

Women's and Children's Health: Evidence of Impact of Human Rights

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President Nelson Mandela addresses the joint session of Assembly and Senate. South Africa, 1996.



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Executive summary

Human rights are recognized in a number of legal instruments and other documents of the World Health Organization, including the WHO Constitution, the Declaration of Alma-Ata, the International Health Regulations and the WHO Framework Convention on Tobacco Control. Member States of the United Nations have negotiated and agreed the Universal Declaration of Human Rights, the Convention on the Rights of the Child and the Convention on the Elimination of All Forms of Discrimination Against Women.

Today, binding national human rights standards are commonplace, and are protected by numerous national and local bodies, including constitutional courts, ombudsmen-style national human rights institutions and democratically elected assemblies. Moreover, countries have put in place policies, programmes and other measures to ensure that human

rights move beyond laws and institutions to actually improve the lives and well-being of individuals, communities and populations.

The first of its kind, this report asks: what evidence is available to policy-makers that human rights have helped to improve women's and children's health? It considers whether or not evidence of beneficial impact supplements the compelling moral, political and legal reasons for adopting a human rights-based approach (HRBA) to women's and children's health.

By way of an initial assessment, the report concludes that applying human rights to women's and children's health policies, programmes and other interventions not only helps governments comply with their binding national and international obligations, but also contributes to improving the health of women and children.

Audience

This report is intended primarily for members of governments and public health professionals engaged in policy development, monitoring, evaluation and research in the field of women's and children's health. It will also be of interest to parliamentarians, foundations and civil society organisations that collaborate with public health policy-makers, and researchers in public health and human rights.

A focus on governments' human rights-shaped health interventions

Many stakeholders contribute to the implementation of a human rights-based approach to health, and there is compelling evidence that their contributions have a beneficial impact. This study focuses on the evidence of impact of governments' human rights-shaped health interventions, with particular attention to the initiatives of the executive branch. There are two reasons for this. First, governments have the primary legal responsibility for implementing human rights; and second, very little attention has previously been given to the evidence of impact of governmental human rights-shaped initiatives on women's and children's health.

What is a human rights-based approach to health?

This study uses the understanding of a human rights-based approach adopted by WHO and the Office of the High Commissioner for Human Rights (OHCHR). This approach aims to realize the right to the highest attainable standard of health (or "right to health") and other health-related rights. It underscores that the right to health includes timely and appropriate health care, as well as the underlying determinants of health, such as safe and potable water,

health-related information, and gender equality. A human rights-based approach is based on seven key principles: availability, accessibility, acceptability and quality of facilities and services, participation, equality and non-discrimination, and accountability. The approach is not only about achieving certain goals or outcomes; it is about achieving them through a participatory, inclusive, transparent and responsive process.

Learning from country experiences: Nepal, Brazil, Malawi and Italy

A number of countries have begun to apply elements of a human rights-based approach to women's and children's health, and there is much to learn from their rich and diverse experiences. Given constraints of time and funding, this report focuses on the experiences of Nepal, Brazil, Malawi and Italy, and asks two research questions. Has a human rights-based approach explicitly shaped the laws, policies and programmes related to women's and children's health? If so, what is the evidence that these explicitly human rights-shaped interventions have contributed to improvements in women's and children's health?

While united by these two central questions, each country report has a different theme. The report for Nepal looks at maternal and child health; that for Brazil looks at sexual, reproductive and maternal health; that for Malawi looks at children's health; while that for Italy looks at women's and children's health. The reports are not intended to be comprehensive; each considers aspects of the selected theme.

The studies found that, in all four countries, human rights have, to one degree or another, explicitly shaped the laws, policies, programmes and other interventions related to women's and children's health.



A mother and her child attend a free clinic in Port-au-Prince's impoverished Cité Soleil neighbourhood.

While the studies do not attribute improvements exclusively to the use of a human rights-based approach, there is plausible evidence that human rights contributed positively to health and health-related gains for women and children in the four countries, such as increased access to emergency obstetric care (Nepal), increased access to modern contraception (Brazil), reductions in early childhood mortality (Malawi) and increased vaccination coverage (Italy).

The studies mainly draw from existing quantitative data collected for other purposes, but these data do not capture many of the distinctive elements of a human rights-based approach. This underscores the urgent need for more research and evaluation on a human rights-based approach to women's and children's health, as well as fresh thinking on the appropriate disciplines and methods to be used.

Although major challenges remain in relation to women's health, children's health and human rights in Nepal, Brazil, Malawi and Italy, the governments deserve great credit for their leadership in taking human rights beyond the law books and beginning to apply them to women's and children's health policies and programmes.

Participation and human rights: impact on women's and children's health – what does the literature tell us?

The monograph also reports on findings from a review of a specific subset of the academic literature on participation, human rights, and women's and children's health. This review sought to illustrate the impact of one principle of a human rights-based approach – participation – on women's and children's health, while retaining a focus on other human rights principles.

The overarching review question was: "What evidence is there that the participation of women in the design, implementation, management and/or evaluation of their community health services/systems leads to greater access to, and use of, acceptable and quality reproductive, maternal and child health services, and/or improved outcomes?" In addition to this overarching question, the review process identified more specific subsidiary questions.

The key findings of the review included the following.

- There was evidence of an association between women's participation and improved health and health-related outcomes.
- The studies in the review highlighted the benefits of attention to additional HRBA principles alongside participation.
- No study reported systematic attention to all elements of a human rights-based approach to health.

The scarcity of literature available for this review highlights the need to ensure that research is conducted, and accessible evidence generated, so that the strengths, weaknesses and impacts of a human rights-based approach

can be better understood. Specific suggestions for further research include:

- intervention studies that explicitly consider participation within the framework of a human rights-based approach; and
- an explicit study of how non-discrimination can be used as a framework for addressing inequities in health.

An enabling environment for a human rights-based approach to women's and children's health

One of the themes emerging from this report is that a human rights-based approach to women's and children's health is supported by an enabling environment with a number of features, including high-level political leadership and advocacy for a human rights-based approach, and a dynamic civil society. Steps that governments can take towards such a positive environment include ratifying key international human rights treaties, endorsing other global commitments, recognizing the right to health in the constitution, establishing non-judicial human rights oversight bodies, and ensuring policy coherence and effective coordination among multiple stakeholders. Although their mix and sequencing may vary from one country to another, these steps may be instructive for those countries committed to implementing a human rights-based approach to women's and children's health.

A scarcity of research on, and evaluation of, the impact of a human rights-based approach on women's and children's health

Another theme is the scarcity of research on, and evaluation of, the impact of a human rights-based approach on women's and children's health. There may be a number of reasons for this scarcity; for example, there are various interpretations of what constitutes a human rights-based approach and these conceptual uncertainties may discourage researchers from undertaking impact evaluations. Also, donor interest is relatively limited and there is a lack of funding for research of this sort. In addition, there is a lack of clarity about the methods and tools needed to carry out the appropriate research and evaluation.

Multidisciplinary and multi-method approaches

In response to this last-mentioned methodological problem, the report emphasizes the importance of multidisciplinary and multi-method approaches to research on, and evaluation of, the impact of a human rights-based approach on women's and children's health. Several disciplines have a significant contribution to make, including epidemiology, clinical medicine, demography, social and behavioural sciences (e.g. sociology and anthropology), political science, law and economics. A multidisciplinary approach underlines the critical importance of using a broad and diverse array of methods and tools, encompassing quantitative and qualitative, including ethnographic, methods.

The importance of plausible levels of evidence

The study also suggests that plausibility will often be the most compelling and feasible level of evidence for researchers and evaluators to use when assessing the impact of a human rights-based approach on women's and children's health, although adequacy and probability may also have a role.

Creating a platform for policy-makers seeking to implement a human rights-based approach to women's and children's health

While this report has highlighted experiences in Nepal, Brazil, Malawi and Italy, many other countries are endeavouring to operationalize a human rights-based approach to women's and children's health, and there is much to learn from their rich experiences. Unfortunately, policy-makers sometimes find it difficult to locate documentation about these diverse country experiences. They would benefit from a platform, or other arrangement, that facilitates the exchange of documentation about country experiences, and offers an opportunity to discuss ideas and provide advice, support and encouragement on the implementation of a human rights-based approach to women's and children's health. Although mainly directed towards those working in the executive and legislative branches of government, the platform or other arrangement should include a wide range of stakeholders from different disciplines.

An agenda-setting process to strengthen research and evaluation

An agenda-setting process is needed to strengthen research on, and evaluation of, the impact of a human rights-based approach on women's and children's health. A coherent and manageable agenda will help stakeholders from different disciplines to collaborate, coordinate and make strategic choices about what to prioritize. This agenda-setting process might include the following five steps.

- Conduct situational analyses of the health and human rights of women and children to establish a baseline.
- Find out what research on, and evaluation of, the impact of an human rights-based approach on women's and children's health have already been carried out.
- Set priorities for new research on, and evaluation of, the impact of a human rights-based approach on women's and children's health.
- Establish a multidisciplinary network of policy-makers, practitioners and scholars interested in research on, and evaluation of, the impact of a human rights-based approach on women's and children's health.
- Disseminate the findings of research on, and evaluation of, evidence of impact of an HRBA on women's and children's health so that the knowledge and evidence become well known and are used to advance the health and human rights of women and children.

Conclusion

This report demonstrates plausible evidence that a human rights-based approach contributes to health improvements for women and children. It shows that the constitutional and international right to health can be translated into improved health services and health status through laws, policies and programmes that are explicitly shaped by health rights principles, such as accessibility, quality, participation and accountability. Applying human rights to women's and children's health policies and other interventions not only helps governments comply with their binding national and international obligations but also contributes to improving the health of women and children.

The study found few human rights-shaped women's and children's health policies and other interventions that were accompanied by research or evaluation that was well equipped to capture many of the human rights dimensions of the interventions. The observed scarcity of evidence may be attributable not to lack of impact but to a scarcity of appropriately designed research and evaluation.

There is a need for a multidisciplinary network of policy-makers, practitioners and scholars interested in research on, and evaluation of, the impact of a human rights-based approach on women's and children's health. WHO has an important role in helping to establish such a network.

There is also a need for a platform, or other arrangement, that facilitates the exchange of documentation about country experiences, and offers an opportunity to discuss ideas and provide advice, support and encouragement on the implementation of a human rights-based approach to women's and children's health. There is an important role for WHO, in close collaboration with OHCHR and other stakeholders, in helping to ensure the setting-up of such an arrangement, mainly directed towards those working in the executive and legislative branches of government.

Finally, human rights-shaped women's and children's health interventions can help governments comply with their binding human rights obligations, health workers deliver their professional objectives, and individuals, communities and populations improve their health, life and well-being.

