

# The Struggle for Health

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- Although sexual and reproductive health rights are interdependent and often overlap, sexual rights are frequently subsumed under reproductive rights.
- There is need to also understand these rights separately.

## Definition of sexual health: Evolution

- Articulation to “sexual health” was in International Conference on Population and Development (ICPD) Programme for Action (Cairo, 1994): it was however, within the definition of reproductive health.

“(reproductive health)...also includes sexual health, the purpose of which is the enhancement of life and personal relations, and not merely counselling and care related to reproduction and sexually transmitted diseases.” It further stated 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...”

# Fourth World Conference on Women (1995)

Sexual health found mention as an aspect of sexuality, and women's autonomy in this context was recognised thus:

“The human rights of women include their 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.”

# These early articulations established that

- Sexual health relates to sexuality, sexual relations including but also independent of reproduction and disease prevention;
- Entails the ‘availability, accessibility, acceptability and quality’ of information, knowledge and services, to enable making informed choices for satisfying and safe sex.
- Sexual health as an aspect of women’s rights and gender equality.

# Committee on Economic, Social, and Cultural Rights (CESCR) General Comment 14 (2000) elaborates the state obligations in relation to SRH

**Affirms that these are an aspect of the right to the highest attainable standard of health (Article 12), it notes the**

“need to develop and implement a comprehensive national strategy for promoting women’s right to health throughout their life span ... [to] include interventions aimed at the prevention and treatment of diseases affecting women ... including sexual and reproductive health services.”

“to ensure that harmful social or traditional practices do not interfere with access to pre- and post-natal care and family planning; to prevent third parties from coercing women to undergo traditional practices, e.g. female genital mutilation; and to take measures to protect ... in particular women, children, adolescents and older persons, in the light of gender-based expressions of violence.”

- The material determinants of (sexual) health include “*access to safe and potable water, adequate sanitation, adequate food and nutrition, adequate housing, safe and healthy working conditions and environment, health-related education and information.*”

# WHO defines sexual health (2010)

: “...a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity.

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.”



- As sexuality in all its diversity shapes the sexual health outcomes of people, it has a significant bearing on fulfilment of sexual health. The following working definition of sexuality has been proposed by the WHO:

“...a central aspect of being human throughout life encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors.”

# Reproductive Rights

- The first formulation of reproductive rights as human rights is found in the International Conference on Human Rights, which was held in Tehran in 1968 to further the principles and aims of the Universal Declaration of Human Rights (UDHR).
- Final Act.177 Section 16 of the Final Act of the International Conference on Human Rights, 1968 recognises the human rights of couples to decide freely and responsibly on the number and spacing of their children and to have access to the information and education to do so.
- Principle 12 of the Declaration of Mexico on the Equality of Women and their Contribution to Development and Peace reiterates this right of couples and individuals to decide freely and responsibly whether to have children and when to do so, and to have access to information and education that would enable them to make these decisions.
- The Vienna Declaration and Programme of Action, adopted by the World Conference on Human Rights in 1993, emphasised the right of women, on the basis of equality with men, to access the widest range of family planning services and to have adequate health care.

# International Conference on Population and Development

A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its functions and processes.

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.

Beijing Declaration and Platform for Action, adopted at the Fourth World Conference on Women in 1995

“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”.

# Then and Now

## ICPD – Concerns

- No concrete strategies for implementation
- No resource applications
- Failure to expressly affirmative sexual
- Reliance on private market mechanisms

## Reproductive Justice

ICPD – review – 20 years