

JOINT CIVIL SOCIETY STATEMENT
42ND SESSION OF THE UN HUMAN RIGHTS COUNCIL
INTERNATIONAL SAFE ABORTION DAY - 28 SEPTEMBER 2019

Thank you, President. I deliver this statement on behalf of [...] organizations.

In the Vienna Declaration and Programme of Action, States explicitly agreed to prioritize the realization of women's human rights and recognized that all human rights are universal, indivisible, interdependent and interrelated. Yet, 26 years later, women and girls' human rights and bodily autonomy continue to be routinely violated, including through the denial, criminalization and stigmatization of access to safe and legal abortion - all of which is rooted in the discrimination, oppression, violence and coercion affecting the material conditions that shape people's lives and ability to exercise their bodily autonomy and human rights.

In 1994, Black feminists came together as the Women of African Descent for Reproductive Justice, in reaction to the white supremacy, colonialism and capitalism they observed shaping reproductive politics and inherent in the broader population control narratives. Reproductive justice is centered on the rights to bodily autonomy and self-determination, and to parent and not to parent in safe and healthy environments.¹ It is rooted in an intersectional analysis and moving beyond an individualistic conception of "choice" to instead place emphasis on the material conditions necessary to exercise reproductive rights. Reproductive justice also addresses the legacy of population control informed by white supremacy and replacement theory, which has resurfaced in current populist politics.

Reproductive justice is achieved when all people are able to enjoy their right to bodily autonomy and sexual and reproductive self-determination. It requires people to enjoy economic, social, and cultural rights and freedoms, and the ability to make and exercise choices not limited by oppression, discrimination, stigma, coercion, violence, lack of opportunities or possible consequences. Treaty bodies and special procedures have echoed this need and recognized that the realization of women's reproductive rights depends on the material conditions in which they are born, grow, live, work and age, and on power structures and resource distribution at all levels² - in other words, the social and other determinants of health.³ These include access to housing,

¹ Ross, Loretta, and Rickie Solinger. 2017. *Reproductive Justice: An Introduction*. Page 65.

² WHO, About social determinants of health (2017), available at http://www.who.int/social_determinants/sdh_definition/en (last visited Oct. 16, 2017) [hereinafter WHO, About social determinants of health].

³ See, e.g., CEDAW Committee & CRC Committee, *Joint General Recommendation No. 31 & General Comment No. 18: On harmful practices*, (2014), paras. 68-9, U.N. Doc. CEDAW/C/GC/31-CRC/C/GC/18 (2014) [hereinafter CEDAW Committee & CRC Committee, *Joint Gen. Recommendation No. 31 & Gen. Comment No. 18*]. See also CRC Committee, *Concluding Observations: Mongolia*, para. 51(a), U.N. Doc. CRC/C/MNG/CO/3-4; ESCR Committee,

safe drinking water, effective sanitation systems, access to justice, and freedom from violence, among other factors, and impact the agency that individuals can exercise with respect to their sexual and reproductive health.⁴ Our discussions on abortion and sexual and reproductive rights cannot continue ignoring these factors.

The realization of reproductive justice, the right to bodily autonomy and substantive equality also requires freedom from control and interference by State and non-State actors, including private companies, donors and multinational corporations, including criminalization of sexual and reproductive behaviors and decisions, restrictive abortion laws, punitive sanctions, and legal restrictions to regulate women's control over their own bodies.⁵ These laws, policies and practices typically target and disproportionately impact women of color, women from the Global South, women with disabilities, women living in poverty, migrant women, ethnic minorities and indigenous women, women living with HIV, young women and adolescents, sex workers and gender-non-conforming persons based on racial, class, disability and gender stereotypes.⁶

Today, on 28 September, International Safe Abortion Day, we urge States to respect, protect and fulfill women and girls' human rights and realize reproductive justice for all. We call on states to:

- Ensure access to available, accessible, acceptable and quality sexual and reproductive health services as part of universal health coverage and public health systems, including modern contraceptive options, comprehensive abortion and post-abortion care, financed adequately through taxation and free from control from other governments, multilateral agreements and transnational corporations.
- Remove all legal and social barriers to safe abortion, including its criminalization, which is broader and including sanctions and no sanction regimes, and commit to providing safe abortion services on request.
- Address social and other determinants of health in law and practice from an intersectional perspective to ensure that they enable all individuals to effectively enjoy their sexual and reproductive rights.⁷

Concluding Observations: Australia, para. 28, U.N. Doc. E/C.12/AUS/CO/4 (2009) and ESCR Committee, General Comment 22 on the right to sexual and reproductive health, paras.7-8.

⁴ ESCR Committee, Concluding Observations: Australia, para. 28, U.N. Doc. E/C.12/AUS/CO/4(2009); WHO, About social determinants of health, supra note 2, see also ESCR Committee, General Comment 22 on the right to sexual and reproductive health, paras. 7-8.

⁵ Report of the Working Group on the issue of discrimination against women in law and in practice, Discrimination against women with regard to health and safety, U.N. Doc A/HRC/32/44, para. 76, available at <https://documents-dds-ny.un.org/doc/UNDOC/GEN/G16/072/19/PDF/G1607219.pdf?OpenElement>

⁶ See e.g. Report of the Working Group on the issue of discrimination against women in law and in practice, Women Deprived of Liberty, U.N. Doc A/HRC/41/33, 15th May 2019, available at: http://ap.ohchr.org/documents/dpage_e.aspx?si=A/HRC/41/33, paras. 37-38. ESCR Committee, General Comment 22 on the right to sexual and reproductive health, para 30.

⁷ WHO, About social determinants of health, supra note 2.

- Hold private companies and multinational corporations accountable for unethical research practices, violations and abuses of women and girls' reproductive rights and bodily autonomy.
- Prioritize the meaningful participation of local movements, women human rights defenders and feminists demanding accountability for sexual and reproductive health and rights violations, and center their demands and recommendations for the realization of reproductive justice.