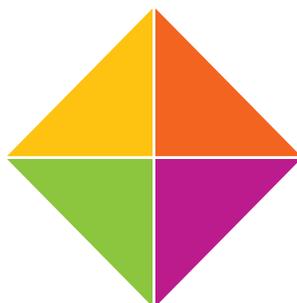


Post-2015 Negotiation Briefs #5: Sexual and Reproductive Health and Rights



Introduction

"(...) sexual and reproductive rights embrace certain human rights that are already recognized in national laws, international human rights documents and other consensus documents and rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, the right to attain the highest standard of sexual and reproductive health, the right to make decisions concerning reproduction free of discrimination, coercion and violence, and the right to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion, discrimination and violence;" as already recognized at the Asian and Pacific Ministerial Declaration on Population and Development from 2013.

Sexual and reproductive health is an essential component of the universal right to the highest attainable standard of physical and mental health, enshrined in the Universal Declaration of Human Rights and in other international human rights conventions, declarations and consensus agreements.¹

SRHR must be respected, protected, promoted, and fulfilled in order to have a high quality of life and to ensure that people are able to live their lives without fear, discrimination, and coercion. While SRHR are important throughout each individual's lifecycle, there is a particular need for access to SRHR, as well as

specific barriers that exist, during adolescents and youth. SRHR are intrinsically linked to sustainable development, as it unlocks access to other fundamental rights such as the right to education, to employment, to a life free and equal among other crucial rights to achieve a sustainable development.

The full range of SRHR were neglected in the original version of the MDGs. Only in 2007, after strong lobbying from civil society the target 5b (Achieve by 2015, universal access to reproductive health) was added to MDG 5 (Improve Maternal Health). However, the implementation of MDG 5 has been one with the least progress. Because MDG 5b did not encompass the comprehensive scope of SRHR, only focusing on reducing maternal mortality, this meant that young peoples' needs and rights were left behind, even though pregnancy and child-birth related complications were the leading cause of death among young women 15-19.²

Sexual and Reproductive Health and Rights in UN and Regional Agreements

The Programme of Action of the International Conference on Population and Development (PoA of ICPD) in 1994 was the first fora to recognize sexual and reproductive health as an important pillar of human rights within international development. As is stated in paragraph 7.2:

“(...) reproductive health therefore implies that people are able to have a satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this last condition are the right of men and women to be informed and to have access to safe, effective, affordable and acceptable methods of family planning of their choice, as well as other methods of their choice for regulation of fertility which are not against the law, and the right of access to appropriate health-care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant”.

The Beijing Platform for Action in 1995 also recognizes the importance of sexual and reproductive health and reproductive rights as part of human rights. Paragraph 223 states:

“(...) the Fourth World Conference on Women reaffirms that reproductive rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number,

spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health. It also includes their right to make decisions concerning reproduction free of discrimination, coercion and violence, as expressed in human rights documents”.

Even though those agreements specifically recognize sexual and reproductive health and reproductive rights, more recent language also recognizes that access to sexual rights is crucial for the well-being and full exercise of human rights. One example is the Montevideo Consensus, which is the Latin-American and The Caribbean declaration of the Operational Review of the ICPD PoA, which clearly determines sexual rights and its importance to sexual and reproductive health in its paragraph 33:

“Promote policies that enable persons to exercise their sexual rights, which embrace the right to a safe and full sex life, as well as the right to take free, informed, voluntary and responsible decisions on their sexuality, sexual orientation and gender identity, without coercion, discrimination or violence, and that guarantee the right to information and the means necessary for their sexual health and reproductive health”.

Although sexual and reproductive health and rights have been addressed in many UN agreements it has been one of the most neglected topics in its implementation. Its importance at the implementation level has been put behind in trades for investments on economic growth leaving behind the rights of people of all ages, particularly young people.

Sexual and Reproductive Health and Rights in Post- 2015 Negotiations

SRHR issues in the process of the post-2015 has started in a place of challenge with the background of the MDGs creational process and the Rio+20 declaration *The World We Want* that did not capture its important role in advancing human rights in the development framework. SRHR was mentioned at various stages of the Open Working Group negotiation process, particularly for young people as the outcomes of the Open Working Group 6 and 8 shows. However, its reflection in the final draft SDGs was relatively weak despite the strong efforts of diverse organizations working in the Major Group of Children and Youth and the Women’s Major group, being addressed only in the point

3.7 under the goal to Ensure healthy lives and promote well-being for all at all ages:

“By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes”.

And in the point 5.6 under the goal to Achieve gender equality and empower all women and girls:

“Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences”.

This way the SDGs leave behind an important part of human rights - the sexual rights - which include the rights of LGBTQI people, and women’s human rights, which can guarantee their ability to live free from coercion, fear, discrimination in a healthy, safe and informed manner particularly in regards to their sexual lives.

Youth positions on Sexual and reproductive health and rights

The operational review process of the ICPD Programme of Action brought together over 3000 young people in site and online from all over the world that elaborate the Bali Youth Declaration. This consultation yielded one of the strongest and most comprehensive calls for sexual and reproductive rights, not only recognizing the importance of sexual and reproductive rights of young people but calling governments to change laws to protect YPLWH and LGBTQI youth, to provide comprehensive health services and to recognize the rights of all families, including the LGBTQI ones. It also recognizes the women’s human rights, which include their right to bodily autonomy, access to safe and legal abortion and women’s sexual rights.

The ACT!2015, which is an initiative of The PACT, identifies SRHR as the most common and key topic in the HIV community dialogues:

1. Ensure universal access sexual and reproductive health rights and services, including massive scale up of HIV testing, counseling and condoms and access to treatment”.

This shows the importance of addressing SRHR in the response to HIV globally, particularly related to young people as a key affected population and in response to the fact that 40% of all new infections occur among young people 15-24.³ *Investing in Young People and Adolescents is Central to Sustainable Development* report from IFMSA in partnership with PMNCH, Youth Coalition for Sexual and Reproductive Rights, EVA and YPEER, which is a compilation of 13 youth statements and consultations, states once more the importance of addressing SRHR in the post-2015 outcome. Among their action points is:

SRHR: fulfillment of sexual and reproductive health and rights: access to contraception, safe and legal abortion services.

All these consultations are in great discrepancy from the proposed SDGs, which leave behind young people's rights, particularly those from marginalized groups, increasing the violations of their human rights around the world.

Resources

- × *Including Youth in the Post-2015 Agenda: Youth Sexual and Reproductive Rights and Health.* www.youthcoalition.org/publication/including-youth-post-2015-development-agenda
- × *Post-2015 Made it Simple: Shaping the Future of Sexual and Reproductive Health and Rights.* www.ippf.org/sites/default/files/pp_ippf_post2015madesimple_web.pdf
- × *Briefing Cards: Sexual and Reproductive Health and Rights and the Post-2015 Development Agenda.* 31u5ac2nrwj6247cya153vw93o.wpengine.netdna-cdn.com/wp-content/uploads/2014/09/UAP-SRHR-post-2015-briefing-cards.pdf
- × *WHO Factsheet on adolescent pregnancy N° 364.* www.who.int/mediacentre/factsheets/fs364/en/

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Footnotes

1. Amnesty International USA. *Amnesty International Sexual and Reproductive Health and Rights*. Amnesty International USA. www.amnestyusa.org/pdfs/SexualReproductiveRightsFactSheet.pdf
2. WHO. *Adolescent pregnancy*. 2014.
3. UNAIDS. *Global Report, UNAIDS Report on the Global AIDS Epidemic I 2010*. UNAIDS 2010.

