**Dr Binayak Sen:**

**Health and Human Rights**

Kathryn Pollard
Amnesty International Scotland

“When I give food to the poor, they call me a saint. When I ask why the poor have no food, they call me a communist” (Archbishop Hélder Câmara)

Throughout the world community-based initiatives to improve the standard of life of local people can be threatened by the competing interests of the State and its institutions. Access to jobs, improved healthcare facilities, and cohesion through community action all provide a sense of stability and belonging which may frequently be at odds with a State’s provisions for social organisation and control or with its plans for investment and development. Education and community empowerment provide the means and opportunity to challenge the status quo or to resist State-based interventions that may not be perceived to be in the community’s best interests. In the worst cases the State’s response is to try to suppress community development, to stifle dissent, and to punish those who dare to resist.

Yet, as we have seen time and time again, true social development cannot progress without a full commitment by the State to the entire compliment of human rights set out in key international treatises including the Universal Declaration of Human Rights. These rights are based on the fundamental principle that “All human beings are born free and equal in dignity and rights” – that human rights are, by definition, universal and indivisible. For example, nobody can enjoy the right to life, liberty and security of person, as set down in Article 3 of the UDHR, without also being entitled to freedom from torture, or other cruel, inhuman or degrading treatment, without equal access to healthcare, without the right to a fair trial, or without freedom from arbitrary interference in his privacy, family, home or correspondence. Freedom of expression is essential to securing and improving access to healthcare, education, and housing, to taking part in the government of the country (Art. 21) and to performing the duties owed to the community (Art. 29). Ironically, most countries pride themselves on certain aspects of development: pioneering health initiatives, gender equality legislation, or social housing programmes, for example. But if they simultaneously suppress the full range of interrelated rights, and oppress those who try to uphold them, social, and national, progress will forever be constrained and painfully stunted.

A good case in point is that of Dr. Binayak Sen – one time hero and national son of India for his pioneering work in community healthcare. At the time of writing he was marking the second anniversary of his imprisonment and awaiting trial on charges linked to state terrorism:

From Sen’s bleak prison cell in Chhattisgarh state, central India, Dom Hélder Câmara’s famous words must...
ring painfully and ironically true. For almost three decades, the “barefoot doctor” has dedicated his life to pioneering health and education initiatives for some of the poorest and most marginalised communities in India. In April 2008, his efforts to promote and defend the indivisible human rights of those less fortunate were recognised on the international stage when he was awarded the prestigious Jonathan Mann Award by the Global Health Council. Yet, despite his untiring work - or perhaps, more accurately, because of it - Dr. Sen has now spent more than two years in jail, without trial, on trumped up charges designed to punish him for standing up to the authorities – and to deter others from doing so.

Sen’s career began at India’s prestigious Christian Medical College in Vellore where he distinguished himself in paediatrics before broadening his specialism to include social medicine and community health. After a two-year spell working to cure tuberculosis at the Friends’ Rural Centre in Hoshangabad in Madhya Pradesh, Sen moved to Dalli Rajhara in Chhattisgarh, an area famed for its large iron ore mines. Here, mineworkers are mostly adivasis, local indigenous people who are subjected to many forms of social and cultural exclusion, including being denied the right to fair wages and working conditions.

Before long, Sen began working with the local mine workers’ trade union and, after a short time, had helped found the Shaheed Hospital, a community initiative funded by the mineworkers but open to anyone in need within a 100km radius. Working for a minimal salary, Sen lived among the workers and trained local volunteers to become highly skilled in patient-care, hospital administration and accounting. By empowering local people to help themselves the hospital has now grown in size from a humble ten beds when it opened to around 110 patient beds. Non-medical staff continue to be trained in-house, providing jobs for the community, and access to healthcare spread as a number of smaller, satellite clinics opened in neighbouring districts. In fact, the Shaheed Hospital has been so successful that it is still frequently cited as an example of pioneering healthcare for the poor in India.

Building on this success, Binayak and his wife, Prof Ilina Sen, set up Rupantar, a community-based non-governmental organisation which aims to address health needs and civil liberties in an integrated way. As at the Shaheed Hospital, Binayak and Ilina trained volunteers to become community health workers operating across more than 20 villages in the region. Supported by a fully-trained medical team, staff provide education and support to counter alcohol abuse and violence against women, and to promote food security.

Dr. Sen’s public health initiatives have been credited with reducing child mortality rates in the state and have led to other, state sponsored, public health programmes including the training of “mitanin”, or women health activists.
In fact, the Global Health Council goes so far as to directly recognise the role of Dr. Sen’s health programmes in shaping the National Rural Health Mission, the flagship health programme of the Indian Government. “Dr. Sen’s accomplishments speak volumes about what can be achieved in very poor areas when health practitioners are also committed community leaders,” said Dr. Nils Daulaire, president of the Global Health Council. “He has spent his lifetime educating people about health practices and civil liberties - providing information that has saved lives and improved conditions for thousands of people. His good works need to be recognised as a major contribution to India and to global health”.

As well as all his work on public health, Dr. Sen was also national vice-president, and regional secretary-general, of leading human rights organisation, the People’s Union for Civil Liberties (PUCL). In this role, he has helped to create awareness of the deprivation, poverty, and discrimination that contribute to the social unrest in the area. For years, local people have been caught in the middle of a conflict between the banned Communist Party of India (Maoist) and the Salwa Judum, a private militia widely believed to be sponsored by state authorities. Under Sen’s leadership, the PUCL has documented and publicised atrocities and human rights violations including the unlawful killings of adivasis, rape and sexual assault of adivasi women, abductions and forced disappearances, which have cumulatively resulted in the displacement of between 30,000 and 100,000 people from their homes - many of which are frequently reported to have been on valuable mining land. On top of this, an ongoing famine in the region means that many suffer from severe malnutrition.

Shortly before his imprisonment, Dr. Sen publicly alleged the involvement of state police and the Salwa Judum in the killing of twelve adivasis. Only weeks later, he was arrested under the controversial Chhattisgarh State Public Security Act (CSPSA) and the Unlawful Activities (Prevention) Act (UAPA) for acting as a “courier” between imprisoned Maoist leader, Narayan Sanyal, and his supporters outside of the prison. If he is found guilty, the crime could carry a sentence of life imprisonment. Both the CSPSA and the UAPA contain vague and sweeping definitions of “unlawful activities” for which organisations may be rendered “unlawful”, such as “uttering words…which propounds the disobedience” of “established law and its institutions”. This enables the government to arbitrarily arrest and detain individuals, as well as seek their punishment, on grounds that may not be clear to them, in violation of the principle of certainty in criminal law, reflected in Article 15 of the International Covenant on Civil and Political Rights, to which India is a state party. This has resulted in restricting peaceful activities by civil society and individuals in violation of human rights such as freedom of expression and assembly which are enshrined in India’s Constitution and in international human rights law.
In fact, Dr. Sen had been acting in his official capacity for the PUCL in carrying out visits to prison inmates of all political persuasions to ensure that their fundamental human rights were respected and to monitor their health status. His visits, and those of other PUCL members, were fully authorised and supervised by the prison authorities and so far there has been no real evidence to make a case at trial. Consequently, Sen has been held for over two years without bail and, at times, in solitary confinement. His health has rapidly deteriorated but, despite both local and international efforts to secure his release, including a petition signed by 22 Nobel Laureates, he remains in prison\(^1\), his trial date repeatedly postponed.

Dr. Sen’s arrest reflects an alarming trend of harassment and imprisonment of human rights activists in India for challenging state authority. When Sen pioneered healthcare for India’s rural poor, the state praised him as a saint, enlisting his expertise to train other health workers and using his work to shape national health policy. But when he challenged violations against a broader, but no less fundamental, range of human rights – the right to life, liberty and security of person, the right to a standard of living adequate for the well-being of the local people – they quite literally called him a communist and arrested him under state terror laws.

Yet, under the Universal Declaration of Human Rights, to which India is a signatory, all human rights are indivisible, interrelated and interdependent. The right to healthcare is absurd when the state fails to recognise a basic right to life. Dr. Sen’s case highlights that we cannot rate some human rights as more important or fundamental than others. Often people will argue that deprived communities need food or shelter more than they need freedom of expression. Sadly repeated experience shows us that these communities cannot rely on charity or goodwill to provide them with justice. Without political rights such as the right to organise, the right to a fair trial and freedom of expression how are communities to express their needs and demand a fair share of resources?

\(^1\) Since this piece was written, Binayak Sen was released from prison on medical grounds although the charges against him remain and his freedom of movement is considerably restricted. The campaign continues.

During 2009, Amnesty International’s ‘At the Festival’ campaign focused on Dr. Binayak Sen’s case to add international pressure to the call for the release of an innocent man. Events were held at the Edinburgh Festival, the West End Festival in Glasgow, the Aberdeen Writers Festival, Leith Festival, the Big Tent Festival in Fife and Knochengorroch Festival in Dumfriesshire, culminating in a weekend event in Glasgow in September. To find out more about how you can add your support to the campaign visit our website at www.amnesty.org.uk/scotland

Background to the story can be found at www.binayaksen.net. To receive updates regarding the campaign in Scotland, please contact scottishaction.binayak@googlemail.com