

# Doctors for Human Rights



[www.doctorsforhumanrights.org](http://www.doctorsforhumanrights.org)

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## Bernie Hamilton's death shocks the human rights community

In the early hours of Christmas Eve 2005 Bernie Hamilton lost his battle with an unusually aggressive cancer. At 60, Bernie was an established internationally respected human rights scholar and activist who worked tirelessly for many human rights causes. Since 1998 Bernie had served as Senior Advisor to DHR, as well as being President of the Leo Kuper Foundation, dedicated to eradicating genocide through research and education, and co-chair of the Human Rights Interest Group of the American Society for International Law.

He taught regularly at Birkbeck College, London and elsewhere, including the University of Oxford, American University in Washington DC and the University of Maryland. From 1990 to 1995 he was Director of the Washington DC office of Minority Rights Group International. Bernie contributed frequently to human rights publications, and edited *Cases and Materials on Genocide* (Clarendon, forthcoming).

Bernie approached human rights with the idea that scholarship and instruments were practical tools to make human rights work for people. Using clear, careful reasoning based on deep knowledge and compelling delivery as a writer and teacher, his leadership empowered professionals as well as his students and demonstrated the drive with which he pursued human rights activism. Bernie schemed, organised, networked, collaborated, oiled, ce-

mented, cajoled, criticised, but above all stood for one thing - the essential importance of human rights.

Two achievements stand out that typify his approach: his back room work in Washington DC during the mid 1990s building a strong coalition of human rights NGOs to support the creation by the UN of the International Criminal Court; and latterly his work as the medium that started the process of the development of UN General Comment 14 on the right to the highest attainable standard of health.

Bernie's last weeks were brightened by



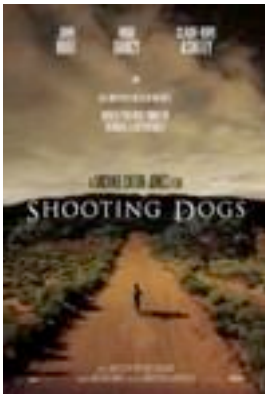
*Bernie Hamilton in listening mode at Essex University Human Rights Centre in July 2005*

the House of Lords unanimous opinion against using evidence obtained through torture in court, for which he co-authored an amicus brief, with the warm messages he received from members of the human rights community, and by the recent engagement of his daughter.

## Two more films about Rwandan genocide

The Rwandan genocide was one of the defining events of the twentieth century. *Shooting Dogs*, the second feature film of the genocide, uses the Rwandan equivalent of the Srebrenica massacre as a back drop to the dilemmas faced by two (fictional) British expats caught up in the events. The large number massacred at the Ecole Technique Officielle (ETO) and the inhumanity of their abandonment justifiably generated huge resentment amongst survivors, and gained symbolic importance as an example of the failings of the United Nations Mission (UNAMIR).

During the genocide Andrew Carney and I documented a similar smaller massacre at nearby Ndera Psychiatric Hospital\*. John Simpson's BBC TV News item showing us examining victims' remains, was nominated for a BAFTA award. Months after our return to England a Panorama BBC TV programme about the genocide showed a clip of the Ndera victims before they died. As TV teams recorded French troops evacuating expatriates from the hospital hours before the killers struck, those whose remains we had found were filmed pleading to the French soldiers with immense dignity. One woman, almost certainly correctly, claimed should be raped and then killed.



The HRW report *Leave None to Tell the Story: Genocide in Rwanda* \*\* describes what took place at the ETO during those first few days of the genocide. "After the genocide started on April 7th residents of the neighbourhood of Gatenga fled to the ETO, as Rwandan soldiers and militia swept through the area killing, raping, and robbing Tutsi and members of parties opposed to the Government party. The UNAMIR troops at the ETO heard the gunfire and explosions of grenades all

day long without attempting to intervene, but they did permit Tutsis to take refuge at the school. By April 11 the grounds held 2,000 people, at least 400 of them children. Rwandan soldiers and militia hovered outside waiting. Rwandan soldiers and militia hovered outside, waiting. Some Tutsi had begged the Belgian officers to shoot them rather than leave them to die at the hands of the genocidaires. Shortly after noon, the Belgian commander, acting on direct orders from Brussels to evacuate the country, ordered his troops to quit the school. As they drove out of one gate of the school, the killers rushed in through another. Most of the 2,000 were killed that afternoon, within hours of the departure of the peacekeepers from ETO."

*Shooting Dogs*, directed by Michael Caton-Jones (Scandal, Memphis Belle, Rob Roy) is a gripping, well produced film and very much worth seeing. Unlike *Hotel*

### Draft mental health bill scrapped

After eight years of campaigning by DHR, mental health charities and psychiatrists, the government scrapped its planned reforms of the 1983 Mental Health Act.



Ministers plan to press ahead with the most controversial aspects of the draft mental health bill in streamlined legislation. DHR is concerned it will prove no less draconian.

*Rwanda*, Caton-Jones pulls few punches when it comes to massacre scenes, but is not pornographic. The use of two white people as the main characters may be necessary to get the film seen in the West, but jars despite that. Two gripes - the soon to be victims seem concerned rather than terrified, as they surely must have been; and lovely though the Rwandan music is, I wished for something grander and more disturbing.

The third in the trilogy of films about the genocide, *Sometimes in April* is a story of courage in the face of daunting odds, as well as an exposé of the West's inaction. The plot focuses on two brothers embroiled in the conflict. The protagonists (both Hutus) are reluctant soldiers - Augustin Muganza (Idris Elba), married to a Tutsi and father to three, and his brother Honoré (Oris Erhuero), a popular public figure promulgating Hutu extremist propaganda via Radio RTLM to mainly illiterate listeners.



The drama unfolds as, Augustin, defying the leadership, attempts to get his wife and children to safety. Separated from them (he entrusts their care to his reluctant brother), Augustin gets caught in the struggle to survive. Barely escaping the purge, he's haunted by questions about what happened to his family.

10 years later, Augustin visits the United Nations Tribunal in Arusha, where Honoré awaits trial for the role he and other journalists played in the genocide. In the end, through an emotional meeting with Honoré, Augustin learns the details of his family's fate, giving him closure and, perhaps, hope for happiness in the future.

Of the three films, *Sometimes in April* is the most valid in that the main characters are Rwandan and some of them are killed. It does not deal with the exception but with the reality. Raoul Peck's film brings the scale of the atrocities and the post genocide scars home in ways that *Hotel Rwanda* does not attempt. This film is the best of the trio and will help the world comprehend what happened in 1994 better than the other two.

\* Rwanda 1994: a Report of the Genocide. pp27 London 1995 <http://www.doctorsforhumanrights.org/en/reports.html>

\*\* HRW. Leave None to Tell the Story: Genocide in Rwanda. UNAMIR chapter. New York 2000 <http://www.hrw.org/reports/1999/rwanda/index.htm>

## **HUMAN RIGHTS FOR ALL – ALL FOR HUMAN RIGHTS**

**by Bernie Hamilton**

Bernie's last presentation - given on his behalf  
by Dr Helen Bygrave at the 2005 AGM

### **THE IMAGE OF HUMAN RIGHTS**

It is amazing what human rights mean to different people. Except to certain newspaper editors, they seem to convey a positive image. To some, it is a rather sweet image, sugary even, but with very little substance. I was once at an annual Human Rights Day prize giving and enquired why one of the recipients had received her prize and was told it was for flower arranging. So for her particular nominators at least, brightening the home was a worthy human rights activity. The remaining hundred in the room would probably disagree, and that's because of how we define human rights.

### **DEFINITIONS OF HUMAN RIGHTS**

One of the problems with seeking a satisfactory definition for human rights is caused by the predominance of legal thought in human rights. There is a legal definition of human rights, and that gets accepted as the only one. A philosophical definition, such as human rights are strong moral claims, can get overlooked.

### **HUMAN RIGHTS AS A TOOL**

Of course, there is wisdom in adopting a legal definition, because you can actually do something with it. If we say that human rights legally protect individuals and groups against violations of internationally agreed rights, we have a very useful tool. We have a universally agreed language enforcing globally accepted standards. We have clear legal rules. We have protection for all individuals and groups.

### **THE UN CHARTER**

This is what the United Nations gave the world in its Charter of 1945. Those internationally guaranteed rights have been refined over the decades, in part due to our increased

knowledge and awareness, but also due to a greater political will to act on human rights. The 1948 Universal Declaration of Human Rights saw the first effort to outline the rights referred to in the UN Charter, and there have been numerous efforts ever since, drawing primarily on both international treaties and customary international law as their source.

### **THE PROPER USE OF THE TOOL**

These rights set out clearly who is the rights holder, the individual or group, and who is the duty holder - the State. And this is where we begin to see the difficulty. The State holds an obligation to individuals and to groups. International monitoring bodies supervise how each State implements its duties. It's a simple process. Obligations are enforceable whereas vaguer sounding responsibilities are not. But where does this leave the rest of us? Are we devoid of any responsibility? Is everything to be left to the Nanny State?

### **THE UN'S INTENT**

The answer is not unless we let it. The 1948 Universal Declaration of Human Rights makes it clear that every individual and organ of society must be involved. It would be a tremendous waste if they weren't. Take doctors for example. The seven core UN human rights treaty bodies that monitor State performance contain over one hundred independent experts – but how many of these are doctors? On average there are two at the most. One of these is usually on the Committee against Torture. The other experts on these treaty bodies are often lawyers or diplomats, sometimes both. The lawyers could be academic lawyers and could know a lot about human rights, but few have the specialist knowledge of some human

rights areas that a doctor could bring. In the same way, the UN Committee on the Rights of the Child needs children's specialists to speak up for the children whose rights are being monitored. It makes little sense not to draw on such expertise.

### THE NEED FOR EXPERTISE

Turning to other areas of the UN human rights set up, we find no doctors on the staff of the Office of the High Commissioner on Human Rights. I'm aware of the letters that come in daily, desperate letters; and I accept the need for lawyers to deal with their intricacies and draft faxes to dictators to tell them that the UN knows what is going on in the murkier corners of their countries. But could not these lawyers benefit from the advice of just one medical expert on the entire staff of the High Commissioner in Geneva? I think so.

### SPECIAL RAPPORTEUR ON THE RIGHT TO THE HIGHEST ATTAINABLE STANDARD OF HEALTH

Before going any further, let me clarify DHR's position. We are not opposed to lawyers at the UN. More specifically, nothing I say about the need for doctors to contribute to the UN's human rights work applies to Professor Paul Hunt, who is a lawyer and not a doctor, and has recently been elected for a second three-year period as Special Rapporteur to the UN Commission on Human Rights on the Right to the Highest Attainable Standard of Health. His work over the last three years has been exemplary, and DHR has nothing but praise for him and his contributions to this aspect of human rights.

### MEDICAL INVOLVEMENT IN THE UN

One of the reasons that the Special Rapporteur's work has been so successful is that Professor Hunt has been willing from the outset to consult medical experts, whether doctors or other health specialists. This is compatible with the Universal Declaration. Individuals or clusters of individuals, whether we call them

groups, organs or organisations, must have a conduit for their speciality to reach the UN's human rights community. If the UN doesn't know we're out here, it won't contact us; but if we contact the UN and let it know that we're organised and ready to contribute of our expertise, our influence will spread. We can do this through the UN website or through organised groups, such as DHR, who maintain a relationship with the UN.

### INVOLVEMENT IN A Dr's NGO

This is the advantage of working through DHR. We do have a well-established relationship with the UN. We can see aspects of UN work where the input of medical expertise would be invaluable. Key areas for us are torture, the treatment of detainees and other gross violations of human rights; international crimes demanding universal jurisdiction, including war crimes, genocide and other crimes against humanity; the right to the highest attainable standard of physical and mental health; the death penalty; and the human rights education of health professionals. The list could be bigger if we had more resources to respond to the increasing number of requests that come our way.

### HOW DHR MEMBERS EXERCISE THE MEDICAL RESPONSIBILITY

Members help us in all sorts of ways. They write letters to newspapers or to governmental bodies. They come to Geneva and help our delegation expound its case. They give media interviews. They perform administrative work. They serve on our Committee. Those with little time give us money. The important thing is that everybody helps to get a medical perspective into human rights. Members recognise that, although States have obligations, doctors have responsibilities. Doctors know more about the death penalty than any government, it is up to us to live up to our responsibility and place our knowledge where it is most needed. A donation to DHR today could be the first step. Why not give something today?

## What is left of Bernie

Over the 7 years Bernie worked for DHR, he and I exchanged roughly three e-mails daily - week in week out. Occasionally they dealt with Liverpool FC's lack of success, but the remainder dealt with DHR and human rights, or with notable world events. Inevitably I was exposed to a huge amount of human rights scholarship and wisdom on the human condition that reflected Bernie's gentle and generous view of people .

### Claim for health and human rights

The discipline of health and human rights, in exploiting all human rights' potential as a vehicle with which to preserve and promote health, plausibly has the potential to relieve more suffering and prevent more premature deaths worldwide than any other strategy.

## The future for DHR

DHR without Bernie Hamilton will be a different animal to the one that he helped to create. Without Bernie to make DHR a normal human rights organisation with a niche interest in health rights, DHR will revert to type and become a health and human rights organisation with a niche interest in generic human rights.

DHR's unique combination of experience of medical practice, and of both civil and political rights, and economic social and cultural rights - as a result of Bernie's eclectic range of human rights projects - is a uniquely potent resource with which to promote health and human rights.

## The world has moved towards DHR in the last 7 years

Human rights concepts have become increasingly incorporated into UK culture during the last seven years. For instance the Human Rights Act was passed with a great deal of cross-party support in 1998 and brought into force in October 2000. This has influenced a number of medical cases including the legal recognition of Diane Blood's former husband as the post-humous father using his frozen sperm after his death. NHS patient Yvonne Watts won her case for reimbursement of the cost of undergoing a hip replacement in France after the European Court of Justice ruled under human rights legislation that she had suffered "undue delay" in receiving treatment. And although Diane Pretty lost her case claiming that her husband should be immunised from prosecution as her condition required the assistance of someone else to help her end her life, it was acknowledged that this complicated issue could not be resolved by the courts but would be better decided by Parliament.

Both Human Rights Watch and Amnesty International have newly developed Economic, Social and Cultural (ESCR) rights programmes rather than limiting themselves to Civil and Political Rights. Human Rights Watch addresses ESCR when their method of investigation and reporting is most effective, such as when arbitrary or discriminatory governmental conduct lies behind an ESCR violation. Amnesty claims that no-one should be denied their rights to adequate housing, food, water and sanitation, and to education and healthcare.

## A short piece on life's influences

by **Dr Gill Hinshelwood**  
DHR executive  
committee member

What am I doing here? A question that forms in my mind in DHR committee meetings, after the second hour of discussion and struggling with the endless problems of funding. Committee meetings are hard work, and it is not difficult to lose sight of the goal, and become disheartened. Apart from being there, sometimes to ensure a quorum, what do I contribute? Fundraising is not my forte, nor have I mastered the considerable body of theory that is important to the implementation of Human Rights. The acronyms are hard enough to remember, and it's easy to feel deskilled if one cannot trip these off the tongue lightly.

DHR is a small organisation. I was recruited in 1998 to contribute to a clinical project, when I was working for the Medical Foundation for the Care of Victims of Torture. 'Now, that's what I can do,' I said to myself. Four of us, all clinicians, went to Armenia, to study, examine and document evidence of torture inflicted on Armenian citizens by the Azeris during the war over the disputed region of Nagorno Karabakh, from 1987 to 1994. We published a lengthy paper on our return and pressed for a number of actions, nationally and internationally. MPs took an interest. Each one of us gave a few talks to interested groups, and for a few years we kept in touch with our contacts in Armenia.

This inspired me to join DHR (then called PHR-UK) and I was fairly soon invited to the committee. Since then there has been one other project, in Gaza. We have concentrated on the teaching of Human Rights in institutions, particularly Medical Schools and hospitals. We have

developed successful and popular teaching modules. We have campaigned for the International Criminal Court, for an end to Genocide, and many other issues. A full list of the work DHR has been involved with is presented on our website, and new ventures are well discussed in our bulletin. But the work is increasingly done by fewer people. Bernie Hamilton, who died this Christmas will be greatly missed for his experienced and generous contributions as our Human Rights consultant. Together with Peter Hall, our chairman, he has done most of the active work, the campaigning, speaking at conferences, to politicians, the press and the public. His obituary appears in our newsletter, and it shows how fortunate we were to have had him in our organisation. The committee is losing Helen Bygrave as she is now in Lagos, Nigeria, working for MSF in an HIV clinic. Not of course lost to the work and the organisation, as she has already produced a report on the conditions there.

Does DHR matter, when there are so many outlets for active Human Rights work in our day-to-day medical practices? Perhaps more and more. Medical treatments and patient care are ever more complicated, and the issues arising from them increasingly exercising. And not just the narrow confines of medical treatments and care. The huge divisions between rich and poor societies worldwide bring health and human rights issues to our doorstep daily. We are even expected to accept the 'necessary' benefits of torture!..

I have drifted around on the fringe of human rights activities all my working life, without thinking that small actions and protests went by that name. At UCHMS a small group of us students managed to persuade a particularly extrovert and flamboyant surgeon to modify his rather dramatic way of revealing a patient's all to a group of eight curious learners.

I was fortunate that my elective period was spent with an enlightened group practice in Kentish Town, the Caversham Centre, where issues such as attitudes to abortion, birth control for the unmarried, and euthanasia, were discussed in practice meetings regularly.

In my first house appointment at St Giles Hospital Camberwell in 1964, a pale and ill looking woman staggered in, haemorrhaging severely. I admitted her, rapidly doing what was necessary, and phoned my registrar. Who came, took one look at the woman, and said angrily "You've disturbed my lunch for HER. You know what she's done!" He wasted more valuable time soundly reprimanding me, in front of her, for treating her like a human, when he considered her an animal. I remember being shocked at the time, and apologising for him. Together with our more enlightened casualty sister we comforted our just about conscious patient while putting a drip in place, and made a complaint about the behaviour of that registrar. The outcome is lost in the mists of time, but my amazement and horror at his outburst I will never forget.

I feel pleased to be a member of an organisation that works hard to expose human wrongs and tirelessly seeks for ways in which the Medical Profession can fight for human rights, and especially the right to health.

Declared interests:- Many. I would like to see our numbers swell. We need doctors with ideas, energy and commitment. If you are already too busy to involve yourself actively, and many, many doctors are, then we need your subscription. Every penny goes on the work. There are very few overheads. Human Rights have to be fought for; they can be imperceptibly eroded with every act of complacency on our part. So please consider DHR now.

## The election of DHR committee members

### AGM 2006

including the election of DHR officers

Saturday 2nd December

11.15 am - 11.45

at the

The Boardroom

**The Institute of Neurology**

**Queens Square**

London WC1N 3BG

This year DHR continues the election cycle as described in the Newsletter prior to the 2000 AGM.

This year the officers of the executive committee will be elected - that is chair, hon. secretary and hon. treasurer

Members can vote in the Members' Ballot by attending the AGM and voting, or by postal vote, arriving at 91 Harlech Rd, Abbots Langley WD5 OBE not later than three days prior to the AGM.

Nominees names must arrive not later than three days prior to the AGM to include:

- a. written notice of a members nomination signed by one other member of DHR
- b. a written agreement to serve in such office if appointed signed by the nominated member elected

## Publications

Two important papers were published by DHR during the last 12 months, and a pivotal paper in the promotion of health and human rights is currently submitted for publication (BMJ). The first, a letter in the Lancet (Oct 2005), calls for national representative organisations to cooperate over the arrest of doctors complicit with torture. The second (July 2006 - BMJ editorial) is the first medical paper to explain the legal basis of the right to the highest attainable standard of health, and how restricting access to free NHS healthcare for asylum seekers violates their human rights and international law. The last describes the importance of the right to the highest attainable standard of health to medical care and doctors, and boasts the running title 'An ethos in search of a profession'. Those already published can be viewed in the the news section of DHR's website.



**Adam Curle**, former first Professor of Peace Studies at Bradford University, died aged 90 on September 28th 2006. He was a mediator and risked his life pursuing peace between warring factions in trouble spots around the world. A pacifist and a Quaker, Professor Curle was awarded the Ghandi peace prize in the year 2000. Many considered his work worthy of a Nobel Peace Prize.

He accompanied Peter Hall on the DHR initiative in Rwanda to help promote reconciliation between genocide survivors and the Hutu population in Rwanda in 1995. He was a wonderful man with a lovely sense of humour and bottomless fund of stories. The Bradford Department of Peace Studies is now the largest and amongst the best known centres for peace and conflict studies in the world.

# The Bernie Hamilton health and human rights lecture 2006 after the AGM

12 noon - 1 pm , Saturday 2nd December 2006

The Boardroom

**The Institute of Neurology**

**Queens Square**

London WC1N 3BG

## **“The importance of the right to the highest attainable standard of health to doctors and medical practice”**

Dr Peter Hall, chair - Doctors for Human Rights

Peter Hall has been a full time NHS physician for 36 years. He was a founder member of Physicians for Human Rights-UK in 1989, and has been chair for 10 years. PHR-UK, which changed its name to Doctors for Human Rights in 2004, channels the humanity, influence and special skills of the medical profession into the protection of human rights around the world.

Peter Hall has participated in fact finding investigations in Kuwait/Iraq, Israel/Palestine, and Egypt and is one of only three human rights people to document massacres in Rwanda itself during the 1994 genocide.

He played a role in developing UN General Comment 14 on the right to the highest attainable standard of health, and is a leading advocate for the integration of health and human rights into healthcare.



Admission: £5

No charge for DHR members and students.

Book online at [www.doctorsforhumanrights.org](http://www.doctorsforhumanrights.org) OR write to Dr Peter Hall, 91 Harlech Road, Abbots Langley, Herts WD5 0BE, where appropriate enclosing a cheque made payable to “DHR”. Please include your e-mail address with any written correspondence to ensure as prompt a response as possible.

Tel: 077707 96609

E-Mail: [peterhall@doctorsforhumanrights.org](mailto:peterhall@doctorsforhumanrights.org)

**How to get there: Bus** - 68, 168 and 188;

**Tube** - Russell Square (Piccadilly Line);

**Train** - Euston & Kings Cross stations are close by