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**Follow-up actions to the recommendations of the International
Conference on Population and Development**

**Joint statement submitted by Asian-Pacific Resource and Research
Centre for Women, Association for Women in Development,
Catholics for a Free Choice, Center for Reproductive Rights,
Center for Women's Global Leadership, Family Care
International, IPAS and World Population Foundation, non-
governmental organizations in consultative status with the
Economic and Social Council**

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31 of 25 July 1996.

* E/CN.9/2005/1.

Reproductive health and HIV/AIDS: neglected issues of concern for women and girls

1. ECOSOC identified HIV/AIDS as the special topic for the thirty-eighth session of the Commission on Population and Development and the Secretary-General recommended that countries recognize explicitly, and stress linkages between, reproductive health and HIV/AIDS. In that context, we would like to highlight several neglected issues.
2. Increasingly, national programmes employ routine “opt-out” HIV testing of pregnant women, even during labour and delivery, without pre-test counselling. Such programmes must observe women’s rights to receive good-quality health information, to give fully informed consent, and to enjoy full privacy and confidentiality.
3. If the purpose of testing pregnant women is not only to prevent perinatal HIV transmission but also to enable women to care for their own health, all women should be offered voluntary counselling and testing (VCT), preferably before they become pregnant. Until all women have access to VCT, it should be offered to those women who seek services for family planning, maternal-child health care, sexual assault, post-abortion care and induced abortion.
4. Policy statements and service guidelines on reproductive health should include representatives of HIV-positive women’s networks, including younger women, in their development so as to benefit from their personal insights and experiences. Such statements and guidelines must emphasize that all women should be given full non-judgmental information in a manner which is easily accessible to them and that coercion or pressure on HIV-positive women to undergo sterilization or terminate pregnancies against their will are a clear violation of their rights.
5. High numbers of women and girls suffer sexual assault, both within and outside marriage. Such rapes put them at risk of both HIV/STI infection and unwanted pregnancies. Much greater efforts are needed to expand access to post-exposure prophylaxis for rape survivors of both sexes and availability of emergency contraception for female survivors of assault.
6. The 19 million women who terminate pregnancies unsafely each year include HIV-positive women. The United Nations General Assembly and UNCPD in 2004 reaffirmed the ICPD Programme of Action, which recognized that legal abortion must be accessible and safe.
7. Policy makers and programme implementers need to follow up these recommendations and ensure that reproductive health care for women living with HIV is governed solely by each woman’s own fully informed, non-judgmental and unpressured choice. Services should include the following high-quality options: antenatal, perinatal and post-natal care, when requested, both for woman and baby; post-abortion care and measures to ensure women’s access to safe, legal abortions when requested; and safe sterilization, again only when requested. It is only when these issues are also addressed in policy-making and programmes that women affected by, and living with, HIV/AIDS will enjoy their full reproductive rights.