

UPDATE:

Report of the Special Rapporteur on Extreme Poverty and Human Rights

Aisosa Jennifer Omoruyi

In his report to the Human Rights Council in June 2021, the Special Rapporteur on Extreme Poverty and Human Rights, Olivier de Schutter, highlighted the importance of realising the right to social security, which includes protection from unaffordable health care. He considered this especially important given the current economic and social crisis caused by the Covid-19 pandemic, which caught countries off-guard. The Rapporteur also acknowledged the limited fiscal capacity of low-income countries in this regard, given their high social needs yet low public revenues and insufficiency of international support.

He recommends the establishment of a global fund for social protection to increase the level of support to low-income countries. This would enable them to set up and maintain social protection floors and improve the resilience of their social protection systems against shocks, as well as supporting increased mobilisation of domestic resources for social protection. This is in line with international standards, including the commitments of member states under the Sustainable Development Goals as well as the ILO Social Protection Floors Recommendation, 2012 (No. 202). The Special Rapporteur cited the proven economic benefits of social protection at national, household and individual levels in alleviating poverty.

In the report, the Special Rapporteur provides guidance on the structure and governance of the global fund as well as country-level coordination. Rather than creating dependency on international support, the initiative is aimed at matching international support with the domestic efforts of countries that are committed to the establishment of social protection floors and whose ability to finance social protection would improve in time with relevant reforms.

Although non-communicable diseases (NCDs) are traditionally seen as diseases of affluence, research demonstrates that they strike along the fault lines of social inequality, given the dual causal relationship between poverty and health. Poverty contributes to

the risk factors for NCDs, such as unhealthy diets and difficulties in accessing adequate health care upon the onset of any chronic NCD. Health inequalities extend beyond the inadequacies in the health sector and gaps in social health protection coverage. Indeed, social, and economic inequalities outside the health sector itself create barriers to accessing affordable health-care services for those living in poverty.

In addition to their social and economic benefits, such as income security, national social protection floors are intended to have a positive and equitable effect impact on health outcomes. This not only means improved and equal access to health care but also entails strategies for the prevention of ill-health. International cooperation and assistance aimed at low-income countries would assist in the realisation of the right to health and prevent and manage NCDs, which are a growing challenge in low- and middle-income countries. Such an intervention would be useful in addressing the link between poverty and health by ensuring affordable access to health care and maintaining a productive workforce.

To view the report, click here: <https://undocs.org/A/HRC/47/36>.

Aisosa Jennifer Omoruyi is a postdoctoral researcher at the Dullah Omar Institute, University of the Western Cape.

Contact

Socio-Economic Rights Project

Dullah Omar Institute for Constitutional Law,
Governance and Human Rights

University of the Western Cape
New Social Sciences Building
Private Bag X17, Bellville, 7535



Tel: (021) 959 2950



Fax: (021) 959 2411



Email: serp@uwc.ac.za



Website: <https://dullahomarininstitute.org.za>