



Policy Paper:

Using **International Human Rights**
Norms and Standards to
Strengthen Viet Nam's
Legal Framework on
Population



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CONTENT

Acknowledgment	3
Abbreviation	6
Foreword	7
I. Introduction	9
II. Areas of focus	13
1. Population size and structure	13
A. Population size	13
B. Population structure	15
2. Population development and reproductive health	18
III. Moving forward	23
Conclusion	25
Annex	27

ABBREVIATION

CAT	Convention against Torture and other Cruel, Inhuman, or Degrading Treatment or Punishment
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CRC	Convention on the Rights of the Child
CRPD	Convention on the Rights of Persons with Disabilities
GNP	Gross National Product
ICCPR	International Covenant on Civil and Political Rights
ICERD	International Covenant on the Elimination of All Forms of Racial Discrimination
ICESCR	International Covenant on Economic, Social and Cultural Rights
ICPD	International Conference on Population and Development
MDGs	Millennium Development Goals
RTI	Reproductive Tract Infections
RH	Reproductive Health
SDGs	Sustainable Development Goals
STIs	Sexually Transmitted Infections
SRH	Sexual Reproductive Health
UNFPA	United Nations Population Fund

FOREWORD

Population trends and dynamics play a powerful role in development, and must therefore be factored into planning and policy decisions. Because population dynamics vary widely – from countries trying to provide opportunities for enormous youth populations to those coping with low fertility and ageing – policies dealing with population issues must be tailored to their specific needs. Above all, it is critical that these policies be grounded in a fundamental respect for human rights.

Human rights are essential for all people. These rights must be protected, respected and fulfilled for everyone regardless of their age, sex, race, ethnicity, and their other status or identity. Human rights also include women's rights and sexual and reproductive health and rights as affirmed internationally in the Vienna Conference on Human Rights in 1993 and the International Conference on Population and Development (ICPD) in Cairo in 1994. In fact, sexual and reproductive health and rights are part of a continuum of human rights, which includes the rights to life, health and education, the rights to equality and non-discrimination, and the right to decide the timing, number and spacing of one's children.

Viet Nam is in an advanced stage of its demographic transition which is attributable to efforts by the Government of Viet Nam in investing in family planning and improving key social development indicators. However, there is disparity and inequality among regions and population groups. In addition, Viet Nam is now getting prepared for sustaining the achievements and addressing emerging population issues, including demographic bonus, rapid population ageing, sex-ratio at birth imbalance, migration, and urbanization, which require changes in policy response. Major shift from a population control approach to a broader perspective on population and development in Viet Nam's population policies is essential in this new demographic context. Furthermore, commitments to mainstream population dynamics, reproductive health and gender issues into national policies and strategies, explicitly adopting a human rights, culture and gender perspective and a life-cycle approach need to be ensured.

This report emphasizes how human rights norms and principles can be used in every stage of policy development and implementation toward strengthening the Viet Nam's population law and related policies in its new demographic context to ensure continued and sustainable success. The key message of this report is that developing a robust legal framework that integrates population policy goals, international human rights norms, and effective development policy is a potential area of leadership for Viet Nam. Viet Nam's development of human rights-based population law, related policies and programmes will help the country address the range of its demographic concerns, improving the lives of all people.

We hope this policy paper to function as a guide for policy makers and key stakeholders to place and ensure human rights ratified at the ICDP and other international treaties even more effectively in the forefront of decision-making processes with respect to law and policies regarding population and development in Viet Nam, thus ultimately support the well-being of all population, ensuring that no one is left behind.

Astrid Bant



UNFPA Representative in Viet Nam



I. INTRODUCTION

Viet Nam has made many strides in the areas of population and reproductive health. Relevant national efforts include the Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020; the Population Ordinance No. (06/2003/PL-UBTVQH11) and 2008 Revision of Article 10; as well as the Political Bureau's Resolution on the Accelerated Implementation of Population and Family Planning Policies (Resolution No. 47-NQ/TW-2005). These national legal and policy strategies in combination with past commitment to international development processes (such as the ICPD, MDGs and other health and development commitments) and the relevant actions taken by the Vietnamese government and its partners have resulted in several notable areas of progress, including the achievement of replacement level fertility rates, an increase in average life expectancy, and considerable improvements in maternal and child health, all contributing to declines in mortality rates and other improvements in socio-economic measures and quality of life.

Building on these successful population and development measures, this is an opportune time for Viet Nam to capitalize on a period of demographic bonus, and consider adjustments to its population policy

measures and laws to ensure continued success. Viet Nam faces demographic challenges, including population ageing and recognized sub-optimal sex ratios at birth.¹ Given current opportunities and challenges, developing a robust legal framework that integrates population policy goals, international human rights norms, and effective development policy is a potential area of leadership for Viet Nam. Viet Nam has been playing an increasingly visible role in relevant international fora. Explicit engagement with international human rights principles in doing this work can serve as a model to other countries interested in revising their population policies by demonstrating the effectiveness of a unified approach that recognizes the synergies between human rights and population, reproductive health, and development policies and laws. Such an approach will benefit Viet Nam and its international sustainable development efforts, in the context of the Sustainable Development Goals (SDGs) and beyond.

The goal of this paper is to provide a technical contribution to thinking and

1. E.g. *The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings*, Ministry of Planning and Investment. General Statistics Office, p. 37, p.70 (respectively).

analysis as Viet Nam continues to take steps in the development of its population law and related policies. This paper highlights Viet Nam's adherence to international human rights commitments—including not only achievements but opportunities for improvement and action—ultimately demonstrating the potential synergies in the creation of a population law in conformity with international human rights commitments. This paper results from analysis of Viet Nam's current population ordinance; population and reproductive health strategy; resolution on implementation of population and family planning policies; draft population law; select public health data as relevant; and Viet Nam's international human rights commitments relevant to population and development, as well as global experience in bringing human rights norms and standards into the development of national health policy.²

Viet Nam's development of a population law which systematically bring rights into play would benefit, in the first instance, from systematically integrating human rights principles such as nondiscrimination, participation, transparency and accountability into the language of the law itself; and focusing on key elements of the right to health—availability, accessibility, acceptability and quality—when defining standards for provision of services. Attention to a wide range of rights will be helpful to putting into place a comprehensive population law, extending also to rights that attach to the underlying determinants of health, e.g. adequate education, housing, food, and working conditions. Other rights that clearly impact population, such as the right to education; information; autonomy and bodily integrity; and the right to decide whether and when to have children, the number and spacing of children, and the information and means to exercise these rights, can also effectively support Viet Nam's population and development efforts. Additionally, integration

of such rights as information, privacy and confidentiality, informed decision-making, freedom of movement, and association can help strengthen the law and its effects. These rights all find their legal grounding in the core human rights treaties to which Viet Nam has chosen to be legally bound, including the International Covenant on Economic, Social and Cultural Rights (ICESCR), International Covenant on the Elimination of All Forms of Racial Discrimination (ICERD), International Covenant on Civil and Political Rights (ICCPR), Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), Convention against Torture and other Cruel, Inhuman, or Degrading Treatment or Punishment (CAT), Convention on the Rights of the Child (CRC), and Convention on the Rights of Persons with Disabilities (CRPD).³ Additionally, Viet Nam actively supported the International Conference on Population and Development (ICPD) and other relevant population and development processes.⁴ These treaties and conventions (1) reflect consensus on the part of the international community on those human rights norms and standards most relevant to population policy, (2) form discrete legal obligations, and (3) can function as powerful tools through which to analyze, formulate and improve the national legal and policy environment.

The use of human rights as suggested here in relation to policy development is about creating policies, structures, and resources that promote rights in how they are designed and implemented and are thus more effective, not simply about not violating rights or preventing rights violations from occurring. In this way, human rights can be about improving processes in the interest of maximizing public health and development gains. The utility of this paper therefore is to emphasize how human rights can be used in the efforts to improve Viet Nam's population law and related programming.

2. See annexed ICPD PoA excerpts for national actions that incorporate human rights norms and standards related to population and development.

3. See annex for text and information concerning treaty rights corresponding to each of the rights mentioned in this document.

4. See annex for more on the substance of the ICPD, and its utility in population and development policy.

The use of rights and relevant processes can positively impact the content of the law and the processes by which it is developed, implemented, and evaluated; can improve cooperation with other actors and institutions within the country and in the international community; can provide efficiency gains in the form of a common language amongst varied and diverse stakeholders; and can allow for the use of already-existing national and international accountability mechanisms and processes within healthcare and other relevant systems.

The remainder of the paper is structured as follows: Section II mirrors broad areas of focus central to revision of the population law noting relevant international human rights commitments and processes as applicable. Section III highlights rights commitments relevant to the ongoing process of policy and legal reform, and provides concluding comments suggesting some immediate ways human rights can be brought into play.



II. AREAS OF FOCUS

The current population and development context in Viet Nam provides several reasons for optimism, and several challenges. Viet Nam has experienced considerable economic growth, with increasing industrialization and development. Development projections include predicted movements in social services, IT infrastructure, increased access to information, heightened levels of education, and social advancements for women, all coalescing alongside a period of demographic bonus. Challenges remain, however, and include labor force concerns and unemployment, strains on the health system and social services in relation to urbanization and migration, persistent concerns about gender equality, population ageing, and particularly strong impacts from global climate change, environmental pollution, and natural disasters. Thus, an effective and rights-oriented population and reproductive health strategy is key to making the most of the opportunities and challenges the country is currently facing. To accomplish this, several issues are important to take into account in population and reproductive health-related law, policy, and strategy. Important areas of focus include population

size and related issues, such as population growth, fertility, mortality, contraceptive use, and abortion rates; as well as population structure and related issues, such as the demographic bonus, population ageing, sex ratio at birth, population distribution, and migration. Each of these issues is discussed in subsection (1) below in conjunction with relevant human rights norms and standards, and each must be viewed within the broader context of population development and reproductive health, discussed in subsection (2) below. Systematic attention to human rights helps to draw these issues together, and provides a framework for strengthening population law and policy.

1. POPULATION SIZE AND STRUCTURE

A. Population Size

Regulating population size can be supported through policies, strategies and legislation that are created to directly impact population size, and those that do so indirectly through, for example, supportive reproductive health strategies.

Population data generally indicative of population size and reflective of the extent to which rights concerns are prioritized include population growth rate; fertility rates; sex ratio at birth; mortality rates, with particular attention to maternal mortality, child mortality, and infant mortality; contraceptive prevalence rate; and abortion rates, including data on abortion safety.⁵ Attention to these measures is reflected in several of the objectives contained in the 2011-2020 Reproductive Health Strategy, including:

- Objective 1: To achieve a population growth rate of 1% by 2015 and stabilization at this level of 1% by 2020 [...].
- Objective 2: To improve health status by reducing child morbidity and mortality rates [...].
- Objective 4: To reduce sharply the sex ratio at birth [imbalance]...by 2025.
- Objective 5: Maintain reasonably low fertility rate [...].
- Objective 6: To reduce the abortion rate and basically eliminate unsafe abortions.⁶

Selected International Human Rights Commitments Relevant to Population Size

Process – how it is that objectives are achieved – is central. Most important is attention to the ways in which human rights and the incorporation of human rights principles can support attainment of the stated objectives through their impact on the processes relevant to the population law and related health policy and program development. At their core, human rights relevant to population size are about reproductive choice, including the freedom to decide whether or not to reproduce, whether to keep or terminate a pregnancy, how to engage in family planning, and what the preferred method of contraception is should it be desired. Adequate information, education, and services are thus critical, as

they are central to sexual and reproductive health.⁷

Viet Nam has done a laudable job recognizing and emphasizing the importance of providing information and education on reproductive health in its strategy and policy documents to date. Recognition that the right to information and education are key to determining population size is consonant with the international human rights norms and standards to which Viet Nam has committed. More could be achieved with attention to the range of additional rights relevant to these objectives; including the right to health; autonomy and bodily integrity; association; and in particular participation of affected communities; nondiscrimination, and informed decision-making.

One particular issue must be noted here. The 2008 Revision of Article 10 of the 2003 Population Ordinance reads in relevant part that each couple and individual is to “have one or two children, exceptional cases to be ordained by the Government.”⁸ Global evidence has demonstrated that it is possible to effectively reduce population growth rate through information, education, ensuring adequate reproductive health services, and paying attention to rights concerns in how information and services are delivered to the people who need them. Agreed upon human rights norms and standards, including the right to decide whether and when to have children, the number and spacing of children, and the information and the means to exercise these rights, suggest that the 2008 provision is not in conformity with Viet Nam’s human rights commitments.⁹ This limitation

5. *Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020*, p. 11-14.

6. *Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020*, p. 11-14.

7. See e.g. CEDAW Article 16.1(e) – [right to decide whether to have children, the number and spacing of children, and the information and the means to exercise these rights]; ICCPR Article 19.2 [right to information]; ICESCR Article 13 [right to education]; ICCPR Article 9 [right to liberty and security of the person] and autonomy and bodily integrity--in annex.

8. 2008 Ordinance, p. 17.

9. E.g. CEDAW Article 16(e); CRPD Article 23.1(b); ICESCR Article 12. See annex.

does not appear in the draft population law dated May 2015, and all efforts must be made to ensure that any such limitations do not slip back, whether in language or concept, in any drafts going forward. To be consonant with human rights norms and standards and to help Viet Nam achieve its population goals, any new iteration of the population law should ensure reproductive decision-making lies with the people, with adequate education, information, services, and resources provided by the state.

B. Population Structure

Population structure encompasses several aspects related to the composition of the population, including the distribution of age groups in a population, geographical distribution and density of the population, and sex ratios. Population, reproductive health, and development policy can benefit from more attention to a broader life-cycle approach, including explicit use of and attention to human rights in the process of developing, implementing, monitoring and evaluating policy related to population structure. Several illustrative examples of the issues raised are discussed below, including the demographic bonus; challenges related to population ageing, and sex-ratio at birth; population migration and distribution; and individual development from a health and quality of life perspective, including physical and mental health. Each of these areas, in the context of a comprehensive population, reproductive health, and development law and policy effort, constitute to provide opportunities for Viet Nam to develop effective, and rights-respecting policy, furthering both international legal commitments and bettering the day-to-day lives of the Vietnamese people. With attention to the variety of aspects related to population structure, this section discusses (1) the demographic bonus, (2) population ageing, (3) population age structure, and (4) population distribution and migration, with specific attention to relevant human rights commitments related to each issue.

Demographic Bonus and Selected International Human Rights Commitments

Viet Nam is currently benefitting from a period of “demographic bonus,” which is essentially a period of time in the demographic history of the state in which the working age population is particularly numerous, allowing for the potential of rapid economic growth.¹⁰ Once again human rights may support policy and legislative measures to help ensure positive effects due to this “demographic bonus” for the population as a whole. Optimizing demographic trends within the context of social and economic development includes a focus on

“economic development and poverty alleviation, especially in rural areas, improvement of women’s status, ensuring of universal access to quality primary education and primary health care, including reproductive health and family-planning services, and educational strategies regarding responsible parenthood and sexual education. Countries should mobilize all sectors of society in these efforts, including non-governmental organizations, local community groups and the private sector.”¹¹

Human rights norms of participation, inclusion, nondiscrimination, and equality are particularly important to the demographic window. Practically-putting into place efforts to increase participation rates in the labor force, e.g. for women or ethnic minority groups - will help Viet Nam’s ability to make the most of the demographic window. Participation means both opportunities for employment, and a meaningful voice in the structures that affect the day-to-day lives of Viet Nam’s people. Participation and mechanisms for

10. *The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings*, Ministry of Planning and Investment. General Statistics Office, p. 37-38.

11. *ICPD Programme of Action*, p. 47 para 6.4, see annex p. 17.

inclusion of all segments of Viet Nam's population will be a particularly effective way to capitalize on the demographic dividend.

Population Ageing and Selected International Human Rights Commitments

Reductions in fertility and mortality along with increased life expectancy at birth have led to considerable increases in the population of older people in Viet Nam, which is to be lauded but can strain health care systems, pension systems, and other national resources if not sufficiently recognized and addressed.¹² Efforts to respect the rights of older people and ensure that health systems, economic systems, and social support structures are responsive to their needs will be vital. National objectives that may be helpful in guiding policy related to population ageing include:

“To enhance, through appropriate mechanisms, the self-reliance of elderly people, and to create conditions that promote quality of life and enable them to work and live independently in their own communities as long as possible or as desired; (b) To develop systems of health care as well as systems of economic and social security in old age, where appropriate, paying special attention to the needs of women; (c) To develop a social support system, both formal and informal, with a view to enhancing the ability of families to take care of elderly people within the family.”¹³

Human rights principles of nondiscrimination and equality, the right to health, participation, autonomy and bodily integrity, and privacy

12. *The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings*, Ministry of Planning and Investment. General Statistics Office, p. 40; see also <http://vietnam.unfpa.org/public/lang/en/pid/9848>.

13. *ICPD Programme of Action*, p. 52 para 6.17, see annex.

all have specific implications for populations of older people, and population and development policy should recognize the needs of older people, specifically as the country is likely to experience strain due to larger numbers of people living longer lives.¹⁴ Attention to these rights includes, for example, assuring that health services available to them are accessible, acceptable, medically and scientifically appropriate and of good quality (right to health); assuring that older people are not discriminated against in seeking such services and that such services are specific to their needs (nondiscrimination and equality); ensuring that older people have a meaningful voice in the decisions that impact their lives (participation); ensuring that there are appropriate structures for determining capacity and allowing for autonomy in choices to seek services or not; and ensuring that confidentiality in medical and social support structures is upheld.

Population Age Structure and Selected International Human Rights Commitments

Viet Nam appears to face an increasing imbalance in sex-ratio at birth, in part thought to arise from the potent mix of continued gender inequality and increased access to sex-selection technologies, particularly prenatal sex-selective abortions.¹⁵ Though significant regional variation exists, this impact is evident in most of Viet Nam, and has risen in the last decade.¹⁶ Rights-respecting efforts to correct this imbalance, that both allow for autonomy and encourage gender equality, will be critical. In 2012, UNFPA highlighted some of the trends and

14. See annex for treaty provisions related to each of these rights; *The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings*, Ministry of Planning and Investment. General Statistics Office, p. 40.

15. *Sex Ratio at Birth in Viet Nam: New Evidence from the Intercensal Population and Housing Survey in 2014*, p. 5; see also <http://www.unfpa.org/publications/recent-change-sex-ratio-birth-viet-nam>.

16. *Sex Ratio at Birth in Viet Nam: New Evidence from the Intercensal Population and Housing Survey in 2014*, p. 5, 15-21.

policy implications associated with sex-ratio at birth imbalances:

“Sex selection in favour of boys is a symptom of pervasive social, cultural, political and economic injustices against women, and a manifest violation of women’s human rights. The growing number of missing women (latest estimates indicate 117 million missing women [globally]) speak of a culture in which gender inequality is deeply rooted. Patriarchal structures reinforce son preference and a climate of violence and discrimination against women and girls in society. Declining fertility and rapid developments in the technology that allows parents to know the sex of the foetus have exacerbated this practice.”¹⁷

The same document recalls ICPD Programme of Action sections to a similar effect, which reflects global consensus on eliminating

“all forms of discrimination against the girl child and the root causes of son preference, which results in harmful and unethical practices regarding female infanticide and prenatal sex selection.” The consensus agreement urges governments to “take the necessary measures to prevent infanticide, prenatal sex selection...” and says “leaders at all levels of the society must speak out and act forcefully against patterns of gender discrimination within the family, based on preference for sons....”¹⁸

Human rights principles of nondiscrimination and equality come to the forefront here, and particularly for addressing sex-ratio at birth, the right to information raises the need for multisectoral engagement across government structures to address the potential negative effects of sex selection also at the societal level, and encourage the elimination of gender-based discrimination, while respecting autonomy¹⁹.

Population Distribution, Migration, and Selected International Human Rights Commitments

Migration is a key challenge for countries undergoing demographic transition, and in the case of Viet Nam particularly in relation to populations moving within the country, often from rural to urban settings. Urbanization is correlated with development, and Viet Nam continues to see rapid growth of the urban population, at an average rate of 3.26% per year from 2009-2014²⁰. As highlighted in the Population and Reproductive Health Strategy for the Period 2011-2020, meeting migrants’ social, economic and educational needs is not only consistent with Viet Nam’s human rights commitments but effective from a population management perspective²¹.

“Effective population distribution policies are those that, while respecting the right of individuals to live and work in the community of their choice, take into account the effects of development strategies on population distribution. Urbanization has profound implications for the livelihood, way of life and values of individuals. At the same time, migration has economic, social and environmental implications - both positive and negative - for the places of origin and destination.

17. <https://www.unfpa.org/sites/default/files/pub-pdf/Sex%20Imbalances%20at%20Birth.%20PDF%20UNFPA%20APRO%20publication%202012.pdf>, p. 2.

18. <https://www.unfpa.org/sites/default/files/pub-pdf/Sex%20Imbalances%20at%20Birth.%20PDF%20UNFPA%20APRO%20publication%202012.pdf>, p. 2-3, and see annex.

19. http://www.unfpa.org/sites/default/files/pub-pdf/sex_ratio_birth_report.pdf, p. 52.

20. The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings, Ministry of Planning and Investment General Statistics Office, p. 101.

21. Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 38.

*[Objectives for population distribution and sustainable development are:] To foster a more balanced spatial distribution of the population by promoting in an integrated manner the equitable and ecologically sustainable development of major sending and receiving areas, with particular emphasis on the promotion of economic, social and gender equity based on respect for human rights, especially the right to development [...]*²²

The international human rights picture is clear: internal migrants are entitled to all basic human rights, and governments have an obligation to respect, protect, and fulfill these rights to the extent possible, including the right to freedom of movement and rights to autonomy and bodily integrity.²³ Moreover, other rights, such as the right to health and right to education stipulate that efforts should be made to ensure health care-including reproductive health care-and education are available to migrants.²⁴ Shifting population distribution presents a separate but related set of challenges, as rights commitments also dictate that services are available to all segments of the population, which may present challenges for more remote rural populations. The right to information includes, at a basic level, ensuring that information on accessing benefits and services is available to all. Progressive realization of human rights commitments is furthered by a population policy and law responsive to the reality of shifting population distribution and the needs of migrants.

22. ICPD Programme of Action, p. 95 para 9.1, see annex.

23. E.g. ICCPR Article 12, see annex.

24. See e.g. ICPD PoA Principle 12 and Action 7.11.

2. POPULATION DEVELOPMENT AND REPRODUCTIVE HEALTH

Population Development

Population development and health are well referenced in the “population quality” measures in the strategies and laws currently in place. As a preliminary note, the term “population quality” should be substituted for population development and health, or similar terminology, as use of the term “quality” could create false impressions for a variety of vulnerable populations-for example that disabled people are considered to be of substandard quality by comparison to the rest of the population-which does not align with Viet Nam’s support for its disabled population and leadership internationally in ratifying the Convention on the Rights of Persons with Disabilities in 2014.²⁵ As previously noted, Viet Nam has enjoyed considerable success in development efforts, as measured by economic growth,²⁶ increases in life-expectancy,²⁷ increases in the average number of schooling years,²⁸ and more than a doubling of the GNP per capita.²⁹

25. Reproductive Health Affinity Group (RHAG) letter; <http://indicators.ohchr.org/> [navigate to Viet Nam].

26. Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 35.

27. 0.7 years higher from 2009-2014, The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings, Ministry of Planning and Investment General Statistics Office, p. 25; 4.3 years higher from 1999-2009, Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 27.

28. 9.6 as of 2006; Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 28. Additionally, “the proportion of the population aged 5 years and older who had “never attended” school in 2014 had decreased significantly at the national level – from 9.8% in 1999 to 5.1% in 2009 and 4.4% in 2014.” The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings, Ministry of Planning and Investment General Statistics Office, p. 49.

29. Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 28.

As highlighted by the Population and Reproductive Health Strategy for the Period 2011-2020, however, development challenges remain: “[t]he quality of life for many people in Viet Nam is still limited...[t]he stature, weight and physical strength of the Vietnamese is less than people in other countries in the region.”³⁰ Additionally, the sixteen ethnic minority groups with populations within the country of less than 10,000 face many additional health problems, e.g. malaria, thyroid disorders, and leprosy. These groups face unique challenges, which include limited knowledge related to maternal and newborn health care, and low utilization of health services, population and reproductive health services, and social services.³¹ Explicit attention to rights concepts in working with these populations, and in the attention they are given in the population law and its implementation, can help to address these health and development challenges. For example, the right to health and the right to information include ensuring that information on accessing services conducive to health and in furtherance of development is available to all and in languages that are accessible and understandable to minority populations.

Reproductive Health

Reproductive health is well recognized as an important component of population health. Here as well, Viet Nam has successes to celebrate. Indicators that measure this critical area of health show progress, including a decline in maternal mortality

ratio,³² a particularly notable reduction in the infant mortality rate across all regions,³³ an increase in utilization of contraception,³⁴ and an increase in usage of modern contraceptives.³⁵

Despite these notable areas of progress, gaps still persist in access and use of services, including significant regional differences (e.g. access to prenatal, postnatal and newborn health services are significantly limited in mountainous and

30. Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 37.

31. Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 37. For example, the percentage of ethnic minority women aged 15-49 who received HIV counseling, were offered an HIV test, and accepted and received the result was 1/5th that of Kinh/Hoa women, and full vaccination coverage was lower among ethnic minority children (69.4%) than Kinh/Hoa children (84.6%). Viet Nam Multiple Indicator Cluster Survey 2014, General Statistics Office Viet Nam, p. 258, p. 84 (respectively).

32. 100/100k to 69/100k; Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 28. No data given on MMR in the 2014 Intercensal Population Report. The 2014 Multiple Indicator Cluster Survey provides the following: “Despite the importance of the first few days following birth, large-scale and nationally representative household survey programmes in Viet Nam have not systematically included questions on the post-natal period and care for the mother and newborn. In 2008, the Countdown to 2015 initiative, which monitors progress on maternal, newborn and child health interventions, highlighted this data gap, and called not only for post-natal care (PNC) programmes to be strengthened, but also for better data availability and quality.” Viet Nam Multiple Indicator Cluster Survey 2014, General Statistics Office Viet Nam, p.161.

33. 42.3 infant deaths/1000 live births in 1989, to 14.9 infant deaths/1000 live births in 2014, with associated reductions for both urban and rural populations. The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings, Ministry of Planning and Investment General Statistics Office, p. 80.

34. 73.9%-79.5%; Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 28. The 2014 Multiple Indicator Cluster Survey suggests 75.7% of women aged 15-49, currently married or in union, report usage of any method of contraception, with the most popular being an IUD at 28.2%. Viet Nam Multiple Indicator Cluster Survey 2014, General Statistics Office Viet Nam, p. 142.

35. Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020, p. 28. Among women aged 15-49, currently married or in union and reporting usage of contraception, “any modern method” was used by 57% of respondents as of 2014. Viet Nam Multiple Indicator Cluster Survey 2014, General Statistics Office Viet Nam, p. 142.

remote areas).³⁶ Some gaps are correlated with age as well, having a stronger impact on young women: for example, “only 70.4 per cent of women under 20 received their first antenatal care visit during the first trimester against about 85 per cent of women aged 20 and above.”³⁷ Further, contraceptive supply and service quality challenges are predicted to increase as the number of women entering reproductive age grows.³⁸ Rates of unsafe abortion remain relatively high, and support services are still not adequate in all areas.³⁹ Moreover, screening, detection, treatment, monitoring, and counseling could all be improved, particularly in light of relatively high rates of sexually transmitted infections, HIV, and reproductive cancers, even with the existence of HIV and other relevant services in certain regions.⁴⁰ Knowledge gaps regarding sexual and reproductive health remain particularly among young people,⁴¹ and “community awareness and

knowledge about gender and the impact of sexual abuse on the victim’s [sexual and reproductive health] are also limited.”⁴²

To a very real extent, current strategies recognize these gaps, and important strategy objectives have been outlined to try to rectify the situation:

- Objective 3: Improve maternal health and significantly narrow regional differentials in maternal health indicators.
- Objective 7: To reduce Reproductive Tract Infections (RTIs), Sexually Transmitted Infections (STIs), and to actively prevent all types of reproductive cancers through early detection and treatment [...].
- Objective 8: To improve reproductive health of adolescents and youth.
- Objective 9: To improve reproductive health of specific population groups (migrants, people living with disabilities, people living with HIV, ethnic minority groups facing the risk of population downsizing) and to provide prompt delivery of RH services to victims of gender-based violence or natural disasters.
- Objective 10: To strengthen health care for the elderly.⁴³

As noted earlier, a considerable strength of incorporation of and attention to human rights is that it not only fulfills international legal commitments but when integrated into relevant processes can help to improve health outcomes particularly for vulnerable populations. Not surprisingly, improvements for these populations have spillover effects, and tend to increase well-being for the country as a whole. For example, each of the above objectives align well with Sustainable Development Goal 3, which aims to ensure healthy lives and promote well-being for all at all ages. The SDG highlights the fact that “young people are also extremely vulnerable, facing disproportionately high HIV rates as well as barriers to reproductive

36. “IMR [infant mortality rate] was high in the ‘difficult’ socio-economic regions, specifically the Northern Midlands and Mountains and Central Highlands. These are regarded as the two less developed regions, and had high quite IMRs of 22.4 and 25.9 infant deaths per 1000 live births, much higher than the national level. The difference in IMR reflects the gap in socio-economic development and living standards [in 2014].” *The 1/4/2014 Viet Nam Intercensal Population and Housing Survey: Major Findings*, Ministry of Planning and Investment General Statistics Office, p. 80-81. See also *Antenatal care coverage differentials for the northern midlands and mountainous area, 2014. Viet Nam Multiple Indicator Cluster Survey 2014*, General Statistics Office Viet Nam, p. 149.

37. *Viet Nam Multiple Indicator Cluster Survey 2014*, General Statistics Office Viet Nam, p. 154.

38. *Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020*, p. 37-38.

39. *Viet Nam Population and Reproductive Health Strategy for the period 2011-2020*, p. 38.

40. *Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020*, p. 38.

41. See, for example, “Percentage of young women aged 15-24 years who correctly identified ways to prevent sexual transmission of HIV and who rejected major misconceptions about HIV transmission [49.3%].” *Viet Nam Multiple Indicator Cluster Survey 2014*, General Statistics Office Viet Nam, p. 8.

42. *Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020*, p. 38.

43. *Viet Nam Population and Reproductive Health Strategy for the Period 2011-2020*, p. 11-14.

health information and care.”⁴⁴ Objective 8 above is an important strategy objective that aligns with this SDG, and for HIV, focusing on young people and other vulnerable populations makes sense from an epidemiological perspective as well as from a rights perspective, lessening the disease burden for the country overall. Thus, not only are these objectives relevant to the population law and policy, they are also important priorities for health and development for Viet Nam overall. Attention to relevant rights, such as the right to health (discussed in further depth in the following section) and right to information, can identify which populations are more vulnerable and guide policy as to how best to address their needs, which are among the primary benefits of a human rights approach.

Selected International Human Rights Commitments Relevant to Population Development and Reproductive Health

The right to the highest attainable standard of health⁴⁵ is perhaps most relevant for Viet Nam’s development and health efforts in this context. The Committee on Economic, Social and Cultural Rights’ (CESCR) General Comment 14 on the right to the highest attainable standard of health provides useful normative guidance as to the content and meaning of the right.⁴⁶ The right to health is not confined to health care, nor is it understood as a right to be healthy; rather, it encompasses inter alia the provision of conditions conducive to a healthy life, including underlying determinants of health (e.g. adequate nutrition, sanitation, and information on health services).⁴⁷ It is well established that effective development is

impossible without explicitly addressing these determinants.

Each of the strategy objectives listed above further Viet Nam’s efforts towards ensuring the right to the highest attainable standard of health. Additionally, attention to the right to health can be useful in formulating relevant law and policy. As an illustrative example, CESCR General Comment 22 on the right to sexual and reproductive health (Article 12 of the ICESCR) underscores four interrelated and essential elements, previously established as a part of the right to health and now identified specifically in the context of the right to sexual and reproductive health: the *availability*, *accessibility*, *acceptability* and *quality* of health facilities, goods, information, and services.⁴⁸ Taken in turn, these elements are a useful way to conceptualize how reproductive health services can be more effectively delivered.⁴⁹

A. Functioning reproductive health and health-care facilities, goods and services, as well as programs, have to be available in sufficient quantity;

- For example, there must be adequate geographic coverage such that people in rural areas, not just urban centers, can access reproductive health care. Hours must be sufficiently flexible that working people can access services as needed.

44. <http://www.unfpa.org/sdg>.

45. E.g. ICESCR Article 12, CRC Article 24, CRPD Article 25, CEDAW Article 12, UDHR Article 25.

46. UN Committee on Economic, Social and Cultural Rights, General Comment No. 14, *The right to the highest attainable standard of health*, UN Doc. No. E/C.12/2000/4 (2000).

47. UN Committee on Economic, Social and Cultural Rights, General Comment No. 14, *The right to the highest attainable standard of health*, UN Doc. No. E/C.12/2000/4 (2000).

48. UN Committee on Economic, Social and Cultural Rights, General Comment No. 22 on the Right to sexual and reproductive health (article 12 of the International Covenant on Economic, Social and Cultural Rights), UN Doc. No. E/C.12/GC/22 (2016); UN Committee on Economic, Social and Cultural Rights, General Comment No. 14, *The right to the highest attainable standard of health*, UN Doc. No. E/C.12/2000/4 (2000).

49. UN Committee on Economic, Social and Cultural Rights, General Comment No. 22 on the Right to sexual and reproductive health (article 12 of the International Covenant on Economic, Social and Cultural Rights), UN Doc. No. E/C.12/GC/22 (2016); UN Committee on Economic, Social and Cultural Rights, General Comment No. 14, *The right to the highest attainable standard of health*, UN Doc. No. E/C.12/2000/4 (2000).

B. Accessible to everyone without discrimination, respectful of medical ethics and of the culture of individuals, minorities, peoples and communities, sensitive to gender and life-cycle requirements;

- For example, ethnic minority groups currently face challenges in accessing reproductive health services in Viet Nam.⁵⁰ Efforts to improve accessibility could include not only attention to physical access but translation and language coverage as relevant.

C. Acceptable to the populations for which they were intended, designed to respect confidentiality and improve the health status of those concerned;

- For example, ensuring that medical confidentiality is respected as this is directly associated with privacy rights, and working with local populations to ensure that the way health services are delivered is acceptable, recognizing differences amongst populations and provinces.

D. Scientifically and medically appropriate and of good quality.

- Quality includes ensuring that drugs are not expired, that there are sufficient trained personnel, and that treatment offered are up-to-date, safe, and appropriate from a medical perspective.

Each element can affect the ways that services are delivered, accepted and used, and if explicitly articulated and addressed, can have a considerable impact in strengthening population outcomes.

50. See, for example, differential in content of antenatal care between ethnic minorities and Kinh/Hoa. Viet Nam Multiple Indicator Cluster Survey 2014, General Statistics Office Viet Nam, p. 155.



III. MOVING FORWARD

A human rights-oriented framework may be useful for considering how a population law with due attention to population size, structure, migration, health and development can be strengthened. Such a framework can help to both assess the current state of policy and address gaps from a human rights perspective, which also serves to better population policy and development efforts. Below, several key rights principles previously discussed are touched on briefly to illustrate how in practical terms they might be used to support revision of the population law.

1. Nondiscrimination. In addition to broad provisions guaranteeing that discrimination will not occur, the law can also help to ensure discrimination does not occur in how its goals and objectives are reached. Incorporating explicit concern not only with the health outcomes to be derived from the policy, but the specifics of how these outcomes are to be reached would be an important step in this direction.

For example, ensuring attention to appropriately disaggregated data for analyzing whether discrimination is being avoided may be tremendously helpful. Assessment as to the extent of discrimination that is or is not occurring may require special efforts such as interviewing difficult-to-reach populations, many of which already face discrimination in accessing relevant goods and services.

2. Participation. It is vital to ensure affected communities are able to participate in policy development and monitoring if the population law is to have its desired effect on the ground. Ideally, participation would be representative of the varied populations the policy seeks to reach, and participants' views would be adequately taken into account; minimal requirements include ensuring that representatives of affected populations have played a role in planning processes, find the proposed policy to be necessary and acceptable,

and are part of implementation and monitoring processes going forward⁵¹.

3. **Informed decision-making.** The principle of autonomy, expressed through free, full and informed decision-making, is a central theme in medical ethics, and is embodied in human rights law. This includes informed consent for medical decisions and procedures. Explicit attention to informed decision-making as it relates to reproductive health decision-making would be a very useful provision for inclusion in the new law.

4. **Availability, Accessibility, Acceptability, and Quality of Relevant Goods and Services.** Systematic attention to ensuring the availability, accessibility, acceptability, and quality of relevant health-related goods and services, including social services, and expressly articulating and addressing these concepts, are a direct way to include health-related rights and concerns in the population law.

5. **Transparency and Accountability.** Accountability and transparency are critical to implementation of the population law and in relation to Viet

Nam's international human rights commitments. For implementation, it is critical that there are transparent processes both for identifying who is responsible for implementing population measures, and to demonstrate and justify how these obligations have been fulfilled. This includes standards and indicators for monitoring performance, ideally based on disaggregated, high quality data. Additionally, a functioning mechanism through which rights-holders can bring complaints and access remedies helps to further accountability. At the international level, explicit attention to and incorporation of human rights in the population law helps to bolster Viet Nam's demonstration of accountability pursuant to its international human rights commitments.

51. Although in a programmatic context, the UNFPA Human Rights-Based Approach to Programming provides further useful guidance as to meaningful participation: "Ensuring that all national stakeholders have genuine ownership over development processes in all stages of the programming cycle: assessment and analysis, design, implementation, monitoring and evaluation. For processes to be truly participatory, they should be 'active, free and meaningful.' Participation should be viewed as fostering critical consciousness and decision-making as the basis for active citizenship. Development strategies should empower citizens, especially the most marginalized, to articulate their expectations to the State and other duty bearers, and take charge of their own development. This is also the requirement laid out in UNFPA's "culture lens", that you communicate with, listen to, and mediate with community groups, religious leaders, government officials and anyone else you think might be impacted by your programme." UNFPA Human Rights-Based Approach to Programming, p.76.



CONCLUSION

Overall, Viet Nam's legal framework on population contains a robust set of measures that align well with international human rights norms and principles, but there is room for progress. Notably, much of the work that will go into the new population law can be strengthened by explicit attention to human rights. Global experience has demonstrated that consistent and deliberate attention to human rights at every stage of policy development and implementation can improve the health and development of a population, and will make progress more equitable and more sustainable.

For the population law to exist in an environment conducive to the highest attainable standard of health for the people of Viet Nam necessarily includes addressing the effects of discrimination, gender-related and otherwise; and equitable provision of health services. Several international human rights concepts have been discussed in this brief policy paper, including nondiscrimination and equality; the various dimensions of right to health; the right to participation and inclusion; the right to information and informed decision-making; the right to education;

as well as the right to decide whether and when to have children, the number and spacing of children, and the information and the means to exercise these rights⁵². The interdependence and indivisibility of human rights supports engagement of a wide range of stakeholders to promote collaboration among sectors and levels of government, but also external partners, and community members in common concern for the health and development of the people of Viet Nam. Cross sectoral collaboration, including engaging relevant civil society actors in supporting the policymaking process, helps further the right to participation, and creates a more inclusive, representative process, which ultimately will improve health outcomes. Building on the enormous successes already achieved, it is our sincere hope that human rights will be further incorporated as fundamental principles of the law, and may function as a guide and a tool for development of a population policy that will improve the lives, health, and well-being of Viet Nam's people.

52. See annex for specific treaty provisions.



ANNEX: INTERNATIONAL HUMAN RIGHTS COMMITMENTS AND VIET NAM'S LEGAL FRAMEWORK ON POPULATION

Viet Nam is party to several core international human rights treaties, including the ICESCR, ICERD, ICCPR, CEDAW, CAT, CRC, and CRPD. This annex highlights a select set of international human rights principles drawn from these treaties relevant to current population and development efforts in Viet Nam. For the sake of brevity, a representative example from one international human rights treaty to which Viet Nam is a state party has been set out in full for each principle noted in the policy paper, with relevant provisions from other treaties or instruments listed below it by article. Precise wording and application varies from treaty to treaty, thus each separate article should be consulted if there is interest in the specifics in relation to a given treaty. This list provides depth on key components of Viet Nam's international human rights commitments relevant to population and development.

Additionally, the International Conference on Population and Development, held in Cairo in 1994, resulted in the adoption of the ICPD Programme of Action, perhaps the most relevant international political commitment reflecting international consensus on population and development. Viet Nam's key role in the ICPD process is well known and the principles agreed to remain as relevant today as they were in Cairo in 1994. The Programme of Action is relevant in its entirety, but several key sections are reproduced after the human rights treaty provisions as they are extremely relevant to Viet Nam's current efforts regarding population and development. Read together, the policy paper, human rights commitments, and ICPD provisions provide guidance and emphasize concrete legal obligations Viet Nam has chosen to adopt.

NONDISCRIMINATION AND EQUALITY

International Covenant on Civil and Political Rights (ICCPR)

- *Article 2.1 – [Nondiscrimination]:*

Each State Party to the present Covenant undertakes to respect and to ensure to all individuals within its territory and subject to its jurisdiction the rights recognized in the present Covenant, without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

- *Article 3 – [Equality between Men and Women]*

The States Parties to the present Covenant undertake to ensure the equal right of men and women to the enjoyment of all civil and political rights set forth in the present Covenant.

- *Article 26 – [Equality and Nondiscrimination before Law]*

All persons are equal before the law and are entitled without any discrimination to the equal protection of the law. In this respect, the law shall prohibit any discrimination and guarantee to all persons equal and effective protection against discrimination on any ground such as race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

International Covenant on Economic, Social and Cultural Rights (ICESCR)

- *Article 2.2 – [Nondiscrimination]*

The States Parties to the present Covenant undertake to guarantee that the rights enunciated in the present Covenant will be exercised without discrimination of any kind

as to race, colour, sex, language, religion, political or other opinion, national or social origin, property, birth or other status.

- *Article 3 – [Equality between Men and Women]*

The States Parties to the present Covenant undertake to ensure the equal right of men and women to the enjoyment of all economic, social and cultural rights set forth in the present Covenant.

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

Full convention relevant. Selected articles:

- *Article 1 – Discrimination*

For the purposes of the present Convention, the term “discrimination against women” shall mean any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status, on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field.

- *Article 2 – Policy Measures*

States Parties condemn discrimination against women in all its forms, agree to pursue by all appropriate means and without delay a policy of eliminating discrimination against women and, to this end, undertake:

- (a) To embody the principle of the equality of men and women in their national constitutions or other appropriate legislation if not yet incorporated therein and to ensure, through law and other appropriate means, the practical realization of this principle;
- (b) To adopt appropriate legislative and other measures, including sanctions where appropriate, prohibiting all discrimination against women;
- (c) To establish legal protection of the rights of women on an equal basis with men and to ensure through

competent national tribunals and other public institutions the effective protection of women against any act of discrimination;

- (d) To refrain from engaging in any act or practice of discrimination against women and to ensure that public authorities and institutions shall act in conformity with this obligation;
- (e) To take all appropriate measures to eliminate discrimination against women by any person, organization or enterprise;
- (f) To take all appropriate measures, including legislation, to modify or abolish existing laws, regulations, customs and practices which constitute discrimination against women;
- (g) To repeal all national penal provisions which constitute discrimination against women.

- *Article 5 – Sex Role Stereotyping and Prejudice*

States Parties shall take all appropriate measures:

- (a) To modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women;
- (b) To ensure that family education includes a proper understanding of maternity as a social function and the recognition of the common responsibility of men and women in the upbringing and development of their children, it being understood that the interest of the children is the primordial consideration in all cases

- *Article 6 – Trafficking/prostitution*

States Parties shall take all appropriate measures, including legislation, to suppress all forms of traffic in women and exploitation of prostitution of women.

- *Article 10 – Education*

States Parties shall take all appropriate measures to eliminate discrimination against women in order to ensure to them equal rights with men in the field of education and in particular to ensure, on a basis of equality of men and women:

- (a) The same conditions for career and vocational guidance, for access to studies and for the achievement of diplomas in educational establishments of all categories in rural as well as in urban areas; this equality shall be ensured in pre-school, general, technical, professional and higher technical education, as well as in all types of vocational training;
- (b) Access to the same curricula, the same examinations, teaching staff with qualifications of the same standard and school premises and equipment of the same quality;
- (c) The elimination of any stereotyped concept of the roles of men and women at all levels and in all forms of education by encouraging coeducation and other types of education which will help to achieve this aim and, in particular, by the revision of textbooks and school programmes and the adaptation of teaching methods;
- (d) The same opportunities to benefit from scholarships and other study grants;
- (e) The same opportunities for access to programmes of continuing education, including adult and functional literacy programmes, particularly those aimed at reducing, at the earliest possible time, any gap in education existing between men and women;
- (f) The reduction of female student drop-out rates and the organization of programmes for girls and women who have left school prematurely;
- (g) The same opportunities to participate actively in sports and physical education;

- (h) Access to specific educational information to help to ensure the health and well-being of families, including information and advice on family planning.

- *Article 12 – Health*

1. States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning.
2. Notwithstanding the provisions of paragraph 1 of this article, States Parties shall ensure to women appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation.

- *Article 14 – Rural Women*

1. States Parties shall take into account the particular problems faced by rural women and the significant roles which rural women play in the economic survival of their families, including their work in the non-monetized sectors of the economy, and shall take all appropriate measures to ensure the application of the provisions of the present Convention to women in rural areas.
2. States Parties shall take all appropriate measures to eliminate discrimination against women in rural areas in order to ensure, on a basis of equality of men and women, that they participate in and benefit from rural development and, in particular, shall ensure to such women the right:
 - (a) To participate in the elaboration and implementation of development planning at all levels;
 - (b) To have access to adequate health care facilities, including information, counselling and services in family planning;

- (c) To benefit directly from social security programmes;
- (d) To obtain all types of training and education, formal and non-formal, including that relating to functional literacy, as well as, inter alia, the benefit of all community and extension services, in order to increase their technical proficiency;
- (e) To organize self-help groups and co-operatives in order to obtain equal access to economic opportunities through employment or self employment;
- (f) To participate in all community activities;
- (g) To have access to agricultural credit and loans, marketing facilities, appropriate technology and equal treatment in land and agrarian reform as well as in land resettlement schemes;
- (h) To enjoy adequate living conditions, particularly in relation to housing, sanitation, electricity and water supply, transport and communications.

Convention on the Rights of the Child (CRC)

• Article 2 – [Nondiscrimination]

1. States Parties shall respect and ensure the rights set forth in the present Convention to each child within their jurisdiction without discrimination of any kind, irrespective of the child's or his or her parent's or legal guardian's race, colour, sex, language, religion, political or other opinion, national, ethnic or social origin, property, disability, birth or other status.
2. States Parties shall take all appropriate measures to ensure that the child is protected against all forms of discrimination or punishment on the basis of the status, activities, expressed opinions, or beliefs of the child's parents, legal guardians, or family members.

• Article 23.1 – [Full and Decent Life for Disabled Child]

1. States Parties recognize that a mentally or physically disabled child should enjoy a full and decent life, in conditions which ensure dignity, promote self-reliance and facilitate the child's active participation in the community.

• Article 30 – [Protection of Ethnic, Religious or Linguistic Minorities]

In those States in which ethnic, religious or linguistic minorities or persons of indigenous origin exist, a child belonging to such a minority or who is indigenous shall not be denied the right, in community with other members of his or her group, to enjoy his or her own culture, to profess and practise his or her own religion, or to use his or her own language.

International Convention on the Elimination of All Forms of Racial Discrimination (ICERD)

Full convention relevant. Selected articles:

• Article 1 – [Racial Discrimination Defined]

1. In this Convention, the term "racial discrimination" shall mean any distinction, exclusion, restriction or preference based on race, colour, descent, or national or ethnic origin which has the purpose or effect of nullifying or impairing the recognition, enjoyment or exercise, on an equal footing, of human rights and fundamental freedoms in the political, economic, social, cultural or any other field of public life.
2. This Convention shall not apply to distinctions, exclusions, restrictions or preferences made by a State Party to this Convention between citizens and non-citizens.
3. Nothing in this Convention may be interpreted as affecting in any way the legal provisions of States Parties concerning nationality, citizenship or naturalization, provided that such provisions do not discriminate against any particular nationality.

4. Special measures taken for the sole purpose of securing adequate advancement of certain racial or ethnic groups or individuals requiring such protection as may be necessary in order to ensure such groups or individuals equal enjoyment or exercise of human rights and fundamental freedoms shall not be deemed racial discrimination, provided, however, that such measures do not, as a consequence, lead to the maintenance of separate rights for different racial groups and that they shall not be continued after the objectives for which they were taken have been achieved.

- *Article 2 – [States Parties Commitments to end Discrimination]*

1. States Parties condemn racial discrimination and undertake to pursue by all appropriate means and without delay a policy of eliminating racial discrimination in all its forms and promoting understanding among all races, and, to this end:
 - (a) Each State Party undertakes to engage in no act or practice of racial discrimination against persons, groups of persons or institutions and to ensure that all public authorities and public institutions, national and local, shall act in conformity with this obligation;
 - (b) Each State Party undertakes not to sponsor, defend or support racial discrimination by any persons or organizations;
 - (c) Each State Party shall take effective measures to review governmental, national and local policies, and to amend, rescind or nullify any laws and regulations which have the effect of creating or perpetuating racial discrimination wherever it exists;
 - (d) Each State Party shall prohibit and bring to an end, by all appropriate means, including legislation as required by circumstances, racial

discrimination by any persons, group or organization;

- (e) Each State Party undertakes to encourage, where appropriate, integrationist multiracial organizations and movements and other means of eliminating barriers between races, and to discourage anything which tends to strengthen racial division.

2. States Parties shall, when the circumstances so warrant, take, in the social, economic, cultural and other fields, special and concrete measures to ensure the adequate development and protection of certain racial groups or individuals belonging to them, for the purpose of guaranteeing them the full and equal enjoyment of human rights and fundamental freedoms. These measures shall in no case entail as a consequence the maintenance of unequal or separate rights for different racial groups after the objectives for which they were taken have been achieved.

- *Article 5 [Enumerated Rights]*

In compliance with the fundamental obligations laid down in article 2 of this Convention, States Parties undertake to prohibit and to eliminate racial discrimination in all its forms and to guarantee the right of everyone, without distinction as to race, colour, or national or ethnic origin, to equality before the law, notably in the enjoyment of the following rights:

- (a) The right to equal treatment before the tribunals and all other organs administering justice;
- (b) The right to security of person and protection by the State against violence or bodily harm, whether inflicted by government officials or by any individual group or institution;
- (c) Political rights, in particular the right to participate in elections-to vote and to stand for election-on the basis of universal and equal suffrage, to take part in the Government as well as in

the conduct of public affairs at any level and to have equal access to public service;

(d) Other civil rights, in particular:

- (i) *The right to freedom of movement and residence within the border of the State;*
- (ii) *The right to leave any country, including one's own, and to return to one's country;*
- (iii) *The right to nationality;*
- (iv) *The right to marriage and choice of spouse;*
- (v) *The right to own property alone as well as in association with others;*
- (vi) *The right to inherit;*
- (vii) *The right to freedom of thought, conscience and religion;*
- (viii) *The right to freedom of opinion and expression;*
- (ix) *The right to freedom of peaceful assembly and association;*

(e) Economic, social and cultural rights, in particular:

- (i) *The rights to work, to free choice of employment, to just and favourable conditions of work, to protection against unemployment, to equal pay for equal work, to just and favourable remuneration;*
- (ii) *The right to form and join trade unions;*
- (iii) *The right to housing;*
- (iv) *The right to public health, medical care, social security and social services;* (v) *The right to education and training;*
- (vi) *The right to equal participation in cultural activities;*
- (f) *The right of access to any place or service intended for use by the general public, such as transport hotels,*

restaurants, cafes, theatres and parks.

• [Article 7 \[Education on Nondiscrimination\]](#)

States Parties undertake to adopt immediate and effective measures, particularly in the fields of teaching, education, culture and information, with a view to combating prejudices which lead to racial discrimination and to promoting understanding, tolerance and friendship among nations and racial or ethnical groups, as well as to propagating the purposes and principles of the Charter of the United Nations, the Universal Declaration of Human Rights, the United Nations Declaration on the Elimination of All Forms of Racial Discrimination, and this Convention.

Convention on the Rights of Persons with Disabilities (CRPD)

• [Article 5 – \[Equality and Nondiscrimination\]](#)

1. States Parties recognize that all persons are equal before and under the law and are entitled without any discrimination to the equal protection and equal benefit of the law.
2. States Parties shall prohibit all discrimination on the basis of disability and guarantee to persons with disabilities equal and effective legal protection against discrimination on all grounds.
3. In order to promote equality and eliminate discrimination, States Parties shall take all appropriate steps to ensure that reasonable accommodation is provided.
4. Specific measures which are necessary to accelerate or achieve de facto equality of persons with disabilities shall not be considered discrimination under the terms of the present Convention.

• [Article 6 – \[Women with Disabilities\]](#)

1. States Parties recognize that women and girls with disabilities are subject to multiple discrimination, and in this regard shall take measures to ensure

the full and equal enjoyment by them of all human rights and fundamental freedoms.

2. States Parties shall take all appropriate measures to ensure the full development, advancement and empowerment of women, for the purpose of guaranteeing them the exercise and enjoyment of the human rights and fundamental freedoms set out in the present Convention.

- *Article 7 – [Children with Disabilities]*

1. States Parties shall take all necessary measures to ensure the full enjoyment by children with disabilities of all human rights and fundamental freedoms on an equal basis with other children.
2. In all actions concerning children with disabilities, the best interests of the child shall be a primary consideration.
3. States Parties shall ensure that children with disabilities have the right to express their views freely on all matters affecting them, their views being given due weight in accordance with their age and maturity, on an equal basis with other children, and to be provided with disability and age-appropriate assistance to realize that right.

Convention Against Torture (CAT)

- *Article 1 – [Torture linked to Discrimination]*

1. For the purposes of this Convention, the term “torture” means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or

suffering arising only from, inherent in or incidental to lawful sanctions.

2. This article is without prejudice to any international instrument or national legislation which does or may contain provisions of wider application.

RIGHT TO HEALTH

International Covenant on Economic, Social and Cultural Rights (ICESCR)

- *Article 12 – [Health]:*

1. The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.
2. The steps to be taken by the States Parties to the present Covenant to achieve the full realization of this right shall include those necessary for:
 - (a) The provision for the reduction of the stillbirth-rate and of infant mortality and for the healthy development of the child;
 - (b) The improvement of all aspects of environmental and industrial hygiene;
 - (c) The prevention, treatment and control of epidemic, endemic, occupational and other diseases;
 - (d) The creation of conditions which would assure to all medical service and medical attention in the event of sickness.

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

- *Article 12 – [Nondiscrimination in Health Care; Reproductive Health Services]*

1. States Parties shall take all appropriate measures to eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning.
2. Notwithstanding the provisions of paragraph 1 of this article, States Parties shall ensure to women

appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation.

Convention on the Rights of the Child (CRC)

- **Article 23.2 – [Special Care for the Disabled Child]**

2. States Parties recognize the right of the disabled child to special care and shall encourage and ensure the extension, subject to available resources, to the eligible child and those responsible for his or her care, of assistance for which application is made and which is appropriate to the child's condition and to the circumstances of the parents or others caring for the child.

- **Article 24 – [Health]**

1. States Parties recognize the right of the child to the enjoyment of the highest attainable standard of health and to facilities for the treatment of illness and rehabilitation of health. States Parties shall strive to ensure that no child is deprived of his or her right of access to such health care services.
2. States Parties shall pursue full implementation of this right and, in particular, shall take appropriate measures:
 - (a) To diminish infant and child mortality;
 - (b) To ensure the provision of necessary medical assistance and health care to all children with emphasis on the development of primary health care;
 - (c) To combat disease and malnutrition, including within the framework of primary health care, through, inter alia, the application of readily available technology and through the provision of adequate nutritious foods and clean drinking-water, taking into consideration the dangers and

risks of environmental pollution;

- (d) To ensure appropriate pre-natal and post-natal health care for mothers;
- (e) To ensure that all segments of society, in particular parents and children, are informed, have access to education and are supported in the use of basic knowledge of child health and nutrition, the advantages of breastfeeding, hygiene and environmental sanitation and the prevention of accidents;
- (f) To develop preventive health care, guidance for parents and family planning education and services.

3. States Parties shall take all effective and appropriate measures with a view to abolishing traditional practices prejudicial to the health of children.

4. States Parties undertake to promote and encourage international co-operation with a view to achieving progressively the full realization of the right recognized in the present article. In this regard, particular account shall be taken of the needs of developing countries.

Convention on the Rights of Persons with Disabilities (CRPD)

- **Article 25 – Health**

States Parties recognize that persons with disabilities have the right to the enjoyment of the highest attainable standard of health without discrimination on the basis of disability. States Parties shall take all appropriate measures to ensure access for persons with disabilities to health services that are gender-sensitive, including health-related rehabilitation. In particular, States Parties shall:

- a. Provide persons with disabilities with the same range, quality and standard of free or affordable health care and programmes as provided to other persons, including in the area of sexual and reproductive health

and population-based public health programmes;

- b. Provide those health services needed by persons with disabilities specifically because of their disabilities, including early identification and intervention as appropriate, and services designed to minimize and prevent further disabilities, including among children and older persons;
- c. Provide these health services as close as possible to people's own communities, including in rural areas;
- d. Require health professionals to provide care of the same quality to persons with disabilities as to others, including on the basis of free and informed consent by, inter alia, raising awareness of the human rights, dignity, autonomy and needs of persons with disabilities through training and the promulgation of ethical standards for public and private health care;
- e. Prohibit discrimination against persons with disabilities in the provision of health insurance, and life insurance where such insurance is permitted by national law, which shall be provided in a fair and reasonable manner;
- f. Prevent discriminatory denial of health care or health services or food and fluids on the basis of disability.

Convention Against Torture (CAT)

• Article 1 – [Torture Defined]

1. For the purposes of this Convention, the term "torture" means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from him or a third person information or a confession, punishing him for an act he or a third person has committed or is suspected of having committed, or intimidating or coercing him or a third person, or for any reason based on discrimination of any kind, when such pain or suffering is inflicted by or at

the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in or incidental to lawful sanctions.

2. This article is without prejudice to any international instrument or national legislation which does or may contain provisions of wider application.

• Article 10 – [Information and Education on Prohibition of Torture]

1. Each State Party shall ensure that education and information regarding the prohibition against torture are fully included in the training of law enforcement personnel, civil or military, medical personnel, public officials and other persons who may be involved in the custody, interrogation or treatment of any individual subjected to any form of arrest, detention or imprisonment.
2. Each State Party shall include this prohibition in the rules or instructions issued in regard to the duties and functions of any such person.

• Article 16 – [Prohibition of Other Acts of Cruel, Inhuman or Degrading Treatment or Punishment]

1. Each State Party shall undertake to prevent in any territory under its jurisdiction other acts of cruel, inhuman or degrading treatment or punishment which do not amount to torture as defined in article I, when such acts are committed by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. In particular, the obligations contained in articles 10, 11, 12 and 13 shall apply with the substitution for references to torture of references to other forms of cruel, inhuman or degrading treatment or punishment.
2. The provisions of this Convention are without prejudice to the provisions of any other international instrument or national law which prohibits cruel, inhuman or degrading treatment

or punishment or which relates to extradition or expulsion.

RIGHT TO EDUCATION

International Covenant on Economic, Social and Cultural Rights (ICESCR)

• *Article 13 – [Education]:*

1. The States Parties to the present Covenant recognize the right of everyone to education. They agree that education shall be directed to the full development of the human personality and the sense of its dignity, and shall strengthen the respect for human rights and fundamental freedoms. They further agree that education shall enable all persons to participate effectively in a free society, promote understanding, tolerance and friendship among all nations and all racial, ethnic or religious groups, and further the activities of the United Nations for the maintenance of peace.
2. The States Parties to the present Covenant recognize that, with a view to achieving the full realization of this right:
 - (a) Primary education shall be compulsory and available free to all;
 - (b) Secondary education in its different forms, including technical and vocational secondary education, shall be made generally available and accessible to all by every appropriate means, and in particular by the progressive introduction of free education;
 - (c) Higher education shall be made equally accessible to all, on the basis of capacity, by every appropriate means, and in particular by the progressive introduction of free education;
 - (d) Fundamental education shall be encouraged or intensified as far as possible for those persons who have not received or completed the whole period of their primary education;

- (e) The development of a system of schools at all levels shall be actively pursued, an adequate fellowship system shall be established, and the material conditions of teaching staff shall be continuously improved.[...]

• *Article 14 – [Free Compulsory Primary Education]*

Each State Party to the present Covenant which, at the time of becoming a Party, has not been able to secure in its metropolitan territory or other territories under its jurisdiction compulsory primary education, free of charge, undertakes, within two years, to work out and adopt a detailed plan of action for the progressive implementation, within a reasonable number of years, to be fixed in the plan, of the principle of compulsory education free of charge for all.

International Covenant on Civil and Political Rights (ICCPR)

• *Article 18 – [Freedom of Thought, Conscience, and Religion; Liberty of Parents and Guardians to ensure Religious and Moral Education of Children]*

1. Everyone shall have the right to freedom of thought, conscience and religion. This right shall include freedom to have or to adopt a religion or belief of his choice, and freedom, either individually or in community with others and in public or private, to manifest his religion or belief in worship, observance, practice and teaching.
2. No one shall be subject to coercion which would impair his freedom to have or to adopt a religion or belief of his choice.
3. Freedom to manifest one's religion or beliefs may be subject only to such limitations as are prescribed by law and are necessary to protect public safety, order, health, or morals or the fundamental rights and freedoms of others.
4. The States Parties to the present Covenant undertake to have respect

for the liberty of parents and, when applicable, legal guardians to ensure the religious and moral education of their children in conformity with their own convictions.

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

- **Article 5 – [Family Education including Maternity as Social Function and Common Responsibility for Upbringing of Children]**

States Parties shall take all appropriate measures:

- (a) To modify the social and cultural patterns of conduct of men and women, with a view to achieving the elimination of prejudices and customary and all other practices which are based on the idea of the inferiority or the superiority of either of the sexes or on stereotyped roles for men and women;
- (b) To ensure that family education includes a proper understanding of maternity as a social function and the recognition of the common responsibility of men and women in the upbringing and development of their children, it being understood that the interest of the children is the primordial consideration in all cases.

- **Article 10 – [Nondiscrimination and Equality in the Field of Education]**

States Parties shall take all appropriate measures to eliminate discrimination against women in order to ensure to them equal rights with men in the field of education and in particular to ensure, on a basis of equality of men and women:

- (a) The same conditions for career and vocational guidance, for access to studies and for the achievement of diplomas in educational establishments of all categories in rural as well as in urban areas; this equality shall be ensured in pre-school, general, technical, professional and higher technical education, as well as in all types of vocational training;

- (b) Access to the same curricula, the same examinations, teaching staff with qualifications of the same standard and school premises and equipment of the same quality;
- (c) The elimination of any stereotyped concept of the roles of men and women at all levels and in all forms of education by encouraging coeducation and other types of education which will help to achieve this aim and, in particular, by the revision of textbooks and school programmes and the adaptation of teaching methods;
- (d) The same opportunities to benefit from scholarships and other study grants;
- (e) The same opportunities for access to programmes of continuing education, including adult and functional literacy programmes, particularly those aimed at reducing, at the earliest possible time, any gap in education existing between men and women;
- (f) The reduction of female student drop-out rates and the organization of programmes for girls and women who have left school prematurely;
- (g) The same Opportunities to participate actively in sports and physical education;
- (h) Access to specific educational information to help to ensure the health and well-being of families, including information and advice on family planning.

Convention on the Rights of the Child (CRC)

- **Article 28 – [Education]**

1. States Parties recognize the right of the child to education, and with a view to achieving this right progressively and on the basis of equal opportunity, they shall, in particular:
 - (a) Make primary education compulsory and available free to all;

- (b) Encourage the development of different forms of secondary education, including general and vocational education, make them available and accessible to every child, and take appropriate measures such as the introduction of free education and offering financial assistance in case of need;
 - (c) Make higher education accessible to all on the basis of capacity by every appropriate means;
 - (d) Make educational and vocational information and guidance available and accessible to all children; (e) Take measures to encourage regular attendance at schools and the reduction of drop-out rates.
2. States Parties shall take all appropriate measures to ensure that school discipline is administered in a manner consistent with the child's human dignity and in conformity with the present Convention.
 3. States Parties shall promote and encourage international cooperation in matters relating to education, in particular with a view to contributing to the elimination of ignorance and illiteracy throughout the world and facilitating access to scientific and technical knowledge and modern teaching methods. In this regard, particular account shall be taken of the needs of developing countries.
- *Article 29 – [Principles for the Education of the Child]*
 1. States Parties agree that the education of the child shall be directed to:
 - (a) The development of the child's personality, talents and mental and physical abilities to their fullest potential;
 - (b) The development of respect for human rights and fundamental freedoms, and for the principles enshrined in the Charter of the United Nations;
 - (c) The development of respect for the child's parents, his or her own cultural identity, language and values, for the national values of the country in which the child is living, the country from which he or she may originate, and for civilizations different from his or her own;
 - (d) The preparation of the child for responsible life in a free society, in the spirit of understanding, peace, tolerance, equality of sexes, and friendship among all peoples, ethnic, national and religious groups and persons of indigenous origin;
 - (e) The development of respect for the natural environment.
 2. No part of the present article or article 28 shall be construed so as to interfere with the liberty of individuals and bodies to establish and direct educational institutions, subject always to the observance of the principle set forth in paragraph 1 of the present article and to the requirements that the education given in such institutions shall conform to such minimum standards as may be laid down by the State.
- International Convention on the Elimination of All Forms of Racial Discrimination (ICERD)***
- *Article 5 (e)(v) – [Education and Training]*

In compliance with the fundamental obligations laid down in article 2 of this Convention, States Parties undertake to prohibit and to eliminate racial discrimination in all its forms and to guarantee the right of everyone, without distinction as to race, colour, or national or ethnic origin, to equality before the law, notably in the enjoyment of the following rights: [...]

 - (e) Economic, social and cultural rights, in particular: [...]
 - (v) The right to education and training; [...]

- *Article 7 – [Nondiscrimination in the fields of Teaching, Education, Culture and Information]*

States Parties undertake to adopt immediate and effective measures, particularly in the fields of teaching, education, culture and information, with a view to combating prejudices which lead to racial discrimination and to promoting understanding, tolerance and friendship among nations and racial or ethnical groups, as well as to propagating the purposes and principles of the Charter of the United Nations, the Universal Declaration of Human Rights, the United Nations Declaration on the Elimination of All Forms of Racial Discrimination, and this Convention.

Convention on the Rights of Persons with Disabilities (CRPD)

- *Article 23 (1)(b) – [Respect for Home and the Family (including access to Reproductive and Family Planning Education)]*

1. States Parties shall take effective and appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on an equal basis with others, so as to ensure that: [...]
 - b. The rights of persons with disabilities to decide freely and responsibly on the number and spacing of their children and to have access to age-appropriate information, reproductive and family planning education are recognized, and the means necessary to enable them to exercise these rights are provided; [...]

- *Article 24 – [Education]*

1. States Parties recognize the right of persons with disabilities to education. With a view to realizing this right without discrimination and on the basis of equal opportunity, States Parties shall ensure an inclusive education system at all levels and life long learning directed to:

- a. The full development of human potential and sense of dignity and self-worth, and the strengthening of respect for human rights, fundamental freedoms and human diversity;
 - b. The development by persons with disabilities of their personality, talents and creativity, as well as their mental and physical abilities, to their fullest potential;
 - c. Enabling persons with disabilities to participate effectively in a free society.
2. In realizing this right, States Parties shall ensure that:
 - a. Persons with disabilities are not excluded from the general education system on the basis of disability, and that children with disabilities are not excluded from free and compulsory primary education, or from secondary education, on the basis of disability;
 - b. Persons with disabilities can access an inclusive, quality and free primary education and secondary education on an equal basis with others in the communities in which they live;
 - c. Reasonable accommodation of the individual's requirements is provided;
 - d. Persons with disabilities receive the support required, within the general education system, to facilitate their effective education;
 - e. Effective individualized support measures are provided in environments that maximize academic and social development, consistent with the goal of full inclusion.
 3. States Parties shall enable persons with disabilities to learn life and social development skills to facilitate their full and equal participation in education and as members of the community. To this

end, States Parties shall take appropriate measures, including:

- a. Facilitating the learning of Braille, alternative script, augmentative and alternative modes, means and formats of communication and orientation and mobility skills, and facilitating peer support and mentoring;
 - b. Facilitating the learning of sign language and the promotion of the linguistic identity of the deaf community;
 - c. Ensuring that the education of persons, and in particular children, who are blind, deaf or deafblind, is delivered in the most appropriate languages and modes and means of communication for the individual, and in environments which maximize academic and social development.
4. In order to help ensure the realization of this right, States Parties shall take appropriate measures to employ teachers, including teachers with disabilities, who are qualified in sign language and/or Braille, and to train professionals and staff who work at all levels of education. Such training shall incorporate disability awareness and the use of appropriate augmentative and alternative modes, means and formats of communication, educational techniques and materials to support persons with disabilities.
 5. States Parties shall ensure that persons with disabilities are able to access general tertiary education, vocational training, adult education and lifelong learning without discrimination and on an equal basis with others. To this end, States Parties shall ensure that reasonable accommodation is provided to persons with disabilities.

Convention Against Torture (CAT)

- *Article 10—[Education of Law Enforcement, Medical Personnel, Public Officials and Others on Prohibition of Torture]*

1. Each State Party shall ensure that education and information regarding the prohibition against torture are fully included in the training of law enforcement personnel, civil or military, medical personnel, public officials and other persons who may be involved in the custody, interrogation or treatment of any individual subjected to any form of arrest, detention or imprisonment.
2. Each State Party shall include this prohibition in the rules or instructions issued in regard to the duties and functions of any such person.

RIGHT TO INFORMATION

International Covenant on Civil and Political Rights (ICCPR)

- *Article 19.2 – [Information]*

2. Everyone shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of his choice.

International Covenant on Economic, Social and Cultural Rights (ICESCR)

- *Article 13 – [Education]*

1. The States Parties to the present Covenant recognize the right of everyone to education. They agree that education shall be directed to the full development of the human personality and the sense of its dignity, and shall strengthen the respect for human rights and fundamental freedoms. They further agree that education shall enable all persons to participate effectively in a free society, promote understanding, tolerance and friendship among all nations and all racial, ethnic or religious groups, and further the activities of the United Nations for the maintenance of peace.
2. The States Parties to the present Covenant recognize that, with a view to achieving the full realization of this right:

- (a) Primary education shall be compulsory and available free to all;
 - (b) Secondary education in its different forms, including technical and vocational secondary education, shall be made generally available and accessible to all by every appropriate means, and in particular by the progressive introduction of free education;
 - (c) Higher education shall be made equally accessible to all, on the basis of capacity, by every appropriate means, and in particular by the progressive introduction of free education;
 - (d) Fundamental education shall be encouraged or intensified as far as possible for those persons who have not received or completed the whole period of their primary education;
 - (e) The development of a system of schools at all levels shall be actively pursued, an adequate fellowship system shall be established, and the material conditions of teaching staff shall be continuously improved.
3. The States Parties to the present Covenant undertake to have respect for the liberty of parents and, when applicable, legal guardians to choose for their children schools, other than those established by the public authorities, which conform to such minimum educational standards as may be laid down or approved by the State and to ensure the religious and moral education of their children in conformity with their own convictions.
 4. No part of this article shall be construed so as to interfere with the liberty of individuals and bodies to establish and direct educational institutions, subject always to the observance of the principles set forth in paragraph 1 of this article and to the requirement

that the education given in such institutions shall conform to such minimum standards as may be laid down by the State.

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

- *Article 10 (h) – [Access to Information on Health and Well-being of Families, including Family Planning]*

States Parties shall take all appropriate measures to eliminate discrimination against women in order to ensure to them equal rights with men in the field of education and in particular to ensure, on a basis of equality of men and women: [...]

- (h) Access to specific educational information to help to ensure the health and well-being of families, including information and advice on family planning.

- *Article 14 (b) and (d) – [Access to Health Care and Information on Family Planning for Rural Women; Access to Education for Rural Women]*

1. States Parties shall take into account the particular problems faced by rural women and the significant roles which rural women play in the economic survival of their families, including their work in the non-monetized sectors of the economy, and shall take all appropriate measures to ensure the application of the provisions of the present Convention to women in rural areas.

2. States Parties shall take all appropriate measures to eliminate discrimination against women in rural areas in order to ensure, on a basis of equality of men and women, that they participate in and benefit from rural development and, in particular, shall ensure to such women the right: [...]

- (b) To have access to adequate health care facilities, including information, counselling and services in family planning; [...]

- (d) To obtain all types of training and education, formal and non-formal, including that relating to functional literacy, as well as, inter alia, the benefit of all community and extension services, in order to increase their technical proficiency; [...]

Convention on the Rights of the Child (CRC)

- *Article 17 – [Information and Importance of Mass Media]*

States Parties recognize the important function performed by the mass media and shall ensure that the child has access to information and material from a diversity of national and international sources, especially those aimed at the promotion of his or her social, spiritual and moral well-being and physical and mental health.

To this end, States Parties shall:

- (a) Encourage the mass media to disseminate information and material of social and cultural benefit to the child and in accordance with the spirit of article 29;
- (b) Encourage international co-operation in the production, exchange and dissemination of such information and material from a diversity of cultural, national and international sources;
- (c) Encourage the production and dissemination of children's books;
- (d) Encourage the mass media to have particular regard to the linguistic needs of the child who belongs to a minority group or who is indigenous;
- (e) Encourage the development of appropriate guidelines for the protection of the child from information and material injurious to his or her well-being, bearing in mind the provisions of articles 13 and 18.

International Convention on the Elimination of All Forms of Racial Discrimination (ICERD)

- *Article 7 – [Measures in Fields of Information, Culture, Education and Teaching to Combat Prejudice]*

States Parties undertake to adopt immediate and effective measures, particularly in the fields of teaching, education, culture and information, with a view to combating prejudices which lead to racial discrimination and to promoting understanding, tolerance and friendship among nations and racial or ethnical groups, as well as to propagating the purposes and principles of the Charter of the United Nations, the Universal Declaration of Human Rights, the United Nations Declaration on the Elimination of All Forms of Racial Discrimination, and this Convention.

Convention on the Rights of Persons with Disabilities (CRPD)

- *Article 21 – [Freedom of Expression and Opinion, and Access to Information]*

States Parties shall take all appropriate measures to ensure that persons with disabilities can exercise the right to freedom of expression and opinion, including the freedom to seek, receive and impart information and ideas on an equal basis with others and through all forms of communication of their choice, as defined in article 2 of the present Convention, including by:

- a. Providing information intended for the general public to persons with disabilities in accessible formats and technologies appropriate to different kinds of disabilities in a timely manner and without additional cost;
- b. Accepting and facilitating the use of sign languages, Braille, augmentative and alternative communication, and all other accessible means, modes and formats of communication of their choice by persons with disabilities in official interactions;

- c. Urging private entities that provide services to the general public, including through the Internet, to provide information and services in accessible and usable formats for persons with disabilities;
- d. Encourageing the mass media, including providers of information through the Internet, to make their services accessible to persons with disabilities;
- e. Recognizing and promoting the use of sign languages.

Convention Against Torture (CAT)

- *Article 10 – [Dissemination of Information on Prohibition of Torture]*
 1. Each State Party shall ensure that education and information regarding the prohibition against torture are fully included in the training of law enforcement personnel, civil or military, medical personnel, public officials and other persons who may be involved in the custody, interrogation or treatment of any individual subjected to any form of arrest, detention or imprisonment.
 2. Each State Party shall include this prohibition in the rules or instructions issued in regard to the duties and functions of any such person.

RIGHT TO DECIDE WHETHER TO HAVE CHILDREN, THE NUMBER AND SPACING OF CHILDREN, AND THE INFORMATION AND THE MEANS TO EXERCISE THESE RIGHTS

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

- *Article 16.1(e) – [Whether to Have Children, the Number and Spacing of Children, and the Information and the Means to Exercise these Rights]*
 1. States Parties shall take all appropriate measures to eliminate discrimination

against women in all matters relating to marriage and family relations and in particular shall ensure, on a basis of equality of men and women: (e) The same rights to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights; [...]

International Convention on Economic, Social and Cultural Rights (ICESCR)

- *Article 12 – [Including Information and Means Necessary for Maternal Health, Reduction of Stillbirth-rate, and Reduction of Infant Mortality]*
 1. The States Parties to the present Covenant recognize the right of everyone to the enjoyment of the highest attainable standard of physical and mental health.
 2. The steps to be taken by the States Parties to the present Covenant to achieve the full realization of this right shall include those necessary for:
 - (a) The provision for the reduction of the stillbirth-rate and of infant mortality and for the healthy development of the child;
 - (b) The improvement of all aspects of environmental and industrial hygiene;
 - (c) The prevention, treatment and control of epidemic, endemic, occupational and other diseases;
 - (d) The creation of conditions which would assure to all medical service and medical attention in the event of sickness.

Convention on the Rights of Persons with Disabilities (CRPD)

- *Article 23.1(b) – [Respect for Home and the Family (including Right to Decide Whether to Have Children, the Number and Spacing of Children, and Access to Information, Reproductive and Family Planning Education, and the Means to Exercise these Rights)]*

1. States Parties shall take effective and appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on an equal basis with others, so as to ensure that:

- b. The rights of persons with disabilities to decide freely and responsibly on the number and spacing of their children and to have access to age-appropriate information, reproductive and family planning education are recognized, and the means necessary to enable them to exercise these rights are provided; [...]

AUTONOMY AND BODILY INTEGRITY (INCLUDING RIGHT TO FREEDOM OF MOVEMENT)

International Covenant on Civil and Political Rights (ICCPR)

• *Article 12 – [Freedom of Movement]*

1. Everyone lawfully within the territory of a State shall, within that territory, have the right to liberty of movement and freedom to choose his residence.
2. Everyone shall be free to leave any country, including his own.
3. The above-mentioned rights shall not be subject to any restrictions except those which are provided by law, are necessary to protect national security, public order (ordre public), public health or morals or the rights and freedoms of others, and are consistent with the other rights recognized in the present Covenant.
4. No one shall be arbitrarily deprived of the right to enter his own country.

• *Article 7 – [Prohibition of Torture and Experimentation Without Consent]*

No one shall be subjected to torture or to cruel, inhuman or degrading treatment

or punishment. In particular, no one shall be subjected without his free consent to medical or scientific experimentation.

• *Article 8 – [Prohibition of Slavery]*

1. No one shall be held in slavery; slavery and the slave-trade in all their forms shall be prohibited.
2. No one shall be held in servitude.
 - (a) No one shall be required to perform forced or compulsory labour;
 - (b) Paragraph 3 (a) shall not be held to preclude, in countries where imprisonment with hard labour may be imposed as a punishment for a crime, the performance of hard labour in pursuance of a sentence to such punishment by a competent court;
 - (c) For the purpose of this paragraph the term “forced or compulsory labour” shall not include:
 - (i) *Any work or service, not referred to in subparagraph (b), normally required of a person who is under detention in consequence of a lawful order of a court, or of a person during conditional release from such detention;*
 - (ii) *Any service of a military character and, in countries where conscientious objection is recognized, any national service required by law of conscientious objectors;*
 - (iii) *Any service exacted in cases of emergency or calamity threatening the life or well-being of the community;*
 - (iv) *Any work or service which forms part of normal civil obligations.*

• *Article 9 – [Liberty and Security of the Person]*

1. Everyone has the right to liberty and security of person. No one shall be subjected to arbitrary arrest or detention. No one shall be deprived of his liberty except on such grounds and in accordance with such procedure as are established by law.
2. Anyone who is arrested shall be informed, at the time of arrest, of the

reasons for his arrest and shall be promptly informed of any charges against him.

3. Anyone arrested or detained on a criminal charge shall be brought promptly before a judge or other officer authorized by law to exercise judicial power and shall be entitled to trial within a reasonable time or to release. It shall not be the general rule that persons awaiting trial shall be detained in custody, but release may be subject to guarantees to appear for trial, at any other stage of the judicial proceedings, and, should occasion arise, for execution of the judgement.
4. Anyone who is deprived of his liberty by arrest or detention shall be entitled to take proceedings before a court, in order that that court may decide without delay on the lawfulness of his detention and order his release if the detention is not lawful.
5. Anyone who has been the victim of unlawful arrest or detention shall have an enforceable right to compensation.

International Covenant on Economic, Social and Cultural Rights (ICESCR)

• Article 1 – [Self-Determination]

1. All peoples have the right of self-determination. By virtue of that right they freely determine their political status and freely pursue their economic, social and cultural development.
2. All peoples may, for their own ends, freely dispose of their natural wealth and resources without prejudice to any obligations arising out of international economic co-operation, based upon the principle of mutual benefit, and international law. In no case may a people be deprived of its own means of subsistence.
3. The States Parties to the present Covenant, including those having responsibility for the administration of Non-Self-Governing and Trust Territories, shall promote the realization of the right of self-determination, and

shall respect that right, in conformity with the provisions of the Charter of the United Nations.

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

• Article 6 – [Prohibition of Trafficking]

States Parties shall take all appropriate measures, including legislation, to suppress all forms of traffic in women and exploitation of prostitution of women.

International Convention on the Elimination of All Forms of Racial Discrimination (ICERD)

• Article 5 – [Security of the Person and Protection against Violence and Bodily Harm, Right to Freedom of Movement]

In compliance with the fundamental obligations laid down in article 2 of this Convention, States Parties undertake to prohibit and to eliminate racial discrimination in all its forms and to guarantee the right of everyone, without distinction as to race, colour, or national or ethnic origin, to equality before the law, notably in the enjoyment of the following rights:

- (a) The right to equal treatment before the tribunals and all other organs administering justice;
- (b) The right to security of person and protection by the State against violence or bodily harm, whether inflicted by government officials or by any individual group or institution;
- (c) Political rights, in particular the right to participate in elections-to vote and to stand for *election-on* the basis of universal and equal suffrage, to take part in the Government as well as in the conduct of public affairs at any level and to have equal access to public service;
- (d) Other civil rights, in particular:
 - (i) *The right to freedom of movement and residence within the border of the State;*

- (ii) *The right to leave any country, including one's own, and to return to one's country;*
- (iii) *The right to nationality;*
- (iv) *The right to marriage and choice of spouse;*
- (v) *The right to own property alone as well as in association with others;* (vi) *The right to inherit;*
- (vii) *The right to freedom of thought, conscience and religion;* (viii) *The right to freedom of opinion and expression;*
- (ix) *The right to freedom of peaceful assembly and association;*
- (e) Economic, social and cultural rights, in particular:
 - (i) *The rights to work, to free choice of employment, to just and favourable conditions of work, to protection against unemployment, to equal pay for equal work, to just and favourable remuneration;*
 - (ii) *The right to form and join trade unions;*
 - (iii) *The right to housing;*
 - (iv) *The right to public health, medical care, social security and social services;*
 - (v) *The right to education and training;*
 - (vi) *The right to equal participation in cultural activities;*
 - (f) *The right of access to any place or service intended for use by the general public, such as transport hotels, restaurants, cafes, theatres and parks.*

Convention on the Rights of the Child (CRC)

• Article 9 – [Prohibition on Separation Against Will]

1. States Parties shall ensure that a child shall not be separated from his or her parents against their will, except when competent authorities subject to judicial review determine, in accordance with

applicable law and procedures, that such separation is necessary for the best interests of the child. Such determination may be necessary in a particular case such as one involving abuse or neglect of the child by the parents, or one where the parents are living separately and a decision must be made as to the child's place of residence.

2. In any proceedings pursuant to paragraph 1 of the present article, all interested parties shall be given an opportunity to participate in the proceedings and make their views known.
3. States Parties shall respect the right of the child who is separated from one or both parents to maintain personal relations and direct contact with both parents on a regular basis, except if it is contrary to the child's best interests.
4. Where such separation results from any action initiated by a State Party, such as the detention, imprisonment, exile, deportation or death (including death arising from any cause while the person is in the custody of the State) of one or both parents or of the child, that State Party shall, upon request, provide the parents, the child or, if appropriate, another member of the family with the essential information concerning the whereabouts of the absent member(s) of the family unless the provision of the information would be detrimental to the well-being of the child. States Parties shall further ensure that the submission of such a request shall of itself entail no adverse consequences for the person(s) concerned.

• Article 11 – [Measures to Combat Illicit Transfer of Children]

1. States Parties shall take measures to combat the illicit transfer and non-return of children abroad.
2. To this end, States Parties shall promote the conclusion of bilateral or multilateral agreements or accession to existing agreements.

- *Article 34 – [Protection from Sexual Exploitation and Abuse]*

States Parties undertake to protect the child from all forms of sexual exploitation and sexual abuse. For these purposes, States Parties shall in particular take all appropriate national, bilateral and multilateral measures to prevent:

- (a) The inducement or coercion of a child to engage in any unlawful sexual activity;
- (b) The exploitative use of children in prostitution or other unlawful sexual practices;
- (c) The exploitative use of children in pornographic performances and materials.

- *Article 35 – [Prevention of Abduction, Sale and Trafficking]*

States Parties shall take all appropriate national, bilateral and multilateral measures to prevent the abduction of, the sale of or traffic in children for any purpose or in any form.

- *Article 37 – [Prohibition on Torture and Deprivations of Liberty]*

States Parties shall ensure that:

- (a) No child shall be subjected to torture or other cruel, inhuman or degrading treatment or punishment. Neither capital punishment nor life imprisonment without possibility of release shall be imposed for offences committed by persons below eighteen years of age;
- (b) No child shall be deprived of his or her liberty unlawfully or arbitrarily. The arrest, detention or imprisonment of a child shall be in conformity with the law and shall be used only as a measure of last resort and for the shortest appropriate period of time;
- (c) Every child deprived of liberty shall be treated with humanity and respect for the inherent dignity of the human person, and in a manner which takes into account the needs of persons of his or her age.

In particular, every child deprived of liberty shall be separated from adults unless it is considered in the child's best interest not to do so and shall have the right to maintain contact with his or her family through correspondence and visits, save in exceptional circumstances;

- (d) Every child deprived of his or her liberty shall have the right to prompt access to legal and other appropriate assistance, as well as the right to challenge the legality of the deprivation of his or her liberty before a court or other competent, independent and impartial authority, and to a prompt decision on any such action.

Convention Against Torture (CAT)

Full convention relevant. In particular:

- *Article 16 – [Prohibition of Other Acts of Cruel, Inhuman or Degrading Treatment or Punishment]*

1. Each State Party shall undertake to prevent in any territory under its jurisdiction other acts of cruel, inhuman or degrading treatment or punishment which do not amount to torture as defined in article I, when such acts are committed by or at the instigation of or with the consent or acquiescence of a public official or other person acting in an official capacity. In particular, the obligations contained in articles 10, 11, 12 and 13 shall apply with the substitution for references to torture of references to other forms of cruel, inhuman or degrading treatment or punishment.
2. The provisions of this Convention are without prejudice to the provisions of any other international instrument or national law which prohibits cruel, inhuman or degrading treatment or punishment or which relates to extradition or expulsion.

RIGHT TO PRIVACY

International Covenant on Civil and Political Rights (ICCPR)

- *Article 17 – [Privacy]*
 1. No one shall be subjected to arbitrary or unlawful interference with his privacy, family, home or correspondence, nor to unlawful attacks on his honour and reputation.
 2. Everyone has the right to the protection of the law against such interference or attacks.

Convention on the Rights of the Child (CRC)

- *Article 16 – [Privacy]*
 1. No child shall be subjected to arbitrary or unlawful interference with his or her privacy, family, or correspondence, nor to unlawful attacks on his or her honour and reputation.
 2. The child has the right to the protection of the law against such interference or attacks.

Convention on the Rights of Persons with Disabilities (CRPD)

- *Article 22 – [Respect for Privacy]*
 1. No person with disabilities, regardless of place of residence or living arrangements, shall be subjected to arbitrary or unlawful interference with his or her privacy, family, home or correspondence or other types of communication or to unlawful attacks on his or her honour and reputation. Persons with disabilities have the right to the protection of the law against such interference or attacks.
 2. States Parties shall protect the privacy of personal, health and rehabilitation information of persons with disabilities on an equal basis with others.

RIGHT TO PARTICIPATION

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

- *Article 7 – [Voting, Participation in Formulation of Government Policy and Performing Public Functions, Participation in Public and Political Organizations and Associations]*

State Parties shall take all appropriate measures to eliminate discrimination against women in the political and public life of the country and, in particular, shall ensure to women, on equal terms with men, the right:

- (a) To vote in all elections and public referenda and to be eligible for selection to all publicly elected bodies;
- (b) To participate in the formulation of government policy and the implementation thereof and to hold public office and perform all public functions at all levels of government;
- (c) To participate in non-governmental organizations and associations concerned with the public and political life of the country.

- *Article 8 – [Nondiscrimination and Participation in International Organizations and Representation of Government]*

States Parties shall take all appropriate measures to ensure to women, on equal terms with men and without any discrimination, the opportunity to represent their Governments at the international level and to participate in the work of international organizations.

- *Article 14 – [Rural Women's Right to Participation in Development and Community Activities]*

1. States Parties shall take into account the particular problems faced by rural women and the significant roles which rural women play in the economic survival of their families, including their work in the non-monetized sectors of the economy, and shall take all appropriate measures to ensure

the application of the provisions of the present Convention to women in rural areas.

2. States Parties shall take all appropriate measures to eliminate discrimination against women in rural areas in order to ensure, on a basis of equality of men and women, that they participate in and benefit from rural development and, in particular, shall ensure to such women the right:
 - (a) To participate in the elaboration and implementation of development planning at all levels;
 - (b) To have access to adequate health care facilities, including information, counselling and services in family planning;
 - (c) To benefit directly from social security programmes;
 - (d) To obtain all types of training and education, formal and non-formal, including that relating to functional literacy, as well as, inter alia, the benefit of all community and extension services, in order to increase their technical proficiency;
 - (e) To organize self-help groups and co-operatives in order to obtain equal access to economic opportunities through employment or self employment;
 - (f) To participate in all community activities;
 - (g) To have access to agricultural credit and loans, marketing facilities, appropriate technology and equal treatment in land and agrarian reform as well as in land resettlement schemes;
 - (h) To enjoy adequate living conditions, particularly in relation to housing, sanitation, electricity and water supply, transport and communications.

International Covenant on Civil and Political Rights (ICCPR)

Article 1 – [Freely Determine Political Status]

1. All peoples have the right of self-determination. By virtue of that right they freely determine their political status and freely pursue their economic, social and cultural development.
2. All peoples may, for their own ends, freely dispose of their natural wealth and resources without prejudice to any obligations arising out of international economic co-operation, based upon the principle of mutual benefit, and international law. In no case may a people be deprived of its own means of subsistence.
3. The States Parties to the present Covenant, including those having responsibility for the administration of Non-Self-Governing and Trust Territories, shall promote the realization of the right of self-determination, and shall respect that right, in conformity with the provisions of the Charter of the United Nations.

Article 25 – [Participation in Public Affairs and Voting]

Every citizen shall have the right and the opportunity, without any of the distinctions mentioned in article 2 and without unreasonable restrictions:

- (a) To take part in the conduct of public affairs, directly or through freely chosen representatives;
- (b) To vote and to be elected at genuine periodic elections which shall be by universal and equal suffrage and shall be held by secret ballot, guaranteeing the free expression of the will of the electors;
- (c) To have access, on general terms of equality, to public service in his country.

International Covenant on Economic, Social and Cultural Rights (ICESCR)

- **Article 1 – [Freely Determine Political Status]**

1. All peoples have the right of self-determination. By virtue of that right they freely determine their political status and freely pursue their economic, social and cultural development.
2. All peoples may, for their own ends, freely dispose of their natural wealth and resources without prejudice to any obligations arising out of international economic co-operation, based upon the principle of mutual benefit, and international law. In no case may a people be deprived of its own means of subsistence.
3. The States Parties to the present Covenant, including those having responsibility for the administration of Non-Self-Governing and Trust Territories, shall promote the realization of the right of self-determination, and shall respect that right, in conformity with the provisions of the Charter of the United Nations.

Convention on the Rights of the Child (CRC)

- **Article 12 – [Being Heard in Judicial or Administrative Proceedings]**

1. States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child.
2. For this purpose, the child shall in particular be provided the opportunity to be heard in any judicial and administrative proceedings affecting the child, either directly, or through a representative or an appropriate body, in a manner consistent with the procedural rules of national law.

International Convention on the Elimination of All Forms of Racial Discrimination (ICERD)

- **Article 5 (c) – [Participation in Elections, Voting, Taking Part in Government and Conduct of Public Affairs]**

In compliance with the fundamental obligations laid down in article 2 of this Convention, States Parties undertake to prohibit and to eliminate racial discrimination in all its forms and to guarantee the right of everyone, without distinction as to race, colour, or national or ethnic origin, to equality before the law, notably in the enjoyment of the following rights:

- (c) Political rights, in particular the right to participate in elections-to vote and to stand for election-on the basis of universal and equal suffrage, to take part in the Government as well as in the conduct of public affairs at any level and to have equal access to public service;

Convention on the Rights of Persons with Disabilities (CRPD)

- **Article 3 (c) – [General Principles Include Full and Effective Participation in Society]**

The principles of the present Convention shall be: [...]

- c. Full and effective participation and inclusion in society; [...]

- **Article 29 – [Participation in public and political life]**

States Parties shall guarantee to persons with disabilities political rights and the opportunity to enjoy them on an equal basis with others, and shall undertake to:

- a. Ensure that persons with disabilities can effectively and fully participate in political and public life on an equal basis with others, directly or through freely chosen representatives, including the right and opportunity for persons with disabilities to vote and be elected, inter alia, by:
 - i. Ensuring that voting procedures, facilities and materials are appropriate, accessible and easy to understand and use;

- ii. *Protecting the right of persons with disabilities to vote by secret ballot in elections and public referendums without intimidation, and to stand for elections, to effectively hold office and perform all public functions at all levels of government, facilitating the use of assistive and new technologies where appropriate;*
 - iii. *Guaranteeing the free expression of the will of persons with disabilities as electors and to this end, where necessary, at their request, allowing assistance in voting by a person of their own choice;*
- b. Promote actively an environment in which persons with disabilities can effectively and fully participate in the conduct of public affairs, without discrimination and on an equal basis with others, and encourage their participation in public affairs, including:
- i. *Participation in non-governmental organizations and associations concerned with the public and political life of the country, and in the activities and administration of political parties;*
 - ii. *Forming and joining organizations of persons with disabilities to represent persons with disabilities at international, national, regional and local levels.*

RIGHT TO ASSOCIATION

International Covenant on Civil and Political Rights (ICCPR)

- *Article 22.1 – [Freedom of Association]*
 1. Everyone shall have the right to freedom of association with others, including the right to form and join trade unions for the protection of his interests.
- *Article 21 – [Right to Peaceful Assembly]*

The right of peaceful assembly shall be recognized. No restrictions may be placed on the exercise of this right other than

those imposed in conformity with the law and which are necessary in a democratic society in the interests of national security or public safety, public order (ordre public), the protection of public health or morals or the protection of the rights and freedoms of others.

International Covenant on Economic, Social and Cultural Rights (ICESCR)

- *Article 8.3 – [Non-limitation of Right to Organize and Assemble under 1948 International Labour Organisation Convention]*
- 3. Nothing in this article shall authorize States Parties to the International Labour Organisation Convention of 1948 concerning Freedom of Association and Protection of the Right to Organize to take legislative measures which would prejudice, or apply the law in such a manner as would prejudice, the guarantees provided for in that Convention.

Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

- *Article 7(c) [Participation in Associations and Organizations]*
- States Parties shall take all appropriate measures to eliminate discrimination against women in the political and public life of the country and, in particular, shall ensure to women, on equal terms with men, the right:
- (c) To participate in non-governmental organizations and associations concerned with the public and political life of the country.

Convention on the Rights of the Child (CRC)

- *Article 15 – [Freedom of Association and Peaceful Assembly]*
 1. States Parties recognize the rights of the child to freedom of association and to freedom of peaceful assembly.
 2. No restrictions may be placed on the exercise of these rights other than those imposed in conformity with

the law and which are necessary in a democratic society in the interests of national security or public safety, public order (ordre public), the protection of public health or morals or the protection of the rights and freedoms of others.

International Convention on the Elimination of All Forms of Racial Discrimination (ICERD)

- **Article 4 – [Condemnation of Racist and Discriminatory Groups]**

States Parties condemn all propaganda and all organizations which are based on ideas or theories of superiority of one race or group of persons of one colour or ethnic origin, or which attempt to justify or promote racial hatred and discrimination in any form, and undertake to adopt immediate and positive measures designed to eradicate all incitement to, or acts of, such discrimination and, to this end, with due regard to the principles embodied in the Universal Declaration of Human Rights and the rights expressly set forth in article 5 of this Convention, inter alia:

- (a) Shall declare an offence punishable by law all dissemination of ideas based on racial superiority or hatred, incitement to racial discrimination, as well as all acts of violence or incitement to such acts against any race or group of persons of another colour or ethnic origin, and also the provision of any assistance to racist activities, including the financing thereof;
- (b) Shall declare illegal and prohibit organizations, and also organized and all other propaganda activities, which promote and incite racial discrimination, and shall recognize participation in such organizations or activities as an offence punishable by law;
- (c) Shall not permit public authorities or public institutions, national or local, to promote or incite racial discrimination.

- **Article 5 (d)(ix) – [Right to Freedom of Peaceful Assembly and Association]**

In compliance with the fundamental obligations laid down in article 2 of this Convention, States Parties undertake to prohibit and to eliminate racial discrimination in all its forms and to guarantee the right of everyone, without distinction as to race, colour, or national or ethnic origin, to equality before the law, notably in the enjoyment of the following rights: [...]

(d) Other civil rights, in particular: [...]

- ix) *The right to freedom of peaceful assembly and association; [...].*

Convention on the Rights of Persons with Disabilities (CRPD)

- **Article 29 (b) (i-ii) – [Participation in Political and Public Life (including Participation in Organizations and Associations)]**

States Parties shall guarantee to persons with disabilities political rights and the opportunity to enjoy them on an equal basis with others, and shall undertake to: [...]

- b. Promote actively an environment in which persons with disabilities can effectively and fully participate in the conduct of public affairs, without discrimination and on an equal basis with others, and encourage their participation in public affairs, including:
 - i. *Participation in non-governmental organizations and associations concerned with the public and political life of the country, and in the activities and administration of political parties;*
 - ii. *Forming and joining organizations of persons with disabilities to represent persons with disabilities at international, national, regional and local levels.*

INTERNATIONAL CONFERENCE ON POPULATION AND DEVELOPMENT: PROGRAMME OF ACTION – SELECTED PRINCIPLES, ACTIONS, AND OBJECTIVES RELEVANT TO VIET NAM'S POPULATION POLICY

Principles

Principle 2

Human beings are at the centre of concerns for sustainable development. They are entitled to a healthy and productive life in harmony with nature. People are the most important and valuable resource of any nation. Countries should ensure that all individuals are given the opportunity to make the most of their potential. They have the right to an adequate standard of living for themselves and their families, including adequate food, clothing, housing, water and sanitation.

Principle 3

[...] The right to development must be fulfilled so as to equitably meet the population, development and environment needs of present and future generations.

Principle 4

Advancing gender equality and equity and the empowerment of women, and the elimination of all kinds of violence against women, and ensuring women's ability to control their own fertility, are cornerstones of population and development-related programmes. The human rights of women and the girl child are an inalienable, integral and indivisible part of universal human rights. The full and equal participation of women in civil, cultural, economic, political and social life, at the national, regional and international levels, and the eradication of all forms of discrimination on grounds of sex, are priority objectives of the international community.

Principle 5

Population-related goals and policies are integral parts of cultural, economic and social

development, the principal aim of which is to improve the quality of life of all people .

Principle 6

[...] To achieve sustainable development and a higher quality of life for all people, States should reduce and eliminate unsustainable patterns of production and consumption and promote appropriate policies, including population-related policies, in order to meet the needs of current generations without compromising the ability of future generations to meet their own needs.

Principle 8

Everyone has the right to the enjoyment of the highest attainable standard of physical and mental health. States should take all appropriate measures to ensure, on a basis of equality of men and women, universal access to health-care services, including those related to reproductive health care, which includes family planning and sexual health. Reproductive health-care programmes should provide the widest range of services without any form of coercion . All couples and individuals have the basic right to decide freely and responsibly the number and spacing of their children and to have the information, education and means to do so.

Principle 9

The family is the basic unit of society and as such should be strengthened. It is entitled to receive comprehensive protection and support. In different cultural, political and social systems, various forms of the family exist. Marriage must be entered into with the free consent of the intending spouses, and husband and wife should be equal partners.

Principle 10

Everyone has the right to education, which shall be directed to the full development of human resources, and human dignity and potential, with particular attention to women and the girl child. Education should be designed to strengthen respect for human rights and fundamental freedoms, including those relating to population and development. The best interests of the child shall be the guiding principle of those responsible for his or her education and guidance; that

responsibility lies in the first place with the parents.

Principle 11

All States and families should give the highest possible priority to children. The child has the right to standards of living adequate for its well-being and the right to the highest attainable standards of health, and the right to education. The child has the right to be cared for, guided and supported by parents, families and society and to be protected by appropriate legislative, administrative, social and educational measures from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sale, trafficking, sexual abuse, and trafficking in its organs.

Principle 12

Countries receiving documented migrants should provide proper treatment and adequate social welfare services for them and their families, and should ensure their physical safety and security, bearing in mind the special circumstances and needs of countries, in particular developing countries, attempting to meet these objectives or requirements with regard to undocumented migrants, in conformity with the provisions of relevant conventions and international instruments and documents. Countries should guarantee to all migrants all basic human rights as included in the Universal Declaration of Human Rights.

Principle 15

Sustained economic growth, in the context of sustainable development, and social progress require that growth be broadly based, offering equal opportunities to all people. All countries should recognize their common but differentiated responsibilities. The developed countries acknowledge the responsibility that they bear in the international pursuit of sustainable development, and should continue to improve their efforts to promote sustained economic growth and to narrow imbalances in a manner that can benefit all countries, particularly the developing countries.

The ICPD highlighted bases for action, objectives, and actions for sustainable

population development based on these principles. The programme in its entirety is relevant, but certain key points are highlighted below:

Actions

3.16 Particular attention is to be given to the socio-economic improvement of poor women in developed and developing countries. As women are generally the poorest of the poor and at the same time key actors in the development process, eliminating social, cultural, political and economic discrimination against women is a pre-requisite of eradicating poverty, promoting sustained economic growth in the context of sustainable development, ensuring quality family planning and reproductive health services, and achieving balance between population and available resources and sustainable patterns of consumption and production.

3.8 Political commitment to integrated population and development strategies should be strengthened by public education and information programmes and by increased resource allocation through cooperation among Governments, non-governmental organizations and the private sector, and by improvement of the knowledge base through research and national and local capacity-building.

Objectives

4.16 The objectives are:

- (a) To eliminate all forms of discrimination against the girl child and the root causes of son preference, which results in harmful and unethical practices regarding female infanticide and prenatal sex selection;
- (b) To increase public awareness of the value of the girl child, and concurrently, to strengthen the girl child's self-image, self-esteem and status;
- (c) To improve the welfare of the girl child, especially in regard to health, nutrition and education.

4.3 The objectives are:

- (a) To achieve equality and equity based on harmonious partnership between men and women and enable women to realize their full potential;
- (b) To ensure the enhancement of women's contributions to sustainable development through their full involvement in policy- and decision-making processes at all stages and participation in all aspects of production, employment, income-generating activities, education, health, science and technology, sports, culture and population-related activities and other areas, as active decision makers, participants and beneficiaries;
- (c) To ensure that all women, as well as men, are provided with the education necessary for them to meet their basic human needs and to exercise their human rights.

5.2 The objectives are:

- (a) To develop policies and laws that better support the family, contribute to its stability and take into account its plurality of forms, particularly the growing number of single-parent households;
- (b) To establish social security measures that address the social, cultural and economic factors behind the increasing costs of child-rearing;
- (c) To promote equality of opportunity for family members, especially the rights of women and children in the family.

Population Growth and Structure

Actions

6.4 Countries should give greater attention to the importance of population trends for development. Countries that have not completed their demographic transition should take effective steps in this regard within the context of their social and economic development and with full respect of human rights. Countries that have concluded the

demographic transition should take necessary steps to optimize their demographic trends within the context of their social and economic development. These steps include economic development and poverty alleviation, especially in rural areas, improvement of women's status, ensuring of universal access to quality primary education and primary health care, including reproductive health and family-planning services, and educational strategies regarding responsible parenthood and sexual education. Countries should mobilize all sectors of society in these efforts, including non-governmental organizations, local community groups and the private sector.

Objectives

6.17 The objectives are:

- (a) To enhance, through appropriate mechanisms, the self-reliance of elderly people, and to create conditions that promote quality of life and enable them to work and live independently in their own communities as long as possible or as desired;
- (b) To develop systems of health care as well as systems of economic and social security in old age, where appropriate, paying special attention to the needs of women;
- (c) To develop a social support system, both formal and informal, with a view to enhancing the ability of families to take care of elderly people within the family.

Reproductive Rights and Reproductive Health

Basis for Action

7.2 Reproductive health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes. Reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have

the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this last condition are the right

of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law, and the right of access to appropriate health-care services that will enable women to go

safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant. In line with the above definition of reproductive health, reproductive health care is defined as the constellation of methods, techniques and services that contribute to reproductive health and well-being by preventing and solving reproductive health problems. It also includes sexual health, the purpose of which is the enhancement of life and personal relations, and not merely counselling and care related to reproduction and sexually transmitted diseases.

7.3 Bearing in mind the above definition, reproductive rights embrace certain human rights that are already recognized in national laws, international human rights documents and other consensus documents. These rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. It also includes their right to make decisions concerning reproduction free of discrimination, coercion and violence, as expressed in human rights documents. In the exercise of this right, they should take into account the needs of their living and future children and their responsibilities towards the community. The promotion of the responsible exercise of these rights for all people should be the fundamental basis for government and community-supported policies and programmes in the area of reproductive health, including family planning. As part of their commitment, full attention should be given to the promotion of mutually respectful and equitable gender relations and particularly to meeting the educational and service needs of adolescents to enable them to deal in a positive and responsible way with their

sexuality. Reproductive health eludes many of the world's people because of such factors as: inadequate levels of knowledge about human sexuality and inappropriate or poor-quality reproductive health information and services; the prevalence of high-risk sexual behaviour; discriminatory social practices; negative attitudes towards women and girls; and the limited power many women and girls have over their sexual and reproductive lives. Adolescents are particularly vulnerable because of their lack of information and access to relevant services in most countries. Older women and men have distinct reproductive and sexual health issues which are often inadequately addressed.

Actions

7.6 All countries should strive to make accessible through the primary health-care system, reproductive health to all individuals of appropriate ages as soon as possible and no later than the year 2015. Reproductive health care in the context of primary health care should, inter alia, include: family-planning counselling, information, education, communication and services; education and services for prenatal care, safe delivery and post-natal care, especially breast-feeding and infant and women's health care; prevention and appropriate treatment of infertility; abortion as specified in paragraph 8.25, including prevention of abortion and the management of the consequences of abortion; treatment of reproductive tract infections; sexually transmitted diseases and other reproductive health conditions; and information, education and counselling, as appropriate, on human sexuality, reproductive health and responsible parenthood. Referral for family-planning services and further diagnosis and treatment for complications of pregnancy, delivery and abortion, infertility, reproductive tract infections, breast cancer and cancers of the reproductive system, sexually transmitted diseases, including HIV/AIDS should always be available, as required. Active discouragement of harmful practices, such as female genital mutilation, should also be an integral component of primary health care, including reproductive health-care programmes.

7.7 Reproductive health-care programmes should be designed to serve the needs of women, including adolescents, and must involve women in the leadership, planning, decision-making, management, implementation, organization and evaluation of services. Governments and other organizations should take positive steps to include women at all levels of the health-care system.

7.8 Innovative programmes must be developed to make information, counselling and services for reproductive health accessible to adolescents and adult men. Such programmes must both educate and enable men to share more equally in family planning and in domestic and child-rearing responsibilities and to accept the major responsibility for the prevention of sexually transmitted diseases. Programmes must reach men in their workplaces, at home and where they gather for recreation. Boys and adolescents, with the support and guidance of their parents, and in line with the Convention on the Rights of the Child, should also be reached through schools, youth organizations and wherever they congregate. Voluntary and appropriate male methods for contraception, as well as for the prevention of sexually transmitted diseases, including AIDS, should be promoted and made accessible with adequate information and counselling.

7.9 Governments should promote much greater community participation in reproductive health-care services by decentralizing the management of public health programmes and by forming partnerships in cooperation with local non-governmental organizations and private health-care providers. All types of non-governmental organizations, including local women's groups, trade unions, cooperatives, youth programmes and religious groups, should be encouraged to become involved in the promotion of better reproductive health.

7.10 Without jeopardizing international support for programmes in developing countries, the international community should, upon request, give consideration to the training, technical assistance, short-term contraceptive supply needs and the needs of the countries in transition from centrally managed to market

economies, where reproductive health is poor and in some cases deteriorating. Those countries, at the same time, must themselves give higher priority to reproductive health services, including a comprehensive range of contraceptive means, and must address their current reliance on abortion for fertility regulation by meeting the need of women in those countries for better information and more choices on an urgent basis.

7.11 Migrants and displaced persons in many parts of the world have limited access to reproductive health care and may face specific serious threats to their reproductive health and rights. Services must be particularly sensitive to the needs of individual women and adolescents and responsive to their often powerless situation, with particular attention to those who are victims of sexual violence.

Family planning

Basis for Action

7.12 The aim of family-planning programmes must be to enable couples and individuals to decide freely and responsibly the number and spacing of their children and to have the information and means to do so and to ensure informed choices and make available a full range of safe and effective methods. The success of population education and family-planning programmes in a variety of settings demonstrates that informed individuals everywhere can and will act responsibly in the light of their own needs and those of their families and communities. The principle of informed free choice is essential to the long-term success of family-planning programmes. Any form of coercion has no part to play. In every society there are many social and economic incentives and disincentives that affect individual decisions about child-bearing and family size. Over the past century, many governments have experimented with such schemes, including specific incentives and disincentives, in order to lower or raise fertility.

Most such schemes have had only marginal impact on fertility and in some cases have been counterproductive. Governmental goals for family planning should be defined in terms of unmet needs for information and services.

Demographic goals, while legitimately the subject of government development strategies, should not be imposed on family-planning providers in the form of targets or quotas for the recruitment of clients.

7.13 Over the past three decades, the increasing availability of safer methods of modern contraception, although still in some respects inadequate, has permitted greater opportunities for individual choice and responsible decision-making in matters of reproduction throughout much of the world. Currently, about 55 per cent of couples in developing regions use some method of family planning. This figure represents nearly a fivefold increase since the

1960s. Family-planning programmes have contributed considerably to the decline in average fertility rates for developing countries, from about six to seven children per woman in the 1960s to about three to four children at present. However, the full range of modern family-planning methods still remains unavailable to at least 350 million couples world wide, many of whom say they want to space or prevent another pregnancy. Survey data suggest that approximately 120 million additional women world-wide would be currently using a modern family-planning method if more accurate information and affordable services were easily available, and if partners, extended families and the community were more supportive. These numbers do not include the substantial and growing numbers of sexually active unmarried individuals wanting and in need of information and services. During the decade of the 1990s, the number of couples of reproductive age will grow by about 18 million per annum. To meet their needs and close the existing large gaps in services, family planning and contraceptive supplies will need to expand very rapidly over the next several years. The quality of family-planning programmes is often directly related to the level and continuity of contraceptive use and to the growth in demand for services. Family-planning programmes work best when they are part of or linked to broader reproductive health programmes that address closely related health needs and when women

are fully involved in the design, provision, management and evaluation of services.

Actions

7.15 Governments and the international community should use the full means at their disposal to support the principle of voluntary choice in family planning.

7.16 All countries should, over the next several years, assess the extent of national unmet need for good-quality family-planning services and its integration in the reproductive health context, paying particular attention to the most vulnerable and under-served groups in the population. All countries should take steps to meet the family-planning needs of their populations as soon as possible and should, in all cases by the year 2015, seek to provide universal access to a full range of safe and reliable family-planning methods and to related reproductive health services which are not against the law. The aim should be to assist couples and individuals to achieve their reproductive goals and give them the full opportunity to exercise the right to have children by choice.

7.17 Governments at all levels are urged to institute systems of monitoring and evaluation of user-centred services with a view to detecting, preventing and controlling abuses by family-planning managers and providers and to ensure a continuing improvement in the quality of services. To this end, Governments should secure conformity to human rights and to ethical and professional standards in the delivery of family planning and related reproductive health services aimed at ensuring responsible, voluntary and informed consent and also regarding service provision. In-vitro fertilization techniques should be provided in accordance with appropriate ethical guidelines and medical standards.

7.18 Non-governmental organizations should play an active role in mobilizing community and family support, in increasing access and acceptability of reproductive health services including family planning, and cooperate with Governments in the process of preparation and provision of care, based on informed choice, and in helping to monitor public-

and private-sector programmes, including their own.

7.19 As part of the effort to meet unmet needs, all countries should seek to identify and remove all the major remaining barriers to the utilization of family-planning services. Some of those barriers are related to the inadequacy, poor quality and cost of existing family-planning services. It should be the goal of public, private and non-governmental family-planning organizations to remove all programme-related barriers to family-planning use by the year 2005 through the redesign or expansion of information and services and other ways to increase the ability of couples and individuals to make free and informed decisions about the number, spacing and timing of births and protect themselves from sexually transmitted diseases.

7.20 Specifically, Governments should make it easier for couples and individuals to take responsibility for their own reproductive health by removing unnecessary legal, medical, clinical and regulatory barriers to information and to access to family-planning services and methods.

7.22 Governments are encouraged to focus most of their efforts towards meeting their population and development objectives through education and voluntary measures rather than schemes involving incentives and disincentives.

7.23 In the coming years, all family-planning programmes must make significant efforts to improve quality of care. Among other measures, programmes should:

- (a) Recognize that appropriate methods for couples and individuals vary according to their age, parity, family-size preference and other factors, and ensure that women and men have information and access to the widest possible range of safe and effective family-planning methods in order to enable them to exercise free and informed choice;
- (b) Provide accessible, complete and accurate information about various family-planning methods, including their health risks and benefits, possible

side effects and their effectiveness in the prevention of the spread of HIV/AIDS and other sexually transmitted diseases;

- (c) Make services safer, affordable, more convenient and accessible for clients and ensure, through strengthened logistical systems, a sufficient and continuous supply of essential high-quality contraceptives. Privacy and confidentiality should be ensured;
- (d) Expand and upgrade formal and informal training in sexual and reproductive health care and family planning for all health-care providers, health educators and managers, including training in interpersonal communications and counselling;
- (e) Ensure appropriate follow-up care, including treatment for side effects of contraceptive use;
- (f) Ensure availability of related reproductive health services on site or through a strong referral mechanism;
- (g) In addition to quantitative measures of performance, give more emphasis to qualitative ones that take into account the perspectives of current and potential users of services through such means as effective management information systems and survey techniques for the timely evaluation of services;
- (h) Family-planning and reproductive health programmes should emphasize breast-feeding education and support services, which can simultaneously contribute to birth spacing, better maternal and child health and higher child survival.

Population distribution and sustainable development

9.2 [...]Effective population distribution policies are those that, while respecting the right of individuals to live and work in the community of their choice, take into account the effects of development strategies on population distribution. Urbanization has profound implications for the livelihood, way of life and values of individuals. At the same

time, migration has economic, social and environmental implications – both positive and negative – for the places of origin and destination.

9.5 To reduce urban bias and isolated rural development, Governments should examine the feasibility of providing incentives to encourage the redistribution and relocation of industries and businesses from urban to rural areas and to encourage the establishment of new businesses, industrial units and income-generating projects in rural areas.

9.6 Governments wishing to create alternatives to out-migration from rural areas should establish the preconditions for development in rural areas, actively support access to ownership or use of land and access to water resources, especially for family units, make and encourage investments to enhance rural productivity, improve rural infrastructure and social services and facilitate the establishment of credit, production and marketing cooperatives and other grass-roots organizations that give people greater control over resources and improve their livelihoods. Particular attention is needed to ensure that these opportunities are also made available to migrants' families remaining in the areas of origin.

9.7 Governments should pursue development strategies offering tangible benefits to investors in rural areas and to rural producers. Governments should also seek to reduce restrictions on international trade in agricultural products.

Education, population and sustainable development

Basis for Action

11.2 Education is a key factor in sustainable development: it is at the same time a component of well-being and a factor in the development of well-being through its links with demographic as well as economic and social factors. Education is also a means to enable the individual to gain access to knowledge, which is a precondition for coping, by anyone wishing to do so, with today's complex world. The reduction of fertility, morbidity and mortality rates, the empowerment of women,

the improvement in the quality of the working population and the promotion of genuine democracy are largely assisted by progress in education. The integration of migrants is also facilitated by universal access to education, which respects the religious and cultural backgrounds of migrants.

11.3 The relationship between education and demographic and social changes is one of interdependence. There is a close and complex relationship among education, marriage age, fertility, mortality, mobility and activity. The increase in the education of women and girls contributes to greater empowerment of women, to a postponement of the age of marriage and to a reduction in the size of families. When mothers are better educated, their children's survival rate tends to increase. Broader access to education is also a factor in internal migration and the composition of the working population.

Actions

11.9 To be most effective, education about population issues must begin in primary school and continue through all levels of formal and non-formal education, taking into account the rights and responsibilities of parents and the needs of children and adolescents. Where such programmes already exist, curricula should be reviewed, updated and broadened with a view to ensuring adequate coverage of such important concerns as gender sensitivity, reproductive choices and responsibilities, and sexually transmitted diseases, including HIV/AIDS. To ensure acceptance of population education programmes by the community, population education projects should emphasize consultation with parents and community leaders.

11.10 Efforts in the training of population specialists at the university level should be strengthened and the incorporation of content relating to demographic variables and their interrelationships with development planning in the social and economic disciplines, as well as to health and the environment, should be encouraged.

Population information, education and communication

Basis for Action

11.11 Greater public knowledge, understanding and commitment at all levels, from the individual to the international, are vital to the achievement of the goals and objectives of the present Programme of Action. In all countries and among all groups, therefore, information, education and communication activities concerning population and sustainable development issues must be strengthened. This includes the establishment of gender- and culturally sensitive information, education and communication plans and strategies related to population and development. At the national level, more adequate and appropriate information enables planners and policy makers to make more appropriate plans and decisions in relation to population and sustainable development. At the most basic level, more adequate and appropriate information is conducive to informed, responsible decision-making concerning health, sexual and reproductive behaviour, family life, and patterns of production and consumption. In addition, more and better information about the causes and benefits of migration can create a more positive environment for societies to address and respond to migration challenges.

11.12 Effective information, education and communication are pre- requisites for sustainable human development and pave the way for attitudinal and behavioural change. Indeed, this begins with the recognition that decisions must be made freely, responsibly and in an informed manner, on the number and spacing of children and in all other aspects of daily life, including sexual and reproductive behaviour. Greater public knowledge and commitment in a democratic setting create a climate conducive to responsible and informed decisions and behaviour. Most important,

they also pave the way for democratic public discussion and thereby make possible strong political commitment and popular support for needed action at the local, national and international levels.

Actions

11.16 Information, education and communication efforts should raise awareness through public education campaigns on such priority issues as: safe motherhood, reproductive health and rights, maternal and child health and family planning, discrimination against and valorization of the girl child and persons with disabilities; child abuse; violence against women; male responsibility; gender equality; sexually transmitted diseases, including HIV/ AIDS; responsible sexual behaviour; teenage pregnancy; racism and xenophobia; ageing populations; and unsustainable consumption and production patterns . More education is needed in all societies on the implications of population- environment relationships, in order to influence behavioural change and consumer lifestyles and to promote sustainable management of natural resources. The media should be a major instrument for expanding knowledge and motivation.

11.19 A coordinated strategic approach to information, education and communication should be adopted in order to maximize the impact of various information, education and communication activities, both modern and traditional, which may be undertaken on several fronts by various actors and with diverse audiences. It is especially important that information, education and communication strategies be linked to, and complement, national population and development policies and strategies and a full range of services in reproductive health, including family planning and sexual health, in order to enhance the use of those services and improve the quality of counselling and care.

UNFPA: Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential fulfilled.



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