

## ISSUE PAPER 04

# SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR)

Women living with HIV have the right to healthy, satisfying sex lives and rights and need laws and policies to protect, respect and fulfill these rights, as well appropriate services to ensure their sexual and reproductive health.<sup>1</sup> Both human rights and public health interests require that health care and legal systems support the sexual and reproductive health and rights of women living with HIV. From a public health perspective, decision-makers and service providers must recognize that women living with HIV have rights to healthy and fulfilling sexual and reproductive lives, and are entitled to make autonomous decisions about their sexual and reproductive health, including entering into relationships, having sex, and deciding whether or not to have children.<sup>2</sup>

Ensuring that women living with HIV can realize our fundamental rights safely is key to maintaining our own health, and that of our partners and families. The International Community of Women Living with HIV (ICW) has been at the forefront of documenting violations of the sexual and reproductive health and rights of women living with HIV around the world and undertaking advocacy to support these rights for women living with HIV at the global, regional and national levels.

## What are sexual and reproductive health rights?

Sexual and reproductive health and rights are our fundamental human rights specifically applied to sexuality and reproduction. The broader concept of SRHR combines four separate but interconnected and interdependent focal areas: Sexual Health, Sexual Rights, Reproductive Health, and Reproductive Rights. The terminology 'sexual and reproductive health and rights' (SRHR) came into use after the Cairo International Conference on Population and Development (ICPD) and formed a strong focal point of the 1995 Beijing Declaration and Platform of Action.

**Sexual health:** Sexual health is a state of physical, mental and social well-being in relation to sexuality and not just the absence of disease. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.<sup>3</sup>

**Sexual rights:** All women have the right to decide freely and responsibly on all aspects of their sexuality, including protecting and promoting their sexual health, be free from discrimination, coercion or violence in their sexual lives and in all sexual decisions, and expect and demand equality, full consent, mutual respect, and shared responsibility in sexual relationships. Sexual rights include rights to sexual expression and pleasure.<sup>4</sup>

**Reproductive health:** The complete physical, mental and social well-being in all matters related to the reproductive system, including a satisfying and safe sex life, capacity to have children, and freedom to decide if, when, and how often to do so. Available reproductive care should include at a minimum, family planning services, counselling and information, antenatal, postnatal, and delivery care, health care for infants, treatment for reproductive tract infections and sexually transmitted diseases, safe abortion services and management

of abortion-related complications, prevention and appropriate treatment for infertility, information, education and counselling on human sexuality, reproductive health, and responsible parenting, and discouragement of harmful practices.<sup>5</sup>

**Reproductive rights:** the rights of couples and individuals to decide freely and responsibly the number and spacing of their children, to have the information, education, and means to do so, to attain the highest standards of sexual and reproductive health, and to make decisions about reproduction free of discrimination, coercion, and violence.<sup>6</sup>

## SRHR and Women Living with HIV: Our Issues

### Access to Sexual, Reproductive Health Care

Women living with HIV experience a range of obstacles to achieving their highest attainable standard of health, including violations of their sexual and reproductive health and rights, such as refusal by service providers to provide accurate and comprehensive sexual and reproductive health information, tools, and services.<sup>7</sup> Within healthcare settings, women living with HIV often lack access to treatment for sexually transmitted and reproductive health infections, regular sexual health screening, including pap smears, prevention tools such as female condoms, and services to support safe conception.<sup>8</sup>

### Human Rights Violations: Force, Coercion, Discrimination and Abuse

Women living with HIV also experience human rights abuses, specifically discrimination, coerced and forced sterilization, forced and coerced abortion and contraception, and conditional access to services. Women living with HIV often experience detrimental stigma & discrimination and judgmental treatment from health care providers, including physical and emotional abuse, misinformation and violations of confidentiality. This mistreatment often deters women from seeking and receiving the adequate treatment, care, and support that they need for themselves and their children.

### Right to Decide Whether and When to Have Children

Family planning programs for women living with HIV should emphasize the rights of women to make informed choices about their reproductive lives and the right to reproduce. For women living with HIV, this is often equated with discouraging pregnancy rather than supporting their right to conceive.<sup>9</sup> The fertility desires of women living with HIV to have children are often absent in policy and guideline documents.<sup>10</sup> Women living with HIV who want to have children typically confront biases and negative attitudes from healthcare providers and are stigmatized in their communities; further healthcare providers rarely give women living with HIV the opportunity to discuss their fertility intentions.<sup>11</sup>

Violence and fear may inhibit our ability to disclose our status and negotiate protected, satisfying sex as well as the timing and spacing of children. Broader violations of rights, such as lack of access to property inheritance and unequal employment opportunities create challenges for women living with HIV in securing our sexual and reproductive health and rights.

HIV testing that is not informed, voluntary, and confidential can leave women and girls living with HIV vulnerable to abuse. Pregnant women find themselves under participation pressure to test in antenatal clinics. Additionally, prevention of mother to child transmission (PMTCT) programs often prioritize the health of the child over the health of the mother.

## Religion and Customs

Women living with HIV often face not only discrimination and stigma because of their HIV status, but also face religious and/or customary practices that negatively impact their rights and health, such as harmful societal 'norms' established by their families or their communities.

## Sex Workers

Women living with HIV who are sex workers report being demeaned and humiliated by health workers, reflecting broader social stigma surrounding their work. Sex workers' statuses are often revealed and belittled within the health care environment.<sup>12</sup> Improving treatment access for women sex workers living with HIV is critical for our own health and for public health. Sensitizing health workers through specialized training, refining referral systems from sex-worker friendly clinics into the national system, and providing opportunities for sex workers to collectively organize for improved treatment and rights are necessary to alleviate the barriers to treatment currently faced by women sex workers living with HIV.<sup>13</sup>

## Women Living with HIV and Policy-making

Finally, there is an extreme lack of involvement of women and girls living with HIV in policies programs developed to advocate for women's sexual health and reproductive rights. Women living with HIV are often portrayed as either victims of male sexual aggression or as potential or actual mothers, not as sexual agents in their own right. This leads to sexual health programmes and advocacy on sexual and reproductive health and rights that do not effectively include or reach women living with HIV.

## Securing SRHR for women living with HIV

As women living with HIV, we experience violations of our sexual and reproductive health and rights in varying contexts, including within our families, communities, and the health care setting. Pressures from families and communities challenge our autonomy, and can compromise or limit our decision-making around our own sexual and reproductive health. Similarly, general community disapproval for continuing to have sexual relationships can negatively impact our ability to enjoy sexual fulfilment and maintain our sexual health.

Women living with HIV must be able to make informed decisions about their own treatment and care. Stigma, discrimination, and other barriers must be eliminated in order to ensure that women living with HIV receive the care they need and are entitled to.

It is imperative to ensure the sexual and reproductive rights of women living with HIV are upheld, and to empower women to make informed decisions on matters related to their sexual and reproductive health. We seek full realization of the sexual and reproductive health and rights of women and girls living with HIV, including the right to have fulfilling sexual lives and to express sexual identities, the right to make autonomous decisions about whether we will marry and whether we will have children, freedom from all forms of violence, and the right to make those decisions with access to comprehensive information about a full range of reproductive choices.

Women living with HIV must have access to appropriate and safe contraceptives; pregnancy support services and the reduction of maternal mortality among women living with HIV must be prioritized. As a part of a full spectrum of care, we seek the increased availability of voluntary HIV testing, treatment, and counselling for all women and girls. We seek an immediate and universal end to forced and coerced sterilization and forced and coerced abortion. Finally, we demand respect by healthcare workers, families, and community members for our sexual and reproductive health and rights.

We call on the global community to ensure comprehensive, quality, and dignified health care for women living with HIV in all our diversity, and to promote the universal right of all people living with HIV to access reliable, comprehensive, and sustainable care, treatment, and support.

## ICW Recommendations

### Meaningful involvement of women and girls living with HIV:

- Advocate for and enhance meaningful participation of women and girls living with HIV at all levels of policy and programme formulation around the areas of HIV/AIDS and SRHR;

### Improve services and technologies:

- Maximise access to quality, non-judgemental SRHR services and information for all women living with HIV;
- Ensure that HIV testing remains informed and voluntary and is supported by counselling;
- Adopt the development of microbicides and other female controlled barrier methods as goals in our responses to HIV and AIDS and incorporate our needs and rights in this research; support ethical biomedical and social research on SRHR issues faced by women living with HIV;
- Provide comprehensive and appropriate training to health care providers to build their capacity to meet the requirements and expectations of women living with HIV.

### Legal reforms:

- Support women and girls living with HIV to reclaim our rights using local and national laws, national constitutions, and international instruments;
- Support research, documentation, and litigation around human rights abuses against women living with HIV—for example, forced sterilization or abortion or denial of SRHR services;
- Advocate for accessible legal services for women living with HIV;
- Decriminalise HIV transmission in all but extreme cases.

### National response and monitoring implementation:

- Incorporate enforceable human rights and gender indicators in national responses to HIV;
- Create public awareness of SRHR for women and girls living with HIV through media campaigns, workshops, etc.

### Empowerment & Human Rights Knowledge:

- Empower women to exercise control over their SRHR through awareness-raising and training;
- Enact legislation that promotes gender equality, including access to equal employment and education opportunities;
- Support community-based awareness campaigns to address gender inequalities and promote a woman's right to control what happens to her body and to enjoy satisfying sexual relationships, or to choose not to have sex.

## Endnotes

- 1 International Covenant on Economic, Social, and Cultural Rights, Article 10, Article 12, and Committee general comment No. 14 <http://www.ohchr.org/EN/ProfessionalInterest/Pages/CESCR.aspx>; Convention on the Elimination of All Forms of Discrimination Against Women, <http://www.un.org/womenwatch/daw/cedaw/cedaw.htm>
- 2 As expressed in the following International Human Rights Instruments- African Charter on Human and Peoples' Rights, Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, Convention on the Elimination of All Forms of Discrimination against Women, International Covenant on Economic, Social and Cultural Rights, International Covenant on Civil and Political Rights , Convention on the Rights of the Child, Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment, International Convention on the Elimination of All Forms of Racial Discrimination, International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families, Protocol to Prevent, Suppress and Punish Trafficking in Persons, Especially Women and Children, supplementing the United Nations Convention against Transnational Organized Crime. More information available at [http://equalitynow.org/sites/default/files/Manual%20on%20Protocol%20on%20Women%20Rights%20in%20Africa\\_EN.pdf](http://equalitynow.org/sites/default/files/Manual%20on%20Protocol%20on%20Women%20Rights%20in%20Africa_EN.pdf)
- 3 Definition adapted from World Health Organization, Defining Sexual Health: Report of a Technical Consultation on Sexual Health (Geneva: WHO, 2006).
- 4 *Id.*
- 5 *Id.*
- 6 *Id.*
- 7 S Bharat, VS Mahendra Meeting the Sexual and Reproductive Health Needs of People Living with HIV: Challenges for Health Care Providers/ Reproductive Health Matters 2007;15(29 Supplement):93–112 <http://www.popcouncil.org/research/meeting-the-sexual-and-reproductive-health-needs-of-people-living-with-hiv->
- 8 *Id.*
- 9 Mantell, J. E., Smit, J. A., & Stein, Z. A. (2009). The right to choose parenthood among HIV-infected women and men. Journal of Public Health Policy, 30(4), 367–378. <http://doi.org/10.1057/jphp.2009.35> Available at <http://www.ncbi.nlm.nih.gov/pubmed/20029426>
- 10 *Id.*
- 11 *Id.*
- 12 Sibongile Mtetwa\*, Joanna Busza, Samson Chidiya, Stanley Mungofa and Frances Cowan “You are wasting our drugs”: health service barriers to HIV treatment for sex workers in Zimbabwe BMC Public Health 2013, 13:698 Available at: <http://www.biomedcentral.com/1471-2458/13/698>
- 13 *Id.*

