Unzipping CEDAW
A Guide to the Rights of Key Affected Women and Girls
Through this guide, **Unzip the Lips** aims to promote the engagement of **Key Affected Women and Girls**, (KAWG) community networks and NGOs with the **Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW)**. The goal is to advocate for the needs and rights of these groups, and to ensure that their sexual reproductive health and rights are respected, protected and fulfilled.

**WHAT WILL YOU LEARN IN THIS GUIDE?**

In this guide, you will learn about the purpose of CEDAW. You will also learn about why and how to engage with this international agreement to further the sexual and reproductive health and rights of KAWG.

This guide provides concrete information regarding your rights, and how to claim them at a national level. Since national laws don’t automatically ensure the application and respect of women and girl’s rights, KAWG community networks and NGOs play an important role by advocating for positive change. This includes: legal reforms, developing gender-responsive policies to end discrimination, and defending the rights of women and girls as they are enshrined in CEDAW. One specific channel for pushing advocacy goals forward is the reporting process, which can bring attention to key concerns that may otherwise be missed in reports submitted by Member States.

**WHO ARE “KEY AFFECTED WOMEN AND GIRLS” (KAWG)?**

Unzip the Lips defines KAWG as including:
- Women and girls who are living with HIV
- Female sex workers
- Women and girls who use drugs
- Transgender people
- Mobile and migrant women
- Female prisoners
- Women with disabilities
- Women in sero-discordant relationships as well as intimate female partners of men who engage in behaviours that put them at a higher risk of HIV infection
WHAT IS CEDAW?

CEDAW makes State Parties accountable for reacting to discrimination against women, regardless of whether such acts or omissions are perpetrated by the State or by private actors. CEDAW ensures that States respond to discriminatory behavior, that they identify means of appropriate response, and that they use them to achieve results.

HOW DOES CEDAW WORK?

CEDAW was adopted by the United Nations General Assembly in December 1979, and took legal effect in 1981. 189 countries in the world have become a ‘State Party’ to the treaty through ratification or accession, which means they are legally bound to uphold the obligations and commitments of CEDAW.

There are a few exceptions. Before 1981, countries could become ‘signatories’, which means the state is not legally bound to the treaty, but it obliges the state to refrain from acts that would defeat or undermine CEDAW’s objective and purpose. The two countries that are signatories to CEDAW are The United States of America and Palau.

There are also a few countries that have not become a State Party to CEDAW: Iran, Somalia, Sudan and Tonga. For more information, please see: https://treaties.un.org/Pages/ViewDetails.aspx?src=TREATY&mtdsg_no=IV-8&chapter=4&lang=en

States that have ratified CEDAW and become State Parties are required to submit an initial report on the status of women in their country, within one year of ratification. Thereafter, they are obligated to submit a report every four years to the CEDAW Committee, describing the progress made towards fostering gender equality. The process of submitting, reviewing and incorporating the recommendations made by the CEDAW Committee is referred to as The Review Process. While NGOs can contribute to this process through NGO Shadow Reports or Alternative Reports, individuals and groups can also play a critical role in making State Parties accountable through the Individual Complaint Mechanism. This process is described under the “Two Levels of Action” section in the following pages.

1 “The term “discrimination against women” shall mean any distinction, exclusion or restriction made on the basis of sex which has the effect or purpose of impairing or nullifying the recognition, enjoyment or exercise by women, irrespective of their marital status on a basis of equality of men and women, of human rights and fundamental freedoms in the political, economic, social, cultural, civil or any other field” [Art. 1]
Why Engage with CEDAW?

Gender inequality and all forms of gender-based violence can increase vulnerability to HIV, and result in a higher rate of HIV among women and girls. Punitive laws and policies also lead to stigma and discrimination, and can increase social exclusion, thereby limiting access to HIV services and other sexual and reproductive health services. Engaging with CEDAW presents a unique opportunity for KAWG to claim their rights, and work towards addressing these issues.

Countries in the Asia-Pacific region have committed to comprehensively address needs of those most at risk of HIV; however, the vulnerabilities, needs, and rights of Key Affected Women and Girls remain largely neglected in regional policy and program discussions. Engaging with CEDAW is a central way of combating this issue, and of supporting KAWG.

Why Should KAWG NGOs be Involved in the CEDAW Reporting Process?

KAWG NGOs are an important link between communities, individuals and governments; as such, they are essential to the process of informing and shaping State Party Reports. KAWG NGOs can provide specific analysis on the impacts of intersecting forms of discrimination faced by different groups of KAWG. As advocates for KAWG’s issues, and representatives of KAWG communities, NGOs are best equipped to inform the CEDAW Committee on key areas of concern.

KAWG NGOs Reporting plays a critical role in providing the CEDAW Committee with national-level information on the status of women, and in turn, is essential to upholding State accountability.

What Does CEDAW Say About Transgender People and Sex Workers?

CEDAW is silent on transgender and intersex people in the convention and does not mention sexual orientation or sex workers; Article 6 refers negatively to “prostitution” (“States Parties shall take all appropriate measures, including legislation, to suppress all forms of traffic in women and exploitation of prostitution of women”).

However, the discourse around gender identity, sexual orientation, rights and sex work has evolved over the years. CEDAW can be a powerful tool to advocate for the health, economic, social and cultural rights of all women and girls, including women and girls who are living with HIV, female sex workers, women and girls who use drugs, transgender people, lesbian and bisexual women, mobile and migrant women, female prisoners, women with disabilities, women in sero-discordant relationships as well as intimate female partners of men who engage in behaviors that put them at a higher risk of HIV infection.

By engaging with CEDAW through the Reporting Process, women can raise their specific views and engage in processes to hold governments accountable for fulfilling their commitments to realize women’s rights.

Raise Awareness of Your Specific Issues

Ensure your views are fully understood

Provide concrete solutions

By Raising your Voice Change Can Happen

Recently, the CEDAW Committee provided a Recommendation towards the decriminalization of sex work: “The Committee recommends that the State party (...) (c) Review the Law on Administrative Violations Sanctions (2012) and the Law on Administrative Penalties (2012), with a view to decriminalizing women, in prostitution”, CEDAW Committee’s Concluding Observations on Viet Nam’s Report (10 July 2015).
NGOs and individuals all play a critical role in engaging with CEDAW. NGOs can engage in the Reporting Process by drafting a Shadow Report (or an Alternative Report if no State Party Report is available). Through the Optional Protocol to CEDAW, individuals may use the Individual Complaint Mechanism to engage with CEDAW.

### A. Reporting Process

The **Reporting Process** is a key opportunity for NGOs and Civil Society to engage with CEDAW. It is essential that KAWG NGOs and community networks understand how the **Reporting Process Cycle** works, so that they can act on it. A central way of doing so is by submitting an **NGO shadow report**, on time, and ensuring that it is compliant with the **CEDAW guidelines**.

#### What are the steps in this Process?

1. **State Party reporting to the CEDAW Committee**
2. **NGO Shadow reporting to the CEDAW Committee**
3. **Dialogue between the CEDAW Committee and the State Party**
4. **Concluding observations by the CEDAW Committee**
5. **Follow-up by the CEDAW Committee, the State Party, and NGOs**

#### What is the CEDAW Committee?

Elected by States Parties, the **CEDAW Committee** consists of 23 independent experts. These experts are nominated by their respective States, but serve a four-year term in an independent capacity.

The Committee members review the **States Parties’ Report** for compliance with obligations of CEDAW.

Involvement in the nomination process and monitoring elections is crucial for KAWG NGOs since the composition of the Committee plays a great role in the **Concluding Observations** (which will later bind the State Party in review).

For more information, please see: "Country Nomination for CEDAW Committee Members", in the “in the “Additional Action Points” section.

#### What is an Official State Party Report?

An **Official State Party Report** is a document submitted for review by a given State Party that has ratified CEDAW. The **State Party Report** comprises the Treaty-Specific Report and a **Common Core Document (CCD)**.

The Treaty-Specific Report addresses the substantive articles of the CEDAW and indicates the impact of policies to implement the Convention. The CCD describes the laws, policies, institutions and remedies relating to human rights, as they pertain to discrimination. It also provides an account of the State Party’s geography, economy, population, and political system.

#### What is a NGO Shadow Report?

**NGO Shadow Reports** and **Oral Presentations** are the direct inputs of NGOs into the Reporting process when the government has submitted an **Official State Party Report**.

**Oral Presentations** can be given at the **Pre-Sessional Working Group Meeting**, and at the **CEDAW Committee Review Session**.

The NGO Shadow Report provides an opportunity to critique, and compares to the **State Party Report**.

They serve to:
1. **Provide information** on the status of substantive rights, and what can be done to improve them
2. **Address issues** that were inadequately addressed or left out of the **State Party Report**

**NGO Shadow Reports** must comply with the Committee’s updated guidelines. Please see: [http://bit.ly/1Rhc2hl](http://bit.ly/1Rhc2hl)

#### What is an Alternative Report?

An **Alternative Report** is a NGO Report, written when no **Government Report** is available. The Government Report may not be available, either because the government has not written one yet, or because it was submitted too late.

#### What are Concluding Observations?

**Concluding Observations** are a set of recommendations on how a country can improve compliance with its obligations under CEDAW.

The **Concluding Observations** are provided every four years by the **CEDAW Committee** after review of **States’ Parties Reports** and after a constructive dialogue at the CEDAW Committee Review Session.

They are used as a benchmark for compliance with the treaty. These comments provide recommendations on how a country can improve its compliance with its obligation under CEDAW.

### B. Individual Communications

The **Optional Protocol** to CEDAW builds additional accountability for State Parties, allowing the CEDAW Committee to hear complaints and inquiries from individuals or groups.

The protocol establishes that communications must respect certain criteria in order to be admitted, including that domestic remedies have been exhausted. See [http://www.un.org/womenwatch/daw/cedaw/protocol/text.htm](http://www.un.org/womenwatch/daw/cedaw/protocol/text.htm)

An **Individual Communication** is a complaint from a person or a group alleging violations of CEDAW by States that are Party to the **Optional Protocol** (states that have ratified the Convention and the Protocol).

The **CEDAW Committee** has on several occasions ruled in favor of individuals inquiring under the **CEDAW Optional Protocol**. For examples please see: [http://juris.ohchr.org/](http://juris.ohchr.org/) and search for “CEDAW” in the keyword window.

---

**Violation of international laws does matter**. As the CEDAW Committee stated in 2011: “States parties are responsible for judicial decisions that violate the provisions of the Convention”, CEDAW/C/57/D/34/2011, Philippines.
If the State Party has NOT ratified CEDAW
- Build an advocacy network with government bodies, media, and KAWG NGOs (sex workers, transgender people, women who use drugs, young key affected women and girls, women and girls living with HIV, and others)
- Establish advocacy outreach with pro-CEDAW coalitions
- Develop policy briefs/memos for your government, urging it to ratify the convention

If the State Party HAS ratified CEDAW
- CEDAW Review schedule & reporting deadlines
  - Find out when your country review is due. This can be done by referring to review schedules, provided on the website of the Office of the High Commissioner for Human Rights (OHCHR)-CEDAW. Schedules are usually released one year in advance: [http://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/MasterCalendar.aspx](http://tbinternet.ohchr.org/_layouts/TreatyBodyExternal/MasterCalendar.aspx)
  - Establish contact with government representatives or the department that is involved in preparation of your government/ State Party Report
  - Approach UN Women Country Offices for technical advice and advocacy outreach whenever possible. This can help to build a relationship with the government, or with other women’s networks that are already engaged in the process

- State Party Report
  - Reach out to your government representative/department on behalf of your KAWG NGO, to participate in preparation of the State Party Report. Collaboration with your country government in this process will lay an emphasis on KAWG’s issues, which are often overlooked
  - Monitor the preparation of the State Party Report by urging your government to liaise with KAWG NGOs to include your specific issues in the report
  - When your government releases its State Party Report to the CEDAW Committee, obtain a copy to assess what issues have been missed
  - Begin to organize a KAWG NGO coalition to address issues that have not been included. Refer to the OHCHR-CEDAW website for an agenda with which to plan your NGO’s intervention timetable

- NGO Shadow Report
  - Organize with your KAWG NGOs coalition and set a deadline for completion of your NGO Shadow Report
  - Organize a capacity-building session to build engagement among members of your KAWG community networks; consider collaborating with the International Women’s Rights Action Watch (IWRAW)-Asia Pacific for this purpose [http://www.iwraw-ap.org/cedaw/using-cedaw/for-ngos/](http://www.iwraw-ap.org/cedaw/using-cedaw/for-ngos/)
  - Reach out to national or regional KAWG NGOs that have previously engaged in CEDAW advocacy, in order to have them participate in capacity-building
  - Your KAWG NGO should also consider reaching out to your country’s National Human Rights Commission (NHRC) for joint-hosting the capacity-building session
  - Convene a consultation meeting with your NGO’s coalition to put together a list of issues for KAWG
  - Develop your KAWG NGO Shadow Report, keeping in the KAWG’s issues that have been missed, or not adequately addressed. Do provide data and evidence where possible, while also keeping the report succinct. **NGO Shadow Reports are not confidential**

- Pre-Sessional Working Group Meeting (Prior to your country’s CEDAW Review Session)
  - Give an Oral Presentation of your KAWG’s issues to the CEDAW pre-sessional working group, urging them to consider your list of issues

- CEDAW Committee Review Session
  - Ensure that your KAWG NGO Shadow Report is online, under “Country Specific Information”, which can be found in the top right corner of the OHCHR website (select “CEDAW”) [http://www.ohchr.org/en/hrbodies/cedaw/pages/cedawindex.aspx](http://www.ohchr.org/en/hrbodies/cedaw/pages/cedawindex.aspx)
  - Disseminate your released Shadow Report widely: have hard copies of your KAWG NGO Shadow Report at hand, use social media networks and reach out to your local press
  - Approach OHCHR staff to request an informal meeting with CEDAW Committee members; this is crucial for lobbying your KAWG’s issues, before and/or during the review meeting
  - Ask OHCHR staff to place you – or to nominate a KAWG representative from your community network to be placed – on the speakers’ list for the NGO presentations
  - Make your Oral Presentation to the CEDAW Committee; keep it short and crisp, and highlight any change of status from the date of submission of your KAWG NGO Shadow Report
  - Attend your country’s review session presentation
  - Continue to lobby individual CEDAW Committee members during the review session for inclusion in the Committee’s Concluding Observations

- CEDAW Committee’s Concluding Observations
  - Obtain the Committee’s Concluding Observations and disseminate amongst your KAWG networks, affiliated partners, and the local media
Draw an analysis based on what was successful and what was missing in the context of your KAWG constituency. Also consider publishing an immediate report to build awareness of overlooked KAWG issues.

- **Country Nomination for CEDAW Committee Members**
- **Overview of members and representatives on the Committee can be found here:** [http://www.ohchr.org/EN/HRBodies/CEDAW/Pages/Membership.aspx](http://www.ohchr.org/EN/HRBodies/CEDAW/Pages/Membership.aspx)
- Before March of the election year, reach out to your government and begin to propose names of women’s activists and/or others, who have a progressive stance on issues faced by KAWG.
- Help build support for your nominee(s) by campaigning with the government, NGO affiliates and media. Consider sending a letter, explaining how you know the nominees, and give your reasons for recommending specific names for consideration (both in your region and in others).
- Ensure your state votes for your candidates:
  - States Parties meeting take place from June-July

**Follow-up from Concluding Observations**

- Monitor how your government acts and reacts to the recommendations contained in the Committee’s Concluding Observations.

**Towards the next Review Cycle**

- Monitor if your government plans to, or manages to submit the next report on time:
  - If it does, follow the procedure described in the “Take Action Step by Step” Section
  - If it does not release one on time, develop an NGO Alternative Report (Same consultation procedure applies)

**How Key Affected Women & Girls Networks Have Made a Difference**

In 2012, the Association of Positive Women in Indonesia, *Ikatan Prepuan Positif Indoensia (IPPI)*, presented findings from *Positive and Pregnant: How Dare You* (2012) to the CEDAW Committee.

Concluding Observations called the Indonesian government to:

- “Establish a monitoring system for the effective and transparent delivery of health care services”
- “Ensure that women and girls infected with HIV/AIDS are not discriminated against and are given appropriate assistance”

In response, the government strengthened its regulation on HIV and AIDS Countermeasures (Regulation 21).

- Prohibiting healthcare facilities to refuse:
  - Care to people living with HIV
  - Confidential HIV testing
- Making it mandatory for healthcare facilities (that do not provide specific services needed by people living with HIV)
- To refer the patient to other facilities that do so
In 2013, Cambodia Community of Women Living with HIV (CCW) engaged with IPPI for peer leadership and learning, based on IPPI’s previously successful CEDAW efforts.

- **Advocacy Strategy**
  - **Cambodia**
  - Capacity-building activities were supported by UN Women and UNDP, and targeted WLHIV community networks.
    - This included a training programme with the International Women’s Rights Action Watch (IWRAW)
    - CCW developed a literature review to analyze evidence on issues and challenges faced by WLHIV at a national level.
    - This review led to a report, which was later incorporated into an NGO Shadow Report developed by CCW.

Concluding Observations included:

  “Discrimination against pregnant mothers living with HIV/AIDS and the pressure on them from medical practitioners to undergo abortion”.

In 2014, UNDP supported IWRAW-led capacity-building and consultation programme for WLHIV community networks.

- **Advocacy Strategy**
  - The National Alliance on Women Organization (NAWO) worked with WLHIV to compile the NGO Shadow Report.
  - A representative from the WLHIV community delivered an Oral Statement at the review meeting in Geneva, with technical assistance from IWRAW.
  - The national sex workers’ network, Sampada Gramin Mahinla Sanstha (SANGRAM) led a parallel process to ensure sex workers’ issues are included in the Shadow Report.

Concluding Observations included:

  - **India**
    - Responding to discrimination faced by WLHIV: “a comprehensive anti-discrimination legislation which prohibits discrimination on all grounds”
    - Responding to disparities in health care services delivery: “a system for effectively monitoring the delivery of transparent health-care services”
    - Responding to discrimination faced by sex workers, the Committee called on the government to address: “the persecution of women in prostitution as a result of measures taken to address trafficking such as raid and rescue operations”
    - Responding to same-sex relationships, government was asked to: “take efforts towards eliminating any criminalization of same sex relations by studying the possibility, as accepted by the State party at the Universal Periodic Review.... And [to] take note of the ruling of the India Supreme Court”

In response, the Rajya Sabha (Upper House of Parliament of India) reiterated its commitment to its HIV Prevention & Control Bill, especially for removal of discrimination in the delivery of health services for PLHIV.

In 2013, China’s Ministry of Health (MoH) invited women with HIV to speak at a consultation meeting led by National Alliance on Women Organization (NAWO) and UN Women, and engaged with IPPI for peer leadership and learning, based on IPPI’s previously successful CEDAW efforts.

- **Advocacy Strategy**
  - **China**
    - peer-to-peer learning and local capacity-building to focus on issues of discrimination in institutional and health care settings and to address the lack of engagement of Chinese women in national policy discussions.
    - The Women’s Network Against AIDS developed a comprehensive Shadow Report, highlighting issues of stigma and discrimination against sex workers and WLHIV and the sub-optimal quality of health care for WLHIV. The report also considered specific ways of creating an enabling policy environment; one such method was the repeal of “contradictory AIDS prevention strategies”
    - The LBT Rights Initiative submitted a Shadow Report and made Oral Statements to the CEDAW Review Committee, highlighting discrimination and violence such as the forceful use of ‘conversion therapy’
    - The Committee called for greater inclusion of Chinese women and civil society in its policy spheres, including:
      - “Intensify[ing] the implementation of existing legal measures to address sex-selective abortions, forced abortions and sterilizations”
      - “Recommends that the State party take measures to eliminate discrimination against women living with HIV and provide support for the women’s community organizations which care for them”.

In response, the Chinese government stated its commitment for the first time: “the rights of all Chinese citizens were protected by Chinese law, regardless of their sexual orientation”
In 2014, UN Women and UNAIDS organized a joint capacity building workshop titled “Know and claim your rights through CEDAW reporting framework”. This program trained 25 leaders of an informal network of WLHIV in across Viet Nam. Following the workshop, the network joined a larger group of civil society networks advocating for women’s rights and gender equality. This larger partnership integrated the efforts of the WLHIV group with those of 20 other organizations, and led to the drafting of a Shadow Report that highlighted primary concerns. The issues and recommendations raised were subsequently reflected in the Concluding Observations made by the CEDAW Committee. Following CEDAW’s reporting, the WLHIV network is now preparing a follow-up action plan to advocate for the implementation of the Concluding Observations.

The Committee has recommended that, in 2015, Viet Nam should:

- Strengthen enforcement of the Law on HIV Prevention and Control (2006) in order to address stigma and discrimination against women living with HIV
- Raise men’s awareness – including those with risky behaviours and those living with HIV – of their role in reducing transmission of HIV to their sexual partners.
- Ensure that everyone has access to: free, age-appropriate and quality information on sexual and reproductive health; affordable family planning services and contraceptives, regardless of marital status, disability, ethnicity and geographical location.
- Sterilization and use of contraceptives should be made based on the fully informed consent and voluntary will of women and girls concerned
- Introduce age-appropriate education on sexual and reproductive health in school curricula.
- Facilitate access to contraceptives and quality reproductive helth services, assistance and counseling by adolescent girls and boys.
CEDAW AT A GLANCE

WHAT DOES CEDAW LOOK LIKE?

The Convention comprises 30 Articles:

- Articles 1-5: General substantive framework of the Convention
- Articles 6-16: Provides specific substantive areas of the Convention
- Articles 17-23; Outlines the role of the CEDAW Committee and procedural information
- Articles 23-30; Outlines the administration and interpretation of the Convention

State obligations are found in General Undertakings (Articles 2-5), and Specific Undertakings (Articles 6-16).

Below is a brief summary of CEDAW. The full CEDAW text can be found at: http://www2.ohchr.org/english/law/cedaw.htm

1. Convention

Articles 2, 5, 11, 12 and 16 of the Convention require the States parties to "act to protect women against violence of any kind occurring within the family, at the work place or in any other area of social life". Articles 2 and 3 specifically establish a comprehensive obligation to eliminate discrimination in all its forms, in addition to the specific obligations under Articles 5-16.

Discrimination: Article 1 mentions "gender-based violence, that is, violence that is directed against a woman because she is a woman or that affects women disproportionately". It includes acts that "infect physical, mental or sexual harm or suffering, threats of such acts, coercion and other deprivations of liberty". The Convention further states that "gender-based violence may breach specific provisions of the Convention, regardless of whether those provisions expressly mention violence"

Comprehensive Sex Education: Article 10(h) mentions that "States parties provide to women and girls specific educational information to help ensure the well-being of families, including information and advice on family planning."

Access to Health Care: Article 12 calls for States parties to "eliminate discrimination against women in the field of health care in order to ensure, on a basis of equality of men and women, access to health care services, including those related to family planning; States Parties shall ensure to women 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"

Accessible Sexual and Reproductive Health Services: Article 14 (2)(b) requires "States parties to ensure access for rural women to adequate health care facilities, including information, counseling and services in family planning"

Sexual and Reproductive Health: Article 16 (and Article 5) states that women have "[t]he same rights to decide freely and responsibly on the number and spacing of their children and to have access to the information, education and means to enable them to exercise these rights". Furthermore, general comments from the CEDAW Committee mention that "compulsory sterilization or abortion adversely affects women's physical and mental health, and infringes [on] the right of women to decide on the number and spacing of their children."

2. General Recommendations

Outside of the convention text, the CEDAW Committee also makes specific general recommendations on particular issues that require special attention by States Parties and provides guidance for implementation.

Violence Against Women: General Recommendation (#12, 1989; #19, 1992) calls for:

- "Legislation in force to protect women against the incidence of all kinds of violence in everyday life (including sexual violence, abuses in the family, sexual harassment at the work place etc.)."

- States parties to "ensure that measures are taken to prevent coercion in regard to fertility and reproduction and to ensure that women are not forced to seek unsafe medical procedures such as illegal abortion because of lack of appropriate services in regard to fertility control". The recommendation further states that "protective measures are taken, including counseling, rehabilitation and support services for women who are the victims of violence or who are at risk of violence." Recommendation #12, (1989)

- States parties to "ensure that laws against family violence and abuse, rape, sexual assault and other gender-based violence give adequate protection to all women, and respect their integrity and dignity. Gender-sensitive training of judicial and law enforcement officers and other public officials is essential for the effective implementation of the Convention". Recommendation #19 (1992)

Women and AIDS: General Recommendation (#15, 1990) calls for:

- "States parties to intensify efforts in disseminating information to increase public awareness of the risk of HIV infection and AIDS, especially in women and children, and of its effects on them"

- "Programmes to combat AIDS should give special attention to the rights and needs of women and children, and to the factors relating to the reproductive role of women and their subordinate
position in some societies which make them especially vulnerable to HIV infection”

“States parties ensure the active participation of women in primary health care and take measures to enhance their role as care providers, health workers and educators in the prevention of infection with HIV; That all States parties include in their reports under article 12 of the Convention information on the effects of AIDS on the situation of women and on the action taken to cater to the needs of those women who are infected and to prevent specific discrimination against women in response to AIDS.”

Women and Health: General Recommendation (#24, 1999) calls for States parties to:

“Give special attention to the health needs and rights of women belonging to vulnerable and disadvantaged groups, such as migrant women, refugee and internally displaced women, the girl child and older women, women in prostitution, indigenous women and women with physical or mental disabilities”

“Not restrict women’s access to health services or to the clinics that provide those services on the ground that women do not have the authorization of husbands, partners, parents or health authorities, because they are unmarried or because they are women. Other barriers to women’s access to appropriate health care include laws that criminalize medical procedures only needed by women and that punish women who undergo those procedures”

“Ensure 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, in particular, allocate resources for programmes directed at adolescents for the prevention and treatment of sexually transmitted diseases, including HIV/AIDS”

“The issues of HIV/AIDS and other sexually transmitted disease are central to the rights of women and adolescent girls to sexual health. Adolescent girls and women in many countries lack adequate access to information and services necessary to ensure sexual health. Women in prostitution are also particularly vulnerable to these diseases. States parties should ensure, without prejudice and discrimination, the right to sexual health information”

“Prioritize the prevention of unwanted pregnancy through family planning and sex education and reduce maternal mortality rates through safe motherhood services and prenatal assistance. When possible, legislation criminalizing abortion could be amended to remove punitive provisions imposed on women who undergo abortion”

“Should ensure the rights of female and male adolescents to sexual and reproductive health education by properly trained personnel in specially designed programmes that respect their rights to privacy and confidentiality”

“Should report and should not permit forms of coercion, such as non-consensual sterilization, mandatory testing for sexually transmitted diseases or mandatory pregnancy testing as a condition of employment that violate women’s rights to informed consent and dignity”

“A comprehensive national strategy is implemented to promote women’s health throughout their lifespan. This will include interventions aimed at both the prevention and treatment of diseases and conditions affecting women, as well as responding to violence against women, and will ensure universal access for all women to a full range of high-quality and affordable health care, including sexual and reproductive health services”

“Gender-sensitive training is provided to enable health care workers to detect and manage the health consequences of gender-based violence”

“Require all Health service to be consistent with the human rights of women, including the rights to autonomy, privacy, confidentiality, informed consent and choice”

Women Migrant Workers: General Recommendation (#26, 2009)

While the CEDAW Committee recognizes that women migrant workers “may face sex- and gender-based discrimination, including compulsory HIV and AIDS testing for women returnees”, there is no explicit recommendation that calls for elimination of mandatory HIV testing for migrant workers. The recommendation, however, recognizes that:

“All required pre-departure HIV/AIDS testing or pre-departure health examinations must be respectful of the human rights of women migrants”

Sexual Orientation and Gender Identity (SOGI): General Recommendation (#27, 2010 and #28 on the Core Obligations of States Parties under Article 2 of CEDAW) recognizes that:

“Discrimination older women experience is often multidimensional, with age discrimination, compounding other forms of discrimination based on sex, gender, ethnic origin, disability, levels of poverty, Sexual Orientation and Gender Identity, migrant status, marital and family status, literacy and other grounds”

“Discrimination of women based on sex and gender is inextricably linked with other factors that affect women, such as race, ethnicity, religion or belief, health, status, age, class, caste, and sexual orientation and gender identity”

Women in Conflict Prevention, Conflict and Post-Conflict Situations > General Recommendation (#30, 2013)

The Committee recognizes that “conflict-related gender-based violence results in a vast range of physical and psychological consequences for women, such as injuries and disabilities, increased risk of HIV infection and risk of unwanted pregnancy resulting from sexual violence”. The Committee further acknowledges that “power imbalances and harmful gender norms make women and girls disproportionately more vulnerable to HIV infection and these factors become more pronounced in conflict and
ACKNOWLEDGMENTS

UNZIP the LIPS would like to thank:

- UN Women Regional Office for Asia and the Pacific for their financial and technical support
- UN Women Country Offices from Asia and the Pacific that assisted with their expertise
- UNZIP the LIPS Technical Advisory Committee (TAC) Members for their guidance to ensure that communities’ perspectives are included
- Inter-Agency Task Team on HIV and Gender (IATT) Members for their valuable technical assistance
- Asia Pacific Alliance for Sexual and Reproductive Health and Rights (APA) for hosting UNZIP the LIPS and facilitating the realization of this guide

REFERENCES

IWRAW Asia Pacific Occasional Papers Series No 1 "The Status of CEDAW Implementation in ASEAN Countries and Selected Muslim Countries.


For more information visit http://unzipthelips.org/

Like Unzip the Lips on Facebook
Follow @UnziptheLips on Twitter

Contact us

Nina Miletti
Unzip the Lips Coordinator
unzip@asiapacificalliance.org
Tel: +66 9 2968 2801

18th Floor, Sathorn Thani II,
92/52 North Sathorn Road
Bangkok 10500, Thailand

Copy-edited by Roble Poe Velasco-Rosenheim
Graphic Design by Lowil Fred Espada

This material may be reproduced or translated for non-commercial purposes, provided that UNZIP the LIPS is duly acknowledged and informed

November 2015

Post-conflict settings. HIV-related stigma and discrimination is also pervasive and has profound implications for HIV prevention, treatment, care and support, especially when combined with the stigma associated with gender-based violence”.

For Specific Recommendations, the Committee urges States parties to:

- “Ensure that sexual and reproductive health care includes access to sexual and reproductive health and rights information; psychosocial support; family planning services, including emergency contraception; maternal health services, including antenatal care, skilled delivery services, prevention of vertical transmission and emergency obstetric care; safe abortion services; post-abortion care; prevention and treatment of HIV/AIDS and other sexually transmitted infections, including post-exposure prophylaxis”

- “Address the specific risks and particular needs of different groups of internally displaced and refugee women who are subjected to multiple and intersecting forms of discrimination, including women with disabilities, older women, girls, widows, women who head households, pregnant women, women living with HIV/AIDS, rural women, indigenous women, women belonging to ethnic, national, sexual or religious minorities, and women human rights defenders”

HIV-related stigma and discrimination is also pervasive and has profound implications for HIV prevention, treatment, care and support, especially when combined with the stigma associated with gender-based violence”.

For Specific Recommendations, the Committee urges States parties to:

- “Ensure that sexual and reproductive health care includes access to sexual and reproductive health and rights information; psychosocial support; family planning services, including emergency contraception; maternal health services, including antenatal care, skilled delivery services, prevention of vertical transmission and emergency obstetric care; safe abortion services; post-abortion care; prevention and treatment of HIV/AIDS and other sexually transmitted infections, including post-exposure prophylaxis”

- “Address the specific risks and particular needs of different groups of internally displaced and refugee women who are subjected to multiple and intersecting forms of discrimination, including women with disabilities, older women, girls, widows, women who head households, pregnant women, women living with HIV/AIDS, rural women, indigenous women, women belonging to ethnic, national, sexual or religious minorities, and women human rights defenders”