

consider discussing the so-called strategy paper which does not have the imprimatur of ... any statutory, advisory or decision-making body...

The "Strategy Paper"...is drafted in the a-historical and unscientific language of Malthusian scare-mongering. While it recognises that infrastructure is weak, and that the quality and coverage of health services are poor, it absurdly attributes these failures of the State primarily to population growth. While it recognises that there is an adverse sex ratio, it is not averse to calling for a two-child national norm when it is absolutely clear that such norms have indeed contributed to the adverse sex ratio. While it recognises that there is an unmet need for health and family welfare services, it contradictorily calls for a range of incentives and disincentives, holding up Andhra Pradesh as an example. Further, it argues, incorrectly, that China continues to have a one-child norm. In any case, comparisons between India and China are inapposite for a large number of reasons, including per-capita incomes, achievements in health, equity and education that India can unfortunately not boast of. Finally, the so-called strategy paper invidiously suggests that concern for rights and equity are current only in NGOs financially supported by UNFPA...

Depriving children of their rights to survival and development is violative not only of the International Convention on the Rights of the Child, but also of successive directives of the Supreme Court to enhance their right to education. We request the NHRC to direct States to comply with these directives and not use population policies to deny these rights.

The 73rd and 74th Constitutional Amendments sought to strengthen and expand the base for India's democratic governance by providing Constitutional recognition to local self-government bodies. The States' legislations on Panchayati Raj providing disqualifications on the basis of the two-child norm invariably cite the National Population Policy as the rationale for such restrictive and punitive measure for elected representatives of the Panchayats, when the National Population Policy does not provide such a norm. Moreover, similar disqualifications are absent for representatives elected to State Assemblies and Parliament. We request the NHRC to take cognisance of this violation of Constitutional rights, and direct States to strike down these provisions.

And finally we urge you to take necessary measures to ensure that steps proposed in the so-called "Strategy Paper" and the UP Population Control Bill that violate human rights are not now included in the population policy.

All India Democratic Women's Association, Centre of Social Medicine and Community Health (Jawaharlal Nehru University), Centre for Women's Development Studies, Centre for Enquiry into Health and Allied Themes, Delhi Science Forum, Forum for Creches and Child Care Services, Jagori, Jan Swasthya Abhiyan, Joint Women's Programme, Karnataka State Women's Information Resource Centre, Mahila Sarvangeen Utkarsh Mandal, Medico Friends Circle, National Federation of Indian Women, Nirantar, Saheli, Sama, Young Women's Christian

Doctors in Pakistan and India against war

As a million soldiers face each other across the volatile line of control and the border between India and Pakistan, the arguments have shifted from no use of nuclear weapons to their potential use in the event of conventional war, to the current state of actual deployment...a nuclear first strike becomes a frighteningly real possibility...

In contrast to the nuclear disarmament appeals from a few years ago, most of the medical associations on both sides of the border have maintained an ominous silence... (One) explanation is that few among the health professionals are even remotely aware of the true meaning and consequences of a nuclear conflict...

The current nuclear imbroglio in India and Pakistan is a direct consequence of a lack of human and social development in the region. Malnutrition rates in the region are among the highest in the world, and successive generations have been fed a daily gruel of intolerance, jingoism, and religious fervour by political and military governments. The current military standoff must also be viewed in the context of the growth of religious intolerance and lack of social development in both countries. A conservative estimate of the costs of nuclear weaponisation in India placed it at well over \$10bn and although modest by comparison, it is sobering to note that Pakistan's recent ballistic missile tests alone could have funded the entire health budget of several districts...

With Hindu extremists tugging at its sleeves and Islamic militants attempting to trigger an all out conflict, neither India nor Pakistan possesses stable command and control systems ensuring that an accidental conflict will not be triggered ... The only prudent way ahead for the leadership of the two countries is to step back from the brink and start substantive discussions and political dialogue. The large cadre of health professionals and societies in both countries, as indeed globally, must assume responsibility for the promotion of peace, and eventual nuclear disarmament.

Extracted from: Zulfiqar Ahmed Bhutta, Karachi, Samiran Nundy, New Delhi, Editorial Thinking the unthinkable! Preparing for Armageddon in South Asia BMJ June 15, 2002