

A Healthy Caribbean



CARICOM Strategy: Access to Health Services

Beijing Platform for Action (BPfA) C. Women and Health

Beijing Platform for Action (BPfA) L. The Girl Child

Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW) Article 12 Health

HEALTH

The Bahamas

37. The Committee is concerned about:

- (a) The lack of age-appropriate and comprehensive education on sexual and reproductive health and rights, including responsible sexual behaviour for girls and boys; and the lack of family-planning services;
- (b) The inconsistency between the age of sexual consent, which is 16, with that for receiving contraceptive and other health services without requiring parental consent, which is 18;
- (c) The strict restrictions allowing for abortion, which may lead women to seek unsafe and illegal abortions;
- (d) High maternal mortality rates and factors that exacerbate maternal mortality and morbidity, including possible impact that early pregnancy and unsafe abortion may have on the rate of maternal mortality;
- (e) The prevalence of newly diagnosed cases of HIV/AIDS among women;
- (f) The lack of specialised services, in particular breast cancer screening and treatment, and mental health, particularly in the Family Islands.

38. **Recalling its previous recommendation (CEDAW/C/BHS/CO/1-5, para. 36) and general recommendation No. 24(1999) on women and health, the Committee recommends that the State party:**

- (a) **Integrate into the school curriculum and in public campaigns age-appropriate education on sexual and reproductive health and rights, responsible sexual behaviour and the prevention of early pregnancy and**

sexually transmitted infections, including HIV/AIDS, and train teachers and other professionals to deliver those strategies and sensitization campaigns;

(b) Ensure that girls aged 16 have free and adequate access to contraceptives and sexual and reproductive health services, including in the Family Islands;

(c) Decriminalize abortion in all cases and legalize abortion in cases of rape, incest, and severe foetal impairment and as well as provide women with access to quality post-abortion care, especially in cases of complications resulting from unsafe abortions;

(d) Strengthen efforts to reduce the high maternal mortality rate and address factors that exacerbate maternal mortality such as early pregnancy and unsafe abortions through the provision of appropriate health-care facilities and medical assistance by trained personnel;

(e) Implement strategies to combat HIV, especially preventive policies, and campaigns to establish the prevalence of HIV especially in the risk groups, particularly in the population under 25 years of age; and encourage women in prostitution to use condoms and guarantee them access to adequate and respectful health care;

(f) Improve women's access to mental health services, and special services on breast cancer in the State party and provide training to medical and health professionals on the early detection of these diseases, including in the Family Islands.

Barbados

35. The Committee notes with concern that the austerity measures taken by the State party have had negative effects on women's access to health services. It is also concerned about the following:

(a) The lack of age-appropriate and comprehensive education on sexual and reproductive health and rights, including on responsible sexual behaviour, the lack of family planning services and the high level of unmet contraception needs among women and girls;

(b) The limited information available to lesbian, bisexual and transgender women and girls on sexual and reproductive health and rights and the insufficient training of medical personnel on the special needs of lesbian, bisexual, transgender and intersex women;

(c) The lack of information on the prevalence of cervical and breast cancer in the State party and on the treatment available to women and girls;

(d) The prevalence of HIV/AIDS among women in the State party.

36. In line with its general recommendation No. 24 (1999) on women and health, the Committee calls upon the State party:

(a) To ensure that the health sector receives appropriate budget allocations and improve women's access to high-quality health care;

(b) To intensify age-appropriate education on sexual and reproductive health and rights in schools and the dissemination of information on family planning and available, accessible and affordable contraceptive methods in order to reduce the number of unwanted and early pregnancies;

(c) To improve access to information on sexual and reproductive health and rights for lesbian, bisexual, transgender and intersex women and girls and train medical personnel to respond to their specific health needs;

(d) To collect disaggregated data on the prevalence of cervical and breast cancer in the State party and provide training to medical and health professionals on the early detection of those diseases, including in rural areas;

(e) To intensify the implementation of strategies to combat HIV/AIDS, in particular preventive strategies, and continue to provide free antiretroviral treatment to all women and girls with HIV/AIDS.

Belize

27. The Committee expresses its concern about the inadequate recognition and protection of the reproductive health and rights of women in Belize. The Committee is concerned about the high maternal mortality rates. It is further concerned about the number of deaths resulting from induced abortions. The Committee further reiterates its concern about the high rate of teenage pregnancies, which present a significant obstacle to girls' educational opportunities and economic empowerment. The Committee expresses its concern about the high rates of HIV/AIDS among women and girls, and notes that HIV/AIDS-related illnesses are the leading cause of death among women between the ages of 15 and 49.

28. The Committee urges the State party to take concrete measures to enhance women's access to health care, in particular to sexual and reproductive health services, in accordance with article 12 of the Convention and the Committee's general recommendation 24, on women and health, and to ensure a reduction in the maternal mortality rate. The Committee recommends that the State party consider reviewing the laws relating to abortion with a view to removing punitive provisions imposed on women who have abortions and providing them with access to quality services for the management of complications arising from unsafe abortions, in accordance with the Committee's general recommendation 24 and the Beijing Declaration and Platform for Action, and to reducing the number of deaths resulting from induced abortions. It also recommends that the State party enhance sex education and availability of contraceptives so as to prevent women from having to resort to unsafe abortions. The Committee recommends that the State party give priority attention to the situation of adolescents and that it provide sex education, targeted at girls and boys, with special attention to the prevention of early pregnancies and sexually transmitted diseases. The Committee recommends that the State party step up its efforts to prevent and combat HIV/AIDS and improve the dissemination of information about the risks and ways of

transmission. It also recommends that the State party include a gender perspective in its policies and programmes on HIV/AIDS.

Grenada

33. The Committee welcomes the low maternal mortality rate in the State party. However, it is concerned about the limited access to sexual and reproductive health and family planning services, resulting in reportedly high incidences of teenage and unwanted pregnancies. The Committee is further concerned at the high rate of unsafe abortion and subsequent complications, which may be explained by the restrictive abortion law, which leads women to seek unsafe and illegal abortions and possibly to infanticides in certain cases. The Committee also notes a growing tendency of feminization of HIV, with a disproportionately high number of young women infected with HIV.

34. In line with article 12 of the Convention and general recommendation No. 24 (1999) on women and health, the Committee calls on the State party:

(a) To improve sexual and reproductive health services for women and girls, including by ensuring free and adequate access to contraceptives;

(b) To promote education on sexual and reproductive health, in particular by undertaking large-scale awareness-raising campaigns, especially for the prevention of unwanted pregnancy and sexually transmitted infections and diseases, including HIV/AIDS, and by integrating age-appropriate sex education at all school levels;

(c) To ensure the provision of health facilities to women and girls suffering from complications due to unsafe abortions;

(d) To consider reviewing the law relating to abortion for unwanted pregnancies with a view to removing punitive provisions imposed on women who undergo abortion, in line with the Committee's general recommendation 24 (1999) on women and health.

Guyana

32. While welcoming the State party's efforts in the area of the health-care system, such as the National Health Sector Strategy 2008-2012, the Committee is concerned at the lack of data on health, disaggregated by sex and geographical location, and at the lack of a monitoring system to evaluate the impact of measures taken in women's health and to oversee and ensure women's adequate access to health-care services. The Committee is also concerned that the rates of maternal mortality and morbidity remain high (the maternal mortality rate stands at 98 per 100,000 live births) and that women and girls have inadequate access to reproductive health-care services, information, education and contraceptive methods, especially in hinterland and rural areas. The Committee is also concerned at the lack of adequate mental health services, including psychosocial counselling for women and girls suffering

from trauma, severe stress and other behavioural and mental health problems.

33. **The Committee urges the State party:**

(a) **To take all measures necessary to improve women's access to high-quality health care, health-related services and adequate facilities, within the framework of general recommendation No. 24 of the Committee;**

(b) **To take specific measures, such as education and awareness-raising campaigns on the importance of family planning contraceptive methods and safe pregnancy, targeting men and women of reproductive age, including those from rural and remote areas and the hinterland;**

(c) **To strengthen and expand efforts to increase access to affordable contraceptive methods throughout the country and to ensure that women in hinterland, rural and remote areas do not face barriers in gaining access to family planning information and services;**

(d) **To include sexual and reproductive health education in all school curricula, targeting adolescent girls and boys and paying special attention to prevention of teenage pregnancy and contraction of sexually transmitted infections, including HIV/AIDS;**

(e) **To provide adequate and effective services, including psychosocial counselling for women and girls suffering from emotional trauma and other mental health problems, in particular in hinterland, rural and remote areas.**

Haiti

33. The Committee welcomes the efforts made by the State party to improve the health situation of its population, including through enhanced training for specialists and improved infrastructure. However, it is concerned about the inadequate budget allocated to the health sector, particularly to maternity care, its heavy reliance on external financial support and women's limited access to basic health services and essential obstetric care, in particular in rural areas. It notes its concern regarding the high rates of maternal mortality and early pregnancies, and the extremely low use of modern contraceptives, and the excessive use of abortion as a method of family planning. The Committee also notes with concern that the State party has not yet adopted a law on the decriminalization of abortion ([CEDAW/C/HTI/CO/7](#), para. 37).

34. **The Committee, recalling its general recommendation No. 24 (1999) on women and health, draws attention to Sustainable Development Goal 3, targets 3.1 and 3.7, on the reduction of global maternal mortality ratios and ensuring universal access to sexual and reproductive health-care services, and reiterates its previous recommendation ([CEDAW/C/HTI/CO/7](#), para. 37) that the State party:**

(a) **Increase the budget allocated to health care and the number of trained health-care providers and medical personnel, including midwives, in particular in rural areas, to ensure women's access to basic health services and essential obstetric care;**

(b) **Revise the Master Plan for Health (2012-2022) and the National Health Strategic Plan for Reproductive and Family Planning (2013-2016) to take into account cultural factors and gender issues limiting women's access to health services, and ensure women's participation in decision-making on basic health and hygiene and the prevention and management of epidemics;**

(c) **Expedite the adoption of a law on abortion and ensure that it legalizes abortion at least in cases of threats to the life and health of the mother, rape, incest and severe foetal impairment, and ensure that safe, affordable and confidential abortion and post-abortion services are available throughout the State party;**

(d) **Further reduce maternal mortality by ensuring the provision of adequate sexual and reproductive health services, including access to antenatal, delivery and postnatal services. In this regard, the State party is encouraged to consider the technical guidance on the application of a human rights-based approach to the implementation of policies and programmes to reduce preventable maternal morbidity and mortality (A/HRC/21/22 and Corr.1 and 2), prepared by the Office of the United Nations High Commissioner for Human Rights;**

(e) **Reduce the number of early pregnancies by ensuring access to age-appropriate education on sexual and reproductive health and rights for girls and boys, including on responsible sexual behaviours, and by providing adequate and affordable access to modern methods of contraception, including emergency contraception, for women and girls and men and boys.**

HIV/AIDS

35. The Committee notes with concern the disproportionately high number of women living with HIV/AIDS in the State party.

36. **The Committee recommends that the State party ensure equal access for women and men to HIV/AIDS treatment and prevention, including prevention of mother-to-child transmission of HIV/AIDS. It also recommends that the State party combat persistent stigma and discrimination against women living with HIV/AIDS by raising awareness among men, including those with risky sexual behaviours and those living with HIV/AIDS, on their responsibilities in reducing transmission of HIV/AIDS to their sexual partners.**

Jamaica

29. The Committee welcomes the recent policy initiatives to strengthen women's access to health care in the State party, including the National Development Plan: Vision 2030 Jamaica (2009), the Strategic Framework for Safe Motherhood in the Family (2007-2011) and the Strategic Framework for the Family Planning Programme (2006-2010). However, it is concerned about the lack of data on women's access to primary and secondary health-care services. The Committee is also concerned about the slow progress in reducing maternal mortality and about the inadequate access to sexual and reproductive health-care services, including family planning, which reportedly results in high

incidence of teenage and unwanted pregnancies. The Committee is further concerned that abortion is illegal in cases of pregnancies resulting from rape, incest and threats to mothers' health and life, that abortion is criminalized with severe penalties and that there is lack of data on the incidence of unsafe abortion and its linkages to high infant and maternal mortality rates. The Committee also notes a growing tendency of feminization of HIV, with a disproportionately high number of young women infected with HIV.

30. **In line with article 12 of the Convention and general recommendation No. 24 (1999) on women and health, the Committee calls on the State party to:**

(a) **Strengthen monitoring and data collection on women's access to health care, including primary and secondary health-care services;**

(b) **Improve access to and the quality of sexual and reproductive health services for women and girls, including by ensuring free and adequate access to contraceptives;**

(c) **Promote education on sexual and reproductive health and rights, in particular by undertaking large-scale awareness-raising campaigns, especially for the prevention of teenage and unwanted pregnancy and sexually transmitted diseases, including HIV/AIDS, and by integrating age-appropriate education on sexual and reproductive health and rights at all school levels;**

(d) **Remove punitive provisions imposed on women who undergo abortion, in line with the Committee's General Recommendation No. 24 (1999) on women and health, as well as legalize abortion in cases of rape, incest and threats to mothers' life and health.**

Saint Lucia

31. While noting the State party's ongoing efforts to reform the health sector, the Committee is concerned about the apparent inadequate attention by the State party to the differential and specific needs of women in this area. The Committee is concerned that it did not obtain a clear picture about the availability of comprehensive reproductive health care. The Committee notes with concern the persistence of unsafe abortions in the country. It also notes with concern that no information was provided about measures to provide safe abortion services where those are permitted by law. Further, the Committee is concerned about the lack of facilities and district hospitals to provide comprehensive services for childbirth, and about women's access to antenatal and postnatal services.

32. **The Committee recommends that the State party take into account its general recommendation 24 on article 12, on women and health, in all health sector reform efforts so as to effectively address the differential needs in the area of general health and specific health needs of women. It calls on the State party to ensure that obstetric and maternal health needs are adequately addressed, including access to**

these services by women in rural communities. It also recommends that the State party provide safe abortion services in cases where those are permitted by law, and to enhance sex education and availability of contraceptives so as to prevent women having to resort to unsafe abortions. The Committee also calls on the State party to ensure that women do not require, in law or in practice, a husband's written consent for performance of tubal ligation. The Committee invites the State party to submit, in its next report, statistical data on the percentage of birth with obstetric care, information about maternal mortality rates including the main causes of maternal death, as well as information about the rate of abortion.

St Kitts and Nevis

101. The Committee expresses concern about the high rate of teenage pregnancy.

102. **The Committee urges the State party to intensify awareness raising and sexual education aimed at responsible sexual behaviour in the schools and society at large in order to prevent pregnancies. In addition, the Committee recommends that men be involved in the design and implementation of all family planning strategies, policies and programmes.**

St Vincent and the Grenadines

36. The Committee notes with appreciation the awareness-raising activities carried out by the National Family Planning Coordinator in secondary schools, technical institutions and the Community College to address issues such as responsible sexual behaviour, adolescent pregnancy, family planning services, including contraceptives, and sexually transmitted diseases. The Committee nevertheless remains concerned about information that traditional attitudes and cultural norms hamper access to contraceptives, including emergency contraceptives, because clinic nurses frequently consider that it is not appropriate for schoolgirls to be sexually active and either refuse to supply contraceptives or inform their mothers about their sexual activity.

37. **In line with article 12 of the Convention and its general recommendation No. 24 on women and health, the Committee recommends that the State party:**

(a) **Ensure free and adequate access to sexual and reproductive health services, in particular to modern contraceptive methods, for all women and girls, including those living on the outer islands, and strengthen age-appropriate school-based education on sexual and reproductive health and rights for adolescent girls and boys through the Health and Family Life Education Curriculum;**

(b) **Review policies and protocols governing the provision of sexual and reproductive health services to women and girls and ensure their effective implementation by developing and conducting awareness-raising and training programmes for health-care providers**

with a view to addressing traditional attitudes and overcoming cultural barriers that constrain access to family planning services, including contraceptives;

(c) Provide free and confidential family planning services at the community level, including in the Grenadines, and educate women and girls and men and boys on responsible sexual behaviour and the prevention of early and unwanted pregnancy and sexually transmitted diseases.

38. The Committee notes that abortion is illegal except in cases of rape, incest, risk to the life or physical or mental health of the pregnant woman or severe foetal impairment, as stipulated in section 149 of the Criminal Code. The Committee remains concerned, however, at information indicating that, in practice, abortion is not available to victims of rape or incest, nor to women whose life is threatened by the pregnancy. It also notes with concern the information that a proper medical procedure is extremely expensive and therefore not an option for many women, who resort to backstreet abortions. It further notes with concern that official data show that the maternal mortality ratio is 48 births per 100,000 live births, reportedly owing in part to unsafe abortions in the State party.

39. The Committee recommends that the State party remove penalties imposed on women who undergo abortion and ensure that section 149 of the Criminal Code is properly implemented to guarantee access to legal and safe abortion in cases of rape, incest, risk to the life or health of the pregnant woman or severe foetal impairment, in line with the Committee's general recommendation No. 24 on women and health, and ensure that women and girls have confidential access to adequate post-abortion care, including in cases of backstreet abortions.

Suriname

38. The Committee welcomes the improved health insurance coverage for women in the State party, including for women with disabilities and women from disadvantaged groups. However, it remains concerned about the following:

(a) The inadequate funding of the health sector, resulting in women's very limited access to basic health-care services, in particular for rural women, Maroon women and indigenous women who must often travel to Paramaribo to seek specialist medical treatment;

(b) The lack of cardiovascular services and cancer screening for women outside Paramaribo, despite the high incidence of cardiovascular diseases and reproductive cancers, including breast, uterine and cervical cancer;

(c) The high incidence of unsafe abortion and the absence of measures to implement the Committee's previous recommendation to revise legislation criminalizing abortion (CEDAW/C/SUR/CO/3, para. 30);

(d) The lack of comprehensive education on sexual and reproductive health and rights and family planning services, as well as the persistently low rates of modern contraceptive use, in particular among rural women, Maroon women and indigenous women.

39. Recalling its general recommendation No. 24 (1999) on women and health, the Committee draws attention to Sustainable Development Goals 3.1 and 3.7 and recommends that the State party:

(a) Increase its health expenditure to improve the coverage of and access to high-quality health services for women living in the interior areas of the State party and ensure that they have access to cardiovascular health services and cancer screening;

(b) Conduct a study on the impact of unsafe abortions on maternal mortality and other obstetric complications;

(c) Amend articles 355–357 of the Penal Code, which prohibit abortion, with a view to legalizing it in cases of rape, incest, threats to the life and/or health of the mother or severe foetal impairment, decriminalizing it in all other cases and removing punitive measures for women who undergo abortion;

(d) Provide women with access to quality post-abortion care, especially in cases of complications resulting from unsafe abortions;

(e) Provide access to safe and affordable contraceptives, family planning services and adequate information on sexual and reproductive health.

Trinidad and Tobago

32. The Committee commends the State party on its successful programmes aimed at preventing mother-to-child transmission of HIV by providing access to antiretroviral treatment. It remains concerned, however, at the high prevalence of HIV/AIDS among women and girls between 15 and 24 years of age, and that 50 per cent of new HIV infections occur in women and girls. The Committee is also concerned at the lack of information on the incidence of unsafe abortion and its impact on women's health, including maternal mortality. The Committee is further concerned that, under the Offences against the Person Act (1925), abortion is criminalized, without exceptions on grounds such as severe foetal impairment and when the pregnancy results from rape or incest.

33. Recalling its general recommendation No. 24 (1999) on women and health, the Committee recommends that the State party:

(a) Continue to scale up the provision of free antiretroviral treatment to all women and men living with HIV and to pregnant women in order to prevent mother-to-child transmission;

(b) Address the root causes of the high prevalence of HIV/AIDS among women and girls between 15 and 24 years of age through, among other things, the implementation of preventive strategies to combat HIV and the provision of information on sexual and reproductive services and modern contraceptives;

(c) Provide, in the next periodic report, data, disaggregated by age and region, on the incidence of unsafe abortion and the impact on women's health, including maternal mortality;

(d) Amend the Offences against the Person Act to legalize abortion in cases of rape, incest and severe foetal impairment and to decriminalize abortion in all other cases.