

UNGASS - Sexual and reproductive health and rights indicators

Marion Stevens (HST) and Marieta De Vos (MOSAIC)

PHASA Conference

3 June 2008



HEALTH
SYSTEMS
TRUST

- ❑ International process – NGOs from 16 Countries
- ❑ Collection of strategic data on Sexual and Reproductive Health and Rights based on the goals in the 2001 UNGASS Declaration.
- ❑ Initiated by GESTOS Soropositividade, Comunicação e Gênero, an NGO in Brazil, and was funded by the Ford Foundation.
- ❑ The purpose of the study was to identify gaps and progresses in the implementation of activities addressing sexual and reproductive health and rights of women and girls in the fight against HIV and AIDS.

□ PROCESS

- A first Forum workshop was held in July 2007, hosted by MOSAIC
- Open invitation – the participating organisations discussed the identified indicators, refined these and shared research and findings.
- Collation of data was a dynamic iterative process with three drafts circulated for further comments.
- Drafts were forwarded to the South African National AIDS Council process in drafting the South African 2008 country report.
- The third version of the document was circulated in November 2007 to additional organisations for comments.
- This draft was finalised in April 2008, launched May 2008
- It will be a shadow report and will be submitted to UNAIDS, as there is no mention of sexual and reproductive health and rights in the South Africa country report.
- A shadow report was also submitted in 2006.
- Not exhaustive, always more to say, a combined effort.

❑ PARTICIPATING ORGANISATIONS

- ❑ AIDS Legal Network (Cape Town)
- ❑ Gender Health and Justice Research Unit (University of Cape Town)
- ❑ Centre for the Study of AIDS (University of Pretoria)
- ❑ Centre for the AIDS Programme of Research in South Africa (CAPRISA – University of KwaZulu-Natal)
- ❑ Department of Obstetrics and Gynaecology – Nelson Mandela School of Medicine (University of KwaZulu-Natal)
- ❑ Health Systems Trust (HST)
- ❑ IPAS South Africa
- ❑ Mosaic Training, Service and Healing Centre for Women
- ❑ OUT LGBT Well-being (Pretoria)
- ❑ Rape Crisis (Cape Town)
- ❑ Reproductive Health Research Unit (RHRU)
- ❑ Reproductive Rights Alliance
- ❑ Tshwaranang Legal Advocacy Centre (TLAC)
- ❑ Western Cape Networking AIDS Community of South Africa (WCNACOSA)
- ❑ Women's Health Research Unit (University of Cape Town)

❑ ADDITIONAL CIRCULATION

- ❑ Sonke Gender Justice
- ❑ SWEAT
- ❑ Childline
- ❑ Children's Rights Centre
- ❑ Children's Institute
- ❑ Treatment Action Campaign
- ❑ AIDS Law Project
- ❑ Soul City
- ❑ Human Science Research Council



- ❑ **SECTION 1: THE SOUTH AFRICAN CONTEXT**

- ❑ Country Profile and Indicators
- ❑ Overview of The South African Health System, Sexual and Reproductive Health and HIV/AIDS Policy
- ❑ Laws and Policies Addressing Women's Health

- ❑ Health Systems Challenges
- ❑ Laws and Policy Specifically Dealing with HIV/AIDS and Sexual and Reproductive Health Rights

-
- Good legal framework
 - Epidemic feminized
 - Endemic violence
 - Health system challenges
 - Adolescent services improving?
 - Civil society
 - Abortion services
 - Addressing VAW
 - Vertical transmission
 - Culture and gender

□ SECTION 2: UNGASS GOALS AND PROPOSED INDICATORS

- Goal 37 – Government Leadership in the HIV/AIDS Epidemic
- Goal 52 – Prevention (Wide range of programmes)
- Goal 53 – Prevention (HIV/AIDS information and education)
- Goal 54 – Prevention (Perinatal transmission)
- Goal 59 – Human Rights (Promoting women’s rights)
- Goal 60 – Human Rights (Gender equality)
- Goal 61 – Human Rights (Violence and sexual abuse)
- Goal 62 – Reduction of Vulnerability (Poverty, illiteracy, etc.)
- Goal 63 – Reduction of Vulnerability (SRHR Programmes)
- Goal 63 – Reduction of Vulnerability (SRHR Programmes)
- Goal 64 – Reduction of Vulnerability (Vulnerable women)
- Goal 65 – Orphans
- Goal 69 – Mitigation of Social and Economic Effects
- Goal 72 – Research and Development

□ Goal 37 – Government Leadership in the HIV/AIDS Epidemic

- Potential of SANAC – sectors have absorbed a lot of capacity, some functioning better than others.
- Government unclear resources devoted.
Corruption report
- There is not a well organised Positive women's sector

-
- Goal 52 – Prevention (Wide range of programmes)
 - Declining teen pregnancy and HIV epidemic amongst teens – still vulnerable
 - Schools
 - Lesbian health
 - Condom/Femidoms
 - Cultural issues
 - Drugs
 - Cervical Cancer

-
- Goal 54 – Prevention (Perinatal transmission)
 - Significant attention
 - Uptake 68%, clinical guidelines and implementation. Not equitable – syphilis testing
 - Health workers – HIV positive women should not want to have children
 - No clinical guidelines for Adult women that acknowledge SRHR – NGOs responding. Forced contraception/sterilization

-
- Goal 59 – Human Rights (Promoting women’s rights)
 - Good legal framework –
 - Not matched with integrated services
 - Abortion services - 51% designated clinics, cervical cancer screening
 - Lesbian attacks
 - Working with men
 - Little work on women as workers

□ Goal 60 – Human Rights (Gender equality)

- Legal provision - not matched by services
- Life orientation
- NGOs
- Cultural issues - dry sex, virginity testing, male circumcision

-
- Goal 69 – Mitigation of Social and Economic Effects
 - Costs of treatment – adherence (Rosen)
 - Limited work on socio-economic impact with sex disaggregated data
 - Research quality –
 - Reproductive health not on government research priority list

□ Goal 72 – Research and Development

- Unhelpful messaging on women – sensationalise sexuality
- Ethical committee review – participation of HIV positive women
- No pregnancy register
- Microbides

□ SECTION 3: STRENGTHS AND CHALLENGES

□ **Strengths**

- Good sexual and reproductive health policy
- ~~Political will – government supports women's rights~~
politically and in policy.

□ **Challenges**

- Lack of integration of sexual and reproductive health and HIV/AIDS practice
- HIV/AIDS politics
- Funding and leadership
- Conservatism and complex cultural issues not being addressed comprehensively
- Violence against women is endemic
- Lesbians have experienced violence
- There are no champions in SANAC who advance a sexual and reproductive health agenda, as evidenced by the South African country report not dealing with this issue

□ **Civil Society calls on government to meet international HIV/AIDS obligations regarding sexual & reproductive health**

- In 2001 at the United Nations General Assembly Special Session on HIV/AIDS (UNGASS) South Africa signed the Declaration of Commitment in addressing the pandemic. Twelve of the Declaration's goals relate to crucial aspects of sexual and reproductive health and rights (SRHR).
- During the past few months a study was done to examine progress made in South Africa with these indicators and to identify gaps in the implementation of the Declaration. While South Africa has an impressive legal and policy framework, health systems challenges, lack of integration of HIV/AIDS and SRHR and implementation of services have made it difficult to overcome challenges.
- The study forms part of a bigger international effort through which NGOs from sixteen countries reviewed the relevant indicators in their countries.
- Some twenty South African NGOs have spent the past ten months collating research and finalising a report. We believe that sexual and reproductive health and rights are not addressed sufficiently in the South African country report that will be presented at the United Nations in June. We therefore urge Government to send a high level delegation that will include civil society women representatives who are sexual and reproductive health and rights champions to address the present gaps in our national response to HIV/AIDS in this area.
- We call on Government to consider the findings of this research and to explore the integration of SRHR issues in relation to HIV/ AIDS through the continuum of care. This would strengthen the gains that have been made in relation to sexual and reproductive health policies and services.
- Our recommendations to better meet the SRHR imperatives of the UNGASS Declaration, include:
 - 1. The need to integrate sexual and reproductive health and rights services in relation to HIV/AIDS in addressing this epidemic (for example – STI services need to deal with Violence Against Women; HIV positive women need to be afforded the choice to continue their pregnancy or to terminate).
 - 2. Issues of sexual and reproductive health and rights for women living with disabilities need to be addressed and further research need to be done to document experiences
 - 3. The need to strengthen the voices of HIV positive women within SANAC
 - 4. Strengthen adult women's treatment guidelines that include a focus on women particularly deal with the continuum of care and respects women's choices to parenthood in treatment regimes
 - 5. Leaders must denounce the homophobic violence against black lesbian women and take active steps to ensure the swift investigation and prosecution of offenders
 - 6. Health facilities to offer unlimited access to SRH services for migrant and refugee women.
 - 7. A review of the National Cervical Cancer Screening policy with specific reference to new vaccines registered and also the need to increase coverage to HIV positive women
 - 8. We support voluntary testing of pregnant women, however attention need to be given to the barrier that mandatory/provider initiated testing imposes on women in shying away from services.
 - 9. Increased research to explore the impact of male circumcision on women, noting that currently research only notes benefits for men.

THANK YOU

- Marion Stevens - mstevens@hst.org.za
- www.hst.org.za

