

Recent development on health and human rights

A human rights-based approach to maternal mortality

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During the 20th session of the UN Human Rights Council in July 2012, the UN High Commissioner for Human Rights (HCHR) released a report on technical guidance for applying a human rights-based approach to implementing policies and programmes to reduce preventable maternal morbidity and mortality.

The report's aim is to assist policymakers in improving women's health and rights by providing guidance on implementing policies and programmes to reduce maternal mortality and morbidity in accordance with human rights standards. Maternal mortality and morbidity continue to exact a terrible toll on women, and especially impoverished women, in many countries worldwide. The World Health Organization estimates that 88% to 98% of maternal deaths are preventable. The Millennium Development Goal 5 calls for a 75% reduction in maternal mortality ratios from 1990 levels, and universal access to reproductive health by 2015, the latter being the target that is most off-track.

A previous report from the HCHR on preventable maternal mortality and morbidity and human rights (A/HRC/14/39) identified seven human rights principles fundamental for understanding maternal mortality and morbidity as a human rights issue: accountability, participation, transparency, empowerment, sustainability, international assistance and non-discrimination.

A second previous report (A/HRC/18/27) outlined categories of good practices for addressing maternal mortality and morbidity in compliance with human rights obligations: enhancing the status of women, ensuring sexual and reproductive health rights, strengthening health systems, addressing unsafe abortion, and improving monitoring and evaluation. It acknowledges that the current rate of global decline in maternal mortality and morbidity is insufficient to achieve the MDG target by 2015.

It further states that good and effective practices to eliminate mortality and morbidity using a human rights-based approach may be complex and specific to the local situation. Maternal mortality and morbidity are the conse-

quence of gender inequality, discrimination, health inequity and a failure to guarantee women's human rights.

The report identifies five common features of good and effective practices to eliminate preventable maternal mortality using a human rights-based approach:

- (1) Broad social and legal changes to enhance women's status by promoting gender equality and eliminating harmful practices;
- (2) Increasing access to contraception and family planning to enable women and adolescent girls to make decisions regarding their sexuality and fertility, including delaying and limiting childbearing and preventing sexually-transmitted infections, including HIV/AIDS, supported by access to education on sexuality and sexual and reproductive health;
- (3) Strengthening health systems and primary health care to improve access to, and use of, skilled birth attendants and emergency obstetric care for complications;
- (4) Addressing unsafe abortion for women;
- (5) Improving monitoring and evaluation of State obligations to ensure the accountability of all actors and to implement policies.

Africa has:

produced demonstrable results at reducing maternal mortality and morbidity by giving effect, to varying degrees and in different ways, to certain principles of a human rights-based approach: equality and non-discrimination, participation, transparency, empowerment, sustainability, accountability and international cooperation.

Throughout the region there have been concerted efforts to abandon female genital mutilation and cutting, implementation of programmes to engage men as partners in healthy sexual relationships, and development of national policies and guidelines for maternal death reviews. The role that quasi-judicial bodies can play in ensuring government accountability for maternal health was also highlighted as important.

http://www.ohchr.org/Documents/HRBodies/HRCouncil/RegularSession/Session21/A-HRC-21-22_en.pdf

References

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