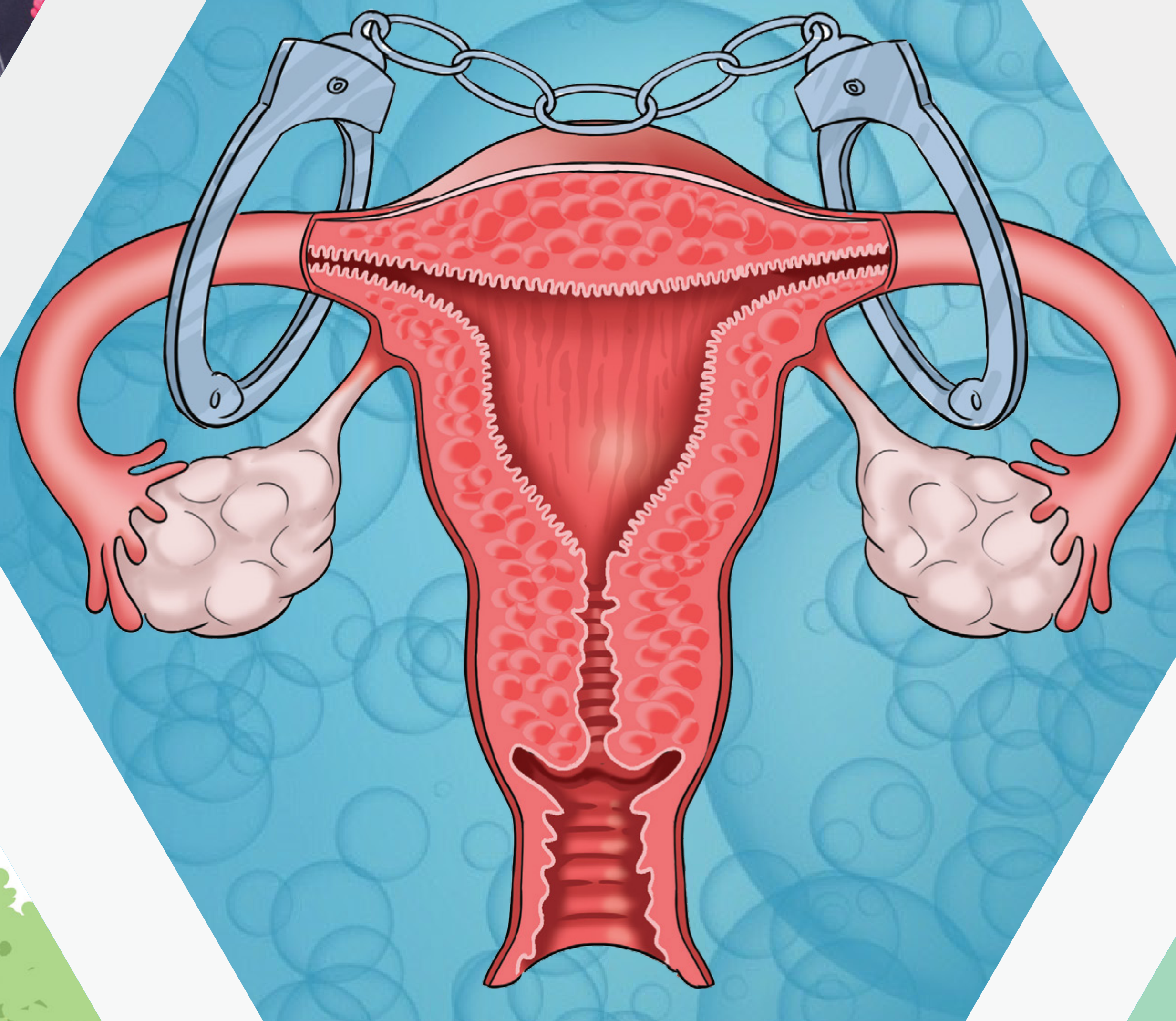
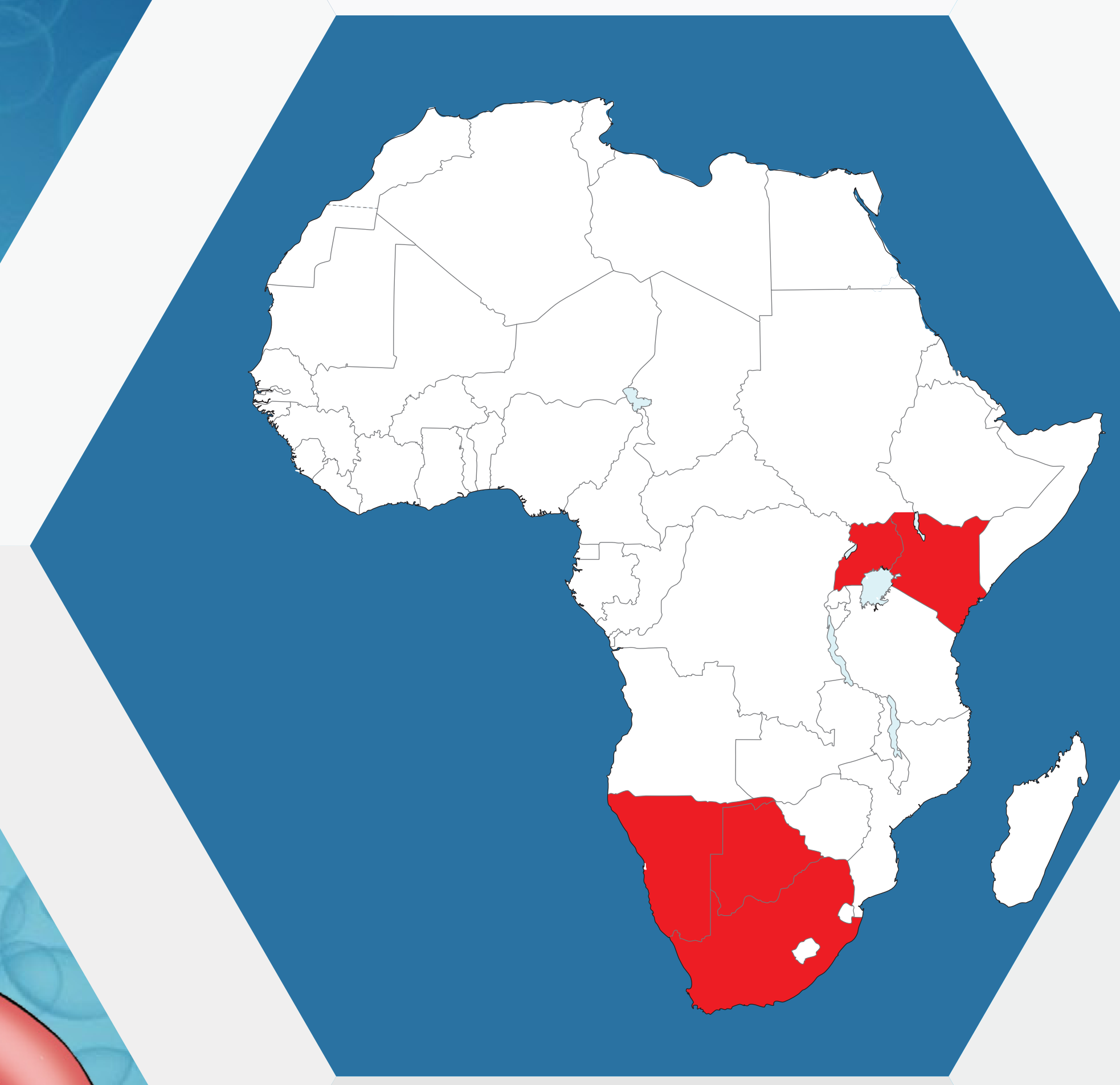
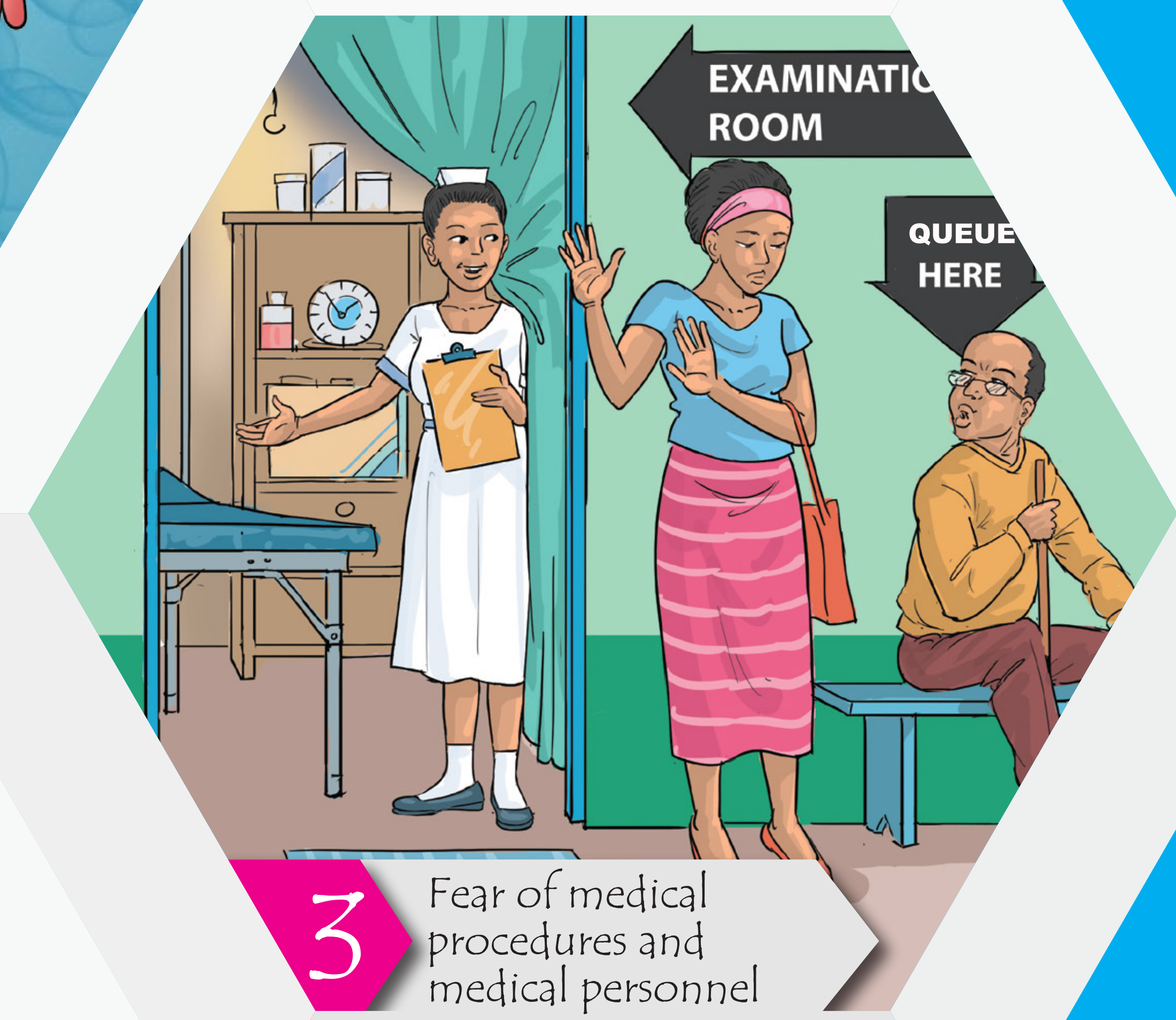


FORCED OR COERCED STERILIZATION OF WOMEN LIVING WITH HIV



1 Extreme social isolation, family discord and abandonment



3 Fear of medical procedures and medical personnel



2 Lifelong grief

21st International AIDS Conference 18-22 July 2016

Public Interest Litigation to Challenge Forced or Coerced Sterilization of Women Living with HIV

Theme:
ACCESS EQUITY RIGHTS NOW

Presented by:
TABITHA GRIFFITH SAOYO (KENYA)

Background:

In many African contexts, motherhood informs social constructions of womanhood and femininity. The forced and/or coerced sterilization of women living with HIV (WLHIV) is a violation of human rights that robs them of their right to choose if and when to have children. Sterilized women face extreme stigma, comparable in nature to that associated with HIV, in the form of greater rates of gender-based violence, abuse from their respective communities, and a loss of their status as “whole” women.

International bodies have convened to strategize on the relationship between such human rights abuses and the key legal questions pertaining to the global AIDS response. In this vein, UNDP coordinated a Strategy Meeting in New York in 2015 to discuss the Global Commission on HIV and the Law’s findings and recommendations regarding young women and adolescent girls. The Kenya Legal and Ethical Issues Network on HIV & AIDS (KELIN) participated in the conference, under its Sexual and Reproductive Health Rights mandate. Contributing to the advancement of these recommendations, KELIN is engaged in facilitating access to justice through the legal representation of women who have been forced or coerced into sterilization.

Description:

With a view toward the full enjoyment of health-related human rights for all, KELIN provides legal services and support, and influences policy that promotes evidence-based change. Through public interest litigation, KELIN advocates for the health of the public on a more far-reaching scale than with individual cases. With the support of partners and interested parties, KELIN is challenging the forced and coerced sterilization of a group of Kenyan WLHIV – representative of a larger cohort of victims – in two currently ongoing court cases initiated in 2014, Petitions 605 and 606.

Lessons learned:

From the start of KELIN’s engagement in this issue, many lessons have been drawn from documentation, advocacy, and litigation – the primary methods for meaningfully addressing HIV-related human rights violations. Women’s narratives have revealed that illegitimate informed consent and a lack of awareness of rights are at the core of this issue, revealing a discrepancy between laws/policies and actual practices. Other lessons include the important impacts of community-led documentation and sensitization, alliance building, and lobbying at a high-level, policy level.

Conclusions/Next steps:

Education and empowerment on issues of reproductive health rights will be instrumental in tackling issues of misinformation by healthcare providers. Key next steps in protecting WLHIV and promoting reproductive health rights include educating WLHIV, their families, and healthcare providers through continuous trainings. With this knowledge in addition to grassroots technical and policy guidelines, they’ll be equipped to advocate in their respective communities on the forced or coerced sterilization of women. The public interest litigation itself has the potential to set a legal precedent in Kenya and hold the government accountable to this issue, thus affecting the fates of WLHIV in the long term.