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Committee on Economic, Social and Cultural Rights Fiftieth session

Summary record (partial)* of the 11th meeting

Held at the Palais Wilson, Geneva, on Monday, 6 May 2013, at 10 a.m.

Chairperson: Mr. Kedzia

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* No summary record was prepared for the rest of the meeting.

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The meeting was called to order at 10.05 a.m.

Substantive issues arising in the implementation of the International Covenant on Economic, Social and Cultural Rights

Meetings with partners

1. **Mr. Christoffersen** (Danish Institute for Human Rights) said that, although Denmark was a highly developed welfare State with the world's lowest gap between rich and poor, the country still faced human rights challenges. He hoped that the Committee would closely consider the parallel reports on the situations of drug users and of ethnic minorities, as the small NGOs that had submitted those reports had gone to great lengths to prepare them. Many municipalities in Denmark did not follow the established procedures when changing the level of service offered to persons with disabilities. He urged the Committee to pay attention to the issues raised in the Institute's shadow report that had not been referred to in the list of issues (E/C.12/DNK/Q/5).
2. **Ms. Bras Gomes** asked what kind of changes were being made to the services provided for persons with disabilities and whether the central Government set any standards in that regard.
3. **Mr. Sadi** requested examples of cases in which the Danish Institute for Human Rights had dealt with economic, social and cultural rights and asked whether promotion and protection of those rights was increasing or decreasing in Denmark.
4. **Ms. Shin** asked what the current situation was in Denmark with regard to possible ratification of the Optional Protocol.
5. **Mr. Schrijver** asked if there had been any new developments in the country's immigration policy and treatment of asylum seekers, which had been a matter of considerable concern under the previous Government.
6. **Mr. Christoffersen** (Danish Institute for Human Rights) said that municipalities in Denmark were self-governing, and that the federal Government had set minimum standards in some areas. Municipalities were therefore free to adjust their priorities and the corresponding level of service in particular areas, provided they met the minimum standards. Certain procedures had been established, however, such as individual needs assessments, and the municipalities did not always follow those procedures. His Institute conducted its work on economic, social and cultural rights mainly from a discrimination perspective, focusing on discrimination on grounds of ethnicity, race, gender and disability. An independent committee of experts was currently considering, inter alia, whether Denmark should accept more individual complaint mechanisms such as the Optional Protocol, and it would issue its recommendations in that regard in October 2013.
7. One issue of major concern was the disappearance of unaccompanied minors seeking asylum in Denmark, and efforts were being made to keep better track of them. Recent policy changes had been made whereby asylum seekers were allowed to live outside asylum seeker centres while their application was reviewed. If their application was rejected but they could not be returned to their country of origin, they could still live outside the centres provided they cooperated with the authorities. Some were still being kept in centres for very long periods, however, and the Supreme Court had recently issued a decision finding that the State had violated an asylum seeker's freedom of movement by holding the individual in a centre for five years.
8. **Mr. Sadi** asked if Mr. Christoffersen would agree that addressing economic, social and cultural rights from a discrimination perspective was not sufficient for the Committee's purposes.

9. **Mr. Christoffersen** (Danish Institute for Human Rights) said that the focus on discrimination was largely a matter of limited capacity, as the Institute had been struggling to perform its core functions in the wake of budget cuts. The current session marked the first time the Institute had engaged so fully with the Committee, and it would be exploring ways to better follow up on the Committee's concluding observations.

10. **Mr. Halford** (Center for Reproductive Rights) said that access to family planning information and services in Rwanda was inadequate. Only 25 per cent of Rwandan women used modern contraception, and of the 40 per cent of women who wanted to use family planning, 26 per cent were unable to do so. In the case of unmarried women 15 to 19 years of age, as many as 48 per cent were unable to use family planning.

11. Women in Rwanda had a 1 in 43 lifetime risk of dying from a pregnancy-related cause, and there were still significant barriers impeding access to maternal health services, including a severe shortage of doctors and other health-care professionals. Less than 35 per cent of pregnant Rwandan women received the recommended minimum of four antenatal visits, and only 18 per cent received a postnatal check-up during the first two days after delivery. About 25 per cent of all deaths among women in their reproductive years were due to pregnancy-related causes.

12. The new Rwandan Criminal Code enacted in July 2012 provided for exceptions to the criminalization of abortion in cases where it was performed to save the woman's life or protect her health or where the pregnancy was the result of rape, incest or forced marriage. Nevertheless, the Code severely limited access to abortion services in those cases by requiring a competent court to certify that the pregnancy resulted from one of those circumstances and by requiring the doctor performing the abortion to seek the advice and consent of another doctor when possible. A new bill on reproductive health that was currently being debated by Parliament would exacerbate the situation by requiring the consent of three doctors and calling for mandatory HIV testing without the patient's consent. Rwanda aggressively enforced its Criminal Code, and adolescent girls and women were routinely arrested, prosecuted and imprisoned for up to 10 years for having an abortion. Many of them were victims of sexual violence and abuse or had engaged in transactional sex for money to meet their essential needs.

13. He urged the Committee to recommend that the Government of Rwanda should ensure an adequate and consistent supply of contraceptives, initiate civic education campaigns to ensure sufficient and non-discriminatory access to family planning, collect comprehensive data on the number of maternal deaths from unsafe abortion, harmonize its abortion law with its obligations under international and regional treaties, and increase the number of health-care facilities equipped to offer quality obstetric care.

14. **Mr. Sadi** said he wondered how effective the proposed recommendation would be in changing the Government's behaviour. He asked if Mr. Halford had any more concrete recommendations on how to change policy and practice in Rwanda.

15. **Mr. Schrijver** enquired about communication between the Center for Reproductive Rights and the Rwandan Government and about the Government's response to the Center's recommendations.

16. **Ms. Shin** pointed out that representation of women in Parliament was higher in Rwanda than in any other country in the world, standing at 56 per cent, but she wondered what effect that was having on the adoption of laws favourable to women.

17. **Mr. Halford** (Center for Reproductive Rights) said that the maternal mortality ratio in Rwanda had decreased significantly since 2000 but remained well above the global average; at the current rate of reduction Rwanda would fail to meet the target set under the Millennium Development Goals of reducing the ratio by 75 per cent. Unsafe abortions were

a major contributor to the ratio, and rigid enforcement of anti-abortion laws was very punitive. He would consult the Africa branch of the Center for Reproductive Rights and inform the Committee about the Center's communication with the Rwandan Government. While some progress had been made in sexual and reproductive health issues, patriarchal attitudes persisted. The new reproductive health bill had been inspired by political concerns more than the issues themselves and, if passed, would lead to stigmatization of and discrimination against persons living with HIV/AIDS.

18. **Ms. Strambini** (International Baby Food Action Network/Geneva Infant Feeding Association) said that there were no data available on breastfeeding rates in Denmark. That shortcoming was hindering the creation and implementation of a national policy to protect, promote and support breastfeeding, and the Government should therefore establish a systematic data-collection system. Danish law regulating the marketing of breast milk substitutes did not meet the minimum standards established by the World Health Organization and should therefore be strengthened. The Committee on the Rights of the Child had already recommended that Denmark should address those challenges, and she encouraged the Committee on Economic, Social and Cultural Rights to do the same.

The meeting was suspended at 10.30 a.m. and resumed at 10.45 a.m.

Miscellaneous matters

Commemoration of the entry into force of the Optional Protocol to the International Covenant on Economic, Social and Cultural Rights

19. **Ms. Pillay** (United Nations High Commissioner for Human Rights) said that, with the entry into force of the Optional Protocol on 5 May 2013, the United Nations had come full circle with the normative architecture envisaged by the Universal Declaration of Human Rights. The mechanisms provided for in the Optional Protocol would enable the Committee to help States and other stakeholders address the root causes of violations of economic, social and cultural rights. Egregious violations of those rights occurred on a daily basis and often went unnoticed, while similar violations in the area of civil and political rights would be immediately condemned. The Optional Protocol would help to address that imbalance.

20. She encouraged the Committee to maintain its focus on the treaty body strengthening process, including by discussing its working methods and further considering the Guidelines on the independence and impartiality of members of the human rights treaty bodies (Addis Ababa guidelines). The Meeting of chairpersons of human rights treaty bodies to be held in New York in May 2013 would provide an important occasion for an exchange of views on treaty body strengthening.

21. **The Chairperson** said that, although the Universal Declaration of Human Rights had given the same status to all human rights, as a result of political divides two separate Covenants had been established, creating a dichotomy that had led to a weaker implementation mechanism for economic, social and cultural rights than for civil and political rights. With the entry into force of the Optional Protocol, that gap was now closing. The introduction of legal remedies in cases of violations of economic, social and cultural rights and the recent advancement of public-interest litigation in that area had clearly benefited rights holders.

22. The Optional Protocol would enable victims who had exhausted domestic remedies to claim their economic, social and cultural rights at the international level by submitting individual communications or requests for inquiries into grave or systematic violations of those rights. In considering individual communications, the Committee would influence the development of economic, social and cultural rights through its jurisprudence and further clarify the content and applicability of the standards set out in the Covenant.

23. Thus far, only a few States had ratified the Optional Protocol, and its impact would be limited if the ratification process remained sluggish. The Committee therefore strongly encouraged all States parties to ratify the Optional Protocol as swiftly as possible. Raising awareness about the Optional Protocol was also essential, and civil society played a crucial role in that respect. He stressed the importance of States' efforts to facilitate complainants' unhindered access to the Committee and to ensure the implementation of its recommendations.

24. The Committee welcomed the new opportunities offered by the entry into force of the Optional Protocol in carrying out its mandate. It was aware of the enormous responsibility entrusted to it and would do its best to deliver objective, well-reasoned and legally sound decisions.

The discussion covered in the summary record ended at 11.10 a.m.