A New Foundation for Sexual Social Justice:

The World Health Organization's Report on Sexual Health, Human Rights, and the Law



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Introduction

 We provide a summary and examples of social justice applications based on the newly published World Health Organization (WHO) Report on Sexual Health, Human Rights, and the Law (June 2012).

 The audience will be introduced to specific sections relevant to their interests and learn how to access this free report to use it to advance their social justice work.

Background

 Social justice benefits from a unified foundation of shared basic beliefs. There are still too few global, evidence-based documents that provide standardized language and vision through which social justice standards, policy and legal actions can be created, compared and amended.

• This is a broad, evidence-based public health report on best practices to foster "achievement of the highest attainable standard of sexual health" (p.1). It frames this goal as intimately related to the protection of human rights (p. 4), the right to non-discrimination (p. 14) and to health information and services (p. 1).

 While other reports link laws impacting human rights and health, this specific focus on laws impacting human rights and sexual health (across both reproductive and nonreproductive milieus) is unique.

 This report demands that "states have obligations to bring their laws and regulations that affect sexual health into alignment with human rights and standards" (p. 3) and invokes "the notion of state accountability" (p. 6),

Table 1 shows groups specified in the report.

• Figure 1 shows the report's working definitions; Figure 2 shows the text about people living with disabilities.

 Table 1. Groups Specified in the Report

 Adolescents

Migrants and asylum seekers

People of non-majority sexual orientation, gender identity

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People who engage in sex work

People living with disability

Sexual Health is the state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction of infirmity. Sexual health requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled.

Sexuality is a central aspect of being human throughout life; it encompasses sex, gender identities and roles, sexual orientation, eroticism, pleasure, intimacy and reproduction. Sexuality is experienced and expressed in thoughts, fantasies, desires, beliefs, attitudes, values, behaviours, practices, roles and relationships. While sexuality can include all of these dimensions, not all of them are always experienced or expressed. Sexuality is influenced by the interaction of biological, psychological, social, economic, political, cultural, legal, historical, religious and spiritual factors.

Figure 1. Working Definitions taken verbatim from WHO, 2015, p. 5. People with disabilities have been found to face multiple barriers in access to health services. A world health survey found that people with disabilities were twice as likely to find health-care provider skills and equipment inadequate to meet their needs, three times as likely to be denied care, and four times as likely to be treated badly as non-disabled people. They were also 50% more likely to experience catastrophic health expenditure. Healthcare providers may consider that people with intellectual disabilities or other disabilities should not have a sexual life, reproduce or look after children, and therefore should not need sexual or reproductive health services. Furthermore, health-care settings may be physically inaccessible and health information may be unavailable in different formats...

International human rights standards state that people with disabilities are entitled to health services, including those for sexual and reproductive health, on an equal health basis with others, and to have control over their fertility.... In particular, sexual health information and education should be made available in accessible formats. People with disabilities are entitled to the support and time they require to make informed decisions about matters of sexual and reproductive health... People with disabilities should not be subject to involuntary and/ or forced interventions such as sterilization...

Figure 2. Text from Section 3.4.6 Disability taken verbatim from WHO, 2015 p. 23.

Reference: World Health Organization (WHO) Report on Sexual Health, Human Rights, and the Law. June, 2012. http://www.who.int/reproductivehealth/publications/ sexual_health/sexual-health-human-rights-law/en/

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