

# Editorial

Theo Gavrielides

Welcome to the fourth issue of the 2020 volume of the *International Journal of Human Rights in Healthcare*. We are living unprecedented times. COVID-19's impact can only be compared to the socio-economic challenges that the world faced post Second World War. Within months, the COVID-19 pandemic reshaped the way we run our lives, businesses, families, governments and countries. It also showed how vital health-care services are, highlighting the key role of nurses, doctors and all medical staff in keeping us safe and indeed alive.

As we prepare for what is yet to come, I am pleased to announce a special issue that is due early in 2021 titled *Human rights in healthcare during COVID-19 and other pandemics* with guest editors Jan Michael Alexandre C Bernadas (De La Salle University Manila) and Lee Edson P Yarcia (Alliance for Improving Health Outcomes). You can find out more by visiting our call [www.emeraldgrouppublishing.com/journal/ijhrh/human-rights-healthcare-during-covid-19-and-other-pandemics](http://www.emeraldgrouppublishing.com/journal/ijhrh/human-rights-healthcare-during-covid-19-and-other-pandemics) or by emailing the guest editors, [jan.bernadas@dlsu.edu.ph](mailto:jan.bernadas@dlsu.edu.ph) and [lpysarcia@up.edu.ph](mailto:lpysarcia@up.edu.ph)

There can be no doubt that persistent inequality and the gap between the powerful and marginalised communities will exacerbate. As public health care is struggling to survive, the negative impact of COVID-19 on national and international economies will continue. Initiatives such as this journal play a key role in helping to understand some of the underlying issues of inequality and how health-care systems from around the globe are responding to them. In this issue, I am very happy to publish seven very different papers each coming from a different country.

The first, "Standards of human rights to palliative care: gaps and trends" highlights significant developments in this health-care area including the role of the World Health Assembly and the UN General Assembly. The paper calls for further work in the context of children's rights and for the need to consistently address state obligations towards palliative care.

The second paper, "Psycho-social determinants of divorce and their effects on women in Pakistan", argues that societal standards vandalise social status of divorced women, leading them to experience psychological trauma that triggers psychosocial disorders. The paper looks at the emotional and the legal and societal impacts on the deferential social status of divorced women. The paper argues that domestic violence and abuse are causes of divorce in Pakistan. Divorce rates were recorded at a faster pace in the country and Punjab, whereas in various villages of other provinces, women risk face mutilation if they show courage to seek divorce. The paper concludes that cultural norms around women's roles in society need to be addressed and challenged. This research indicates an urgent need for social reforms to curtail offending behaviours towards them, to safeguard their mental health and well-being and to empower them with their legal rights.

Subsequently, "Ethical challenges in the relationship between the pharmacist and patient in Iran", collected data using a two-part questionnaire with 64 items developed after examining relevant texts and conducting unstructured interviews with pharmacy specialists. The first part determined the frequency of ethical challenges that the pharmacist confronts, using 43 short scenarios, whereas the second part comprised 21 questions with short answers. For validation, the questionnaire was sent to 20 medical ethics specialists who were familiar with issues in pharmacy ethics. The paper argues that the pharmacist-patient relationship is one

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of the important aspects of health systems, and therefore regulating this relationship based on the professional ethics guidelines could have a positive impact on therapeutic relationships. Results showed that designing codes of ethics and practical guidelines based on the frequency of the noted challenges enhances the quality of treatment, improves the pharmacist–patient relationship, increases the level of cooperation and decreases patient complaints.

“Inequalities in common mental disorders between advantaged and disadvantaged groups” evaluates the socio-economic factors of inequalities in common mental disorders (MDs) between advantaged and disadvantaged groups. This cross-sectional study was conducted in 2016–2017, involving 763 persons by stratified cluster sampling; clusters were cities, geographical area and households. The socio-demographic inequality in MDs among adult population was more explained by lower educational level, married persons and unemployment variables.

The next paper, “Family planning and budgeting for human rights in India”, looks at the Indian family planning programme from a human rights perspective. The programme is one of the largest in the world with thousands of patients, mostly women, accessing services every year. Although the Indian legal system guarantees the right to health, Indian women from marginalised sections of society still battle inadequate services and the absence of health care that respects their right to reproductive autonomy and choice. The paper looked at the project implementation plans at the state level comparing year-wise expenditure for family planning against overall expenditure for reproductive, maternal and child health expenditure. The data were then compared to the number of women using sterilisation to suggest a relationship between both. It concluded that social-economic rights such as the right to health are applicable to government spending and budgeting. It also found that current spending is insufficient to guarantee women’s reproductive rights as the vast majority of resources are spend on sterilisation, thus limiting women’s ability to choose the number and spacing of children. Finally, the paper briefly outlines the role played by human rights and human rights litigation in government budgets.

“Effectiveness of a Japanese-style health program in Minowa Town, Matsumoto city and Nagano city” looks at the establishment of a healthcare programme that was customised for Japan and Asia. This programme was conducted by the Japanese authors and measures anthropometry, brain function and physical fitness. It performs blood tests before and after the programme and measures energy consumption with a pedometer during the programme. This study assessed findings from pedometric, anthropometric and blood pressure measurements and physical fitness, blood chemistry and brain function tests. The comparisons were made by examining the interaction effects between groups of participants. Groups from three regions in Japan showed significant differences on the physical fitness tests; regarding the 10-meter obstacle walk, the results of the Minowa participants showed the greatest improvement, and the Matsumoto participants showed the second greatest improvement. In the 6-min walk, the time of the Minowa participants significantly improved.

Finally, “Psychological well-being of people living near landfills: preliminary case study in Indonesia”, constitutes a preliminary case study localised in Samarinda city, Indonesia. For data collection, interviews and participatory observation were used. The results of this study point to the fact that people who live around landfills have low psychological well-being owing to lack of support from the community and government. People who live near landfills expect the government and surrounding communities to know about their situation so that they become prosperous. The paper argues for more support from the government. Participants appeared to have little social interactions with other communities, which led to lack of better life’s goals and a disappointment of current conditions because of low educational and skill backgrounds. Nonetheless, the participants were still of gratefulness upon the situation for they were still granted health for studies to support their families. Besides, the participants

did not show any positive attitudes towards themselves because of the disappointment of their condition and personal qualities.

I hope you find this issue useful in your practice and research. Your feedback is always welcome; you can submit your views via our website [www.emeraldgroupublishing.com/journal/ijhrh?id=IJHRH#author-guidelines](http://www.emeraldgroupublishing.com/journal/ijhrh?id=IJHRH#author-guidelines). We review papers on an ongoing basis and have a target of returning them to the author within 5–8 weeks of receipt. Warm wishes from everyone at the *IJHRH* and stay safe!

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