



HUMAN RIGHTS AND AID EFFECTIVENESS: KEY MESSAGES ON OWNERSHIP

Introduction

There is growing recognition that human rights and gender equality are functionally essential to achieving the overall goals of the Paris Declaration as well as being agreed objectives of development in themselves. Human rights, including the rights of women to equality and non-discrimination, are part of a universal value system, codified in international treaties to which all countries have subscribed. They provide a shared normative framework for dialogue between donors, partner countries and civil society on priority-setting and aid processes.

KEY MESSAGES

Donors:

- Recognize the importance of partner countries' and own international and national human rights commitments in development dialogue.
- Support capacity building in line ministries to enable promotion of human rights issues, including gender equality and other forms of non-discrimination, in sector programmes.
- Ensure adequate allocation of funding to civil society to support inclusive participation in decision-making.

Partner countries:

- Build democratic ownership of sector policies through commitment to human rights principles of meaningful participation, accountability, transparency and non-discrimination.
- Support adequate allocation of resources in sector budgets to enable civil-society participation in decision-making.
- Institutionalize mechanisms to enhance the engagement of civil society in national and sector policy processes, including sector working groups.

HUMAN RIGHTS AND OWNERSHIP: LINKAGES AND PRACTICAL EXAMPLES

Human rights standards and principles are integral to all governments' legislation and policies. In addition to international commitments, national constitutions draw on civil and political human rights and many contain economic and social rights, including the rights to education, health, water and sanitation, housing and food. Where constitutional rights are used as explicit basis for sector strategies and service standards, they provide people with tools for holding governments to account for their commitments.

The human rights principle of meaningful participation provides a basis for inclusive consultative processes that enhance the quality and depth of ownership, ensuring that national agreed priorities address the concerns of all groups in society and contributing to sustainable development outcomes.



Peru: Community participation and monitoring of health services. In Peru, in a context of high turnover of official staff and poor government reach into rural areas, the participation of civil society organizations in decision-making and monitoring is critical for ensuring health policy continuity and sustainability. Since 2003, the INGO CARE has worked with Forosalud, a civil society network promoting health rights, to support the participation of women and people from excluded groups in health policy decision making at regional and national levels as well as in local health management boards (CLAS). Their consultations and advocacy have contributed to maintaining sexual and reproductive health as a priority in national health policies and programmes. The findings of their consultations have also led to the introduction of Ministry of Health national regulations authorizing health service support for the cultural practice of giving birth in a vertical position, and the banning of fines on families who have home-births, which were being imposed when infants were registered.

Building democratic ownership requires clearly-defined governance structures, such as village education and health service committees. It also requires capacity building in civil society and government to enable inclusive participation in decision-making and responsiveness to diversity of concerns.



Nepal: Inclusive participation for safe motherhood. In Nepal, the implementation of the National Safe Motherhood Plan (2002-17) includes an Equity and Access Programme (EAP), managed by ActionAid, which operates in selected communities in eight districts. The aim of the EAP is to increase service utilization among socially disadvantaged women from lower castes and excluded ethnic groups. A key component of the EAP is the “voice capturing” exercise which uses participatory methods to obtain and record the views of women from excluded castes, ethnic and regional groups on maternal health issues and service provision. Reports provide a basis for discussion about maternal health services between women’s representatives and service providers at village and district levels. Findings from the voice capturing are also fed up through the Ministry of Health and Population to inform decisions around resource allocations and planning. Evidence from the project on financial barriers to maternal services has contributed to the decision to abolish user fees at lower level health services. Lessons from the EAP on responsiveness to service-users concerns are helping to inform Nepal’s International Health Partnership.

The principle of ownership is difficult to maintain in contexts of deteriorating human rights violations. Explicit discussion of human rights with partner countries provides a means of clarifying mutual values and expectations in relation to human rights standards, and supports a harmonized and graduated approach to deteriorating human rights situation.

Building ownership in fragile states requires flexibility on the part of the donors. Humanitarian aid to civil society organizations runs the risk of creating parallel structures that undermine existing local governance institutions. Civil society organizations (CSOs) that build their programmes on human rights principles work with local governance structures and officials to maintain capacity to deliver basic services. While funding human rights-based CSOs may entail greater short-term political risk, their approach is more likely to contribute to long-term sustainable development.

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