



Joint Statement for the Human Rights Committee's Day of Discussion on the Right to Life

Distinguished Committee Members:

I wish to thank the Committee for the opportunity to deliver this brief statement on behalf of over fifty human rights organizations from across the globe. We welcome the Committee's decision to draft this general comment and believe that it presents a critical opportunity for the Committee to elaborate on states' obligations to realize all people's, particularly women's, right to life on the basis of equality and nondiscrimination, taking into account the risks that women and girls face to their lives as a result of their reproductive capacities and their gender. We wish to highlight three issues in this regard.

First, across jurisdictions and in all regions of the world, states parties to the Covenant have continuously failed to give effect to their obligations under Article 6 to guarantee all individuals access to the full range of quality reproductive health services, which are essential for safeguarding their lives and health. As the Committee has repeatedly recognized, women's lives and health continue to be jeopardized as a result of preventable maternal mortality and morbidity, stemming from poor maternal health services, lack of reproductive health information, inadequate access to contraception, and restrictive abortion laws. In addition to guaranteeing access to quality maternal health care and enabling women and girls to prevent pregnancy, reforming restrictive abortion laws and guaranteeing access to safe abortion services is essential to the realization of the right to life due to the well-documented link between unsafe abortion and maternal mortality. In light of this, we urge the Committee to more fully elaborate on the specific measures states must take to eradicate preventable maternal mortality and morbidity, including by guaranteeing all individuals access to quality maternal health services, reforming restrictive abortion legislation, ensuring access to safe abortion services, and providing a range of quality contraceptives free from discrimination, violence and coercion.

Second, while it is firmly established in international law and standards that the rights enshrined in Article 6 begin at birth and do not apply prenatally, at times states parties to the Covenant have claimed that domestic laws and policies which violate gender equality and human rights are permissible because they seek to protect the right to life prior to birth. Such laws and policies have profoundly detrimental implications for the enjoyment of Covenant rights, including the right to life.

For example, some states parties have invoked a right to life prior to birth to justify complete bans or highly restrictive abortion laws, which compel women and girls to carry to term pregnancies that pose a threat to their lives or health, or that result from rape or incest. In countries across the globe, these laws have repeatedly resulted in the withholding of critical, and sometimes lifesaving, medical treatment. Furthermore, although some states parties with laws that protect the right to life prior to birth may permit abortion under narrow circumstances, in practice these provisions often effectively result in total abortion bans. Such laws also create two-tiered systems, where the more privileged can seek illegal but safe abortion services from

private providers, while the poor and marginalized, including those with disabilities, migrants and racial and ethnic minorities, are forced to jeopardize their lives and their physical and mental health. This is in direct contradiction to the Committee's repeated calls for states to liberalize restrictive abortion laws to bring them in line with the Covenant and to guarantee access to abortion services.

In light of the critical nature of these human rights violations, and the ongoing attempts by some states to invoke a prenatal right to life under Article 6 in order to justify such laws, policies and practices, we urge the Committee to utilize the opportunity in the elaboration of this general comment to reaffirm that the rights enshrined in Article 6 of the Covenant accrue at birth and do not extend prenatally. This long established principle of the Covenant and general international law follows from the plain text of the Covenant, the *travaux préparatoires*, and the Committee's decisions, general comments, and concluding observations.

Third, and finally, where states parties put in place measures to protect or promote fetal interests, the Covenant requires that such measures must not infringe on individuals' human rights and must be consistent with state obligations under the Covenant. As Article 6 does not apply prior to birth, the right to access reproductive health services, including abortion, should not be understood or treated as an exception to Article 6. Rather, any state measures that restrict access to reproductive health services, including abortion, must be strictly scrutinized for compliance with the Covenant and be consistent with the rights to life, equality and nondiscrimination, privacy, and freedom from cruel, inhuman and degrading treatment.

Endorsements:

Abortion Rights Campaign (Ireland)
Action Canada for Sexual Health and Rights
Action for Choice (Ireland)
Advocates for Youth
Akahatá Equipo de Trabajo en Sexualidades y Generos (Argentina)
Amnesty International
Asia Safe Abortion Partnership (ASAP)
Asian-Pacific Resource and Research Centre for Women (ARROW)
Association for Women's Rights in Development (AWID)
ASTRA Network
Catholics for Choice
Católicas por el Derecho a Decidir, México
Center for Health and Gender Equity (CHANGE)
Central America Women's Network (CAWN)
Centro de Estudios Legales y Sociales (CELS) (Argentina)
Children's Rights Information Network
Coalition of African Lesbians
Coalition to Repeal the Eighth Amendment (Ireland)
Consortio Latinoamericano contra el Aborto Inseguro (CLACAI)
CREA
Danish Family Planning Association

Doctors for Choice (Ireland)
Equality Now
European Humanist Federation
Federation for Women and Family Planning (Poland)
Grupo de Información en Reproducción Elegida (GIRE) (Mexico)
Global Justice Center
Gynuity Health Projects
Health Education and Research Association (HERA) (Macedonia)
Human Rights Law Centre (Australia)
Human Rights Watch
International Campaign for Women's Right to Safe Abortion
International Commission of Jurists
International Humanist and Ethical Union
International Women's Health Coalition
International Women's Human Rights Clinic, City University of New York Law School
Ipas
Ipas, Mexico
IPPF European Network
Irish Council for Civil Liberties
Irish Family Planning Association
Lawyers for Choice (Ireland)
Marie Stopes International
Mujer y Salud en Uruguay (MYSU)
PAI
Pathfinder International
Planned Parenthood Federation of America
PROMSEX (Centro de Promoción y Defensa por los Derechos Sexuales y Reproductivos)
Reproductive Health Matters
Sexual Rights Initiative
Spanish Federation of Family Planning (FPFE, Federación de Planificación Familiar Estatal)
Women Enabled International
Women's Global Network for Reproductive Rights (WGNRR)
Women's Link Worldwide

Individual Experts

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Raquel Irene Drovetta, National Council of Scientific and Technical Research, Argentina
Rebecca Cook and Bernard Dickens, Faculty of Law, University of Toronto
Sam Rowlands, Centre of Postgraduate Medical Research and Education, Bournemouth University