

NATIONAL POLICY ON SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF PERSONS WITH DISABILITIES WITH EMPHASIS ON WOMEN AND GIRLS





NATIONAL POLICY ON SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF PERSONS WITH DISABILITIES WITH EMPHASIS ON WOMEN AND GIRLS, 2018

This policy aims at ensuring that all sexual and reproductive health programs reach and serve persons with disabilities; improving access to quality Sexual and Reproductive Health Services for Women and Girls with Disabilities (WGWDs) and improved protection of reproductive health and rights of Persons with Disabilities (PWDs) in Nigeria.

Endorsed and Approved by the National Health Council
[June, 2018]

A comprehensive policy document to provide a policy direction to Government, Civil Society Organizations, Development Partners, Media practitioners and Organized Private Sector on how to deal with reproductive health concerns of Women and Girls with Disabilities (WGWDs). It can be used by all persons.

This is a simplified and illustrated version of the policy to make it easy for all to read and understand, relate to it and use it appropriately.





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ACRONYMS

DRAC	- Disability Rights Advocacy Center
UNCRPD	- United Nations Convention on the Rights of Persons with Disability
SDGs	- Sustainable Development Goals
WGWDs	- Women & Girls With Disabilities
WHO	- World Health Organization
HIV/AIDS	- Human Immunodeficiency Virus / Acquired Immunodeficiency Syndrome
PWD	- Person With Disability
FGN	- Federal Government of Nigeria
CSR	- Corporate Social Responsibility
MDAs	- Ministries Departments and Agencies
OPDs	- Organization of Persons with Disabilities
SRH	- Sexual Reproductive Health



BACKGROUND

It is estimated that 25 million Nigerians live with a disability with 3.6 million of them having significant difficulties in functioning (World report on Disability, 2011)¹. According to the report by Disability Rights Advocacy Center (DRAC), it is estimated that about 13 million of this population are women and girls.²

The Nigeria constitution has enshrined in it the basic rights of all Nigerians in the 1999 constitution. In furtherance to the rights of its citizens, Nigeria adopted the Convention on the Rights of Persons with Disabilities (CRPDs) on the 13th of December, 2006 and ratified it on the 24th September, 2010. As the convention is a legally binding instrument once ratified, Nigeria is required to ensure laws and policies align and comply with the provisions.

Some of the provisions of the convention focus on reproductive health information and services, elimination of Gender Based violence and reproductive right. Take into cognizance article 9, 16, 22, 23, and 25 of the CRPD, which focus on accessibility, freedom from exploitation, violence and abuse, respect for privacy, Respect for home and the family and Health respectively.

Not forgetting the United Nations Sustainable Development Goals which boldly states “Leave no one behind” and reflects on some of its goals the objectives of this policy, in line with the SDG 3 Good health and wellbeing, SDG 5 Gender equality and SDG 10 Reduced Inequalities.

A situational Analysis on Access to Sexual and Reproductive Health Services highlighted that women experience barriers at multiple points derived by multiple factors in accessing healthcare. This policies enables an understanding of the issues of SRHR of WWDs.

DEFINING DISABILITY

Disability is an umbrella term, covering impairments of activity limitations, and participation restrictions (WHO, 2019).³ Also UN Standard rulers defined disability from a perspective that emphasizes social conditions which disable a group of individuals by ignoring their needs of accessing opportunities in a manner conducive to their circumstances. The Human rights definition refers to “disability as the disadvantage or restriction of activity caused by society which takes little or no account of people who have impairments and thus excludes them from mainstream activities”⁴. This is in line with the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD, 2006) definition of Disability.

1 www.disabilityrightsfund.org/country-report-Nigeria-2018

2 Disability Rights Advocacy DRAC, Presentation at the Stakeholders Meeting on the Development of National Policy Framework for Women and Girls living with Disability, October 2015

3 www.who.int/topics/disabilities/en

4 Defining Impairment within the Social Model of Disability-<https://disabilitystudies.leeds.ac.uk>. P2

REPRODUCTIVE HEALTH RIGHTS FACILITIES AND REPRODUCTIVE HEALTH SERVICES

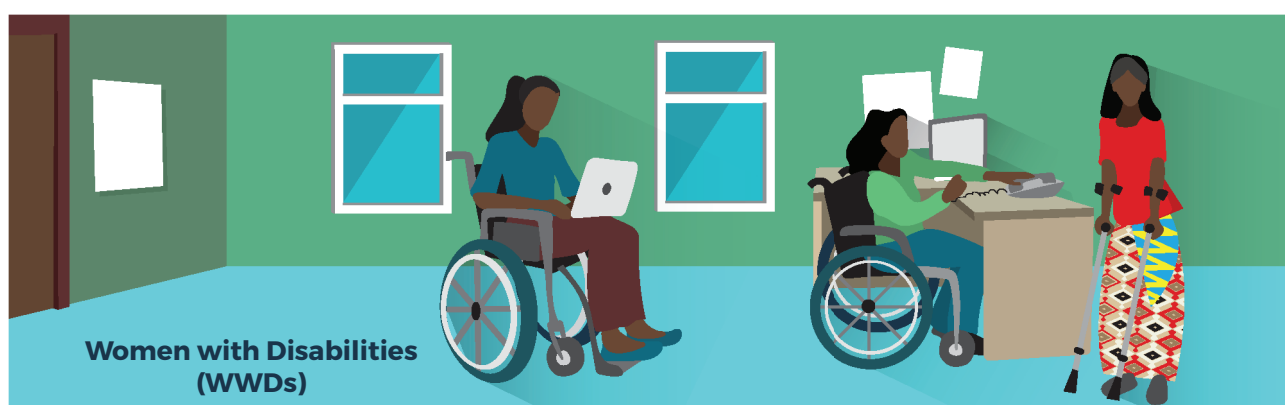
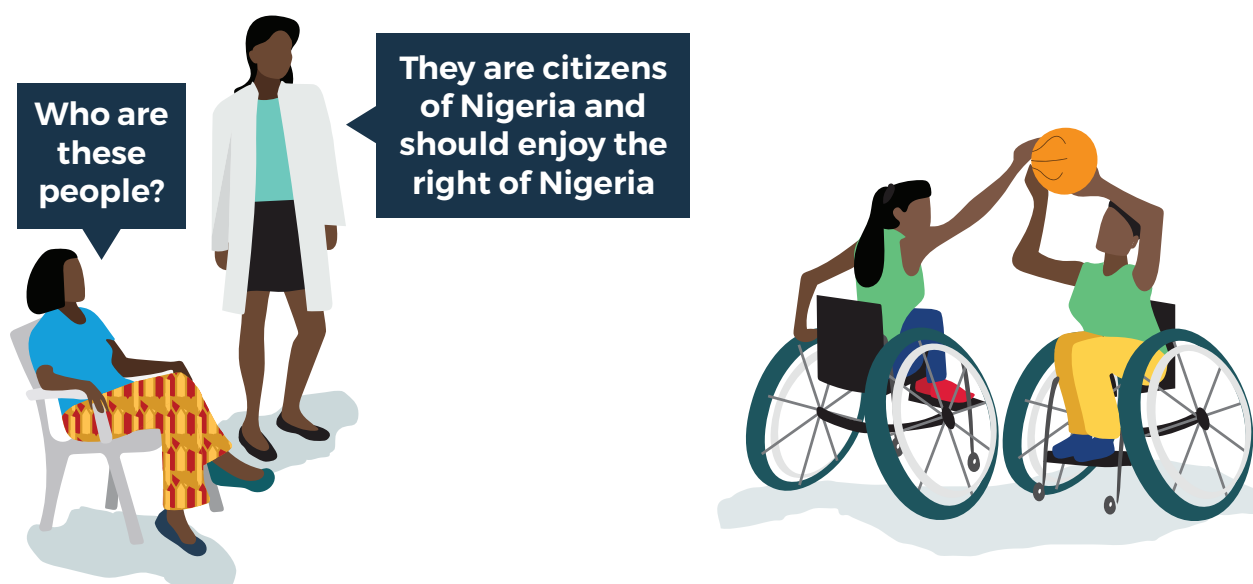
These services must be accessed by all, including persons with disabilities

REPRODUCTIVE HEALTH RIGHTS FACILITIES AND SERVICES (According to the UN declarations)	REPRODUCTIVE HEALTH SERVICES (According to National reproductive health and HIV Integrated guidelines)
Right to life	Safe motherhood
Right for all	Family planning
Right to access information and services	Sexual Transmitted Infection and HIV/ AIDs Services
Right to decide number and spacing of children	Adolescent Reproductive Health Services
Right to consent to marriage and equality in marriage	Reproductive System Cancers Prevention and Treatment
Right to be free from practices that harm women and girls	Infertility & Sexual Dysfunction Treatment Services
Right to be free from sexual violent	Health Education on the Prevention of Harmful Practices, Gender base violence and other abuses
Right to enjoy scientific progress and consent to experimentation	Menopause & Andropause care
Access to medical facilities	Post Abortion care services

GENERAL PERCEPTION ABOUT REPRODUCTIVE HEALTH RIGHT OF WWD

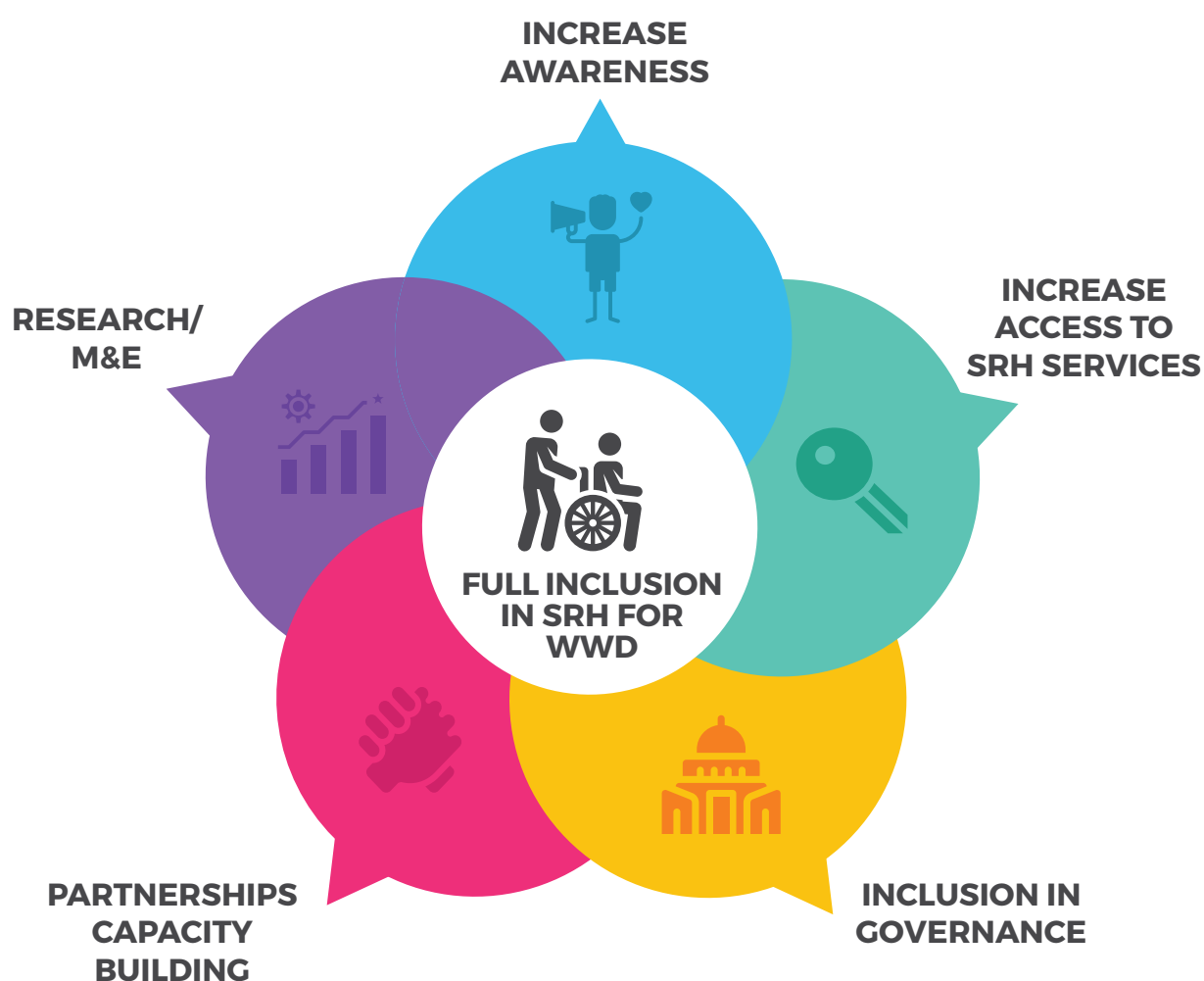
Attitude of the public and health professional are negative, sympathetic, biased, uninformed, coercive, and based on ignorance of the reproductive health needs of WWDs.

Thematic Area 1. Increase knowledge, awareness creation, popular support and issue mainstreaming



Awareness- raising involves both increasing understanding of disability rights as well as combating stereotypes, through public campaigns, education, encouraging responsible media reporting and training

FRAMEWORK FOR FULL INCLUSION IN SRH FOR PWDS IN NIGERIA



Source: Adaptation modelled after WHO/UNFPA Guidance note, 2009¹

¹ WHO/UNFPA Guidance Note: Promoting Sexual and Reproductive Health for Persons with Disability. P.11

POLICY ACTION AND STRATEGIES: THEMATIC AREA

Thematic Area 1: Increase Knowledge; Awareness Creation, Population Support and Issue Mainstreaming



Policy Actions and Strategic Activities

- Government at all levels should facilitate comprehensive behavioural change through relevant MDAs.
- Government Institutions Commitment to improving the health of all Nigerians including PWDs especially WWDs.
- Government at all levels, Development partners and other stakeholders to eliminate harmful cultural and societal practices to all Nigerians especially women and girls with disabilities.
- Government at all levels should create avenues to showcase and promote awareness of the capabilities and contributions of persons with disabilities.
- Relevant professional Associations in Nigeria and development partners to ensure issues on increased aware to the SRH needs as well as support for WWDs are mainstreamed into projects.

- SRH professionals work with Organizations of Persons with Disabilities (OPDs) on SRH outreaches and campaigns.
- Required Knowledge and skills on disability should be integrated into existing curriculum for health professionals at all levels of learning and training.
- Donors and CSOs to issues of SRH and support for WGWDs be mainstreamed into projects they fund.
- All media advocates have an important role to play in raising public knowledge and awareness on the need to improve SRH of PWDs especially WWDs.

Thematic Area 2: Improve Access to SRH for PWDs (Access to Education, Access to SRH Services, Access to Transport, Access to Information and Communication)



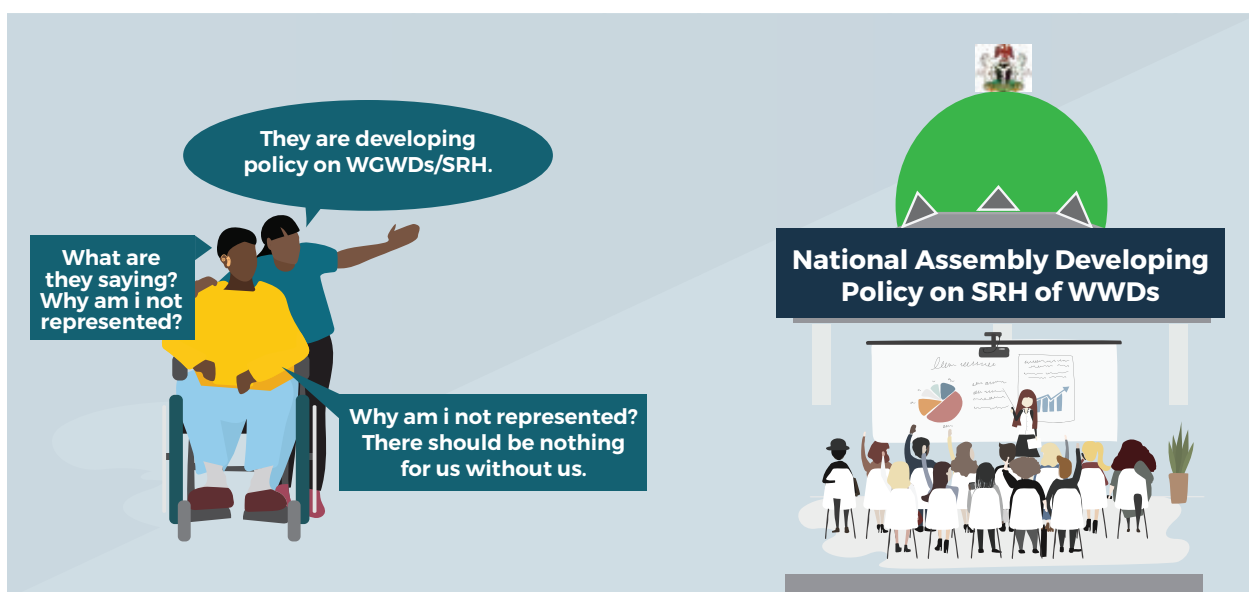
Policy Actions and Strategic Activities

- Government through MDAs to review all relevant health and social welfare policy to ensure WWD SRH issues are mainstreamed.
- PWDs should be a crucial constituency and consulted in the planning and development of all programs and project in Nigeria.
- Physical access to buildings, hospitals and clinic as well as other indoor and outdoor facilities crucial to PWDs should be considered.
- Government at all levels development partners, civil society organizations and all stakeholders will work for the promotion and equal access to mainstream services to PWD especially WWDs.
- Government and relevant stakeholders will provide disability specific services to enhance disability inclusion.

- Government and its partners will invest in programs to support access to SRH and other education materials for WGWDs.
- Ministry of health and its supporting agencies to ensure communication materials and media in accessible format on SRH are available to all PWDs especially WGWDs.
- WGWDs and other PWDs may need mobility equipment support to be able to reach mainstream SRH services.
- Accessibility of SRH commodities by PWDs when essential health products are distributed.
- Private sector as part of their CSR should consider investing and sponsoring programs that improve SRH of WGWDs.

Thematic Area 3: Inclusion of PWD in Health Governance

Persons with disabilities constitutes a significant stakeholder group that should have a place at the table whenever health programs are planned and decisions taken.



Policy Actions and Strategic Activities

- WGWDs must be carried along and fully included in discussions, meetings and programs for their health and welfare.
- All MDAs will recognize and include PWDs/WGWDs as a crucial constituency in all their programs and activities.
- Government policies in Nigeria shall be developed with the needs of PWDs especially WGWDs in mind.
- The Federal Ministry of Health, National Primary Health Care Development Agency and their State counterparts will ensure that National reproductive Health/HIV/AIDs Integration guidelines also mainstream issues of SRH of

WGWDs.

- Security Agencies and Judiciary and relevant agencies to promote and protect the rights of WGWDs.
- Sensitization at all levels-Government, relevant agencies, development partners, MDAs, OPDs, Private and Public.
- Governments at all levels will establish and operationalize disability desk in the ministries of Health and Government Hospitals.
- Government shall make budgetary allocation for PWDs especially on SRH matters of WGWDs.

Thematic Area 4: Partnership, Collaboration and Capacity Building across Stakeholders

Professional associations, especially those in the health and social development sectors have a role to play in fostering partnerships to address sexual and reproductive health concerns of WGWDs.



Let's work together to implement SRH policy for WWDs

Policy Actions and Strategic Activities

For stronger engagement and partnership in promoting the issues of WGWD and SRH, Government at all levels will make practical efforts to foster and strengthen partnerships with:

- Ministries, Departments and Agencies (MDAs).
- National Human Rights Commission.
- OPDs, WGWDs, PWDs.
- Health Professional Bodies.
- Private Organizations.

- Faith based Organizations.
- Development Partners and Donor communities.
- Media at all levels.
- Leverage on existing public-private partnerships arrangements for health, HIV/AIDS, women's health and education.
- Government should create a budget line for PWDs especially WGWDs in all related line ministries.

Thematic Area 5: Promotion of Research, Monitoring and Evaluation for Evidenced Based Programming for PWD issues

Professional associations, especially those in the health and social development sectors have a role to play in fostering partnerships to address sexual and reproductive health concerns of WGWDs.



In order to promote mainstreaming of disability issues in national surveys and stimulate interest among stakeholders in Research and Monitoring and Evaluation.

Policy Actions and Strategic Activities

- All stakeholders including PWDs will work together to set a research agenda for disability issues at all levels especially for WGWDs.
- Government will create an enabling environment for PWDs and OPDs to collaborate with researchers on SRH-related issues.
- There is need for a comprehensive national survey, state-specific research and research that address SRH issues and analysis of disabled disaggregated data.
- Disability awareness training provided for all data collection officers in relevant MDAs.
- Nigerian Universities and National Research Institutes encouraged to

promote research on disability issues.

- Private sector encouraged to support research in reproductive health issues of PWDs especially WGWDs through grants and awards.
- Monitor and implement international conventions and statutes that Nigeria has signed on disability and health by all tiers of Government.
- Studies on Health financing and disability should be done.

These policy actions and strategic recommendations will improve access to Sexual and Reproductive Health of Persons with Disabilities, especially women and Girls





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