Changing Faces and Challenges!

By Gemma Hobcraft

Time flies. Sexual and reproductive rights for young people, well for everyone, continue to hit obstacle after obstacle. But we are still working away, expanding membership and organising regional training. We have to keep fighting, opposition in every shape and form will continue. I wanted to write this without mentioning the US, but I don’t think that will be possible. What is important is that we are proactive not reactive. Steve Sinding (IPPF Director General) summed up the position that fighters in this field need to take “to be brave and angry”. They are our rights, simple, if only it was. The skirmishes with the US that have emerged at WSC at WSSD and most recently at ESCAP in December 2002 are likely to continue, preparation is key. And with the ICPD +10 anniversary on the horizon, it is important not to be too defensive; it is a great document, which has been agreed to, we need to focus on what we can do now, for the future. The old rhetoric, reality scenario and the Youth Coalition is working to make sure that young people can advocate for what is their right. To make rights a reality.

Buzz Buzz Away?

On a totally different note, have you noticed how buzzwords come and go and some stay? “Poverty reduction” is the new one. UNFPA are doing it. Priorities and budgets change. Should the YC? Or is it best to stick to our principles, we could write a paper on links between a lack of sexual and reproductive rights and poverty. But the foundation is the same: the application of SRRH is a vital backbone to so many issues that we could be writing papers on links all year. But we know what our principles and values are, if we stick to those and work to empower each other to create a momentum for change, we can’t go too far wrong. Lets keep at it.

AIDS Not on Feminist Agenda

By: Nadia van der Linde

Sisonke Msimang was one of the youngest speakers in the plenary sessions at the 9th AWID Forum held in October 2002 in Guadalajara, Mexico. Her presentation on AIDS and the Global Women's Movement is an attempt to wake up her Sisters in the North to the HIV/AIDS problematic and develop a joint feminist response. The Youth Coalition supports this feminist fight but wants to call out to (young) men to join in this process too.

Using examples from her home country, South Africa, Sisonke explores the relation between processes of globalization and the HIV/AIDS pandemic. The globalization of the open market system leads to a growing presence of international corporations, improved infrastructure and more migration. All of which stimulate the spread of the virus. The increased gap between rich countries in the North and poor countries in the South - as well as growing inequality within countries - results in more serious and obvious differences in the ways that governments can afford to take care of their citizens.

Continued on Page 3
All of the SEE countries (Albania, Bosnia and Hercegovina, Bulgaria, Croatia, Macedonia, Slovenia and Yugoslavia) have undergone similar processes of development. From the early 1990s democratic movements have changed regimes, influenced culture and changed people’s lives. In terms of economics and politics the gap is closing with the developed world. Almost all of the SEE countries emerged from communist regimes, where all human rights were reprieved, including (and especially) sexual and reproductive rights like freedom of sexual expression, the right to family planning, the right to safe abortion and the right to information etc.

But what is happening now, more than ten years after the regional political changes? How are young people affected? What has been happening with Sexual and Reproductive Rights?

All these countries have signed and ratified several convents on Human Rights before 1997. What role did the governments play to implement them in their respective countries?

SEE countries have a lot of things in common. Peoples lives are rules by two constitutions; the state constitution and the Canon constitution.

Canons are rules written more than 400 years ago and were supposed to be the constitution for that time. In Albania, for example, “The Lek DUKagjini Canon” written 600 years ago, states that when a woman marries, she has to bring with her a bullet, so she can kill herself if she “dishonours” her husband. In the main cities this is an ancient story but in some of the rural areas, where it is difficult for new information to reach people through a lack of TVs, radios, newspapers etc, such rules remain the daily life. These country canons deprive all young people and women of sexual and reproductive rights. It is considered shameful to even mention the word “sex” or “sexuality”.

But this is not just a problem in the areas where the canons are still used and recognised. When it comes to Sexual and Reproductive Rights, the problem affects all of society. When it comes to young people and their rights, or lack of, it can affect the whole community. More than 36% of the SEE population are under 25 (UNICEF 2000). And many young people do not like the situation they live in, in Bosnia and Hercegovina 62% of the young people questioned said that they would leave the country if they had the chance. In all SEE countries young people face a period of transition as well as a period of challenges. The first obstacles are adults and the second is the lack of information available to them. In Albania, for example, 41% of young people aged 15-25 consider kissing an HIV + person a great risk and more worryingly 52% of University graduates consider using public toilets as a source of a great risk of infection (UNICEF 2001). This increases the isolation of HIV infected people and stimulates discrimination.

Adults themselves do not like young people to receive safer sex information. Although most of the countries do have Sex Education programmes in place in their schools, Sexual and Reproductive Rights are not included in the Curricula and usually never mentioned.

Young people in SEE need support and information; the whole society has to recognise their rights. The community has to change its point of view towards Sexual and Reproductive Rights. Policy makers, Media, NGOs and youth activists each play a key role in this. Information has to fully cover the geographical extension of each country. Governments have to adopt policies that guarantee and promote the Sexual and Reproductive Rights of young people to young people. We have to move things forward towards a better life.
“Participation” is a buzz word for NGOs working on young people’s issues. Most people accept that it is important, in fact the right of young people, to be involved in decisions that affect them. The discussion among NGOs has moved from the why on this issue, to the how.

At the United Nations Special Session on Children (May 2002) “participation” was one of the few issues that diverse NGOs (save a minority opposed to Children’s rights in general) could agree on. When it came to sexual and reproductive rights the picture was very different. But in fact participation rights and sexual and reproductive rights are so intimately linked that they can not logically be separated. Believing that young people have the right to participate is part of a philosophy and approach to young people that emphasises a belief in their capacities and respects their ability to make informed decisions.

If we accept that young people are capable decision makers at an individual level then by extension we need to find ways to enable them to participate in key decisions. This extends to all aspects of their lives including sexual health and to all age groups. We need to make this link more explicit in areas where people and organisations are very vocal and strong proponents of participation rights for young people but perhaps not fighting as strongly for sexual and reproductive rights.

AIDS not on the feminist agenda
(continued from page 1)

In the North, access to technology, medicines and care has led to HIV/AIDS becoming a "manageable chronic illness". There remain, however, marginalized communities within these countries, where HIV prevalence is on the rise or treatment is not accessible. Gender, class, education, ethnicity, education, sexual orientation, physical (dis)ability and legal status are all factors that determine one's vulnerability to HIV/AIDS. For Sisonke "the [AIDS] pandemic brings into stark relief, the fact that states have failed to provide their citizens with the basic rights enshrined in the declaration of human rights."

In South Africa, AIDS prevalence is approximated at 22%. "Not a weekend goes by without a funeral of someone else my age whose death no one can explain," remarks Sisonke. AIDS used to be seen as a gay-disease, but Sisonke reminds the audience that the face of AIDS has changed. "It looks like mine: it is now black, female and extremely young." It is time not only for feminists to speak out, but also for young people to get themselves heard!

For a text copy of Sisonke’s speech: www.awid.org/forum/speeches/AIDS_and_Feminism.html
For an audio version of Sisonke’s speech: www.fire.or.cr/audios.htm

Sisonke Msimang is the Regional coordinator for the Youth Against AIDS Network (YAAN). YAAN’s mission is to support youth organizations in their efforts to advocate for young women and young men’s right to play a key role in leading Africa’s response to the HIV/AIDS epidemic. Before she moved to Pretoria, South Africa, she was the Program Specialist on Youth, Gender and HIV/AIDS with the United Nations Women’s Development Fund (UNIFEM). She has been active in the development of participatory approaches for involving young people in decision-making processes in the fight against AIDS.
Uno de los problemas de mayor preocupación que se ha tenido en relación a los derechos reproductivos es el de mortalidad materna, llegando a ser uno de las mayores causas: el aborto, estimado en 1991, alrededor de 44 millones de aborto por año en todo el mundo de las cuales 15 millones se realizan clandestinamente y solo 4 millones en América Latina, no tomando en cuenta que en África y el Oriente Medio en el procedimiento también es ilegal.

Se puede decir sin embargo según el análisis en The Alan Guttmacher que América Latina es como el éxito del progreso en políticas de población y de disminución en sus tasa de natalidad, así por ejemplo en los últimos 20 años el uso de anticonceptivos ha aumentado siendo el tamaño promedio de la familia en América Latina de tres hijos por mujer. Pero según este estudio la mujer asume y tiene la mayor responsabilidad de utilizar un método anticonceptivo ya que el uso de los preservativos y la vasectomía es casi inexistente. Siendo los métodos más frecuentemente por las mujeres la esterilización femenina (especialmente en Brasil y República Dominicana) el dispositivo intrauterino (en Chile) y métodos tradicionales (en Perú) y que no son utilizados correctamente de allí la consecuencia de embarazos no deseados. En el Perú existe un drama social de que casi 40 000 de mujeres anualmente requieren servicios de salud como secuela de abortos clandestinos y se estima que aproximadamente 380 mil abortos clandestinos se producen en el país, la mayoría de las cuales se hacen condiciones mínimas de seguridad.

1 Aborto clandestino. The Alan Guttmacher Institute. En 1999 se produjeron en todo el mundo 77 millones de los cuales 46 millones fueron inducidos.
2 Solo en Cuba es legal y en Uruguay se acaba de despenalizar el aborto.

HIV/AIDS Discrimination: a true story
By Claudia Ahumada

Imagine going to the hospital to have a routine treatment. Imagine someone taking a blood sample from you in the context of that treatment. Then imagine being called back in to the hospital months later, with no indication of why you have been asked to go, walking in to a doctor’s office, and then being told: You are HIV positive. You’ll die in no more than ten years.

Scary, isn’t it? Sadly, this is a true story. This is what happened to Alex Cea, a 25 year old man, who, up until the results of the HIV test, was a member of the Chilean Armed Forces. And it gets worse. His right to confidentiality was not respected, and his work mates found out. Some acted sympathetic. Others simply turned away. Alex, with the phrase “you’ll die in no more than ten years” echoing through his mind, thought of killing himself and spent two months in a psychiatric hospital. While he was there, the Armed Forces quickly arranged for his withdrawal from the Institution, of which he was informed upon his departure form the hospital.

HIV, said the Chilean Armed Forces, is a sickness that renders the person incapable of working in anyway and on any task. Therefore, Alex can no longer be a member of this Institution. And that was it. Imagine that: being 25 years old and being told that you are useless, that you can no longer work in any way. That is what happened. When Alex has tried to get work in other places, they ask for his settlement papers from his last job, and on those papers, it says that he is incapable of doing any kind of work. So he is turned away, over and over. Useless, useless, useless! This is what Alex has to deal with every day.

The Chilean Armed Forces allegation that HIV renders a person incapable and that, therefore, Alex must be withdrawn from the Institution, is not only a show of great ignorance of the effects of HIV, but is also illegal, as is taking the HIV test without consent, giving the results without first explaining their consequences, violating the person’s right to confidentiality, and terminating a persons contract because of the results of the test. All this is stated explicitly in the Chilean AIDS Law, which entered in to force in December 2001.

Under the protection of this law, Alex, supported by lawyers of the Universidad Diego Portales, interposed a lawsuit against the Armed Forces on April 29th, of the present year. This is the first lawsuit in Chilean history to be based on the violation of the rights consecrated in the

Continued on page 6
The Importance of Sex Education for Young People

By Joni Meenagh

Providing sex education for young people may very well be the most valuable education of their entire lives. Looking back on my life with the knowledge about sexuality that I have now I realize just how lucky I was to get out of adolescence the way I did. I’m 20 now and I don’t feel that I am ready to have children at this point or was at any earlier point of my life, so I feel very lucky that I’ve never been pregnant. I grew up in Canada, a place where sexually active teens can find confidential help and do not suffer from extreme persecution like they do in so many places around the world. In Canada the fact that teens are sexually active is not viewed with approval, but it is realized as a reality. There are services for sexually active teenagers, and although they might not be perfect, they are at least somewhat available.

I became sexually active at the young age of 14. When we had our sex education section I had tons of questions about sex, sexuality and sexual pleasure, but my questions went unanswered. Nobody ever taught me how to use a condom, or where I could get condoms, nobody ever told me where I could go to learn about sex, I could practice safer sex, I could talk about sex, and I could express myself sexually. I learned that I am okay.

I now realize just how important sex education is. Looking back I realize that I would have acted much differently if I had been fully aware of the very real dangers that are involved with being sexually active and if I had known how to protect myself against these dangers. Teenagers are going to have sex; nobody can stop this from happening. But we can teach teenagers to be safe and aware of the risks. We can also teach teenagers how to express themselves sexually and how to have a fulfilling sex life.

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Sex education needs to teach young people more than biology and risks. We need to know about contraceptives and places to go for help too. We need to understand our own sexuality in order to better understand ourselves and the world around us. We need concrete education about sexuality and sexual expression so that we can look at the media and understand that it does not give us a realistic picture of sex. We also need to learn about how our sexuality affects others. We need to teach tolerance and understanding. In our increasingly ethnically diverse classrooms we need to recognize the rights of others and ourselves.

It is vital that sex education be provided to youth and that this education is complete. Yes, some topics are sensitive to discuss, especially with young people, but that makes it even more important to discuss! We need to be educated in order to protect ourselves from all the possible harms, whether they be physical, emotional, or sexual. Sex education helps young people to understand their bodies, their feelings, their urges, and themselves. I now know pretty well how important it is to have all the facts when it comes to sex, but there are so many young people in Canada and all over the world that could tell you exactly how important this information is much better than I can. These young people have been hurt, abused, raped, infected, teased, discriminated against, experienced unwanted pregnancy, forced into marriage, mutilated, and many have died. The resources available to me as a teenager might not have been great, but too many teenagers don’t have any resources available to them at all. This needs to change.

How? By providing comprehensive sex education to young people around the world at an early age and by providing this education in an environment where they will be free to learn without social or religious limits to what they can know.
AIDS Law. Is this because there has been no discrimination of the people living with HIV/AIDS since December 2001 and until now? Certainly not. Many cases of discrimination occur daily. Those directly affected by it, though, haven’t dared, until now, to come forward and denounce it, because, if they do so, they face, on top of the discrimination that they have already been faced with, the discrimination of Chilean society in general: “social death”. Alex knew this, but was firm in his decision. As he says, “My rights have been violated. I am not the one who has to hide.”

When asked what he hopes to accomplish with this lawsuit, Alex has said that he hopes that “This will help so that this won’t happen to anyone else” and that the public debate that has arisen in Chile due to this case will help educate people and, consequently, diminish the social discrimination of people living with HIV/AIDS, as it is based on mere ignorance.