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Human Rights-based Social Investments

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Human rights provide a normative framework for social policy. Social investments are required for a state to realize the rights of its people. For example, the human right to health requires a well-funded system of health care infrastructure with a well-trained workforce of health care professionals. However, the implications of human rights for social development policies have not been examined. This paper attempts to fill in this gray area by exploring a rights-based approach to social investment. Human rights-based approaches to poverty, health, mental health, child welfare, and older adults are analyzed for their implications for social investment policy proposals. This paper provides underpinnings for human rights-based arguments for social investment policies, adds specificity to rights-based proposals, and furthers the connection between human rights and social development.

Keywords: human rights, social investment, social development policy

The tradition of democratic political systems supporting economic growth and progressive increases in people's welfare is at risk. Growing and glaring inequality has exacerbated people's discontent with their standards of living. Corruption, both real and perceived, has shaken people's faith in their political, economic, and social institutions; many of these institutions are facing crises of legitimacy. Nation states and international legal and political order based on liberalism, rule of law, and human rights are under siege.

Events such as the 2008 global recession and the current global refugee crisis have reinforced the fear that people have little control over their lives and no guarantee of a stable economic future. People have lost faith in institutions that have shaped the architecture of social welfare for generations. These

doubts have contributed to a populism that has destabilized politics in the United Kingdom through the Brexit vote from the European Union and in the U.S. through the successful Trump Presidential campaign. In the worst cases, such disenchantment can push people towards violent extremism, whether religious, ethnic, or nationalist.

These and other threats have imperiled the promise of Western democratic institutions managing economic growth and social progress. Social policy arrangements such as the welfare state have been a tradition for more than one hundred years, and have sought to mitigate negative economic cycles and social dislocations. Strong and effective social policies are required to build and maintain a foundation for social welfare, defined as a society's ability to manage social problems, meet human needs, and increase people's opportunities (Midgley, 1997). Innovative policy solutions are required if the tradition of social welfare policy is to survive.

Human rights can provide an innovative and normative framework for social policy. The normative framework of human rights represents international consensus regarding the behavior of nation states and specifically their responsibility to their people's social development. Fulfilling peoples' human rights requires programs, goods, services, and assets, and therefore calls for significant social investment. For example, the human right to health requires a well-funded system of health care infrastructure with a well-trained workforce of health care professionals. However, the implications of human rights approaches for social investment policies have not been examined.

The human rights paradigm has been criticized as being idealistic, unenforceable, and expensive to realize. How can such lofty aspirations be implemented in a practical manner? Who pays for human rights? Does one person's rights as a human obligate someone to pay for them? This paper attempts to address these concerns by examining the concepts that intersect the fields of social development and human rights and then presenting a rights-based approach to social investments. Several key areas of mutual priority between social development and human rights are explored, including poverty, health, mental health, child welfare, and older adults.

In doing so, this paper seeks to draw closer the connection between a human rights perspective and social policy.

This effort provides underpinnings for human rights-based arguments for social policies for asset-building and social investments. This paper furthers the human rights discourse by adding specificity to rights-based proposals, and it advances the social development literature through its application of international human rights standards.

Social Development and Human Rights

Social development shares common ground and parallel priorities with human rights. Midgley (2007) has theorized that when a society has achieved social development, all members of that society will be able to enjoy their full range of human rights. However, in the past social development and human rights have been treated as distinct; human rights typically focus on political issues, war and violence, and with limiting the scope of oppressive governments. Social development has typically focused on the role of government and its role in policy and funding; human rights are rarely included in formal development policy (Midgley, 2014). Despite this, they both favor increasing nation states' commitments to promote people's welfare. Increasingly human rights are being emphasized as relevant to social policy (Gatenio Gabel, 2016). This section draws together relevant concepts and literature related to social investment and human rights and explores areas of overlap and connection.

Social Investments as Social Development

Economic industrialization has driven a process of social transformation that has reproduced and exacerbated inequalities within and between states (Midgley, 2007). Critiques of these negative consequences have led to a reconceptualization of traditional development processes to a broader focus on human development that expands people's opportunities, choices, freedoms, and capabilities (Nussbaum, 2011; Sen, 1999) as well as social development, which aims to harmonize social and economic policies (Midgley, 2014). Social development argues for greater government responsibility and social planning, including social investments. Social investments are interventions that are productivist, meaning they generate some form of

economic activity, return, or benefit (Midgley, 2017). Developmental strategies such as social investments have been applied to diverse fields such as child welfare, aging, mental health, disabilities, poverty, criminal justice, and homelessness (Midgley & Conley, 2010).

Social investments are required to implement social development (Midgley, 2014). Resources that enable people to be productive and to participate in the market are vital to realize their human capabilities and social development, as well as their rights. Midgley has argued that people's development can only be manifested through the investment of such resources.

Human Rights and Social Development

Human rights have been identified as the "ultimate goal of development" (Midgley, 2007, p. 114). Human rights are frequently presented in a multi-generational framework (Ife, 2012). In this conception, the first-generation of human rights include civil and political rights, the second-generation refers to economic and social rights, and the third-generation is comprised of collective or solidarity rights. While the second generation is the most direct call for social services and investments and the third generation is usually associated with social development, in fact, all three generations of human rights require investments. For example, the protections included in the first generation of civil and political rights require investments in a judiciary system, civic education, and law enforcement.

These generations are often framed in contrast with the other generations, as if certain sets of human rights are mutually exclusive. In part, this relates to the Cold War where "first world" Western democracies prioritized civil and political freedoms while "second world" Communist bloc countries prioritized social and economic well-being. Both sides criticized the other for violations of their prioritized generation of rights. This division resulted in the splitting of rights into separate conventions: the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social, and Cultural Rights. Furthermore, free market advocates have argued that first-generation rights are incompatible with second-generation rights, complaining that government planning and spending on social welfare policies restricts individual liberty (Hayek, 1944).

However, the Universal Declaration of Human Rights (United Nations, 1948) did not divide rights into categories (Wronka, 1998). Human rights were originally conceived as indivisible, with no rights more important than any other (Staub-Bernasconi, 2007). Franklin Roosevelt expressed the indivisibility of rights with his famous Four Freedoms speech, which included the freedom from want along with more typical civil and political rights such as the freedom of speech, worship, and from fear (Roosevelt, 1941). Roosevelt's freedom from want linked economic prosperity to peace and health.

Androff (2016) critiques the three-generation model, arguing that human rights are holistic and mutually reinforcing. An individual's political freedom is only meaningful if they can also enjoy an adequate standard of living; political rights can only be exercised if economic and social rights are also being met (Waldron, 1993). Meanwhile, civil and political rights are essential to guarantee individuals' ability to advocate for the resources necessary to fulfill economic and social rights (Crahan, 1982). Similarly, Polanyi (1944) and others have argued that the market economy depends upon the nation state, including government policy and social investments in people's welfare. Some have called for welfare states to become more rights-based (Eichenhofer, 2015). Legislative and legal mandates for social policy benefits correspond to individual rights and represent a transition away from needs-based social welfare towards a rights-based welfare system.

Social Rights, Basic Needs, and Social Planning

Defined as legal entitlements to social goods such as benefits and services (Midgley, 2014), the concept of social rights was popularized by Marshall (1950), who argued that social rights were the next step following civil and political rights in an evolution of a state's responsibilities to its people on the basis of their social citizenship. Although social rights have been codified into some national constitutions, governments typically express social rights through systems and policies of social welfare. However, welfare states have retreated under political and ideological attacks that have diminished claims for social rights. In addition to the Western preference for civil and

political rights, this has led social rights to be considered the “neglected human rights” (Staub-Bernasconi, 2007, p. 138).

Social rights have also been called positive rights insofar as they speak to the right to have something: education, housing, an adequate standard of living, and health care. Positive rights are distinguished from negative rights, which are said to entail the right to be free from something: torture, genocide, enslavement, and detention without trial. Negative rights require that responsible actors (duty-bearers) restrain from interfering with others’ rights, whereas positive rights require duty-bearers to provide goods and services. Therefore, positive rights require public expenditures from state actors. This type of government provision of goods and services necessary for people’s human and social development has been an influential aspect of developmental policy, at least since the basic needs approach of the 1970s.

The basic needs approach was developed by the International Labor Organization to redirect international development efforts towards securing the basic physical requirements for sustaining human life (International Labor Organization, 1977; Midgley, 2007). Basic needs were defined as the minimum essential material and non-material goods for an adequate standard of living (Midgley, 2014). These basic needs were considered prerequisites for political and economic participation and for enjoying civil and political rights.

The basic needs approach was mainly implemented through the direct provision of goods and services in the areas of nutrition, health, housing, water, and sanitation. Over time a redistribution of economic resources throughout society was seen as required for meeting everyone’s basic needs, otherwise the impact of direct provision would be limited (Crahan, 1982). It was recognized that such a redistribution depended on the political power structure in a state, and the general population’s political participation. Evidence from the 1970s revealed that a state’s commitment to meeting basic needs and a more equal distribution of incomes were critical to achieving basic needs (Dore & Weeks, 1982). Some have argued that the needs approach is limited due the culturally relative way that needs are defined in such a way that promotes confusion with wants or wishes (Staub-Bernasconi, 2007).

Social rights can also be articulated as targets of social planning (Midgley, 2014). These targets can be part of national development plans, as used in the Global South, or as international plans such as the Millennium Development Goals and the Sustainable Development Goals. There are several benefits of coordinating human rights with social planning. Using social planning to set specific targets that are based on human rights-indicators harnesses the power of state governments, which for all the potential political limitations and corruption, can still hold unique value for mobilizing actors, allocating resources into specific budgets, negotiating stakeholders, and applying technical skills. Incorporating targets tied to human rights can also increase people's participation. Social investment, when linked to rights through social policy, can carry legal obligations that make the state responsible for respecting, protecting, and promoting human rights. They can empower citizens and offer an important avenue for advocacy (Midgley, 2007). Thus, using the framework and language of rights can strengthen social investments.

Welfare Rights Movement

In the U.S., the welfare rights movement explicitly framed social welfare benefits from a human rights perspective (Watson, 1977). The movement used community organization to advocate for the economic and social rights of poor people (Dean, 2008). The National Welfare Rights Organization organized to resist discrimination restrictions of welfare programs and grew from the larger civil rights movement (Bailis, 1974). Prior to his assassination, Martin Luther King Jr. launched the Poor People's Campaign that culminated in a protest in Washington D.C. that lasted for six weeks in 1968. The Poor People's Campaign was influenced by the National Welfare Rights Organization's focus on economic justice and its linkage of economic rights to civil and political rights, such as democratic participation. These organizations and others worked to pressure the federal government to make increased social investments in welfare benefits to the poor (Piven & Cloward, 1993). Since the 1970s, the movement has not been as visible, although smaller organizations still advocate for welfare rights at the local level, such as the

Kensington Welfare Rights Union and the Poor People's Economic Human Rights Campaign (Androff, 2016).

While the welfare rights movement called for progressive social policies, social assistance in the form of cash benefits is not necessary productivist and does not include investments in human capital. However, social assistance is considered a social right. Some conditional cash transfers allow for benefits to be used for entrepreneurship (Midgley, 2014).

Human Rights-based Approaches

Another way that human rights can be applied to social investments is through the principles of rights-based practice (Androff, 2016). These five principles include human dignity, non-discrimination, participation, transparency, and accountability. They represent a rights-based approach that cuts across subject areas, drawn from the human rights international declarations, covenants, and conventions, in addition to a sizable body of clarifications and recommendations from human rights organizations. Rights-based approaches seek to translate human rights from legal texts into practice. Social investments that represent a rights-based approach should reflect these principles.

Respecting *human dignity* means social investments that are not stigmatizing, such as through universal eligibility. This also means recognizing policy beneficiaries of social investments as rights-holders and not as needy objects of charity. In a human rights framework, all people are considered deserving. *Nondiscrimination* means preventing discrimination as well as attending to historically marginalized populations. The principle of *participation* recognizes the need to change the power dynamics within societies that contribute to inequality, oppression, and poverty. Increased participation, coupled with capacity building and civic education, can yield advocacy and popular support for social investment policies. *Transparency* highlights the need for research and evaluation of social investments, as well as anti-corruption that has plagued development efforts in the past. Monitoring and evaluation of human rights relies upon human rights indicators, which are similar to social indicators or social statistics, that are often used to gauge and rank nations' social welfare conditions. The principle of *accountability* entails holding policymakers responsible for their obligations

to human rights and social investments. This usually entails political and legal advocacy but also may involve public interest litigation as well as making use of the monitoring agencies at the United Nations.

Rights-based approaches can add specificity and definition to the goals of social investments (Midgley, 2007). Another way that rights-based approaches can contribute to social investment strategies is through securing necessary preconditions for social development. Just as plants require rich soil with regular light and watering to flourish, social investments benefit from societal conditions that promote economic growth such as peace, political freedom, and cohesion. Rights-based approaches can also overcome some of the limitations of the basic needs approach (Midgley, 2007). As noted above, proponents of basic needs came to realize that some redistribution of resources is required be effective. Rights-based approaches can more effectively deal with redistribution, not just of resources, but also of power, through the principles of participation and accountability.

Progressive Realization of Social Rights

Nation states are understood to be the primary duty-bearers that are responsible for respecting, protecting and fulfilling their people's human rights and preventing violations of these rights. Although theoretically everyone is entitled to enjoy their rights and to protect others' rights, governments have formal and functional responsibilities often expressed through compliance with international law. However, not all states possess the resources to fully implement economic, social, and cultural rights. These states' obligations towards realizing human rights are circumscribed. This is known as progressive realization, and human rights declarations, covenants, and conventions contain clauses note this expectation. Progressive realization means that states are required to work over time toward full implementation of rights to "the maximum of their availability" (UN, 2008b, p. 13). States' progress towards human rights is understood to be dependent upon their resource availability.

Progressive realization cannot be used as a justification for states' non-action on rights until they have sufficient resources; rather they are immediately obligated to take steps towards progressive realization even with scarce resources. The steps that

states are obligated to take immediately generally include non-discrimination, protection from economic and social exploitation, protection of the rights of trade unions, and freedom also for scientific research. Beyond these immediate obligations, states are obligated to take appropriate measures that will begin the process of progressive realization, such as assessment, monitoring, and evaluation of current systems affecting economic and social rights, social planning, including targets for strategies to progressively realize rights, and establishment of complainant and grievance procedures for economic and social rights.

In addition to provision, states may also promote social rights through facilitation and taking an enabling role. Indeed, although social rights are frequently dismissed as being too expensive, civil and political rights require substantial investment, which may be even more expensive (Staub-Bernasconi, 2007). Certainly, some economic and social rights do require resources; however, they also require a set of fairly enforced rules, an even playing field, the prevention of discrimination, and the protection from exploitation. Access to the market place in many ways is just as important as economic benefits and does not necessarily require a major investment of resources to achieve.

Human Rights-based Social Investments

Duty-bearers, including nation-states, are obligated to protect, promote, and prevent violations of peoples' human rights. This section details how social investments in the areas of poverty, health and mental health, children, and older adults can advance human rights.

Rights-based Approaches to Social Investments to Combat Poverty

Everyone has a human right to be free from poverty, and rights-based approaches understand poverty to be a violation of human rights (Androff, 2016). A rights-based approach to poverty alleviation means social investments in policies and programs that enable people to achieve their economic development. The major social investment policies that promote the human right to be free from poverty are social insurance and social assistance, including asset-based programs.

Social security is identified as a human right in the Universal Declaration of Human Rights, and includes both social insurance policies where beneficiaries make financial contributions, and social assistance policies where benefits are non-contributory, funded by taxes and therefore more geared toward redistribution (UNRISD, 2016). Social protection can reduce poverty, inequality, and social exclusion through this redistribution of benefits and protect people from economic risk due to lack of income due to disability, illness, maternity, unemployment, or old age (UN, 2008c). A rights-based approach to social protection can promote the view that such policies are a social right and legal entitlement rather than a charity or benefit for some undeserving target population (ILO, 2014).

Rights-based policies that represent social investments help support an adequate standard of living. Rights-based approaches to poverty take a multidimensional perspective on poverty, and therefore support social investments in areas such as food and nutrition, housing, health and other social services. A human rights approach also calls for social investments in the area of work, specifically in living wages and sustainable livelihood, and entrepreneurship. This also requires social investments in safe working conditions and protection from exploitation. To support the right to work, social investments should be made in technical and vocational training.

A major area of overlap between human rights and social investment is on the right to development (Sengupta, 2001). Individuals have the right to participate in, contribute to, and enjoy the fair distribution of benefits of the process of development (UN, 1986). The right to development is less accepted by nation states, insofar as it has not yet been codified into a Convention. Nonetheless, the right to development carries with it responsibilities for social investment in a number of areas. The right to development entails equal opportunity for basic resources, education, health care, food, housing, employment, and fair distribution of income. This right also has implications for global systems, such as international fair trade policies, debt-relief, and overcoming disparities in access to technology.

Social investments that prevent people from becoming poor and those that help people to overcome poverty affirm people's dignity. Universal programs or policies that have universal features promote non-discrimination. Social investment programs

increase peoples' human capital and therefore their social inclusion and market participation.

Rights-based Investments to Health and Mental Health

The right to health is another broadly established human right with significant implications for social investments. Conceptually the right to health entails the recognition that everyone is entitled to attain their highest attainable degree of health, which is contingent on individual factors (Androff, 2016). The right to health most fundamentally requires essential primary health care (UN, 2000).

However, the right to health care treatments and services is contingent on multiple factors: the availability, accessibility, affordability, and acceptability of care (Wyszewianski & McLaughlin, 2002). The availability of health care refers to the standard of health care that a provider can deliver and resources that are required to deliver that care, such as personnel, facilities, programs, and technology. This requires policies and programs to train and maintain a well-educated health and mental health workforce to work throughout the health care system. The right to available health care should include but not be limited to medication, psychotherapy, ambulatory services, hospitalization for acute care, residential facilities, rehabilitation, vocational training, independent living supports, supportive housing and employment, income support, inclusive and appropriate education, and respite care for caregivers.

The right to accessible health care requires that health care should be community-based and does not exclude or discriminate against any population, especially rural populations and people living in marginalized and socially excluded communities. Discrimination on any grounds, including age, sex, race, ethnicity, religion, sexual orientation, gender identity, national origin, immigration status, physical ability, and financial ability (UN, 2006). This also relates to types of care for which institutionalization was the main mode of delivery. Institutionalization has been recognized to violate people's human rights; therefore, community-based care, community integration, and care in the least restrictive environment are rights-based approaches to health and mental health care (Hunt, 2005; WHO, 2013; Yamin & Rosenthal, 2005).

The right to affordable care reflects a mixture of the cost of care and the patient's ability to pay. The right to affordable health care is tied to the right to health insurance, which is specified in the International Covenant on Economic, Social, and Cultural Rights (UN, 1966). The right to acceptable health care relates to cultural competence and the degree to which patients will find their health care to be acceptable relative to their culture, gender, age, racial and ethnic identity, sexual orientation and gender identity, and other factors. Also, the right to health care depends upon that care being of good quality and being medically appropriate (UN, 2000).

Beyond those guidelines for health care in general, the right to health also includes specific types of health care such as reproductive health care and maternity care. For example, The Convention on the Rights of the Child clarifies that essential medical care includes pre- and post-natal maternal care (UN, 1989). The Convention on the Elimination of all forms of Discrimination Against Women specifies that the human right to reproductive health care includes access to contraceptives, family planning services, emergency obstetrics, appropriate services for pregnancy, birth, and post-natal visits, including nutrition and lactation (UN, 1966). This also includes the right to comprehensive mental health and substance abuse services (UN, 2010). The right to health also includes orthopedic and rehabilitation care for people with disabilities; these services can help to achieve their independence, social and community integration, and prevent further disability.

In addition to primary and specialty health care, the right to health includes the right to preventative health interventions. Preventative health encompasses vaccinations and immunizations that prevent the spread of disease. Regular health screening, early detection and diagnosis, and early intervention can prevent many health conditions. Prevention of mental disability requires social investments that support behavioral interventions, sustainable lifestyles, wellness practices, holistic and integrative care (UN, 2010).

Primary prevention, such as health education and awareness-raising campaigns, is also a health-related human right. The right to prevention also includes the prevention of harm from injury and accident. This aspect of the right to health requires social investments that protect populations from

exposure to hazards such as radiation, chemicals, and which regulate and monitor working conditions in industrial work sites. Primary prevention also should address the multidimensional aspects of ill health such as poverty, employment, family cohesion, discrimination, and trauma. All forms of violence should be prevented, from intimate partner violence and bullying to civil conflict and terrorism.

The right to health involves more than just health care, but also supportive services and education. The International Covenant on Economic, Social, and Cultural Rights also specifies the rights to health education, information, and supportive social services (UN, 2000). The Convention on the Rights of People with Disabilities also holds access to social services as a key right to health (UN, 2006). Health-related education should cover important topics such as nutrition, sanitation, children's health, breastfeeding, first-aid and injury prevention. Social investment policies should support early childhood education, sex and reproductive education, healthy and consensual relationships, and evidence-based stress reduction and stress management programs. In addition to education on specific health-related topics, the right to health entails access to the benefits of scientific and medical discovery, research, progress, and technology.

Health education also means awareness raising efforts to combat stigma. People with health disorders and disabilities suffer from social exclusion, discrimination, and stigma, which compromise their health, well-being, and their access to health care. Stigma, for example of people with HIV, mental disability, or substance abuse disorders, negatively affects their right to health and other human rights such as the right to housing or work. The Convention on the Rights of People with Disabilities obliges states to educate against negative stereotypes and prejudices (UN, 2006).

The right to health also recognizes that everyone's health also depends upon several underlying conditions. These include clean and potable water, minimum essential and nutritious food, sanitation, safe housing and shelter, safe working conditions, and the absence of violence (UN, 2000; WHO, 2013). These factors, the underlying conditions of health, are similar to what have been called the social determinants of health, in that they point to environmental factors that influence health,

as well as social factors related to disparities in ill health and in unequal access to health care treatment and resources (WHO, 2008). This perspective also points to fundamental patterns of inequality and oppression that affect health.

In order to achieve all these aspects of the right to health, nation states are required to implement national health plans, budgets, policies, and programs that positively contribute to their people's enjoyment of the right to health (Androff, 2016). States are required to progressively realize the right to health according to their available resources and to take immediate steps to reduce and prevent discrimination in health care, including ending health disparities. Rights-based principles of human dignity and nondiscrimination require universal health care policies in order for people to enjoy their right to health. To promote the right to health, significant social investment is required in a robust health infrastructure, including in community-based and rural settings, a highly trained and educated workforce, and research and discovery in health fields and technologies. Social investments in specific health services should be complemented with prevention programs and health education. Since fulfilling the right to health is linked to people's fulfillment of their basic needs, social investments in water, food, shelter, and a sustainable environment are necessary. This includes work place safety, regulation against pollution and environmental degradation, and extends to how the built environment and environmental conservation can promote healthy lifestyles.

Non-governmental organizations, or NGOs such as BasicNeeds, demonstrate how to utilize a developmental and social investment strategy to promote the right to health (Androff, 2016). BasicNeeds employs people with mental disability in a sustainable livelihoods program where they have the opportunity to learn budgeting and other skills that facilitate their financial independence and economic participation. For example, in Sri Lanka, BasicNeeds employs formerly institutionalized people who struggle to integrate back into their communities on horticultural farms doing agricultural work. Similarly, BasicNeeds Kenya works with rural impoverished people with mental disability to connect them to community mental health services and social investment strategies that yield a sustainable livelihood such as making clothes, jewelry, and raising poultry or dairy animals.

*Rights-based Approaches to Social Investment
for Children and Older Adults*

There are two groups of people whose human rights have been highlighted as requiring special consideration and protections due to their age: children and older adults. The rights of children have been laid out most extensively in the Convention on the Rights of the Child, which has implications for social investment (UN, 1989). Perhaps the biggest social investment that can be made to promote the rights of children is education. All children have the right to free primary education, and the Convention on the Rights of the Child maintains that all children should have access to secondary and higher education. Early childhood education is also important; all children have the human right to play.

Children's health care is equally important in promoting their human rights. The rights of the child include childcare, child support, and the best possible health and health care services. Family-based programs promote children's human right to a family. Social investment in child protection policies and programs is another area that is critical to protecting the rights of children. Child protection programs protect children from harm and prevent human rights abuses, including physical and sexual abuse and neglect. Social investments into birth registration and identity documentation significantly advance the rights of children to an identity and protections against exploitation, such as child labor or trafficking.

Another way that social investments can further children's rights is through the incorporation of rights-based approaches with children into economic and development policies. Children's and family impact analysis of social and economic policies and children's rights analysis of budgets should be conducted. Children also have the right to an adequate standard of living, which requires sufficient financial resources, among other economic rights. Asset-based programs, such as child development accounts, can be employed on behalf of children (Clancy, Beverly, Sherraden, & Huang, 2016).

The most important social investment for older adults is social insurance policies, such as social security. Social insurance policies, old age benefits, social pensions, and old age insurance

programs that guarantee basic income for older adults can ensure their right to adequate standards of living (UN, 2008a). Social investment in social protection policies can protect older adults' rights in cases of unemployment and sickness. These policies protect the human rights of older adults and promote their right to be free from poverty.

As older adults experience diminished health due to aging, their right to health becomes more important. Social investments in universal health care, facilities, and personnel can help to ensure their right to health. Social investments in the underlying determinants of health, such as food and nutrition, are also required. The International Covenant on Economic, Social, and Cultural Rights obligates states to provide for older adults' rights to housing, specialized care, and access to the community, such as recreation-oriented programs that foster older adults' self-reliance and community responsibility.

Older adults have the right to enabling and supportive environments and the right to remain at home (UN, 1966, 2002). Social investments should facilitate aging in place through independent living programs and supportive programs (UN, 2011). This may require investments that enable residences to be adapted or improved to allow older adults to remain at home. Older adults also have the right to caregiver support; this relates to both their right to health and their ability to age in place and live independently (UN, 2010).

Work is an important avenue for older adults to achieve their rights. Social investments that protect older adult workers against ageism during hiring, evaluations, in their working conditions, and upon retirement are required by the International Covenant on Economic, Social, and Cultural Rights (UN, 1966). Social investments should encourage flexible work policies for older adults and discourage mandatory retirement ages (Guseilo, Curl, & Hokenstad, 2004). This requires investments in programs to educate older workers about vocational training, professional development, continuing and higher education, and retirement options (Giunta, 2010). Educational programs for older adults can be conducted in community-based settings that permit children and young adults to learn from their experiences. Similarly, social investments can support cultural centers that support older adults' right to community

through community integration, community building, and which promote older adults' value and worth to society.

Towards Social Rights

Human rights and social development are two necessary and symbiotic components to achieving a just society. Social rights are at the intersection of human rights and social development, and can be implemented through social planning and rights-based approaches. Through progressive realization, states can take immediate steps that begin a process of investing their maximum available resources. Basing social investment policies on the principles of human dignity, nondiscrimination, participation, transparency, and accountability will help to ensure that human rights are respected.

This paper has reviewed several of the social investments necessary to fulfill human rights that can be made through social policy. Social insurance and social protection policies are powerful investments that the state can make to protect the right to be free from poverty. Redistributive policies can also promote economic and social rights. Investments in human capital can enable people's economic participation. Respecting the right to development through fair global systems will facilitate social investments.

The rights to health and mental health require many social investments, including essential primary health care that is available, accessible, affordable, and acceptable; integrated mental and physical health care that is community-based; reproductive and maternity care; preventative care and health education; and investments in the underlying conditions that influence health. The rights of children depend on investments in education, family-based services, and protection from abuse, neglect, and exploitation. The rights of older adults similarly depend upon social insurance and investments that support enabling environments.

Social policy that invests resources to realize these social rights can reduce the structural economic, social, and political factors that contribute to poverty, ill health, and health disparities. Such social investments can be a way to restore the legitimacy of political institutions and indeed nation states. The current global threats and risks to political and economic stabil-

ity are “rooted in the denial of basic social and economic rights” (Crahan, 1982, p. 4). Investing in these rights not only improves people’s overall well-being, but also contributes to peace and stability. Such human rights-based social investments might push back against the forces seeking to diminish the welfare state and erode social rights.

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