**Committee on the Elimination of Discrimination against Women Fifty-seventh session** 10 - 28 February 2014

## Statement of the Committee on the Elimination of Discrimination against Women on sexual and reproductive health and rights: Beyond 2014 ICPD review

The Committee on the Elimination of Discrimination against Women (the Committee) welcomes the ongoing review of the ICPD Programme of Action also known as ICPD Beyond 2014. The ICPD Programme of Action, adopted by consensus by 179 States in Cairo in 1994, was a ground-breaking achievement and heralded a new era where the human rights of every individual were paramount. Member States of the United Nations (UN) recognised reproductive rights as based on internationally accepted human rights standards, and as codified in the human rights treaties, including the Convention on the Elimination of All Forms of Discrimination against Women (the Convention), which our Committee oversees. The Beijing Declaration and Platform for Action reiterated these commitments. In order to further the implementation of the Convention, the Committee submits this statement as its contribution to the ICPD Beyond 2014 review process. This is based on its expertise under the Convention and Optional Protocol stemming from the reporting, individual complaints and inquiry procedures as well as its General Recommendation No. 24 (1999) on article 12 (women and health), which all show that inequality and discrimination are major factors preventing women and girls from enjoying "the highest attainable standard of physical and mental health"<sup>1</sup>.

The Committee acknowledges that there is much progress to celebrate. However, every State can and should do more to ensure the full respect, protection and fulfilment of sexual and reproductive rights, in line with human rights obligations. The ICPD Beyond 2014 review process is, therefore, a critical moment to recommit to human rights standards on the sexual and reproductive health rights of women and men, girls and boys, and ensure that the prohibition of discrimination based on sex and gender and the protection and promotion of human rights are at the centre of any efforts towards sustainable development and social justice. The ICPD Beyond 2014 will also define one of the most critical parts for women and girls, of the Post-2015 Development Agenda. As such, it should foresee strong accountability mechanisms and also ensure that there is system-wide collaboration between the various actors at the UN, regional and national levels as well as with non-governmental organisations.

Many Member States of the UN have devised innovative strategies and programmes to advance sexual and reproductive health and rights. However, across all regions, there are still serious deficiencies in the protection of these fundamental rights and freedoms. The right to health, which includes the right to bodily autonomy, and encompasses sexual and reproductive freedom, is often violated. Violence against women and girls (if not outright torture, or cruel and inhuman and degrading treatment) and the multiple and intersectional forms of discrimination based on sex and gender that they experience, impact heavily on their sexual and reproductive health and rights. The Committee continuously addresses discriminatory gender stereotypes and harmful practices that contribute to, and perpetuate, these violations. The Committee, therefore, consistently advises States parties to the Convention to take all practical and legislative measures to prevent, prohibit, punish and redress these acts, whether committed by State or non-State actors.

Upholding the right to health for women and girls requires health services, including sexual and reproductive information, counselling and services that are available, accessible, affordable and of good quality. The Committee has observed that failure of a State party to provide services and the

<sup>&</sup>lt;sup>1</sup> Article 12 (1) of the International Covenant on Economic, Social and Cultural Rights.

criminalisation of some services that only women require is a violation of women's reproductive rights and constitutes discrimination against them.

According to the Committee, protecting human rights related to sexual and reproductive health requires that "all health services [...] be consistent with the human rights of women, including the rights to autonomy, privacy, confidentiality, informed consent and choice." Thus, the empowerment of women and their capacity to decide are at the heart of the protection of their rights in this field. The right to autonomy requires measures to guarantee the right to decide freely and responsibly on the number and spacing of their children, and the right to access sexual and reproductive health information and services with the consent of the individual alone. The right to enter freely into marriage is also related to choice and autonomy.

Measures are also required to ban and eliminate the practice of forced and child marriages, which often lead to early pregnancies that are risky for the life and/or health of girls. The provision of, inter alia, safe abortion and post abortion care; maternity care; timely diagnosis and treatment of sexually transmitted diseases (including HIV), breast and reproductive cancers, and infertility; as well as access to accurate and comprehensive information about sexuality and reproduction, are all part of the right to sexual and reproductive health. Furthermore, access to comprehensive services and a wide range of contraceptive methods, including emergency contraception, is a fundamental aspect of ensuring sexual and reproductive rights. States parties have obligations to enable women to prevent unwanted pregnancies, including through family planning and education on sexual and reproductive health. The Committee has also called upon State parties to address the power imbalances between men and women, which often impede women's autonomy, particularly in the exercise of choices on safe and responsible sex practices.

Unsafe abortion is a leading cause of maternal mortality and morbidity. As such, States parties should legalize abortion at least in cases of rape, incest, threats to the life and/or health of the mother, or severe foetal impairment, as well as provide women with access to quality post-abortion care, especially in cases of complications resulting from unsafe abortions. States parties should also remove punitive measures for women who undergo abortion. States parties should further organize health services so that the exercise of conscientious objection does not impede their effective access to reproductive health care services, including abortion and post-abortion care.

Furthermore, special attention is needed to ensure that adolescents have access to accurate information about their sexual and reproductive health and rights, including responsible sexual behaviour, prevention of early pregnancies and sexually transmitted diseases. Age-appropriate education on sexual and reproductive health should, therefore, be integrated in school curricula. States parties should further address negative stereotypes and discriminatory attitudes with regard to the sexuality of adolescents, with a view to ensuring that these do not interfere with access to information and education on sexual and reproductive health and rights.

Strengthening health systems, improving their operation, monitoring and evaluating outcomes from a gender and human rights perspective contribute to the improvement of the sexual and reproductive health of women and, in particular, the reduction of maternal mortality and morbidity, and the reinforcement of the prevention and treatment of HIV-AIDS, and other sexually transmitted diseases, which are considered, at least in part, as products of discrimination against women. It, therefore, behoves States parties to ensure the allocation of adequate budgetary resources to reproductive health and rights programmes.

The ICPD Beyond 2014 review process affords the international community and all stakeholders an opportunity to take stock of the progress that has been made in the area of sexual and reproductive health and rights. Most importantly, it presents a unique opportunity for up-scaling measures in this area with a view to ensuring that the right to "the highest attainable standard of physical and mental health" does not remain a distant dream for women and girls. The Committee,

therefore, calls upon the international community to take this opportunity to renew its commitment towards sexual and reproductive health and rights.

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