

RESPECTFUL MATERNITY CARE: THE UNIVERSAL RIGHTS OF CHILDBEARING WOMEN



The Distinctive Importance of the Childbearing Period

In every country and community worldwide, pregnancy and childbirth are momentous events in the lives of women and families and represent a time of intense vulnerability. The concept of “safe motherhood” is usually restricted to physical safety, but childbearing is also an important rite of passage, with deep personal and cultural significance for a woman and her family. Because motherhood is specific to women, issues of gender equity and gender violence are also at the core of maternity care. Thus, the notion of safe motherhood must be expanded beyond the prevention of morbidity or mortality to encompass respect for women’s basic human rights, including respect for women’s autonomy, dignity, feelings, choices, and preferences, including companionship during maternity care.

By design, this document focuses specifically on the interpersonal aspects of care received by women seeking maternity services. A woman’s relationship with maternity care providers and the maternity care system during pregnancy and childbirth is vitally important. Not only are these encounters the vehicle for essential and potentially lifesaving health services, women’s experiences with caregivers at this time have the impact to empower and comfort or to inflict lasting damage and emotional trauma, adding to or detracting from women’s confidence and self-esteem. Either way, women’s memories of their childbearing experiences stay with them for a lifetime and are often shared with other women, contributing to a climate of confidence or doubt around childbearing.

Growing Evidence of Disrespect and Abuse

Imagine the personal treatment you would expect from a maternity care provider entrusted to help you or a woman you love give birth. Naturally, we envision a relationship characterized by caring, empathy, support, trust, confidence, and empowerment, as well as gentle, respectful, and effective communication to enable informed decision making. Unfortunately, too many women experience care that does not match this image. A growing body of research evidence, experience, and case reports collected in maternity care systems from the wealthiest to poorest nations worldwide paints a different and disturbing picture. In fact, disrespect and abuse of women seeking maternity care is becoming an urgent problem and creating a growing community of concern that spans the domains of healthcare research, quality, and education; human rights; and civil rights advocacy.

In 2010, a landscape report by Bowser and Hill, *Exploring Evidence for Disrespect and Abuse in Facility-based Childbirth*, summarized the available knowledge and evidence on this topic.¹ While the review revealed a relative lack of formal research on the topic, the authors’ in-depth search of published and technical literature as well as interviews and discussions with content experts described seven major categories of disrespect and abuse that childbearing women encounter during maternity care. These categories overlap and occur along a continuum from subtle disrespect and humiliation to overt violence; they include physical abuse, non-consented clinical care, non-confidential care, non-dignified care (including verbal abuse), discrimination based on specific patient attributes, abandonment or denial of care, and detention in facilities.

Interpersonal care that is disrespectful and abusive in nature to women before, during, and after birth is appalling because of the high value societies attach to motherhood and because we know the intense vulnerability of women during this time. All childbearing women need and deserve respectful care and protection of their autonomy and right to self-determination; this includes special care to protect the mother-baby pair as well as women in a context of marginalization or heightened vulnerability (e.g., adolescents, ethnic minorities, and

women living with physical or mental disabilities or HIV). Furthermore, disrespect and abuse during maternity care are a violation of women’s basic human rights.

Assertion of the Universal Rights of Childbearing Women

Human rights are fundamental entitlements due to all people, recognized by societies and governments and enshrined in international declarations and conventions. To date, no universal charter or instrument specifically delineates how human rights are implicated in the childbearing process or affirms their application to childbearing women as basic, inalienable human rights. This Charter aims to address the issue of disrespect and abuse among women seeking maternity care and provide a platform for improvement by

- Raising awareness of childbearing women’s inclusion in the guarantees of human rights recognized in internationally adopted United Nations and other multinational declarations, conventions, and covenants;
- Highlighting the connection between human rights language and key program issues relevant to maternity care;
- Increasing the capacity of maternal health advocates to participate in human rights processes;
- Aligning childbearing women’s sense of entitlement to high-quality maternity care with international human rights community standards; and
- Providing a basis for holding the maternal care system and communities accountable to these rights.

By drawing on relevant extracts from established human rights instruments, the Charter demonstrates the legitimate place of maternal health rights within the broader context of human rights. Seven rights are included, drawn from the categories of disrespect and abuse identified by Bowser and Hill (2010) in their landscape analysis (see table). All these rights are grounded in international or multinational human rights instruments, including the Universal Declaration of Human Rights; the Universal Declaration on Bioethics and Human Rights; the International Covenant on Economic, Social and Cultural Rights; the International Covenant on Civil and Political Rights; the Convention on the Elimination of All Forms of Discrimination Against Women; the Declaration of the Elimination of Violence Against Women; the Report of the Office of the United Nations High Commissioner for Human Rights on preventable maternal mortality and morbidity and human rights; and the United Nations Fourth World Conference on Women, Beijing. National instruments are also referenced if they make specific mention of childbearing women. Each right is sourced to the relevant instruments.ⁱⁱ

Tackling Disrespect and Abuse: Seven Rights of Childbearing Women

Category of Disrespect and Abuseⁱ		Corresponding Right
1.	Physical abuse	Freedom from harm and ill treatment
2.	Non-consented care	Right to information, informed consent and refusal, and respect for choices and preferences, including companionship during maternity care
3.	Non-confidential care	Confidentiality, privacy
4.	Non-dignified care (including verbal abuse)	Dignity, respect
5.	Discrimination based on specific attributes	Equality, freedom from discrimination, equitable care
6.	Abandonment or denial of care	Right to timely healthcare and to the highest attainable level of health
7.	Detention in facilities	Liberty, autonomy, self-determination, and freedom from coercion

In seeking and receiving maternity care before, during, and after childbirth:

ARTICLE I: Every woman has the right to be free from harm and ill treatment

International Standards

- Declaration of the Elimination of Violence Against Women, 1994, Article 1
- International Covenant on Civil and Political Rights (ICCPR), 1966, Article 7
- International MotherBaby Childbirth Initiative: A Human Rights Approach to Optimal Maternity Care, 2010, Article 9
- International Planned Parenthood Federation Charter on Sexual and Reproductive Rights, 1996, Article 12
- Universal Declaration on Bioethics and Human Rights, 1997, Article 4

Multinational and National Standards

- European Charter of Patient's Rights, 2002, Article 9
- Ley Orgánica sobre el Derecho de las Mujeres a una Vida Libre de Violencia de Venezuela, 2007, Article 15j

ARTICLE II: Every woman has the right to information, informed consent and refusal, and respect for her choices and preferences, including companionship during maternity care

International Standards

- International Covenant on Civil and Political Rights (ICCPR), 1966, Article 7, 19
- International Planned Parenthood Federation Charter on Sexual and Reproductive Rights, 1996, Article 6
- International MotherBaby Childbirth Initiative: A Human Rights Approach to Optimal Maternity Care, 2010, Article 3, 4
- Report of the Office of the United Nations High Commissioner for Human Rights on preventable maternal mortality and morbidity and human rights, 2010
- Universal Declaration on Bioethics and Human Rights, 1997, Article 6

Multinational and National Standards

- Birth Justice as Reproductive Justice, NAPW, 2010
- Charter of Fundamental Rights of the European Union, 2000, Article 3.2, 7
- Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine, 1997, Article 5
- Declaration on the Promotion of Patients' Rights in Europe, 1994, Articles 1.5, 2, 3, 4.6, 5
- European Charter of Patient's Rights, 2002, Article 3, 4, 5, 12
- Ley de Acompañamiento durante el Trabajo de Parto, Nacimiento y Post-parto de Puerto Rico, 2006, Article 3e, 3f
- Ley de Parto Humanizado—Ley Nacional No. 25.929 de Argentina, 2004, Article 2f, 2g
- The Rights of Childbearing Women, Childbirth Connection 1999, 2006, Articles 3, 4, 5, 6, 9, 12, 13, 14, 16, 19

ARTICLE III: Every woman has the right to privacy and confidentiality

International Standards

- International Covenant on Civil and Political Rights (ICCPR), 1966, Article 17
- International Planned Parenthood Federation Charter on Sexual and Reproductive Rights, 1996, Article 4
- Universal Declaration on Bioethics and Human Rights, 1997, Article 9

Multinational and National Standards

- Declaration on the Promotion of Patients' Rights in Europe, 1994, Article 1.4, 4
- European Charter of Patient's Rights, 2002, Article 6
- The Rights of Childbearing Women, 1999, 2006, Article 7

ARTICLE IV: Every woman has the right to be treated with dignity and respect

International Standards

- International Covenant on Civil and Political Rights (ICCPR), 1966, Article 2
- International MotherBaby Childbirth Initiative: A Human Rights Approach to Optimal Maternity Care, Article 1
- Report of the Office of the United Nations High Commissioner for Human Rights on preventable maternal mortality and morbidity and human rights, 2010
- United Nations Fourth World Conference on Women, Beijing 1995
- Universal Declaration on Bioethics and Human Rights, 1997, Article 8, 10, 11

Multinational and National Standards

- Birth Justice as Reproductive Justice, NAPW, 2010
- Charter of Fundamental Rights of the European Union, 2000, Article 1, 3, 7
- Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine, 1997, Article 1
- Declaration on the Promotion of Patients' Rights in Europe, 1994, Article 1.1, 1.4, 1.5
- European Charter of Patient's Rights, 2002, Article 7

ARTICLE V: Every woman has the right to equality, freedom from discrimination, and equitable care

International Standards

- Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), 1979, Article 1
- International Covenant on Economic, Social and Cultural Rights (ICESCR), 1976, Article 2
- International Covenant on Civil and Political Rights (ICCPR), 1966, Article 26
- International Planned Parenthood Federation Charter on Sexual and Reproductive Rights, 1996, Article 3
- Report of the Office of the United Nations High Commissioner for Human Rights on preventable maternal mortality and morbidity and human rights, 2010
- United Nations Fourth World Conference on Women, Beijing 1995, Article 28
- Universal Declaration on Bioethics and Human Rights, 1997, Article 10, 11

Multinational and National Standards

- Charter of Fundamental Rights of the European Union, 2000, Article 21, 23
- Declaration on the Promotion of Patients' Rights in Europe, 1994, Article 5.1

ARTICLE VI: Every woman has the right to healthcare and to the highest attainable level of health

International Standards

- Declaration of Alma Ata, International Conference on Primary Care, 1978, Preamble, Articles 4, 6
- International Planned Parenthood Federation Charter on Sexual and Reproductive Rights. 1996, Article 9
- Report of the Office of the United Nations High Commissioner for Human Rights on preventable maternal mortality and morbidity and human rights, 2010
- United Nations Fourth World Conference on Women, Beijing 1995
- Universal Declaration of Human Rights, 1948, Article 25
- Universal Declaration on Bioethics and Human Rights, 1997, Article 14.2

Multinational and National Standards

- Charter of Fundamental Rights of the European Union, 2000, Article 35
- Constitución Política del Estado Plurinacional de Bolivia, 2008, Article 45.V
- Convention for the Protection of Human Rights and Dignity of the Human Being with regard to the Application of Biology and Medicine: Convention on Human Rights and Biomedicine, 1997, Article 3
- Declaration on the Promotion of Patients' Rights in Europe, 1994, Article 5
- The Rights of Childbearing Women, 1999, 2006, Article 1

ARTICLE VII: Every woman has the right to liberty, autonomy, self-determination, and freedom from coercion

International Standards

- Declaration of the Elimination of Violence Against Women, 1994, Article 1
- International Covenant on Economic, Social and Cultural Rights (ICESCR), 1976, Article 1
- International Planned Parenthood Federation Charter on Sexual and Reproductive Rights, 1996, Article 2
- International Covenant on Civil and Political Rights (ICCPR), 1966, Article 9.1, 18.2
- Universal Declaration on Bioethics and Human Rights, Article 5

Multinational and National Standards

- Charter of Fundamental Rights of the European Union, 2000, Article 6
- Declaration on the Promotion of Patients' Rights in Europe, 1994, Article 1.2

ⁱ Bowser, D., and K. Hill. 2010. *Exploring Evidence for Disrespect and Abuse in Facility-based Childbirth: Report of a Landscape Analysis*. Bethesda, MD: USAID-TRAction Project, University Research Corporation, LLC, and Harvard School of Public Health.

ⁱⁱ The Charter borrows heavily from the framework of the International Planned Parenthood Federation Charter on Sexual and Reproductive Rights, 1996.

This charter was developed collaboratively by a multi-stakeholder group with expertise bridging research, educational, clinical, human rights, and advocacy perspectives. Members of a community of concern working in concert to address the issue of disrespect and abuse during maternity care within their various constituencies contributed to this consensus document, including:

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