

## Human Rights Council – 29th session – June 2015

**Item 3: Clustered ID with the** Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health

## Statement by Action Canada for Population and Development

Action Canada makes this statement in collaboration with the Sexual Rights Initiative.

We welcome the Special Rapporteur's report and concur with his assessment that there is a tendency by some States to not only apply, but to justify a narrow and selective approach to human rights, which is clearly evidenced in regard to the right to health, and in particular to sexual and reproductive health.

The politicisation of sexual and reproductive health and rights, and the deliberate ignoring of public health evidence, is fueled by patriarchal attitudes and prevailing gender norms which not only reinforce stigma and discrimination against groups that are often already marginalised by society, but deny those that are often most in need of sexual and reproductive health services, commodities, information and education with the means by which to live healthy and autonomous lives.

The fuelling of discrimination, which results in marginalisation, deprives many of the access to the health services they need, and of meaningful participation in the processes that affect them. These are the individuals most in need of quality and human rights-based health services precisely because of their exclusion.

While states have the primary responsibility to ensure an enabling environment for the full realization of the right to health, its politicisation through both criminalisation and the imposition of restrictions is a violation of this right. Unfortunately, there are many examples of these violations: the criminalisation of sex work, abortion, same-gender sexuality, drug use, and HIV exposure, among others, and restrictions placed on accessing emergency contraception, on providing comprehensive sexuality education, the imposition of spousal and parental consent laws, and the exercise of conscientious objection by health providers. All of these centre on the patriarchal control over sexualities, bodies and lives with detrimental health impacts.

As such, we strongly encourage the Special Rapporteur to continue to focus on and examine sexual and reproductive health issues from a human rights perspective.