Standing Committee on Democracy and Human Rights
29 September 2017

REVIEW AND FOLLOW-UP ACTION ON THE 2012 IPU RESOLUTION ON: “ACCESS TO HEALTH AS A BASIC RIGHT: THE ROLE OF PARLIAMENTS IN ADDRESSING KEY CHALLENGES TO SECURING THE HEALTH OF WOMEN AND CHILDREN”

Addendum to the resolution prepared by the Advisory Group on HIV/AIDS and Maternal, Newborn and Child Health

In April 2012, IPU unanimously adopted a landmark resolution on Access to health as a basic right: The role of parliaments in addressing key challenges to securing the health of women and children. The resolution made recommendations for parliamentary action in areas such as maternal and child mortality, reproductive health, birth registration and budgeting for health.

The 2012 resolution has guided IPU’s work with parliaments and continues to be a powerful tool for accelerating progress on women’s, children’s and adolescents’ health. A review of implementation of the resolution in April 2015 showed that parliaments in the countries most affected by maternal and child deaths have engaged strongly on the issue, often with support from the IPU. The review underscored that to have the maximum impact, legislation on access to health needs to be grounded in human rights, evidence-based and effectively implemented. Strong emphasis was also placed on the importance of budget allocations and oversight as well as the coordination role that parliaments play in national governance.

IPU support to parliaments has ranged from raising awareness to budgeting for health, and from building oversight capacity to developing new legislation. As a result, parliaments have adjusted laws and policies to respond to the challenges of providing access to health.

Since 2012, the global consensus on health has continued to evolve. Most notably, the international community has adopted the Sustainable Development Goals (SDGs) and a Global Strategy on Women’s, Children’s and Adolescents’ Health. The IPU Strategy 2017-2021 and the 2015 review of the resolution have provided further guidance to IPU’s work on health. To take these evolutions into account, the IPU Advisory Group on HIV/AIDS and Maternal, Newborn and Child Health recommends that the Standing Committee on Democracy and Human Rights provide further guidance to the parliamentary community by endorsing the following recommendations for parliamentary action on access to health:

1. Introduce or amend legislation to guarantee equal access to health services for all women, children and adolescents without discrimination, and to provide affordable essential health services for all women, children and adolescents, including in conflict areas and humanitarian settings.

2. Use parliament’s oversight and budgetary powers to ensure adequate funding for programmes and policies regarding essential reproductive, sexual, women, adolescent, child and newborn health services and rights.
3. Ensure accountability and transparency in government efforts to meet global, regional and national commitments on women’s, children’s and adolescents’ health.

4. Invest in improving the quality of care in health services, and ensure that all women, children and adolescents can access and receive quality care with equity and dignity.

5. Ensure that all government health interventions are evidence-based, in conformity with international human rights standards, and subject to regular and transparent evaluations.

6. Recognize that gender is a key determinant of health, support gender-sensitive budgeting as a tool for addressing women’s and girls’ health needs, and address the social, economic and cultural burdens that cause many of the inequalities between the health status of women and men.

7. Engage communities in awareness-raising campaigns on sexual and reproductive health with a focus on adolescents, given their vulnerability and the transformative life-long effects of health interventions at this critical age.

8. Ensure that the most marginalized women, children and adolescents are able to fully exercise their right to health.

9. Ensure dialogue with key stakeholders, including citizens and civil society organizations, in order to monitor, assess and respond to communities’ evolving needs and concerns.

10. Enhance collaboration across key sectors of government for women’s, children’s and adolescents’ health and well-being, including but not limited to the education, gender, civil registration, nutrition, statistics, infrastructure and environment sectors.

11. Achieve universal health coverage by 2030 as per target 3.8 of the SDGs, through allocating adequate funding to the health sector in line with international commitments and recommendations (the Abuja 15% target, 5% of GDP to health and $86 per capita health spending).

12. Continue to work with IPU and its partners, including WHO and PMNCH, on the implementation of the 2012 resolution on Access to health as a basic right and this Commentary, and regularly report the results to the global parliamentary community at future IPU Assemblies.