



POLICY ON SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Purpose:

The purpose of this policy is to clarify the range of rights and health services included in GRAN support of Sexual and Reproductive Health and Rights (SRHR). As situations affecting women's rights have emerged, GRAN has been asked a number of times by our partners to support advocacy positions or statements on SRHR, including the right to safe and legal abortions. In the absence of an established GRAN policy on SRHR, we have been unable to respond to these requests. This has highlighted the need for GRAN to have a clear position in this area.

Over the past year these rights have been jeopardized by US President Donald Trump's reinstatement of the Global Gag Rule also known as the Mexico City Policy. The rule prevents Non-Governmental Organizations (NGOs) outside the US from receiving money from the US government if, among their health services to women, they provide safe abortions or information about abortion. The policy has had devastating effects on women, girls, and their communities around the world.

One example of the impact of this rule is the loss of USAID funding that has left Marie Stopes International (a global organization that provides personalized contraception and safe abortion where legally permitted to women and girls in 37 countries around the world) with a funding gap of nearly US\$80m that could have a devastating impact on millions of the world's poorest for years to come. Unless the organization can close this funding gap, it estimates that more than 2 million women will no longer have access to contraception services from a trained Marie Stopes International provider, leading to an extra 2.5 million unintended pregnancies, 870,000 unsafe abortions and 6,900 avoidable maternal deaths. (<https://www.mariestopes.org/news/2018/1/global-gag-rule-anniversary/>). As SheDecides (a global movement initiated in response to the Global GAG rule) has stated, women must have access to education and information about their bodies and their options, modern contraception and abortion.

Scope:

This policy is intended to clarify what is encompassed when GRAN, as an organization, lends its support to SRHR campaigns. It is important to note that it is not our intention to launch campaigns specific to SRHR. It is also important to note that this policy does not

require or ask for compliance from individual GRAN members whose personal values may not include support of all SRHRs.

Context:

According to Global Affairs Canada:

Currently, 225 million women worldwide have an unmet need for modern contraception and there are more than four million unintended pregnancies every year. Additionally, an estimated 22 million women and girls worldwide put their lives at risk annually by undergoing unsafe abortions: at least 22,000 girls and women die each year and 6.9 million suffer serious illness or injury.

When women and girls have access to a full range of sexual and reproductive health services, rates of unplanned pregnancies and unsafe and illegal abortions decrease. Lack of attention to sexual and reproductive health and rights is a driver for maternal mortality, poor health and exclusion for far too many women and adolescent girls.

(http://international.gc.ca/world-monde/issues_development-enjeux_developpement/global_health-sante_mondiale/reproductive_faq-reproductifs_faq.aspx?lang=eng)

Progress in improving access to sexual and reproductive health services is important in achieving UN Sustainable Development Goal 3, which calls for ensuring good health and well-being. Improved access to these services also contributes to achieving Sustainable Development Goal 5, which calls for gender equality and the empowering of women and girls.

When we speak of sexual and reproductive health services for women and girls, we are referring to a wide range of health services, including but not limited to:

- comprehensive sexuality education;
- diagnosis, treatment and prevention of sexually transmitted infections, including HIV/AIDS;
- family planning services, including contraception;
- ante-natal and safe-delivery care;
- post-natal care;
- safe and legal abortion services and post-abortion care;
- diagnosis and treatment of reproductive health illnesses (including breast, endometrial, and cervical cancer); and
- services to prevent and respond to sexual and gender-based violence.

According to the Office of the High Commissioner of Human Rights at the United Nations:

Women's sexual and reproductive health is related to multiple human rights, including the right to life, the right to be free from torture, the right to health, the right to privacy, the right to education, and the prohibition of discrimination. The Committee on Economic, Social and Cultural Rights and the Committee on the Elimination of

Discrimination against Women (CEDAW) have both clearly indicated that women's right to health includes their sexual and reproductive health. This means that States have obligations to respect, protect and fulfill rights related to women's sexual and reproductive health. The Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health maintains that women are entitled to reproductive health care services, goods and facilities that are: (a) available in adequate numbers; (b) accessible physically and economically; (c) accessible without discrimination; and (d) of good quality.

CEDAW (article 16) guarantees women equal rights in deciding "freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights."

<http://www.ohchr.org/EN/Issues/Women/WRGS/Pages/HealthRights.aspx>

SRHR in Africa:

Generally, across the continent, forward-thinking policy and commitments have been put in place, and some African countries have policies that are leading on the global stage. This is evidenced by the Protocol to the African Charter on Human and People's Rights on the Rights of Women in Africa, better known as the Maputo Protocol, which guarantees comprehensive rights to women, including the right to take part in the political process and to improved autonomy in their reproductive health decisions. In development since 1995, the protocol was finally adopted by the African Union in 2003 in Maputo, Mozambique. However, access to safe abortion remains limited, and only a few African countries (South Africa, Mozambique, Tunisia and Zambia) provide limited provisions for full access to safe abortion. In contrast, most African countries prohibit abortions altogether, making it difficult for women to fully realize their sexual and reproductive health rights.

Policy Statement:

When GRAN advocates for Sexual and Reproductive Health and Rights (SRHR), it advocates for all those rights and services, including the right to safe abortions. GRAN supports the United Nations' position that criminalization of health services that only women require, including abortion, is a form of discrimination against women and violates their human rights. In its advocacy efforts, which are focused on improving the human rights of women and girls in sub-Saharan Africa, GRAN advocates for universal access to all sexual and reproductive health and rights for all women and girls.