long-term threat with effective and human-rights based legal and policy action.

As independent experts of the Human Rights Council, my role and that of my colleagues is to continue to raise these issues. We do so using the tools at our disposal, sending communications to States, providing technical advice through country visits, conducting relevant thematic work, and using our public voices contribute to public discussions at the global level.

And we can do more. Global processes such as the Sustainable Development Goals and the 2030 Agenda for Sustainable Development, or the Paris Agreement, are in their early stages. We are ready to take active part in the monitoring of their implementation; we can help ensure that human rights are at the core of the next decade’s work to foster peaceful, sustainable, and inclusive societies.

Human health is not the price to pay. Human health and dignity, the right to health, is the reason to act.

Thank you.