

January 11, 2002

The Committee on the Elimination of Discrimination against Women (CEDAW Committee)

Re: Supplementary information on the Russian Federation
Scheduled for review by CEDAW Committee on January 25, 2002

Dear Committee Members:

This letter is intended to supplement the periodic report submitted by the Russian Federation, which is scheduled to be reviewed by the CEDAW Committee during its 26th session. The Center for Reproductive Law and Policy (CRLP), an independent non-governmental organization, hopes to further the work of the Committee by providing independent information concerning the rights protected in the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW). This letter highlights several areas of concern related to the status of women's reproductive health and rights in the Russian Federation. Specifically, it focuses on discriminatory or inadequate laws and policies related to the reproductive rights of women in the Russian Federation.

Because reproductive rights are fundamental to women's health and equality, States Parties' commitment to ensuring them should receive serious attention. Further, reproductive health and rights are explicitly protected in CEDAW. Article 12 requires States Parties to "take all appropriate measures to eliminate discrimination against women in the field of health care," and specifies that governments should ensure access to "appropriate services in connection with pregnancy, confinement and the post-natal period, granting free services where necessary, as well as adequate nutrition during pregnancy and lactation."¹ Article 10(h) requires that women have "access to specific educational information to help to ensure the health and well-being of families, including information and advice on family planning."²

The Committee's General Recommendation on Women and Health affirms that "access to health care, including reproductive health, is a basic right under [CEDAW]"³ and is fundamental to women's health and equality. Moreover, the General Recommendation considers it the responsibility of States Parties to "[e]nsure the removal of all barriers to women's access to health services, education and

information, including in the area of sexual and reproductive health,” and to “[p]rioritize the prevention of unwanted pregnancy through family planning and sex education and reduce maternal mortality rates through safe motherhood services and prenatal assistance.”⁴

We wish to bring to the Committee’s attention the following issues of concern, which directly affect the reproductive health and lives of women in the Russian Federation:

1. Right to Health Care, Including Reproductive Health Care and Family Planning (Articles 12, 14(2)(b) and (c), and 10(h))

A. Access to Affordable Modern Contraception

Availability of contraceptives remains unreliable due to the government’s failure to ensure affordable contraceptives, particularly for low-income women. The cost of contraceptives, which are primarily imported, is prohibitive for most Russians. For example, an annual supply of oral contraceptives costs about US \$80-100, which is approximately comparable to the average monthly wage, US \$80-200.⁵

Unaffordable or unavailable barrier contraceptives also contribute to the alarming rate of sexually transmissible infections (STIs), including HIV/AIDS.⁶ In 1987, Russia reported 4.2 cases of syphilis per 100,000 people. By 2000, that rate had multiplied exponentially to 157 cases per 100,000 people.⁷ The government reported “1,661 recorded cases of HIV-infected women” in 1998⁸—an estimate that is strikingly lower than recent UNAIDS estimates reporting 40,000 new cases of HIV infections per year,⁹ with a ratio of one infected woman for every two infected men.¹⁰

B. Access to Information on Family Planning and Reproductive Health

In its report, the government outlines the state-sponsored set of family planning programs, known as “Children of Russia,” adopted in the early 1990s. The programs were intended to introduce modern contraceptives and train providers in family planning services.¹¹ According to the government, “[t]he measures carried out under these programmes have produced a welcome downturn in the number of abortions and stabilized the maternal and infant mortality rates.”¹² However, despite the documented success of these programs, in 1998, they were cut from the state budget.¹³ Consequently, several regions have no federal funding for family planning and reproductive health programs.¹⁴

2. Right of Adolescents to Education (Articles 10, 12)

A. Information and Education on Sexuality and Family Planning

In its report to the Committee, the government highlights the plight of adolescent girls whose incidence of “gynecological problems” tripled between 1993 and 1998.¹⁵

The government’s report provides an incomplete picture of adolescents’ sexual and reproductive lives. Over the past three decades, the incidence of pregnancy among women under age 20 has increased from 28.4% to 47.8%.¹⁶ In some cities, between 1984 and 1994, the number of pregnancies among adolescents increased by 20 times.¹⁷ Moreover, even with more than 70% of Russians commencing sexual relations between the ages of 15-19 years,¹⁸ reproductive health information and services remain inadequate. For example, one study found that about a third of young women are completely unaware of effective contraceptive methods.¹⁹ Another study found that, lacking education about contraceptives, 36.6% of adolescents have had to resort to abortions at later stages of pregnancy.²⁰

In its report to the Committee, the government cites “early maturity and early initiation into sexual activities” as the cause of the alarming rate of teenage pregnancy.²¹ Yet despite the government’s explicit recognition of adolescent sexuality and reproductive health concerns, sex education is not a required part of school curricula.²² In addition, existing family planning centers are inadequate to meet demand and no systematic efforts are made to ensure universal access to contraceptives, the price of which fluctuates with the local currency.²³

We hope that the Committee will consider addressing the following questions to the Russian Federation government:

1. What legislation and policies have been adopted to address the barriers that women face in accessing comprehensive reproductive health and family planning services, as well as information about these services? What is the unmet need for contraception and what governmental efforts are being made to increase public awareness about contraceptive methods?
2. The government report claims that “efforts are being made to improve the system of sex education in schools.”²⁴ Yet sex education is still not systematically offered in schools. Given this reality, what specific measures have been taken to institute government-sponsored programs such as public awareness campaigns and sexual education in schools, and to distribute contraception to adolescents?
3. According to UNAIDS and the WHO, Eastern Europe, and in particular Russia, exhibits the fastest-growing HIV-infection rates in the world.²⁵ What specific measures have been taken to increase public awareness to prevent, contain and manage the epidemic?

4. Given the increased risk of HIV infection that young women face in the Russian Federation, have any measures been aimed specifically at women and girls? For example, in 1999, the Ministry of Health established special health monitoring centers for children and women living with HIV/AIDS.²⁶ Do these centers continue to operate and receive federal funding? What programs and services are being offered through these centers and are they accessible and user-friendly?

Finally, we have included the following supporting documentation for the Committee's reference:

1. Chapter on the Russian Federation in *Women of the World: Laws and Policies Affecting Their Reproductive Lives, East Central Europe* (CRLP ed. 2000).
2. Report submitted to the UN Committee on the Rights of the Child, written by CRLP and Open Dialogue for Reproductive Rights (ODRR), *Reproductive Rights of Young Girls and Adolescents in Russia: A Shadow Report* (1999).
3. Briefing paper authored by CRLP, *Trends in Reproductive Rights: East Central Europe* (2001).

There remains a significant gap between CEDAW provisions and the reality of women's reproductive health and lives in Russia. We applaud the Committee for its commitment to women's reproductive rights and the strong concluding observations and recommendations the Committee has issued to governments in the past, which stress the need to take steps to ensure the realization of these rights.

We hope that this information is useful during the Committee's review of the Russian Federation's report. If you have any questions, or would like further information, please do not hesitate to contact us.

Very truly yours,

Christina Zampas
Staff Attorney, International Program

Laura Katzive
Staff Attorney, International Program

¹ Convention on the Elimination of All Forms of Discrimination against Women, *adopted* Dec. 18, 1979, G.A. Res. 34/180, U.N. GAOR, 34th Sess., Supp. No. 46, at 193, U.N. Doc. A/34/46 (1979) (*entered into force* Sept. 3, 1981) [hereinafter CEDAW].

² *Id.*

³ Committee on the Elimination of Discrimination against Women, Gen. Recommendation 24, *Women and Health*, art. 12, para. 1, U.N. Doc. A/54/38/ (Part I) (1999).

⁴ *Id.* at para. 31(b), (c).

⁵ See WOMEN OF THE WORLD: LAWS AND POLICIES AFFECTING THEIR REPRODUCTIVE LIVES, EAST CENTRAL EUROPE 171 n.183 (Center for Reproductive Law and Policy (CRLP) ed. 2000) [hereinafter WOW], *citing* Youcef Ghelleb & Michel Sollogoub, *Assistance Provided by the ILO to the Russian Federation in the Field of Wage Policy: Analytical Report Containing Recommendations to the Minister of Labor, Mr. Kalashnikov*, in INTERNATIONAL CONFERENCE ON SOCIAL AND LABOR ISSUES: OVERCOMING ADVERSE CONSEQUENCES OF THE TRANSITION PERIOD IN THE RUSSIAN FEDERATION, *available at* <http://www.trud.org> (last visited Aug. 2, 2000).

⁶ For example, female condoms are not sold in Russia. See WOW, *supra* note 5, at 159.

⁷ See UNITED NATIONS PROGRAMME ON HIV/AIDS (UNAIDS) & WORLD HEALTH ORGANIZATION (WHO), AIDS EPIDEMIC UPDATE 11 (2001), *available at* http://www.unaids.org/worldaidsday/2001/Epiupdate2001/Epiupdate2001_en.pdf.

⁸ Fifth periodic report of the Russian Federation to the UN Committee on the Elimination of Discrimination against Women, at 10, CEDAW/C/USR/5 (1999) [hereinafter Government report].

⁹ UNAIDS & WHO, *supra* note 7, at 10.

¹⁰ *Id.* at 11.

¹¹ Government report, *supra* note 8, at 28.

¹² *Id.* at 29.

¹³ See *Obraschenie v Sovet bezopasnosti Rossiiskoi Federatsii obshchestvennost I spetsialistov v oblasti okhrany reproduktivnogo zdorov'ia* [An address to the Security Council of Russian Federation of Public Specialists in Reproductive Health], 1 PLANIROVANIE SEM'I [FAMILY PLANNING] 5 (1999).

¹⁴ See *id.*

¹⁵ Government report, *supra* note 8, at 9.

¹⁶ See CRLP & Open Dialogue for Reproductive Rights (ODRR), REPRODUCTIVE RIGHTS OF YOUNG GIRLS AND ADOLESCENTS IN RUSSIA: A SHADOW REPORT (1999), at 6, *citing* V. Kulakov, *Reproductive Health of Youth is a Future of the Nation*, REPRODUCTIVE HEALTH AND SEXUAL EDUCATION OF YOUTH 16, 19 (1995) (in Russian).

¹⁷ See CRLP & ODRR, *supra* note 16, at 6, *citing* Kulakov, *supra* note 16, at 16, 19.

¹⁸ See WOW, *supra* note 5, at 167, *citing* E.I. Nikolaeva & E.M. Vikhlieva, *K epidemiologii iskusstvennykh abortov: pilotazhnoe issledovanie* [On the Epidemiology of Induced Abortions: Results of the Pilot Study], 3 PLANIROVANIE SEM'I [FAMILY PLANNING] 2 (1997).

¹⁹ See CRLP & ODRR, *supra* note 16, at 7, *citing* N. Tresheva, *State of the Reproductive Health of Girls and Experience of Sexual Education in Arkhangelskaya oblast*, in FIRST RFPA CONFERENCE PROBLEMS OF FAMILY PLANNING IN RUSSIA, MOSCOW 63 (1994) (in Russian).

²⁰ See CRLP & ODRR, *supra* note 16, at 7, *citing* Kulakov, *supra* note 16, at 21.

²¹ Government report, *supra* note 8, at 9-10.

²² See CRLP & ODRR, *supra* note 16, at 11, *citing* Russian Federation, Ministry of Health, Ordinance No. 154 of 5 May 1999, on the Improvement of Medical Care for Adolescents.

²³ See CRLP & ODRR, *supra* note 16, at 7, *citing* Facsimile from Elena Dmitrieva, Executive Director, ODRR, to CRLP (Sept. 3, 1999) (on file with CRLP).

²⁴ Government report, *supra* note 8, at 28.

²⁵ UNAIDS & WHO, *supra* note 7, at 2.

²⁶ Russian Federation, Ministry of Health, Ordinance No. 133 of 19 Apr. 1999, on the Prevention and Treatment of HIV Infected Pregnant Women and Children.