The Human Right to Information on Sexual and Reproductive Health

Government Duties to Ensure Comprehensive Sexuality Education

Individuals have a right to comprehensive information about sexual and reproductive health. This right, like all reproductive rights, is firmly rooted in the most basic international human rights standards, including protections of the rights to life, health, education, and non-discrimination. These standards are understood internationally to ensure women’s right to protect their health and make decisions about sexuality and reproduction. A crucial factor in the development of this understanding of international law has been the work of six United Nations (UN) bodies charged with interpreting human rights treaties.

This briefing paper takes an in-depth look at the standards developed by six UN “treaty monitoring bodies,” or committees, in the area of sexuality education. Following a brief overview of the origin and work of the committees, the briefing paper reviews standards each body has adopted as it has monitored governments’ compliance with their duties under international human rights law. The committees’ repeated calls to ensure access to information on sexual and reproductive health reflect international recognition that sexuality education is a key component of women’s right to protect their health and plan their families.
Background

Treaty Monitoring Bodies and their Role in Developing International Law

The UN treaty monitoring system was created to ensure governments’ compliance with their treaty obligations. Each of the six major international human rights treaties provides for the establishment of a committee whose primary mandate is to monitor governmental progress in implementing the treaty. Monitoring is achieved primarily through a “country reporting” process, which requires states to report periodically on their efforts to respect, protect, and fulfill the human rights enshrined in a particular treaty. Following in-person dialogues with government representatives, committee members issue concluding observations to the reporting government. Every year, these observations are compiled in a report and sent to the General Assembly of the UN.

In addition to the concluding observations, committees have the authority to issue “general comments” or “general recommendations.” These documents elaborate on a treaty’s broadly worded human rights guarantees in order to guide government efforts to implement the treaty, providing a working interpretation of the rights in each of the major treaties. Some committees also have a mandate to examine individual complaints of human rights violations, in which cases they issue written decisions.

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<th>Key Human Rights Treaties and their Monitoring Committees</th>
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Given together, the concluding observations, general comments, and case decisions of the committees guide governments and advocates in further promoting human rights. They are also a crucial tool for holding governments accountable under international human rights law. The standards elaborated upon by the committees, summarized in this briefing paper, can and should be used to measure government compliance with human rights treaty obligations. Materials cited in this paper can be used to support legal challenges in national, regional, and international human rights institutions. They can also be used to hold governments politically accountable in campaigns aimed at ensuring the provision of comprehensive sexuality education.

What follows is a discussion of the statements relating to sexuality education made between January 1993 and June 2007 by six committees: the Committee on the Elimination of Discrimination against Women (CEDAW Committee); the Committee on the Rights of the Child; the Human Rights Committee; the Committee on Economic, Social and Cultural Rights; the Committee on the Elimination of Racial Discrimination; and the Committee against Torture.6

1.

1. Committee on the Elimination of Discrimination against Women

General Recommendations

General Recommendation 24: Women and Health7
In its General Recommendation 24, the CEDAW Committee reaffirms that Article 12 of CEDAW ensures women’s right to have access to health care services, information, and education on the basis of equality with men. The Committee asks states parties to pay particular attention to the health education of adolescents, including information on family planning methods.8

Concluding Observations
The CEDAW Committee has made sexual and reproductive health education a priority in its concluding observations and has frequently asked states parties to implement sexuality education programs.9 The Committee has also recommended expansion of sexual and reproductive health programs as a means to address high rates of abortion and maternal mortality.10

The Committee has encouraged states parties to provide sexuality education systematically in schools,11 including vocational schools,12 and has commended states parties that have implemented programs to control teenage pregnancy, sexually transmitted infections (STIs), and AIDS.13 The Committee has
linked sexuality education to the prevention of HIV/AIDS, unwanted pregnancies, high rates of teenage pregnancies, abortions, and maternal mortality. Finally, the Committee has addressed the specific content of sexuality education programs, recommending that they include information on reproductive rights, responsible sexual behavior, sexual and reproductive health, prevention of STIs including HIV/AIDS, prevention of teenage pregnancies, and family planning.

The Committee also has recommended that sexuality education programs target both adolescent girls and boys. The Committee has specifically called for increased efforts to prevent adolescent pregnancies, including education for boys and girls regarding responsible partnerships and parenthood. On one occasion, the CEDAW Committee explicitly asked the state party to include discussion of gender relations and violence against women in its sexuality education programs.

Committee on the Rights of the Child

General Comments

**General Comment 1: The Aims of Education**

In its General Comment 1, the Committee on the Rights of the Child emphasizes a broad understanding of education to encompass the provision of certain life skills needed to “develop a healthy lifestyle, good social relationships and responsibility, critical, creative talents, and other abilities which give children the tools needed to pursue their options in life.”

**General Comment 3: HIV/AIDS and the Rights of the Child**

In its General Comment 3, the Committee on the Rights of the Child highlights the critical role of education in providing children with information that can “contribute to an increased awareness and better understanding of this pandemic and prevent negative attitudes towards victims of HIV/AIDS,” and empower children to protect themselves from the risk of HIV infection. The Committee states that children should have the right to access adequate information related to HIV/AIDS prevention and care, and such information, including sexuality education and information, should not be censored, withheld, or intentionally misrepresented in any way.

**General Comment 4: Adolescent Health and Development in the Context of the Convention of the Rights of the Child**

In its General Comment 4, the Committee on the Rights of the Child discusses the need for states parties to ensure that all adolescents, both in and out of school, have access to information on how
to protect their sexual and reproductive health. Citing Articles 28 and 29 of the Convention, the Committee urges states parties to initiate and support measures, attitudes, and activities that promote healthy behavior by including relevant topics in school curricula. General Comment 4 emphasizes the need for adolescents to be actively involved in the design and dissemination of information beyond school, including through youth, religious and community organizations, the media, and other groups.

In its general comment, the Committee encourages states parties to “provide adolescents with access to sexual and reproductive information, including on family planning and contraceptives, the dangers of early pregnancy, the prevention of HIV/AIDS and the prevention and treatment of sexually transmitted diseases.” It also reminds states parties of their obligation to provide adolescent girls with access to information regarding the harm that can result from early marriage and early pregnancy. The Committee states that education programs should include initiatives to change cultural views about adolescents’ needs for contraception and STI prevention, as well as changing cultural and other taboos surrounding adolescent sexuality. States parties must also take measures to remove all barriers hindering adolescents’ access to information on STIs.

Concluding Observations

In its concluding observations, the Committee on the Rights of the Child has frequently discussed the need for access to sexuality education and has asked states parties to adopt measures to provide family planning and reproductive health education and services for young people. The Committee welcomes and commends states’ efforts taken with regard to sexuality education in schools. The Committee has expressed concern where reproductive health education is not part of the official curriculum of primary and secondary education and recommends that the states parties make sexuality education part of the school curriculum. Moreover, the Committee has recommended that states parties promote collaboration between state agencies and nongovernmental organizations (NGOs) in order to establish a system of formal and informal education on HIV/AIDS, STIs, and sexuality. In addition, the Committee encourages states parties to provide training to teachers and other education officials on HIV/AIDS and sexuality education instruction.

The Committee has also asked governments to strengthen existing reproductive and sexual health education programs. It has expressed concern over the failure of states parties to promote education on reproductive health, and has criticized barriers to sexuality education, such as allowing parents to exempt their children from such education and requiring adolescents to contribute financially to their health care costs, thus limiting their access to health care, which includes sexual health education. The Committee has emphasized the importance of sexuality education in addressing adolescent pregnancy, maternal mortality, abortion, and HIV/AIDS and other STIs. The Committee has also
called for programs to raise awareness about HIV/AIDS among adolescents, particularly those belonging to vulnerable groups, to reduce discrimination against children living with and affected by HIV/AIDS.56

The Committee has recommended that states parties undertake comprehensive studies to assess the nature and extent of adolescent health problems. On at least one occasion, the Committee has recommended that such studies involve the full participation of adolescents,57 and be used as a basis to formulate adolescent health policies and programs58 with particular attention to reproductive and/or sexual health,59 the prevention of STIs,60 HIV/AIDS,61 early pregnancy,62 pregnancy generally,63 child birth,64 and adolescent girls.65 The Committee also recommends that states parties undertake measures such as allocating adequate human and financial resources to evaluate the scope and nature of reproductive health programs.66

The Committee has recommended that states parties develop measures to prevent the sexual exploitation of children. Such measures may include programs in schools67 and education campaigns developed with the active involvement of children.68

Further, the Committee has requested that appropriate reproductive health education69 and child-sensitive counseling services be provided to adolescent refugees.70 With respect to children of migrant workers, the Committee has called for access to health and social services, and education in accordance with the principle of non-discrimination.71

3.

Human Rights Committee

General Comments

General Comment 28: Equality of Rights Between Men and Women72
In its General Comment 28, the Human Rights Committee interprets the right to equality before the law and freedom from discrimination, protected by Article 26, as requiring states parties to eliminate discrimination against women on the part of public as well as private actors in all fields, including education and service provision.73

Concluding Observations

The Human Rights Committee has expressed concern over a state party’s elimination of sexuality education from the school curriculum and asked the state party to reintroduce it in public schools.74 In a subsequent concluding observation issued to the same state party, the Committee expressed
In other contexts, the Committee has expressed concern over the high rate of unwanted pregnancies and abortions among young women between the ages of 15 and 19 and the high number of those women contracting HIV/AIDS. The Committee has requested that a state party take further measures to help young women avoid unwanted pregnancies and HIV/AIDS, including strengthening its family planning and sex education programs. On a separate occasion, the Committee also has expressed concern over high maternal and infant mortality rates, low educational levels, and the practice of clandestine abortions, and has recommended that the state party “help women avoid unwanted pregnancies, including by strengthening its family planning and sex education programmes.”

Committee on Economic, Social and Cultural Rights

General Comments

General Comment 14: The Right to the Highest Attainable Standard of Health

In its General Comment 14, the Committee on Economic, Social and Cultural Rights interprets the right to health, which is protected by Article 12 of the Economic, Social and Cultural Rights Covenant, as an inclusive right that extends “not only to timely and appropriate health care but also to the underlying determinants of health, such as . . . access to health-related education and information, including on sexual and reproductive health.” The Committee also comments on the right to seek, receive and impart information on health issues as a component of the right to health. It asserts that access to information should be part of the provision of reproductive health services, protected under Article 12(2). In its discussion on women and the right to health, the Committee confirms that women’s right to health requires “the removal of all barriers interfering with access to health services, education and information.” The Committee also focuses on the right of adolescents to health information and counseling, recommending that states parties implement “youth-friendly” health care.

General Comment 13: The Right to Education

Although General Comment 13 does not contain recommendations specifically on sexuality education, it does include provisions that support the right to sexuality education. The Committee on Economic, Social and Cultural Rights reasserts the principle of non-discrimination in the field of education, emphasizing that “education must be accessible to all, especially the most vulnerable groups, in law and fact, without discrimination on any of the prohibited grounds.” The Committee also asserts that
education must be flexible and must “adapt to the needs of changing societies and communities and respond to the needs of students within their diverse social and cultural settings.”

Concluding Observations

The Committee on Economic, Social and Cultural Rights has called for implementation of sexual and reproductive health education in school curricula. It has also specifically recommended sexuality education as a means of ensuring women’s right to health, particularly reproductive health, and called for awareness-raising around women’s sexual and reproductive health through sexuality education in schools and public awareness campaigns. Along similar lines, the Committee has called upon states parties to intensify implementation of National Sexual and Reproductive Health Programmes currently in place.

The Committee has recommended full access to sexuality education by all girls and young women, including those in rural and indigenous communities. The Committee has also recommended the development of training programs and counseling services on reproductive health. The Committee has discussed sexuality education and awareness campaigns as ways to combat maternal and child mortality, including by increasing access to information on contraceptives.

The Committee has linked the lack of education to the use of abortion as a primary means of family planning, recommended that states parties instill awareness of the health risk of using abortion as a method of birth control, and advocated for sexual and reproductive health education programs as a way to reduce female mortality rates caused by illegal or unsafe abortions. The Committee also has recommended sexual and reproductive health education and/or public awareness campaigns as a means to prevent the spread of HIV/AIDS and other STIs, including through providing information about contraceptives. In addition, the Committee has advocated for education programs aimed at eliminating the practice of female genital mutilation and awareness-raising campaigns to curb the high rate of sex-selective abortion and eliminate discrimination against individuals living with HIV.

Committe on the Elimination of Racial Discrimination

General Recommendations

General Recommendation 25: Gender-Related Dimensions of Racial Discrimination

In its General Recommendation 25, the Committee on the Elimination of Racial Discrimination specifically recognizes that some forms of racial discrimination may be experienced only by women and may be directed at women because of their gender. In this general recommendation, the Committee
states that it will take gender factors into account when evaluating and monitoring racial discrimina-
tion against women and how such discrimination impacts the exercise of all their rights.107 This would
include the rights to health and to education, which encompass the right to sexuality education.

**General Recommendation 29: Article 1, Paragraph 1 of the Convention (Descent)108**
In its General Recommendation 29, the Committee on the Elimination of Racial Discrimination high-
lights the multiple discrimination faced by women members of descent-based communities. The
Committee recommends that states parties—in all programs, projects and measures—take into
account the situation of women members of these communities109 and take all measures necessary to
eliminate multiple discrimination against women, particularly in the area of education.110

**Concluding Observations**
The Committee on the Elimination of Racial Discrimination has not issued any concluding observa-
tions pertaining to sexuality education.

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**6. Committee against Torture**

**General Comments**

**General Comment 1: Implementation of Article 3 of the Convention in the Context of Article 22111**
In its General Comment 1, the Committee against Torture discusses the use of the individual com-
plaint mechanism of Article 22 of the Convention against Torture to enforce states parties’ obligations
to individuals who would be at risk of torture if returned to their country of origin.

**Concluding Observations**
The Committee against Torture has recommended on at least one occasion that a state party provide
“better access to information and reproductive health services, including for adolescents” and
strengthen family planning programs as a means of combating “acts that put women’s health at grave
risk,” including involuntary sterilization and denial of access to abortion, which forces women to resort
to dangerous illegal abortions.112 Similarly, the Committee has recommended that a state party take
“necessary steps to eradicate the practice of female genital mutilation, including through nationwide
awareness-raising campaigns.”113
Summary Assessment

The CEDAW Committee, the Committee on the Rights of the Child, the Human Rights Committee, and the Committee on Economic, Social and Cultural Rights have commented on the right to sexuality education and have generally framed it in the context of ensuring the right to health. All four have criticized states parties for not ensuring access to sexuality education. The CEDAW Committee and the Committee on Economic, Social and Cultural Rights, in particular, have often discussed sexuality education as a means to reduce maternal mortality, rates of abortion, adolescent pregnancies, and HIV/AIDS prevalence. While not all committees, in their concluding observations, have included specific measures on how to improve sexuality education, the CEDAW Committee has led the way in making concrete suggestions for incorporating a gender dimension into sexuality education curricula.
Conclusions

- Committees’ recommendations to states parties could explicitly emphasize that they view the right to sexuality education as an integral component of the rights to health and education and underscore that it is a prerequisite to ensuring citizens’ right to health, including reproductive health.

- The Committees could specifically recommend that the ministries of health and education at national levels collaborate to implement obligatory official programs on sexuality education and family life in basic educational curricula at all levels. For example, the Committees could ask these national-level ministries to promote laws or policies making sexuality education obligatory for adolescent mothers and fathers.

- The Committee on the Rights of the Child could recommend systematically that states parties encourage collaboration between state agencies and NGOs in order to ensure that comprehensive sexuality education programs are widely available. This Committee could furthermore ask states parties to implement policies on sexuality education that reflect the special needs of particularly marginalized adolescents (such as street children and out-of-school youth).

- The Human Rights Committee is well situated to recommend that states parties implement policies recognizing that access to sexual and reproductive health information without parental consent is crucial for children or adolescents to prevent unwanted pregnancies and STIs and HIV/AIDS.

- The CEDAW Committee could recommend systematically that states parties insert a gender dimension, specifically including gender relations and violence against women, in sexuality education curricula.

- Committees could draft a general recommendation explicitly addressing the right to sexuality education and advocating for the inclusion of sexuality education in public school curricula.

- The CEDAW Committee could elaborate on its interpretation of the right to education by including the right to sexual and reproductive health education in a general recommendation.

- The Committee on Economic, Social and Cultural Rights could also specify that sexuality education is a necessary component of the right to education.
Endnotes


3. For a fuller explanation of the work of the committees, see Center for Reproductive Rights, Bringing Rights to Bear 21-34 (2002).


5. The following treaties have either an additional optional protocol empowering the treaty monitoring body to hear individual complaints, or a similar mechanism found in the treaty itself: Convention on the Elimination of All Forms of Discrimination against Women, International Covenant on Civil and Political Rights, International Convention on the Elimination of All Forms of Racial Discrimination, and the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment.


46 See, e.g., Indonesia, ¶ 59(c), U.N. Doc. CRC/C/15/Add.223 (2004); Sao Tome and Principe, ¶ 47(b), U.N. Doc. CRC/C/15/Add.235 (2004); Togo, ¶ 55, CRC/C/15/Add.255 (2005).


64 See Lebanon, ¶ 41(d), U.N. Doc. CRC/C/15/Add.169 (2002).


75 See Poland, ¶ 9, CCPR/CO/82/POL (2004).


