



Amnesty International at the “36th Meeting of High-Level Authorities on Human Rights of the Southern Common Market (MERCOSUR)”

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Amnesty International wishes to make the following recommendations to the 36th Meeting of Mercosur’s High-Level Authorities on Human Rights. They are aimed at ensuring that the region’s public policy development includes a focus on human rights and, in particular, on groups in vulnerable situations, as well as emphasizing the need for international cooperation, particularly at a time when the COVID-19 pandemic remains present in the Americas.

1. *Children and adolescents as a vulnerable group*

With regard to groups in situations of vulnerability, Amnesty International wishes to draw attention to the need to raise awareness of forced pregnancies among children and the need for the State to guarantee comprehensive care for the various forms of violence suffered by children and adolescents. It is essential to note that child pregnancy is a serious problem affecting girls in our region, more often than not resulting from situations of child sexual abuse. In addition to sexual violence, a childhood pregnancy will have significant physical, psychological and emotional consequences for a person that will remain with her for the rest of her life. The reality of girls who suffer forced pregnancies and motherhood is still not well-known.

The organization therefore believes that comprehensive sexuality education (CSE) is an appropriate response aimed at preventing violence, abuse and mistreatment of children and adolescents. In fact, CSE enables children and adolescents to develop attitudes, skills and knowledge that include, among other things, respect for rights, equality, positive values and safe relationships.¹ Amnesty International also wishes to highlight the importance of CSE in transforming the gender and cultural patterns that are prevalent in the social order, preventing situations of violence and abuse and promoting the right to full exercise of sexual and reproductive rights as human rights².

If States are to meet their obligations to prevent child pregnancy, three important aspects need to be taken into account:

- a) Prevention: Through CSE, the education system plays a fundamental role in allowing girls and adolescents to find out about their sexual rights and their bodies, as well as providing them with the tools to identify possible situations of abuse and how to report them;
- b) Care: Providing information and ensuring access to available, accessible and acceptable high-quality sexual and reproductive health services, including voluntary termination of pregnancy; and
- c) Reparation and support: This is fundamental to an adequate response that includes providing effective, independent and high-quality access to justice and judicial and administrative mechanisms for redress.

Amnesty International therefore considers it appropriate to urge this Meeting to:

- a) Implement comprehensive sexuality education³ as part of the compulsory curriculum at all levels of education⁴, in both public and private schools, religious or secular, and also to make this accessible to

¹ UNESCO International Technical Guidance on Sexuality Education. An evidence-informed approach. Available at: <https://unesdoc.unesco.org/ark:/48223/pf0000260770>

² UNFPA Comprehensive Sexuality Education: Advancing Human Rights, Gender Equality and Improved Sexual and Reproductive Health. Available at: <https://www.unfpa.org/resources/comprehensive-sexuality-education-advancing-human-rights-gender-equality-and-improved>

³ Committee on the Rights of the Child (CRC). General Comment No. 20, on the implementation of the rights of the child during adolescence, 06 December 2016, CRC/C/GC/20. Available at: https://tbinternet.ohchr.org/_layouts/treatybodyexternal/Download.aspx?symbolno=CRC%2fC%2fGC%2f20&Lang=en

⁴ Follow-up Mechanism to the Convention of Belém Do Pará (MESECVI), Declaration on Violence against Women, Girls and Adolescents and their Sexual and Reproductive Rights, OEA/Ser.L/II.7.10 MESECVI/CEVI/DEC.4/14, 19 September 2014, p. 7, Available at



children outside the school system. This education will be adapted to the age and capacity of the children, and will need to be based on scientific data and a human rights approach.

- b) Provide available, accessible, high-quality sexual and reproductive health information and services⁵ as a holistic concept, “embracing the child’s physical, mental, spiritual, moral, psychological and social development”⁶. This access must be without discrimination⁷ based on sex, gender, ethnicity, age, disability, social class, sexual orientation⁸, or any other reason universally recognized as unacceptable under international law, and tailored to the needs of pregnant girls⁹.
- c) Provide effective, independent and high-quality access to justice¹⁰ and judicial and administrative mechanisms for reparation¹¹ that are dignified and transformative, taking into account factors of vulnerability (from rural areas, of indigenous origin and with few economic resources)¹², the discrimination of children and adolescents who have suffered sexual abuse and the girls that have been forced into unintentional and unwanted pregnancies, so that they are able to rebuild their life projects in accordance with their future expectations in educational and professional terms.

2. *International cooperation as a guarantee of the right to health*

Amnesty International believes that, from the perspective of the right to health, cooperation between States in the Americas must ensure that medical treatments to combat COVID-19 and/or a potential vaccine are made available and accessible without discrimination, establishing special measures to support specific groups who are most at risk from the virus, or whose marginal position means they may be left behind when accessing vaccines or treatments. Amnesty International calls upon the States at this Meeting of High-Level Authorities on Human Rights to consider treatments and/or vaccines as public assets, ensuring the following principles:

- i. Fair allocation of vaccines within and between countries: The criteria guiding the allocation of vaccines must be consistent with human rights standards, pay attention to the needs of marginalized groups and reflect WHO’s Allocation Framework. Civil society organizations and community representation must be included in any decision-making process regarding the allocation criteria for COVID-19 vaccines, including WHO’s global and national vaccine allocation mechanisms.

<http://www.oas.org/en/mesecvi/docs/cevi11-declaration-en.pdf>

⁵ Committee on Economic, Social and Cultural Rights, The right to the highest attainable standard of health (Article 12 of the International Covenant on Economic, Social and Cultural Rights), E/C.12/2000/4 of 11 August 2000.

⁶ Convention on the Rights of the Child, Article 6, and Committee on the Rights of the Child, General Comment No. 5: “General measures of implementation of the Convention on the Rights of the Child (Arts. 4, 42 and 44, para. 6)”, para. 12.

⁷ IACHR, Access to Maternal Health Services from a Human Rights Perspective, OAS/Ser.LV/II. 69, 7 June 2010, para. 54.

⁸ Report of the Working Group on the Issue of Discrimination against Women in Law and in Practice, A/HRC/32/44, 8 April 2016, paras. 87 to 92. Available at: <https://undocs.org/en/A/HRC/32/44>.

⁹ United Nations, Committee on the Rights of the Child, General Comment No. 4, Adolescent Health and Development in the Context of the Convention on the Rights of the Child, CRC/GC/2003/4, 21 July 2003

¹⁰ Committee on the Elimination of Discrimination against Women, General Recommendation No. 33 on women’s access to justice, CEDAW/C/GC/33, 3 August 2015, 20. a) <https://undocs.org/CEDAW/C/GC/33>

¹¹ Inter-American Convention on the Prevention, Punishment and Eradication of Violence against Women, Belem do Pará, Article 7. Available at: <http://www.oas.org/juridico/english/treaties/a-61.html>

¹² Brasilia Regulations regarding Access to Justice for Vulnerable People, 2008. Available at: <https://www.ici.org/wp-content/uploads/2018/11/Brasilia-rules-vulnerable-groups.pdf>



In this regard, Amnesty International calls on the States at this Meeting of High-Level Authorities on Human Rights to avoid purely national approaches and, where possible, to cooperate through international mechanisms, avoiding bilateral agreements that could undermine the availability of vaccines for other States.

- ii. Increased availability and affordability through transparency and innovation sharing: States must ensure that companies do not contravene the right to health and do not create barriers to accessing COVID-19 treatments and vaccines. States must therefore urge vaccine and therapeutic product developers to share their knowledge, expertise, data on biological material and intellectual property with WHO's COVID-19 Technology Access Fund (C-TAP) so that other developers can be licensed for wider public use.

Bearing in mind that, in most cases, research into treatments and vaccines to combat COVID-19 is likely to be carried out with public funding, States must demand collaboration with C-TAP as an essential condition for that funding, as well as full transparency in all aspects of development and sales in order to ensure the widest possible access to the products developed.

Amnesty International therefore calls on the States at this Meeting of High-Level Authorities on Human Rights to urgently assess their legal frameworks on intellectual property so that these do not form a barrier to the availability and affordability of medicines, treatments, devices or medical innovations for anyone, either at home or abroad. States must take full advantage of the flexibilities available in the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS Agreement) to protect public health.

- iii. That cost is never a barrier to access: The right to health requires States to use the maximum available resources to ensure that cost is never a barrier to accessing health technologies such as COVID-19 treatments and vaccines. Any cost that reduces vaccine take-up rates will also significantly reduce vaccine effectiveness.

Amnesty International is clear that agreements on international cooperation must prioritize the ability of lower income countries to purchase the vaccines they need. States must therefore focus their efforts on ensuring that companies are transparent about their development costs in order to guarantee affordable prices.

3. Conclusions

Amnesty International calls on the States at this Meeting of High-Level Authorities on Human Rights to make human rights a central component of the final declaration to be adopted at the end of this meeting.

In particular, with regard to children and adolescents, the organization calls for:

- a) The systematization of international and national regulations, as well as of the sexuality education plans of Member States and partners, in order to develop a minimum common framework for implementation across all countries, drawing on efforts already made but focusing on expanding the guarantees and understanding of comprehensive sexuality education from a human rights perspective;
- (b) The development of minimum common guidelines for promoting CSE in different countries, at all levels of education;
- c) The creation of a mechanism for monitoring compliance with the minimum common framework on CSE in the different countries.

Finally, in the light of the COVID-19 pandemic, Amnesty International calls for cooperation among the States of the Americas to ensure that medical treatments to combat COVID-19 and/or a potential vaccine are made



available and accessible to all, without discrimination of any kind, establishing special measures to support specific groups who are most at risk from the virus, or whose marginal position means they may be left behind when accessing vaccines and/or treatments.