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FROM PROMISES TO DELIVERY

PUTTING HUMAN RIGHTS AT THE HEART OF THE MILLENNIUM DEVELOPMENT GOALS

AMNESTY
INTERNATIONAL



Amnesty International is a global movement of 2.8 million supporters, members and activists in more than 150 countries and territories who campaign to end grave abuses of human rights. Our vision is for every person to enjoy all the rights enshrined in the Universal Declaration of Human Rights and other international human rights standards. We are independent of any government, political ideology, economic interest or religion and are funded mainly by our membership and public donations.

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Cover photo: Members of Dey Kraham community in Phnom Penh, Cambodia, flee the bulldozers. An estimated 250 security forces and hired demolition workers entered the community without warning early in the morning on 24 January 2009. Some 400 families were evicted; most were made homeless.
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Back cover photo: Launch of Amnesty International's campaign to reduce maternal mortality in Sierra Leone, September 2009. Sierra Leone has one of the highest maternal mortality rates in the world. © Amnesty International

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CHAPTER 1/ INTRODUCTION

“We will spare no effort to free our fellow men, women and children from the abject and dehumanizing conditions of extreme poverty... We resolve therefore... [t]o strive for the full protection and promotion in all our countries of civil, political, economic, social and cultural rights for all”

United Nations Millennium Declaration, September 2000, paras 11 and 25

The Millennium Development Goals (MDGs) remain the most prominent global initiative to address poverty. Drawn from the Millennium Declaration¹ adopted 10 years ago by all UN members states, the MDGs represent a commitment, at the highest political level, to translate the high hopes and ambitions of the Millennium Declaration into real improvements in the lives of people living in poverty. However, as deadlines draw nearer, there is a very real danger that the MDG targets will not be met in several areas. Amnesty International believes that human rights standards – and the duty of governments to fulfil them – must be put at the heart of MDG efforts in order to fulfil the promises made in the Millennium Declaration.

The MDGs focus on eight areas: (1) eradicating extreme poverty and hunger; (2) providing universal primary education; (3) promoting gender equality and empowering women; (4) reducing child mortality; (5) improving maternal health; (6) combating HIV/AIDS, malaria and other diseases; (7) ensuring environmental sustainability; and (8) developing a global partnership for development.² Seven of the goals are accompanied by global targets for progress (see Table 1, page 36). The deadline by which most of the targets should be achieved is 2015. The eighth goal places responsibility on the international community to assist.

The MDGs have played a pivotal role in helping to concentrate international attention on issues of development and poverty reduction. They have also provided a focal point for civil society which has mobilized nationally and internationally around the MDGs to challenge poverty and exclusion. Most international development agencies have supported and prioritized the MDGs. And while the target-driven approach has been questioned by some, it has been welcomed by others for creating a framework for measuring progress.³

However, the extent to which they reflect and help advance the promise of the Millennium Declaration remains uncertain. Progress has been uneven and the UN has issued a clear warning that many of the global targets will not be met by 2015 unless efforts are radically stepped up.⁴

“Our challenge today is to agree on an action agenda to achieve the Millennium Development Goals. With five years to go to the target date of 2015, the prospect of falling short of achieving the Goals because of a lack of commitment is very real. This would be an unacceptable failure from both the moral and the practical standpoint.”

Keeping the promise: a forward-looking review to promote an agreed action agenda to achieve the Millennium Development Goals by 2015, Report of the UN Secretary-General, February 2010

The UN Secretary-General has also highlighted the additional challenges posed by climate change and the food and financial crises.⁵ All efforts to achieve and surpass the MDGs must reflect the promise of the Millennium Declaration to strive for the protection and promotion of civil, political, economic, social and cultural rights for all.⁶ This is essential in order to make equitable and sustainable progress on the MDGs.

However, states’ obligations under international human rights law are not adequately reflected in the MDGs. While MDG 7 includes a commitment for states to integrate the principles of sustainable development into country policies and programmes, they did not include a similar commitment to include human rights principles. Amnesty International believes that all efforts to achieve the MDGs must take the following into account:

- States have an obligation to respect, protect and fulfil civil, political, economic, social and cultural rights. Holding governments to account when they fail to fulfil their obligations is crucial. Effective and accessible mechanisms must be integrated into MDG efforts, at the national and international level, so that people can claim their rights and hold governments to account.
- All MDG initiatives must be consistent with human rights standards and obligations, including the principle that states should not take retrogressive steps, unless absolutely necessary, which could lead to a reversal of progress made towards the full realization of rights (such as through adoption of policies or disinvestment, which reduces peoples’ access to essential social services).⁷ States must also put in place mechanisms to monitor MDG initiatives to ensure that they do not lead to human rights violations.
- Exclusion and discrimination continue to be key factors in driving and deepening poverty. They are often barriers to people’s access to services, resources and programmes and undermine efforts to tackle poverty. Freedom from discrimination is a central principle of

international human rights law, set out in a range of international treaties.⁸ Laws and practices must ensure that full and equal enjoyment of rights extends to all, including members of marginalized or excluded groups.⁹ It is also essential that all MDG initiatives reflect the commitments made by states to women's human rights and gender equality. They should also focus on women's experience of poverty and address discrimination and other human rights violations faced by women and girls, which drive and deepen poverty.

- States have an immediate obligation to prioritize minimum essential levels of economic, social and cultural rights – such as housing, food, water, sanitation, education, health and social security – for all.¹⁰ They are also required to focus on the most disadvantaged when planning and implementing programmes and allocating resources nationally and internationally.¹¹ States must incorporate these requirements so that all MDG initiatives prioritize those individuals and groups most at risk and bring about real improvements in their lives.

- States are required to set benchmarks for measuring progress.¹² Some states have adapted the global MDG targets to their national realities, taking into account the resources available to them. However, others have simply adopted the global MDG targets and so may have set the bar too low. National targets must be identified to enable better monitoring and accountability and ensure that efforts under the MDGs are truly directed at progress in all, rather than just some, countries.

- International human rights law guarantees the right to participation, including the rights to freedom of expression, information and association, of affected communities.¹³ Participation and genuine consultation are prerequisites for effective planning and delivery and must be guaranteed in all national and international efforts to meet the MDGs.

This report focuses on three main issues – gender equality, maternal health and slums – which provide clear examples of how the MDGs and the targets set fall short of international human rights standards. These examples illustrate the gap between the current MDG targets and existing requirements under international human rights law. The issues and country examples described are repeated in many other areas and countries. The report ends with a list of recommendations to states, bilateral and multilateral development agencies, international financial institutions, and UN agencies, programmes and funds. These focus on how implementation of the MDGs between now and 2015 can be made consistent with human rights standards. They also briefly outline some of the essential elements that must be incorporated into any revised or new global framework to address poverty after 2015.

The MDGs came onto the world stage 10 years ago promising some of the world's most impoverished and excluded communities a new dawn in a new millennium. Since then, some progress has been made, but it is now painfully clear that this has been uneven, and that without increased efforts, progress will fall far short of the targets set for 2015. The challenge now is urgent and clear – to make that framework effective for the billions striving to free themselves from poverty and to claim their rights. Amnesty International believes that the respect and promotion of all human rights – including economic, social and cultural rights – are key in order to improve the lives of people living in poverty.

KEY RECOMMENDATIONS

Amnesty International calls on states to put human rights at the centre of efforts to meet the MDGs.

This requires states to:

1. Improve accountability – states must ensure that national and international mechanisms are in place to hold them to account if they fail to fulfil their duty to respect, protect and fulfil human rights in pursuing MDG initiatives. They must also provide effective remedies for human rights violations.
2. Review consistency with human rights standards – states should review all existing and planned laws, policies and programmes linked to the MDGs to ensure consistency with international human rights standards. This review should ensure that the views and experiences of those affected by MDG initiatives are heard and taken into account.
3. Include the excluded – states must ensure that their MDG efforts are inclusive, that they are aimed at ending discrimination, guarantee gender equality and prioritize the most disadvantaged groups.
4. Set national targets for progress – states should set and implement national targets to realize all economic, social and cultural rights, in particular minimum essential levels, in the shortest possible time. Governments should develop time-bound and measurable targets, taking into account existing levels of progress and the resources available nationally and through international co-operation and assistance.
5. Ensure participation – states must ensure that people living in poverty are able to participate meaningfully in MDG planning, implementation and monitoring at all levels. They must ensure equal participation by women and provide an enabling environment for the work of human rights defenders, including through guaranteeing people's rights to information, freedom of expression and association.
6. Ensure that all international co-operation and assistance in support of the MDGs is consistent with human rights standards.

CHAPTER 2/ HOW HUMAN RIGHTS CAN STRENGTHEN THE MDGS

“The norms and values embedded in the Millennium Declaration and international human rights instruments must continue to provide the foundation for engagement, in particular the key human rights principles of non-discrimination, meaningful participation and accountability.”

Keeping the promise: a forward-looking review to promote an agreed action agenda to achieve the Millennium Development Goals by 2015, Report of the UN Secretary-General, February 2010, para 99(4)

The Millennium Development Goals are largely silent on human rights, and the targets they set are in some cases less than what states are already obligated to do under international law. For example, the MDGs contain no explicit requirement that states identify and address exclusion and discrimination. The targets and indicators for many of the goals do not acknowledge the variety of human rights factors that drive and deepen poverty. Integrating international human rights standards into MDG efforts could lead to more meaningful progress on the MDGs in the next five years. This would require that governments review all MDG initiatives and efforts to ensure their consistency with human rights; address discrimination experienced by women and other groups; set appropriate national targets, both in terms of levels of progress that should be achieved on particular issues and those prioritized; fulfil the right to participation; and strengthen mechanisms for accountability.

ENSURING INCLUSION

International human rights law requires all states to guarantee equality and non-discrimination. The MDGs, in contrast, contain no explicit requirement for states to comprehensively identify and redress exclusion and discrimination.¹⁴

While the Millennium Declaration reiterated states' commitment to "combat all forms of violence against women and to implement the Convention on the Elimination of All Forms of Discrimination against Women", gender equality and women's rights are only partly and very poorly reflected in the MDGs. Goal 3, to promote gender equality and empower women (see Chapter 3), has been reduced to a single target – eliminate gender disparity in education – and two complementary indicators on the percentage of women involved in paid employment and political representation. This is a long way from states' obligations under the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) which require governments to address discrimination against women and guarantee equality under each of the goals and targets.¹⁵

International law also prohibits discrimination on other grounds, such as race, caste, ethnicity, disability and Indigenous status. These forms of discrimination are closely linked to poverty, yet the MDGs remain silent on them.

The UN Permanent Forum on Indigenous Issues has highlighted the fact that Indigenous Peoples "are disproportionately represented among the poor and extremely poor, their levels of access to adequate health and education services are well below national averages, and they are especially vulnerable to the consequences of environmental degradation".¹⁶ The Permanent Forum also noted that, "Indigenous and tribal peoples are lagging behind other parts of the population in the achievement of the goals in most, if not all, the countries in which they live, and indigenous and tribal women commonly face additional gender-based disadvantages and discrimination."

THE YAKYE AXA AND SAWHOYAMAXA

"The destitute living conditions of the members of the Yakye Axa community who have settled alongside the public road are extreme", Inter-American Court of Human Rights, 17 June 2005

The cases of the Yakye Axa and Sawhoyamaya Indigenous Peoples in Paraguay illustrate the importance of enforcing the rights of Indigenous Peoples to their traditional lands and the impact that the lack of protection of this right can have in driving and deepening poverty in these communities and limiting their access to food, water, health and their other human rights.

The Yakye Axa and Sawhoyamaya Indigenous Peoples are living in temporary homes beside a busy highway with severely limited access to clean water, food and medicines.¹⁷ The land they inhabited for generations is now in the hands of private owners. In 2005 and 2006 the Inter-American Court of Human Rights ruled that the lands should be returned to the Yakye Axa and Sawhoyamaya, and highlighted the central importance of Indigenous Peoples' relationship with their lands for the realization of other human rights.¹⁸ Since the rulings, it is estimated that 27 members of the Yakye Axa and Sawhoyamaya communities have died from preventable causes.

The deadlines set by the Inter-American Court of Human Rights for the return of the lands have long passed and the lands have yet to be returned to the communities. Action to comply with the judgements has yet to produce any positive outcome for their land claims. In fact, in October 2009, the Paraguayan Senate voted against the return of Indigenous lands to the Yakye Axa, and the state now seems to be resigned to seeking alternative lands to offer to the communities rather than taking the decisive action needed to obtain on their behalf the land they are claiming. In the meantime, both communities suffer the cumulative effects of the lack of essential services available to them, with deficient education and health provision, and limited access to water and food.

The Permanent Forum on Indigenous Issues has also expressed concern that Indigenous issues are largely absent from MDG processes and reports. It noted that unless the particular situation of Indigenous Peoples is adequately taken into account, "some Millennium Development Goals processes may lead to accelerated loss of lands and natural resources for indigenous peoples, and thus of their means of subsistence and their displacement, as well as to accelerated assimilation and erosion of their culture."¹⁹

The proportional nature of the targets also raises concerns that states can demonstrate progress while failing to focus on the most disadvantaged and vulnerable groups. For example, groups working on the rights of people with disabilities have emphasized that although "20 per cent of the world's poorest people are disabled... disability is not mentioned in any of the 8 MDG goals, the 18 targets, or the 48 indicators. People with disabilities are also largely absent from international and national strategies and action plans for poverty reduction... lack of specific attention to marginalised groups in the targets and indicators creates a real danger that efforts to achieve the MDGs will push some of the world's poorest people to the periphery."²⁰

The MDGs' exclusive focus on poverty reduction in developing countries also neglects pockets of poverty in developed countries, which are closely related to discrimination and marginalization. For example, Roma communities in many European countries continue to live in conditions that stand in stark contrast to majority populations. Many live in grossly inadequate housing and their access to services such as water, sanitation, education and health care is often inadequate or non-existent.²¹

The failure to address discrimination is reflected not only in the actual goals and targets, but also in the MDG planning, monitoring and reporting framework.

GAPS IN MEASUREMENTS AND REPORTING

A survey of 50 MDG country reports by the UN Independent Expert on Minority Issues showed that ethnic and linguistic minorities were mentioned in only 19 reports and only in relation to certain goals. Even when they were mentioned, information on issues affecting minorities or analysis of measures directed at minority groups were not provided under each of the MDGs.²²

States are asked to disaggregate the MDG indicators on the basis of sex and urban/rural communities, as far as possible.²³ However, there is no similar requirement to provide disaggregated data for groups who face discrimination or are disadvantaged within a

particular country context, for example, Indigenous Peoples or minority communities. Reviews of national MDG reports by the Secretariat of the UN Permanent Forum on Indigenous Issues revealed that very few actually provide disaggregated data.²⁴

Some countries have developed frameworks for monitoring progress which include a specific focus on marginalized groups. For example, the Office of the High Commissioner for Human Rights reported that Thailand included disaggregated national indicators that take into account regional and ethnic disparities. Ecuador has also developed additional indicators to better reflect the rights of women, Indigenous Peoples and Afro-descendants.²⁵ However, all states need to ensure that all efforts to plan, implement and monitor the MDGs include an explicit focus on ending discrimination and removing the barriers facing disadvantaged groups in gaining access to services.

OBLIGATIONS OF STATES RELATING TO ECONOMIC, SOCIAL AND CULTURAL RIGHTS²⁶

Under international law, states have an obligation to fulfil progressively economic, social and cultural rights (progressive realization).²⁷ States are under a duty to take steps that are deliberate and concrete and targeted as clearly as possible towards fulfilling these rights as expeditiously and effectively as possible.²⁸ This is an immediate obligation and the rate and level of progress that each state is expected to make should take into account the maximum resources available both from national sources and the international community. States able to assist are required to engage in international co-operation and assistance to respect, protect and fulfil economic, social and cultural rights. This also requires the adoption of national strategies and plans of actions setting out how the state will achieve this end and developing corresponding indicators and benchmarks.²⁹

States also have an immediate obligation to prioritize the realization of minimum essential levels of each economic, social and cultural right for everyone.³⁰ They are required to *respect* human rights by refraining from interfering directly or indirectly with people's enjoyment of human rights; to *protect* human rights by preventing, investigating, punishing and ensuring remedies where third parties infringe rights and to *fulfil* human rights by taking legislative, administrative, judicial, budgetary and other steps towards the full realization of human rights. The obligations to respect and protect human rights are immediate and not subject to progressive realization as are obligations to ensure non-discrimination and equality.

The MDGs do not reflect these obligations. It is vital that they do so.

SETTING EFFECTIVE BENCHMARKS FOR REAL PROGRESS

The MDGs establish global targets, but there are two main areas of concern around these targets. First, the global targets themselves were not developed based on an assessment of countries' levels of progress or the resources available to them domestically and through international co-operation and assistance. They also did not prioritize the fulfilment of minimum essential level of economic, social and cultural rights for all people in all countries.

Second, the MDG framework does not require states to adapt these global targets to their national context, although some states have chosen to do so voluntarily. As a consequence, the MDGs may set the bar too low for some countries and use a far lower benchmark for progress than that required under international human rights law.

CONCERNS AROUND THE GLOBAL TARGETS

Time-bound targets can be an important tool. By using common standards and permitting international measurement, the MDGs allow for comparison of progress across countries at similar levels of development. They have also been useful in raising the bar for progress in some countries. However, these targets do not take into account individual countries' levels of progress or the resources available to them domestically and through international co-operation and assistance. As a result, rather than being realistic targets, they could be considered arbitrary benchmarks in many contexts. A clear example of this is target 11, under Goal 7, for the improvement of the lives of 100 million slum dwellers. This target merely endorsed the *Cities Without Slums Action Plan* and adopted a target that a partnership of various donor and other international agencies had set for their own work.³¹ It was not based on an assessment of what states should reasonably aim to achieve globally in light of their obligations and the resources available. This target and the corresponding indicator also does not reflect states' duty to take immediate steps to provide a minimum degree of security of tenure by providing protection against forced evictions, harassment and other threats to people living in slums. As a result, the MDGs may have missed an opportunity to make far greater progress in improving the living conditions of close to a billion people living in slums.

The MDGs aim to halve the proportion of people living on less than US\$1 a day between 1990³² and 2015. This goal was based on an analysis of rates of past progress,³³ rather than an assessment of progress that could be achieved using the maximum of available resources, as required by the International Covenant on Economic, Social and Cultural Rights (ICESCR). The failure to incorporate states' obligations under international human rights law on progressive realization and minimum essential levels means that the income poverty target is insufficient. It is expected that the global target will be achieved on the basis of progress in China and India as a result of policies that predate the MDGs.³⁴

Goal 8 of the MDGs includes general commitments by developed countries to assist developing countries to meet the other seven MDGs. However, these commitments are not quantified or time-bound, making it harder to hold developed countries to account.

NATIONAL TARGETS

Some countries have adopted national targets above the MDG level. For example, Latin American countries decided to expand their MDG commitments on education to include secondary education.³⁵ Kenya, South Africa and Sri Lanka – each of whom recognise water and sanitation as human rights – adopted national targets for increasing access to water and sanitation that are stronger than the global MDG targets.³⁶ However, many countries simply used the global targets and some therefore adopted a far lower national benchmark for progress than is required under international human rights law. The current review of the MDGs offers states a useful opportunity to set national targets that reflect their obligations under international human rights law relating to progressive realization of economic, social and cultural rights. The identification of national targets and immediate steps that states are

required to take would enable better monitoring and accountability for progress. While it may not be possible to revise the global framework for the MDGs until 2015, states can adopt or revise national targets in line with their obligations to accelerate progress on the MDGs in the next five years. This would help ensure that efforts under the MDGs are truly directed at progress in all countries.

Reliance on the global MDG targets alone can also give a distorted picture of progress. For example, they do not address the affordability and quality of services. In part, the problem is caused by lack of data. For example, the Millennium Declaration specified a target of reducing by half the number of people unable to reach or afford safe drinking water.³⁷ However, the MDGs limited this goal to access to water as there is insufficient internationally comparable data on affordability. The indicators assess water to be safe if it is provided from a source likely to be safe, such as piped water or a protected well.³⁸ Piped water of poor quality that is provided from a polluted source can thereby wrongly be counted as safe.

Several critical economic, social and cultural rights are not included in the MDGs, such as the right to social security, and the right to health, including prevention and treatment of neglected diseases that continue to affect the lives of millions, such as river blindness, sleeping sickness, Chagas' disease and leprosy. According to the World Health Organization (WHO), these diseases largely affect poor people living in rural areas in low income countries.³⁹ States should therefore also be encouraged to establish national benchmarks for key economic, social and cultural rights issues which are not covered under the existing MDG framework in order to ensure that their national efforts are consistent with their international human rights obligations and hold the promise of real progress for millions of the world's most disadvantaged people.

PARTICIPATION IN DECISION-MAKING

The International Covenant on Civil and Political Rights (ICCPR) guarantees the right of every citizen to take part in the conduct of public affairs.⁴⁰ The UN Committee on Economic, Social and Cultural Rights has stressed that the right to participation must be an integral part of government policies, programmes and strategies.⁴¹ It has highlighted, for example, the vital role of participation in ensuring the effective provision of health services for all.⁴² In order for active participation to be meaningful, states must also fulfil a number of other rights and duties, including the rights to freedom of expression and association, and the duty to ensure the conditions in which human rights defenders can carry out their work.

The current MDG framework does not explicitly recognize the right to participate actively and meaningfully. As a result, people living in poverty are rarely involved in developing, implementing or monitoring efforts to meet the MDGs. Where decision-making processes involve civil society, community-based organizations, social movements and individuals often tend not to be included.⁴³ In some situations, participation can be merely tokenistic.⁴⁴

The Secretariat of the UN Permanent Forum on Indigenous Issues review of national MDG reports by 25 countries in Africa, Latin America and Asia/Pacific in 2006 and 2007⁴⁵ found that, with very few exceptions, Indigenous Peoples' input had not been included in national MDG monitoring and reporting. The reviews also identified a lack of mechanisms through which to ensure the input and participation of Indigenous Peoples themselves in the design, implementation and monitoring of policies designed to achieve the MDGs.⁴⁶ Its 2010 desk

review concluded that: “For future reports, the direct participation of indigenous peoples and their communities should be encouraged by their respective Governments, beginning from the planning and preparation process”. It also stressed that: “[...] the free, prior and informed consent of indigenous peoples should be sought in all development initiatives that involve them. Indigenous peoples cannot be simply objects of study or targets of development projects, no matter how well intended, but must be active participants in policy planning, implementation and review”.⁴⁷

Participation and genuine consultation are prerequisites for effective planning and delivery and must be guaranteed in all national and international efforts to meet the MDGs.

RIGHT TO INFORMATION IN INDIA

In 2005 the government of India introduced the Right to Information Act (RTI Act) after a public campaign led by the Mazdoor Kisan Shakti Sangathan highlighted how people living in poverty in rural areas were disadvantaged by lack of information and how this also contributed to rampant corruption in famine relief.⁴⁸ The Act covers the central and state governments, Panchayati Raj institutions, local bodies, as well as recipients of government grants. Public authorities are under a duty to provide access to information when requested. It includes penalty provisions for authorities who refuse to release requested information and for those who do not provide it in a timely manner.

Although the Act continues to have some limitations, it is a significant step towards greater transparency and accountability in India. Since the Act came into force there have been several cases where people, enabled by the RTI Act, have been able to combat corruption in public services and authorities.⁴⁹ It has also enabled people to obtain information about day-to-day services and programmes that affect their lives from the delivery of ration cards, passports, income tax returns, to larger policy level decisions like water policy reforms in Delhi, and to strengthen their ability to participate in processes which affect their lives and to hold relevant public authorities accountable.

ACCOUNTABILITY AND REMEDIES

International monitoring of states' efforts to meet the MDGs is limited to a voluntary public reporting system, under which many countries have submitted reports,⁵⁰ in many cases assisted by the UN Development Programme (UNDP). Many reports however lack an in-depth assessment of progress and are also not updated regularly. There is also another voluntary process at the UN Economic and Social Council (ECOSOC), under which states can choose to make presentations of their progress towards meeting the MDGs to the Annual Ministerial Review. Only eight countries chose to give presentations in 2008. However, there is no independent monitoring or evaluation of these reports and no forum for complaints.

National and international accountability mechanisms applying human rights standards can strengthen MDG efforts by giving people living in poverty, and civil society acting on their behalf, greater opportunities to hold governments to account.

Amnesty International's research in Burkina Faso, for example, highlights the importance of accountability. The government's policy to provide subsidized health care for pregnant women has been undermined by the illegal charges demanded by hospitals. Women faced with such charges did not have anywhere to lodge their complaints. There is a lack of mechanisms – either within the hospital, via a medical regulatory body, or through the courts – to ensure accountability.⁵¹ Such mechanisms would help enhance the delivery of the government's policies and programmes and empower women and their families to claim what they are entitled to under such policies. Processes to increase accountability and provide effective remedies can also serve as an incentive for governments to engage in co-operative dialogue with groups often excluded from policy making.

NATIONAL ACCOUNTABILITY MECHANISMS

Many people, particularly those living in poverty, face considerable barriers in getting access to the courts. These must be removed so that the courts can fulfil their potential for defending and promoting rights. National laws should treat human rights, including economic, social and cultural rights, as legally enforceable. Granting civil society groups the right to present cases to the courts in the public interest; making provision for judicial independence; complying with judicial decisions; and ensuring legal aid and waiving court fees for those on low-incomes – all would improve access to justice.

At the national level, potential accountability mechanisms that can fulfil different monitoring functions include the judiciary, quasi-judicial bodies such as human rights commissions, parliaments and regulatory bodies. The judiciary should be able to hold a government to account. It should monitor the government's compliance with national and international law and require government bodies to carry out the necessary reforms to law, policy and practice to ensure obligations are fulfilled. As the Constitutional Court of South Africa has noted, litigation fosters participative democracy, requiring government to be accountable to its citizens between elections over specific aspects of policy. As part of this process, governments must disclose what they have done to formulate policies, what alternatives they have considered and the reasons why the option underlying a policy was selected.⁵²

Bodies such as national human rights commissions and ombudsperson or public defender institutions can play a critical role in ensuring access to justice. Such bodies can normally carry out investigations on behalf of victims, call for necessary law and policy reforms, and represent claimants before courts. Governments should ensure that such bodies have sufficient capacity to be accessible to the public and to monitor national MDG plans pro-actively. They should also ensure that their mandate covers all human rights, including economic, social and cultural rights. Regulatory bodies relevant to the MDGs – such as those dealing with water and sanitation, health and education – normally have the mandate and expertise to monitor the performance of public services and to order improvements, but often do not explicitly assess compliance with human rights standards. Governments should integrate human rights standards into the mandate of such bodies and require them to hear individual complaints and to inform the public of the right to complain.

Parliamentary bodies also play an important role in ensuring oversight and monitoring of MDG efforts and, in particular, their consistency with the state's human rights obligations.

USING THE COURTS TO MAKE A DIFFERENCE

Litigation before the Supreme Court of India by the People's Union on Civil Liberties led to the recognition and increased realization of the right to food in India. The Court found that inefficiencies in existing food distribution schemes, rather than lack of funds, prevented wider coverage.⁵³ It required that minimum food ration guarantees for families living under the poverty line and other nutrition-related programmes be treated as legal entitlements and implemented in full. The Court also found that midday school meals programmes in force in many states in India were of varying quality and applied unevenly.⁵⁴ It required the provision of a prepared mid day meal with a minimum content of 300 calories and 8-12 grams of protein each day of school for a minimum of 200 days. It directed that a copy of the order be translated in regional languages and in English and prominently displayed in all government school buildings, distribution centres and Panchayats (local councils).⁵⁵ While the order was initially ignored by several states, it strengthened the bargaining power of those working for the right to food.⁵⁶ Popular movements for fulfilment of the order and the appointment of Commissioners to monitor the implementation of the order helped increase enforcement of the order. It is estimated that 140 million school children in state and state-aided schools now benefit from this scheme.⁵⁷ On the basis of enrolment rates in states where the school meals programme was implemented, it has been shown that enrolment rates among girls in the first year increased by 10 per cent.⁵⁸ A conservative estimate of the scale of the impact – assuming implementation in at least half of the country - is that an additional 350,000 girls a year are enrolling in school as a result of the right to food litigation.⁵⁹

In South Africa, litigation on the right to housing led to the creation of municipal emergency housing funds across the country and established a precedent that has prevented forced evictions.⁶⁰ One of the most significant cases reviewed the government's policy to limit the administration of Nevirapine – a drug used to prevent mother-to-child transmission of HIV - only to certain pilot sites in the country. The Court noted that the manufacturer had offered the drug to the government for free for five years and that the scientific evidence, including the advice of the World Health Organization and the South African Medical Control Council, supported the use of the drug.⁶¹ In this situation, where the drug could save the lives of newborn babies, it was not reasonable to withhold the administration of Nevirapine from women and children outside the pilot sites until the government had fully devised its own programme and completed its research.⁶² The Court therefore required the government to permit and facilitate the use of Nevirapine by medical practitioners in public hospitals and clinics where adequate facilities existed for testing and counselling. It further required the state to take reasonable measures to facilitate and expedite the use of Nevirapine throughout the public health sector.⁶³ Extensive mobilization and demonstrations followed the decision and in 2003, South Africa's cabinet adopted an operation plan that had anti-retroviral treatment as one of its core components.⁶⁴ The court decision therefore helped reverse the position adopted by the government at the time that questioned the existence of HIV/AIDS.

The cases above represent some of the leading examples of impact of litigation that result in a positive impact on the realization of economic, social and cultural rights. Some of the favourable factors leading to the adoption of these cases and the significant extent of their implementation included: the willingness of the judiciary in these particular cases to consider claims on behalf of disadvantaged groups and to closely examine government policy measure to identify any unnecessary gaps; South Africa's Constitution which expressly recognized economic, social and cultural rights as legally enforceable; follow-up measures by the Indian Supreme Court to monitor enforcement of the decision; and an active civil society in both situations that were able to provide convincing evidence to the courts, monitor and lobby for implementation by officials at the local level and to carry out follow-up litigation when required.

INTERNATIONAL ACCOUNTABILITY MECHANISMS

International accountability mechanisms play an important role highlighting gaps in national monitoring and areas where national systems do not comply with human rights standards. They can also help focus attention at the highest political level on human rights issues in the context of the MDGs.

These mechanisms include international human rights treaty bodies, made up of committees of independent experts that periodically review performance and, in some cases, can hear complaints;⁶⁵ and the Universal Periodic Review (UPR) process of the UN Human Rights Council, which involves peer review by states every four years of human rights performance.

The human rights monitoring system has not yet played a prominent role in monitoring MDG performance. States generally do not report to such bodies on their efforts to achieve the MDGs, nor has MDG implementation been discussed in any systematic manner as part of the UPR.

International human rights mechanisms could address complaints from individuals and groups about human rights violations in the context of the MDGs where access to justice at the domestic level has been denied them. However, in order to be able to do this, states must ratify the treaties allowing these mechanisms to receive complaints, such as the Optional Protocol to the ICESCR⁶⁶ and the Optional Protocol to CEDAW.⁶⁷

The UN Committee on Economic, Social and Cultural Rights has questioned developed countries on the amount of aid they provide in overseas development assistance. The Committee has also required that all state Parties take due account of the obligations under the Covenant when acting as members of inter-governmental organizations, including international financial institutions.⁶⁸ However, international human rights mechanisms, such as the UPR and treaty monitoring bodies, do not systematically assess actions taken to implement the MDGs. In order to facilitate such monitoring, states should report on the international actions they have taken to meet the MDGs – individually and through inter-governmental bodies, including international financial institutions – so that they can be held accountable for fulfilling their human rights obligations to people beyond their borders.

CHAPTER 3/ WHY HUMAN RIGHTS MATTER IN MDG DELIVERY

Integrating international human rights standards in all MDG efforts is key to making them effective in overcoming poverty. The three areas explored in this chapter – gender equality, maternal health and slums – illustrate how the current framework falls short of human rights standards and how these are essential for addressing poverty and exclusion.

Amnesty International considers these three issues to be particularly important and emblematic of the discrepancies between the MDG framework and human rights standards. The failure to integrate gender equality and women's human rights in all the MDG targets and indicators means that states are not required to address gender discrimination – in law, policy and practice - in their efforts towards *all* the MDGs. Improving maternal health and reducing high levels of preventable maternal deaths is an area that has seen far too little progress. The goal which is intended to lead to improvements in the lives of slum dwellers fails to reflect the scale and scope of the problems faced by people living in slums, and the range of measures that are required to respect and promote their human rights.

HUMAN RIGHTS AND GENDER EQUALITY

GOAL 3: PROMOTE GENDER EQUALITY AND EMPOWER WOMEN

Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015.

Indicators:

- 3.1 Ratios of girls to boys in primary, secondary and tertiary education
- 3.2 Share of women in paid employment in the non-agricultural sector
- 3.3 Proportion of seats held by women in the national parliament

The Millennium Declaration pledges to “promote gender equality and the empowerment of women as effective ways to combat poverty, hunger and disease and to stimulate development that is truly sustainable” and “to combat all forms of violence against women and to implement the Convention on the Elimination of All Forms of Discrimination against Women”.⁶⁹ However, the MDGs do not reflect this commitment to realize the full range of women's human rights.

Women and girls continue to suffer from gender discrimination, violence and other human rights violations across all continents and in all societies. Women still experience pervasive inequality and discrimination in their access to rights, opportunities and resources. It is

estimated that, worldwide, 70 per cent of those living in poverty are women.⁷⁰ In many countries, women and girls continue to face barriers in getting decent work; participating in public life; and obtaining access to education, health care, and adequate food, water and sanitation. Women living in poverty may also face multiple discrimination because they belong to Indigenous communities or minority groups or because of their race, caste, ethnicity or disability.

Lack of access to health care, including sexual and reproductive health services, condemns many to unwanted pregnancies, disability and even death. Early or forced marriage often deprives girls of an education and can greatly increase girls' risk of dying in pregnancy and childbirth.⁷¹ More often than not, household tasks fall to women, so lack of access to clean water and sanitation means that they spend many hours fetching and carrying water, taking time away from other activities, including their education.⁷² Women and girls who do not have access to nearby toilets may also be at increased risk of gender-based violence when they try to find secluded areas, often after dark.⁷³

Despite some progress in providing universal primary education, gender parity in education has not yet been achieved, five years after the 2005 target date.⁷⁴ According to UNICEF, the UN Children's Fund, in 2007 the majority of the estimated 101 million children not attending primary school were girls.⁷⁵ The gender gap in secondary school enrolment persists.⁷⁶ It is estimated that nearly two thirds of the 780 million people worldwide who cannot read are women.⁷⁷ Among the factors hindering girls' access to education are the lack of adequate sanitation facilities in schools,⁷⁸ and violence and exploitation by teachers and other students.⁷⁹

Gender equality and women's empowerment are widely recognized as essential for tackling poverty and achieving the MDGs.⁸⁰ It is therefore striking that they feature so poorly in the MDGs as a whole and that the gender-sensitive targets and indicators are both limited and inadequate.⁸¹ Goal 3 has been reduced to a single target to eliminate gender disparity in education, ignoring all other areas where states have commitments to eliminate discrimination against women. This is complemented by two indicators (the proportion of women in paid employment in the non-agricultural sector, and the percentage of seats in national parliaments held by women), and Goal 5 on improving maternal health. This falls well below the legal obligations of states under international law. States have a duty to address discrimination against women and to guarantee equality under each of the goals and targets. In addition, gender-based violence, a pervasive barrier to gender equality which threatens to undermine progress on all the MDGs, is not reflected in any of the MDG targets.

DISCRIMINATION, GENDER-BASED VIOLENCE AND OTHER BARRIERS

Women who have an education are better able to protect their own health and that of their children. They tend to avoid marrying very young, to space their pregnancies, to protect themselves from unwanted pregnancies and to ensure their children are immunized, receive adequate nutrition and go to school.⁸² Improving women's access to education is, therefore, an important element in preventing maternal and child mortality and meeting the MDGs. In order to realize girls' right to education, governments must improve school conditions for girls. This must include promoting a safe environment, safe transport to and from school, separate toilet facilities, and the removal of other barriers (including financial barriers) that often prevent girls from going to school.

TAJIKISTAN

In Tajikistan, the government is failing to ensure that all girls complete compulsory education. Although education is mandatory until grade 9 (age 15), more than 27 per cent of girls are dropping out of school from the age of 13 to 14 years old for a variety of reasons. The prevailing perception of women's main role as wives and mothers means that families often do not think it is worth investing in girls' education. While boys are usually encouraged by their family to get an education, girls are often kept working at home or in the fields until they are married. Many families are too poor to be able to pay the indirect costs – such as shoes, textbooks, food and transport – and will choose to prioritize boys' education when juggling scarce resources. The barriers to girls' education are compounded by the deterioration of Tajikistan's education system, which suffers from underpaid and under qualified teachers, outdated curriculums and frequently under-resourced and poorly maintained premises.⁸³

Gender-based violence against women takes many forms, including female infanticide; sexual violence; emotional abuse; harmful practices such as female genital mutilation; child and forced marriage; sexual harassment and intimidation at work; acid throwing; trafficking; forced prostitution; and forced sterilization.⁸⁴ Under international law, states have an obligation to prevent, investigate and punish acts of violence against women. Central to achieving this is ensuring that women who are subjected to violence can access justice and remedies for the harm they have suffered.⁸⁵

In Canada, widespread and entrenched racism, poverty and marginalization put Indigenous women at heightened risk of violence; they experience significantly higher rates of violence than women in the population as a whole.⁸⁶ Discrimination has also resulted in deep inequalities in living conditions and in Indigenous women's ability to access government services. For example, they are often denied access to services and support, such as emergency shelters. They have also been denied adequate protection by police and government forces; those responsible for violence against Indigenous women are rarely brought to justice.⁸⁷

Lack of protection for women human rights defenders and the failure to prevent and punish attacks and harassment against them make it harder for women to participate actively. Women human rights defenders are often the target of gender-specific forms of harassment, discrimination and violence, designed to dissuade them and other women from demanding their rights and participating in public life, especially when they challenge gender stereotyping and discrimination.⁸⁸ In Afghanistan, women human rights defenders have been targeted by the Taliban and other anti-government groups, as well as by local warlords and militias, for reporting abuses, running safe houses, raising awareness of child and forced marriage, and providing education programmes and family planning services. Some have been forced to flee the country; others have been killed.⁸⁹

The failure to integrate women's human rights fully into efforts to meet all the MDG targets means that the structural inequality and discrimination experienced by women is often not addressed in states' MDG policies and programmes.⁹⁰ In addition, the lack of consistency in disaggregating data on MDG initiatives means that information on gender discrimination and its intersection with other forms of discrimination are often overlooked.⁹¹

While the targets and indicators for Goal 3 capture some important issues, they overlook other key areas. These include discrimination against women in law, such as civil, penal and personal status laws governing marriage and family relations; women's property and ownership rights; and women's civil, political and employment rights.

CONSISTENCY WITH HUMAN RIGHTS STANDARDS

Steps that governments must take in order to ensure they are fulfilling their obligations under international human rights law in their efforts to meet MDG Goal 3 include:

Identify and address gender discrimination in law, policy and practice in all their efforts towards all the MDGs, including by disaggregating data by gender and monitoring implementation to ensure that all MDG efforts explicitly tackle gender discrimination and inequality.

Identify and remove the specific barriers faced by women and girls in realizing their human rights, in all plans, policies and programmes to address poverty.

Abolish laws that discriminate against women, and address traditional practices and customary laws that undermine women's rights.

Take all necessary measures to combat gender-based violence in all its forms and to ensure that women have access to justice and remedies when they have been subjected to violence.

Respect and promote women's right to participate equally and fully in all levels of decision-making and in public life, and ensure that the rights of women human rights defenders are fully respected and promoted.

HUMAN RIGHTS AND MATERNAL HEALTH

GOAL 5: IMPROVE MATERNAL HEALTH

Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio

Target 5.B: Achieve, by 2015, universal access to reproductive health

Indicators:

- 5.1 Maternal mortality ratio
- 5.2 Proportion of births attended by skilled health personnel
- 5.3 Contraceptive prevalence rate
- 5.4 Adolescent birth rate
- 5.5 Antenatal care coverage
- 5.6 Unmet need for family planning

Although a recent study⁹² claims that there has been some progress in improving maternal health, it remains the case that this is the goal where it is least likely that the 2015 targets will be met.

It is estimated that, globally, a woman dies every minute from pregnancy or childbirth-related causes. In addition, an estimated 10-15 million women a year experience serious complications that leave them with injuries or permanent disabilities.⁹³ Women who experience complications during pregnancy and childbirth often suffer long-term physical, psychological, social and economic consequences. Unplanned or unwanted pregnancies and the lack of available safe, voluntary and effective family planning and contraception also contribute to high levels of unsafe abortions that result in maternal deaths and morbidity. Inadequate monitoring of maternal deaths and “near-misses” contributes to under-reporting of these deaths and of their direct and indirect causes.

According to the UN Population Fund (UNFPA), as many as 99 per cent of the women who die each year of pregnancy-related complications live in developing countries.⁹⁴ Complications relating to pregnancy are said to be the single largest cause of death among girls aged between 15 and 19 and women in developing countries.⁹⁵ The direct causes of most maternal deaths are: severe bleeding, infections, hypertensive disorders (such as eclampsia), prolonged or obstructed labour, and complications from unsafe abortions. An estimated 68,000 women die each year from unsafe abortions.⁹⁶

Pregnancy at a young age significantly increases the health risks, both during pregnancy and childbirth. Girls under the age of 15 are five times more likely, and those aged between 15 and 20 twice as likely, to die from pregnancy-related causes than women in their twenties.⁹⁷ Girls aged between 15 and 19 are also thought to account for one in four unsafe abortions, an estimated 5 million each year.⁹⁸

Levels of maternal mortality and morbidity differ between and within countries. The disparities in the levels of risk faced by women are linked to a variety of factors, including multiple discrimination, poverty and neglect. In Peru, for example, levels of preventable maternal deaths are highest among women from rural and Indigenous communities.⁹⁹ In the USA, the likelihood of a woman dying from complications relating to childbirth is five times greater than in Greece, four times greater than in Germany and three times greater than in Spain.¹⁰⁰ African American women in the USA are nearly four times more likely to die of pregnancy-related complications than white women.¹⁰¹

TARGETS AND INDICATORS

The scope, targets and indicators for Goal 5 also fail to acknowledge the variety of underlying factors that contribute to preventable maternal deaths and injuries. They do not, for example, adequately address human rights issues such as early or forced marriage; violence against women and girls; how discrimination and poverty prevent women obtaining sexual and reproductive health care services; or how women are prevented from making decisions about their own health and lives. These issues must be systematically and comprehensively addressed if significant progress is to be made in reducing maternal mortality.

The indicators for the two targets under Goal 5 reflect the need to ensure that women have access to skilled attendants during childbirth and antenatal care; to improve access to contraception and family planning; and to protect teenagers from premature and unwanted pregnancies. However, they only partially reflect the outcomes that need to be monitored in order to ensure progress. Inadequate data on maternal deaths and injuries, especially in countries with the highest rates of maternal deaths and morbidity, means that the mortality

ratio (target 5.A) risks being misleading. The fact that there is no requirement to disaggregate the data also means that apparent progress may conceal a failure to improve maternal mortality among disadvantaged and marginalized groups – such as women living in remote rural areas, women living in slums, Indigenous women and teenagers. Similarly, the indicator on skilled birth attendants is welcome, but does not address whether obstetric services are of sufficient quality, available, accessible and equitably distributed.¹⁰²

SEXUAL AND REPRODUCTIVE RIGHTS

Goal 5 gives much-needed visibility to maternal health. However, restricting efforts towards MDG 5 to simply increasing access to services, neglects states' pre-existing commitment to ensure gender equality and promote the full range of women's rights, including sexual and reproductive rights. These rights are set out in a number of key instruments including the Platform for Action, adopted at the Fourth UN World Conference on Women in Beijing (1995); the Cairo Programme of Action of the International Conference on Population and Development (1994); and CEDAW, to which 186 states are parties.¹⁰³

The realization of sexual and reproductive rights requires respect for the right of individuals to decide freely on matters relating to their sexuality and reproductive life. This encompasses the rights to decide whether and when to be sexually active; to freely choose one's partner; to consensual marriage; to decide freely the number, spacing and timing of one's children; and to be free from unsafe abortion and gender-based violence, including sexual violence, and harmful practices.¹⁰⁴ Women's realization of their sexual and reproductive rights also requires other rights to be fulfilled such as the rights to an education; to food; to the highest attainable standard of health and the underlying determinants of health; and to equal protection before the law.

Goal 5 essentially fails to take into account two key dimensions essential for progress. It does not address the need to ensure that essential health care services are of sufficient quality, culturally appropriate and available and accessible to all, including the most vulnerable and marginalized women, and that there is no discrimination in the provision of such services. Secondly, it ignores the underlying factors that contribute to women and girls dying in pregnancy and childbirth or suffering the consequences of unwanted pregnancy.

NICARAGUA – DENIED THE RIGHT TO LIFE AND HEALTH

Since July 2008 abortion in all circumstances has been criminalized in Nicaragua. The revised Penal Code criminalizes all forms of abortion and imposes prison terms on women and girls who seek or obtain an abortion, regardless of the circumstances. The Penal Code also imposes lengthy prison sentences on health professionals who cause any harm to a foetus, regardless of intent, even if it occurs in the course of providing life-saving treatment to a woman or girl. The Penal Code is in conflict with the Nicaraguan Obstetric Rules and Protocols issued by the Ministry of Health which mandate therapeutic abortions as clinical responses to specific cases, leaving health professionals in an impossible position.

The law leaves an entire nation of women and girls whose pregnancies develop complications at risk of dangerous or fatal consequences. Some groups of women and girls are particularly affected: specifically, pregnant women and girls who need treatment for life-threatening illnesses, who develop complications, who need medical treatment after a miscarriage or abortion, or who are survivors of rape or incest. In Nicaragua, the overwhelming majority of girls who are pregnant as a result of rape or incest are aged between 10 and 14

and their health and life are put at risk by unsafe abortions or by having to give birth at an early age. Rape victims who do seek an unsafe illegal abortion face prison terms if the abortion is discovered, as do those who assisted them.

Four UN treaty bodies (Committee on Economic, Social and Cultural Rights, the Committee on the Elimination of Discrimination against Women, the Committee against Torture, and the Human Rights Committee) have found the law to be in breach of Nicaragua's treaty obligations.¹⁰⁵

Nicaragua has committed itself to reducing maternal mortality by 75 per cent by 2015. The government has introduced a number of programmes to prevent maternal mortality and increased health sector funding. However, the criminalization of abortion runs contrary to these efforts. Yet, despite the risks that the law poses to the life and health of women and girls, the entry for Nicaragua in the UN MDG Monitor (which tracks countries' progress on the MDGs) states that Nicaragua has "achieved" Goal 3 (according to national government reporting), while its progress on Goal 5 is "off track".¹⁰⁶

BARRIERS TO MATERNAL HEALTH

Governments have a responsibility to ensure equal access to quality health care services for all, without discrimination. However, the disparities in the health care pregnant women receive reflect the continuing violations of women's right to non-discrimination.

In Peru, for example, women from Indigenous, rural and poor communities face particular barriers in obtaining maternal health care services as a result of entrenched discrimination. Some do not have identity documents and so cannot get the free health provision to which people from marginalized and poorer communities are entitled. Other barriers include the lack of clear and accessible information on the maternal and child health services; the fact that health facilities are located far from their homes; prohibitive transport costs; discriminatory attitudes within health facilities; the failure to provide for culturally appropriate birthing methods; and communication difficulties – many Indigenous women do not speak Spanish and few health professionals speak Quechua.¹⁰⁷

Since 2006, the Peruvian government has taken some steps towards addressing these barriers. For example, they have promoted culturally adapted birthing methods; increased the number of maternal waiting houses and health insurance cover for rural populations; and introduced a system of targeted budget allocation centred on results. However, women living in remote areas and Indigenous communities continue to face difficulties in getting access to the care they need. Among the reasons hindering progress are inadequate implementation and monitoring of policies and initiatives and a lack of clarity around responsibility and accountability.¹⁰⁸ Unless Peru takes all the necessary measures to address the specific barriers faced by Indigenous women in accessing health care, any progress it makes on Goal 5 will fail to benefit the most disadvantaged groups and so mask ongoing and systemic discrimination.

In Sierra Leone and Burkina Faso, governments have acknowledged the need to improve maternal health and are taking positive steps to tackle it. However, they have not sufficiently addressed key human rights issues that contribute to high rates of preventable maternal deaths – such as gender discrimination; early marriage and pregnancy; the denial of women's sexual and reproductive rights; and women's low socio-economic status (in the household and in society at large) and lack of decision-making power.

In Sierra Leone, women face many barriers in obtaining necessary health care services, including long distances to health care facilities and ineffective referral services.¹⁰⁹ In Burkina Faso, financial barriers to health care contribute to high levels of preventable maternal deaths and injury.¹¹⁰ The government of Burkina Faso responded favourably to the concerns raised by Amnesty International in relation to the high levels of maternal deaths in the country, and has said that it is in favour of removing the financial barriers to health care faced by pregnant women. Sierra Leone has recently introduced free health care for pregnant women and children under five. Both these developments are to be welcomed, and if adequately implemented could have a very positive impact on women's access to essential care. However, the underlying violations of women's sexual and reproductive rights must also be systematically addressed for long-term, sustained improvements in maternal health.

Barriers to care reflect disparities among different population groups and affect maternal health in developed, as well as developing countries. In the USA, more than two women die every day from complications of pregnancy and childbirth. Approximately half of these deaths could be prevented if maternal health care were available, accessible and of good quality for all women without discrimination in the USA. For those who can afford it, the USA offers some of the best health care in the world. For many, however, that care is beyond reach. Despite the huge sums of money spent on maternal care, women, particularly those on low incomes, continue to face a range of barriers in obtaining the services they need. Doctors may be unwilling or unable to provide maternal health care to women on low incomes because of the high costs and low fees involved, or because of cumbersome reimbursement procedures for government-funded health insurance. An individual's ability to access health care depends on whether they have insurance and, if they do, whether it is private or public. Disparities in access to health cover and outcomes are considerable. In 2008, a staggering 46 million people – one in every six people living in the USA – had no health insurance at all.¹¹¹ This number has since risen, as a result of the economic recession. Although members of ethnic and racial minorities make up only about 34 per cent of the population,¹¹² they constitute approximately half of the uninsured,¹¹³ and as a result are more likely to go into pregnancy with untreated or unmanaged medical problems that pose added health risks during pregnancy.

PARTICIPATION

Participation is an integral feature of the right to health. The right to participate extends to the active and informed participation of individuals and communities in decision-making that affects them, including decisions in relation to their health. By doing so, implementation of the right can help to ensure that a health system is responsive to the needs of people it is meant to serve. This was seen in Nepal where a controlled trial of a community-based participatory intervention in rural mountainous area showed that women who had participated in the trial were more likely than those who had not to have had antenatal care, to have given birth in a health facility, with a trained attendant or a government health worker, and to have used a clean home delivery kit or a boiled blade to cut the umbilical cord.¹¹⁴

“All individuals and communities are entitled to active and informed participation on issues relating to their health. In the context of health systems, this includes participation in identifying overall strategy, policymaking, implementation and accountability. The importance of community participation is one of the principal themes recurring throughout the Declaration of Alma-Ata. Crucially, States have a human rights responsibility to establish institutional arrangements for the active and informed participation of all relevant stakeholders, including disadvantaged communities.”

Paul Hunt, Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, 2008¹¹⁵

CONSISTENCY WITH HUMAN RIGHTS STANDARDS

In order to ensure they are fulfilling their obligations under international human rights law in their efforts to meet MDG Goal 5, governments must:

- Respect the right to health by refraining from actions that interfere with women’s rights. For example, states should not restrict women’s access to health care services on the ground that women do not have the consent of husbands, partners, parents or health authorities.¹¹⁶
- Protect women’s right to health by preventing third parties from interfering with the enjoyment of that right. For example, states should ensure that harmful social or traditional practices do not interfere with access to sexual and reproductive health care.¹¹⁷
- Adopt appropriate measures, whether legislative or otherwise, to achieve full realization of the right to health. This must include removing barriers to access, including financial barriers, to ensure that all women can obtain necessary health care services – such as emergency obstetric care – when they need it.¹¹⁸
- Identify and address gender discrimination in law, policy and practice, including in relation to women’s sexual and reproductive rights, and tackle human rights issues such as early and forced marriage, female genital mutilation, unsafe abortion and violence against women, including sexual violence.
- Provide adequate accountability mechanisms (judicial, quasi-judicial, administrative and political) to ensure that there is effective monitoring, oversight and access to remedies for those whose sexual and reproductive rights are violated. Examples of such mechanisms include regular maternal death and “near-miss” audits, including community-based case reviews;¹¹⁹ complaints mechanisms for those who are denied access to health care; and oversight by a national human rights institution to ensure consistency with human rights standards.



Image above: A group of women take part in birth control lessons for slum dwellers and street sleepers, Calcutta, India, 2004.

Image right: Metal containers in which Roma families live in Primaverii Street in Miercurea Ciuc/Csikszereda, Hargita county, Romania, January 2009.





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Image above: People from the Yakye Axa community play football next to the Pozo Colorado-Concepción highway in Paraguay, November 2008. The Yakye Axa and Sawhoyamaya Indigenous communities have been living beside the highway for nearly 20 years without access to basic services. Despite two rulings in their favour by the Inter-American Court of Human Rights, they are still waiting for their land claims to be resolved.

Image left: Women attending a course on women's rights organized by the League of Women Lawyers, Tajikistan, July 2009. Girls in Tajikistan face a range of barriers in realizing their right to education.

Image right: Local residents searching for survivors try to clear away rubble with their bare hands and basic tools, following a rockslide from the towering Muqattam cliffs onto Al-Duwayqah in the Manshiet Nasser informal settlement on the outskirts of Cairo, Egypt, 6 September 2008. Huge boulders crushed homes and killed more than 100 people.

Image below: Market stalls beside the railway line running through Kibera, Nairobi, Kenya, February 2009. Forced evictions in Kenya often result in the destruction of businesses and livelihoods, driving people deeper into poverty. Under the government's Nairobi River Clean-Up Programme, a number of markets used by Kibera residents are at risk of demolition.





Launch of Amnesty International's campaign to reduce maternal mortality in Sierra Leone, September 2009. Sierra Leone has one of the highest maternal mortality rates in the world.





Image above: Women waiting outside a health centre in San Juan de Ccharhuacc in Huancavelica province in rural Peru, September 2008. Maternal mortality rates in Peru are disproportionately high among the country's poor and Indigenous rural communities.



Image left: Toilet in the Palestinian village of Susya in the West Bank in the Occupied Palestinian Territories under threat of demolition by the Israeli army, May 2008. Lack of access to adequate and safe clean water has been a longstanding problem for Palestinians in the Occupied Palestinian Territories, principally as a result of discriminatory Israeli policies and practices. Some 180,000 to 200,000 Palestinians in rural communities in the West Bank have no access to running water.

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Image right: Women crossing a dry seasonal waterway that runs through the Yemeni capital Sana'a, March 2010. Yemen is facing a water crisis as a result of rapid population growth and falling rainfall. The government predicts that the capital's aquifers will run dry within 10 years. Outside the cities, rural women are responsible for collecting water for their families from the nearest well, a laborious job that can involve long walks and which they often do in the cool of night.

Image below: A group of Indigenous women and their supporters who walked more than 3,500km from Vancouver's Downtown Eastside to bring their demand for justice to Ottawa, 2008. Indigenous women in Canada face much higher rates of violence than other women. Widespread and entrenched racism and marginalization, along with deep inequalities in living conditions, put them at increased risk of violence.





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Image above: Ramatoulaye with her baby daughter, beside the Nakambe River, close to Wonko, Burkina Faso, June 2009.

Ramatoulaye had her first child at the age of 12. She gave birth at home assisted by a traditional birth attendant. For her later pregnancies she went to the health centre in Ramsa, 12km from her village, for prenatal visits and to give birth. She said that during her fourth pregnancy, in March 2009, "I started to have my first pains. My husband's brother drove me with his motorcycle, my husband followed us on another motorcycle. Once arrived on the bank of the river, we looked for the boatman but he was not there because he also has another job. So I gave birth alone on the banks of the river. It was very difficult."

HUMAN RIGHTS AND SLUMS

GOAL 7: ENSURE ENVIRONMENTAL SUSTAINABILITY

Target 7.D: By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwellers.

Indicators:

7.10 Proportion of urban population living in slums

A recent report by the UN Human Settlements Programme (UN-HABITAT) claims that “227 million people in the world have moved out of slum conditions since 2000, meaning governments have collectively surpassed the Millennium Development target by 2.2 times”.¹²⁰ This is the good news.

The bad news, however, is that the number of people living in slums and informal settlements has actually increased over this period. Data collected by UN-HABITAT indicated that close to one billion people were living in slums in developed and developing countries by 2005.¹²¹ Latest data released by UN-HABITAT indicates that in the developing world alone, the number of people living in slums increased from 767 million in the year 2000 to an estimated 828 million people in 2010.¹²² One in three urban residents therefore live in inadequate housing conditions that do not satisfy the requirements for adequate housing set out in Article 11(1) of the ICESCR.¹²³ These include 1) legal security of tenure; 2) availability of services, materials, facilities and infrastructure; 3) location; 4) habitability; 5) affordability; 6) accessibility; and 7) cultural adequacy.

UN-HABITAT’s global monitoring shows the extent to which the housing and living conditions in slums and informal settlements around the world grossly fail to meet these requirements. Examples of these failures range from the risks associated with the location of many slums and informal settlements in areas that are prone to floods, landslides and other natural disasters, to severely overcrowded, poorly constructed and inadequate housing.¹²⁴

GLOBAL TARGETS

States are required under international law to take immediate and progressive steps to realize the rights to adequate housing and other human rights of people living in slums and informal settlements. The severity of the problems they experience should command an urgent response.

It is estimated that there will be 1.4 billion people living in slums by 2020. In contrast to other MDG targets, which aim at a half or three-quarters reduction, the international community has committed to improving the lives of less than 10 per cent of people who live in slums (which in 2001 stood at over 900 million)¹²⁵. The target is also one of the most vaguely worded and asks for “significant improvement” without identifying what constitutes an improvement. The indicator for progress is the proportion of the urban population living in slums, which makes it possible for states to demonstrate progress even if the total number of people living in slums has increased over the monitoring period. States have also been given an additional five years, until 2020, to meet this weak target.

The target is grossly inadequate when considered in the light of the obligations of states under international human rights law to prioritize the realization of minimum essential levels of shelter and housing for all; to take deliberate, concrete and targeted steps to achieving the right to adequate housing; and to prioritize the most disadvantaged and vulnerable groups when allocating resources.

INSECURITY OF TENURE AND EXCLUSION

The MDG framework also ignores the crucial and immediate obligation on states to provide a minimum degree of legal security of tenure.¹²⁶ This is an essential precondition for protecting people living in slums from the underlying human rights violations that continue to drive and deepen poverty. It also provides the security people need to improve their own housing and living conditions and benefit from public services and schemes.

The vast majority of people living in settlements or slums considered “illegal” or “irregular” by governments have limited or no security of tenure and are extremely vulnerable to forced evictions. This can be the case even when the inhabitants own or are renting their homes. It is estimated that between 30 and 50 per cent of urban residents in the developing world do not have any kind of legal document to show they have security of tenure.¹²⁷

The effect of forced evictions can be catastrophic, particularly for people who are already living in poverty. They result not only in people losing their homes, neighbourhoods and personal possessions, but also fractures social networks and communities. For example, Operation Murambatsvina in Zimbabwe, a programme of mass forced evictions and demolitions of homes and informal businesses, destroyed 32,538 small and micro-businesses across the country, devastating the livelihoods of 97,614 people (mostly women) who were targeted indiscriminately.¹²⁸

Lack of security of tenure also increases the risk of other human rights violations and may lead to people living in slums or informal settlements being excluded from essential public services and from city planning and budgeting processes. In many countries, it limits access to public water supplies and sanitation systems and is therefore also closely linked to the targets on safe drinking water and sanitation. The MDG monitoring framework, however, pays insufficient attention to these links.

THE BOEUNG KAK LAKE

“We have seen the development plan and of course we get worried because it is clear that we are affected: According to the plan we have disappeared”.

Representative from Phnom Penh's Boeung Kak area, February 2008.¹²⁹

Some 15,000 Phnom Penh residents living in basic housing on the shores of the Boeung Kak Lake face displacement. Work on turning the lake into a landfill began on 26 August 2008; the residents were not notified beforehand. Since then, and before any adjudication of their land ownership claims, around 1,000 families have been forcibly evicted by the authorities. The project may lead to the biggest forced eviction in post-war Cambodia. The affected communities, many of whom are living in poverty, fear that the ongoing development may drive them out of Phnom Penh to an area where thousands of others have been resettled following eviction. The area, which is effectively a new slum outside the city perimeter, lacks sanitation, electricity and other basic services; job opportunities there are desperately scarce.

This is one example among many and stands in sharp contrast to the poverty reduction and development policies adopted by the Cambodian government as part of its efforts to meet the MDGs.¹³⁰

People living in slums or informal settlements may also be excluded from protective legislation which applies to other residents. In Kenya, for example, landlords failed to provide sanitation and other services to people who were renting homes in informal settlements, contravening the Kenyan Public Health Act. However, the local authorities have chosen not to use the law against landlords or developers who build and rent homes in slums and settlements.¹³¹

Although slums are located in urban areas, which tend to have better health, education and other services than rural areas, these services are not equally distributed among the urban population. When UN-HABITAT began to disaggregate data, it found that people living in slum areas were not benefiting from the “urban advantage”.¹³² They lagged far behind urban non-slum areas in access to health care, education and employment and had rates of malnutrition and child mortality that were much closer to, or as high as, those in rural areas.

In Rome, Italy it is virtually impossible for Roma who live in camps to gain access to social housing, provided by local authorities.¹³³ The criteria for social housing indirectly discriminate against Roma, since one of the criteria under the points system is that the person should have been evicted from private accommodation. Eviction from camps, even those authorized by the local authorities, does not meet this criterion. This practice is contrary to Italy's duty to prioritize the most disadvantaged groups in social housing programmes.

Despite the central importance of security of tenure in increasing access to a range of services and reducing the risk of other human rights violations, the indicator on tenure status (proportion of households with secure tenure) was dropped from the MDG monitoring framework.¹³⁴

The fact that many slums or informal settlements are irregular also affects residents' access to services such as policing. As a result people may find themselves denied protection by the

police and caught between the violence of criminal gangs and the police.¹³⁵ In *favelas* or inner-city neighbourhoods in Brazil and Jamaica the state is largely absent. The failure by the authorities to offer protection to these communities has allowed criminal gangs and drug factions to take control and dominate almost every aspect of life. For example, in some neighbourhoods gangs impose curfews and control transport systems and access to education, jobs and health care services.¹³⁶

People living in slums are also disproportionately victims of violent crime. A survey of women living in slums in six cities around the world carried out by the Centre on Housing Rights and Evictions identified violence against women as “rampant” in slums and the “strongest cross-cutting theme” of their study.¹³⁷ Women experienced violence both within the home and outside, for example as they came back from work or on their way to use public toilets or communal facilities. Women have also described the difficulties of reporting domestic or other forms of violence to the police because of negative perceptions of people living in slums or just because of the absence of police stations in slum areas.¹³⁸

PARTICIPATION

The right of people to participate in developing and implementing slum upgrading programmes has frequently been disregarded in MDG initiatives. In a slum upgrading programme in Nairobi, for example, residents were not given adequate information or genuinely consulted. This resulted in significant concerns for the community on issues such as whether the housing that they were being offered was affordable and would meet their needs in terms of location and livelihoods. In 2006 the government said that it would designate slum upgrading areas as “tenure secure zones”. It also pledged to “determine appropriate secure tenure systems to be introduced in consultations with residents, structure owners and other stakeholders... and assure rights of occupancy to residents by first and foremost, eliminating unlawful evictions and providing certainty of residence”.¹³⁹ Four years later, these commitments have yet to be put into effect, leaving people uncertain and concerned about possible forced evictions during the project’s implementation.¹⁴⁰

CONSISTENCY WITH HUMAN RIGHTS STANDARDS

In order to ensure that they fulfil international obligations in their efforts to meet MDG Goal 7.D on slums, governments must:

- Respect the right to adequate housing by stopping and preventing forced evictions of people living in slums. Laws and policies to guarantee secure tenure are essential both to stop people’s situation becoming worse and also to ensure a minimum level of stability that allows both government and communities to contribute more effectively to improving housing and living conditions. Such laws and policies would also ensure that government efforts to meet the MDGs do not themselves lead to human rights violations by allowing slum clearance to give rise to forced evictions.
- Protect the right to adequate housing, including by ensuring protection against forced evictions and harassment by landlords and other private actors. This should include extending protections in rental and housing legislation to people living in slums to enable them to challenge disproportionate rents and discrimination by private actors.

- Fulfil the right to adequate housing, including by developing national housing strategies, slum upgrading, social housing and other programmes that are designed and implemented in a participatory manner and ensure that policies and programmes prioritize the most disadvantaged and vulnerable groups.
- Ensure non-discrimination in laws, policies and programmes. This would involve, for example, ensuring that women are not excluded from slum upgrading or other housing programmes because of their marital status or other factors, or discriminatory inheritance or property laws.
- Ensure that people living in slums have access to accountability mechanisms that have oversight over laws, policies and programmes. Empowering people living in slums in this way will help address their exclusion and marginalization and increase their ability to ensure that rights are fulfilled as part of meeting the MDG commitments.

CHAPTER 4/ HUMAN RIGHTS – A FRAMEWORK FOR PROGRESS

International human rights standards provide an important framework for developing policies and programmes to achieve progress on the MDGs. They ensure a focus on states' accountability, on the needs of the most disadvantaged and vulnerable people, on combating discrimination, and on effective participation. The human rights framework reminds policy makers that the processes by which the goals are implemented are as important as the results.

However, the MDGs contain no requirement that states integrate human rights standards into MDG policies and programmes. For example, Goal 8 on a global partnership for development requires developed countries to support the achievement of the MDGs, including through their global aid, trade and debt policies. However, it fails to specify that such policies should be consistent with international human rights standards. Some states have added human rights to their national MDG plans; for example, Mongolia added a Goal 9 on human rights and democracy. Such innovations, however, are rare. Most MDG reports fail to refer to human rights in any way, or address them only in a rhetorical fashion.¹⁴¹

States and international organizations must ensure that mechanisms are in place that can assess their MDG initiatives and ensure they are consistent with international human rights standards. This will help reveal where wider changes in law, policy or practice are required to support MDG efforts, for example identifying barriers to the achievement of the MDGs such as discriminatory laws, inadequate systems for protecting women from violence, or inadequate and ineffective policing in slums. It will also help ensure that efforts to meet the MDGs do not lead to retrogressive steps or human rights violations that undermine progress in other areas.

RECOMMENDATIONS TO GOVERNMENTS

REDRESS THE ACCOUNTABILITY DEFICIT

National and international accountability mechanisms are needed to ensure that states respect, protect and fulfil human rights in their MDG efforts and that there are effective remedies for any human rights violations.

This requires that governments:

- Ensure that people are able to use the law to enforce their rights and access effective remedies for all violations of human rights, in particular addressing any gaps in the law relating to the enforceability of economic, social and cultural rights.

- Remove any barriers that people living in poverty face in accessing justice and effective remedies.
- Mandate national human rights monitoring bodies as well as quasi-judicial regulatory bodies to monitor violations of human rights and to act on complaints, and ensure they have the capacity to do so effectively.
- Increase monitoring and oversight by parliamentary bodies of efforts to meet the MDGs, in particular to ensure their consistency with human rights obligations.

In order to increase review by international human rights mechanisms of their MDG efforts, states should:

- Systematically integrate reporting on national and international implementation of the MDGs in their reports to the Universal Periodic Review (UPR) of the Human Rights Council and to international human rights treaty monitoring bodies.
- In the context of the UPR, make recommendations to other states to promote consistency between human rights and the MDGs.
- Commit to increased scrutiny of implementation of human rights obligations by ratifying Optional Protocols of human rights treaties that provide access to complaints mechanisms, in particular those relating to the International Covenant on Economic, Social and Cultural Rights and the Convention on the Elimination of All Forms of Discrimination against Women.

ENSURE CONSISTENCY WITH HUMAN RIGHTS STANDARDS

Governments should review all existing and planned laws, policies and programmes aimed at meeting the MDGs to ensure consistency with international human rights standards. The review should be undertaken in a participatory manner.

This requires that governments:

- Designate or create an institution with sufficient expertise to review MDG plans and their implementation and related legislation for consistency with human rights standards.
- Where gaps are identified through the review process, adopt or modify laws, policies and practices to ensure greater protection for human rights.
- Ensure that all government bodies, the legislature and the judiciary are aware of and have an institutional commitment to comply with international human rights standards.
- Ensure the review also focuses on the implementation of recommendations by international human rights monitoring bodies.

INCLUDE THE EXCLUDED

States should ensure that their MDG efforts are inclusive, that they are aimed at ending discrimination and guaranteeing gender equality, and that they prioritize the most disadvantaged groups.

This requires that governments:

- Identify which groups are facing discrimination or particular barriers in realizing their rights and ensure that MDG efforts are designed and implemented in a way that focuses on removing these barriers and on improving the lives of the most disadvantaged.
- Adopt effective measures to end all forms of discrimination and prioritize the most marginalized and disadvantaged groups in reforms to law, policy and practice.
- Include separate targets within national targets for the realization of economic, social and cultural rights for particular groups who face discrimination and disadvantage. Monitor progress towards these objectives and develop appropriate qualitative and quantitative indicators.
- Collect data on the realization of economic, social and cultural rights that is disaggregated on the basis of gender and for other groups identified as facing discrimination. This data and analysis should inform the design and evaluation of all programmes relating to the MDGs.
- Review the allocation of resources for the MDGs from national funding and international assistance in order to ensure that they are consistent with prioritizing disadvantaged groups.

SET TARGETS FOR PROGRESS

States should set and implement national targets to realize all economic, social and cultural rights – in particular minimum essential levels – in the shortest possible time, supplementing the MDG targets wherever possible. Governments should take into account existing levels of progress, the resources available to them nationally and through international co-operation and assistance, and develop time-bound and measurable targets.

This requires that governments:

- Prioritize meeting the minimum essential levels of economic, social and cultural rights for all as a stepping stone towards the full realization of these rights.
- Ensure effective implementation by developing a clear plan and timeline for meeting targets, publicizing the targets and the institutions responsible, and allocating adequate financial and human resources.

ENSURE PARTICIPATION

Those living in poverty must be involved in MDG planning, implementation and monitoring at all levels; particular attention should be given to equal participation by women.

This requires that governments:

- Ensure that information on MDG efforts, both existing and planned, is available in a format that is accessible to all.
- Provide opportunities for people to participate in priority setting, planning, implementation and monitoring.
- Actively consult those who are most affected by particular programmes and policies.
- Respect the rights to freedom of expression, information, assembly and association so that people are able to participate in efforts to meet the MDGs and to hold governments accountable.
- Protect the rights of human rights defenders and in particular ensure that they are able to carry out their work without fear of arbitrary detention, undue restrictions on their freedom of expression, association, and assembly, or other reprisals.

RECOMMENDATIONS TO BILATERAL AND MULTILATERAL DEVELOPMENT AGENCIES AND INTERNATIONAL FINANCIAL INSTITUTIONS

Development assistance, both technical and financial, has an important role to play in tackling poverty and achieving the MDGs. The role of international co-operation and assistance in achieving universal respect for human rights is provided for in several treaties, including the UN Charter.¹⁴² Treaty monitoring bodies have also emphasized the role of international co-operation and assistance in the realization of economic, social and cultural rights. In addition, there is increased recognition that the obligations of states in relation to development assistance and co-operation extend to the actions that states take as part of inter-governmental organizations, including international financial institutions such as the World Bank and regional development banks.¹⁴³

A number of UN bodies have adopted a human rights-based approach to their development co-operation. The UN Statement of Common Understanding on a human rights-based approach to development co-operation and programming¹⁴⁴ is intended to be used by UN agencies so that:

1. All programmes of development co-operation, policies and technical assistance should further the realization of human rights as laid down in the Universal Declaration of Human Rights and other international human rights instruments.
2. Human rights standards contained in, and principles derived from, the Universal Declaration of Human Rights and other international human rights instruments guide all development co-operation and programming in all sectors and in all phases of the programming process.

3. Development co-operation contributes to the development of the capacities of “duty-bearers” to meet their obligations and of “rights holders” to claim their rights

However, this approach is not consistently applied and is not fully integrated in all policy and practice.

“Developing countries and donors will ensure that their respective development policies and programmes are designed and implemented in ways consistent with their agreed international commitments on gender equality, human rights, disability and environmental sustainability.”

Accra Agenda for Action, 2008¹⁴⁵

The Development Assistance Committee of the Organisation for Economic Co-operation and Development (OECD-DAC) has promoted the integration of human rights in development assistance policy and practice. The DAC’s Action-Oriented Policy Paper on Human Rights and Development¹⁴⁶ invites donor agencies to use 10 principles to inform the design of human rights policies and programming. Such principles include the need to ensure that donor policies and programmes “do no harm”¹⁴⁷ and that they promote non-discrimination. They also include the need to ensure that the links between human rights obligations and development priorities are a regular feature of dialogue between donors and partner governments, so that development assistance supports governments to fulfil their obligations under international human rights law.¹⁴⁸

MUTUAL OBLIGATIONS IN DEVELOPMENT ASSISTANCE

Where states require external resources for their efforts to meet the MDGs, they must ensure that their use of development assistance resources is also consistent with their human rights obligations. This requires states to seek international assistance where necessary to ensure at least minimum essential levels of economic, social and cultural rights for all, and to ensure that they use development assistance resources in a way that promotes non-discrimination and advances equality – including gender equality – and gives priority to the most marginalized. It requires states to ensure that their use of development assistance from the donor community is underpinned by human rights principles and standards – including their obligations in relation to economic, social and cultural rights. It also requires states to ensure transparency and accountability in their use of development assistance and that there are mechanisms for the effective participation of local communities, civil society, parliaments and other institutions in national processes regarding the use and monitoring of assistance from the donor community.

Amnesty International calls upon all bilateral and multilateral development agencies and international financial institutions to ensure that their international co-operation and assistance in support of the MDGs is consistent with human rights standards by:

- Providing development assistance – technical and financial – where such assistance is necessary to ensure the realization of at least minimum essential levels of economic, social and cultural rights for all.
- Promoting mutual accountability in development assistance by working with partner governments to ensure that such assistance is guided by human rights principles and standards. As such, donors and partner countries should use human rights standards to

inform and guide policy dialogue and choices, poverty reduction strategies, and the identification of priorities in aid policy and practice.

- Adopting adequate safeguards, monitoring and accountability mechanisms to ensure that development assistance complies with human rights standards. This requires a number of measures which include: aligning development agencies' due diligence and safeguard policies with human rights standards and reporting on the actual and expected human rights impact of development assistance to international human rights bodies, including the Universal Periodic Review of the Human Rights Council.¹⁴⁹
- Explicitly recognizing and integrating human rights standards in their development assistance policies and practice to ensure that such assistance does not result in, or contribute to, a negative human rights impact (for example, by supporting activities that lead to forced evictions or that violate the rights of Indigenous Peoples) and to ensure that it is consistent with human rights standards.
- Ensuring an adequate focus on the realization of minimum essential levels of economic, social and cultural rights for all, prioritizing those who are most marginalized and excluded and monitoring the extent to which development assistance benefits these groups.
- Identifying and addressing discrimination – including gender discrimination – in all development assistance projects and programmes. Donors should work with partner countries to identify and address gender discrimination and inequality in their support across all the MDGs.
- Supporting the effective participation of the population (including the most vulnerable and marginalized), local communities, civil society organizations, parliaments and national human rights bodies in national development plans and processes regarding the use of development assistance. This should include participation in setting local and national development priorities and in monitoring the use of development assistance at the local and national levels, and holding states to account for their use of aid resources.
- Ensuring transparency and access to comprehensive information on the purpose, provenance, amount and terms of development assistance and how it is used, monitored and accounted for.

POST-2015 FRAMEWORK

The priority now is to focus on the implementation of the MDGs by 2015. However, it is also important to start considering the essential components of a global framework from 2015 onwards. Such a framework should:

- Be based on, and require consistency with, states' obligations under human rights law.
- Address discrimination on all prohibited grounds, including gender, and inequality throughout.
- Establish timelines for fulfilling minimum essential levels of economic, social and cultural rights globally and for each country. States should commit to a timeline that reflects

their resources and capacity and available international assistance. States in a position to provide assistance should make clear and time-bound pledges to ensure that there is adequate international co-operation assistance available for this purpose.

- Individual states should make formal commitments to national targets for the realization of economic, social and cultural rights that surpass the global goals on the basis of their resources and capacity.
- National and international accountability mechanisms should be strengthened, where necessary, and given an explicit mandate to monitor the realization of these goals.

States should assess what essential elements are required for the establishment of a new global poverty reduction framework. This should include:

- Considering how to carry out a process for designing a poverty reduction framework that involves the participation of people living in poverty.
- Revising international systems for data collection on levels of access to water, sanitation, health, education, food and social protection to ensure that they fully assess quality, availability, physical accessibility and affordability. Such data must be disaggregated according to the most common grounds of discrimination, including gender and ethnicity. Such revisions should be taken as early as possible to ensure that by 2015 there is sufficient data to establish ambitious but realistic international targets that reflect human rights concerns.

TABLE: MDG GOALS, TARGETS AND INTERNATIONAL LAW

Based on information in the UN Office of the High Commission for Human Rights and the UN Millennium Campaign report, *The Millennium Development Goals and Human Rights*, 2008.¹⁵⁰

GOAL 1 ERADICATE EXTREME POVERTY AND HUNGER		
Target 1.A: Halve, between 1990 and 2015, the proportion of people whose income is less than \$1 a day	Right to adequate standard of living Right to social security	ICESCR: Articles 6,9 and 11
Target 1.B: Achieve full and productive employment and decent work for all, including women and young people	Right to work	ICESCR: Article 6 Convention on the Rights of Persons with Disabilities (CRPD): Article 27
Target 1.C: Halve, between 1990 and 2015, the proportion of people who suffer from hunger	Right to food	ICESCR: Article 11
GOAL 2 ACHIEVE UNIVERSAL PRIMARY EDUCATION		
Target 2.A: Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	Right to education	ICESCR: Articles 13 and 14 Convention on the Rights of the Child (CRC): Article 28(1)(a) CEDAW: Article 10 International Convention on the Elimination of All Forms of Racial Discrimination (ICERD): Article 5(e) CRPD : Articles 7 and 24

GOAL 3 PROMOTE GENDER EQUALITY AND EMPOWER WOMEN		
Target 3.A: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	Women's rights to equality	ICESCR: Articles 13 and 14 CRC: Article 28(1)(a) CEDAW: Article 10 ICERD: Article 5(e) CRPD: Articles 6 and 24
GOAL 4 REDUCE CHILD MORTALITY		
Target 4.A: Reduce by two thirds, between 1990 and 2015, the under-five mortality rate	Right to life Right to the enjoyment of the highest attainable standard of health	ICCPR: Article 6 ICESCR: Article 12(2)(a) CRC: Articles 6, 24(2)(a)
GOAL 5 IMPROVE MATERNAL HEALTH		
Target 5.A: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	Right to life Right to the enjoyment of the highest attainable standard of health	ICCPR: Article 6 ICESCR: Article 12 CRC: Article 24
Target 5.B: Achieve, by 2015, universal access to reproductive health		CEDAW: Article 12

GOAL 6 COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES		
Target 6.A: Have halted by 2015 and begun to reverse the spread of HIV/AIDS	Right to the enjoyment of the highest attainable standard of health	ICESCR: Article 12
Target 6.B: Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it		CRC: Article 24
Target 6.C: Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases		CEDAW: Article 12
GOAL 7 ENSURE ENVIRONMENTAL SUSTAINABILITY		
Target 7.A: Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	Right to a healthy environment, a component of the right to health	ICESCR: Article 12
Target 7.B: Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss		CRC: Article 24
Target 7.C: Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation	Right to water and sanitation	ICESCR: Articles 12 and 11(1)
Target 7.D: Have achieved by 2020 a significant improvement in the lives of at least 100 million slum-dwellers		CRC: Article 24

GOAL 8 DEVELOP A GLOBAL PARTNERSHIP FOR DEVELOPMENT		
Target 8.A: Develop further an open, rule-based, predictable, non-discriminatory trading and financial system	International obligations for ESC rights	UN Charter: Articles 1(3), 55 and 56 ICESCR: Articles 2(1), 11(1), 15(4), 22 and 23 CRC: Articles 4, 24(4) and 28(3) CRPD: Article 32
Target 8.B: Address the special needs of the least developed countries		
Target 8.C: Address the special needs of landlocked developing countries and small island developing States		
Target 8.D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term		
Target 8.E: In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries	Right to the enjoyment of the highest attainable standard of health	ICESCR: Articles 2(1) and 12 CRC: Articles 4 and 24
Target 8.F: In cooperation with the private sector, make available the benefits of new technologies, especially information and communications	ESC rights	ICESCR CRPD: Articles 9 and 21

ENDNOTES

¹ United Nations Millennium Declaration, Resolution Adopted by the General Assembly, A/RES/55/2, 8 September 2000, available at <http://www.un.org/millennium/declaration/ares552e.pdf>, last accessed 24 May 2010.

² For more information see <http://www.un.org/millenniumgoals/>, last accessed 24 May 2010.

³ P. Alston, "Ships Passing in the Night: The Current State of the Human Rights and Development Debate Seen Through the Lens of the Millennium Development Goals", *Human Rights Quarterly*, Vol. 27, No. 3, 2005, p. 756 (hereinafter P. Alston, *Ships Passing in the Night*). Office of the High Commissioner for Human Rights, *Claiming the MDGs: A Human Rights Approach*, Office of the High Commissioner for Human Rights, 2008, p.1 (hereinafter OHCHR, *Claiming the MDGs*).

⁴ *Keeping the promise: a forward-looking review to promote an agreed action agenda to achieve the Millennium Development Goals by 2015*, Report of the UN Secretary-General, UN General Assembly, 12 February 2010, UN Doc. A/64/665 (hereinafter *Keeping the promise*, Report of the UN Secretary-General).

⁵ *Keeping the promise*, Report of the UN Secretary-General, pp. 2, 9 – 10.

⁶ United Nations Millennium Declaration, A/RES/55/2, 8 September 2000, para. 25.

⁷ Committee on Economic, Social and Cultural Rights, General Comment No. 3: The nature of states parties' obligations, 14 December 1990, available at <http://www2.ohchr.org/english/bodies/cescr/comments.htm><http://www2.ohchr.org/english/bodies/cescr/comments.htm>, last accessed 24 May 2010, para. 9 (hereinafter CESCR, General Comment No. 3). The Committee noted "It thus imposes an obligation to move as expeditiously and effectively as possible towards that goal. Moreover, any deliberately retrogressive measures in that regard would require the most careful consideration and would need to be fully justified by reference to the totality of the rights provided for in the Covenant and in the context of the full use of the maximum available resources".

⁸ Article 2(2), International Covenant on Economic, Social and Cultural Rights (hereinafter ICESCR), Article 2(1), International Covenant on Civil and Political Rights (hereinafter ICCPR), Article 2(1), International Convention on the Elimination of All Forms of Racial Discrimination (hereinafter ICERD), Article 2, Convention on the Elimination of All Forms of Discrimination Against Women (hereinafter CEDAW), Article 2 (1), Convention on the Rights of the Child (hereinafter CRC), Article 1(1), International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families (hereinafter ICRMW), and Article 4(1), Convention on the Rights of Persons with Disabilities (hereinafter CRPD).

⁹ In addition to the provisions on non-discrimination highlighted above, see also Article 26, ICCPR.

¹⁰ See CESCR, General Comment No. 3, para. 10, where the Committee stated "On the basis of the extensive experience gained by the Committee, as well as by the body that preceded it, over a period of more than a decade of examining States parties' reports the Committee is of the view that a minimum core obligation to ensure the satisfaction of, at the very least, minimum essential levels of each of the rights is incumbent upon every State party. Thus, for example, a State party in which any significant number of individuals is deprived of essential foodstuffs, of essential primary health care, of basic

shelter and housing, or of the most basic forms of education is, prima facie, failing to discharge its obligations under the Covenant. If the Covenant were to be read in such a way as not to establish such a minimum core obligation, it would be largely deprived of its raison d'être. By the same token, it must be noted that any assessment as to whether a State has discharged its minimum core obligation must also take account of resource constraints applying within the country concerned. Article 2 (1) obligates each State party to take the necessary steps "to the maximum of its available resources". In order for a State party to be able to attribute its failure to meet at least its minimum core obligations to a lack of available resources it must demonstrate that every effort has been made to use all resources that are at its disposition in an effort to satisfy, as a matter of priority, those minimum obligations." (emphasis in original, please also note that the examples given are indicative, not exhaustive).

¹¹ See for example CESCR, General Comment No. 14: The right to the highest attainable standard of health (Article 12), UN Doc. E/C. 12/2000/4, 11 August 2000, (hereinafter CESCR, General Comment No. 14), para. 43 (f) and CESCR, General Comment No. 15: The right to water (Articles 11 and 12), UN Doc. E/C.12/2002/11, 20 January 2003, (hereinafter CESCR, General Comment No. 15), paras 16 and 37 (b).

¹² See for example CESCR, General Comment No. 15, para 47, where the Committee emphasised that "The duty to take steps clearly imposes on States parties an obligation to adopt a national strategy or plan of action to realize the right to water. The strategy must: (a) be based upon human rights law and principles; (b) cover all aspects of the right to water and the corresponding obligations of States parties; (c) define clear objectives; (d) set targets or goals to be achieved and the time-frame for their achievement; (e) formulate adequate policies and corresponding benchmarks and indicators".

¹³ Articles 19 and 25, ICCPR. As discussed in chapters 2 and 3, other human rights monitoring bodies have emphasised the importance of participation and information for the exercise of peoples' human rights.

¹⁴ For instance OHCHR has highlighted that "The MDGs focus explicitly only on three marginalized groups, namely: children and youth (decent work for youth, education and infant mortality: MDGs 1–4), women and girls (MDGs 3 and 5 and target 1.B) and slum- dwellers (target 7.D)." See OHCHR, *Claiming the MDGs*, p. 9.

¹⁵ Article 1, CEDAW.

¹⁶ UN Permanent Forum on Indigenous Issues website, http://www.un.org/esa/socdev/unpfii/en/mdgs.html#_ftn5, last accessed 24 May 2010. See also International Fund for Agricultural Development, *Indigenous Peoples*, www.ifad.org/pub/factsheet/ip/e.pdf, last accessed 24 May 2010, which notes that Indigenous Peoples make up one third of the world's 900 million extremely poor rural people.

¹⁷ Amnesty International, *'We're only asking for what is ours': Indigenous Peoples in Paraguay - Yakye Axa and Sawhoyamaya*, AI Index: AMR 45/005/2009.

¹⁸ *Yakye Axa Indigenous Community v. Paraguay*, Inter-American Court of Human Rights, 17 June 2005, Series C, No. 125; *Sawhoyamaya Indigenous Community v. Paraguay*, Inter-American Court of Human Rights, 29 March 2006, Series C, No. 146.

¹⁹ UN Permanent Forum on Indigenous Issues, *Report on the Fourth Session (16 – 27 May 2005)*, UN Doc. E/C.19/2005/9, p. 3.

²⁰ Sightsavers International, *The Millennium Development Goals and People with Disabilities*, Sightsavers Policy Briefing, 2009, p. 1 available at http://www.sightsavers.org/learn_more/reports_and_research/10990.html, last accessed 24 May 2010.

²¹ See for example Amnesty International, "Europe's Roma community still facing massive discrimination", available at <http://www.amnesty.org/en/news-and-updates/feature-stories/europes-roma-community-still-facing-massive-discrimination-20090408#czech>, last accessed 24 May 2010.

²² Report of the Independent Expert on Minority Issues, Gay McDougall, *Achieving the Millennium Development Goals (MDGs) for Minorities: A Review of MDG Country Reports and Poverty Reduction Strategies*, Human Rights Council, U.N. Doc. A/HRC/4/9/Add.1, 2 March 2007.

²³ Revised Millennium Development Goal monitoring framework, including new targets and indicators, as recommended by the Inter-Agency and Expert Group on Millennium Development Goal Indicators, contained in *Report of the Secretary-General on the work of the Organization*, UN General Assembly, Sixty-second Session, 2007, UN. Doc. A/62/1, 31 August 2007, Annex II, p. 66.

²⁴ See Secretariat of the UN Permanent Forum on Indigenous Issues, *MDG Reports and Indigenous Peoples: A Desk Review*, prepared in 2006, 2007 and 2008, available at http://www.un.org/esa/socdev/unpfii/en/mdgs.html#_ftn8, last accessed 24 May 2010.

²⁵ OHCHR, *Claiming the MDGs*, p. 10.

²⁶ For further information see also Amnesty International, *Human rights for human dignity: A primer on economic, social and cultural rights*, AI Index POL 34/009/2005.

²⁷ Article 2 (1), ICESCR.

²⁸ CESCR, General Comment No. 3, paras 2 and 9.

²⁹ CESCR, General Comment No. 14, para. 53.

³⁰ CESCR, General Comment 3, para. 10, Committee on Economic, Social and Cultural Rights, *Poverty and the International Covenant on Economic, Social and Cultural Rights*, UN Doc E/C.12/2001/10, 10 May 2001, para. 17.

³¹ The World Bank and UN-HABITAT, *Cities Alliance for Cities Without Slums Action Plan for Moving Slum Upgrading to Scale*, 1999, available at <http://www.citiesalliance.org/ca/cws-action-plan>, last accessed 24 May 2010, p. 1.

³² While the Millennium Declaration suggests that progress was to be measured from 2000 to 2015, the MDGs use 1990 as the base-line year, therefore measuring progress retrospectively and over 25 years, rather than 15 years. The English version of the Millennium Declaration had stated that the targets were to be achieved by 2015, without stipulating that 2000 was the baseline year, although this may be implied from the context. However, the French version clearly stated that progress was to be measured from the time the Declaration was adopted in 2000 until 2015.

³³ J. Vandemoortele, *MDGs: misunderstood targets?*, UNDP International Poverty Centre, One Pager, No. 28, January 2007, available at <http://www.ipc-undp.org/pub/IPCOnePager28.pdf>, last accessed 24 May 2010.

³⁴ P. Alston, *Ships Passing in the Night*, p. 763, citing M. Clemens, C. Kenny & T. Moss, *The Trouble with the MDGs: Confronting Expectations of Aid and Development Success*, Center for Global

Development, Working Paper 40, 2004.

³⁵ OHCHR, UNICEF and the Norwegian Centre for Human Rights, *Human Rights and MDGs in Practice: A Survey of country strategies and reporting*, OHCHR, 2008, p. 14.

³⁶ Centre on Housing Rights and Evictions (COHRE), *The Significance of human rights in MDG-based policy making on water and sanitation: An application to Kenya, South Africa, Ghana, Sri Lanka and Laos*, COHRE, 2009, pp. 5, 7-8, 12 and 20-21.

³⁷ UN Millennium Declaration, A/RES/55/2, 8 September 2000, para. 19.

³⁸ WHO and UNICEF Fund Joint Monitoring Programme for Water Supply and Sanitation, *Progress on Sanitation and Drinking-water: 2010 Update*, WHO and UNICEF, 2010, p. 13.

³⁹ WHO, *Global Defence Against Neglected Diseases Threat*, WHO, 2002.

⁴⁰ Article 25, The Human Rights Committee has clarified that the “conduct of public affairs ... is a broad concept which relates to the exercise of political power, in particular the exercise of legislative, executive and administrative powers. It covers all aspects of public administration, and the formulation and implementation of policy at international, national, regional and local levels.” Human Rights Committee, General Comment 25 on the right to participate in public affairs, voting rights and the right of equal access to public service (Article 25), 12 July 1996, available at: <http://www2.ohchr.org/english/bodies/hrc/comments.htm>, last accessed 24 May 2010, para. 5.

⁴¹ CESCR, General Comment No. 14, para. 54 and General Comment No. 15, para. 48.

⁴² CESCR, General Comment No. 14, para. 54.

⁴³ OHCHR, UNICEF and the Norwegian Centre for Human Rights, *Human Rights and MDGs in Practice*, p. 20.

⁴⁴ COHRE, American Association for the Advancement of Science (AAAS) Science and Human Rights Programme, Swiss Agency for Development and Cooperation (SDC) and UN-HABITAT, *Manual on Right to Water and Sanitation*, 2007, available at <http://www.cohre.org/manualrtws>, (hereinafter COHRE, AAAS, SDC and UN-HABITAT, *Manual on Right to Water and Sanitation*), last accessed 24 May 2010, pp. 78-81.

⁴⁵ Secretariat of the UN Permanent Forum on Indigenous Issues, *MDG Reports and Indigenous Peoples: A Desk Review*, prepared in 2006 and 2007, available at http://www.un.org/esa/socdev/unpfii/en/mdgs.html#_ftn8, last accessed 24 May 2010.

⁴⁶ UN Permanent Forum on Indigenous Issues website, http://www.un.org/esa/socdev/unpfii/en/mdgs.html#_ftn5, last accessed 24 May 2010.

⁴⁷ Secretariat of the UN Permanent Forum on Indigenous Issues *MDG Reports, CCAs, UNDAFs and Indigenous Peoples: A Desk Review 2010*, available at <http://www.un.org/esa/socdev/unpfii/en/publications.html>, last accessed 24 May 2010, p. 39 .

⁴⁸ H. Mander and A. Joshi, *The Movement for the Right to Information in India*, Mazdoor Kisan Shakti Sangathan website, available at <http://www.mkssindia.org/node/44>, last accessed 24 May 2010.

⁴⁹ National Campaign for People's Right to Information, *The Informer*, E-Newsletter, available at <http://www.righttoinformation.info/pdf/newletter1.pdf>, last accessed 24 May 2010.

⁵⁰ See the UN Development Group website, <http://www.undg.org/index.cfm?P=87>, last accessed 24 May 2010.

⁵¹ Amnesty International, *Giving life, risking death: Maternal mortality in Burkina Faso*, AI Index: AFR 60/001/2009, pp. 82 – 89.

⁵² *Lindiwe Mazibuko & Others v City of Johannesburg & Others*, Case CCT 39/09, [2009] ZACC 28, para. 160-161.

⁵³ D. Brinks and V. Gauri, “A New Policy Landscape”. in *Courting Social Justice: Judicial Enforcement of Social and Economic Rights in the Developing World*, Cambridge University Press, 2008, (hereinafter D. Brinks and V. Gauri, *Courting Social Justice*), p. 348.

⁵⁴ D. Brinks and V. Gauri, *Courting Social Justice*, p. 319.

⁵⁵ *People’s Union for Civil Liberties v Union of India and others*, Civil Writ Petition 196 of 2001, Interim Order of 28 November 2001, available at <http://www.righttofoodindia.org/orders/interimorders.html>, last accessed 24 May 2010.

⁵⁶ J. Dreze, *Right to Food: From the Courts to the Streets*, Right to Food Campaign, 2002, p. 4.

⁵⁷ H. Mander, Commissioner, Supreme Court of India, Presentation at the ‘International Symposium on the Enforcement of Economic, Social and Cultural Rights Judgements, Bogota, Colombia, 6 May 2010.

⁵⁸ D. Brinks and V. Gauri, *Courting Social Justice*, p. 327

⁵⁹ D. Brinks and V. Gauri, *Courting Social Justice*, p. 328.

⁶⁰ D. Brinks and V. Gauri, *Courting Social Justice*, p. 311.

⁶¹ *Minister of Health v Treatment Action Campaign (TAC)*, (2002) 5 SA 721 (CC), paras 60-61.

⁶² *Minister of Health v Treatment Action Campaign (TAC)*, (2002) 5 SA 721 (CC), paras 60-61.

⁶³ *Minister of Health v Treatment Action Campaign (TAC)*, (2002) 5 SA 721 (CC), paras 60-61.

⁶⁴ J. Berger, “*Litigating for Social Justice in Post Apartheid South Africa*” in D. Brinks and V. Gauri, *Courting Social Justice*, p. 84.

⁶⁵ In addition, the UN Human Rights Council has established Special Procedures, consisting of individuals or working groups, who can carry out independent enquiries into thematic or country human rights situations.

⁶⁶ Optional Protocol to the International Covenant on Economic, Social and Cultural Rights, adopted by the UN General Assembly, Resolution A/RES/63/117, 10 December 2008, available at <http://www.un.org/ga/63/resolutions.shtml>, last accessed 24 May 2010. The Optional Protocol was opened for signature on 24 September 2009 and has been signed by 32 States as of 24 May 2010.

⁶⁷ Adopted 6 October 1999 and entered into force on 22 December 2000. The Optional Protocol has been ratified by 99 states as of the end of April 2010.

⁶⁸ See for example, Concluding Observations of the CESCR on Germany, UN Doc E/C.12/1/Add.68, 24 September 2001, para. 31 and CESCR, General Comment No. 14, para. 39. See also M. Sepúlveda, “Obligations of ‘International Assistance and Cooperation’ in an Optional Protocol to the International Covenant on Economic, Social and Cultural Rights”, *Netherlands Quarterly of Human Rights*, Vol. 24,

Issue 2, 2006, p. 287.

⁶⁹ United Nations Millennium Declaration, A/RES/55/2, 8 September 2000, paras 20, 25 and 30.

⁷⁰ See Women, Poverty and Economics, available at http://www.unifem.org/gender_issues/women_poverty_economics/, last accessed 24 May 2010.

⁷¹ International Planned Parenthood Federation (IPPF), UNFPA et al., *Ending child marriage: A guide for global policy action*, 2007, available at www.unfpa.org/upload/lib.../662_filename_endchildmarriage.pdf, last accessed on 24 May 2010.

⁷² COHRE, AAAS, SDC and UN-HABITAT, *Manual on Right to Water and Sanitation*, p. 7.

⁷³ See UNDP, *Human Development Report 2006: Beyond scarcity: Power, poverty and the global water crisis*, available at <http://hdr.undp.org/en/reports/global/hdr2006/>, last accessed 24 May 2010.

⁷⁴ United Nations, *The Millennium Development Goals Report 2009*, New York, 2009, available at www.un.org/millenniumgoals/pdf/MDG%20Report%202009%20ENG.pdf, last accessed 24 May 2010, p. 18.

⁷⁵ UNICEF, *The state of the world's children special edition. Celebrating 20 Years of the Convention on the Rights of the Child*, UNICEF, 2009, p. 18

⁷⁶ According to the UN, in 2007 only 53 of the 171 countries for which data was available had achieved gender parity in both primary and secondary educations see UN, *The Millennium Development Goals Report 2009*, p. 19.

⁷⁷ UNESCO Institute of Statistics, *Adult Literacy Rates and Illiterate Population by Region and Gender*, UNESCO, 2006, cited in UNIFEM, *The Unfinished Agenda. Balance Sheet of progress and Backlogs on Gender Equality*, available at http://www.unifem.org/gender_issues/millennium_development_goals/, last accessed 24 May 2010.

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⁷⁹ Amnesty International, *Safe schools: Every girl's right*, AI Index: ACT 77/001/2008.

⁸⁰ UNIFEM and UNDP, *Making the MDGs work better for women. Implementing Gender-Responsive National Development Plans and Programmes*, 2009, available at http://www.unifem.org/attachments/products/MakingTheMDGsWorkBetterForWomen_eng.pdf, last accessed 24 May 2010.

⁸¹ UNIFEM, *Making the MDGs Work for All. Gender-Responsive Rights-Based Approaches to the MDGs*, 2008, available at http://www.unifem.org/materials/item_detail.php?ProductID=135, last accessed 24 May 2010.

⁸² United Nations, *The Millennium Development Goals Report 2009*, p.15.

⁸³ Amnesty International, *Women and Girls in Tajikistan: Facing Violence, Discrimination and Poverty*, AI Index: EUR 60/001/2009.

⁸⁴ UNIFEM, *The tragic reality of violence. Facing the Facts of Violence Against Women and the Millennium Development Goals*, available at http://www.unifem.org/gender_issues/millennium_development_goals/, last accessed 24 May 2010.

⁸⁵ UN, *Report of the Fourth World Conference on Women, Beijing, 4 – 15 September 1995*, UN. Doc.

A/CONF.177/20/Rev.1, Platform for Action, para.124 (h).

⁸⁶ In a 2004 survey by the Canadian government, Indigenous women reported rates of violence, including domestic and sexual violence that were three and a half times higher than non-Indigenous women. J. Brzozowski, A. Taylor-Butts and S. Johnson, "Victimisation and offending among the Aboriginal population in Canada", *Juristat*, Canadian Centre for Justice Statistics, Vol. 26, No. 3, 2006.

⁸⁷ Amnesty International, *No More Stolen Sisters. The need for a comprehensive response to discrimination and violence against Indigenous women in Canada*, AI Index: AMR 20/012/2009.

⁸⁸ For example, in its report Zimbabwe: *Between a rock and a hard place – women human rights defenders at risk*, AI Index: AFR 46/017/2007, Amnesty International documented the government's clampdown on women human rights defenders in Zimbabwe to crush dissent and prevent other women and men from becoming active.

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⁹⁰ On the occasion of the 15th anniversary of the Beijing Platform for Action, the Commission on the Status of Women stated that "gender equality perspectives are not well reflected in the current formulation of many of the Millennium Development Goals and their targets and indicators, and are often not explicitly integrated in strategies and plans to achieve the Goals. There is insufficient coherence between efforts to implement the Platform for Action and the strategies and actions to achieve the Goals and this lack of coherence is a contributing factor in the uneven and slow performance towards realizing many of the Goals", *Linkages between implementation of the Beijing Platform for Action and the achievement of the Millennium Development Goals: Moderator's Summary*, UN. Doc. E/CN.6/2010/CRP.7, 10 March 2010, para. 2.

⁹¹ UNFPA, *Beijing at fifteen: UNFPA and partners charting the way forward*, 2010, available at <http://www.unfpa.org/webdav/site/global/shared/documents/publications/2010/beijing15.pdf>, last accessed 24 May 2010, p. 19.

⁹² M. Hogan et al., "Maternal Mortality for 181 countries, 1980-2008: A systematic analysis of progress towards Millennium Development Goal 5," *The Lancet*, Vol. 375, Issue 9726, pp. 1609- 1623, 2010.

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⁹⁹ Defensoría del Pueblo, *Derecho a una Maternidad Segura: Supervisión Nacional de los Servicios de Ginecología y Obstetricia del MENSA*, Peru, November 2008.

¹⁰⁰ WHO, UNICEF, UNFPA and The World Bank, *Maternal Mortality in 2005*. Estimates developed by WHO, UNICEF, UNFPA and the World Bank; available at http://www.who.int/whosis/mme_2005.pdf, last accessed 24 May 2010.

¹⁰¹ Statistics pertain to non-Hispanic black women and non-Hispanic white women. M. Heron et al, *Deaths: Final Data for 2006, National Vital Statistics Reports*, Vol.57, No.14, April 2009, p.116, Table 34; available at http://www.cdc.gov/nchs/data/nvsr/nvsr57/nvsr57_14.pdf, last accessed 24 May 2010.

¹⁰² WHO, UNICEF, UNFPA, *Guidelines for Monitoring the Availability and Use of Obstetric Services*, 1997.

¹⁰³ The CEDAW Committee has stated that 'access to health care, including reproductive health is a basic right under the Convention on the Elimination of All Forms of Discrimination against Women', CEDAW Committee, General Recommendation 24, available at <http://www.un.org/womenwatch/daw/cedaw/recommendations/recomm.htm#recom24>, last accessed 24 May 2010, para. 1. It has also said that Article 12 of the Convention 'requires States to eliminate discrimination against women in their access to health care services, throughout the life cycle, particularly in the areas of family planning, pregnancy, confinement and during the post-natal period' and that 'Measures to eliminate discrimination against women are considered to be inappropriate if a health care system lacks services to prevent, detect and treat illnesses specific to women', CEDAW Committee, General Recommendation 24, paras 2 and 11.

¹⁰⁴ The UN Special Rapporteur on the right to the highest attainable standard of health has clarified that "In the context of sexual and reproductive health, freedoms include a right to control one's health and body. Rape and other forms of sexual violence, including forced pregnancy, non-consensual contraceptive methods (such as forced sterilisation and forced abortion), female genital mutilation/cutting and forced marriage, all represent serious breaches of sexual and reproductive freedoms, and are fundamentally and inherently inconsistent with the right to health". Report of The Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, Paul Hunt, Commission on Human Rights, 16 February 2004, UN. Doc.E/CN.4/2004/49.

¹⁰⁵ Concluding observations of the CESCR, UN Doc E/C.12/NIC/CO/4, 28 November 2008; Concluding observations of the Human Rights Committee, UN Doc. CCPR/C/NIC/CO/3, 12 December 2008; Concluding observations of the Committee against Torture, CAT/C/NIC/C/1, 10 June 2009; Concluding observations of the CEDAW Committee, UN Doc. CEDAW/C/NIC/CO/6, 2 February 2007.

¹⁰⁶ UN, MDG Monitor, available at http://www.mdgmonitor.org/country_progress.cfm?c=NIC&cd=558, last accessed 24 May 2010.

¹⁰⁷ Amnesty International, *Peru: Poor and excluded women – Denial of the right to maternal and child health*, AI Index: AMR 46/004/2006.

¹⁰⁸ Amnesty International, *Peru: Fatal flaws - Barriers to maternal health in Peru*, AI Index: AMR 46/008/2009.

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¹¹³ US Census Bureau, *Income, Poverty, and Health Insurance Coverage, 2008*, p.21, Table 7.

¹¹⁴ Dr. H. Potts, *Participation and the right to the highest attainable standard of health*, University of Essex, Human Rights Centre, 2008.

¹¹⁵ Report of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, Paul Hunt, Human Rights Council, UN. Doc A/HRC/7/11, 31 January 2008, para. 41.

¹¹⁶ CEDAW Committee, General Recommendation 24, para. 14.

¹¹⁷ See CESCR, General Comment No. 14, para. 21.

¹¹⁸ Article 12, ICESCR.

¹¹⁹ WHO, *Beyond the numbers: reviewing maternal deaths and complications to make pregnancy safer*, WHO, 2004, pp. 43-47.

¹²⁰ United Nations Human Settlements Programme (UN-HABITAT), *State of the World's Cities 2010/11: Bridging the Urban Divide*, UN-HABITAT and Earthscan, 2010, p. 33.

¹²¹ UN-HABITAT, *State of the World's Cities 2006/7*, UN-HABITAT and Earthscan, 2006, pp. 18 – 22. According to UN-HABITAT a 'slum' is an area that combines, to various extents, the following characteristics: inadequate access to safe water; inadequate access to sanitation and other infrastructure; poor structural quality of housing; overcrowding and insecure residential status, see http://www.unhabitat.org/documents/media_centre/whd/GRHSPR5.doc, last accessed 24 May 2010.

¹²² UN-HABITAT, *State of the World's Cities 2010/11*, p. 33.

¹²³ CESCR, General Comment 4, para. 8.

¹²⁴ At least three or four in every 10 non-permanent houses in cities in developing countries are located in dangerous areas that are prone to floods, landslides and other natural disasters. In 2003, approximately 20 per cent of the world's population was living in inadequate dwellings, which were overcrowded or did not have a sufficient living area. It was also estimated that 18 per cent of all dwelling units globally are non-permanent structures and 133 million people living in cities in the developing world live in housing that lack finished materials. Because of the difficulties of collecting data on this issue and lack of systematic assessment, these numbers may be "highly underestimated". UN-HABITAT, *State of the World's Cities 2006/7*, UN-HABITAT and Earthscan, 2006, pp. 58, 62, 70, 137-139 and UNFPA, *State of World Population 2007*, UNFPA, 2007, available at <http://www.unfpa.org/public/publications/pid/408>, last accessed 24 May 2010, pp. 59-61.

¹²⁵ UN-HABITAT, *State of the World's Cities 2010/11*, p. 47.

¹²⁶ CESCR, General Comment 4, para 8 (a)..

¹²⁷ UN-Habitat, *State of the World's Cities 2006/7*, p. 92.

¹²⁸ Amnesty International, *Zimbabwe: Between a rock and a hard place – Women human rights defenders at risk*, AI Index: AFR 46/017/2007.

¹²⁹ For further details see Amnesty International, *Cambodia: Bracing for Development*, AI Index: ASA 23/009/2008). See also Open Letter by International Federation for Human Rights (FIDH), the Centre on Housing Rights and Evictions (COHRE), Human Rights Watch and Amnesty International Regarding the Forced Eviction of Residents of Boeung Kak Lake in the Phnom Penh Municipality, 4 December 2008, AI Index ASA 23/015/2008. For an overview of concerns around forced evictions in Cambodia see Amnesty International, *Rights razed: Forced evictions in Cambodia*, AI Index: ASA 23/002/2008.

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¹³¹ Amnesty International, *Kenya: The unseen majority – Nairobi's two million slum dwellers*, AI Index: AFR 32/005/2009.

¹³² UN-Habitat, *State of the World's Cities 2006/7*, pp. 102-127. For the latest data see UN-HABITAT, *State of the World's Cities 2010/11: Bridging the Urban Divide*, pp. 52 – 119.

¹³³ Amnesty International, *The wrong answer: Italy's 'Nomad Plan' Violated the housing rights of Roma in Rome*, AI Index EUR 30/001/2010.

¹³⁴ OHCHR, *Claiming the MDGs*, p. 40.

¹³⁵ Amnesty International, *“Let them kill each other”: Public security in Jamaica's inner cities*, AI Index: AMR 38/004/2008, and *Brazil: “They come in shooting” – Policing socially excluded communities*, AI Index: AMR 19/025/2005.

¹³⁶ See Amnesty International, *Picking up the pieces: Women's experience of urban violence in Brazil*, AI Index: AMR 19/0012008, *“Let them kill each other”: Public security in Jamaica's inner cities*, and *Brazil: “They come in shooting” – Policing socially excluded communities*.

¹³⁷ COHRE, *Women, Slums and Urbanisation: Examining the Causes and Consequences*, COHRE, 2008, p. 14.

¹³⁸ See Amnesty International, *Picking up the pieces: Women's experience of urban violence in Brazil*, and COHRE, *Women, Slums and Urbanisation: Examining the Causes and Consequences*, 2008, pp. 79, 103, and 109.

¹³⁹ Amnesty International, *Kenya: The unseen majority – Nairobi's two million slum dwellers*, AI Index: AFR 32/005/2009.

¹⁴⁰ Amnesty International, *Kenya: The unseen majority – Nairobi's two million slum dwellers*, p. 27.

¹⁴¹ P. Alston, *Ships Passing in the Night*, pp. 793-796.

¹⁴² Article 2(1), ICESCR states that: “Each State Party to the present Covenant undertakes to take steps, individually and *through international assistance and co-operation*, especially economic and technical, to

the maximum of its available resources, with a view to achieving progressively the full realization of the rights recognized in the present Covenant by all appropriate means, including particularly the adoption of legislative measures.” (emphasis added). The importance of international assistance and co-operation to the realization of human rights is also reflected in other international and regional human rights treaties such as the Convention on the Rights of the Child and the Convention on the Rights of Persons with Disabilities.

¹⁴³ CESCR, General Comment No. 14, para. 39, and CESCR, General Comment No. 15, The right to water, para. 36.

¹⁴⁴ See OHCHR, *Frequently Asked Questions on a Human Rights Based Approach to Development*, UN, 2006.

¹⁴⁵ Third High Level Forum on Aid Effectiveness, September 2-4 2008, para. 13 (c), Accra Agenda for Action, Accra, Ghana, available at www.undp.org/mdtf/docs/Accra-Agenda-for-Action.pdf, last accessed 24 May 2010.

¹⁴⁶ Organisation for Economic Co-operation and Development (OECD), *DAC Action-Oriented Policy Paper on Human Rights and Development*, OECD, 2007.

¹⁴⁷ OECD, *DAC Action-Oriented Policy Paper on Human Rights and Development*, 2007.

¹⁴⁸ OECD, *DAC Action-Oriented Policy Paper on Human Rights and Development*, 2007.

¹⁴⁹ Reporting guidelines of the Committee on Economic, Social and Cultural Rights require reporting on the *impacts* of development assistance on the realization of economic, social and cultural rights. *Guidelines on treaty-specific documents to be submitted by States Parties under Articles 16 and 17 of the International Covenant on Economic, Social and Cultural Rights*, Forty first session, 2008, UN Doc E/C.12/2008/2, para. 9. In addition, the *DAC Action-Oriented Policy Paper on Human Rights and Development* indicates that the Principles should be used in DAC Peer Review processes “where human rights are part of the DAC Peer Review process”. See *DAC Action-Oriented Policy Paper on Human Rights and Development*, 2007, p. 17.

¹⁵⁰ Available at <http://www.endpoverty2015.org/files/human%20rights%20and%20mdgs%20brochure.pdf>, last accessed 24 May 2010.



WHETHER IN A HIGH-PROFILE CONFLICT OR A FORGOTTEN CORNER OF THE GLOBE, **AMNESTY INTERNATIONAL** CAMPAIGNS FOR JUSTICE, FREEDOM AND DIGNITY FOR ALL AND SEEKS TO GALVANIZE PUBLIC SUPPORT TO BUILD A BETTER WORLD

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FROM PROMISES TO DELIVERY

PUTTING HUMAN RIGHTS AT THE HEART OF THE MILLENNIUM DEVELOPMENT GOALS

The Millennium Development Goals (MDGs) are the most prominent global initiative to tackle poverty. Endorsed at the highest political level, they have helped concentrate international attention on issues of development and poverty reduction. However, progress has been uneven and the UN has issued a clear warning that many of the global targets will not be met by 2015 unless efforts are radically stepped up.

Amnesty International believes that human rights standards – and the duty of governments to realize them – must be put at the heart of MDG efforts in order to fulfil the promises made in the Millennium Declaration. This report illustrates the gap between MDG goals and targets and the measures that states are required to take under international human rights law, and looks specifically at three areas – gender equality, maternal mortality and slums. It explores how integrating international human rights standards and principles in current efforts to meet the MDGs would strengthen measures to address poverty and help ensure real progress in fulfilling civil, cultural, economic, political and social rights for all.

To put human rights at the heart of the MDGs, governments must improve accountability; review national and international MDG efforts for consistency with human rights standards; include the excluded; set national benchmarks for progress; and ensure participation of all in decisions affecting their human rights.

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