ANNEX-B

[AS REPORTED BY THE STANDING COMMITTEE]

A

BILL

to facilitate reproductive healthcare and promote reproductive health rights

WHEREAS it is expedient to give recognition to and promote reproductive health care rights and provide reproductive healthcare in accordance with the Constitution and International commitments made by the Government of Pakistan under the convention on Elimination of Discrimination Against Women (CEDAW), and those to which Pakistan is a State Party;

It is hereby enacted as follows:

Chapter-1

1. Short title, extent and commencement.- (1) This Act may be called the Reproductive Healthcare and Rights Act 2013.
   (2) It extends to the whole of Pakistan.
   (3) It shall come into force at once.

2. Definitions.- In this Act, unless there is anything repugnant in the subject or context,
   (a) “choice” means to decide freely on how to manage Reproductive life;
   (b) “confidentiality” means to be assured that any personal information shall not be made public and shall remain confidential;
   (c) “continuity” means to receive reproductive health care services for as long as needed;
   (d) “Dignity” means to be treated with respect, consideration and attentiveness;
   (e) “discrimination” means any exclusion, restriction or arbitrary distinction;
   (f) “gender perspective” means the beliefs, roles, value and behavior that cultures and societies evolve for socialization of men and women. This approach seeks to improve the effectiveness of laws, policies, social interventions, programs and projects by recognizing the equal right of men and women in the context of gender justice and gender equality;
   (g) “information” means to know about the benefits and availability of reproductive health care services and to know their rights in this regard;
(h) "informed consent" means the possibility and opportunity to make a responsible decision based on full information, free from coercion or violence. These rights recognize the exercise of parental responsibility;

(i) maternal morbidity and mortality" means the number of pregnancy related ill health and deaths of women in a population in a given place and time. It is composed of two terms of which the first regards the morbid condition or disease, and the second refers to death;

(j) "prescribe" means prescribe by rules made under this Act;

(k) "privacy" means to have a confidential environment during counseling and services.

(l) "reproductive health" means a state of complete physical, mental and social well-being, and not merely the absence of disease and infirmity, in all matters relating to the reproductive system, its functions and processes;

(m) "reproductive health care providers" means public institutions which offer reproductive health care services as well as all the staff that work in them; and

(n) "reproductive rights" means the right of couples to reach the highest level of reproductive health, without discrimination, coercion and violence.

CHAPTER-II

PROMOTION OF REPRODUCTIVE HEALTH CARE RIGHTS

3. Acceptance of certain facts.- The acceptance of following facts is essential for promotion of reproductive health care rights, namely:-

i) that men and women are the subject of reproductive health care, their joint involvement in responsible parenting is essential, as also, their need for access to information;

ii) male involvement is essential in the attainment of reproductive health care rights; and

iii) the need to develop public awareness that maternal deaths are preventable and the suffering of women and children is avoidable.

4. Promotion of reproductive healthcare rights:-

(1). The right to reproductive healthcare information can be promoted.-
by providing reproductive healthcare information, which provides awareness regarding the mental and physical health and wellbeing of individuals and families;

(b) through the exercise of parental responsibility which assures the right of parents as educators; and

(c) by taking into consideration the religious norms and cultural environment.

(2) The right to gender-neutral information can be promoted,-

(a) by access to information related to reproductive rights and responsibilities within a gender perspective, which is free from stereotypes, discriminatory and obdurantist customs, and is presented in an objectives and pluralistic manner;

(b) by recognition that all couples have the right to information to ensure reproductive life decisions are made with informed consent; and

(c) by public awareness on the prevalence and impact of morbidity and mortality and availability of medical science to prevent this suffering.

(3). The right to equality, and to be free from all forms of discrimination can be promoted by ensuring that,-

(a) no person shall be discriminated against in their reproductive lives, in their access to services and information on the grounds of race, color, sex, creed or any other criteria of discrimination;

(b) all women have the right to protection from discrimination in social, domestic or employment spheres by reasons of pregnancies or motherhood.

(c) all efforts shall be made to promote a mutually respectful gender perspective which assists in responsible parenting and strengthens family relations.

(4). The right to be free from ill-treatment can be promoted by ensuring that persons have the right to protection from rape, sexual assault, sexual abuse, sexual harassment and other forms of gender-based violence.
CHAPTER-III

PROMOTION AND FACILITATION OF REPRODUCTIVE HEALTH CARE SERVICES

5. **Accepting the need of reproductive healthcare**: The need for reproductive healthcare shall be accepted in order to:

(i) to provide quality reproductive healthcare through short and long term efforts, among others, to professionalize obstetric care, emergency obstetric care and improve reproductive healthcare systems, particularly, in the primary health care sector;

(ii) to reach the underserved by increasing access to the disadvantaged, hard to reach, and vulnerable including poor women and remote marginalized areas by strengthening Primary Health Units in addition to other responsibilities, the provision of family planning maternal and neonatal healthcare.

(iii) to provide quality ante-natal care remains the basic method to achieve a decline in maternal mortality and morbidity; and

(iv) to meet women’s health needs,
   
   (a) through family planning services for prevention of unsafe and unplanned pregnancies; and,
   
   (b) by observance of WHO standards of antenatal and postnatal care thereby reducing incidence such as involuntary miscarriage and increasing access to trained birth attendants.

6. **Reproductive healthcare services**: The facilitation of reproductive healthcare services shall focus on the following, namely:

a) the full range of services which address maternal mortality and morbidity shall be encouraged;

(b) reproductive health system shall be strengthened so that the competencies of reproductive health providers ensure quality services which encourage choice and are given in an environment of dignity and continuity;

(c) for access and affordability, focus and priority shall be given to the primary health care sector.
(d) It shall be recognized that all persons shall have the benefit of and access to available reproductive healthcare technology, including that relating to infertility, which is safe and free from gender discrimination;

(e) no person shall be subject to medical trials related to reproductive healthcare without their full, free, informed and written consent;

(f) the Government shall take stringent measures to prevent the testing and dumping of harmful contraceptives and pharmaceutical in Pakistan, whether by domestic entities, or foreign entities, or multinational corporation (MNCs);

(g) all persons must be free to manage their reproductive life, having regard to the rights of others; and

(h) no person shall be subjected to forced pregnancy, sterilization, abortion or birth control.

CHAPTER-IV

IMPLEMENTATION

7. **Federal Government to oversee:** (1) The Federal Government shall be responsible for oversight of this Act and shall give effect to the provisions herein through all concerned public sector organizations.

(2) The Federal Government while giving effect to the provisions of this Act shall evaluate public policies and programs to effectively promote reproductive rights and health, especially reduction of maternal mortality morbidity and prenatal mortality.

(3) The Federal Government shall in collaboration with the media and private sector, work on operationalization, implementation, and enforcement of this Act, specifically the promotion of the right to reproductive healthcare information and communication activities, and the establishing of services to meet the needs of women and men throughout the reproductive life cycle.

CHAPTER-V

MISCELLANEOUS

8. **Power to make rules.** The Federal Government may make rules for carrying out the purposes of the Act.

9. **Power to remove difficulties.** If any difficulty arises in giving effect to the provisions of this Act, the Federal Government may, by order published in the
official Gazzete, make such provision, not inconsistent with the provisions of this Act, as appear to it to be necessary or expedient for removing the difficulty.

**STATEMENT OF OBJECTS AND REASONS**

Islamic injunctions enjoin that of all ordained rights, the principal right is the right to life. This Bill seeks to give legal status to this right because in Pakistan on average eighty women die every day because of pregnancy related complications. This is compounded by the fact that millions of other women do not die, but suffer from complications such as fistula, std’s and infertility. This Bill seeks to promote the reproductive healthcare rights of men and women and to redress the complications related to pregnancy and childbirth, which are among the leading causes and consequence of mortality and morbidity for women of reproductive age and reduce maternal deaths which have serious consequences within the family, given the crucial role of the mother for her children, and contribute to the inverse sex ratio of men to women (108:100) in Pakistan, leading to 8 million girls and women missing in the Pakistani population (as per the 1998 Census).

2. The Bill seeks to achieve the aforesaid objectives.

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Member-in-charge