**OHCHR’s overview on the right to social security**

1. **Content of the right to social security**

The right to social security[[1]](#footnote-1) aims to provide income security and support for all people across the life cycle, with particular attention to the most marginalized. Such support, whether in cash or in kind, is provided **without discrimination** in order to secure protection from (a) lack of work-related income caused by sickness, disability, maternity, employment injury, unemployment, old age, or death of a family member; (b) unaffordable access to health care; (c) insufficient family support, particularly for children and adult dependents.

**Availability**: a social security system has to be available and in place to ensure that benefits are provided for the relevant social risks and contingencies.

**Adequacy**: benefits, whether in cash or in kind, must be adequate in amount and duration in order that everyone may realise his or her rights to family protection and assistance, an adequate standard of living and adequate access to health care. This would require the regular monitoring of the adequacy of benefits.

**Accessibility:**

* Coverage: all persons should be covered by the social security system, especially the most disadvantaged and marginalized groups, without discrimination. In order to ensure universal coverage, non-contributory schemes are necessary.
* Eligibility: qualifying conditions for benefits must be reasonable, proportionate and transparent. The withdrawal, reduction or suspension of benefits should be circumscribed, based on grounds that are reasonable, subject to due process, and provided for in national law.
* Affordability: the direct and indirect costs associated with making contributions must be affordable for all, and must not compromise the realization of other economic and social rights.
* Participation and information: beneficiaries of social security schemes must be able to participate in the administration of the social security system. The system should be established under national law and ensure the right of individuals and organizations to seek, receive and impart information on all social security entitlements in a clear and transparent manner.
* Physical access: benefits should be provided in a timely manner and beneficiaries should have physical access to the social security services in order to access benefits and information.

**Core content**: to ensure on a non-discriminatory basis a social security scheme that provides a minimum essential level of benefits to all individuals and families that will enable them to acquire at least essential health care, basic shelter and housing, water and sanitation, foodstuffs, and the most basic forms of education.

Everyone should be covered by the social security system, especially individuals belonging to the most disadvantaged and marginalized groups, without discrimination and therefore to ensure universal coverage, non-contributory schemes are necessary[[2]](#footnote-2).

1. **OHCHR’s field engagement**

Through its Surge Initiative, OHCHR is actively supporting countries in expanding social protection coverage to include the most marginalized, including women, LGBTIQ+, migrants, ethnic and racial minorities to ensure that all people receive the support they need throughout and beyond the COVID-19 crisis.

In **Ukraine**, OHCHR developed detailed recommendations for the Government to remedy insufficient access to social protection, particularly for IDPs and those living in conflict affected areas, and it liaised with the UN Country Team to better integrate social protection in COVID response and recovery.

In **Cambodia**, OHCHR has jointly advocated with the UNCT for a well-designed and human rights-based social protection system, the prioritisation of healthcare budget allocations and a broader civic space.

In **Paraguay and Uruguay**, OHCHR reviewed the social protection measures implemented to confront COVID-19, highlighting gaps and suggesting strategies to increase coverage, adequacy of support and institutional coherence. Our contribution reiterated how critical is that information on programs and resources are published in a manner that is accessible to all, on a timely basis and via means that ensure scrutiny and accountability.

In **Peru**, OHCHR carried out an analysis of social protection measures focusing on Afro-Peruvian, and women in particular, highlighting how they face multiple forms of discrimination that exclude them systematically from the social protection system. In particular, the HRA identified a set of barriers, some rooted in gender and racial stereotypes, to access social protection benefits, health care facilities and decent work opportunities and suggested ways to overcome them.

1. **Good practices in the context of the COVID-19 pandemic**

In the context of the COVID-19 recovery, social protection represents a critical tool for facilitating access to health care, protecting people against poverty and ensuring the satisfaction of basic economic and social rights, including food, water, housing, health and education.

Around the world, countries implemented measures, or strengthen pre-existent measures to extend social protection. Malawi, Peru, the Philippines, Thailand and the United States, have expanded their social assistance programmes by introducing new cash transfers targeting those who are typically excluded, such as informal workers, freelancers and the self-employed, including those working in the gig economy. Peru launched two programmes of one-time transfers in response to the COVID-19 crisis: “Yo me quedo en casa”, for informal workers, and the “Bono independiente”, for self-employed persons who were not registered in existing social protection systems. Thailand, which has various cash transfer programmes but does not use a social registry to determine eligibility, targeted informal sector workers and set up a website to accept applications.

Countries have also been changing eligibility rules for non-contributory social protection programmes to extend their coverage. Brazil has allowed more flexibility regarding minimum income thresholds with regard to accessing the Benefício de Prestação Continuada. In addition to income, it also evaluates a set of vulnerability criteria, such as the number of children and the members’ health status. This is important, as minimum income criteria alone can be misleading and result in exclusion errors. Togo, under its universal income programme, has targeted informal workers, who are asked to register online. Italy and Portugal are regularizing undocumented migrants and making them eligible for social protection. Ireland created the COVID-19 Pandemic Unemployment Payment, which is available to all employees and self-employed persons who have lost their job, including workers who are not from a European Union or European Economic Area country.

At the sub-national level, the State of California in the United States is providing a one-time payment to undocumented adults who are not eligible for other forms of assistance, such as those under the Coronavirus Aid, Relief, and Economic Security Act. From March to June 2020, China doubled its temporary price subsidy cash transfer. Lesotho has increased the amount provided through its child grant programme, which is an unconditional cash transfer given to those households living in vulnerable situations, identified through both means testing and community validation. In Malawi, the Government has committed itself to expanding the coverage of its Social Cash Transfer Programme and increasing the amount paid.

Some countries have mobilized domestic resources by making tax adjustments, moving towards more progressive taxation systems, such as Argentina and Bolivia that have implemented a tax on wealth to create a more adequate fiscal space to respond to the pandemic.

1. **Background documents**

* [UN High Commissioner for Human Rights, Report on economic, social and cultural rights to the Economic and Social Council, June 2021](https://undocs.org/e/2020/63)
* [OHCHR webpage on the right to social security](https://www.ohchr.org/EN/Issues/RightSocialSecurity/Pages/SocialSecurity.aspx)

1. The right to social security is recognized in numerous human rights instruments including the Universal Declaration of Human Rights (art. 22) and the International Covenant on Economic, Social and Cultural Rights (arts. 9 and 10). Article 11 of the Convention on the Elimination of All forms of Discrimination against Women recognizes the right to social security for women, especially in cases of retirement, unemployment, sickness, invalidity, old age or other incapacity. In addition, article 11 recognizes the right to paid leave. Article 26 of the Convention on the Rights of the Child recognizes the right of the child to social security and social insurance. Article 27 of the International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families sets out the right of all migrant workers to social security on an equal footing with nationals, as well as to reimbursement of contributions if they cannot access benefits. Article 28 of the Convention on the Rights of Persons with Disabilities recognizes the right of persons with disabilities to social protection without discrimination on the basis of disability and enumerates steps to be taken by States to safeguard and promote the realization of this right. See CESCR, general comment No 19. [↑](#footnote-ref-1)
2. Committee on Economic, Social and Cultural Rights, general comment No. 19 (2007), para. 22-23. [↑](#footnote-ref-2)