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Statement submitted by International Women’s Health Coalition, a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* The present statement is issued without formal editing.



Statement

The Beijing Declaration and Platform for Action was revolutionary. It affirmed that women's rights are human rights, and recognized that women's and girls' autonomy and ability to exercise power over their own lives were fundamental for gender equality. It reaffirmed the importance of sexual and reproductive health and rights, and called for countries to reform punitive abortion laws. It also recognized the diversity of women and girls and committed to eliminate all forms of discrimination against them. The Beijing Declaration and Platform for Action changed the way governments conceptualized and implemented strategies to achieve gender equality.

Since the Beijing Declaration and Platform for Action, there has been progress. Almost 50 countries have reformed laws to make abortion more accessible. The International Convention on the Rights of People with Disabilities recognized women's rights to sexual and reproductive health and information and autonomy over their reproductive lives. Since 2000, maternal mortality has declined by 38 per cent, as more women have accessed contraceptives and improved maternal health care; more than eighty-five percent of countries have enacted laws addressing intimate partner violence. Global action to end child marriage has resulted in a 15 per cent decline in child brides in the last decade. More than 70 countries have enacted protections against discrimination for lesbian, gay, bisexual, and transgender people.

Yet, there have been setbacks. The world is witnessing intersecting crises of climate change, attacks on democracy and human rights, and a resurgence of racism and white supremacy, all fueled by an economic model that privileges markets and profits over people and the planet. These crises are threatening our survival, reinforcing systemic oppression and deepening inequalities, with disproportionate impacts on the most marginalized and excluded women and girls. On almost every development indicator, from poverty to labor sector participation, women continue to be left behind. Meanwhile, powerful countries and fundamentalists are leading attacks on hard-won rights, working to reverse laws addressing intimate partner violence, denying women's rights to control their bodies, and weakening non-discrimination protections.

The International Women's Health Coalition joins with other organizations to propose bold actions to address these challenges through the feminist framework for Beijing+25. Now, governments must urgently address new and evolving human rights concerns and take action to uphold the rights of all people to exercise autonomy over all aspects of their lives.

Abortion

Despite a trend of liberalizing abortion laws, abortion often remains criminalized, and legal and policy barriers continue to restrict access. Many countries still punish people who induce their own abortions, with marginalized people often targeted first. Many legal systems draw limits around providers or facilities that can provide abortion services, despite the fact that abortion can be performed safely by a wide cadre of providers and with pills managed by women themselves. More than 70 jurisdictions allow health-care providers to deny access to abortion services based on their own personal beliefs, contravening professional obligations to provide quality care and do no harm. Access to abortion is a matter of human rights. When women are denied abortions, they face worse physical and mental health outcomes, socioeconomic stress, and harms to their life trajectories.

Quality and comprehensive sexual and reproductive health services

Despite the commitment to guarantee universal access to sexual and reproductive health services, women and girls still struggle to receive quality comprehensive care. As countries move towards universal health coverage, governments have the opportunity to change this. Yet, many of the programs exclude or place limits on services that only women need, undermining their ability to exercise agency over their health and lives. Some do not provide financial protection sufficient to insulate women against economic hardship. Women experience a higher burden of out-of-pocket costs for health-care services than men, largely due to non-coverage or limits on sexual and reproductive health services. Women employed in the informal sector or living in poverty, adolescent girls, older women, and lesbian, bisexual, and transgender individuals are often least able to obtain quality coverage due to a lack of information, resources, autonomy and decision-making power, and discrimination.

Other barriers remain. These include discriminatory norms and practices; laws that criminalize or restrict access to services like abortion or surrogacy; third-party authorization requirements; lack of information, education, and decision-making power; and health workers that use conscience claims to deny care and failure to address social determinants of health, such as food, nutrition, security, water, and sanitation.

Autonomy and bodily integrity

While the Beijing Declaration and Platform for Action affirmed the right of all women to exercise autonomy over their sexuality, this right is out of reach for many. Almost 70 countries continue to criminalize same-sex relations. A growing number of countries are passing laws that criminalize sex workers and/or their clients, which undermines sex workers' ability to organize, work under safer conditions, and protect themselves from violence. Many require that transgender individuals be sterilized as a condition of gender marker change, while genital surgery continues to be performed on intersex children without their consent. People with disabilities, and other marginalized women and girls, are often subject to sterilization without consent and denied access to information and services.

Girls and adolescents face particular challenges. Conflicting laws on age of consent to marriage, sex, and health services mean that adolescent girls are often denied access to the sexual and reproductive health care they need. Or they risk stigma, discrimination, and sometimes punishment – for both themselves and/or their consensual sexual partners – if they present for care. Despite commitments to provide all young people with sexuality education that addresses human rights, gender equality, and power dynamics within relationships, many still do not receive education that is evidence-based, comprehensive, and enables them to make informed and empowered decisions about their sexual lives and relationships.

Women's movements

Strong autonomous women's organizations and movements are the key to government accountability and action on women's rights. Multiple studies have confirmed that women's movements drive lasting policy change and are typically the only factor that does. A study conducted in 2012, based on 30 years of data from 70 countries, found that the critical factor in policy change to address violence against women was the mobilization of women's rights activists. A 2018 study from 50 African countries found that without action by domestic women's coalitions, legislative reform for women is significantly less likely to occur. Yet, despite the increasing investment in gender equality, national, local, and grassroots women's organizations and movements remain woefully underfunded and lack the support

needed to effectively do their work. Attacks on women human rights defenders, closing civic space, and scrutiny of women's organizations further hinder efforts.

Intersectionality

Women's organizations have highlighted the urgency of an intersectional approach to gender equality, recognizing that Afrodescendent and indigenous people, lesbian, bisexual, transgender and intersex people, people living in poverty, people with disabilities, migrants and refugees, or others who are marginalized experience discrimination more intensely as a result of intersecting inequalities. Our work must respond to their needs and experiences, as well as engage and be led by their expertise and vision.

To address these gaps, the International Women's Health Coalition calls on governments to:

- Decriminalize and destigmatize abortion. Remove abortion from criminal codes; address barriers to services, especially for marginalized groups; support pregnant people who choose to self-manage abortion; provide access to post-abortion care without limitations; and ensure service providers do not have the right to refuse services on the basis of conscience.
- Revoke laws and policy frameworks that criminalize and penalize bodies, sexualities, and identities.
- Provide comprehensive sexuality education within and beyond schools, grounded in evidence, human rights, gender equality, and respect for bodily autonomy and integrity.
- Design universal health coverage programs that address women's and girls' needs, focusing on the most marginalized, including by ensuring sufficient levels of financial protection; eliminating co-pays and other out-of-pocket payments for health services; and ensuring access to the full range of sexual and reproductive and other health services that women and girls need.
- Address gender- and age-related barriers to access to sexual and reproductive health care, including inter alia, by creating legal and policy frameworks to fulfil sexual and reproductive rights, and by addressing social norms and practices that perpetuate inequalities and limit autonomy and power.
- Invest in women's organizations and movements, protect civic space and their right to organize, and guarantee protections for women's human rights defenders.
- Address with intention the multiple and intersecting forms of discrimination and inequalities faced by women and girls, and celebrate their diversity.