

*DEVELOPMENT EFFECTIVENESS IN PRACTICE:
APPLYING THE PARIS DECLARATION TO ADVANCING GENDER
EQUALITY, ENVIRONMENTAL SUSTAINABILITY AND HUMAN
RIGHTS*

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Introduction

Let me begin by thanking the organisers of this OECD-DAC Workshop for inviting me to deliver this opening address.

I am delighted to participate at this workshop, firstly, because it's thematic focus relates to issues which are very important to me; the relationship between human rights, gender equality and environmental sustainability and global poverty and disadvantage.

More importantly, perhaps, I am pleased to participate in a very important international process to consider how we can urgently and more effectively respond to the challenges of global poverty – and how we can use the opportunity of the Paris Declaration to address weaknesses in the ways we have planned and delivered international development assistance. We can reflect on how we have relegated some of the most important determinants of poverty – such as lack of respect for women's rights, lack of equitable access to basic health services, to education, to clean water, lack of access to decent employment opportunities, all internationally recognised human rights – to peripheral rather than central importance.

It is appropriate that the opportunity for advancing this change is presented through the organisation of this workshop by the DAC – and through the convergence of the work of the Working Party on Aid Effectiveness with that of the other DAC networks – the GOVNET, ENVIRONET and GENDERNET. I am particularly pleased that this meeting is being hosted by the Government of Ireland, in Dublin.

I believe this meeting can provide an historic opportunity to move cross-cutting concerns from the margins to the centre of our approaches – and in so doing strengthen the effectiveness of aid and validate the commitments of the Paris Declaration.

International Development Frameworks

Almost sixty years ago, the Universal Declaration of Human Rights affirmed that a decent standard of living, including access to health and education, were fundamental human rights. Subsequent international agreements legally committed governments to the progressive realisation of these rights.

But, when we consider the reality of poverty in today's world: a world where the great majority of the 1 billion people who live in poverty are women; where the world's poorest have little access to functioning health and education services; where poverty is closely linked to injustice and exploitation; where the environment is being degraded, not only to support economic growth, but also to support the mere survival of the poor – we cannot but ask what has gone wrong?

In 2007, the extent that all people do not enjoy freedom and equality in dignity and rights is testament to the failure of governments, and of the international community, to honour the normative frameworks that they have ratified.

We cannot but recognise there have been many failures in living up to commitments made on behalf of the world's poor. We all share responsibilities for these failures. We all can play our part in redressing them.

It is not my intention to-day just to focus on what has not been done. We also have a responsibility to explore how we can avail of the opportunities that exist to change the ways we have worked in the past and make aid more relevant and more effective to the lives of the poor.

Since 2000, the Millennium Declaration has served as an internationally agreed framework for addressing global poverty. The United Nations Conference on Financing for Development, held in Monterrey in 2002, resulted in a consensus to increase overseas development assistance in support of the Millennium Development Goals. The Paris Declaration on Aid Effectiveness, signed in 2004, resulted in a consensus to improve the quality of development assistance.

So now we have the goals, the frameworks, and the commitments. Next, comes the accountability for delivering on these. If we are strong on the former, we stand a lot weaker on the latter. This was clearly demonstrated with the publication of data earlier this month, by the Development Assistance Committee of the OECD. This demonstrated that despite so many publicly declared promises, ODA volumes declined by over 5% in 2006 from the previous year.

While we need to continue to put pressure on the international community to live up to their responsibilities with respect to the volume of ODA, so too do we need to continue to improve its quality. And this goes to the core of our meeting over the next two days. We are set to explore how to better reflect the cross-cutting issues – gender equality; environmental sustainability and human rights – in our approaches to reducing global poverty.

The cross-cutting issues and poverty reduction

The 2006 Human Development Report, with its focus on the global water crisis, potently illustrates the linkages between human rights, gender inequality and poverty. It describes the crisis in water and sanitation as “a crisis of the poor in general and of women in particular”. Women do not have a political voice to claim their right to access to clean water and sanitation. The education and safety of young girls is compromised because of household duties in relation to collecting water and the lack of adequate water and sanitation facilities in schools.

The recent Report of the Intergovernmental Panel on Climate Change has clearly reinforced the message in earlier reports; that poorer countries and poorer communities; those who rely primarily on agriculture and who have least capacity to adapt to shocks, are more likely to experience the negative effects of climate change. They are most likely to experience damage to crop yields, increasing food insecurity, malnutrition, and poor health.

A common theme emerging from reports over the past decade, is the recognition that respect for human rights is at the core of sustainable development, that gender

equality is a human right and that human development, human rights and environmental sustainability are inextricably linked.

If these are the consistent findings of reports, the evidence is that these key ‘cross-cutting’ concerns are not being reflected in the ways in which we programme our development assistance.

What this means is that there are major shortcomings in the way we are responding to global poverty.

The Paris Declaration and the cross-cutting issues

We cannot continue to deal with concerns, which are the root causes and effects of poverty, as some form of an add-on to our programmes and approaches.

If you ask women in an African village what a human rights approach means to her she will say clean water and freedom from violence.

Poor men and women are not concerned about what modalities we use. They have no understanding of what we mean by the term “cross-cutting issue”. Their concern is where they will get their next meal; how they will afford to pay for school fees or whether they can afford to pay health-care costs for their children.

Any support that they receive needs to be planned to respond to the reality of their needs. Our ways of working have to be responsive to these. In many ways they are not, and the way we practice does not reflect an understanding of the determinants of poverty. Hence in so many ways, the cross-cutting concerns have become peripheral and not central to our approach.

It is my belief that the application of the principles of the Paris Declaration can help overcome some of the fundamental problems with the way we work in the field of international cooperation and can enable us address these absolutely essential “cross-cutting” issues more effectively. In turn, I believe that tackling the cross-cutting issues of human rights, gender equality and environmental sustainability can enhance efforts to implement the Paris Declaration in different sectors.

Application of the Paris Declaration to cross-cutting issues requires action in donor agencies, across the wider global aid architecture and within national development programmes and approaches. It means we will have to change from the way we have been working. It means we have to take more responsibility for the way we work – for the failures as well as the successes. It means we have to be accountable for inaction when we recognise some of our current approaches are not working.

Health as a lens for the Paris Declaration

Our organisation, Realising Rights: The Ethical Globalisation Initiative, has identified the importance of strengthening efforts to realise the human right to health as one of the most important international issues of our time.

This morning I would like to reflect our experience of how cross-cutting concerns are so fundamental to an effective response in health; how a commitment to human rights, gender equality, and environmental sustainability motivates and informs our approach, and how the principles of the Paris Declaration can inform better practice for our global efforts to achieve better health for the poor.

Health and poverty

We are all aware of the relationship between health and poverty. Poor people suffer the highest burden of disease. Illness in turn makes people poorer. The extent that ill health is holding back human and economic development was very clearly demonstrated by the work of Jeffrey Sachs and his colleagues in the Commission on Macroeconomics on Health. This report has been highly influential in catalysing important international efforts to accelerate efforts to improve health in poorer countries.

A growing international recognition of the links between health and poverty reduction, and a recognition of the extent that the HIV/AIDS pandemic is bringing about a reversal of development gains in many countries, has resulted in the emergence of over seventy-five global initiatives in health over the last 10 years. Some of these are familiar to us – the Global Fund for Aids, TB and Malaria; the GAVI Alliance; the Polio Eradication Initiative; PEPFAR; the International Partnership for Microbicides.

Many of these initiatives are bringing a new focus on international health; they are bringing more financial resources; they are leading to the development of new technologies; they are making available existing, but hitherto inaccessible, vaccines and medicines to people in developing countries.

While these initiatives present many opportunities for poorer countries, some of them have presented many difficulties for partner governments. In some cases governance structures have not been inclusive of representatives from developing countries. Planning and disbursement mechanisms have not respected national plans and processes. Funds from global initiatives have by-passed national budgets and the verticality of some approaches have undermined rather than strengthened health systems.

And here lies an interesting corollary – that the many global initiatives in health have emerged at the same time as there has been a recognition of the importance of health systems. For too many years health systems were either neglected or undermined by the practice of governments and donors alike.

It is my firm belief that to bring about lasting changes in the lives of the poor in developing countries, we must step up our investments in health systems. Sustained improvements in health require long term investments to bring about improvements in the quality and accessibility of health services. Global initiatives in health, have to work in a manner that respects national systems and strengthens rather than weakens, domestic health services.

And here is where the principles of the Paris Declaration are very useful to guide the practice of global initiatives in health at country level. In November 2005, following Discussions with the High Level Forum on Health, a set of principles which was based on the commitments of the Paris Declaration was agreed. They have now been adopted by many of the Global Initiatives and have informed a change of practice in these partnerships.

They include firm commitments in respect to each of the principles of the Paris Declaration. Specifically they include commitments to work within national development frameworks; to situate their support within national health sector strategies and plans; to use national institutions and procedures; to use national frameworks for performance assessment. It is very encouraging that the DAC is now fully engaged with efforts to ensure there is a better global-country connect (including sectors beyond health) and is exploring how global programmes can add value to country efforts in a manner that fully recognises the principles of the Paris Declaration.

And if the global initiatives have presented problems for health professionals and bilateral agencies – they have intensified pressures on Health Ministers and their senior officials. This is something my organisation is responding to.

We are engaged in developing, through preparatory meetings in Mozambique, Geneva and Madrid, a new joint project of the Council of Women World Leaders and Realizing Rights - the Ministerial Leadership Initiative for Global Women's Health – which will be formally launched at the World Health Assembly in Geneva next month.

Our experience tells us that Ministers of Health face enormous political and economic challenges, not only within their own governments, in the struggle over allocation of limited resources, but also on the international stage as they seek to play a leading role in influencing the policies of donors. Health ministers are increasingly responsible both for convincing their own governments to give due priority to health in the national budget, and for managing the complex architecture of health interventions by Global Funds, Donors, Foundations and NGOs.

This Initiative is focused on building the capacity, effectiveness and political leadership of Ministries of Health worldwide, and addressing critical women's health issues through individual and collective action for strategic, social and policy change. In many ways the project is a response to the huge pressures faced by Ministers of Health on a day to day basis – many of which have been caused by the proliferation of initiatives and the non conformity with the Principles of the Paris Declaration.

Cross-cutting issues and effectiveness in health

I would like to focus on how cross-cutting concerns of human rights, gender equality and environmental sustainability are so fundamental to an effective response in health and how the principles of the Paris Declaration can inform our approach to achieve better health for the poor.

Human rights

It is my message to-day that we will not make substantial progress towards the objective of access to health for all without greater attention to the links between health and the realization of fundamental human rights. Implementing the right to the highest attainable standard of health should be the ultimate objective of action in the field of public health.

The World Health Organisation declared in 1946 that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being. The right to health has been affirmed and ratified on many occasions since this time. However like many other economic, social and cultural rights, it has been neglected and violated on a huge scale in many parts of the world.

Let me refer to only one statistic: 30,000 children under five die every day from preventable disease or sheer hunger. That is a silent tsunami a week, 52 tsunamis a year. Human rights principles and standards, including the right to the highest attainable standard of health, offer powerful moral arguments for governments and the international community of the need to invest in health.

In tandem with this, the human rights framework – by focusing attention on vulnerable populations, minorities, the rural poor and women especially – provides a powerful standard to ensure that the health needs of the most vulnerable in communities are being met.

In 2002, the Commission on Human Rights created a new mandate – a UN Special Rapporteur on the Right to Health. The Special Rapporteur, Professor Paul Hunt of Essex University, has increasingly focused his work on how human rights principles and tools of accountability can be more directly applied to the task of strengthening health systems.

He has argued that the right to health can be understood as a right to an integrated and effective health system – which is responsive to national and local priorities, and is accessible to all. As he has stated .. “..the right to health underpins the call for an effective health system accessible to all ”

The right to health, denied to many people in the developing world, can only be delivered if donor partners fulfil their responsibilities through increased levels of aid and by ensuring it is delivered equitably and achieves results for the poor.

And again here we see an intersection between the principles of the Paris Declaration and the right to health.

In respect to ownership – a human rights approach requires that countries take responsibility for the international agreements they have ratified and make sure these are reflected in national development and sectoral plans – and indeed in budgetary allocations.

In terms of managing for results human rights principles and legal obligations can be used to help ascertain the effectiveness of policies and approaches – particularly their

impact on vulnerable or marginalised groups. The lack of effectiveness should provide a basis for demanding changes that can promote health.

In respect to accountability, the human rights framework brings into play established systems of national and international legal obligations and tools to assess performance by governments and international institutions. This can then be used to hold all actors involved accountable for achieving sustainable progress on major health challenges.

Another initiative my colleagues and I at Realising Rights have been engaged with is a High Level Advisory Council being implemented in conjunction with the Global Health Workforce Alliance and WHO. It addresses the issue of health worker migration from developing nations – an issue which is an enormous threat to the strengthening of health systems in these situations.

Growing public concern about the movement of health professionals from poor to rich countries has not been matched by effective joint government action. Some steps have been taken, such as the Commonwealth code of conduct aimed at curtailing unethical recruitment, but leadership on this issue is still lacking.

The Global Health Worker Policy Advisory Council will seek to encourage policy between sending and receiving countries on the health workers crisis. Our aim is to forge a greater sense of shared responsibility for addressing this growing problem, and to promote agreements that take account of the human rights implications for sending and receiving countries, as well as the right of individual health workers to migrate.

Gender equality

A discussion of the right to health also needs to include the rights of women – in particular their rights to better health. It should recognise the extent that the health crisis in developing countries has an enormous gender dimension.

Gender inequality in many developing countries is contributing to higher level exposure to health risks; lack of access to information and education; poorer access to basic health care, including to reproductive health services. It explains the high level of maternal deaths and the feminisation of the HIV epidemic. It provides a context for understanding the appalling scale of gender-based violence which we now know exists in so many situations.

Discrimination, violence, stigma and lack of access to healthcare services, prevent women from claiming their fundamental human right to health. These factors have made women the world over increasingly and alarmingly vulnerable to disease and early mortality. And yet there is a notable reluctance by donors to fund women's organisations adequately at local level.

Taken in conjunction with their application to a human rights approach, the principles of the Paris Declaration can hold a key to a more effective response in ensuring the rights of women to better health.

The principle of ownership highlights the importance of political commitment to the advancement of women. I strongly believe that much of the lack of progress in advancing the rights and the health of women can be attributed to low levels of political commitment – both in developing and more developed countries.

There is a need also for countries and for development agencies to understand the extent that women are disadvantaged and discriminated against – with particular reference to their health status and their particular health needs – and the impact this is having on a country's development. This understanding then needs to be reflected in clear national development programmes and in the policies and approaches of development agencies. It would imply both multi-sectoral actions (including legal frameworks) that can impact on the welfare of women and the targeting of programmes and resources at the most disadvantaged groups, including women.

Translating plans into practice requires the harmonisation and alignment of supports to the health sector and in particular the strengthening of national systems for the planning and delivery of health services.

The principle of managing for results calls for the inclusion of data relating to health and gender in performance assessment frameworks; the tracking of such data and the use of this data to inform decision making. It would require working with countries, in a participatory way to strengthen their capacities in the management of data – to increase skills in evidence building, analysis and advocacy in respect to gender and health. At the preparatory meeting in Madrid of the Ministerial Leadership Initiative, co-chair Minister Elena Salgado of Spain launched a project to create a network of women's observatories or units in health Ministries to disaggregate data and bring out the gender dimensions.

The principle of accountability requires donors to link resources to results at country level. Do Global Health Programmes, for example, help or hinder a more gender sensitive approach to tackling HIV and other major diseases? How do we ensure that a gender perspective is integrated into vertical or disease specific health interventions? Where does responsibility lie for failures?

At Realising Rights we are working with political leaders to build the capacity of African parliamentarians to advocate for an increased focus on how to achieve greater access to health care for women in Africa.

The project – Parliamentarians for Women's Health is building a cadre of national leaders in Botswana, Namibia, Tanzania and Kenya who will have knowledge, tools and sensitivities to address women's unmet health needs. We hope that their increased knowledge and commitment to women's health issues will not only make an impact in their respective countries but will also generate increased awareness amongst wider parliamentary networks who together can lobby for increased budget allocations and other interventions needed to make lasting improvements in women's health status and access to services in African countries.

Environmental sustainability

As if there were ever any doubt about the importance of the environment to development, the publication of such compelling evidence over the past year, and more recently the publication of the report of the Intergovernmental Panel on Climate Change, has focused international attention on the certainty that is Climate Change and on the impacts adverse environmental events are having on poorer communities around the globe.

Up to one fifth of the total disease burden in developing countries may be associated with environmental risk factors. Poor people are most affected by environmental conditions such as unsafe drinking water, poor air quality and exposure to dangerous substances. Water-related diseases claim three million lives a years, mainly children under five years of age, and poor water management contributes to vector-borne diseases such as malaria which kills one million people every year.

Climate change has numerous and complex inter-linkages with health. These include direct impacts, such as temperature-related illness and death (as seen in France in the Summer of 2004) and the impacts of extreme weather events (such as the recent floods in Mozambique). Climate change is also predicted to increase levels of malnutrition among children, an increase in the incidence of water, food and vector-borne diseases (such as malaria) and to increase food and water shortages.

Developing countries are most vulnerable to the impacts of climate change because of their concentration in the tropics, their heavy reliance on agriculture and their limited capacity to deal with natural disasters. According to the Stern Report, without international action over 200 million people could become refugees as their homes are hit by drought or flooding.

In my view the response of the international community to climate change has to be rooted in the international human rights framework. Though poor communities are suffering most from the effects of climate change, it is now clear that rich countries are contributing most to the problem. A human rights approach, which emphasises the equality of all people, can challenge a situation where those responsible for the impacts of climate change have hitherto not been accountable for their actions. A human rights framework can provide the legal and normative grounds for empowering poorer countries seek redress.

Again taking the Paris Declaration as the point of departure for effective responses in respect to the environment and health

The principle of ownership requires that rich countries, in the first instance, recognise that they are directly contributing to the creation of hazards which compromise the health of those living in poorer countries and that they have responsibilities in mitigating the negative impacts of climate change in these situations. It requires that developing country governments understand and recognise the extent that the environment is adversely affecting people's health – and that efforts to redress this are incorporated into national development plans and sectoral strategies.

Poorer countries need to be supported in adapting to the inevitable changes that are taking place as a consequence of the emergence of threats to the environment. This will require supports for the development of country strategies on the environment for institutional structures and capacities needed to oversee their implementation. Implementation of these plans will require the alignment of donor supports to government plans and the harmonisation of efforts within and across sectors. It will also require a strong focus on cross-sector collaboration and the establishment of structures to facilitate this.

The principle of management for development results will require the development of a single performance framework which includes the establishment and monitoring of annual targets and the development of a strong national capacity for generating data which highlight evolving environmental impacts and inform future national responses.

The principle of accountability will require an assessment of the extent that international legal frameworks, such as the Kyoto Protocol, are used and enforced and that countries adhere to emission targets and by providing financial support to poorer countries to help them to.

Concluding remarks

I would like to conclude by reiterating how the Paris Declaration is intended to increase the impact aid has on reducing poverty and inequality and accelerating achievement of the Millennium Development Goals. It calls for greater coherence among donors, developing countries and international agencies. With its emphasis on ownership, harmonisation and alignment, mutual accountability and results, its strength lies in the fact that it puts partnership and mutual accountability at the centre.

Partnership and mutual accountability call for an interactive working relationship between donors, and partner countries, between government, parliament and civil society and all citizens. It requires a greater degree of trust between the global, national and local players. But trust is not something that happens automatically. It is a social good that implies mutual respect and collective responsibility.

If the Paris Declaration is to have validity, ways have to be found to ensure that human rights, gender equality and environmental sustainability become of central importance to our efforts to reduce global poverty. This workshop presents a hugely important opportunity to advance our thinking in this respect and to contribute greatly to an improvement in development effectiveness.

I am making two requests of participants at this workshop:

My first request is straightforward. The Paris Declaration is a wonderful framework to make aid more effective. However, to make it operational – we need to make it more accessible. It would be very useful, this week, if we could demystify some of the concepts and the jargon – and if we could come with practical ways, that are faithful to the principles of the Declaration, but that can more easily facilitate its application.

My second request infers an application of one of the Paris principles to ourselves. I am aware that there are a large number of highly influential people from many

different agencies, members of different DAC networks, assembled here in Dublin for the next few days. I have spoken a lot earlier about accountability. I want to make sure that my reference to accountability applies not just to our organisations or our partners – but to ourselves.

We, collectively, bear huge responsibility for advancing the thinking and the practice of the crucial issues which constitute the theme of this workshop. We are endeavouring to work together, to make aid more effective, and to redress many of the deficiencies in practice that have characterised our approach to date. This is a big undertaking and a large responsibility.

I ask you to bear that in mind during the next few days – and to envisage a poor woman in Africa, attempting to bring her sick child to a distant health clinic. This is the person to whom you are accountable, in the first instance.

As you plan the road to ACCRA, next year, I leave you with a quote from the Beijing Declaration and Platform for Action, which though written twelve years ago, has many resonances for the theme of this workshop over the next two days.

“ It is indispensable to ensure that all members of society benefit from economic growth based on a holistic approach to all aspects of development: growth, equality between women and men, social justice, conservation and protection of the environment, sustainability, solidarity, participation, peace and respect for human rights ”.

Thank You

April 18th, 2007