WMA RESOLUTION
ON
WOMEN'S RIGHTS TO HEALTH CARE
AND HOW THAT RELATES TO THE PREVENTION
OF MOTHER-TO-CHILD HIV INFECTION

Adopted by the 53rd WMA General Assembly, Washington, DC, USA, October 2002
and amended by the 64th WMA General Assembly, Fortaleza, Brazil, October 2013

PREAMBLE

In many parts of the world the prevalence of HIV infection continues to increase. One of
the Millennium Development Goals (MDG 6), specifically targets combating HIV/AIDS,
malaria and other diseases, with 2015 being its target year to halt HIV/AIDS infection and
to begin reversing the spread of HIV/AIDS. In addition, it was hoped that by 2010
universal access to treatment for HIV/AIDS for all those requiring it would be achieved. A
December 2012 UN resolution declared that countries must develop programmes for
Universal Health Access after 2015 when the MDGs end.

HIV/AIDS is a disease that disproportionately affects people in their reproductive years
although today, due to better management of the condition, there are also many older
people who are infected. In addition, many who were infected as infants are now reaching
reproductive maturity.

In developed countries men who have sex with men and injection drug users constitute
significant risk groups for contracting HIV. In many developing countries, women are at
risk due to heterosexual contact with HIV infected partners. In 2011 approximately 58
percent of people living with HIV in sub-Saharan Africa were women, equating to about
13.6 million women living with HIV and AIDS, compared to about 9.9 million men

In the absence of HIV, maternal mortality worldwide would be significantly (20% ) lower
(Murray et al. Maternal mortality for 181 countries, 1980~2008: a systematic analysis of
progress towards Millennium Development Goal 5).

HIV infection increases the risk of invasive cervical cancer 2 to 22 fold. Some evidence
exists that the use of antiretroviral therapy may decrease this risk. Hence, the appropriate
management of patients infected with HIV may have a long-term impact on other aspects
of women’s health.

The WMA believes that access to healthcare, including both therapeutic and preventative
strategies, is a fundamental human right. This imposes an obligation on government to
ensure that these human rights are fully respected and protected. Gender inequalities must be addressed and eradicated. This should impact every aspect of healthcare.

The promotion and protection of the reproductive rights of women are critical to the ultimate success of confronting and resolving the HIV/AIDS pandemic.

Many of the MDGs address empowering women and promoting their role in society and specifically in healthcare. MDG 5B, in particular, promotes universal access to reproductive health including contraceptive access, reduction in adolescent birth rate, antenatal care coverage and addressing unmet needs for family planning. In addition, MDG 3 which promotes gender equality and empowers women, and MDGs 1 and 2 will influence women’s status in society and therefore their access to healthcare and health promotion.

RECOMMENDATIONS

The WMA requests all national member associations to encourage their governments to undertake and promote the following actions:

• Develop empowerment programs for women of all ages to ensure that women are free from discrimination and enjoy universal and free access to reproductive health education and life skills training. It is recommended that campaigns be initiated and activated in the media, including social media and popular programmes on radio and television in order to eradicate myths, stigma and stereotypes that might degrade or dehumanise women. This must include campaigns against genital mutilation and forced adolescent marriages and unwanted pregnancies. In addition, promoting the availability and choice of contraception for women, without necessarily having to get input from their partners, and promoting the availability of HIV testing and treatment are essential for reproductive health. It is also important to provide for the economic means for the infected populations in terms of prevention, treatment and medical follow-up.

• Women must have the same access as men, without discrimination to education, employment, economic independence, information about healthcare and health services.

• Laws, policies and practices that facilitate the full recognition and respect of human rights and the fundamental freedom of women should be initiated or reviewed and revised where appropriate. It is essential that women are empowered to make decisions regarding their children, their financial status and their future.

• All governments should develop programmes to provide prophylactic treatment in the form of antiretrovirals to women who have been raped or sexually assaulted. Universal and free access to antiretroviral therapy must also be provided to all HIV infected women.

• HIV infected women who are pregnant should receive counselling and access to anti-retroviral prophylaxis or treatment in order to prevent mother to child transmission of HIV.