Role of health profession and services in violence

∧ three day international conference on the role of health professionals in human rights was organised by the Centre for Enquiry into Health and Allied Themes (CEHAT) from November 28 to 30, 1998. Preventing violence, caring for survivors: role of the health profession and services in violence was inaugurated by Justice VS Malimath, member of the National Human Rights Commission, who spoke eloquently on the state of human rights in our country today, and the changes that need to be brought about.

Mr Adriaan Van Es of the International Federation of Health and Human Rights Organisation spoke about the work being done by their organisation and emphasised the need sot the human rights organisations all over the world to work together.

This was followed by a keynote address sent by Mr Jaap A Walkate, chairman of the Board of' Trustees of the UN voluntary fund for victims of torture. Geneva. Mr Wal kate was unable to attend the conference because the Indian government denied him a visa. His address spoke mainly of the possible involvement of physicians in incidents of state violence. He emphasised that under no circumstances should physicians part ic i pate in tortuI-C; when called to examine such victims, physicians should be able to ascertain whether torture has been inflicted, and treat the victim. They should not abet such torture by keeping quiet.

Ms Binoo Sen, member secretary of the National Commission for Women, addressing the issue of gender-based violence, spoke of the need for health professionals to adopt a pro-active

Dr Simmi Sachdeva, *1208*, *Nilanjana Bldg., Marve Road*, *Malad (W), Mumbai 400 064*. policy that responds to women in distress, takes care of their health needs and helps link the emotional and physical effects of violence on women. Also emphasized was the need for the health community to build linkages so that effective intervention could be made through support groups and voluntary organisations.

Ms Ann Sommerville, head the department of medical ethics in the British Medical Association, spoke briefly about educating practicing doctors about medical ethics, the link between human rights and medical ethics and the need to develop global communication systems facilitating an internationa network of health professionals, lawyers, patient advocates and human rights activists.

The later sessions were broken up into group discussions. The four main groups addressed issues of violence against women; state violence; communal violence and violence against minori ties, and heal thcare and response to violence. During these discussions, Ms Iris Tetford of the World Health Organisation spoke passionately about the need to see violence against women as a public health priority. She also discussed the 1996 World Health Assembly resolution formulating а scientifically-based plan of action for the prevention of violence.

Mr Arvind Tiwari of the Commonwealth Human Rights Initiative (CHRI) spoke of the CHRI's ongoing programmes and highlighted the role of medical officials and paramedical staff in respecting the human rights of incarcerated prisoners, while providing them care and treatment.

Ms Niraj Seth of the Rajiv Gandhi Foundation spoke about mental health issues of families affected by terrorism, etnphasising the importance of children's well-being and the need for intervention by mental health professionals.

Mr James Welsh, co-ordinatot-, Amnesty International, London, who was also unable to attend the conference after he was denied a visa. sent a message expressing his disappointment. Health professionals in AI have sought respect for the rights of asylutn seekers and refugees, and the proper provision of medical care to prisoners.

The second day of the conference concentrated on the current health care facilities and the need for treatment for survivors of violence.

Mr Jagdish Sobti of the Communication Centre emphasised the need to train medical practitioners in the management of victims of torture and violence and informed the delegates of a new postgraduate course in this subject started by the Indian Medical Association.

Ms V Nathanson of the BMA spoke about rehabilitation centres to help torture survivors and survivors of domestic and other violence. She noted the importance of navigating hostile politic al and social environments to ensure the safe establishment and survival of help centres.

Delegates were given two packages: a manual and evidence kit for examing physician in cases of sexual assault on women, prepared by Dr Lalitha D'Souza of CEHAT, and a model autopsy protocol for physicians, presented by Henri Tiphague, Director, Peoples Watch, Tamil Nadu.

On the last day, discussion focussed on strategies, research issues and the need for networking and joint action. Delegates made interesting inputs regarding national and international policies, the role of health professionals in treatment and rehabilitation, ethical issues, and the need for more intensive community level campaigns.

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