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DROITS DE L'HOMME
HAUT-COMMISSARIAT

UNITED NATIONS
HUMAN RIGHTS
OFFICE OF THE HIGH COMMISSIONER

HAUT-COMMISSARIAT AUX DROITS DE L'HO MME • BUREAU DU HAUT COMMISSAIRE AUX DROITS DE L'HOMME
PALAIS DES NATIONS • 1211 Genève 10, SUISSE
Site www.ohchr.org • Tél. +41 22 917 9000 • FAX: +41 22 917 9008 • E-MAIL: registry@ohchr.org

Reference: WHRGS/MG/Res60/18

The Office of the United Nations High Commissioner for Human Rights presents its compliments to all Permanent Missions to the United Nations Office and other International Organizations at Geneva and has the honour to refer to resolution 60/18 entitled "Preventable maternal mortality and morbidity and human rights" adopted by the Human Rights Council on 7 October 2025. The resolution requests the United Nations High Commissioner for Human Rights to facilitate consultations on the implementation of the Update to the technical guidance and best practice approaches to that implementation and to compile and analyse examples of best practices emerging from those consultations into a report. This report will be presented to the Human Rights Council at its sixty-sixth session in September 2027.

In this context, the Office of the High Commissioner for Human Rights would like to invite all United Nations Member States, United Nations entities, regional organizations, national human rights institutions, non-governmental organizations, financial institutions, independent experts of human rights treaty bodies and Human Rights Council special procedures, civil society organisations and other relevant stakeholders, such as health providers and humanitarian actors, to submit information on the status of implementation of the recommendations contained in the Update to the technical guidance. OHCHR would appreciate receiving written contributions, comprising replies to the guiding questions in the annex.

Submissions should be received by **17 November 2026** and be:

- Limited to 3000 words;
- Sent by email in Microsoft Word format to **ohchr-registry@un.org** with **masiha.ghafory@un.org** in copy, with the e-mail subject line: Input to the implementation of the update to the technical guidance

Unless otherwise requested, all submissions will be made available on OHCHR website.

The Office of the High Commissioner for Human Rights avails itself of this opportunity to renew to the Permanent Missions to the United Nations Office at Geneva the assurances of its highest consideration.

8 September 2026

Annex: Implementation of the Update to the technical guidance on the application of a human rights-based approach to the elimination of preventable maternal mortality and morbidity

Please provide information including with regard to:

1. What measures have been taken in your country by the Government and relevant organizations to eliminate preventable maternal mortality and morbidity, applying a human rights-based approach to maternal health policies and services, including by promoting non-discrimination and equality, ensuring quality of services and strengthening accountability? Please share documented promising practices in this regard.

2. What measures have been taken in your country to genuinely tackle the underlying factors (limited access to quality maternal care, including economic, social, cultural and legal restrictions, other social determinants of health[1], multiple and intersecting forms of discrimination, including gender-based discrimination, discriminatory practices in healthcare settings etc.) that contribute to maternal deaths and maternal morbidity?

3. To what extent do existing accountability mechanisms (such as legal redress, public inquiries and community, national and international human rights monitoring mechanisms as well as litigation efforts, national parliamentary oversight through sectoral committees and civil society-led public tracking mechanisms) identify, investigate, and address these root causes while ensuring access to effective remedies[2]? Please share any documented promising practices and challenges.

4. What measures has your Government or organization taken to address preventable maternal mortality and morbidity among women and girls in marginalized situations, including women and girls living in poverty, rural populations, Indigenous Peoples, persons with disabilities, migrants, refugees, internally displaced persons, minorities, adolescents, and other groups at risk of being left behind? Please share any documented promising practices and lessons learned.

5. What measures have been taken to ensure adequate, equitable and sustainable financing for maternal health services and programmes? Have decisions regarding resource allocation, budgeting or health financing reforms followed the recommendations formulated in the Update to the technical guidance on preventable maternal mortality and morbidity? How have these measures addressed discriminatory practices, underfunded health systems, shortages of skilled healthcare personnel, and other factors that contribute to poor quality of care leading to maternal mortality and morbidity? In addition, specify whether monitoring distinguishes between newly secured allocations and the protection of existing allocations from budget cuts or reallocation, and whether financing advocacy is timed to align with the national budget cycle

[1] Such as access to safe and potable water, adequate sanitation, adequate food and nutrition, adequate housing, safe and healthy working conditions and environment, health-related education and information, and effective protection from all forms of violence, torture and discrimination and other human rights violations that have a negative impact on the right to sexual and reproductive health. See General comment No. 22 (2016) on the right to sexual and reproductive health, Committee on Economic, Social and Cultural Rights.

[2] Remedies may take the form of restitution, compensation, satisfaction or guarantees of non-repetition, see A/HRC/21/22

(priority-setting, sectoral ceilings, legislative approval and execution)? Please share any documented promising practices and challenges.

6. What steps have been taken, and to what extent have they been implemented, to expand access to community-based maternal healthcare, including midwifery models of care, in order to provide equitable, person-centred, respectful and quality maternal health services, particularly for women and girls in underserved and marginalized communities? Please share any documented promising practices as well as the challenges encountered in implementing these steps.

7. What concrete steps has your Government or organization sought to ensure continuity of maternal health services during emergencies, humanitarian crises, armed conflict, climate-related disasters, disease outbreaks or other situations of instability? Please share any documented promising practices and challenges.

8. Does your Government or organization systematically collect and analyse disaggregated data on maternal mortality and morbidity, in line with the recommendations contained in the Update to the technical guidance? Please elaborate on promising practices and challenges in this regard.

9. In preparation for mandated virtual consultations on the implementation of the Update to the technical guidance, please indicate whether your Government or organization would be interested in participating actively and provide the name, title and contact details of relevant technical focal point(s), including within the Ministry of Health or other relevant institutions, as appropriate.