The Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, Mr Dainius Pūras (Lithuania), is a medical doctor with notable expertise on mental health, child health, and public health policies. Mr Pūras is a Professor and the Head of the Centre for Child psychiatry social paediatrics at Vilnius University, and teaches at the Faculty of Medicine, Institute of International relations and political science and Faculty of Philosophy of Vilnius University, Lithuania. Mr. Pūras assumed functions as the Special Rapporteur on the right to health on 1 August 2014. Human Rights Council Resolution 33/9 renewed the mandate for a period of three years, extending the tenure of Mr. Pūras to 2020.

The right to health

The right to physical and mental health is reflected in various international and regional human rights instruments, including the Universal Declaration of Human Rights (Art.25(1)), the International Covenant on Economic, Social and Cultural Rights (Art.12), the International Convention on the Elimination of All Forms of Racial Discrimination (Art.5(e.iv)), the Convention on the Elimination of All Forms of Discrimination against Women (Art.12), the Convention on the Rights of the Child (Art.24), and the Convention on the Rights of Persons with Disabilities (Art. 25).

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 safe and potable water and adequate sanitation, healthy occupational and environmental conditions, and access to health-related education and information, including on sexual and reproductive health.

In 2002, the Commission on Human Rights, the then principal political body dealing specifically with human rights in the United Nations system, decided to appoint, for a period of three years, a Special Rapporteur to focus on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.
Following the replacement of the Commission by the Human Rights Council, the Council adopted decision 1/102, which extended all mandates of the former Commission, including that of the Special Rapporteur. In June 2014, the Council appointed Mr. Dainius Pūras as Special Rapporteur on the right to health.

Pursuant to its resolution 6/29, the Human Rights Council reiterated that the mandate of the Special Rapporteur includes the following:

(a) Gather, request, receive and exchange information from all relevant sources, including Government, intergovernmental and non-governmental organizations, on the realization of the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, as well as policies designed to achieve the health-related Millennium Development Goals;

(b) Develop a regular dialogue and discuss possible areas of cooperation with all relevant actors, including Governments, relevant United Nations bodies, specialized agencies and programmes, in particular the World Health Organization and the Joint United Nations Programme on HIV/AIDS, as well as non-governmental organizations and international financial institutions;

(c) Report on the status, throughout the world, of the realization of the right to health and on developments relating to this right, including on laws, policies and good practices most beneficial to its enjoyment and obstacles encountered domestically and internationally to its implementation;

(d) Make recommendations on appropriate measures that promote and protect the realization of the right to health, with a view to supporting States’ efforts to enhance public health; and

(e) Submit an annual report to the Human Rights Council and an interim report to the General Assembly on its activities, findings, conclusions and recommendations.

For more information on the right to health and the work of the mandate
Website of the mandate -
http://www.ohchr.org/EN/Issues/Health/Pages/SRRightHealthIndex.aspx
Factsheet 31: The right to health -

Framework and purpose of the visit to Canada

Within the framework of the Terms of Reference for Fact-Finding Missions by Special Rapporteurs (Annex 1), the purpose of this country visit is to understand, in a spirit of cooperation and dialogue, how Canada endeavours to implement the right to health, the measures it has taken for its successful realization, including good practices, and the obstacles encountered.

During the visit, the Special Rapporteur will consider issues related to the enjoyment of the right to health, including availability, accessibility, acceptability and quality of health
services, goods and facilities, as well as the underlying determinants of health in the country. Considering the breath and scale of the right to health, the Special Rapporteur will focus this visit in specific matters, including:

- The national health system, notably access to primary healthcare and palliative care. Some groups in vulnerable situation may be considered within this item such as migrants and homeless, amongst others.
- The right to mental health;
- The right to health of indigenous peoples
- The right to health of children, including adolescents as well as related relevant challenges such as drug use, and
- Sexual and reproductive health rights.

Meetings and other activities

The Special Rapporteur would like to meet with the Principals/Ministers of certain Ministries as well as senior officials and relevant technical experts of others Ministries and branches of the State. Official meetings, at all levels of Government are coordinated by the central authorities.

It is very important that the Special Rapporteur, over the course of his mission, spends time outside the capital conducting visits to facilities that will enable him to better understand the enjoyment of the right to health in the country. In this connection, he would like to visit the provinces of:

- Manitoba;
- British Columbia, and
- Québec

In each province, the Special Rapporteur would like to meet local officials dealing with public health and to visit community-based health services, and at least one mental health community-service. In addition, in at least one of these provinces, he would like to meet local officials dealing with education; to hold at least one meeting with relevant indigenous authorities, and to meet at least one provincial human rights commission. The Special Rapporteur would like to visit no more than one hospital throughout his visit; at least one school for teen-agers, and at least one indigenous community.

The Special Rapporteur will also meet with representatives of United Nations entities that may be present in the country, with national health professional associations and members of civil society and academic institutions. These meetings are arranged by OHCHR and, for reasons of confidentiality, take place without the presence of any representative from the Government.

The visit will close on 16 November 2018 with a press conference in Ottawa at which the Special Rapporteur will provide his preliminary observations. Before the press conference, the Special Rapporteur will share with relevant Government officials his preliminary observations.
Outcome

The Special Rapporteur will submit a report on his visit to the Human Rights Council in June 2019. The report will set out and analyse the discussions he had during the visit and will make practical, constructive recommendations. The Government will be given a draft of the report for information and comments on errors of fact before final submission.

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ANNEX 1

TERMS OF REFERENCE FOR FACT-FINDING MISSIONS
BY SPECIAL RAPPORTEURS/REPRESENTATIVES OF
THE COMMISSION ON HUMAN RIGHTS

(E/CN.4/1998/45, Appendix V)

During fact-finding missions, special rapporteurs or representatives of the Commission on Human Rights, as well as United Nations staff accompanying them, should be given the following guarantees and facilities by the Government that invited them to visit its country:

(a) Freedom of movement in the whole country, including facilitation of transport, in particular to restricted areas;

(b) Freedom of inquiry, in particular as regards:

(i) Access to all prisons, detention centres and places of interrogation;
(ii) Contacts with central and local authorities of all branches of government;
(iii) Contacts with representatives of non-governmental organizations, other private institutions and the media;
(iv) Confidential and unsupervised contact with witnesses and other private persons, including persons deprived of their liberty, considered necessary to fulfil the mandate of the special rapporteur;

and

(v) Full access to all documentary material relevant to the mandate;

(c) Assurance by the Government that no persons, official or private individuals who have been in contact with the special rapporteur/representative in relation to the mandate will for this reason suffer threats, harassment or punishment or be subjected to judicial proceedings;

(d) Appropriate security arrangements without, however, restricting the freedom of movement and inquiry referred to above;

(e) Extension of the same guarantees and facilities mentioned above to the appropriate United Nations staff who will assist the special rapporteur/representative before, during and after the visit.