

VIEWPOINT

Health and Human Rights: Territories in Dispute

JACQUELINE PITANGUY

Health and human rights are part of a political battlefield in which interpretations of religion, culture, science, and judicial systems are constantly disputed. This battlefield also reflects national and international tensions, transnational conflicts, and alliances that affect the incorporation of a rights-based approach to health into laws and public policies, international conventions, and private and public funding for health.

In the 1990s, after the democratization of Brazil and other countries in Latin America following decades of military regimes, the right to health was adopted within a framework of the secularization of political power and accompanied other reforms in constitutions, laws, and public policies. The principles of respect for democracy, pluralism, and diversity were institutionalized.

In Brazil, a new Constitution was enacted in 1988, affirming the right to health as a human right and as a duty of the state. The Constitution established universal and free access to health care by means of a unified public health system, the Sistema Único de Saúde.¹ The new Constitution also assured full equality to women; abolished the previous recognition of the man as the head of the family; and affirmed the right to choose the number of one's children and obligated the state to provide the means to do so.² The inclusion of these provisions was due in large part to the country's feminist movement, which had engaged in coordinated advocacy efforts during the constitutional reform process.³

However, subsequently in Brazil and elsewhere, the advance of right-wing conservative populist forces has led to the election of presidents that represent a radical right agenda. These leaders include Jair Bolsonaro in Brazil (2019–2023) (who remains a powerful political force even after leaving office because his party has the largest number of representatives in the National Congress), Javier Milei in Argentina (2023–current), Nayib Bukele in El Salvador (2019–current), Donald Trump in the United States (2025–current), and leaders in European countries such as Hungary and Italy.

These governments threaten the fulfillment of the right to health. In some countries, barriers to health care—particularly sexual and reproductive health care—have increased dramatically as a result of changes in laws or funding (both domestic and foreign).⁴

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Issues related to sexuality education in schools, access to contraception, and safe abortion have become central to political parties' electoral platforms and define territories in dispute in parliaments, in justice systems, and in executive branches, while competing for the hearts and minds of populations. Along with gender, reproductive rights has become a central issue in debates on democracy, civil rights, and social justice. Gender identity is a battlefield challenging societal norms.⁵

While the debate on abortion in countries with secular governments, such as Brazil, should be based on the premise that unsafe abortion contributes significantly to high rates of maternal mortality and is a violation of the right to health, it instead incorporates moral and religious arguments that feature strong patriarchal perspectives on women's autonomy and on gender roles and power in the family, education, workforce, and politics.

Among the many threats to health and human rights, this culture war over gender and reproductive rights is one of the most pressing in Brazil. The extreme right strategically promotes a binary narrative that divides all debate into order or disorder and classifies the world as either good or evil. On one side are those who proclaim themselves to be representatives of the good: defenders of Christian values, of religion, of the homeland, of national sovereignty, of the family, and of childhood. This side often denies climate change, is skeptical of science generally, and fears "gender ideology" and trans youth.

The "evil side" includes feminist movements, health and human rights defenders, LGBTQ+ movements, Black rights movements, migrants, Indigenous Peoples, academics, scientists, and proponents of multilateralism.

Such a binary narrative hinders democratic debate about social and economic rights, including the right to health. This narrative favors authoritarian models that have no place for political disputes, since opponents are portrayed simply as enemies of what they define as culturally and socially correct. No room is left in these far-right political movements for negotiation or consensus-building.

The extreme right also includes religion and

the word of God in its political debates. It generates polarization, intolerance, and hatred, leading to a collective cognitive dysfunction, with an accompanying loss of rationale and critical perspective in the way politics is approached. When narratives are presented as God's will, many people, particularly those under the influence of evangelical leaders, become fearful of questioning them. People are exposed to multiple conspiracy theories and general disinformation, full of hate and anger, through social media and in speeches by religious authorities and political leaders. Fake news has become a major asset in the political landscape and is used particularly when the adversary is portrayed as an evil to be annihilated.⁶

The panic arising from not knowing what is true or culturally acceptable, exacerbated by fake news, threatens not only democratic institutions but also the right to mental and physical health and well-being of women, men, and children. Fake news spread by a government is a violation of human rights.

These extreme narratives do more than affect individual health—they shift public health policies. One example is the anti-vaccination position of the Bolsonaro administration, which promoted disinformation suggesting that COVID-19 vaccines could result in more serious physical harm than the virus itself. A study on political and socioeconomic factors in the context of COVID-19 found that municipalities that supported Bolsonaro in the 2018 elections had worse mortality rates than others, even when allowing for other structural inequalities.⁷

As a result of disinformation and poor management of the Ministry of Health, and despite Brazil's extensive public health system that had the means to provide excellent vaccination coverage, the vaccine delays and general mistrust resulted in low vaccination rates and an extremely high number of COVID-19 deaths (over 700,000).⁸ This number is probably an underestimate due to failures in classifying the causes of death, particularly in the first year of the pandemic. A fear of vaccination persists today, even with a new administration that has engaged in campaigns to overcome the mistrust.

The challenges in responding to this cultural and political war in Brazil are immense. Civil society organizations, social movements, universities, sectors of the government, and the media are attempting to grapple with them. In order to restore our rights, we need to identify strategies that can dismantle barriers such as:

- The lack of effective regulation of social media that amplifies misinformation and renders the internet dangerous.
- The increasing use of religion as a political strategy to influence the legislature, particularly on issues related to abortion and LGBTQ+ rights. Brazil has many lawmakers who represent evangelical churches and impede legislation promoting access to abortion and the rights of women and girls more generally.
- The advance of neoliberalism along with social inequality and poverty.

These and other social and political factors demand a coordinated response, from advocacy efforts aimed at regulating digital platforms, to rebuilding collectives and community organizations in order to overcome individual isolation and lessen people's vulnerability to fake narratives. We also need to educate people about their health and human rights in schools, universities, and communities, and fight back with counternarratives promoting the values of science, diversity, democracy, pluralism, vaccines, and inclusion.

The task is daunting and complex, but necessary. I suggest we follow Pandora's lead, and together open the box to let the evil out, while holding on to hope.

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