Geneva, 8 February 2016

Dear OHCHR Secretariat,

I have the pleasure to forward herewith the European Union's submission following the OHCHR questionnaire on human rights approach to preventable maternal mortality and morbidity of 11 December 2015.

For any follow-up to this EU submission, please contact Ms Jana Micova (jana.micova@eeas.europa.eu).

Yours faithfully,

[Signature]

Peter Sørensen

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European Union submission on technical guidance for a human rights approach to preventable maternal mortality and morbidity

Question 1 (Implementation of Recommendations):

Introductory Remark: Some of the responses provided under question 1 could also serve other questions, as they are quite general

- In terms of EU development policy there is a strong support for sexual reproductive health and rights not only in our health policy but also reflected and referred to in our gender equality and human rights policies. The Council on various occasions has reemphasised its commitments to the full and effective implementation of the Beijing Platform for Action and the Programme of Action of the ICPD and the outcomes of the review conferences and remains committed to sexual and reproductive health and rights.

- The Communication on the EU role in global health (2010) emphasised equitable and universal coverage of quality health care and made a firm commitment to supporting reductions in maternal and child mortality. In this context the EU recognises women's rights to have control over, and decide freely and responsibly on matters related to their sexual and reproductive health. Sexual and reproductive health and reproductive rights (SRHR) have been repeatedly recognised as essential for women and girls' overall health and empowerment.

- The European Commission has been actively engaged in the SDG formulation process and is very pleased that universal health coverage is included as key target ensuring that also the most vulnerable population groups will be reached with essential quality SRH services and care. The council conclusions of June 2013 and December 2014 also noted the importance of sexual and reproductive health and rights in the context of a rights-based approach to the 2030 SDG agenda.

- The high level event on 'Women's Empowerment and Sustainable development' hosted by the Presidency of the Council of the EU in Riga, March 2015, in the context of the Europa Year of development provided an opportunity to renew political momentum and to reaffirm the EU's commitment on gender equality, social justice, non-discrimination and human rights.

- The May 2015 Council Conclusions on Gender in Development reiterated the EU and its member states commitment to the promotion, protection and fulfilment of human rights for all. EU and MS have been playing a leading role in supporting the international initiatives to promote women and girl's rights, gender equality and the empowerment of women and girls.
• The health sector is and will remain a very important part of the aid and assistance provided by the European Commission. Building healthcare systems that are inclusive and offer healthcare to all of the population in developing countries is our final goal. The lessons from the Ebola break show evermore how important it is to build strong health care systems.

• The EC gives full attention to the ICPD in development cooperation and advocates for adequate inclusion of SRH and family planning services in the basic health care in the policy dialog with partner countries. Gender is also a very important part of our cooperation with third countries. It is mainstreamed to all cooperation.

• The EU support to sexual and reproductive health and rights is part of the broader response to the health needs of a partner countries' population. The EU's main focus in the area of health is to support countries in building effective and inclusive health systems (effective sector governance and financing, qualified and sufficient workforce, availability of medical products and technologies, information systems and monitoring) so they can deliver quality health services to the population based on demand and needs, including the marginalised and vulnerable population groups which in many settings include women and girls.

**Question 2 (Use of the "Technical Guidance")**

• The "Technical Guidance" has not been used as such, but implicitly it has been used, as much of its content can be found in the EU's policy and programming documents: "Gender equality and human rights are at the core of European values and enshrined within the European Union (EU) legal and political framework. The EU and its Member States are at the forefront of the protection, fulfilment and the enjoyment of human rights by women and girls and strongly promote them in all external relations also beyond development cooperation."

• The Gender Action Plan (GAP) 2 was adopted by the Council of the EU on 26th October 2015 and emphasised renewed and expanded the EU commitment toward Gender Equality and Women's Empowerment (GEWE). This Joint Staff Working Document (SWD) provides the framework for results-oriented measures for "Gender Equality and Women's Empowerment: Transforming the Lives of Girls and Women through EU External Relations 2016-2020" It builds on the lessons learnt from, and achievements of, the previous Gender Action Plan 2010-20152, and consolidates the context, rationale and priorities of a refreshed approach that reaffirms and translates the EU's policy and political commitments to gender equality into more effective delivery of concrete results for girls and women, while promoting more efficient coordination, implementation and monitoring of EU activities in this area.

• The EU is committed to breaking the vicious cycle of gender discrimination. This includes support to partner countries to establish a more enabling environment for
the fulfilment of girls’ and women’s rights and to achieve real and tangible improvements on gender equality. This also includes advocacy and capacity building for fostering national ownership and enable them to take a leading role in guaranteeing that the reproductive health needs of their population, including hard-to-reach population groups are being met.

- The Commission recently renewed its programme of support to WHO "EU-WHO Universal Health Coverage (UHC) Partnership: Supporting policy dialogue on national health policies, strategies and plans and universal coverage - Phase III" (2015-2018). The overall objective is to strengthen good governance in the health sector in selected countries and to support the development and implementation of robust national health policies, strategies and plans (NHPSP) aiming at increasing coverage with needed health services, financial risk protection and health equity. The programme also aims to improve donor coordination and aid effectiveness under country leadership and at global level through supporting the International Health Partnership (IHP+) Secretariat. Specific reference is made to the need to strengthening Maternal and Newborn Health coordination mechanisms at country level and ensuring vulnerable population groups will be reached with SRHR services.

**Question 3 ("Technical Guidance" and 2030 Agenda)**

- The European Commission is in full support of the 2030 Agenda for Sustainable Development and is currently engaged in a review process on how to adapt its actions to the goals and targets enshrined there.

- As part of this process it will consider the possible use of technical guidance referred to here. It would be interested to learn from the experiences in other technical guidance processes from other sectors or other human rights issues.

**Question 4 (challenges)**

- Development agencies and partners in policy dialogue are confronted with a multitude of human rights issues
- Priority is then usually given to fundamental human rights
- How social rights can be meaningfully prioritised and how the related policy dialogue can make a difference clearly remains a challenge