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|  | United Nations | A/HRC/33/L.20 |
| _unlogo | **General Assembly** | Distr.: Limited23 September 2016Original: English |

**Human Rights Council**

**Thirty-third session**

Agenda item 3

**Promotion and protection of all human rights, civil,
political, economic, social and cultural rights,
including the right to development**

 Albania, Andorra,\* Australia,\* Austria,[[1]](#footnote-2)\* Botswana, Bulgaria,\* Colombia,\* Cyprus,\* Denmark,\* Estonia,\* Finland,\* France, Greece,\* Haiti,\* Iceland,\* Ireland,\* Israel,\* Italy,\* Luxembourg,\* Mexico, Monaco,\* Mongolia, Montenegro,\* Netherlands, Peru,\* Poland,\* Portugal, Romania,\* Slovenia, Spain,\* Sweden,\* Switzerland, Thailand,\* Turkey,\* United Kingdom of Great Britain and Northern Ireland: draft resolution

33/… Preventable mortality and morbidity of children under 5 years of age as a human rights concern

 *The Human Rights Council*,

 *Recalling* its resolutions 24/11 of 26 September 2013 and 27/14 of 2 October 2014 on preventable mortality and morbidity of children under 5 years of age as a human rights concern, and all other relevant resolutions on the rights of the child of the Commission on Human Rights, the Council and the General Assembly,

 *Reaffirming* that all human rights are universal, indivisible, interdependent and interrelated, and recognizing the need to ensure the full and effective enjoyment by all of their human rights, including the right to development,

 *Deeply concerned* that more than 5,900,000 children under 5 years of age die each year, mostly from preventable and treatable causes, owing to inadequate or lack of access to integrated and quality maternal, newborn and child health care and services, early childbearing, as well as to health determinants, such as safe drinking water and sanitation, safe and adequate food and nutrition, and that mortality remains highest among children belonging to the poorest and most marginalized communities,

 *Deeply concerned also* that, despite progress made in the reduction of child mortality, Millennium Development Goal 4, to reduce child mortality by two thirds from 1990 to 2015, was not achieved, and that deaths of newborn babies are falling more slowly, with a projected increase, if current trends continue, in the share of neonatal deaths by 2030,

 *Welcoming* the adoption of the 2030 Agenda for Sustainable Development,[[2]](#footnote-3) and recognizing that reducing preventable mortality and morbidity of children under 5 years of age will require efforts across the 2030 Agenda, including target 3.2, to end preventable deaths of newborns and children under 5 years of age,

 *Acknowledging* the work done by the United Nations and its specialized agencies, funds and programmes in relation to the reduction and elimination of preventable mortality and morbidity of children under 5 years of age, and in that regard notes the Global Strategy for Women’s, Children’s and Adolescents’ Health (2016-2030) and the establishment of the Independent Accountability Panel,

 *Acknowledging also* the role played by women’s and girls’ education and empowerment, and the impact of gender inequality, when addressing the underlying causes of child mortality and morbidity,

 *Reaffirming* that States should take all appropriate measures to ensure the right of the child to the enjoyment of the highest attainable standard of physical and mental health without discrimination of any kind and, in doing so, be guided by the best interests of the child, ensuring the meaningful participation of children, consistent with their evolving capacities, in all matters and decisions affecting their lives, bearing in mind the rights, duties and responsibilities of parents or caregivers in relation to preventing mortality and morbidity of children under 5 years of age, and take steps to ensure the allocation of available resources to the maximum extent possible to achieve the full realization of the right of the child to the highest attainable standard of health, including by strengthening international cooperation in this field,

 *Recognizing* that the factors leading to preventable mortality and morbidity of children under 5 years of age can be particularly severe in developing countries,

 *Recognizing also* that a human rights-based approach to reducing and eliminating preventable child mortality and morbidity is an approach underpinned by the principles of, inter alia, equality and non-discrimination, participation, sustainability, transparency, the best interests of the child, international cooperation and accountability,

 1. *Takes note with appreciation* of the report of the United Nations High Commissioner for Human Rights on implementation of the technical guidance on the application of a human rights-based approach to policies and programmes to reduce and eliminate preventable mortality and morbidity of children under 5 years of age;[[3]](#footnote-4)

 2. *Urges* States to disseminate the technical guidance and to apply it, as appropriate, in the design, implementation, evaluation and monitoring of laws, policies, programmes, budgets and mechanisms for remedy and redress aimed at eliminating preventable mortality and morbidity of children under 5 years of age;

 3. *Calls upon* States to adopt a human rights-based approach to reduce and eliminate preventable mortality and morbidity of children under 5 years of age, including in scaling up efforts to achieve the integrated management of quality maternal, newborn and child health care and services, particularly at the community and family levels, and to take action to address the main causes of preventable mortality and morbidity of children under 5 years of age;

 4. *Calls upon* States and other relevant stakeholders, including national human rights institutions and non-governmental organizations, with due regard to the implementation of the 2030 Agenda to continue to take and intensify action at all levels to address the interlinked root causes of preventable mortality and morbidity of children under 5 years of age, such as poverty, malnutrition, harmful practices, violence, stigma and discrimination, unsafe households and environments, lack of safe drinking water and sanitation, lack of accessible, affordable, quality and appropriate health care, services, medicines and vaccinations, late detection of childhood illnesses and low levels and quality of education;

 5. *Calls upon* States to strengthen further their international commitment, cooperation and mutual assistance with the objective of reducing and eliminating preventable mortality and morbidity of children under 5 years of age, including through the sharing of good practices, research, policies, review of progress through data collection and analysis, and capacity-building;

 6. *Encourages* States and all relevant stakeholders to ensure that the issue of preventable mortality and morbidity of children under 5 years of age is given due attention in the work of the Human Rights Council, including relevant Council processes, debates and mechanisms, including the universal periodic review;

 7. *Calls upon* all relevant United Nations agencies to continue to provide technical cooperation and assistance to States, as requested, to reduce and eliminate preventable morbidity and mortality of children under 5 years of age, by supporting the application of the technical guidance, including through the development and dissemination of tools for its operationalization at all relevant stages of national planning and action cycles for child health and survival;

 8. *Encourages* the United Nations High Commissioner for Human Rights, in close collaboration with the World Health Organization, to intensify efforts to bring the technical guidance to the attention of the Secretary-General and all United Nations entities with mandates relevant to preventable mortality and morbidity of children under 5 years of age, including the High-level Working Group on the Health and Human Rights of Women, Children and Adolescents, and to continue dialogue on the issue of preventable mortality and morbidity of children under 5 years of age with all relevant actors with due regard to the implementation of the 2030 Agenda;

 9. *Requests* the High Commissioner:

 (*a*) To organize, prior to the thirty-ninth session of the Human Rights Council, in close collaboration with the World Health Organization, an expert workshop to discuss experiences in preventing mortality and morbidity of children under 5 years of age, with a particular focus on the implementation of the technical guidance, including challenges, best practices and lessons learned, and including consideration of the particular challenges in respect of the newborn child;

 (*b*) To consult with and invite States, relevant United Nations agencies, funds and programmes, including the United Nations Children’s Fund and the Joint United Nations Programme on HIV/AIDS, and relevant special procedure mandate holders, the Committee on the Rights of the Child, other human rights mechanisms, including regional organizations, professional medical organizations, health policymakers or practitioners and civil society to participate actively in the workshop;

 (*c*) To prepare a summary report on the above-mentioned workshop, including any good practices identified thereat and recommendations arising therefrom, for submission to the Human Rights Council at its thirty-ninth session;

 10. *Decides* to remain seized of the matter.

1. \* State not a member of the Human Rights Council. [↑](#footnote-ref-2)
2. General Assembly resolution 70/1. [↑](#footnote-ref-3)
3. A/HRC/33/23. [↑](#footnote-ref-4)