



A S T R A N E T W O R K

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## CEE Bulletin on Sexual and Reproductive Health and Rights

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### BURNING ISSUE

#### International Conference on Family Planning and panel of ASTRA member from Poland

The [International Conference on Family Planning](#) (#ICFP) took place on January 25-28, 2016 in Nusa Dua, Indonesia. It was co-hosted by the National Population and Family Planning Board of Indonesia (Bkkbn) and the Bill & Melinda Gates Institute for Population and Reproductive Health at Johns Hopkins Bloomberg School of Public Health. The conference drew the largest number of attendants yet, and the ICFP helped shape and influence the role and contributions of family planning in attaining the new Sustainable Development Goals. The theme for the conference was *Global Commitments, Local Actions*. Each day of the conference featured a plenary session focused on a different track theme. The tracks will feature issue-oriented themes, such as: addressing youth

needs and involvement; rights and quality of care: true improvements or lip service; the demographic dividend: how south-to-south exchanges can help its realization; implementation best practices (IBP); advancing FP through faith organizations; FP2020 progress and challenges; innovations in financing (GFF, Universal Health Care); and accountability and advocacy.

The Executive Director of the Polish ASTRA Member – the Federation for Women and Family Planning – Krystyna Kacpura together with Executive Director of [ARROW](#), Sivananthi Thanenthiran and Gilda Sedgh from [Guttmacher Institute](#) participated in a panel „*What is our responsibility towards women when contraception fails or is not used?*” on Tuesday, 26<sup>th</sup> January. In her presentation Mr. Kacpura discussed legal, economic, social and cultural barriers in access to contraception within Central and Eastern Europe. This was the only panel during the entire event which discussed the issues and problems within SRHR in Central and Eastern Europe.

View details of the panel [HERE](#).

Source: <http://fpconference.org/2015>, [Federation for Women and Family Planning](#)

## REGIONAL UPDATES

### **European Union 2016 budget requires medical care in humanitarian settings to include access to safe abortion**

The European Union, in September 2015, following the UK, acknowledged that female war rape victims' rights to medical care under the Geneva Conventions include abortion, irrespective of any restrictive abortion laws in war zones. Following this, the newly approved 2016 budget requires that EU humanitarian aid be provided "in accordance with international humanitarian law," and without "discrimination or adverse distinction." And, in a reference to the US Helms amendment, the budget mandates EU funds "not be subject to restrictions imposed by other partner donors."

"Sexual violence is a devastating weapon in the war-torn areas, these women and girls are war wounded and should be treated equally," said Sophie in 't Veld (Member of European Parliament, Netherlands, ALDE/ D66), during a speech on this budget language. "The EU is taking steps to ensure that EU humanitarian aid funds are not tainted by other donor countries - to force a girl enslaved by ISIS, kidnapped by Boko Haram or raped in the DRC to bear a child of her rapist, who may be, as a result, expelled from the community and condemned to poverty, is inhumane treatment."

The US Helms amendment imposes abortion restrictions on all US foreign aid, which the US Obama Administration implements as a total ban on abortion, including medical services for girls and women raped in war. Janet Benshoof, President of the Global Justice Center in New York states: "This budget language shows the EU is serious about ensuring that the humanitarian entities they fund follow the Geneva Conventions, not the US abortion ban." According to Benshoof, the EU policies require changes in the practices of nearly all the major humanitarian entities currently providing medical care for war victims. including UN agencies.

The European Parliament was even more explicit in its 15 December 2015 Report for the upcoming World Humanitarian Summit, urging "that women and girls have access to the full range of sexual and reproductive health services, including safe abortions, in humanitarian crises, rather than perpetuating what amounts to inhumane treatment, as required by international humanitarian law and as foreseen in the Geneva Conventions and their Additional Protocols." "With the endemic use of rape as a weapon of war in conflicts across the globe, this dramatic policy shift demonstrates a sea change toward ensuring that all girls and women raped in war are provided comprehensive medical care," says Benshoof.

<http://globaljusticecenter.net/index.php/news-and-events/news1/press-releases/658-eu-seeks-divorce-from-us-abortion-ban-anti-us-helms-amendment-attached-to-2016-eu-budget>

posted on ReproHealth Law, January 2016

### **Draft law in Russia proposing abortion restrictions**

2016 is the year of Parliamentary elections in the Russian Federation and some of the MPs have already changed their position on reproductive rights for non-electing seats in the Upper Chamber (Federation Council). One of them was MP Elena Mizulina former Head of Committee on the issues of Women, Family and Children who is at the same time a leading person of Russian conservative anti-choice legislation force. Together with two other Members of the Federal Council Dr. Lakhova (the Leader of "Women of Russia") and LDPR Member Mrs. Afanasieva, Elena Mizulina introduced a new Draft Law proposal with additional restrictions for women obtaining abortion services. In the last five years similar proposals were rejected by Russian Parliament three times already due to negative replies from the Government (MOH), however the group of newly appointed women-Senators has registered this Draft once again.

"In order to rule out the uncontrolled use of pharmaceutical drugs destined for interruption of pregnancy, we suggest the introduction of a direct ban on their retail sales and also make up a full list of organizations that will receive the right to buy them wholesale," reads the explanation offered by the authors of the Draft Law. Although these products were never sold at the pharmacies in Russia, they are bought by the clinics and hospitals and are then provided for free or on commercial base to the patients with the mandatory doctors' consultation and under medical control only. It is quite clear that in case this proposal is voted, both Mifepristone-containing and other Emergency Contraception (EC) medications with Levonorgestrel (Postinor and Escapell) will be blown off from the pharmacies.

It is quite a common mistake to confuse pharmaceutical abortion with post coital contraception - but it is really worrying when it is made by legislators.

The RAPD "Rowan Bunch" Coalition experts consider that it is done by the Draft Law author\`s on purpose, since anti-choice is struggling on one hand with abortions, and at the same time with modern contraceptive means (especially with EC) on the other.

Source: [Russian Association for Population and Development](#)

## **New standards for monitoring pregnant women in outpatient settings in Moldova**

The Ministry of Health in Moldova has approved the new standards for monitoring pregnant women in outpatient settings. The purpose of the new standards was to improve maternal health, to protect motherhood, to reduce the maternal morbidity and mortality. In the new Standards surveillance of pregnant women in ambulatory conditions was broadened spectrum of clinical and laboratory examinations mandatory for all pregnant women during antenatal period. And, for pregnant women at risk was drawn up an individualized plan of care. For the first time, the revised regulatory framework ensures pregnant woman the right to choose for free the obstetrician gynecologist for supervision in an outpatient basis in the Chisinau Territorial Medical Association / District Hospital/ consultative section, regardless of place of residence and evidence in the medical records. The Ministry of Health through these standards enables pregnant women to choose their obstetrician gynecologist for birth within medical institutions, given its prior consent. Thus, pregnant women will no longer be subject to pay service charges.

New Standards surveillance of pregnant women in outpatient settings:

- For the first time in the obstetrical and gynecological practice was proposed to do the prenatal screening biochemical pregnancies at risk: double and triple-test to identify risk for the most serious and dangerous congenital disorders of fetus such as tube defects neural, chromosomal aberrations and congenital malformations.
- was filled with an additional visit at 32-33 weeks of pregnancy term, which has a major importance in the early detection of hypertensive disorders in pregnancy, which can lead to premature births, complications in pregnancy such as preeclampsia, eclampsia, etc.;
- has been included mandatory test protein in the urine and blood glucose test that will allow to diagnose pathological conditions in pregnancy:
- has been improved the psycho-emotional training program for pregnant women, that includes gender psychological topics, such as: positive psycho-emotional contact between mother and child and possible postnatal psychological problems. The trainings will be conducted by the family doctor.

Source: [Reproductive Health Training Center](#)

## **Croatia: Doctors that refuse to do abortions should look for a job in church-funded hospitals**

Three respected physicians, MD Dubravko Lepusic, MD Jasenka Grujic-Koracin and MD Gorjana Gjuric, whose Initiative for regulation of conscientious objection raised a public debate, explained their position on demanding that government-funded hospitals shouldn't employ doctors who refuse to do various medical procedures on the grounds of religious beliefs.

Hospital, as a public institution that is funded by public money, has to secure the right of a woman to have an abortion. That is, and there should be no compromise on that certain issue. There are legal frames that guarantee that right. There are articles, in particular laws that also guarantee a right for a physician to practice conscientious objection, but that does not mean they are allowed not to put patients' needs first.

"It doesn't function in Croatia. Every doctor with conscientious objection, like those who work in the "Holy Spirit" hospital, which are massively refusing to do abortions, should work in a confessional hospital that should be funded by the Church. That's why we are demanding that confessional hospitals get established and that the institutional right for conscientious objection in public hospitals gets shut down, including pharmacy and transfusion medicine. It's a physician's obligation to provide services based on science, and not the religious dogma." - That's how the MD Jasenka Grujic-Koracin announces the initiative for the establishment of confessional hospitals, as just one of the series of projects the "Initiative of doctors for the regulation of conscientious objection in medicine" will pull off. The Initiative was presented to the public during the roundtable they've organized together with Center for education, counseling and research from Zagreb.

#### Violations of the rights of the patients

"If the conscientious objection would be applied consistently, the system would get broken, in every segment of human rights, not just the right to terminate a pregnancy. How far is it allowed to practice the conscientious objection? If we bring it to the level of absurd, it would allow for the Jehovah's Witnesses to demand the abolishment of the Institute for Transfusion, the lawyers could demand to be exempt from defending the criminals they don't like, and the employees of the hospitals could just boycott everything that has any relation with a woman who had an abortion - the cleaning staff shouldn't wash the sheets that woman used, and the administrative clerks should deny writing her discharge letter." - that's how MD Jasenka Grujic-Koracin explains the motives that are behind the need for the doctors to merge into the Initiative.

MD Lepusic told a story from his practice: because her doctor of the primary health care refused to prescribe her contraception, a seventeen-year-old girl came to have abortion two times, in a timespan of a couple of months. She had to go to the hospitals with their parents. Except from extreme dark examples, it's important to highlight a dark secret on missusement of the conscientious objection, that gets mentioned a lot on gatherings of doctors and in the culoars - that there are doctors that practice their right not the perform an abortion during the working hours, but still perform terminations of pregnancies in private clinics.

The doctors that are gathered in the Initiative demand from the Government and from the Ministry of Health that the conscientious objection regulates more precisely. From defining what are the cases of negative, as well as a positive conscientious objection, to determine a more clear procedure, to regulate the accreditation of institution that has a greater number of people who practice their CO right and thus don't do all of the tasks that are listed under their affair. They wish to have a very clear and written procedure of recognition of the individual right to practice CO, similar as it exists in the military service. Furthermore, they wish to abolish the right some people and to pray in front of the hospitals any by that interfere with regular work of the hospitals, and to form some "buffer" zones which wouldn't allow those people to come near the hospitals.

#### The Conscientious Objection Registry

The doctors from the Initiative demand the forming of a registry for the institutions and the Ministry of health, as well as trough the different professions, and to deter the measures that would compensate the loss made because of the conscientious objection. That would mean that, per instance, if a person refuses to do something because of his/hers CO, that would be deducted from

that person's paycheck, which would lower unnecessary cost and leave more money for the "fund" that would be used to pay external associates, as MD Lepusic explains.

The right to practice a conscientious objection was brought to Croatian law in 2003. The drama surrounding the abortion rights has just brought them to the light, but it's not related exclusively to abortion, but to the whole reproductive and palliative medicine, as well as transfusiology and prevention. The last one is related to the HPV vaccine; Lepusic says: "While we're holding discussions on vaccines and are not one of the 58 countries in the world that have it in their national program, in Croatia around hundred women per year die from cervical cancer. The world moves forward - there has been registered another nine-valent vaccine in America. It covers nine types of viruses."

Source: [JutarnjiLIST](#)

### **Training on Domestic Violence for Social Workers**

On January 21, 2016 Women's Rights Center implemented next training on domestic violence for social workers from Social Support Departments of 12 districts of Yerevan. At first the organization was presented to the participants, then domestic violence phenomenon, its types and negative psychological impact, the possible ways of prevention, needs of legal intervention and other important details connected with the problem. Trainers highlighted domestic violence impact on children and showed its negative results. Women's Rights Center's social films on domestic violence were demonstrated and discussed by the participants, who were very interested in this training. They shared their experience and had a hot discussion with the trainers and colleagues.

Source: [Women's Rights Center](#)

### **Georgian NGOs advocate on reproductive rights to the government**

Georgian Coalition for "Reproductive Health and Rights" advocating on SRHR issues in Georgia has developed a video, in which NGOs' representatives send messages on reproductive rights to the government. The main message of the video is: 'Be aware of reproductive rights as human rights and create your healthy futures'. It aims to provide information to Georgian society on reproductive rights and remind decisionmakers of their obligation to ensure protection of sexual and reproductive rights. In the video, active members of the coalition stand in front of different ministries and hold messages calling the government to ensure realization of reproductive rights as basic human rights.

The coalition was set up in 2014 at the initiative of Association HERA-XXI. Currently, it's made up of 16 members, including local and regional NGOs working on reproductive health and rights, women's rights, gender issues and professional organizations, decisionmakers and doctors. Its main goal is to advocate on SRHR issues and act for changes in this field. The coalition is recognizable in the field of SRHR and succeeded in obtaining financial support to carry out projects.

The video is available [here](#).

## **Serbia is the first country outside the European Union to calculate its Gender Equality Index**

The results for Serbia's Gender Equality Index are due for release in early 2016. Calculation for the Index was based on the methodology developed by the European Institute for Gender Equality (EIGE), who also supported the process. Such assistance is part of EIGE's work to strengthen the capacity of six Western Balkan countries and Turkey as EU candidate and potential candidate countries. EIGE's main partners in Serbia are the Social Inclusion and Poverty Reduction Unit (SIPRU) and the Statistical Office of the Republic of Serbia.

The Gender Equality Index measures gender gaps in six domains in key policy areas across each of the EU Member States over time. The domains are: work, money, knowledge, time, power and health – and two satellite domains: violence against women and intersecting inequalities. It assigns scores for Member States, between 1 for total inequality and 100 for full equality, or no gender gaps. With a score of 52.9, Europe is only half way towards reaching full gender equality.

To learn more about EIGE's work with pre-accession countries, [click here](#).

Source: [EIGE](#)

## **Service provisions for survivors of gender-based violence in Romania**

The civil society network "Breaking the Silence about Sexual Violence" organized a debate with the Higher Council of Judges to discuss legal solutions necessary to expand service provision for survivors of gender-based violence in Romania. Statistics show that 600,000 Romanian women are victims of sexual violence in their lifetime and sexual violence remains one of the least reported crimes. Civil society representatives argue that sexual violence is not reported because of poor legislation and lack of accessible, free and relevant services. The network insisted that integrated emergency centers should be set up, where victims of violence can access free medical care, counseling and legal assistance.

Source: [Digi24](#)

## **Across Europe, more people are dying than being born**

Demographers have a name for when a population has more deaths than births: "Natural decrease." It's rarely discussed because "it is unusual in the modern era," according to a recent research paper, but that's about to change as natural decrease is becoming increasingly common across Europe, and in many parts of the United States.

In an article published in December's issue of Population and Development Review, authors led by Kenneth Johnson of University of New Hampshire note that, "In Europe today there is virtually no overall population growth from natural increase." There is only one country—Kosovo—with a population that is naturally growing by more than 1% per year. By contrast, 17 European countries are experiencing natural decrease, including Russia, Germany and Italy. After analyzing census data from 2000 to 2010, the authors conclude: "Deaths exceeded births in most counties of Germany,

Hungary, Croatia, Romania, Bulgaria, and the Czech Republic, as well as in Sweden and the Baltic states. Farther south, natural decrease was also occurring in the majority of the counties of Greece, Portugal, and Italy.”

Natural decrease doesn’t mean a country is in danger of dying out completely, but it can create major economic difficulties. A declining population will tend to grow older, leaving fewer people in the workforce. As the proportion of old people rises, younger workers must pay a higher tax burden to pay for higher retirement, pension, and healthcare costs.

Source: [Quartz](#)

### **Backlash against women’s rights: A missive from our Europe & Central Asia Activist Convening**

Global Fund for Women brought together 85 activists from sister organizations and women’s funds in Europe & Central Asia for a meeting in Batumi, Georgia. The meeting was part of Global Fund for Women’s ongoing work to strengthen and build connections between local movements for women’s rights.

“The Europe and Central Asia Activist Convening brought together activists and women’s funds from very diverse backgrounds,” explains Mariam Gagoshashvili, Global Fund for Women’s Program Officer for Europe and Central Asia. “Yet it was very important to realize that the external and internal challenges these movements are facing are common ones and that we need to unite to counter them.”

One of the key challenges discussed at the meeting is the growing backlash against women and trans human rights defenders and social change activists in the region. In countries including Azerbaijan, Uzbekistan, Belarus, Kazakhstan, and Tajikistan, just to name a few, organizations working on human rights—especially around gender, sexual orientation, or reproductive rights—are being increasingly targeted and threatened. In Europe and Central Asia, in recent years, grass-roots women-led organizations have worked hard to organize movements, make their voices heard in public conversations around gender equality, and to drive positive shifts in culture. But, as the activists convened in Batumi highlighted, for every positive shift, there have been strong resistant reactions. Amid discussions of the common threats and increased scrutiny, the activists gathered in Batumi were committed to working together to find solutions and try to change the environment that criminalizes human rights activism across the region.

Source: [Global Fund for Women](#)

### **Romanian Priests Push for Gay Marriage Ban**

Romanian Orthodox clergy are drumming up support for a change to the constitution defining marriage as an union between a man and a woman alone. The days following Christmas have been a good opportunity for Orthodox priests accross Romania to encourage parishioners to back a campaign for a change to the constitution outlawing same-sex marriage. Dozens of people on Wednesday attending the Epiphany Day service at the cathedral in Timisoara, in western Romania,



queued to sign the initiative, after their Bishop, or Metropolitan, encouraged them to do so during the Christmas mass. Priests in the Iasi region in the east of the country, while blessing people's houses for the Epiphany Day – a common tradition in Romania – used the occasion to ask them to back amendments to the fundamental law, according to media reports.

Clergy want to gather at least 500,000 signatures in order to organise a referendum proposing that the constitution describe marriage as a consensual relationship between a man and a woman alone. Currently, the constitutional article use only the words “between spouses” when referring to the marriage partners. While priests are busy campaigning for the change, senior representatives of the Orthodox Church have not yet officially expressed support for the initiative.

More than 85 per cent of Romania's population of 19.5 million belong to the Orthodox Church, which enjoys high levels of trust in the public. Analysts say the issue is sensitive and will likely be debated more in the following months. “Romania is not yet ready to encourage marriage between same-sex persons and in my opinion this topic came up in public too early,” sociologist Tudor Pitulac said.

None of Romania's major political parties, either in government or in opposition, supports same-sex marriage, or registered partnerships, or has proposed any law on the subject.

Source: [Balkan Insight](#)

### **SRHR chosen as a priority for Armenian ASTRA member**

In mid-January SWV held its first big staff meeting to evaluate the activities implemented in the last year and to plan and schedule the upcoming activities of this year. As a result of the meeting SRHR issues were chosen as one of the main priority topics to be highlighted by the organization throughout this year. The whole team agreed on emphasizing SRHR issues in the public activities, organizing awareness raising trainings and movie screenings and advocating for the integration of sexual education in the secondary school curriculum.

Source: [Society Without Violence](#)

### **Investigating for human rights meeting in Croatia**

On the 21<sup>st</sup> and 22<sup>nd</sup> of January in Zagreb, Croatia, several organizations from the CEE region gathered together to discuss the growing presence of fundamentalist groups that are a threat to the human rights work, especially in the field of sexual and reproductive rights. The training “Investigating for human rights” was organized with financial support from Open Society Institute by a Croatian organization – Center for Peace Studies. Human rights activists, researchers, academics, journalists and lawyers from Bulgaria, Macedonia, Latvia, Lithuania, Serbia, Poland, Hungary, Slovenia and Estonia presented the current situation in their countries and good practices how to successfully search for information about fundamentalist groups. There were also representatives of countries from outside the region that struggle with similar problems – Italy, Spain, Ireland and Portugal. The

representative of Ipas gave a presentation about American trends and how European groups are connected with them. The group exchanged information, ideas and planned further cooperation.

Source: [Federation for Women and Family Planning](#)

## **GLOBAL UPDATES**

### **3rd International Congress on Women's Health and Unsafe Abortion**

The 3rd IWAC congress was held on 26-29 January 2016 in Bangkok, Thailand. The Theme of this congress was "Working Together Towards Global Safe Abortion". To view the program click [here](#).

Source: [www.womenhealth.or.th](http://www.womenhealth.or.th)

### **Zika Virus Declared a Public Health Emergency of International Concern**

The WHO Director General, Dr Margaret Chan, convened an Emergency Committee made up of 18 experts and advisers, under the International Health Regulations, "to gather advice on the severity of the health threat associated with the continuing spread of Zika virus disease in Latin America and the Caribbean" on 1 February.

In assessing the level of threat, the Committee "looked in particular at the strong association, in time and place, between infection with the Zika virus and a rise in detected cases of congenital malformations and neurological complications."

They "agreed that a causal relationship between Zika infection during pregnancy and microcephaly is strongly suspected, though not yet scientifically proven" and that there is an "urgent need to coordinate international efforts to investigate and understand this relationship better."

They also considered "patterns of recent spread and the broad geographical distribution of mosquito species that can transmit the virus. The lack of vaccines and rapid and reliable diagnostic tests, and the absence of population immunity in newly affected countries were cited as further causes for concern."

The Committee's advice was "that the recent cluster of microcephaly cases and other neurological disorders reported in Brazil, following a similar cluster in French Polynesia in 2014, constitutes an "extraordinary event" and a public health threat to other parts of the world. A coordinated international response is needed to minimize the threat in affected countries and reduce the risk of further international spread."

"...the situation meets the conditions for a Public Health Emergency of International Concern," which advice Dr Chan has accepted and she is now "declaring that the recent cluster of microcephaly cases and other neurological disorders reported in Brazil, following a similar cluster in French Polynesia in 2014, constitutes a Public Health Emergency of International Concern."

“A coordinated international response is [therefore]needed to improve surveillance, the detection of infections, congenital malformations, and neurological complications, to intensify the control of mosquito populations, and to expedite the development of diagnostic tests and vaccines to protect people at risk, especially during pregnancy.” There is, however, to public health justification for restrictions on travel or trade to prevent the spread of Zika virus. “At present, the most important protective measures are the control of mosquito populations and the prevention of mosquito bites in at-risk individuals, especially pregnant women.”

For full statement see: <http://www.who.int/mediacentre/news/statements/2016/emergency-committee-zika-microcephaly/en/>

Feminist approaches to the spread of the Zika virus are available here: [ARROW](#), [WGNRR](#)

Source: [NGOs beyond 2014](#)

## **YOUTH**

### **Strategizing meeting on youth SRHR issues**

The Asian-Pacific Resource& Research Centre for Women (ARROW) has conducted a 2-day strategizing meeting with some ARROW partners, friends and allies ‘Working with Youth: Understanding the Ways Forward’ to discuss needs of young people, challenges and realities as well as to strategize ways of work to overcome them. ASTRA Youth coordinator was the only participant representing Central and Eastern Europe, contributing to the meeting with expertise on youth SRHR issues and challenges in the region.

During the meeting, representatives of youth civil society discussed definitions of youth and what should be the bases for these definitions. They enumerated issues which impact youth most: migration; religious issues; intersecting aspects of identities such as ability, race, ethnicity, class; discrimination and culture. It was also discussed what strategies are used by youth to overcome challenges they face. The understanding of activism was also debated along with considering activist identity. Meeting participants also worked on specific strategies to carry youth activism forward, focusing on youth-led accountability and provision of data. The meeting was recorded graphically to capture crucial conclusions from the discussions and these graphics are available [here](#).

Source: [ARROW](#)

### **Croatian project on sexuality education for adolescents**

Center for Education, Counseling and Research – CESI will continue carrying out the project ‘Good advice is worth gold’ with the support of the City of Zagreb, to provide sexuality education to adolescents in Croatia in 2016.

Adolescents involved in the project will receive comprehensive information on sexual and reproductive health through online counselling at [www.SeZamweb.net](http://www.SeZamweb.net), educational materials

distributed in middle schools in Zagreb as well as workshops on sexuality and responsible and safe sexual behaviour held by project team in high schools. CESI aims to respond with this project to needs of adolescents, who don't receive comprehensive information on their sexuality. Parents remain reluctant to discuss sexuality and school also doesn't ensure access to comprehensive sexuality education. Informing young people on their sexual and reproductive health is particularly crucial in Croatia in the light of negative epidemiological trends and spread of STIs such as chlamydia and HPV.

Apart from the project, CESI is involved in continuous advocacy for sexuality education in schools and provision of comprehensive information on sexual and reproductive health to adolescents. The organization would like to open the special counselling clinic in Zagreb, where adolescents could receive all necessary information related to youth sexuality.

Source: [dalje.com](http://dalje.com)

### **Society Without Violence cooperation on enabling SRHR counselling for girls and young women in Armenia**

In order to respond to poor awareness of girls and young women on SRHR issues in Armenia and sexual and reproductive health challenges faced by them, Society Without Violence has started cooperation with an Armenian-Canadian medical clinic 'Maple Leaves'.

According to initial arrangements, the scope of cooperation includes awareness-raising sessions, medical consultations with gynecologists for project beneficiaries with a discount and provision of statistics and information on main sexual and reproductive health issues faced by young women. At the end of January the first event was arranged to be held in February within the V-Day movement. The event will be a seminar for young women facilitated by a gynecologist expert of Maple Leaves. The main topics of the seminar will cover issues related to women's sexual and reproductive health. Participants of the seminar will have an opportunity to openly or privately consult the doctor and will be granted an opportunity to use the consultation services at Maple Leaves with a 20-30% discount.

Source: [SWV](http://SWV)

### **SWV cooperates with an Armenian-Canadian Medical Clinic on sexual and reproductive health**

Considering the poor awareness of girls and young women on SRHR issues and the sexual and reproductive health problems faced by them, SWV started cooperation with an Armenian-Canadian Medical Clinic called "Maple Leaves". According to the initial arrangement the scope of cooperation includes awareness raising sessions, medical consultations of a gynecologist for our beneficiaries using discounts, and provision of statistics and information on the main sexual and reproductive health issues faced by young women. In the end of January the first event was arranged in the frames of this cooperation, which is a seminar-discussion for young women to be facilitated by a gynecologist expert from Maple Leaves in the frames of V-Day movement in February. The main topics of the session cover vagina issues, STIs, hymen, breast care, etc. The participants will be given

the chance to openly or privately ask questions to the doctor-specialist and will be granted an opportunity to use the consultation services at Maple Leafs with 20-30% discount.

Source: [SWV](#)

## **UPCOMING EVENTS**

### **One Billion Rising 2016: The Revolution Escalates**

For the fourth year, globally One Billion Rising activists are planning their rising events, artistic uprisings, panel discussions, press conference, town halls, movies, articles, gatherings, poetry, art, posters, actions, and protests to take place on and about 14 February. With the theme – ONE BILLION RISING: Rise for REVOLUTION 2016, this year’s campaign will escalate the collective actions of activists worldwide, and amplify their call for systemic changes towards ending violence against women and girls once and for all.

“We’ve danced, we’ve demanded justice, we’ve demanded changes. This year we are radicalising our actions — enlarging, deepening and expanding the revolution. Let’s continue to shift consciousness and be braver, bolder, more creative and determined with our actions. Communities will focus on the most marginalised women and girls to bring about true, long lasting change,” stated Monique Wilson, Global One Billion Rising Director.

Source: [One Billion Rising](#)

### **60<sup>th</sup> session of Commission on the Status of Women**

The sixtieth session of the Commission on the Status of Women will take place at the United Nations Headquarters in New York from 14 to 24 March 2016. Representatives of Member States, UN entities, and ECOSOC-accredited non-governmental organizations (NGOs) from all regions of the world will attend the session. The priority theme is: *Women’s empowerment and its link to sustainable development* and the review theme is *the elimination and prevention of all forms of violence against women and girls*.

See CSW60 Brochure [here](#).

Source: [UN Women](#)

### **12th Conference of the International Federation of Professional Abortion and Contraception Associates**

The international bi-annual conference for health care professionals working in the field of abortion care and contraception will take place in Lisboa, Portugal on 14-15 October 2016. The theme for this event is “Improving women's journeys through abortion”.

Access the conference flyer [here](#).

Source: [FIAPAC](#)

## **PUBLICATIONS**

[AnAlize Journal of Gender and Feminist Studies](#) issue no. 5 (19)/2015 with the theme of "Women, Mobilization and Political Representation" featured article: *The mobilisation of women in Central and Eastern European countries: how contextual elements shaped women's NGOs from Romania and Poland*. Access the article online [HERE](#).

### **Youth organizations' joint article on youth SRHR in Entre Nous**

The 83rd issue of the European Magazine for Sexual and Reproductive Health ENTRE NOUS "Sexual and reproductive health: are you satisfied?" has been published. It includes the joint article developed by ASTRA Youth, YSAFE, YouAct and Y-PEER, called "Youth matters! Why invest in young people's and adolescents' Sexual and Reproductive Health and Rights?"

The article discusses various youth SRHR issues such as violence against women and girls, access to SRH services and supplies, access to abortion services for young women and information and education about SRHR, as well as highlights why youth rights must be prioritized.

The Entre Nous issue with the article is accessible [here](#).

Source: [WHO Europe](#)

### **Factsheet on access to modern contraceptives in Eastern Europe and Central Asia**

IPPF has released the factsheet ['Access to modern contraceptive choice in Eastern Europe and Central Asia'](#), which presents data and trends in the contraceptives' usage in the region. The factsheet highlights major factors which influence contraceptive behaviours, demand and access such as lack of commitment by policymakers, widespread misinformation on modern contraception, barriers limiting access to family planning and limited range of modern methods. It also explains the role of donors to enable women in the region to access modern contraceptives.

Source: [IPPF](#)

## Member Profile



### **Society Without Violence, Armenia**

Society Without Violence was founded in 2001 to educate and empower women, to protect and promote their rights. Our vision is a society, where the state is governed by people, who respect and promote gender equality, where all women and girls enjoy equal human rights, opportunities and fundamental freedoms, where there is no gender based violence and discrimination and women equally participate on all decision making levels.

SWV has three main strategic pillars:

#### *Awareness Raising and Women's Empowerment*

SWV advocates for the integration of gender education in the secondary school curriculum and provides training for the school teachers and their trainers. We also organize awareness raising trainings and other public events addressing issues of gender equality, domestic violence, sexual and reproductive health and rights, women's leadership, etc. Throughout our work we strongly target women from the furthest regions of Armenia.

#### *Women, Peace, and Security*

SWV promotes the implementation of the UN Security Council Resolution 1325 and lobbies for the adoption of National Action Plan for Armenia. We contribute to the establishment of the civil society–state dialogue and promote women's participation in peace building and decision-making processes. We also launched the Women in Black movement in Armenia to spread the ideology of peace, anti-militarism and non-violent struggle among young women.

#### *Combating and Preventing Domestic Violence*

Rapid Response Unit, created under this pillar, is a multi-professional group including a social worker (as project coordinator), the journalist and the lawyer, who reveal, investigate and publicize domestic violence cases, advocate for the elimination of domestic violence in Armenia and lobby for the adoption of domestic violence law. SWV litigates some of the cases and provides social counseling to domestic violence survivors.

Webiste: [www.swv.am](http://www.swv.am)

Social media: [Facebook](#), [Twitter](#)



The Society Without Violence team



ASTRA Network Members: Albania - Albanian Family Planning Association; Armenia - Society Without Violence; Armenia - Women's Resource Center; Armenia - Women's Rights Center; Azerbaijan - Center "Women and Modern World"; Belarus - Women's Independent Democratic Movement of Belarus; Bulgaria - Bulgarian Family Planning and Sexual Health Association; Bulgaria - Bulgarian Gender Research Foundation; Bulgaria - Gender Education, Research and Technologies; Bulgaria - Demetra Association; Bulgaria - Gender Alternatives Foundation; Bosnia and Herzegovina – Sarajevo Open Center; Croatia - B.a.b.e.; Croatia – CESI; Croatia - Women's Room; Georgia – HERA XXI; Georgia – Real People, Real Vision; Georgia - Women's Center; Hungary – PATENT; Kazakhstan - The Legal Center for Women's Initiatives "Sana Sezim"; Lithuania - Family Planning and Sexual Health Association; Latvia - Latvia's Association for Family Planning And Sexual Health; Macedonia - Association for emancipation, solidarity and equality of women; Macedonia – H.E.R.A.; Macedonia – Shelter Center; Moldova – Family Planning Association; Moldova - Reproductive Health Training Center; Poland - Federation for Women and Family Planning; Romania - A.L.E.G.; Romania - AnA: Society for Feminist Analysis; Romania - Euroregional Center for Public Initiatives; Romania - The East European Institute of Reproductive Health; Russia - Novogorod Gender Center; Russia – Russian Association for Population and Development; Slovakia – Pro Choice; Tajikistan – Gender and Development; Ukraine - Women Health and Family Planning; Ukraine - Charitable SALUS Foundation; Uzbekistan - Future Generation

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