



WHEC UPDATE

Briefings of worldwide activity of Women's Health and Education Center (WHEC)

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Practice & Policy

Peace is one of humanity's most precious needs. It defines our mission. It drives our discourse. And it draws together all of our worldwide work, from health development and preventive diplomacy to promoting human rights and goodwill. Let us promise to make peace not just a priority, but a passion. We briefly present a recent effort, developed by Women's Health and Education Center (WHEC) with UN System that applies a human rights framework to reinforce current efforts to reduce maternal and neonatal mortality. We hope that our efforts will serve as an introductory guide for anyone interested in human rights and will contribute to the forging of a universal culture of human rights. The right to life is a fundamental human right, implying not only the right to protection against arbitrary execution by the state but also the obligations of governments to foster the conditions essential for life and survival. In 2000, the UN Human Rights Committee elaborated its General Comment 28 on the equality of rights between men and women, which among other things, requires States to report their progress and to provide data on birth rates and on pregnancy and childbirth-related deaths of women. At a global level, maternal mortality was not recognized as a public-health concern until late in the 20th century. The International Conference on Safe Motherhood, held in Nairobi, Kenya, in February 1987, issued a Call to Action urging the Member States of the UN to improve health conditions for women in general and to reduce maternal mortality in particular. Beyond the improvement in data collection and analysis, the 10-year review of the Safe Motherhood Initiative showed resoundingly modest results. The statement and the work that followed also highlighted the need for changes in legislation and policy, affirming that "a supportive social, economic and legislative environment allows women to overcome the various obstacles that limit access to healthcare, such as distance from their home to appropriate health facilities, lack of transportation, and more critically financial and social barriers".

For women, human rights include access to services that will ensure safe pregnancy and childbirth. It is against this background WHEC with its partners having taken up the challenge of "operationalizing" the use of human rights to improve maternal and neonatal health. Our e-learning initiative **WomensHealthSection.com** produced several action messages intended to revamp and streamline global and national approaches to reducing maternal mortality. The components of high quality maternal health services are defined to include: care by skilled health personnel before, during and after childbirth; emergency care for life-threatening obstetric complications; services to prevent and manage the complications of unsafe abortion; family planning to enable women to plan their pregnancies and prevent unwanted pregnancies; health education and services for adolescents; and community education for women, their families and decision-making. Given the work of the past decade, we hypothesize that despite the considerable efforts that a country may have made to reduce maternal and newborn mortality and achieve improvements in maternal and newborn health services; legal, policy and other barriers might nonetheless exist both within and outside the health sector. Overcoming such barriers requires their identification, careful analysis and their subsequent modification – through laws, policies and regulations that are consonant with human rights – with the ultimate aim of improving women's access to needed services through the promotion and protection of their rights. This has been the focus of our initiative developed by WHEC Global Health Line, to provide countries with a way of analyzing the impact of their laws and policies grounded in an understanding of both health and human rights. We believe human rights are universal and must be applied without discrimination on any grounds whatsoever, including sex. And don't forget to make your own voice heard!

Women's Health and Human Rights

Rita Luthra, MD

Your Questions, Our Reply:

What is the contribution of the World Health Organization (WHO) to the promotion and protection of human rights and fundamental freedoms?

Right to Health: The World Health Organization (WHO), the United Nations specialized agency for health, was established on 7 April 1948. WHO's objective is the attainment by all peoples of the highest possible level of health. In its Constitution, health is affirmed as a fundamental human right, which was reaffirmed in its World Health Declaration, adopted in 1998. The governing body of the WHO is the World Health Assembly, composed of representatives of the 193 Member States. The main tasks of the World Health Assembly are to approve the WHO program and the budget for each biennium and to decide upon major policy questions. The WHO acts as the directing and coordinating authority on international health activities. The Organization transmits policy decisions on international health matters, promotes international agreements on health policies, encourages the rationalization and mobilization of resources for health, and supports developing countries by identifying their needs for external resources. The World Health Assembly has adopted various regulations designed to prevent the international spread of disease, and several resolutions on subjects related to the realization of rights provided in the International Covenants on Human Rights, such as nutrition, family health and medical research. A number of research and training activities have been organized on health and human rights, including the training of staff as well as the preparation of an annotated bibliography, a database of institutions, and guidelines on a human rights approach to tuberculosis.

Human beings are born equal in dignity and rights. These are moral claims that are inalienable and inherent in all human individuals by virtue of their humanity alone. These claims are articulated and formulated in what today we call human rights, and have been translated into legal rights, established according to the law-creating processes of societies, both national and international. The basis of these legal rights is the consent of the governed, that is, the consent of the subjects of the rights. The values of dignity and equality of all members of the human race, like many other basic principles which underlie what today we call human rights, can be found in virtually every culture and civilization, religion and philosophical tradition.

Women all over the world have right to safe motherhood. We at Women's Health and Education Center (WHEC) promote efforts of the United Nations and World Health Organization to advance the causes of peace, health and development. WHEC hopes its publications will provide a modest contribution to the combined endeavors to make this world a better and safer place for all without any distinction.

About NGO Association with the UN:

UN Partner on Millennium Development Goals (MDGs)
A Gateway to the UN System's Work on MDGs

In adopting the Millennium Declaration in the year 2000, the international community pledged to "spare no effort to free our fellow men, women and children from the abject and dehumanizing conditions of extreme poverty." We are now more than halfway towards the target date – 2015 – by which the Millennium Development Goals are to be achieved.

United Nations Development Program (UNDP)
Coordinating global and national efforts

The MDGs provide a framework for the entire UN system to work coherently together toward a common end. UNDP's global development network on the ground in 166 countries is uniquely positioned to help advocate for change, connect countries to knowledge and resources, and

coordinate broader efforts at the country level. UNDP's work on the MDGs is guided by the [United Nations Core Strategy on MDGs](#) and focuses on:

- Campaigning & mobilization: Supporting advocacy for the MDGs and working with partners to mobilize the commitments and capabilities of broad segments of society to build awareness on the MDGs;
- Analysis: Researching and sharing best strategies for meeting the MDGs in terms of innovative practices, policy and institutional reforms, means of policy implementation, and evaluation of financing options;
- Monitoring: Helping countries report advancement towards the MDGs and track progress;
- Operational activities: Goal-driven assistance to support governments to tailor MDGs to local circumstances and challenges; address key constraints to progress on the MDGs.

Collaboration with World Health Organization (WHO):

Human rights and reproductive self-determination: Consideration for formulating reproductive health laws

The modern basis of human rights

All of the legal issues discussed above regarding domestic law arising from provider-patient relations fit within a framework of international human rights law. The legal duty to respect human rights has recently evolved to become a major component of international law, which historically was known as the Law of Nations. This body of law binds states and international institutions rather than individuals as such, but states are legally bound to ensure that their domestic practices conform to international human rights standards and that the conduct of individuals in violation of human rights will be investigated and remedied by state action. States must also take preventive action where human rights violations by individuals or private organizations may reasonably be anticipated. Human rights law goes beyond the oversight of clinical management of patient care, since it addresses the responsibilities of states to ensure that individuals in need of health care services have reasonable access to physicians and others competent and equipped to deliver them. The wider framework of international law also governs the responsibilities of states to maintain public health, and to promote appropriate research into the advancement of sexual and reproductive health. For instance, while human rights obligations to promote or, at a minimum, permit access to the benefits of scientific progress tend to focus on biological, physiological and related sciences, they also apply to social sciences relevant to sexual and reproductive health. The modern basis of commitments to human rights is the 1948 Universal Declaration of Human Rights. This was developed within the United Nations to add substance to its Charter, dating to 1945, which observed that a purpose of the new organization was "to reaffirm faith in fundamental human rights, in the dignity and worth of the human person, [and] in the equal rights of men and women." Legal force is given to the Universal Declaration through a series of leading treaties. Details: http://www.who.int/reproductive-health/publications/rhr_00_1/RHR_00_1_Chapter3part1.htm

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Collaboration with UN University (UNU):

UNU-WIDER (World Institute for Development Economics Research) *Expert Series on Health Economics*:

Loans or Grants?

We argue in this paper that cancelling the debt of the poorest countries was a good thing, but that it should not imply that the debt instrument should be foregone. Debt and debt cancellations are indeed two complementary instruments which, if properly managed, perform better than either loans or grants taken in isolation. The core of the intuition, which we develop in a simple two-period model, relates to the fact that the poorest countries are also the most volatile, so that contingent facilities, explicitly incorporating debt cancellation mechanisms, are a valuable instrument.

Suppose a DAC donor earmarks US\$1 billion of taxpayers' money for official development assistance (ODA). The donor may use two instruments as an outright grant or in combination with a market loan to produce a concessional loan of US\$2 billion with a percentage grant element of 50 per cent. Many nowadays think the choice should be clear: provide grants only, leave loans to the market. Since its inception in the 1980s, the developing country debt crisis has marked a dramatic watershed in ODA, as it brought home the fact that ODA loans had accumulated into unsustainable debt and thus called into question the use of loans to finance development. After 2000, the grants-versus-loans controversy developed when an influential US Congress Report of the International Financial Institution Advisory Commission (better known as Meltzer Commission; see IFIAC 2000) concluded that total cancellation of poor-country debt was essential. One of the conclusions of the Meltzer Commission on reforming the World Bank and the International Monetary Fund was that development assistance should be administered through performance-based grants rather than (concessionary, or soft) loans. Under this system, grants would be disbursed not directly to the government, but to a nongovernmental organization (NGO), charity, or private-sector business that would offer the cheapest bid for a project. These recommendations were echoed in US President Bush's proposal in 2001 during the negotiations for the 13th IDA replenishment that 50 per cent of IDA financing to poor countries should take the form of direct grants.

The heavily indebted poor country (HIPC) debt reduction initiative has been seen as proof of failure of the soft loan strategy. The international agreement on debt relief (Multilateral Debt Relief Initiative, or MDRI) reached by the G-8 finance ministers in mid-2005 followed suit, cancelling US\$ 56.5 billion in loans owed to the World Bank, African Development Bank, and International Monetary Fund. At Gleneagles the heads of state formally endorsed the agreement made by their finance ministers. Fourteen countries in Africa and four in Latin America became eligible for immediate debt forgiveness under the plan, and a further nine should benefit over the next few years.

Discussion Paper No. 2007/06. Authors: Daniel Cohen, Pierre Jacquet, and Helmut Reisen. Sponsor: UNU-WIDER gratefully acknowledges the financial contribution to the conference by the Finnish Ministry for Foreign Affairs.

(Details of the paper can be accessed from the link of UNU-WIDER on CME Page of WomensHealthSection.com)

Human Rights Instruments:

In the San Francisco Conference in 1945 at which the United Nations was established, some 40 non-governmental organizations (NGOs) representing women, trade unions, ethnic organizations and religious groups joined forces with delegations, mostly from smaller countries, and pressed for more specific language on human rights than proposed by other states. This determined lobbying resulted in bold provisions on human rights being incorporated into the **Charter of the United Nations**, laying the foundation for the post-1945 era of international law-making. The Charter Preamble explicitly reaffirms "faith in fundamental human rights, in the dignity and worth of the human person, in the equal rights of men and women and of nations large and small". Article 1 establishes that one of the principal tasks of the United Nations is to promote and

encourage “respect for human rights and for fundamental freedoms for all without distinction as to race, sex, language, or religion”. Other provisions commit states to take action in cooperation with the United Nations to achieve universal respect for human rights.

International Bill of Human Rights:

Three years after the United Nations began work; the General Assembly laid the cornerstone of contemporary human rights law: the ***Universal Declaration of Human Rights***, which was intended as a “common standard of achievement for all peoples”. It was adopted on 10 December 1948, the day now observed worldwide as **International Human Rights Day**. Its 30 articles spell out basic civil, cultural, economic, political and social rights that all human beings in every country should enjoy. The provisions of the Universal Declaration are considered to have the weight of customary international law because they are so widely accepted and used as a yardstick for measuring the conduct of states. Many newly independent countries have cited the Universal Declaration or included its provisions in their basic laws or constitutions. The broadest legally binding human rights agreements negotiated under United Nations auspices are the two International Covenants – one on Economic, Social and Cultural Rights and the other on Civil and Political Rights. These agreements, adopted by the General Assembly in 1966, take the provisions of the Universal Declaration a step further by translating these rights into legally binding commitments and setting up bodies to monitor the compliance of states parties. Most of the world’s countries are parties to the Covenants. The Universal Declaration, together with the two International Covenants on Human Rights and their Optional Protocols, comprise the International Bill of Human Rights.

Universal Declaration of Human Rights:

Introduction:

On 10 December 1948, the General Assembly of the United Nations adopted and proclaimed the Universal Declaration of Human Rights, the full text of which appears in the following pages. Following this historical act, the Assembly called upon all Member countries to publicize the text of the Declaration and “to cause it to be disseminated, displayed, read and expounded principally in schools and other educational institutions, without distinction based on the political status of countries or territories”. Kofi Annan, Secretary General

When the United Nations was created in 1945, the founding States reaffirmed their faith in fundamental human rights, in the dignity and worth of the human person, and in the equal rights of men and women. They expressed their determination to create a world where human rights and fundamental freedoms would be universally respected and observed for all people without distinction as to race, sex, language or religion. The Universal Declaration of Human Rights, adopted in 1948, was the embodiment of this determination. For the first time in history, a number of fundamental rights and freedoms were internationally agreed upon. The provisions of the Universal Declaration were acknowledged as a common standard of achievement for all peoples and all States. They became a source of inspiration for constitutions and national laws of a great number of States. The Universal Declaration, which has been translated into more than 300 languages, is the most well known human rights instrument. The rights enshrined in the Universal Declaration were further elaborated and became international binding standards through the adoption in 1966 of the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights. Other treaties, including the International Convention on the Elimination of all Forms of Racial Discrimination, the Convention on the Elimination of all Forms of Discrimination against Women, the Convention on the Rights of the Child, the Convention against Torture and the International Convention on the Protection and the Rights of all Migrant Workers and Members of their Families established new standards and enlarged the scope of human rights law.

All human beings are born with equal and inalienable rights and fundamental freedoms.

The United Nations is committed to upholding, promoting and protecting the human rights of every individual. This commitment stems from the United Nations Charter, which reaffirms the faith of the peoples of the world in fundamental human rights and in the dignity and worth of the human rights.

To be continued....

Top Two-Articles Accessed in December 2008:

1. Obstetrical Fistulae & Efforts of the United Nations;
<http://www.womenshealthsection.com/content/uogvfvf/uogvfvf006.php3>
Author: Dr. Rita Luthra, President, Women's Health and Education Center (WHEC), NGO in Consultative Status with the Economic and Social Council of the United Nations. Gratitude is expressed to UN Chronicle for the Cover Page. Special thanks to WHO and World Bank for the contributions.
2. Health Care Crisis in the USA;
<http://www.womenshealthsection.com/content/heal/heal004.php3>
WHEC Publications. Special thanks to World Health Forum; World Health Organization (WHO), to grant permission to publish this forum in *WomensHealthSection.com*. Readers are encouraged to participate in the debate and submit their view-points. We hope our efforts help to make healthcare affordable in every country.

From Editor's Desk:

World Program for Human Rights Education (2005-ongoing)

On 10 December 2004, the General Assembly of the United Nations proclaimed the World Program for Human Rights Education (2005-ongoing) to advance the implementation of human rights education programs in all sectors. Building on the achievements of the [United Nations Decade for Human Rights Education](#) (1995-2004), the World Program seeks to promote a common understanding of the basic principles and methodologies of human rights education, to provide a concrete framework for action and to strengthen partnerships and cooperation from the international level down to the grass roots. Unlike the specific time frame of the Decade, the World Program is structured around an ongoing series of phases, the first of which covers the period 2005-2009 and focuses on the primary and secondary school systems. Developed by a broad group of education and human rights practitioners from all continents, the [Plan of Action](#) for the first phase proposes a concrete strategy and practical ideas for implementing human rights education nationally. This invitation is extended to you by the NGO Committee on Human Rights and the Permanent Missions of the [Netherlands](#).

[The United Nations and Human Rights - The Thirty Articles \(photos\)](#)

The United Nations Prize in the Field of Human Rights is an honorary award given to individuals and organizations in recognition of outstanding achievement in human rights. The Prize was established by the [General Assembly in 1966](#) and was awarded for the first time on 10 December 1968, the twentieth anniversary of the Universal Declaration of Human Rights. The Prize has since been awarded in 1973, 1978, 1988, 1993, 1998 and 2003. The Prize is an opportunity not only to give public recognition to the achievements of the recipients themselves, but also to send a clear message to human rights defenders the world over that the international community is grateful for, and supports, their tireless efforts to promote all human rights for all.

Special Thanks:

WHEC expresses gratitude to Ms. Yvonne Acosta, Chief, Academic Partnership Unit / UN Chronicle, Department of Public Information, United Nations for the priceless support, friendship and alliances. It is indeed a pleasure and privilege for all of us at the Women's Health and Education Center (WHEC) to work with the team of UN Chronicle on project: Improving Maternal Health through Education. We hope our efforts contribute to a better world.

Words of Wisdom:

Whatever a man want ... in the minutest preoccupations as well as in the greatest designs, the essence of his desire always consists in this, that he wants above all things to be able to exercise his will freely.

*Monthly newsletter of WHEC designed to keep you informed
on the latest UN and NGO activities*