



**AMPLIFYCHANGE**



## CONCEPT NOTE

**FROM PRINCIPLE TO PRACTICE: A PRACTICAL GUIDE TO DOCUMENTATION OF SEXUAL AND  
REPRODUCTIVE HEALTH AND RIGHTS VIOLATIONS**

**6 - 7 MARCH 2017**

**HERON PORTICO HOTEL, NAIROBI**

# FROM PRINCIPLE TO PRACTICE: A PRACTICAL GUIDE TO DOCUMENTATION OF SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS VIOLATIONS

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## 1. BACKGROUND AND INTRODUCTION

Internationally, sexual and reproductive health rights rest on the recognition of the basic rights of all individuals and couples to decide freely and responsibly on the number, spacing and timing of their children and to have information and the means to do so. This also encompasses the right to make decisions on reproduction free from discrimination, coercion and violence.<sup>1</sup> Sexual and reproductive health and rights (SRHR) are recognized internationally in documents such as the International Conference on Population and Development (ICPD), the Beijing Platform of Action and more recently, the Sustainable Development Goals. Nationally, sexual and reproductive health rights are constitutionally recognized under Article 43(1)(a) of the Constitution read together with several sets of laws including the Sexual Offences Act, the Protection Against Violence Act, the Penal Code as well as the National Guidelines on Management of Sexual Violence among many others.

Despite the above legal protection, sexual and gender based violence (SGBV) is perhaps one of the most widespread and socially tolerated human rights violations, cutting across borders, race, class, ethnicity and religion.<sup>2</sup> SGBV exists in many regions of the world and Kenya is no exception to this pestilence that affects mainly women and girls.

SGBV not only violates the human rights of women but also prevents them from accessing their political and economic rights.<sup>3</sup> The enjoyment of Article 43(1)(a) is thus hampered by constant violation of women's sexual and reproductive health and rights in varying degrees with violent crimes such as rape and defilement and even medical procedures that ignore the autonomy of women such as forced and coerced sterilization.

## 2. JUSTIFICATION

The Kenya Demographic Health Survey, 2014 (KDHS) indicates that 38 percent of women aged between 15-49 reported having experienced physical violence, while 14 percent reported having experienced sexual violence. Further, the 2014 Police Annual Crime Report shows equally grim statistics around SGBV with 893 reported cases of rape as compared to 786 cases in 2012.

<sup>1</sup> Kenya National Human Rights Commission "Realising Sexual and Reproductive Health and Rights in Kenya: Myth or Reality" (April, 2012) available at: [http://www.knchr.org/Portals/0/Reports/Reproductive\\_health\\_report.pdf](http://www.knchr.org/Portals/0/Reports/Reproductive_health_report.pdf).

<sup>2</sup> Aura R "Situational Analysis and the Legal Framework on Sexual and Gender Based Violence in Kenya: Challenges and Opportunities" 2014  
<sup>3</sup> Amunyunzu-Nyamongo M "Addressing the links between gender based violence and HIV in the Great Lakes Region: Kenya Country Report" 2012.

Harmful cultural practices, such as widow cleansing and inheritance, also serve as a barrier to women accessing their sexual and reproductive health and rights. A survey completed by UNAIDS found that 16 percent of married women are in polygamous marriages and 10 percent of girls between 15 and 19 are married compared to 1.3 percent of boys<sup>4</sup>. Thus girls are often married to older men leaving them vulnerable to unequal power relations. Moreover, despite being banned, Female Genital Mutilation (FGM) is equally widely practiced in many Kenyan communities.<sup>5</sup>

While there are many recorded instances of SGBV it is noteworthy that this is not a true reflection of the number of instances of SGBV that occur with a number of cases going unreported or not reported in a timely manner. Thus documentation becomes a key tool in not only recording instances of SGBV but also beginning the process of vindicating the rights of those that have been violated. KELIN aims to utilize its “*Human Rights Violation Reporting Tool*” as a central aspect of this training.

Women are exposed to SGBV in varying forms and this has both short-term and lasting physical and psychological effects, which fundamentally impacts on their ability to contribute to society. These violations because of their lasting impact should be addressed to begin the process of repairing the damage done and a starting point will be through documentation of such violations.

### 3. TRAINING OBJECTIVES

This training seeks to engage three categories of people namely: Young women from rural and peri-urban settlements, civil society organizations as well as community based organizations that work on sexual and reproductive health issues. It is aimed at strengthening their capacities to identify and document sexual and reproductive health violations within their respective geographical areas with the ultimate objective of ensuring access to justice for victims of such violations.

The training seeks to achieve following specific objectives:

- a. *To introduce participants to the Kenyan legislative framework on sexual and reproductive health and rights;*
- b. *To demonstrate the linkages between sexual and gender based violence and sexual and reproductive health and rights; and*
- c. *To deliberate on recognition and documentation of sexual and reproductive health and rights violations within communities.*

<sup>4</sup> Aura R “Situational Analysis and the Legal Framework on Sexual and Gender Based Violence in Kenya: Challenges and Opportunities” 2014

<sup>5</sup> Aura R “Situational Analysis and the Legal Framework on Sexual and Gender Based Violence in Kenya: Challenges and Opportunities” 2014

#### **4. EXPECTED OUTCOMES**

The following are the outcomes that are expected as a result of this training:

- a) Increased knowledge by young women, CBO and CSO representatives on the normative framework of sexual and reproductive health and rights.*
- b) Increased understanding of the linkages between sexual and gender based violence and sexual and reproductive health and rights.*
- c) Strategies developed to advocate for the recognition and respect of sexual and reproductive health and rights at the county levels.*

#### **5. METHODOLOGY**

The training will be a participatory learning process that will include structured power point presentations, question and answer sessions, case studies, experience sharing and video sessions. The facilitators include legal experts and community members. The sessions also include group work to enhance and enrich the learning experience of participants.

#### **6. VENUE AND DATES**

The two one-day workshops shall be conducted on 6 - 7 March 2017 at Heron Portico Hotel in Nairobi.