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The right to health of the child: an analytical exploration of the international normative framework

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CHILDREN'S RIGHT TO HEALTH by Sarah Spronk-van der Meer

1. Health care must be organized around the child, not around the health care process.
2. Health is a living reality: to ensure healthy behavior in the daily lives of children it is essential to provide health education to all children, their families and medical professionals.
3. To ensure the involvement of children in their own health, children of all ages must be involved in the identification of their primary health needs, in medical decisions and in the organization of health care.
4. Children's right to health requires a continuum of care that takes into account the particular needs of children in different stages of their lives: prenatal, neonatal, child adolescent and maternal health care.
5. Realizing child-friendly health care requires training in children's rights for all medical professionals, with pediatricians at the forefront.
6. Health crosses borders: an integrated approach to maintain and achieve good health for all children cannot be confined to the limited scope of national states, separately defined groups of children or even diseases.
7. The private sector is a key player in ensuring good health and healthy living conditions for all.
8. In situations of crises, sufficient budget must be allocated to ensure access to necessary health services for all groups of vulnerable children.
9. The three standard 'r-s' that stand for good upbringing in the Netherlands, namely 'rust, reinheid en regelmaat' (rest, hygiene and rhythm), should be enriched with an extra 'r', namely 'ruimte' (space).
10. Sickness and disease are opportunities for personal growth and development.