

Conference: Mapping the rollback? Human Rights provisions of the Belfast/Good Friday Agreement 15 years on

CAJ in collaboration with the Transitional Justice Institute (TJI) of the University of Ulster and the Human Rights Centre at Queen's University Belfast (QUB) organised this conference which took place in the Great Hall, Queens University Belfast, on the 26 April 2013 and was attended by around 150 participants. The conference dealt with the extent that significant binding commitments within the Agreements which made up the peace settlement are at present being 'rolled back'. Following the morning plenary, four specialist sessions were held on the subjects of Protection of Rights Frameworks, Equality, Policing, Security and Justice Reform and Dealing with the Past fifteen years on. A conference report including the speakers' papers is currently under production. If you want to receive the conference report when it is finished, please email info@caj.org.uk.

Professor Colin Harvey (QUB) chaired the opening session in which Professor Monica McWilliams (TJI) provided reflections of a participant in the peace negotiations and CAJ Deputy Director Daniel Holder presented CAJ's 'Mapping the Rollback' paper.



Professor Colin Harvey, chair of the first session *contd...*

This was followed by a panel discussion on *Human rights and equality commitments 15 years on* chaired by director of CAJ, Brian Gormally, featuring the following speakers: Maggie Beirne, former director of CAJ; Michael Farrell, FLAC; Patricia McKeown, UNISON (see photo on the next page, left-hand side).

The third plenary session, chaired by Professor Brice Dickson, QUB Human Rights Centre, was a panel discussion about *Policing, justice and community 15 years on* featuring the following speakers: Mary O'Rawe, former chair of CAJ; Fiona McCausland, community activist; Neil Jarman, Institute of Conflict Research. (right-hand photo)

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Maggie Beirne (top left), former director of CAJ; Brian Gormally, director of CAJ (top right); Patricia McKeown, UNISON; Michael Farrell, FLAC



Daniel Holder, CAJ, Neil Jarman, Institute of Conflict Research, Dr Mary O'Rawe, Former Chair of CAJ, Fiona McCausland, Community Activist, Adrienne Reilly, CAJ, Professor Brice Dickson, QUB, Human Rights Centre (left to right)

Struggle for women's rights in Syria continues

Last month marked the two-year anniversary of the antigovernment protests that kicked off the Syrian uprising. So far, the conflict has claimed roughly 70,000 lives, made refugees of one million people, and displaced an additional three million. Syrian women have been active in the fight against Bashar al-Assad's regime from the start, dating back to the peaceful demonstrations in early 2011 in the southern city of Dara'a. They have remained actively involved even as the fight has become bloody. I had the opportunity to talk to women in the opposition movement when I was asked to go to Istanbul to do a training workshop on coalition building and mediation with Catherine Turner from the Transitional Justice Institute. The women were involved in humanitarian efforts inside Syria as well as providing emergency relief and services in refugee camps. At risk to themselves, they travelled to the first meeting in Istanbul and the subsequent one in Doha. They were desperate to have their voices heard and to get their message out to the wider world. They had begun to document incidents of sexual violence. One of the women, Mouna Ghanem, a member of the Syrian Democracy Building Movement, expressed concern about the radicalisation of opposition fighters and denounced the violence committed against women within the country and in the refugee camps on the borders of Syria. She reported practices of forced marriages and sexual abuse by those guarding the refugees. Ghanem also denounced "human violations" that were being committed by armed opposition groups.

The participants could not have photographs taken during the training session due to their fear of family members being arrested. The women were Sunni, Kurdish, Christian and Alawite, with hijab and without, and were all fighting for a common objective: a free Syria. They have started Facebook groups, Skype chat rooms, and produced newsletters to distribute at international meetings. When we first met the women had not yet organised into one unified organisation. They were, however, much more cohesive and diverse than the all-male rebel groups. Rajaa Altalli, a Christian originally from the Damascus countryside, had left her Ph.D. studies to co-found the Centre for Civil Society and Democracy in Syria, based in Gaziantep, Turkey. The centre conducts civil society training inside and outside Syria and has educated more than 50 Syrian women activists of all ethnic groups and sects on how to work together to change Syrian society. *contd...*

The Syrian women we met were acutely aware of the dangers that the jihadists were posing to their society. They spoke of their concerns about the struggle they could face after Assad is toppled – to hold on to women's rights. Few of the women had experience in politics but were quickly learning skills that they could put to good use in their opposition movements. By forming themselves into the new Syrian Women's Network, they were determined not to let their activism in supporting the resistance go unrecognized.

Syrian women activists see the curtailing of women's rights in post-revolutionary Egypt as a cautionary tale. There are only nine women in the new Egyptian parliament. In Libya, the rise of political Islam and patriarchal tribalism has led to the reinstatement of polygamy and the suppression of women's rights. To stop Syria from following the problematic trajectory of other Arab Spring countries and turning into a repressive society, the Syrian women are getting organised now to insert their demands into the various constitutional conversations that are taking place currently as preparation for the transition. Our task was to share some of our learning on transitional justice mechanisms and the importance of an inclusive mediation process. They were left with no illusions about how difficult it is to insert women's interests into mediation processes but how crucially important it is to start thinking about this now. The Doha Charter which they drafted at the end of the meeting was their first initiative in this direction. This Charter has been passed to Brahimi, the UN Special Representative for Syria and could enable other civic society organisations, such as the youth sector, to begin framing demands for the transition. The initial meetings were supported by the Women's Democracy Network with the Swedish Olaf Palme Centre bringing 80 women to Stockholm, where they agreed last month to launch the Syrian Women's Network. The Network is now uniting around the common purpose of stopping the violence, creating a constructive national dialogue for Syria and ensuring the participation of women at every stage of the process. Five of the women will be coming to Northern Ireland in June to attend the Transitional Justice Institute's Summer School where we will continue to discuss the challenges of creating transformative processes.

Professor Monica McWilliams, Transitional Justice Institute, University of Ulster

Dying from a preventable disease - inequality

15 years ago UNISON advocated a yes vote in the referendum on the Good Friday Agreement. Our slogan was 'Yes for Peace, Hope and Healing.' We did not envisage that by 2013 all would be unfulfilled.

The evidence of a roll-back on commitments on Equality and Human Rights and the unfulfilled commitment on Dealing with the Past is overwhelming. In this article we deal with one of the most stark realities, the reduction in life expectancy for people from the most disadvantaged groups and areas.

In 2001, for the first time, we saw the real extent of health inequalities. In response the new devolved Government prioritised health in the Programme for Government and produced a strategic plan, 'Investing for Health', hailed by Sir Donald Acheson as *"the most comprehensive analysis and framework for action on the wider determinants of health in the world"*. We believed back then that we were on the road to a genuine public health system and, with real co-operation across Government, on a strategic programme with equality and human rights at its heart.

The co-operation never happened. Equality and human rights were sidelined and the startling result, confirmed by the Chief Medical Officer in 2012, was that life expectancy had decreased and premature death and suicide had increased for people from the most disadvantaged communities.

Today we are being subjected to a health and social care strategy designed by the US accountancy giant McKinsey & Co. and thinly disguised as a new direction for health and social care. It is in fact a programme which transfers health and social care to the private sector or social enterprise on the cheap but costs the public purse hundreds of millions of pounds.

continued on pages 5, 6 and 7.

Short-lived legacy: Margaret Thatcher, neoliberalism and the global south

The example of Pinochet's Chile shows the many flaws of Thatcher's belief that free markets and growth go hand in hand

Chile's assistance to British forces during the 1982 Falklands war is said to have indebted Margaret Thatcher to the Chilean dictator Augusto Pinochet. However, Pinochet was probably a greater inspiration to Thatcher as the pioneer of radical free-market policies in the mid-1970s, a period when Keynesian policies still reigned in Britain and much of the rest of the world. At a fringe meeting during the Conservative party's annual conference in 1999, Thatcher implicitly acknowledged her debt to Pinochet, saying his enemies hated him because of his "success" in transforming Chile's economy from 1973 to 1990.

The Chilean strongman's free-market policies that the Iron Lady admired indeed transformed his country's economy, but in ways that could hardly be considered a success except among doctrinaire followers of the University of Chicago economist Milton Friedman. Pinochet's programme subjected his country to two major depressions in one decade, first in 1974-75, when GDP fell by 12%, then again in 1982-83, when it dropped by 15%. Contrary to ideological expectations about a positive correlation between free markets and robust growth, average GDP growth in 1974-89 – the radical phase of the Pinochet revolution – was only 2.6%. By comparison, with a much greater role for the state in the economy during 1951-71, Chile's economy grew by an average of 4% a year.

By the end of the radical free-market phase, both poverty and inequality had increased significantly. The proportion of families living below the "line of destitution" had risen from 12% to 15% between 1980 and 1990, and the percentage living below the poverty line, but above the line of destitution, had increased from 24% to 26%. By the end of Pinochet's regime, about 40% of Chile's population, or 5.2 million in a population of 13 million, was poor.

In terms of income distribution, the share of national income going to the poorest half of the population declined from 20.4% to 16.8%, while the share going to the richest 10% rose dramatically from 36.5% to 46.8%.

The combination of erratic growth and radical trade liberalisation resulted in "deindustrialisation in the name of efficiency and avoiding inflation", as one economist described it. Manufacturing's share of GDP declined from an average of 26% in the late 1960s to 20% in the late 1980s. Many metalworking and related industries went under in an export-oriented economy that favoured agricultural production and resource extraction.

Pinochet's neoliberal policies came to be codified as "structural adjustment", and Thatcher became one of structural adjustment's most enthusiastic promoters, not only for Britain but the world, popularising her approach with the slogan "There is no alternative". With Thatcher and the US president Ronald Reagan as its main boosters, and the World Bank and IMF as its executors, structural adjustment or the Washington consensus was generalised throughout the developing world.

From Ghana to Argentina, state participation in the economy was drastically curtailed, government enterprises passed to private hands in the name of efficiency, protectionist barriers on imports were eliminated wholesale, restrictions on foreign investment were lifted, and, through export-first policies, domestic economies were more tightly integrated into the capitalist world market.

Structural adjustment programmes (SAPs), which set the stage for the accelerated globalisation of developing economies during the 1990s, created the same poverty, inequality and environmental crisis in
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most countries that free-market policies did in Chile. As the World Bank chief economist for Africa admitted: "We did not think the human costs of these programmes could be so great, and the economic gains so slow in coming." So discredited were SAPs that the World Bank and IMF changed their name to poverty reduction strategy programmes in the late 1990s.

But the harm had been done. Two researchers from the Brookings Institution, Laurence Chandy and Geoffrey Gertz, described the wreckage: "Excluding China, the 500 million decrease in global poverty becomes an increase of 100 million. In the world's poorest region, sub-Saharan Africa, the poverty rate remained above 50% throughout the period, which, given the region's rapid population growth, translated into a near doubling in the number of its poor. Similarly in south Asia, Latin America and Europe-central Asia there were more poor people in 2005 than there were a quarter of a century earlier."

By the early 2000s, however, governments throughout the developing world were reversing course, with most turning towards pragmatism and abandoning the most damaging doctrinaire policies. The anti-neoliberal trend was most pronounced in Latin America, where elites had embraced neoliberalism most fervently in the 1980s and 1990s. Throughout the continent during the first decade of the 21st century, the combination of government intervention, economic nationalism, redistributive populist policies that promoted both equity and expanded internal markets, and the commodities boom triggered by China's development made up a potent combination that reversed trends in poverty.

This was the decade when Hugo Chávez in Venezuela, Néstor Kirchner in Argentina, Rafael Correa in Ecuador and Evo Morales in Bolivia boldly took their countries off structural adjustment, while others, such as Luiz Inácio Lula da Silva in Brazil, did it in less dramatic fashion. The title of a book by Financial Times correspondent Hal Weitzman says it all: *Latin Lessons: How South America Stopped Listening to the United States and Started Prospering*.

Globally, the results of the turn from neoliberalism were dramatic. The New York Times reported World Bank research (pdf) showing that "for the first time the proportion of people living in extreme poverty – on less than \$1.25 a day – fell in every developing region from 2005 to 2008. And the biggest recession since the Great Depression seems not to have thrown that trend off course, preliminary data from 2010 indicates. According to the bank: "The progress is so drastic that the world has met the UN's millennium development goals to cut extreme poverty in half, five years before its 2015 deadline."

By the time of Thatcher's passing, the global south had largely moved away from her "neoliberal revolution." In the global north, however, people and governments were still saddled with the massive task of extricating themselves from the wreckage her perspective and policies had wrought.

Walden Bello is a member of the House of the Representatives of the Philippines and author of *Capitalism's Last Stand?* and *Food Wars*

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The myth perpetuated under direct rule that NI spent more per capita on health than any other part of the UK was blown out of the water last year when the National Audit Office finally produced separate figures for direct NHS spending and social services spending. This demonstrates that we spend less on healthcare than England, Scotland and Wales.

This reality raised many questions. Who benefits from the move away from an equality and rights based agenda? Who benefits from a drive to privatise health and social care? Who can believe that the so called consultation system now in play is other than a mask for decisions already taken at the highest level?

contd. on pages 6 & 7.

The right to health and the right to social care are fundamental human rights now increasingly being denied to the people of NI. Throughout our peace process people are dying from what the Institute of Public Health describes as “a preventable disease – inequality”. This is perhaps the greatest failing of our current political system. Had the tools of equality and human rights been utilised in a fashion which placed them above party politics we would today have different and better outcomes.

Growing health inequalities

In 2010 Sir Michael Marmot made it clear that inequalities in health arise because of inequalities in *“the conditions in which people are born, grow, live, work and age. So close is the link between particular social and economic features of society and the distribution of health among the population, that the magnitude of health inequalities is a good marker of progress towards creating a fairer society”*².

The creation of a just and equal society was what the people signed up to 15 years ago. In 2013, however, men living in the 10% most deprived areas here can expect on average to live almost 12 years less than those living in the 10% least deprived areas. For women, the gap is more than eight years³.

The largest gaps between the most and least deprived areas occur in alcohol related hospital admissions (457%), alcohol related mortality (440%), self-harm admissions (368%), hospital admissions for drug related mental health and behavioural disorders (368%), and drug related mortality (334%)⁴. Suicide, with a 234% gap between the most and least deprived areas, is inextricably linked with poverty, unemployment and the legacy of the conflict. Rates have soared since 1998 with a total of 313 suicides recorded in 2010 alone – the highest figure ever recorded here.

However, instead of a forensic analysis of why Investing for Health failed, we now have new and watered down plans for a public health strategy - ‘Fit and well, changing lives, 2012-2023’.

Our challenge to Government is for it to openly explain why health inequalities are growing rather than diminishing. Any true Plan to turn the situation around would require full cross-Government working; a real anti-poverty strategy; a strategy to challenge failures in educational attainment; a genuine plan on decent public housing; a refusal to reduce welfare entitlement; a celebration of a population which is growing older; as well as jobs with decent pay and conditions attached.

Privatisation and the creation of new and unaccountable health structures

These growing health inequalities are taking place in the context of a health and social care system under attack. We should now be in no doubt that current health structures are actively working against the interests of the people of NI and have opened the door for a privatisation agenda capable of destroying our NHS.

The decision-making process in health and social services has been made so complex and obscure in order to disguise the real privatisation agenda and to confuse the public. Sham “public” consultations are a cynical ploy to get public consent for decisions that have already been made. However, the real decisions and their drastic impact are being kept under wraps. It is worth looking at how the game is being played.

Every year there is a Departmental Memorandum on health and social care targets; a Health and Social Care Board/ Public Health Agency Joint Commissioning Plan; and Trust Delivery Plans. These are all meant to give day to day direction to the delivery of health and social care. They have never been subject to effective equality process. In the past 2 years there have also seen increasingly unaccountable initiatives that include the McKinsey & Co report which sets the privatisation and cuts agenda; the Compton Review and subsequent Strategic Plan for Transforming Your Care; as well as Local Population Plans produced by a consultancy firm at a cost of £9 million.

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This frenzy of activity is all designed for one outcome – to implement budget cuts by 2017. The main vehicle for delivering them is massive cuts to NHS health & social care and transfer to the private sector.

A recent Nuffield Trust Report has demonstrated that Trusts which deliver services and treatment in-house, rather than exporting patients to private sector providers, are substantially more efficient and effective. Yet instead of building up in-house capacity through the recruitment of Consultant and related grade posts at all levels, the response to growing waiting lists has been to send people to private providers such as 3FiveTwo. These private services are being offered by the same medical staff who are on the current NHS payroll and who may have been responsible for managing the growing waiting lists initially. This is effectively double-counting expenditure within the NHS budget.

Analysis of published Trust Board minutes shows no publicly transparent and accountable Board oversight of the volume and nature of work referred to the private sector. This raises issues of accountability and conflict of interest for Trust employment relationships with consultants.

The privatisation agenda was recently forced into the public domain by the coverage of the proposed closure of NHS care homes by a number of HSC Trusts. Whilst the bad PR forced the Minister to halt the process, this is only a temporary reprieve. On May 7th, he made it clear to the Assembly that residential care homes are still earmarked for closure over a 3 to 5 year period. In that speech he closed their doors to new residents, thus consigning existing residents to a diminishing quality of life.

These plans are purely policy driven. The closures are not based on the clinical need or the quality of life of residents – but rather a desire to withdraw from NHS residential care provision for the most vulnerable in our society regardless of the overwhelming evidence of adverse impact on residents, including risk of early death. The extension of domiciliary care work to the independent and private sectors also continues apace despite a recognition of its damaging impact on care standards and the exploitation of an overwhelmingly low paid, female workforce by unscrupulous private sector providers.

The evidence in this article points to the emergence of an NHS which has a reduced capacity to treat and care. The statistics on life expectancy and inequality are devastating.

The NI Executive must examine current trends, place a block on further private sector allocation until the integrity of treatment volumes and waiting times has been restored, and restore the direct control and accountability required to meet the entirety of recommendations in the recent Francis QC / Mid-Staffordshire report.

It must ensure that the fundamental human rights of the poorest and most vulnerable are protected and that its statutory obligations to promote equality of opportunity on the basis of objective need inform the basis of policy and decision making at all levels. These were the promises of the Good Friday Agreement. UNISON and our allies will continue to mount the challenge, moral, political and legal.

Patricia McKeown - Regional Secretary, UNISON and Thomas Mahaffy – Policy Officer, UNISON

endnotes:

- 1: Regional Conference IfH, Slieve Donard, Newcastle
- 2: Fair Society, Healthy Lives, The Marmot Review, Strategic Review of Health Inequalities in England post-2010, Executive Summary, page 10,
<http://www.instituteofhealthequity.org/projects/fair-society-healthy-lives-the-marmot-review>
- 3: The Annual report of the chief medical Officer for NI 2011/12
- 4: NI Health and Social Care Inequalities Monitoring System, Fourth Update Bulletin (June 2012).

Civil Liberties Diary - April

3 April

An Easter Commemoration parade organised by the Republic Network for Unity took place in Ardoyne, North Belfast, led by primary school-aged children wearing paramilitary dress. The Children's Commissioner Patricia Lewsley-Mooney is "deeply worried" by this and the Parades Commission warned those responsible and expects them to stick to the rules for parading. In addition to that shots were fired by a masked man, also wearing paramilitary dress.

5 April

Assistant Chief Constable George Hamilton indicates that the police and prison services intend to increase custodial capacity in order to be able to detain 350 people from the beginning of the G8 Summit in Fermanagh which is due to take place in June.

According to Northern Ireland Federation of Housing Associations and the Chartered Institute of Housing the cost of the "bedroom tax" element of the welfare reform bill amounts to around £21m, while it saves only £17m. 62% of working-age tenants on housing benefit in Northern Ireland will be hit by the under-occupation penalty compared to only 33% in Great Britain.

12 April

According to research from Professor Mike Tomlinson, QUB, the number of suicides has increased from 8 per 10,000 in 1998 to 16 per 10,000. The highest suicide rate is among men in the 35 to 44 age group – who were children during the fiercest part of the Troubles. The number of deaths has almost

doubled since 1998, disproportionately among men who were children during the worst violence of the 1970s.

4500 PSNI officers and 3500 officers from the UK will secure the G8 summit, aided by three remote controlled aerial camera devices (drones). Concerns about privacy were expressed by Sinn Fein Policing Board member Gerry Kelly.

16 April

A US Supreme Court judge has ruled that US Federal Authorities can hand over transcripts held at Boston College of an interview with Dolours Price regarding her role in the troubles to the PSNI. The journalists involved in the series of interviews with leading figures continue to oppose the handing over of transcripts but accept that "the legal track has almost come to an end."

17 April

Secretary of State Theresa Villiers intends to broaden transparency by reducing the time state papers are kept secret from 30 years to 20 years between now and 2022. She also named the de Silva report into the 1989 murder of Patrick Finucane as a "model that could be used for future cases."

19 April

DUP Assembly member Paul Givan, after having questioned the integrity and impartiality of the former Police Ombudsman for Northern Ireland, Baroness Nuala O'Loan, was sued by her for libel. The fine that has to be paid is in the "high five figures". However, his expenses will be covered by the Assembly's insurance. This is included in the overall premium for the employers' and public liability insurance, which is understood to cost £33,700 a year.

24 April

Mr Justice Stephens ruled that he should first read a series of UK Government meeting notes and other correspondence, for which disclosure is being sought as part of a legal challenge in relation to the denial to hold a full public inquiry into the 1989 shooting of Patrick Finucane. A "review" by Sir Desmond de Silva QC confirmed the involvement of state agents in the killing. Mr. Justice Stephens, having read the documents will decide the importance of the series of documents for the case and whether to disclose them.

30 April

The Northern Ireland Assembly has voted against the most recent attempt to legalise same-sex marriage. Out of 95 members present, all 37 nationalists voted in favour, as well as three unionists.

*Compiled from various newspapers
by Rune Fiedler, EIRENE volunteer*

Just News

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