



OFFICE OF THE HIGH COMMISSIONER FOR HUMAN RIGHTS

Human Rights and the Millennium Development Goals in Practice:

A review of country strategies and reporting



UNITED NATIONS



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About the publication

This publication builds on a series of country and thematic background studies commissioned for the regional “Dialogues for Action: Human Rights and MDGs”, which took place in Johannesburg (South Africa) (9-10 September 2008) and Bangkok (16-17 October 2008).

Its primary objective is to review the extent to which—and how—human rights are reflected in national MDG-based development strategies and policies in a selected number of African and Asian countries, to identify critical gaps and challenges, and to see what practical lessons can be learned from these experiences. The publication, therefore, is intended for use by development and human rights practitioners, and specifically by policymakers, national human rights institutions, civil society organizations, and United Nations funds, programmes and agencies working to integrate human rights into national and international efforts to achieve the Millennium Development Goals (MDGs).

This publication, as well as the country thematic studies from which it draws, is guided by the analytical framework provided in *Claiming the Millennium Development Goals: A human rights approach*,¹ covering critical Goals and targets such as income poverty, economic growth and hunger; maternal mortality; water and sanitation; and global partnerships for development. The publication analyses recent national MDG progress reports and pertinent national development strategy documents of Bangladesh, Cambodia, Ethiopia, Ghana, India, Indonesia, Kenya, the Lao People’s Democratic Republic, Liberia, Nepal, South Africa, Thailand, Uganda, Viet Nam and Zambia.

The introduction explains the synergies and complementarities between human rights and the Goals, as well as the rationale for a human rights-based approach to development. Chapters I to IV review the integration of human rights and human rights-based approaches, including key human rights principles of non-discrimination, participation and accountability, in relevant national MDG-based policies and poverty reduction strategies. They also seek to identify national experiences in adapting, localizing and harmonizing MDG targets with human rights. A brief conclusion is provided at the end, drawing together the main themes. Finally, annexes I and II set out the conclusions of a 2008 desk review of MDG reports from the perspective of indigenous peoples’ rights and key recommendations to ensure closer alignment between economic growth strategies and human rights, respectively.

The publication attempts to complement the analytical framework provided in *Claiming the Millennium Development Goal* with empirical evidence and country analysis. Both publications are, therefore, intended to serve as a timely contribution to ongoing international debates on the Goals and human rights, as well as to national and global development action in the next five years and beyond the 2015 target date. The recent global food, fuel, climate and financial crises naturally compound the challenges of analysis. Data age even more rapidly in these circumstances. However, the purpose of this publication is not to evaluate, but merely to illustrate what it means in practice to integrate human rights in MDG monitoring and MDG-based development strategies.

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Abbreviations

EmOC	emergency obstetric care
GDP	gross domestic product
GPI	gender parity index
HIPC	Heavily Indebted Poor Countries Debt Initiative
HIV/AIDS	human immunodeficiency virus/acquired immunodeficiency syndrome
ILO	International Labour Organization
IMF	International Monetary Fund
MDGs	Millennium Development Goals
MDRI	Multilateral Debt Relief Initiative
NGOs	non-governmental organizations
OECD	Organisation for Economic Co-operation and Development
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNESCAP	United Nations Economic and Social Commission for Asia and the Pacific
UN-Habitat	United Nations Human Settlements Programme
UNICEF	United Nations Children's Fund
UNIFEM	United Nations Development Fund for Women
UNPFII	United Nations Permanent Forum on Indigenous Issues
WHO	World Health Organization

Introduction

Evolution of the Millennium Development Goals

The Millennium Declaration of 2000 set out an ambitious international agenda to tackle peace and security, development, human rights, and the environment. Alongside development goals on poverty, water and education, commitments were also made to promoting democracy and respect for all human rights. This included the right to development and relevant economic, social and cultural rights, with a particular focus on the rights of minorities, women and migrants, and the right to access to information.

In the following year, the development goals were slightly amended and published in a single list called the Millennium Development Goals:

1. Eradicate extreme poverty and hunger
2. Achieve universal primary education
3. Promote gender equality and empower women
4. Reduce child mortality
5. Improve maternal health
6. Combat HIV/AIDS, malaria and other diseases
7. Ensure environmental sustainability
8. Develop a global partnership for development

The Goals are accompanied by 18 targets, to be mostly reached by 2015, and are measured by indicators using 1990 as a baseline (see table below).

The targets and indicators were selected under the auspices of the United Nations Secretary-General and the list was broadly endorsed by United Nations funds, programmes and agencies, the World Bank, the International Monetary Fund and the Organisation for Economic Co-operation and Development (OECD). The United Nations General Assembly embraced the eight Goals only as late as October 2005. Its focus has always been on calling for the implementation and monitoring of all the goals and measures in the broader Millennium Declaration.

The Goals did not emerge in a vacuum, but represent the culmination of a decade-long global debate and earlier attempts to set international development targets.² They have subsequently gained a high profile, particularly among the international development community and a significant number of developing States. They have been lauded for providing a clear and simple means of benchmarking and assessing the progress of human development. According to the United Nations Millennium Project, policy and institutional reforms and resource allocations often result from an approach focused on time-bound targets.

Table. The Millennium Development Goals and linkages between the targets and human rights

Table. The Millennium Development Goals and linkages between the targets and human rights	
Goal 1. Eradicate extreme poverty and hunger	
<i>Target 1.A.:</i> Halve, between 1990 and 2015, the proportion of people whose income is less than \$1 a day	<i>Right to adequate standard of living</i>
<i>Target 1.B:</i> Achieve full and productive employment and decent work for all, including women and young people	<i>Right to work</i>
<i>Target 1.C:</i> Halve, between 1990 and 2015, the proportion of people who suffer from hunger	<i>Right to food</i>
Goal 2. Achieve universal primary education	
<i>Target 2.A:</i> Ensure that, by 2015, children everywhere, boys and girls alike, will be able to complete a full course of primary schooling	<i>Right to education</i>
Goal 3. Promote gender equality and empower women	
<i>Target 3.A:</i> Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015	<i>Women's rights to equality and education</i>
Goal 4. Reduce child mortality	
<i>Target 4.A:</i> Reduce by two thirds, between 1990 and 2015, the under-five mortality rate	<i>Right to life</i>
Goal 5. Improve maternal health	
<i>Target 5.A:</i> Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio	<i>Women's right to life and health</i>
<i>Target 5.B:</i> Achieve, by 2015, universal access to reproductive health	<i>Women's right to life and health</i>
Goal 6. Combat HIV/AIDS, malaria and other diseases	
<i>Target 6.A:</i> Have halted by 2015 and begun to reverse the spread of HIV/AIDS	<i>Right to health</i>
<i>Target 6.B:</i> Achieve, by 2010, universal access to treatment for HIV/AIDS for all those who need it	<i>Right to health</i>
<i>Target 6.C:</i> Have halted by 2015 and begun to reverse the incidence of malaria and other major diseases	<i>Right to health</i>
Goal 7. Ensure environmental sustainability	
<i>Target 7.A:</i> Integrate the principles of sustainable development into country policies and programmes and reverse the loss of environmental resources	<i>Rights relating to environmental health</i>
<i>Target 7.B:</i> Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss	<i>Rights relating to environmental health</i>
<i>Target 7.C:</i> Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation	<i>Right to water and sanitation</i>
<i>Target 7.D:</i> By 2020 to have achieved a significant improvement in the lives of at least 100 million slum-dwellers	<i>Right to adequate housing</i>
Goal 8. Develop a global partnership for development	
<i>Targets 8.A-8.D</i> cover aid, trade, debt, landlocked and small island States.	<i>Right to development. Economic, social and cultural rights</i>
<i>Target 8.E:</i> In cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries	<i>Right to health</i>
<i>Target 8.F:</i> In cooperation with the private sector, make available the benefits of new technologies, especially information and communications	<i>Economic, social and cultural rights</i>

It is difficult to judge on empirical grounds the extent to which the MDG enterprise has reduced poverty, although a significant amount of research continues to emerge.³ On the one hand, some Governments claim that the Goals have influenced their spending priorities. The *MDGs Status Report for Kenya* (2005) states that the Government's decision to increase funding for MDG-related programmes has seen funding for health, education, agriculture and infrastructure increase. The *Report on the Achievement of Millennium Development Goals: Indonesia* (2007) claims that, in the allocation of provincial budgets for 2003-2006, many districts and cities based their spending priorities on the MDG framework. Many donor countries, United Nations funds, programmes and agencies and the World Bank similarly claim that development priorities are now more closely aligned with poverty reduction as a result of the Goals.⁴ In addition, the Goals appear to have raised the profile of development issues among the general public, as well as among the human rights community. A number of "special procedures" of the United Nations Human Rights Council, including those dealing with extreme poverty, health, indigenous peoples, and water and sanitation, have been actively engaging with the Goals. Amnesty International has prioritized the Goals, and issues such as maternal mortality, within its "Demand Dignity" global campaign in the lead-up to the September 2010 Summit on the Millennium Development Goals.

On the other hand, it is not entirely clear how far the progress that has been achieved can be attributed to the Goals. One economist has commented that "private sector-led growth abetted by Government has been the engine in Asia, lifting many of the poor with the benefits of steady employment. Where progress is most needed, in Africa and other low-income regions, mobilization to achieve the Goals has so far seemed to have modest impact."⁵ There is also some evidence to suggest that the MDG agenda may have some negative impact on, for instance, slum upgrading, where the lack of emphasis on security of tenure has possibly added legitimacy to slum clearance policies that violate various human rights. The MDG agenda also seems to have only a limited impact on poverty reduction strategies. It has been pointed out that economic growth for income poverty reduction and social sector investments (education, health and water) are important priorities in most of the poverty reduction strategy papers; decent work, hunger and nutrition, sanitation, the environment and access to technology tend to be neglected.⁶

Relationship with human rights

At first glance, the Goals appear to be compatible with human rights, particularly economic and social rights (see table above). There is a substantial overlap in focus and it has been suggested that the Goals may raise the profile of economic and social rights. They contain clear quantitative standards to which all Governments have made a political commitment. This has been a significant development, since quantitative commitments had so far been made only in the context of labour and social security rights under conventions of the International Labour Organization (ILO).

Concurrently, concerns have been raised about how the Goals were formulated and are being implemented from a human rights perspective, particularly as they were decoupled from the broader agenda encapsulated in the Millennium Declaration. Do the Goals appear to be lower than human rights standards in some instances? For example, Goal 2 does not require primary education to be free, contrary to the near-universally ratified Convention on the Rights of the Child; and the goal of fair trade in the Millennium Declaration was reduced to free trade in the Goals. Furthermore, in middle-income

countries most of the quantitative targets are likely to be lower than minimum human rights standards. This can be discerned in the seemingly triumphant tone of some of their national MDG reports.

In addition, the targets do not pay sufficient attention to inequality, the rights of women, marginalized groups and the poorest of the poor. It is possible to achieve most of the targets without addressing the extreme poverty of the most excluded in a society. National and global power inequities appear to have been glossed over and there are no quantitative targets for Goal 8 on global partnerships, for example. Instead, the Goals tend to reflect a strong technocratic focus. One research project compared how Southern and Northern-based development non-governmental organizations (NGOs) and social movements incorporated the Goals and human rights in their activities.⁷ The main finding was that the Goals and to a lesser extent human rights were regularly cited by Northern-based organizations. Those in the South had barely engaged with the Goals and referred more often to human rights. This raises a concern that the Goals were more a donor-driven agenda, although a greater focus on poverty reduction in donors' policies could arguably be seen as a success in itself.

One response to these critiques was to call for States and donors to adopt a human rights approach to the Goals. This was strengthened by evidence of an almost total absence of human rights in MDG reporting. A study in 2005 found "a large discrepancy in the ways in which human rights issues are dealt within the context of MDG reporting" and when "moving from the policy domain to examine the programmatic side, the discrepancy between rhetorical references to human rights and actual programme content becomes even more marked."⁸ The United Nations Independent Expert on minority issues, Gay McDougal, came to a similar conclusion after examining MDG reports and poverty reduction strategy papers with regard to indigenous peoples and minorities:

The findings of this survey are revealing. Ethnic or linguistic minorities are mentioned in only 19 of the 50 MDG country reports reviewed. The inequalities experienced by religious minorities are mentioned in only two of the reports. An additional 10 reports mention only indigenous peoples without identifying any other minority groups. The degree to which minorities are mentioned varies widely, with some reports providing a good range of information under several MDGs and disaggregated data. In other cases, minorities are mentioned only in the background section describing the national population but without particular attention to their situation in relation to MDGs. Minorities were mentioned most frequently in connection with Goal 2 on universal primary education. Attention to indigenous peoples is in general significantly higher than attention to non-indigenous marginalized minorities across the reports. While attention to gender issues in many MDG country reports is positive, there is very little consideration of intersectional discrimination experienced by minority women, or targeted policies for marginalized minority women. Minorities are virtually absent from the MDG country reports from donor countries. None of the MDG country reports gives consideration to minorities under each of the eight Goals.

Source: A/HRC/4/9/Add.1.

Since 2005, the Secretariat of the United Nations Permanent Forum on Indigenous Peoples (UNPFII) has analysed MDG reports each year and its findings in 2008 are annexed below. While they indicate that there have been some improvements in focusing on indigenous peoples, they reiterate previous

recommendations that Governments should include indigenous peoples in the planning of the report and in the discussion of each Goal, ensure that they participate effectively in the planning, implementation, monitoring and evaluation of programmes and projects that will directly or indirectly affect them, and also improve the collection and disaggregation of data regarding indigenous peoples.⁹

Among others, the United Nations Development Fund for Women (UNIFEM), UNDP and OHCHR have issued publications outlining how a human rights approach could be adopted to each Goal. In *Pathway to Gender Equality* (2004), UNIFEM asked whether limiting gender equality and women's empowerment to primary and secondary education could "send the international community backwards". It pragmatically concluded that the Goals should be viewed instead as an opportunity to advance the Convention on the Elimination of All Forms of Discrimination against Women. It called for gender equality to be mainstreamed in all Goals and provide Goal-by-Goal guidance. In *Human Rights and the Millennium Development Goals: Making the Link* (2007), UNDP sought to draw on the synergies between the human rights and the MDG agenda. It pointed out how the human rights approach could improve efforts to reach the Goals and focus on the importance of setting minimum standards, disaggregation to reveal and address patterns of discrimination, and strengthened strategies for accountability.

Claiming the Millennium Development Goals, by OHCHR, sets out a tailored human rights approach to the Goals. States and development actors are asked to incorporate human rights in MDG-related planning, implementation and monitoring by:

- (a) *Aligning the Goals with human rights* by harmonizing MDG targets and indicators with human rights standards;
- (b) *Being transformational, not technocratic*, by adopting a human rights-based approach to empowerment and participation;
- (c) *Prioritizing rights* by making policy choices and resource-allocation decisions within a human rights framework;
- (d) *Claiming the Goals* by ensuring enforceable rights, accountability mechanisms and sustainable strategies.

International response

At the international level, there have been some positive responses to the express and implicit calls for closer alignment of the Goals with the normative framework of human rights and the policy implications of a human rights-based approach.

One particularly positive development came in 2001. The General Assembly supplemented Goal 6 by making a series of detailed commitments. These included: the development and implementation of multisectoral national strategies and financing plans for combating HIV/AIDS by 2003; the integration of HIV/AIDS prevention, care, treatment and support and impact mitigation priorities into the mainstream of development planning by 2003; reducing HIV prevalence by 25 per cent among young people in the most affected countries by 2005 and by 25 per cent globally by 2010; and ensuring by 2010 that 95 per cent of young people have access to the knowledge, education, life skills and services to reduce their vulnerability to HIV infection.¹⁰

The 2005 World Summit Outcome contained clear and unprecedented commitments by Member States to mainstream human rights in their national policies. In 2007, some of the targets were adjusted and one notable step was the inclusion of a target on reproductive rights under Goal 5. In 2007, the General Assembly, in its resolution 62/208 on the triennial comprehensive policy review of operational activities for development of the United Nations system, recognized the close linkages between development, peace and security, and human rights. There has also been a general call by UNDP on countries to adapt the Goals to the national context.¹¹ However, it has not recommended that the contextualization should take into account a State's human rights obligations.

There have also been some notable global failures. Negotiations on the Doha Declaration to concretize the commitments under Goal 8 to reduce agricultural protectionism have consistently failed. The 2007 revision of the MDG targets and indicators did nothing to address the unambitious and misguided target on slum upgrading. A review of the Millennium Project's reports reveals wide variances in the extent to which they recommend human rights approaches. The report on child and maternal health is grounded in a human rights perspective,¹² while that on water and sanitation appears rather technocratic and mentions human rights only as a rhetorical concept.¹³ The United Nations high-level task force on the implementation of the right to development, in its final report in March 2010, suggests a large number of areas where global partnerships within the scope of Goal 8 continue to require strengthening from a human rights perspective.¹⁴

Assessing the incorporation of human rights approaches in practice

A greater unknown is the extent to which States and other development actors have adopted a human rights approach at the national level, particularly during the past few years. Therefore, in 2008, OHCHR commissioned a series of research studies to review the extent to which regional and national MDG reports and related strategy documents (such as poverty reduction and sectoral strategies) incorporated a human rights approach. An initial examination of the selected MDG reports in most countries under review is not particularly encouraging.¹⁵ The number of references to human rights or specific human rights or the rights of groups is very low or absent in some reports. However, this is not to suggest that mere rhetorical references to human rights reveal the degree to which human rights approaches have been integrated in development practice, but it does at least indicate the extent to which human rights discourse has penetrated key development institutions.

This analytical exercise went beyond merely looking for explicit human rights language. Rather, it asked what dimensions of MDG reporting and strategizing are consistent with a human rights approach, and what is conflicting or missing. In addition, these studies sought to question how these gaps and challenges could effectively be addressed from a human rights perspective and what good practices and lessons could be identified. Papers were commissioned to focus on:

- (a) Income poverty and economic growth strategies (targets 1.A and 1.B);
- (b) Hunger (target 1.C);
- (c) Maternal mortality (target 5.A);
- (d) Water and sanitation (target 7.C);
- (e) Global partnership commitments (Goal 8).

In general, the analysis of these five subjects was based on the two regional MDG reports for Africa and Asia, a sample of national MDG reports and poverty reduction strategy papers from 15 countries and, in the case of the commissioned analysis on global partnerships, a number of MDG donor reports. Primary and secondary human rights literature was used to help evaluate these official MDG-related documents, including reports of the United Nations human rights treaty bodies as well as civil society documentation and scholarly literature.

This overview seeks to draw together the main themes identified in the five analyses as well as trends evident in other Goals not discussed therein. This publication is organized under the four main elements of the human rights approach to the Goals outlined in *Claiming the Millennium Development Goals* and examines the main cross-cutting themes under each.

■ I. Aligning MDG targets with human rights

In *Claiming the Millennium Development Goals* it was recommended that States should align MDG targets and indicators with international human rights standards. There was strong emphasis on aligning them closely with the relevant economic and social rights obligations, and on ensuring that the targets and indicators address the human rights of women and excluded groups. It noted that countries could adopt additional human rights-related goals and pointed to the example of Mongolia, which had adopted a ninth goal on democracy and governance. Such adjustment is supported in principle by UNDP and the World Bank, which argue that the global Goals were always intended to be adapted to the national context.¹⁶

A. Positive and negative examples of alignment

The most well-known example of adjusting MDG targets to a country's situation, and possibly human rights obligations, is Thailand's MDG-plus model, which adapted 9 of the 11 domestic targets. For example, income poverty was to be reduced to 4 per cent of the population and the goal of universal education extended from primary to secondary education. More specific targets were set for women (such as doubling the proportion of women in the national parliament, administrative organizations and civil service executive positions by 2006) and marginalized regions (reducing by half the under-five mortality rate in highland areas, selected northern provinces and three southernmost provinces by 2015).

Latin America and the Caribbean, as a whole, amended target 2.A to include secondary education with a target of 75 per cent of children to be accorded access by 2010. However, it did not indicate whether this meant lower secondary (grades 7–9) or complete secondary education. The Inter-American Development Bank notes that “the region does not appear to be that distant from the more demanding goal of secondary enrolment, if it is understood as encompassing the lower secondary grades. The picture worsens significantly if secondary is defined as the complete post-primary cycle”.¹⁷ One of the strong criticisms of MDG monitoring and target-setting in that region is the lack of disaggregated targeting and data, especially with respect to indigenous peoples and other ethnic minority groups.¹⁸ However, there is a positive country experience in Ecuador, for example, which has now started to develop MDG reports for Afro-descendants and indigenous peoples and disaggregates data accordingly.

In Africa, one positive innovation concerns Kenya's water and sanitation sector. At a multi-stakeholder conference in November 2007, six targets were set for 2008. This included a 10-per-cent increase in coverage in each region of Kenya. Such disaggregated targets are crucial to ensure that reported improvements in national averages do not mask continuing wide disparities across the eight regions. As its MDG report of 2005 made clear, only 22 per cent had access to safe water in the north-east compared with an urban average of 89 per cent and a rural average of 49 per cent. However, these urban figures in themselves are highly questionable. Nairobi is listed as having an access figure of 92.6 per cent. Yet, two thirds of its inhabitants are living in informal settlements with no access to safe water; they rely on vendors selling water of variable quality or use polluted dams or illegal connections. It is likely that this group is included in the rural figure and there is a need for the country

to disaggregate water and sanitation statistics according to property status, in order for policies to be properly targeted.

The need for closer alignment of MDG targets with human rights can be vividly seen in target 7.D, where it appears that certain MDG-based strategies have served as a cover to justify human rights violations. For example, it has been argued that a provincial slum clearance law in South Africa and moves to replicate it were based on a flawed interpretation of target 7.D:

News that the KwaZulu-Natal Elimination and Prevention of Re-emergence of Slums Act will be replicated in other provinces comes as no surprise. Since 2001, national and provincial housing departments have been mandated with achieving this target, which stems from a fundamentally flawed South African interpretation of the United Nations Millennium Development Goals of 2000. ... One of the United Nations MDG targets is to significantly improve the lives of 100 million slum-dwellers—10 per cent of the slum population—by 2020. The slogan “Cities Without Slums” accompanies this target. ... Improving the lives of 10 per cent of slum-dwellers by 2020 was conceptualized as a first step to eventually achieve cities without slums.

Source: Marie Huchzermeyer, “Slums law based on flawed interpretation of UN goals”, *Business Day* (Johannesburg), 19 May 2008.

The author of this same newspaper article went on to point out that nowhere does the United Nations suggest it has a target for achieving cities without slums and that the United Nations Human Settlements Programme (UN-Habitat) positively discourages forced eviction and slum clearance policies. In this instance, the Constitutional Court of South Africa struck down the law in 2009 after the social movement Abahlali baseMjondolo launched a case claiming the law violated constitutional rights. Unfortunately, this problematic interpretation of target 7.D is not confined to this case. In its 2005 MDG report, Viet Nam mentions urban slum clearance as one of the measures it has taken to reach target 7.D. Thus, instead of rectifying the absence of references to secure tenure and participatory upgrading in target 7.D, some countries appear to be linking the MDG agenda with slum clearance policies that appear to conflict directly with their own human rights treaty obligations.

B. Income poverty

The income poverty target has been criticized by many commentators for a variety of reasons.¹⁹ Having a dollar-a-day poverty line was arguably too modest a goal in a historical perspective and it is not surprising that this is the Goal most likely to be reached at the global level by 2015. Indeed, according to the *Millennium Development Goals Report 2010*,²⁰ the global economic crisis has slowed progress, but the world is still on track to meet the poverty reduction target, with an expected reduction to 15 per cent by 2015.

In August 2008, the World Bank also confirmed these suspicions by releasing poverty figures based on 2005 cost-of-living data (previous measurements were based on 1993 data). They showed that a further 400 million people lived below an adjusted poverty measure of \$1.25 per day²¹ and recent rises in food and oil prices sadly mean that this number has increased further. Moreover, newly updated

estimates suggest that the global economic crisis will leave an additional 64 million in extreme poverty by the end of 2010, principally in sub-Saharan African and Eastern and South-Eastern Asia.

Commissioned research suggests that countries are regularly advised to set national poverty lines to ensure a more contextually appropriate goal and many appear to be doing so. In Bangladesh, a standard/upper poverty line and extreme/lower poverty line have been calculated according to the cost of basic needs, although no information is provided either in the MDG report or in the poverty reduction strategy paper on how these were calculated. The poverty reduction strategy paper of October 2005 sets specific targets for reducing the number of people living below the upper line to 25 per cent by 2015 and those living in the lower bracket to 9.5 per cent, which is slightly more ambitious than its original target of reducing income poverty to 29 per cent and extreme poverty to 14 per cent, as set out in its MDG progress reports of 2005 and 2007. In Ethiopia, Viet Nam and Indonesia, similar modest targets (usually 5-6 per cent below the poverty line halved) can be found. Both Kenyan and Ugandan poverty targets are more ambitious, aiming for a cut to 10 per cent under the poverty line instead of 28 per cent by 2015 (Kenya) and by 2017 (Uganda), according to their national MDG progress reports of 2005 and 2003, respectively.

However, it is questionable whether these adapted targets are adequately linked to a State's obligation to progressively realize the right to an adequate standard of living within its maximum available resources, as provided for in article 2 (1) of the International Covenant on Economic, Social and Cultural Rights, for example. In Kenya, it is perhaps arguable that the goal is too ambitious. Its 2005 MDG report actually predicts an increase in income poverty from 56 per cent in 2000 to 65.9 per cent by 2015, making the target of 10 per cent seem rather unrealistic. On the other hand, Viet Nam's goal seems under-ambitious. It has reached the Goal of halving those living on a dollar a day and has set 10-11 per cent as the proportion of people living under the national poverty line by 2010. With growth at roughly 8 per cent a year until 2008 and 5-6.5 per cent in 2009-2010, a more ambitious target could be aimed for, particularly if poorer regions, including those populated by ethnic minority groups, are to be reached.

The second key criticism of the income poverty target is that it can be attained without improving the situation of the poorest of the poor or excluded groups. One indicator for target 1.A does measure the depth of poverty although it does not reflect its severity. In any case, neither this indicator nor the dollar-a-day indicator is required to be measured in a disaggregated fashion, and no global targets are set for reducing the severity or depth of poverty. It is possible to collect such data and it is notable that Kenya's poverty reduction strategy paper provides poverty figures by geographic area ranging from 6 to 78 per cent across sub-localities in Nairobi, for instance. Furthermore, no targets were set within Goal 1 for concrete measures, such as coverage of social safety nets. Taking steps to realize the right to social security can play a critical role in reducing income poverty, as the experiences of Brazil, the Republic of Korea and South Africa demonstrate. Moreover, ILO estimates that almost all countries can afford a basic and universal social security package.²²

In the countries sampled, there were a few attempts to develop specific indicators to reach the poorest of the poor or introduce accompanying mechanisms such as social security. Indeed, there has been growing movement to include social protection as a target in the Goals.²³ The global financial crisis has demonstrated the importance of social protection in reducing income poverty and protecting MDG

gains—an issue that is also reflected in the report of the Secretary-General “Keeping the promise”.²⁴ Bangladesh’s extreme/lower poverty line and its associated target of reducing extreme poverty represent one attempt to reach the poorest of the poor. Moreover, in *Millennium Development Goals: Mid-Term Bangladesh Progress Report 2007*, Bangladesh seems to acknowledge that the Goals imply halving the share of the poorest quintile in both national income and consumption, and further acknowledges that it is not meeting this target despite having succeeded in halving income poverty. None of the other countries in the sample attempted to introduce targets for the poorest of the poor and excluded, although Uganda includes a Gini coefficient (which shows an increase in inequality) while a number of countries disaggregate data by region.

C. Hunger

The background analysis on target 1.B noted that the undernourishment indicator is problematic to the extent that it measures food availability, and whilst there are some adjustments to account for inequality in food distribution, they do not give a very reliable indicator of actual individual food consumption or household food security—and many of the MDG reports make this point. The anthropometric indicator for underweight children under the age of five is acknowledged to be a more reliable measure, but should be supplemented by indicators for child stunting and child wasting.

In the reviewed MDG reports, two common features were apparent: the lack of disaggregation and the need for additional indicators. None provided hunger data disaggregated by gender, ethnic, indigenous, rural/urban, agro-ecological zone, administrative region, class, caste, religion. Even linguistic disaggregation can be very important in ensuring appropriately targeted interventions. None of the countries introduced additional targets and indicators for policies that would be critical for addressing hunger, such as access to land and social security.²⁵

D. Education

Outside sub-Saharan Africa, most countries are on track to ensure universal primary education by 2015 or have already largely achieved it. This suggests that the Goal was unambitious for many countries despite the need for 100 per cent coverage and certainly below the requirements under international human rights treaties. As discussed above, some countries have already set additional targets for secondary education. Latin America and the Caribbean introduced a target of 75 per cent in secondary education and Thailand introduced a target of 100 per cent. Setting targets for secondary education in Africa is also feasible despite the slower progress on primary education.

However, it appears that no country has set targets for other aspects of the right to education, for example that primary education should be free, compulsory and of a certain quality. Some countries such as Kenya and Malawi have introduced free primary education as a strategy and China has introduced scholarships for poor students, including free textbooks. China has also emphasized that education is compulsory and, along with Viet Nam and Malawi, is paying greater attention to the quality of education. However, from a sample of MDG reports, there is no attempt to set targets for—or measure—the affordability of primary school education.

E. Maternal mortality

Almost all MDG reports reviewed adopt the 1990-based MDG indicators of maternal mortality and skilled birth attendants. The former is highly problematic and usually misleading since maternal mortality is highest in those countries where data collection is poor, an issue acknowledged in some MDG reports. The indicator of skilled birth attendants is an improvement, but the six indicators included in the 1997 *Guidelines for Monitoring the Availability and Use of Obstetric Services* provide a more accurate measurement of whether a service is of sufficient quality, available and equitably distributed. A review of some MDG reports and country policies indicates a general trend to begin to recognize the importance of emergency obstetric care (EmOC) in strategies, but it is generally neglected in MDG reports in terms of indicators or development of targets.

For example, in 2004 Uganda actually commissioned an EmOC assessment, which found that the “national met need” was only 23.9 per cent and acknowledged it should be 100 per cent. Scaling up EmOC was recognized as a strategic priority in Uganda’s *Road Map for Accelerating the Reduction of Maternal and Neonatal Mortality and Morbidity 2006-15*. However, this reorientation towards EmOC is not reflected in its 2007 MDG progress report, which reports only on skilled birth attendants but not this type of assessment. It does mention, in passing, that the first direct intervention needed is improved access to EmOC and that harmful cultural and traditional practices affecting the health of women are among the many other challenges that persist. Uganda has an extremely high and persistent maternal mortality ratio, and it would seem that the *Road Map* is yet to be implemented.

In India, EmOC was included as a strategy in the initial phase of the 1997-2003 Reproductive and Child Health Programme, but at that time there appeared to be no comprehensive data on the unmet need for EmOC or on how many EmOC facilities were actually functional. However, the National Family Health Survey-3 did report on the reasons why women did not give birth in health facilities: 26.2 per cent because they thought it was too expensive; 11 per cent because it was too far; and 5.9 per cent because their husbands or families did not allow them. The current national plan for health of women and children (2007-11)²⁶ acknowledges the need for special measures to assist women in accessing health facilities. However, discrimination, for example on the basis of caste and ethnicity, seems to be under-measured. Maternal mortality was reported to be higher in areas with a higher number of Dalit communities and Adivasi tribal groups and the level of maternal mortality was strongly correlated with the availability of amenities and infrastructure in the village.²⁷ Human rights groups have also reported that pregnant Dalit women have been denied access to health facilities, including in emergencies.²⁸ This suggests that there is a critical need to disaggregate the indicators according to caste and tribal group.

The only country in the sample to report on some aspects of the *Guidelines for Monitoring the Availability and Use of Obstetric Services* was Kenya, which reported that only 9 per cent of its health facilities were equipped to provide comprehensive essential obstetric care while only 15 per cent could provide basic obstetric care. In North-Eastern Province, UNICEF researchers actually found that there was adequate coverage of comprehensive EmOC services, but that the quality of services was poor, as evidenced by the number of deaths, and some procedures such as assisted vaginal delivery and removal of retained products were not available and access to essential drugs was limited.²⁹

Worldwide, the maternal mortality ratio declined slightly, at a rate of less than 1 per cent a year, between 1990 and 2005. The 2010 Report of the Office of the United Nations High Commissioner for Human Rights on preventable maternal mortality and morbidity and human rights³⁰ stated that five types of obstetric emergencies accounted for some 73 per cent of all maternal deaths. They are haemorrhage, infection or sepsis, unsafe abortion, pre-eclampsia and eclampsia, and prolonged or obstructed labour. According to the World Health Organization (WHO), UNICEF, the World Bank and others, most maternal deaths and disabilities could be prevented through access to sufficient care during pregnancy and childbirth and effective interventions. In 1986, WHO estimated that 88 to 98 per cent of maternal deaths were preventable³¹ and, more recently, in *The State of the World's Children 2009: Maternal and Newborn Health*,³² UNICEF reaffirmed that approximately 80 per cent of maternal deaths could be averted if women had access to essential maternity and basic health-care services.

The Report further highlighted an overwhelming number of interrelated reasons for maternal mortality. These reasons ultimately prevent pregnant women from getting the health care they need and are often referred to as the “three delays”: (a) delay in seeking appropriate medical help for an obstetric emergency because of cost, failure to recognize the emergency, poor education, lack of information and gender inequality; (b) delay in reaching an appropriate facility for reasons of distance, infrastructure or transport; and (c) delay in receiving adequate care at the facility because of staff shortages or because electricity, water or medical supplies are not available. This only reaffirms that urgently addressing these delays, taking preventive measures, and ensuring affordable (free where possible) and effective access to EmOC services should top countries’ priorities in their efforts to substantively reduce and eventually eliminate persistent maternal mortality, which of all Goals is the furthest from being achieved.

F. Water and sanitation

A review of MDG reports and sectoral strategies reveals some attempts to align target 7.C, both explicitly and implicitly, with the right to water and international and regional human rights standards relating to sanitation. South Africa and Kenya have set targets for universal access to water and sanitation before 2015, while Sri Lanka has set a goal for universal access to *safe* water by 2025. Other countries surveyed have not set such targets and it is one of the areas omitted in Thailand’s MDG-plus model.

In South Africa, the constitutional and legal obligations to progressively realize the right to water and sanitation predate the Goals, which may explain why the MDG discourse in South Africa is not significant in this sector. However, one of the challenges in South Africa is the disconnections of water supply, which are not picked up by MDG indicators, and there is a vigorous national debate over the precise number. This suggests that additional indicators such as the number of disconnections and also affordability are needed to complement standard access indicators. The obligation of progressive realization also needs to be considered when setting targets. In a number of municipalities in South Africa, there is close to *basic* universal access, but those living in informal settlements may have to wait more than a decade before they can have an adequate amount of water owing to the long waiting lists for upgraded housing.

In Kenya, the Constitution (as at July 2010) and other legislation on water and public health do not explicitly provide for a right to water and sanitation, which is recognized only in certain sectoral policies. Despite noticeable improvements in service delivery, pro-poor extension efforts were limited to the rural sector until 2007, which resulted in minimal improvements in water and sanitation coverage in informal settlements. However, unlike other countries, Kenya has set minimum targets for water sufficiency. The *MDGs Status Report for Kenya* (2005) stated that to achieve the water and sanitation-related Goals, the nationwide coverage of safe water supply would need to increase to 80 per cent and coverage of improved sanitation to 96 per cent. The National Poverty Eradication Plan also sets out that all Kenyans should have water by 2010 and sanitation by 2015.

Indonesia's MDG progress reports and relevant policies and laws indicate there is no national rights-based strategy on water and sanitation. As at 2007, the provision of both drinking water and basic sanitation appeared to be low on the Government's list of political priorities, reflected in a relatively low level of investment. Its 2007 MDG report stated, nevertheless, that access to sanitation in both rural and urban areas had consistently improved, from 30.9 per cent in 1992 to 69.3 per cent in 2006, and that Indonesia had, therefore, achieved the sanitation-related Goal. However, its MDG reports use only outcome indicators, and did not report in a disaggregated fashion on whether sufficient efforts were being made, especially with regard to vulnerable groups.

The United Nations Independent Expert on the issue of human rights obligations related to access to safe drinking water and sanitation, Catarina de Albuquerque, is concerned that the global MDG target on access to water and sanitation would still leave 672 million people without access to "improved" water sources and 1.7 billion people without access to sanitation by 2015, although achieving these targets would undoubtedly represent a great success. Nevertheless, much can be achieved where there is political will. For instance, in Bangladesh, the National Water Policy of 1998 and the National Sanitation Strategy of 2005 recognized water and sanitation as human rights, and set targets for universal access to safe drinking water and sanitation to be achieved by 2011 and 2013, respectively.

There are other ways in which human rights can fill gaps in monitoring Goal 7. While target 7.C explicitly refers to access to *safe* drinking water, the indicator does not measure quality directly, and the assumption that improved sources are more likely to provide safe water than unimproved sources is misleading. To monitor this target the collected data are often disaggregated by rural/urban areas, while further disaggregation is indispensable for effectively detecting discrimination on all prohibited grounds under human rights treaties. In this respect, it is important for data to be disaggregated by wealth quintile as well as by gender. In this respect, it is positive that UNICEF and WHO are beginning to develop progressive and disaggregated monitoring methods by using a non-binary ladder of achievement (i.e., looking at overall progress in moving from open defecation to household toilets) and taking steps to measure progress for the poorest of the poor.

G. Global partnership

The importance of a global partnership in Goal 8 is mentioned frequently in national reports as well as in the MDG reports of donor countries. There is a marked absence of quantitative and time-bound benchmarks for this particular Goal; its accountability framework, therefore, needs to be significantly

strengthened from a human rights perspective. The qualitative targets are matched only with a detailed list of indicators from debt relief to development aid and trade that ask for the creation of benchmarks. This is reflected in many donor reports, which tend to list development aid projects and programmes without a detailed assessment of how they are systematically addressing the range of issues raised in Goal 8. The United Nations high-level task force on the implementation of the right to development recently submitted its final report, outlining how global partnerships within the scope of Goal 8 could be strengthened from a human rights perspective.

From 2001 to 2008, some targets were actually set, either at various international meetings or through objectives established in the policies of donor countries and international financial institutions. However, they are often far from being met and are more restrictive in practice than originally envisaged.

For example, in 1970 economically developed countries committed themselves at the United Nations General Assembly to “progressively increase official development assistance to the developing countries” and “exert [their] best efforts to reach a minimum net amount of 0.7 per cent of gross national product at market prices by the middle of the Decade”.³³ The target was not met in 1975 or by 2000. It was then omitted in Goal 8 with the aid as percentage of gross domestic product (GDP) being relegated to an indicator, although the Group of Eight (G-8) at its Summit at Gleneagles, United Kingdom, in 2005 resolved to double its aid to Africa by 2010 compared to 2004 levels and made commitments to provide aid for specific Goals.³⁴ Between 2002 and 2006, official development assistance increased, but in 2007 it fell by 8.4 per cent. Aid to Africa has increased overall—10 per cent in real terms—but it is not on track to reach the Gleneagles commitment.

In the 2005 Paris Declaration on Aid Effectiveness, donor countries also established aid effectiveness targets to be reached by 2010, including continued progress in untying aid and reducing by two thirds the number of parallel project implementation units. Reviewing the progress made so far at Accra in September 2008, developing and donor countries agreed in the Accra Agenda for Action that the Paris Declaration “created powerful momentum to change the way developing countries and donors work together” but that the “pace of progress is too slow” (para. 6). Research shows that the percentage of untied aid for Uganda, Kenya and Ethiopia increased between 2006 and 2008, but decreased in Cambodia. Attaining a global picture is particularly difficult since the status of almost 50 per cent of aid is unreported.

Despite these commitments, recent crises and economic uncertainty make for a gloomy global picture. According to *The Global Partnership for Development at a Critical Juncture: MDG Gap Task Force report of 2010*,³⁵ aid delivery is slowing down, with only 0.31 per cent of donors’ gross national income allocated as official development assistance—far short of the United Nations target of 0.7 per cent. In particular, Africa is expected to receive only about \$45 billion in 2010, i.e., \$16 billion short of the Gleneagles target (in 2009 prices). Consequently, commitments to double aid to Africa by 2010 will not be met. Moreover, despite reported improvements in aid effectiveness and 87 per cent of bilateral donor aid in 2008 being untied, much remains to be done to improve the predictability of aid and reduce transaction costs. The Task Force further recommends expanding cooperation between developing countries and exploring innovative financing mechanisms in addition to traditional aid modalities.

The MDG Gap Task Force is also uncertain of the prospects of the Doha Round multilateral trade negotiations. A number of low-income countries were already in debt distress before the crisis erupted and, by the end of May 2010, only 28 countries out of the 40 countries eligible for debt relief under the Heavily Indebted Poor Countries Debt Initiative (HIPC) had reached their completion point. Funds for essential medicines are also drying up. Given this situation, a number of priority actions are required, including cutting trade tariffs and removing non-tariff barriers, providing duty-free and quota-free market access to least developed countries and extending the flexibilities of the Agreement on Trade-related Aspects of Intellectual Property Rights (TRIPS) for generic and essential medicines. Reducing the debt burden of the least developed countries remains critical if the Goals are to be achieved by 2015, in line with the commitments on debt sustainability made in the Monterrey Consensus. These challenges call for acceleration of delivery on financing for development commitments.

■ II. Empowerment and participation

Empowerment and participation, which are key human rights principles, have become a standard feature of development discourse. The third key recommendation of the Millennium Project focused on the need for broad-based participation in implementing the Goals:

- Developing countries should craft and implement the MDG-based poverty reduction strategies in transparent and inclusive processes, working closely with civil society, the domestic private sector and international partners.
- Civil society should contribute actively to designing policies, delivering services and monitoring progress.
- Private sector firms and organizations should contribute actively to policy design, transparency initiatives and, where appropriate, public-private partnerships.³⁶

The human rights dimension was also emphasized in the Accra Agenda for Action. Developing countries committed to working with parliaments, local authorities and civil society towards an “open and inclusive dialogue on development policies”. Donors would help build the “capacity of all development actors” and all partners would “ensure 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” (para. 13).

A human rights approach requires a particular focus on the quality and accessibility of such processes. Empowerment requires the recognition that people are the prime agents of development and need to be part of the transformation of the structures and the overcoming of the obstacles that have created or contributed to poverty. Participation includes effective respect for civil and political rights, such as the right to vote, freedom of expression and freedom of association. Indeed, a number of MDG reports make a link between political participation and economic and social development. Kenya’s MDG report of 2005, for example, partly tied poverty to poor democratic governance under the former regime and committed itself to translating new democratic space into development gains. However, civil and political rights are only part of the equation. The Chronic Poverty Research Centre recently argued, paradoxically, that social protection programmes were often created in an electoral context by political parties representing broader political movements but that some countries with “illiberal” or “less-than-open political systems” had been best at addressing chronic poverty in their poverty reduction strategies.³⁷ However, the balance of evidence strongly supports the instrumental, as well as constitutive, importance of civil and political rights for development.³⁸

Beyond civil and political rights, specific development-related participatory processes should be critically assessed as to whether:

- There are mutually agreed minimum standards for the participatory process;
- Individuals can participate in the design, implementation and monitoring of development strategies that affect them;
- Women and marginalized groups are effectively included;
- Elite capture is prevented and unjust power relations are challenged;

- The process is transparent and information is accessible; and
- Accountability mechanisms ensure that the participatory process is held to the minimum standards.

It is notable that participation as envisioned by the Millennium Project does not include grass-roots and community involvement but seems to be exclusively focused on organizational participation. This contradicts other work in development, including by the World Bank, to encourage community-driven development at scale.³⁹

At a simplistic level, one can ask what level of participation there was in the preparation of MDG reports. The preparation of MDG reports should be participatory⁴⁰ and it is clear that UNDP has taken steps to encourage multi-stakeholder and NGO participation. For example, in Bulgaria, the Government authors of the second national MDG report consulted ministries, academia, NGOs and the United Nations country team with the assistance of UNDP. Thailand's 2004 MDG report claimed to have been prepared through broad consultation with Government agencies, the United Nations country team, the World Bank, UNDP, NGOs and national consultants. However, what is clear is that the consultations rarely appear to have extended beyond the capitals, and civil society participation is often confined to professional NGOs and does not include social movements and representative organizations. The Secretariat of the United Nations Permanent Forum on Indigenous Issues praised Thailand for its specific focus on northeast and southernmost provinces, where many indigenous peoples and fisherfolk live; however, it further noted the apparent absence of participation from indigenous peoples' organizations in the report.⁴¹

The same tendency is revealed in national planning, for example with poverty reduction strategies and other economic and sectoral strategies. An internal World Bank review of participation in poverty reduction strategy papers in 2002 found that national Governments tended to hand-pick civil society groups and often ignored non-traditional NGOs and community-based organizations located outside the metropolis or those engaged in niche issues.⁴² Instead, grass-roots and community involvement is generally viewed as relevant only to implementation. The nutrition programme in Bangladesh included a participatory element in its design and implementation, but this was with the aim of having nutrition services increasingly managed by local communities. However, there have been efforts to ensure broad-based participation in national planning in some countries, and the recent poverty reduction strategy in Liberia is perhaps a noteworthy instance, extending to village level across the country.

The blame cannot be pinned entirely on national Governments. One of the key objectives of poverty reduction strategy papers, for example, is to trigger the release of funds by the World Bank, the International Monetary Fund (IMF) and other donors.⁴³ Moreover, according to the Millennium Project and the Millennium Villages initiative, the MDG agenda often focuses on providing and expanding supply-side development interventions, such as school places, bed nets, health facilities, and water and sanitation systems. This approach is, of course, sorely needed in many countries where the State's capacities and role have diminished under structural adjustment programmes. However, there has not been much focus on scaling up successful community practices as part of national planning. It has been argued that, in slum upgrading, Governments need to build on the success of large-scale informal land delivery, as well as address its shortcomings,⁴⁴ while in the Islamic legal context, it has similarly been argued that

well-intentioned donor-driven efforts to establish modern land systems must not ignore the obduracy of informal norms, practices and processes.⁴⁵ This problem surfaced in some of the major slum-upgrading projects related to the Goals, which failed to take this into account.⁴⁶

There are, however, also examples of successful community projects, such as slum-upgrading projects in Thailand, that have been scaled up to the national level, where they are administered by NGOs which passed on Government funds and loans according to plans submitted by communities. The same applies to efforts to reduce maternal mortality. While provision of EmOC facilities is critical in preventing maternal mortality, an empirical study showed that community-based strategies and context-specific services are crucial in reducing maternal mortality.⁴⁷

Participation generally tends to be more evident in project implementation or in service delivery (involving user groups) than in policy formulation. For example, all the countries reviewed for the present publication make some provision for the participation of users in water and sanitation programmes. In Sri Lanka, there are significant policy measures to ensure such participation.⁴⁸ This is especially the case with rural water-supply and sanitation projects, where the prevalent policy is to include the participation of users, planners and policymakers at all levels of sector activity. Community-based organizations contribute to the capital investment of water and sanitation facilities, take ownership of the facilities and assets, and take full responsibility for sustaining and maintaining them. Participatory approaches to water and sanitation delivery are emerging only in low-income settlements in urban areas, however. In Bangladesh, the Government has officially adopted the Community-Led Total Sanitation approach, which was developed by the Village Education Resource Centre and WaterAid, and has been credited with raising awareness about the importance of sanitation and helping to eliminate open defecation. This approach advocates the empowerment of the community to examine its sanitation status, to take action to address it, to find and finance its own sanitation solutions, and low-cost sanitation technologies have been developed as a result.⁴⁹

In order to increase participation in policy formulation at the outset, there need to be enforceable guarantees for public access to a wide range of information, especially for the very poor, along with clear standards for participation and capacity-building to ensure active and informed representation of vulnerable and marginalized groups. Participation in decision-making, where it exists, has mostly been limited to established NGOs, rather than active engagement of representatives of vulnerable and marginalized groups.

■ III. Prioritizing rights in policy

A human rights approach does not automatically prescribe policy choices or resource allocations. In general, it provides a framework for assessing policy choices and places an emphasis on participation. However, in some cases the international human rights treaties set forth clear requirements on the types of policies that States that have ratified them should pursue, such as providing free primary education. Furthermore, the United Nations human rights treaty bodies, in their general comments, have indicated that some policies always require a high degree of justification such as forced evictions, deliberative retrogressive measures or discriminatory acts, interference with labour rights, as well as interference with civil and political rights. Moreover, States will be asked to justify the absence of reasonable policies or steps towards realizing economic, social and cultural rights.⁵⁰

In this chapter, MDG reports and sectoral strategies will be discussed from the perspective of whether particular choices will:

- Result in other human rights being violated;
- Cause a decline in the realization of rights, contravening the principle of *non-retrogression*;
- Be adequately directed towards realizing human rights and ensuring equality, including gender equality; and
- Provide adequate resources and allow sufficient policy space.

A. Do no harm and avoid retrogressive measures

A number of policies listed in MDG reports and related strategies suggest that some human rights could be directly violated during policy implementation. For example, in order to achieve a higher rate of economic growth, in its 2005 poverty reduction strategy paper, Bangladesh suggested a number of strategies to improve private investment which also included reforming labour laws to discourage politicization and acquiring land and “then hand [it] over... to potential investors for setting up new industries”. The first measure may be necessary, given the high levels of politicization of the civil service, but there is no discussion on how such proposals might affect labour rights. The second proposal could violate human rights if there is no adequate compensation for and resettlement of those affected. The use of expropriation powers to acquire private land in situations of poor governance has been increasingly questioned.⁵¹ It is notable that, in a civil society shadow report on Bangladesh’s MDG performance, evictions, in particular of indigenous peoples, and poor land administration services, with much of the public land often occupied by the powerful rich, sometimes in connivance with the land administration’s employees, register high among the concerns of residents interviewed across the country.⁵²

Furthermore, in his 2009 report, the United Nations Special Rapporteur on the right to food, Olivier De Schutter, recommended that negotiations leading to large-scale land acquisitions and leases should comply with basic procedural requirements, including ensuring free, prior and informed participation of the local communities and adequate benefit-sharing. He urged that such agreements should take into account human rights which could be negatively affected by such investments, and should under no circumstances be allowed to trump the human rights obligations of the States concerned.⁵³

Policies other than those related to economic growth may also undermine human rights. For example, water, environment and energy policies under Goal 7, to protect forests, conserve water resources or build dams, can result in forced evictions. Some policies may have direct effects, for example Indonesia's 2004 draft regulation on water usage rights introduced property ownership over water resources, which is a comparatively rare practice. In 2008, the People's Coalition for the Right to Water (KRuHA) expressed its concern about this draft regulation from a human rights perspective, as the regulation's concept of water usage rights appeared to acknowledge water as an overwhelmingly economic good based on a system of property rights which privileged individual, exclusive and enforceable ownership over water through certification. Unlike land management, water management and allocation are very unclear and prone to give rise to conflict between individuals, communities and regions. The draft regulation prioritized the exploitation of water at the expense of conservation and ignored community participation. It was also feared that the draft regulation would facilitate the commercialization and privatization of water resources through open-ended usage rights.⁵⁴

Concerns have also been raised over new laws in many countries that are designed to prevent the spread of HIV, but can violate human rights and undermine efforts to achieve Goal 6. The Joint United Nations Programme on HIV/AIDS (UNAIDS) and UNDP have expressed alarm at the growing trend to criminalize HIV transmission and exposure, particularly in West Africa, Central Asia and Europe.⁵⁵ In some cases, the laws punish pregnant women as well as HIV-positive people who engage in behaviour such as kissing. The broad sweep of the laws means that many are unlikely to have their right to a fair trial realized, since they cannot foresee their liability for prosecution. UNAIDS and UNDP note that most prosecutions have been against members of ethnic minorities, migrants or men who have sex with men. Moreover, many of these laws restrict access to HIV-related services on grounds that appear to be discriminatory—for instance, excluding men who have sex with men, sex workers or drug users.

Other harmful policies fall under the category of “deliberatively retrogressive measures”. A general policy reform could mean the rollback of certain economic and social rights for various groups. A policy or measure that leads to a decline in the realization of human rights must be strongly justified, in accordance with the general comments of various United Nations human rights treaty-monitoring bodies. Indeed, a regional MDG report for Asia and the Pacific acknowledges that some policies for economic growth can have an adverse impact on the poor and the realization of the Goals. It specifically notes economy-wide institutional and policy reforms such as privatization, liberalization, capital account convertibility and the promotion of foreign investment.⁵⁶ It also states that such policies would need to be accompanied by active labour market interventions and robust safety nets. Full compliance with human rights would also require effective regulatory mechanisms for privatization in areas affecting economic and social rights.⁵⁷ However, a review of poverty reduction strategies and MDG reports in four Asian and three African countries reveals the negative effects of economic growth and agricultural and food policies. Yet, mitigating measures are generally not considered. One exception is Ethiopia, where the Government in its 2006 progress report on its poverty reduction strategy paper, resolved to introduce a voluntary separation package to mitigate the social impact of possible labour restructuring during privatization. In Viet Nam, the World Bank also recommended such measures,⁵⁸ although even these might need to be reviewed from a human rights perspective.

Another key policy that often undermines economic and social rights and the Goals is charging for services or increasing fees to levels that the poor cannot afford. Empirical studies regularly show that fees at health-care centres discourage women from giving birth in these centres or attending them during complications.⁵⁹ In India, 26 per cent of women cited this as a reason for not giving birth in health centres and the United Nations Committee on the Elimination of Discrimination against Women has specifically warned India that privatizing health services may make them less affordable.⁶⁰ Elsewhere, strategies in the water sector, for example in Sri Lanka and Indonesia, tend to value water solely as an economic commodity rather than a social good. In Kenya, there have been moves to tackle affordability directly with the Water Services Regulatory Board's *Tariff Guidelines* (2007), which aim to establish tariffs that balance commercial, social and ecological interests. They also provide for a pro-poor policy that includes the provision of a lifeline tariff for poor households and specific guidance on kiosk systems used by the poor.

The key challenge for many countries is to see the link between MDG-related policies and their possible harm to human rights. While democratic institutions, wider participation and judicial mechanisms can provide some form of accountability, it is often necessary to integrate specific and targeted processes that address these issues up front. For example, in many cases it may be necessary to carry out independent human rights impact assessments of policies before they are approved. Zambia has instituted such a system with respect to foreign investment, where a law requires a full and independent assessment of the potential negative effects of foreign investors in particular sectors. An example of mitigating policies is that of Indonesia, where a medium-term unconditional cash transfer programme was created in 2005 to reduce the impact of lower untargeted fuel subsidies.

B. Adequately direct policies towards the realization of human rights

The Committee on Economic, Social and Cultural Rights has stated that steps to realize socio-economic rights must be “deliberate, concrete and targeted as clearly as possible towards meeting the obligations” under the International Covenant on Economic, Social and Cultural Rights.⁶¹ In elaborating upon this obligation, the Constitutional Court of South Africa has set parameters for policymaking, which have been summarized as follows:

- The programme must be comprehensive, coherent and coordinated;
- Appropriate financial and human resources must be made available for the programme;
- It must be balanced and flexible, and make appropriate provision for short-, medium- and long-term needs;
- It must be reasonably conceived and implemented; and
- It must be transparent and its contents must be made known effectively to the public.⁶²

Moreover, the Court emphasized that meeting economic and social rights means that the most marginalized cannot be left out:

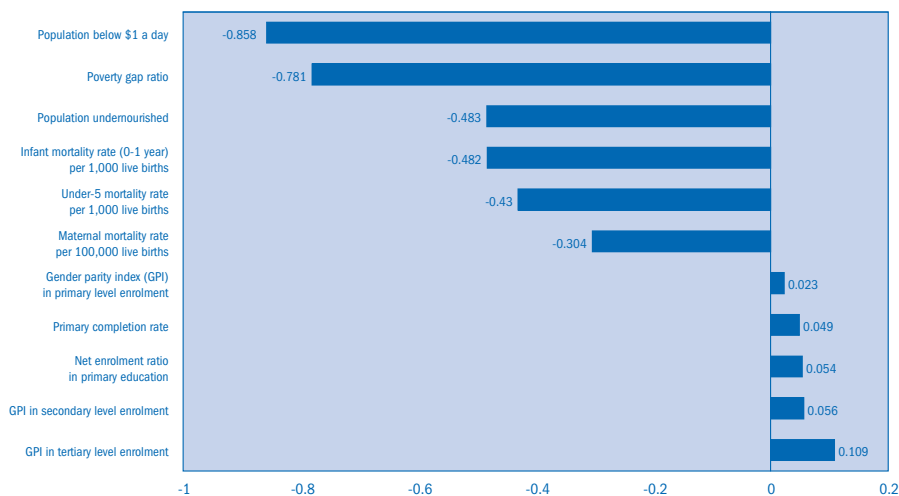
To be reasonable, measures cannot leave out of account the degree and extent of the denial of the right they endeavour to realize. Those whose needs are most urgent and whose ability to enjoy all rights therefore is most in peril, must not be ignored by the measures aimed at achieving realization of the right. *It may not be sufficient to meet the test of reasonableness to show that the measures are capable of achieving a statistical advance in the realization of the right.* (Emphasis added)

Source: *The Government of the Republic of South Africa and Others v. Grootboom and Others.*

Policies outlined in MDG reports, poverty reduction strategies and sectoral strategies do not always reflect actual policy implementation, but sometimes they do reveal whether or not MDG-related strategies incorporate a human rights-based approach.

Economic growth policies feature consistently in MDG reports and national planning instruments such as poverty reduction strategies. Economic growth is obviously one key means of increasing the resources necessary to fund social services and directly decrease income poverty through expanded work and livelihood opportunities. As the figure below shows, in Asia and the Pacific, the decrease in income poverty is strongly correlated with economic growth. However, it also indicates that the relationship with other Goals is more tenuous—with a weaker relationship with infant and maternal mortality and only little impact on education. In some cases, the relationship between growth and income poverty is weak. For example, 2008 data from the Ministry of Finance of Cambodia showed that, for every 10 percentage points in growth, there was only a 1-per-cent reduction in income poverty in the country, and economic growth tended to be narrowly concentrated and captured by formal urban areas, while 90 per cent of the poor live in rural areas.

Figure: Impact of a 1-per-cent increase in per capita GDP on selected MDG indicators (in percentage)



Source: *A Future within Reach 2008*, p. 41.

These empirical findings confirm once again that the type of economic growth and the wider policy and institutional settings remain crucial if the rights of the poorest and most marginalized are to be realized. The country experiences sampled in the present publication suggest that more conventional economic policies for promoting growth in the short-to-medium term are still often centre stage. The emphasis in each is usually on macroeconomic stability, trade liberalization, foreign investment, infrastructure, privatization and commercialization with an assumption that the benefits will trickle down.

In none of the strategies was there consideration of which sectors might provide more employment, even though decent work is one of the MDG targets and a substantive right. This was particularly glaring in the case of Uganda, which had a strong emphasis on agro-processing and the commercialization of agriculture. While this may lead to an increase in the value added of goods produced, World Bank studies have indicated that small farmers are often more productive than larger farmers and employment gains from investments in smallholder agriculture can be higher.⁶³ One positive aspect was the case of Ethiopia (as well as Uganda) in which “low-class” roads connecting rural areas were specifically included in road-building plans. Roads are a high priority for rural areas and a poverty impact assessment of the road investment in Ethiopia was carried out in advance. However, the budget allocated to roads was 2.5 times that for health, although it was roughly the same as that for education.

Turning to sectoral policies, a key concern is whether policies in health, education, water and sanitation, food, etc. are adequately directed to the poor. For example, as noted above with reference to maternal mortality and reproductive rights in India, the relevant health services tend to be unavailable or poorly available to the most marginalized groups. While the delays in equitably providing EmOC services to women were also noted above, one interesting policy is the Janani Suraksha Yojana scheme (conditional cash assistance programme in India), which focuses on demand barriers by giving women who live below the poverty line cash to encourage them to give birth in health-care facilities.

In 2004, the Lao People’s Democratic Republic was directing its resources to improving access to water and sanitation in the 72 poorest districts, which is consistent with the minimum core obligation under the right to water to provide everyone with basic access, and critical also for sanitation. However, concerns have arisen about the equity and affordability of services. For small isolated ethnic groups, the Government adopted an approach of relocating the communities to “accessible service centres”, which appeared to threaten both their traditional livelihoods and their culture. In 2004, privatization of the water sector was also envisaged; however, the Government of the Lao People’s Democratic Republic conceded that it did not at that time have a regulatory framework in place to ensure affordable services to marginalized groups.⁶⁴ Its MDG report of 2008 does not mention whether the water privatization was carried out and what the results were, despite reporting that the country was still on track to meet the water and sanitation targets by 2015, especially in urban areas.

C. Provide adequate resources

As noted previously, a number of MDG reports claim that budgetary allocations directed towards poverty reduction have increased. In its National Medium-Term Development Plan 2010-2014, Indonesia appears to be reorienting some of its public expenditure in a more pro-poor direction, with education, health, housing, food security and rural infrastructure expected to receive higher allocations. A similar

trend can be seen in Kenya with proportionate increases in social sectors over the past few years. However, it is also clear that not all key sectors and related human rights are covered. In Indonesia, sanitation was regarded as a low priority and, as a result, received little public investment—according to World Bank estimates, only 0.5 per cent of the total investment needed to meet the MDG target.⁶⁵ In India, public health investment accounts for only 0.9 per cent of GDP as of 2005, according to the national MDG report of 2005, which is low by comparison with other countries in the region, and certain other regions as well. The National Rural Health Mission 2005-2012 of India, therefore, aims to increase public health spending to 2–3 per cent of GDP. A number of United Nations human rights bodies have also recommended that India should increase budget allocations as many parts of the population are denied access to basic health services.⁶⁶

In many instances, it is clear that the resources States can allocate to meet the Goals and realize the minimum core of economic and social rights are limited. This applies not only to financial resources but to human resources as well. Certain African countries face particular difficulties, as emigration and HIV/AIDS have greatly reduced the number of health-care and teaching staff. Furthermore, some of the countries under review were entitled to debt relief, which increased the resources available, while others were not. Kenya has not qualified for debt relief under either the Heavily Indebted Poor Countries Debt Initiative (HIPC) or the Multilateral Debt Relief Initiative (MDRI), but Uganda was one of the first countries to benefit from HIPC and, in 2005, from the MDRI expansion, and has received debt relief worth US\$ 5.37 billion in nominal terms. Ethiopia reached HIPC completion point in 2004 and benefited from debt relief under MDRI in 2006. In nominal terms, it has received debt relief worth US\$ 6.48 billion. Liberia currently benefits from debt relief worth US\$ 2.84 billion. Nepal and Cambodia were never eligible for HIPC, although Cambodia would be eligible for IMF debt relief under the principles of equal treatment, as they are applied by IMF.

There are some indications that future debt may be less tied to international institutions, as a number of developing countries and countries with emerging economies move to issue government bonds. This may provide countries with more flexibility with respect to their macroeconomic policies to address the Goals and social and economic rights. At the same time, the World Bank's minimum conditions for loans, such as avoiding involuntary settlement without compensation, are not respected by all countries.

Moreover, one of the consistent challenges is whether countries' macroeconomic frameworks and policies permit the greater allocation of resources towards the social sectors. The International Monetary Fund has raised concerns over the macroeconomic challenges of scaling up aid. For example, exchange rates may appreciate, affecting exports, or inflation may rise, affecting growth⁶⁷ and potentially the cost of living for the poor. In some countries, there is clear evidence of policy conservatism on this issue. For example, in its National Medium-Term Development Plan, Indonesia places strong emphasis on increasing foreign exchange reserves and reducing inflation from 7 to 3 per cent, but few reasons are given to justify this approach. This approach is certainly consistent with IMF advice, but has been challenged by the IMF Independent Evaluation Office.⁶⁸ While the rise in food and oil prices in recent years makes it difficult to easily trade off inflation against social spending, restrictions on the use of the available resources should be closely examined, considering empirical evidence, the national context, whether alternatives are possible and whether the poor are bearing the brunt of the policy choices.

■ IV. Accountability and sustainability

In many reports, accountability is equated with monitoring and evaluation, and mechanisms are not always particularly strong. Even so, it is clear that there are real gaps and challenges in just ensuring basic monitoring of programmes and data collection. India has three mechanisms for measuring general mortality but none appears to be particularly reliable, especially in relation to maternal mortality. The Registrar General of India's report on maternal mortality appears to characterize maternal death as a natural phenomenon, while figures for deaths resulting from abortions are difficult to obtain. Where data on achievements do exist, they also seem difficult to reconcile with low levels of public investment in the Goals.⁶⁹

As far as non-governmental participation in accountability processes and mechanisms is concerned, many countries lack effective, independent and easily accessible complaint mechanisms to address denials of, or interferences with, economic and social rights. Supreme and constitutional courts in Latin America, South Asia and Africa (e.g., Egypt and South Africa) have addressed these issues, whether they are enforceable rights in laws or in constitutions.⁷⁰ In some countries, litigation has helped to mobilize constituencies to monitor Government performance in delivering social services—such as the food schemes in India and Nepal. In Latin America and South Africa, effective access to HIV/AIDS medicines has been greatly facilitated by the courts.

But access by individuals is heavily dependent on access to lawyers or access to local administrative mechanisms, and the latter can be heavily biased against marginalized groups. Unfair treatment of the poor in courts and tribunals and poor legal service were also acknowledged in the 2005 shadow MDG report of the People's Forum in Bangladesh. In other countries, economic and social rights are not recognized in constitutions or laws, which makes it difficult to make use of judicial and quasi-judicial mechanisms, although human rights groups are increasingly trying to use adjudication mechanisms. Therefore, provision of effective remedies through legal recognition of all human rights, improvement of the courts, the rule of law and access to justice should be seen as integral components of the overall development policy agenda, for the sake of greater accountability.

One way to strengthen accountability is to incorporate clear entitlements into policy and legal frameworks, where denial triggers a concrete and enforceable right. In some cases, such schemes are conditional, such as the National Rural Employment Guarantee Act in India, which provides a right to unemployment benefits for up to 100 days if the authorities cannot provide adequate work. In some cases, entitlements are non-conditional, such as old-age pension schemes in Bangladesh for widowed and destitute women, and schemes for persons above 65 and below the poverty line in India and South Africa. In South Africa, these entitlements have allowed many applicants to use administrative law mechanisms to ensure that payments were made, and were not unfairly suspended.⁷¹ An entitlement approach can also be extended locally as an integral part of development programming. For example, UNDP Turkey initiated a project on *Linking the Millennium Development Goals to Human Rights*, with a series of workshops in pilot municipalities intended to lead to the production of a toolkit for city councils. These provided guidance on claiming rights and monitoring the progress of municipalities in pursuing the Goals locally.

Most reports and strategies under review did not strongly focus on the role of civil society, yet in some countries there was clear evidence that it was actively engaged in integrating human rights and the Goals in the context of accountability. In some cases this is explicit, reflected for example in many alternative MDG reports being issued in Asia—similar to the alternative human rights reports submitted to United Nations human rights treaty bodies. Some States have attempted to encourage such monitoring, for example of local health in India, although the schemes are yet to be fully implemented.

Conclusion

This publication has set out to provide a brief analytical overview of some of the recent trends in the integration of human rights in global policymaking in the context of the Millennium Development Goals as well as in national target-setting in a selected sample of developing countries. The commissioned quantitative and qualitative research, secondary literature, as well as consultations at African and Asian regional dialogues, brought out a number of common challenges in integrating human rights in MDG implementation efforts, along with innovation and positive examples that may be replicated elsewhere.

Despite increasing recognition of the theoretical and operational links between human rights and the Goals, in many ways the full potential of the rights-based approach, as set out in *Claiming the Millennium Development Goals*, has yet to be fully explored at the country level. There are many reasons for this, including the historical separation of human rights and development constituencies and practice, and continuing tensions between economic growth and human rights in strategies to achieve the Goals. Annex II explores these tensions further, and suggests how human rights and economic growth objectives can be pursued harmoniously.

While a lack of national resources—both financial and human—is an obvious constraint on realizing the Goals, the limited availability of reliable, quality data can make human rights-based analysis difficult for many countries. Often, the situation of the poorest and most marginalized people, including indigenous and minority groups, is not captured in official statistics and household and demographic surveys. Available data mostly remain at too aggregated a level and indicators frequently measure only “average” progress and hence hide patterns of discrimination, inequality and disparities in outcomes. Poverty indicators and other social measurements insufficiently reflect local context and specificities, and hence frustrate both intra-country and cross-country comparisons.

Accountability for MDG progress is undermined in many countries by the lack of access to information and transparency in public policymaking, budget processes and the use of aid. The human rights principles of equality and non-discrimination must underpin the implementation of all the Goals. Resource allocations, as a direct reflection of power relationships and policy choices, must be thoroughly monitored and analysed. The more widespread ratification and implementation of international human rights treaties may help to fill accountability gaps in the MDG policy and institutional architecture. However, the impact of this will depend upon the strength of complementary components of the national human rights system, including the existence of an independent and functioning judicial system, a free press, and a constitutional and legislative framework aligned with international human rights law.

Participation is perhaps the most familiar human rights principle in development theory, but among the hardest to put into operation. Participation and empowerment should not be reduced to mere consultation with hand-picked stakeholders, or to “cheap labour”. Rather, decision makers should reach out to the poorest, remotest and most excluded groups, and actively invest in capacity-building and institutionalizing participation through existing democratic institutions.

Finally, sustained progress towards the Goals in most developing countries is inextricably linked to the international economic policy environment and responsibilities of wealthier countries and other external actors, including international trade and financial institutions and transnational corporations. The importance of the latter could not be plainer, in the face of global food, fuel, climate and financial crises. This calls for closer and more systematic alignment of national targets and Goal 8-related policies with human rights in critical policy areas, including aid, fair (not just free) trade, debt relief and technology transfer. Failing this, the Millennium Declaration's commitments to "making the right to development a reality for everyone and to freeing the entire human race from want" will remain distant aspirations.

Notes

- ¹ United Nations publication, Sales No. E.08.XIV.6.
- ² See, for example, the 1992 United Nations Conference on Environment and Development and the 1995 World Summit for Social Development. One of the outputs of these conferences was the OECD International Development Goals in 1996, whose targets were expanded to become the Millennium Development Goals.
- ³ See overview of impact research in Andy Sumner and Claire Melamed, “The MDGs and beyond: pro-poor policy in a changing world”, *IDS Bulletin*, vol. 41, No. 1 (2010), pp. 1–6. See also “How should MDG implementation be measured: faster progress or meeting targets?”, Working Paper, No. 63 (International Policy Centre for Inclusive Growth, May 2010).
- ⁴ For instance, the mission statement of the United Kingdom’s Department for International Development is defined by the Goals.
- ⁵ Stephen Smith, “The Millennium Development Goals and the struggle against poverty traps”, presentation at the meeting on “Eradicating poverty and hunger – Joining forces to make it happen” of the United Nations Economic and Social Council, April 2007, p. 1.
- ⁶ Sakiko Fukuda-Parr, *Are the MDGs priority in development strategies and aid programmes? Only few are!*, Working Paper, No. 48 (International Poverty Centre, October 2008), p. 1. Available from <http://www.undp-povertycentre.org>.
- ⁷ Paul Nelson, “Human rights, the Millennium Development Goals, and the future of development cooperation”, *World Development*, vol. 35, No. 12 (December 2007).
- ⁸ Philip 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 (August 2005), p. 790.
- ⁹ UNPFII, *MDG Reports and Indigenous Peoples: A Desk Review*, No. 3 (2008).
- ¹⁰ Resolution S-26/2, Declaration of Commitment on HIV/AIDS.
- ¹¹ See, for example, its “How-to guide to MDG-based national development strategies” and Jan Vandemoortele, “MDGs: misunderstood targets?”, One Pager, No. 28 (UNDP International Poverty Centre, January 2007). Available from <http://www.undp-povertycentre.org/pub/IPCOnePager28.pdf> (accessed 22 July 2010).
- ¹² See Millennium Project Task Force on Child Health and Maternal Health, *Who’s got the power? Transforming health systems for women and children* (London, Earthscan, 2005).
- ¹³ Millennium Project Task Force on Water and Sanitation, *Health, dignity and development: what will it take?* (London, Earthscan, 2005).
- ¹⁴ A/HRC/15/WG.2/TF/2/Add.1 and Corr.1.
- ¹⁵ In addition to a number of poverty reduction strategy papers and sectoral documents, the following national MDG reports were reviewed: Bangladesh (2005, 2007), Cambodia (2003), Ethiopia (2004), Ghana (2003), India (2005), Indonesia (2004, 2005, 2007), Kenya (2005), Lao People’s Democratic Republic (2004, 2008), Liberia (2004), Nepal (2002, 2005), South Africa (2005, 2007), Thailand (2004), Uganda (2003, 2007), Viet Nam (2005) and Zambia (2005, 2008).
- ¹⁶ See Vandemoortele, “MDGs: misunderstood targets?”.
- ¹⁷ See Inter-American Development Bank, *The Millennium Development Goals in Latin America and the Caribbean: Progress, Priorities and IDB Support for Their Implementation* (Washington D.C., 2005), p. 24.

- ¹⁸ See, for instance, UNPFII, *MDG Reports and Indigenous Peoples: A Desk Review*, No. 2 (2007).
- ¹⁹ See, for example, Thomas Pogge, "The first UN Millennium Development Goal: a cause for celebration?", in *Real World Justice: Grounds, Principles, Human Rights, and Social Institutions*, Andreas Føllesdal and Thomas Pogge, eds. (Dordrecht, Netherlands, Springer, 2005) and Smith, "The Millennium Development Goals and the struggle against poverty traps".
- ²⁰ United Nations publication, Sales No. E.10.I.7.
- ²¹ World Bank, "World Bank updates poverty estimates for the developing world", updated 17 February 2010. Available from <http://web.worldbank.org/WBSITE/EXTERNAL/NEWS/0,,contentMDK:21882162~pagePK:34370~piPK:34424~theSitePK:4607,00.html>.
- ²² See "Costing of basic social protection benefits for selected Asian countries: First results of a modelling exercise", Issues in Social Protection, Discussion Paper 17 (Geneva, ILO, 2006) and "Cash benefits in low-income countries: Simulating the effects on poverty reduction for Senegal and Tanzania", Issues in Social Protection, Discussion Paper 15 (Geneva, ILO, 2006). See also Wouter van Ginneken, "Social security for the informal sector: Issues, options and tasks ahead", Working Paper (Geneva, ILO, 1996).
- ²³ Chronic Poverty Research Centre, *The Chronic Poverty Report 2008-09: Escaping Poverty Traps*.
- ²⁴ "Keeping the promise: a forward-looking review to promote an agreed action agenda to achieve the Millennium Development Goals by 2015" (A/64/665).
- ²⁵ A number of additional indicators could be suggested: percentage of people directly or indirectly dependent on agriculture/pastoralism/fisheries for livelihoods, percentage of landless peasants (or, for instance, in the context of pastoralists, land is less an indicator than the number of livestock a household owns), percentage of bonded labourers, percentage of sharecroppers, percentage of female-headed households with legal title to land, percentage of population that are net food buyers, percentage of income spent on food, percentage of minimum calorie requirements consumed, percentage of basic staple starch in calorie consumption (percentage of protein, percentage of vegetables), percentage of low birth-weight infants, percentage of food-insecure covered by food and nutrition programmes, percentage of food-insecure with access to agricultural programmes, percentage of children exclusively on breastfeeding.
- ²⁶ India, Planning Commission of India, "Report of the Working Group on Health of Women and Children for the 11th Five Year Plan (2007-2012)".
- ²⁷ P.N. Mari Bhat, "Maternal mortality in India: an update", *Studies in Family Planning*, vol. 33, No. 3 (September 2002), p. 234. The maternal mortality ratio was more than 600 deaths in east and north-central India (where there is a large concentration of marginalized groups) whereas it was between 300 to 400 deaths in north-western and southern India. The survey results also indicate that maternal mortality levels were high among scheduled tribes and scheduled castes... the level of maternal mortality is clearly strongly related to amenities and infrastructure available in the village. Other reports indicate that the mortality rate for nomadic groups in India is twice that of the average population and the unmet need for contraceptives is higher among Muslims than non-Muslims in India.
- ²⁸ See Asian Human Rights Commission, "Dalit women refused medical care and asked to pay bribe at the Primary Health Centre", 22 October 2007, available from <http://www.ahrchk.net/ua/mainfile.php/2007/2626/>; OneWorld South Asia, "Social exclusion rampant in India's maternal healthcare", 24 September 2008, available from <http://southasia.oneworld.net>.
- ²⁹ L. Pearson and R. Shoo, "Availability and use of emergency obstetric services: Kenya, Rwanda, southern Sudan and Uganda", *International Journal of Gynecology and Obstetrics*, vol. 88, No. 2 (February 2005).
- ³⁰ A/HRC/14/39.

- ³¹ WHO, “Maternal mortality: helping women off the road to death”, *WHO Chronicle*, vol. 40, No. 5 (1986).
- ³² United Nations publication, Sales No. E.09.XX.1.
- ³³ General Assembly resolution 2626 (XXV) of 24 October 1970, by which it adopted the International Development Strategy for the Second United Nations Development Decade (para. 43).
- ³⁴ See for example, G-8 Gleneagles, *The Gleneagles Communiqué: Africa*, 2005.
- ³⁵ United Nations publication, forthcoming.
- ³⁶ Millennium Project, *Investing in Development: A Practical Plan to Achieve the Millennium Development Goals. Overview* (London, Earthscan, 2005).
- ³⁷ *The Chronic Poverty Report 2008-09*, pp. 35 and 46.
- ³⁸ Amartya Sen, *Development as Freedom* (New York, Alfred Knopf, 1999) and UNDP, *Human Development Report 2000: Human Rights and Human Development* (New York, Oxford University Press, 2000).
- ³⁹ Hans Binswanger and Swaminathan Aiyer, “Scaling up community-driven development: theoretical underpinnings and program design implications”, Policy Research Working Paper, No. 3039 (Washington, D.C., World Bank, 2003).
- ⁴⁰ United Nations Development Group, “Country Reporting on the Millennium Development Goals: Second Guidance Note”, October 2003.
- ⁴¹ *MDG Reports and Indigenous Peoples: A Desk Review*, No. 3, p. 28.
- ⁴² World Bank, “Participation in poverty reduction strategy papers: a retrospective study” (Washington, D.C., January 2002), p. 9.
- ⁴³ Francis Stewart and Michael Wang argue that the earlier processes related to poverty reduction strategy papers had a tendency to empower the World Bank and IMF and to disempower national Governments given that the documents generally reflected structural adjustment programmes and processes that were not particularly participatory. See F. Stewart and M. Wang, “Poverty reduction strategy papers within the human rights perspective”, in *Human Rights and Development: Towards Mutual Reinforcement*, Philip Alston and Mary Robinson, eds. (New York, Oxford University Press, 2005).
- ⁴⁴ Carole Rakodi and Clement Leduka, “Informal land delivery processes and access to land for the poor in six African cities: towards a conceptual framework”, *Informal Land Delivery Processes in African Cities*, Working Paper 1 (University of Birmingham, 2003).
- ⁴⁵ Siraj Sait and Hilary Lim, *Land, Law and Islam: Property and Human Rights in the Muslim World* (London, Zed Books, 2006).
- ⁴⁶ Centre on Housing Rights and Evictions (COHRE), *Listening to the Poor: Housing Rights in Nairobi, Kenya* (Geneva, 2006), p. 44. Available from www.cohre.org/kenya.
- ⁴⁷ Anthony Costello, Kishwar Azad and Sarah Barnett, “An alternative strategy to reduce maternal mortality”, *The Lancet*, vol. 368, Issue 9546, p. 1477.
- ⁴⁸ See its National Policy for Rural Water Supply and Sanitation Sector (2001).
- ⁴⁹ See A/HRC/15/55.
- ⁵⁰ See Committee on Economic, Social and Cultural Rights, general comments No. 3 (1990) on the nature of States parties’ obligations and No. 7 (1997) on the right to adequate housing: forced evictions.
- ⁵¹ M. Langford and U. Halim, “Path of least resistance: a human rights perspective on expropriation”, *Land Reform, Land Settlements and Cooperatives*, No. 1 (Food and Agriculture Organization of the United Nations, 2008).
- ⁵² People’s Forum on MDG, *Millennium Development Goals: People’s Progress Report on Bangladesh: Main Report* (December 2005).
- ⁵³ A/HRC/13/33/Add.2.

- ⁵⁴ See KRuHA, “RPP Hak Guna Air Mengancam Pemenuhan Hak Atas Air”, press release, 28 July 2008.
- ⁵⁵ See UNAIDS and UNDP, “Criminalization of HIV transmission”, Policy Brief, August 2008. See also Open Society Institute and Soros Foundations Network, “Legal experts assail harmful trends in HIV laws: South African judge warns against applying criminal law to HIV”, press release, 6 August 2008.
- ⁵⁶ *A Future within Reach 2008: Regional Partnerships for the Millennium Development Goals in Asia and the Pacific* (United Nations publications, Sales No. E.08.II.F.15), p. 47.
- ⁵⁷ See, for example, Committee on Economic, Social and Cultural Rights, general comment No. 15 (2002) on the right to water, paras. 23–24.
- ⁵⁸ World Bank, “Vietnam: Aiming High – Vietnam Development Report 2007” (Washington D.C., 2006).
- ⁵⁹ In the United Republic of Tanzania, a study found, for example, that user fees for health services, which contributed only 0.6 per cent to the health budget, “disproportionately affected the access to health services for vulnerable and poor people”. See ETC Crystal, “Equity implications of health sector user fees in Tanzania”, July 2004.
- ⁶⁰ CEDAW/C/IND/CO/3, para. 40.
- ⁶¹ General comment No. 3 (1990), para. 2.
- ⁶² See Sandra Liebenberg, “South Africa”, in *Social Rights Jurisprudence: Emerging Trends in International and Comparative Law*, M. Langford, ed. (Cambridge, United Kingdom, Cambridge University Press, 2008).
- ⁶³ R. van den Brink and others, “Consensus, confusion, and controversy: selected land reform issues in sub-Saharan Africa”, Working Paper, No. 71 (Washington, D.C., World Bank, 2006).
- ⁶⁴ *Millennium Development Goals: Progress Report Lao PDR* (2004), p. 58.
- ⁶⁵ World Bank Office Jakarta, “Economic impacts of sanitation in Indonesia: A five-country study conducted in Cambodia, Indonesia, Lao PDR, the Philippines and Vietnam under the Economics of Sanitation Initiative”, Research Report, August 2008, p. 16.
- ⁶⁶ See, for example, E/C.12/IND/CO/5, paras. 51 and 73, and CEDAW/C/IND/CO/3, para. 40.
- ⁶⁷ S. Gupta, R. Powell and Y. Yang, *Macroeconomic Challenges of Scaling Up Aid to Africa: A Checklist for Practitioners* (Washington, D.C., IMF, 2006).
- ⁶⁸ See Independent Evaluation Office, “The IMF and aid to sub-Saharan Africa”, Evaluation Report, 2007. Available at <http://www.imf.org/External/NP/ieo/2007/ssa/eng/pdf/report.pdf> (accessed 22 July 2010).
- ⁶⁹ For example, in its 2007 MDG progress report, Indonesia states that it has reached the sanitation target while at the same time saying that sanitation is a very low priority.
- ⁷⁰ Langford, *Social Rights Jurisprudence*; Varun Gauri and Daniel Brinks, eds., *Courting Social Justice: Judicial Enforcement of Social and Economic Rights in the Developing World* (Cambridge, United Kingdom, Cambridge University Press, 2008).
- ⁷¹ See Sandra Liebenberg, “The judicial enforcement of social security rights in South Africa: enhancing accountability for the basic needs of the poor”, in *Social Security as a Human Right: Drafting a General Comment on Article 9 ICESCR – Some Challenges*, Eibe Riedel, ed. (Berlin, Springer, 2007).

Annex I

MDG Reports and Indigenous Peoples: A Desk Review (2008)^a

This [UNPFII desk] review underscores the importance of the recommendations of the 2005 and 2006 sessions of UNPFII, which undertook specific examination of MDGs and indigenous peoples and highlighted elements for their greater inclusion. The Secretariat of the UNPFII, under a recommendation of the Forum at its fifth session, undertook this review of country reports on the MDGs to analyse how they address indigenous issues. A total of ten country reports were reviewed from a broad range of countries, which have substantial indigenous populations. The country reports were examined in order to identify elements for inclusion of indigenous issues, general trends and progress achieved, as well as to identify opportunities and challenges for further integrating elements for inclusion of indigenous issues into MDG-based development process. Scant reference was made in the reports explicitly to “indigenous peoples,” but the review considered more broadly any local terminology used that could be interpreted to refer to indigenous peoples. The current review has built upon the conclusions of previous reviews.

Conclusions and recommendations of the review include the following:

1. Twenty per cent of the MDG reports reviewed sufficiently include indigenous peoples by consistently reporting on their situation (Nepal and Viet Nam). Another 50 per cent address indigenous issues to varying degrees (Guyana, Myanmar, Russian Federation, Suriname, Thailand), while the remaining 30 per cent do not include any mention of indigenous peoples (Kenya, South Africa and Zimbabwe).
2. None of the country reports under review indicates that it was prepared with consultation from indigenous peoples’ organizations.
3. None of the MDG reports provides disaggregated data for indigenous peoples in a consistent manner, for every goal. Guided by the recommendations of the fourth and fifth sessions of the UNPFII, this review reiterates that the improved disaggregation of data on indigenous peoples is necessary to effectively monitor progress towards MDG achievement, and that this should be a key priority for Governments and the United Nations System.
4. The two most positive examples of reporting on indigenous peoples (Nepal and Viet Nam) most consistently include data on indigenous peoples in the context of the MDGs and recognize that certain groups, including indigenous peoples, are the most disadvantaged and marginalized in the country. At times, they offer mention of specific mechanisms or policies that target the communities. Other reports may include examples of best practices or refer to social challenges faced by indigenous peoples (such as the report of the Russian Federation), but the reporting is not consistent across the MDGs.

5. While most of the reports include at least some mention of disproportionate development, they are most likely to describe the situation by providing data and examples by provincial, regional, or rural/urban disparities. In these descriptions of disproportionate development, the reports often fail to explicitly acknowledge when the regions or areas that are disproportionately affected correspond to the areas where indigenous peoples live. This omission is problematic and does not provide a clear picture of the situation of indigenous peoples.
6. When the reports do mention indigenous peoples, they most often do so in the context of poverty, education, and mortality rates (Goals 1, 2, 4 and 6). They usually mention that indigenous peoples live in remote areas that lack access to the same services as other groups, and are thus disadvantaged or are considered vulnerable groups. For the reports where the data allow for some analysis of indigenous peoples and mortality rates (Guyana, Myanmar, Nepal, Russian Federation, Thailand, Viet Nam), mortality rates for indigenous peoples are significantly higher than the national averages.
7. The situation of indigenous women (in the context of Goals 3 and 5) is rarely mentioned. The only report that made any more than a passing reference to indigenous peoples in the context of these Goals was the report by Viet Nam, which discussed the social challenges in achieving gender parity for indigenous women.
8. Several of the reports (Guyana, Nepal, Russian Federation) included at least some mention of indigenous peoples in the context of environmental stability (Goal 7). The report by Nepal, in particular, highlights the positive role of indigenous peoples in environmental sustainability, provides an example of their role in land use management, and recommends future action to secure access and benefit sharing to genetic resources. None of the reports mentioned indigenous peoples in the context of establishing a global partnership for development (Goal 8).
9. In future reporting the countries should undertake to include indigenous peoples in the context of meeting each and every Goal. Guided by the United Nations Declaration on the Rights of Indigenous Peoples, this review recommends that the free, prior and informed consent of indigenous peoples should be sought in all development initiatives focused upon improving their lives, and countries should comment on this clearly in their MDG reports.
10. Finally, this review reiterates the previous recommendation of similar reviews, as follows: Governments should (a) include indigenous peoples in the context of the overall report, including its planning; (b) include indigenous peoples in the context of meeting each specific Goal; (c) include indigenous peoples' effective participation in the planning process of future interventions, as well as in the implementation, monitoring and evaluation of programmes and projects that will directly or indirectly affect them; and (d) improve the collection and disaggregation of data regarding indigenous peoples.

^a *MDG Reports and Indigenous Peoples: A Desk Review*, No. 3 (2008) (footnotes omitted).

Annex II

Economic growth and poverty reduction from a human rights perspective^a

From the review and analysis of selected national MDG reports and poverty reduction strategy papers, a series of recommendations are made to better align income poverty targets and indicators with key human rights principles, and to ensure that economic growth strategies do not conflict with human rights principles. In this respect, Governments should:

1. **Report in more detail how income poverty lines are calculated, and promote an open and transparent discussion about what constitutes an adequate and/or acceptable standard of living.** In the majority of the countries analysed, there is insufficient discussion about how official poverty lines are calculated. This makes it impossible to assess whether the poverty line corresponds in any way to the human rights notion of an adequate standard of living. Of course, what is meant by “adequate” will differ across countries and according to context, but this does not mean that an open and transparent discussion around this meaning cannot take place.
2. **Adopt targets for reducing the depth and severity of poverty, and not just for reducing the incidence of poverty.** Although most of the countries analysed do monitor the depth and/or severity of poverty, in no case are targets set for these measures. The danger remains, therefore, that Government attention will be focused on people who are just below the poverty line, at the expense of the most deprived or marginalized people in society, who are a long way below the poverty line.
3. **Report on the feasibility of disaggregating poverty estimates by prohibited grounds of discrimination.** Although the majority of countries analysed do provide disaggregation estimates of poverty by region, few report disaggregation along other lines, such as age, gender and ethnicity. The danger here is that favourable national or even regional progress towards the income poverty target masks large and persistent disparities across groups, which may in turn reflect discrimination.
4. **Define a set of process indicators for the income poverty target, which can be monitored over time, and with quantitative targets associated with each one.** These are indicators which reflect the extent to which important policy steps towards meeting the income poverty target are being taken (e.g., the share of Government expenditure allocation to *pro-poor* sectors); in the monitoring and evaluation framework, they are referred to as *input* and *output* indicators. Although some of the countries analysed do report such indicators, others do not. And even among those that do, no quantitative targets are set. The danger, from a human rights perspective, is that there is no way of assessing whether a Government is making sufficient effort to reduce poverty.
5. **Report the methods they use to determine nationally specific income poverty targets.** Although many of the focus countries have adjusted the global MDG income poverty target to their own conditions and circumstances, and are recommended to do so by the United Nations, there is virtually no discussion as to how this adjustment is made. This makes it very difficult to establish whether a particular target is consistent with the human rights obligation to use maximum available resources in realizing human rights.

6. **Set out more clearly how economic policies identified for raising growth will promote the realization of human rights.** These include policies identified to promote macroeconomic stability (e.g., low inflation targets, fiscal surpluses) and private investment (e.g., provision of energy or transport infrastructure). In many of the countries analysed, the links between such policies and human rights are either taken for granted or discussed at a general level without supporting evidence. The danger is that economic growth comes to be seen as an end in itself, rather than a means towards the progressive realization of human rights.
7. **Consider more carefully which policies for raising growth are likely to adversely affect some groups in society.** Examples of policies of this sort include trade liberalization and domestic tax reforms. These are key policies identified in strategies of most countries analysed, but their likely distributional effects are discussed only sporadically. The potential need for compensatory or mitigatory measures is also discussed only infrequently; here, more details should be provided.
8. **Not neglect the role of more social policies in raising economic growth.** This is particularly the case when considering the medium to long term, when growth is likely to be severely constrained if health standards or education attainments are low. This does not of course mean that human rights should be seen in instrumental terms, but it does argue against a narrow focus on relying only on conventional *economic* policies to promote economic growth.

^a These recommendations are drawn from a commissioned country and thematic background study on human rights, income poverty and economic growth by Edward Anderson (University of East Anglia) and Andy McKay (University of Sussex) (2008).

