

Reproductive Rights, Human Rights, and the Post-2015 Agenda

The integration of international human rights norms into the post-2015 agenda is fundamental for the realization of the sustainable development goals. International human rights principles will help ensure the implementation of the post-2015 agenda and guarantee this agenda successfully improves people's daily lives by requiring that development programs reach all populations and increasing accountability for states' development commitments. The international human rights framework provides clear guidance on the essential components of all of the new sustainable development goals (SDGs), such as increasing access to health, education, and gender equality. Specifically, this framework requires states to **respect, protect, and fulfill** the human rights of all individuals and provides states with targeted steps they must take and how they might measure their success. Furthermore, the principles of accountability, meaningful participation, and equality – which underlie all international human rights and provide touchstones for ensuring the promise of the SDGs reaches all groups – should be mainstreamed throughout the goals.

The principle of equality and nondiscrimination requires particular attention. The MDGs' inability to reach the most marginalized populations demonstrated the need for guaranteeing that the post-2015 development agenda improves the lives of all people. Using gender equality and reproductive health as an example, this fact sheet will examine concrete ways in which applying a human rights framework to the sustainable development goals can make the sustainable development goals a reality for women and girls across the globe.

Respect, Protect, and Fulfill

Under the international human rights framework, states are required to respect, protect, and fulfill human rights. **Respecting** human rights requires states to refrain from interfering in the equal enjoy-

ment of rights. **Protecting** human rights requires states to take steps, including by enacting laws and policies, to prevent violations of rights by state and non-state actors. **Fulfilling** human rights requires states to take positive measures to enable people to exercise their rights on an equal basis. Under a sustainable development goal on health, as applied to reproductive health, international human rights would require states to take the following measures to respect, protect, and fulfill women's reproductive rights:

Respect:

- Create laws and policies prohibiting discrimination in the provision of reproductive health services and review laws to ensure they are not discriminatory on their face or in practice.¹
- Remove laws that restrict access to reproductive health services or that create barriers to accessing such services, such as laws criminalizing health services only women need or requiring third-party authorization for reproductive health services.²

Protect:

- Monitor public and private healthcare facilities to ensure that they are complying with all laws and policies surrounding women's reproductive health and are not limiting women's access to reproductive health information or services.³
- Elaborate and implement guidelines on individuals' right to access reproductive health services in order to prevent third parties from interfering with access to such services.⁴

Fulfill:

- Ensure that comprehensive reproductive health services are accessible to all in practice by ensuring their affordability, including by eliminating user fees and including reproduc-

tive health services under public health insurance schemes.⁵

- Integrate a gender perspective into all health programs and services, including reproductive health services, to ensure that they are acceptable to and tailored to the distinct needs of women, including particular groups of women.⁶

Accountability

In order to ensure positive development outcomes that comply with states' human rights commitments, it is critical that the post-2015 agenda include accessible and effective accountability mechanisms. By employing the specific guidance on accountability developed by the international human rights system, the post-2015 framework can ensure that local populations and the global community are provided with the requisite tools and resources to hold states accountable for their development commitments.

Under a sustainable development goal on health, as applied to reproductive health, international human rights norms on accountability would require states to:

- **Guarantee Meaningful Participation:** Women from all sectors of society, including the most marginalized, must be involved in the development and implementation of reproductive health programs to ensure that such programs address their unique needs and protect their human rights.⁷
- **Monitoring and Evaluation:** By routinely collecting disaggregated data on targets and indicators surrounding women's reproductive health, and making this data transparent and available to all, populations will be able to see the progress that states are making and hold state actors accountable for lack of progress.⁸ Such monitoring should incorporate input from all sectors of society, including women and marginalized groups.⁹ The data collected should be regularly submitted to a body formally charged with overseeing and assessing states' compliance with their international commitments; this process should afford civil society groups the opportunity to input on states' implementation of their international commitments.¹⁰
- **Remedy and Redress:** States' commitments to guarantee women access to reproductive health services should be incorporated into domestic

laws and should be justiciable, in order to enable populations and domestic human rights bodies, such as human rights ombudspersons and national human rights institutions, to hold states accountable for their failure to fulfill such obligations.¹¹

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Endnotes

- 1 Convention on the Elimination of Discrimination against Women (CEDAW), Arts. 1, 2 & 12; ESCR Committee, *General Comment No. 14*, para. 34.
- 2 CEDAW Committee, *General Recommendation No. 24*, para. 14; ESCR Committee, *General Comment No. 14*, para. 34.
- 3 CEDAW Committee, *General Recommendation No. 24*, para. 15; *Alyne da Silva Pimentel Teixeira v. Brazil*, CEDAW Committee, Commc'n No. 17/2008, para. 7.5, U.N. Doc. CEDAW/C/49/D/17/2008 (2011); ESCR Committee, *General Comment No. 14*, para. 35.
- 4 ESCR Committee, *General Comment No. 14*, para. 35; CEDAW Committee, *General Recommendation No. 24*, para. 15; CEDAW Committee, *Concluding Observations: Costa Rica*, paras. 32-33, U.N. Doc. CEDAW/C/CR/CO/5-6 (2011).
- 5 ESCR Committee, *General Comment No. 14*, para. 12(b); CEDAW Committee, *General Recommendation No. 24*, para. 29; ESCR Committee, *Concluding Observations: Kenya*, para. 33, U.N. Doc. E/C.12/KEN/CO/1 (2008); CEDAW Committee, *Concluding Observations: Hungary*, para. 31(b), U.N. Doc. CEDAW/C/HUN/CO/7-8 (2013).
- 6 CEDAW Committee, *General Recommendation No. 24*, paras. 12, 22 & 31(b).
- 7 CEDAW Committee, *General Recommendation No. 24*, paras. 12 & 31.
- 8 Report of the Office of the High Commissioner on Human Rights, *Technical Guidance on Maternal Mortality and Morbidity*, paras. 69-73, U.N. Doc. A/HRC/21/22 (2012); CEDAW Committee, *General Recommendation No. 24*, para. 56.
- 9 CEDAW Committee, *General Recommendation No. 24*, paras. 31 & 56.
- 10 See CEDAW, Art. 18; CEDAW Committee, *Rules of Procedure*, Rules 47 & 48.
- 11 See ESCR Committee, *General Comment No. 9*; ESCR Committee, *Concluding Observations: Nepal*, para. 37, U.N. Doc. E/C.12/1/Add.66 (2001).