**UNDG Human Rights Mainstreaming Mechanism**

**Documenting HRBA activities / experiences / case studies**

**Country: UNICEF Regional Office for South East Asia  
UN Focal Point and Agency: Beatrice Duncan, UNICEF  
Title: A Human Rights-Based Approach to Programming For Maternal Mortality Reduction in a South Asian Context  
Timeframe and current status of activity: On-going  
Partners involved: UNICEF Regional Office for South Asia (ROSA), comprising the various country health sections**

1. Please provide a brief overview of the background and objective of the HRBA activity. Please specify in what way the activity was human rights-based and the area that the activity focused on (e.g. health):

**This case study is extracted from a documentation of the UNICEF Regional Office’s strategic line of action to maternal mortality reduction, using the Human Rights Based Approach. The setting is how a situation analysis can be conducted using the HRBA as a methodological tool of analysis. It is underpinned on the factual concern that “every three minutes one woman dies from complications arising from complications of pregnancy and childbirth in South Asia”. The institution viewed this as situation which compromised the human rights of women, hence the need to apply a human rights framework in determining the various levels of causation and a road map for designing appropriate interventions.**

2. Please provide a brief overview of the main strategy (ies) used (including steps and partners involved in development):

**It recommends that a situation analysis should commence with an overview of relevant human rights frameworks underpinning women’s health. Referencing treaties such as the Universal Declaration of Human Rights, the Beijing Platform for Action, the Convention on the Elimination of all forms of Discrimination against Women (CEDAW) and the Convention on the Rights of the Child (CRC), it recognizes women as rights holders with the specific right to life and the highest attainable standard of health. A further attempt was made to review the regional and national legal contexts, paying careful attention to the blend of customary and religious laws in place within countries of the region. It notes very critically that “Rights regimes are implemented through the operation of the legal system and the allocation of resources and administration of services. Capacity to make claims and influence rights regimes depends on social identity and the authority and power that this confers-e.g. gender, caste, class etc. It further acknowledges the complimentary impacts on the right to life of the child and its health, reinforcing the interdependency of rights and treaty obligations, in this case the interface between the CRC and CEDAW.**

**Designing an appropriate situation analysis was considered to be a significant way of building the capacity of duty bearers to appreciate the nature and extent of the problem at hand in addition to steps that need to be taken to address them.**

**What makes the ROSA example unique is its thinking outside of the box. In outlining the key principles of the human rights based approach, not only does it find resources from within UNICEF and the UN, but also from other development partner sources. It makes extensive references to agencies such as DfID in its application of principles in the field of poverty reduction (participation, inclusion and fulfilling obligations). It also refers to experts such as Moser and Norton who include human freedom, universality and equality, participation, responsibility and accountability and sustainability as ingredients. An overview of this kind of literature could provide organizations with an objective over view of how the approach is being applied in other developmental contexts.**

**The next step in the situation analysis involved the problem analysis. This was conducted in systematic fashion using a seven-step ladder:**

**A: Causality analysis**

**B: Role Analysis/Pattern Analysis**

**C: Resource Analysis**

**D: Analysis of Behaviors and Cultural Patterns**

**E: Analysis of Prevailing Norms and Legal System**

**F: Vulnerability Analysis**

**G: Community Capacity Analysis**

**Below is a detailed outline of what the Regional Office regards as the key elements of a causality analysis within the context of maternal mortality:**

*“It is important to understand the causes of problems and the linkages between problems. The analysis should start at the ultimate outcome and continue down the hierarchy of causes (focused analysis). A focused analysis will help to limit the analysis to only those causes that actually influence the selected outcome in the situation at hand, and will therefore not include all possible determinants and processes in society. Only then can appropriate interventions be identified for reducing maternal mortality. The framework for assessing and analyzing maternal death shows immediate causes as complications of pregnancy; intermediate causes as the nutritional status of women, the health status of women, and the use of services influenced by knowledge attitudes and behaviour health and maternal rights; underlying factors such as the status of girls and women in society. In any given country or community, the relative weight of these causes may vary. One must understand causes clearly to have clear objectives to guide a multidisciplinary approach to reducing maternal mortality.”*

3. Please explain if the example provided is of an interagency nature and, in that case, what were the steps involved in the different stages of the activity (analysis, planning, implementation and M&E), providing a brief overview of the main strategy(ies) used (including partners involved and their role):

**This was developed by the UNICEF Regional Office for South Asia, representing all UNICEF Country Offices in that Region and was supported by the DfID Asia Regional Poverty Fund with an expected utilization across other agencies.**

**As indicated, the case study is limited to how to conduct a Human Rights Based Situation Analysis in Maternal Mortality and has been in place since 2003.**

4. If this HRBA activity was a project / programme, at what programming stage(s) was it applied: Analysis, Planning, Implementation or Monitoring & Evaluation? (Please indicate which general stage is applicable taking into consideration agency specific programming modalities)

**The intervention is limited to assisting Country Offices in the design and conduct of their situation analysis in maternal health.**

5. Did this HRBA activity link with one or more of the UNDG programming principles (gender equality, environmental sustainability, capacity development and results based management)? If so, how?

**The initiative is linked to the principles of gender equality and capacity development to the extent that it deals with women’s health and enhancing the capacity of governments to conduct appropriate research into the causes of maternal mortality, using rights-based methods.**

6. Please provide a brief overview of main obstacles faced in implementing the HRBA activity and the capacity development need encountered:

**Once problems have been identified through the problem analysis finding solutions to them have been the key challenges. Factors impeding the effective tackling of maternal mortality have included limited reach of reproductive health services, persisting socio-cultural practices (e.g. gender-based violence) and high rates of female illiteracy. UNICEF is currently resolving this through its equity model which seeks to address in more specific ways, factors which impede access to services among vulnerable and excluded groups. A process known as *Marginal Budgeting for Bottlenecks* has been developed in partnership with the World Bank, and reviewed by other UN agencies and academic institutions to address such gaps. It uses an evidence-based approach to planning, costing and budgeting of health-related MDGs by capturing key information regarding the demography, epidemiology, health system intervention coverage and costs. It facilitates the user analysis of the implementation bottlenecks that constrain the health system and devices adequate and more specific strategies to address them.**

7. Please provide a brief overview of the most important impact(s) of the activity and any lessons learned:

**This resource is being used by health sections within UNICEF in their design of maternal mortality related situation analysis.**

8. If this activity used specific human rights standards to help analyze, plan, monitor or evaluate the initiative, please briefly detail how:

**Please see above on the details of the model.**

9. If this activity used state party and human rights treaty body reports to address the priorities and problems, please briefly detail how:

**As indicated above**

10. Did the various groups expected to be affected by the activity participate in the implementation process? In which ways did marginalized or vulnerable groups participate?

**The documentation exercise was conducted in partnership with the various health sections existing within the country offices of the ROSA.**

11. How was it ensured that the activity was not discriminatory in its aim, analysis, design and implementation? How did the activity work towards equitable service delivery?

**The initiative was undertaken with a view to eliminating barriers to accessing reproductive health services by women.**

12. How was the activity consistent with principles of accountability and the rule of law? Did the activity provide or promote goods / services / information that meet the criteria of the 3AQ? (3AQ = services are available to all; are acceptable to all; are accessible to all; are high quality)

**The activity applies the principle of responsibility and accountability as one of the key pillars of the Human Rights Based Approach**

13. Is this example / activity codified in an existing knowledge product such as a training manual or publication? If yes, please provide the link to the product:

**Please see:** http://www.unicef.org/rosa/HumanRights.pdf

Please kindly list any additional documentation that you are attaching to this brief (such as a concept note, project / programme documents, lessons learned , photos, video, example of tools designed / adapted, evaluations):

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