UPR Submission on the Reproductive Rights in Uzbekistan

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Joint Submission by:

The Sexual Rights Initiative (SRI)
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Creating Resources for Empowerment in Action (CREA)
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Joint Stakeholder submission on reproductive rights in Uzbekistan.

This report has been prepared by Sexual Rights Initiative\(^1\) and CREA\(^2\) in cooperation with Central Asian activists.

1. This report highlights key reproductive rights issues in Uzbekistan, in particular non-consensual sterilization of women of child-bearing age who have 2 or more children.

2. The information for this report was collected directly from doctors who currently or formerly worked in medical institutions of Uzbekistan. Several media outlets and international organizations raised concerns with these procedures based on their research. We use primary and secondary sources in this submission. The report focuses on period between 2004 and September 2012 which is characterized by the beginning and development of the State Program on Compulsory Sterilization of Women in Uzbekistan.

3. The program started, according to information of Gynecologists in 2004 after a private (internal) decree from Ministry of Public Health was introduced. Since 2004 the plan - 4 sterilizations and 12 intrauterine devices (IUDs) in a month has been given as a target to each gynecologist. This situation continues to this day, has aggravated. The Sexual Rights Initiative in 2008 reported that “compulsory sterilizations ….practiced in Uzbekistan, are grave infringements of the reproductive rights. Women reported the insertion of intrauterine devices (IUD) without their consent, and cases of carrying out of Hysterectomy on healthy women are known. Compulsory application of IUC and hysterecmy are most common among women at the age of 25 and younger who have two children”\(^3\)

4. Uzbekistan ratified UN Convention including Convention on Elimination of All Forms of Discrimination against Women, the Convention on the political rights of women, the Convention on motherhood protection\(^4\). Despite the international obligations, reproductive rights of women continue to be violated. In particular: Article 10 point H and Article 11 point 1, subparagraph F of the CEDAW: “the right to access to corresponding information on family planning”, and “preservation of function of a continuation of the family”. Article 12 of the Convention about elimination of all forms of discrimination concerning women – “the right to equality in family planning”, is also infringed

5. According to the data from the National report of 2008, “women make more than half of population of the country (50,02 %) and 52 % of all women are in reproductive age (from 15 till 49 years). About 32 % children are born by women at this age. Ministry of Public Health during realization of government programs makes purposeful work which is directed on improvement of health of women at reproductive age, lengthening of intervals between pregnancies, …. prevention of unwanted pregnancy, … increase of knowledge of the population in questions of reproductive health. In all areas of the country are improved medical examinations of women at reproductive age by establishments of the primary medico-sanitary help, and coverage by contraceptive means of women for the

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\(^1\) Creating Resources for Empowerment in Action (CREA) is a feminist human rights organization based in New Delhi, India.

\(^2\) The Sexual Rights Initiative is a coalition including Action Canada for Population and Development (Canada), CREA (India), Federation for Women and Family Planning (Poland), Egyptian Initiative for Personal Rights (Egypt), Akahata (Argentina).


purpose of the prevention of unwanted pregnancy and lengthening of intervals between pregnancies. Due to efforts undertaken, the indicator of maternal death rate for 100,000 people has decreased by 26% - from 32,0 in 2002 to 23.8 in 2007. These State programs turned into large scale compulsory non-consensual surgical sterilization and compulsory insertion of IUDs., which if not conducted by trained individual leads to lethal outcomes.

6. Sterilization surgeries are difficult for the woman’s body. Anesthesia is necessary for sterilization, and it can lead to anaphylactic shock because of individual intolerance. These surgeries in Uzbekistan are done in a hectic manner and not all patients are examined for individual intolerance towards anesthesia. In urban areas sterilization is carried out by the way of a laparoscopy (through small incisions), and in rural areas where the women are more likely to have many children and are anemic, sterilizations are conducted in the regular way i.e. through abdominal cuts. After such operation women need to rest for a long time and lose working capacity for 10-15 days. In regions, where 6-8 sterilizations in a day are conducted (by experts going to regions, basically from Tashkent), operational room works with the big loading, and sterility of such operational rooms is not maintained. As a result the women fear from a threat of death from a narcosis, anemia and a blood-poisoning in the dirty operational room.

7. Furthermore 8 and more surgeries in a day is also a an exertion on physical and emotional capacity of the doctors performing the surgery. By the end of the working day the doctor’s attention and focus decreases because of weariness and continuous monotonous work. There have been at least 2 reported cases in the Tashkent region when women were pregnant after sterilization. Both the women believed that pregnancy was not possible after the surgery, and were confident that the of not having any more children as they were above 40 yrs of age and did not want any more children. Both the women realized about their pregnancy only after they felt the child moving, that is on 18-20 week of pregnancy. One of them died during abortion which opted for because she was ashamed of being pregnant so late, having adult children and grandsons. The other woman, without knowing about the pregnancy, accepted many medicines forbidden during pregnancy, and has been compelled to go for abortion - she has lost a lot of blood and is bed ridden.

8. Another case of badly performed sterilization occurred in Tashkent in 2005, in one of city maternity hospitals. In this case the woman after the fourth child, on day she was leaving the hospital was persuaded for sterilization. After introduction of a narcosis and before making a cut, her heart stopped. The woman died, leaving her husband with a newborn child and three more children.

9. Healthy woman after sterilization loses working capacity and to maintain a household for 7-10 days. There is additionally, psychological trauma as she for ever loses possibility again to give birth to children in the future. In most cases women after sterilization are compelled to hide this fact from their husbands as the majority of men consider that after sterilization the wife ceases to be the woman. Cases where husbands have left their wives and children after learning that their wife was sterilized, are known and many. The consequences of sterilization on a woman’s life and body are irreversible.

10. The main indicator to perform this surgery is a woman with two and more children. Each local gynecologist is obliged to persuade at the least minimum of 4 women and they have to report the same in their monthly report and provide details about four sterilizations.

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http://www.pop.org/content/silence-of-the-complicit-uzbekistsans-forced-sterilization-1715
Gynecologists, who work in hospitals and clinics, are obliged at the very least once a year, under the internal hospital schedule confirmed by the head physician, to go to regions attached to Medical Institution and to perform such surgeries on women. In 2011 on the average there have been 4-6 such operations in a day. In 2012 the expert conducts anywhere from 6 to 10 sterilizations in a day. For all business trip lasting 10 days there have been more than 80 such surgeries

11. On April, 12th, 2012 on BBC there appeared a material “Uzbekistan sterilizes women without their permission and the consent”⁷ in which the government program on sterilization and on spirals is described. In the Capital and big cities where level of education of women is higher, doctors warn about sterilization possibility of repeated surgeries during Cesarean section. In the remote regions and villages they sterilize women not only during repeated surgeries during Cesarean section, but also after medical abortion without the precautionary measure and without the consent of the woman. The problem is that the woman comes in for abortion without any direction and without the minimum background check (a blood type, a Rhesus factor, hemoglobin and other).

12. On April, 18th, 2012 on an official site of the Ministry of Foreign Affairs states that they have renamed Voluntary Surgical Sterilization have to Voluntary Surgical Contraception. ⁸ In the given material it is underlined repeatedly women go on in for sterilization voluntarily. They claim in the article that “ usage of VSC has increased from 3.3 % (2000) to 7.2 % (2011)”. ⁹ They further states that “At the present stage the republic population is acquainted with action of various methods of the prevention of pregnancy: intra-uterine devices (IUD), hormonal oral and contraceptives and methods, when married couples after careful consideration dare at voluntary surgical contraception (VSC)” ¹⁰ However sterilization is not contraception and married couples do not dare at it. They persuade the woman go in for sterilization, concealing everything from the husband. Also in the material it is affirmed that “In the republic application of a method of voluntary surgical contraception is not dominating above the other methods of contraception and is made on a voluntary basis after consultation of the expert after the written approval of both spouses and filling of the form of the informed consent”. ¹¹ According to the doctors, the women, exposed to sterilization, sign nothing. Also no papers are signed by their husbands or any other relatives. And doctors are obliged on a maximum to "blacken" all kinds of contraception, without having left the woman any other option except sterilization. Appearing periodically in a yellow press the distorted information on contraception use, and especially, surgical sterilization in Uzbekistan does not find the acknowledgement. The numerous researches made by representatives of many international organizations, such as, the WHO, UNICEF and UNFPA, have confirmed a lack of transparency of Government politics concerning human rights on protection of reproductive health and a healthy family ”. ¹²

13. Women approaching by criteria for sterilization are not offered alternative methods of contraception. If a woman already uses any contraception, sterilization is imposed on her all the same. The doctor is compelled to inspire and communicate to the patient that any other kind of contraception except sterilization is inefficient. Often the dissatisfied husbands of the women who have become candidates for sterilization complain to the doctor and that creates a problem to the doctors. And the doctor appears in a stalemate: on

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⁷ [http://www.bbc.co.uk/russian/international/2012/04/120412_uzbekistan_sterilisation.shtml](http://www.bbc.co.uk/russian/international/2012/04/120412_uzbekistan_sterilisation.shtml)
⁹ Ibid.
¹⁰ Ibid.
¹¹ Ibid.
¹² Ibid.
the one hand he is obliged to execute the state order, on the other hand - he understands discontent of a husband. More often they release such women from sterilization, or postpone it.

14. Thus, sterilization is not voluntary. It violates the Article 10 point H and the Article 11 point 1, subparagraph F of the Convention on Elimination of all Forms of Discrimination Against Women - the right to access to corresponding information on family planning, and preservation of function of a continuation of the family. The Article 12 of the Convention about Elimination of all Forms of Discrimination Concerning Women - the right to equality in family planning, is also violated. Furthermore it is the infringement of the Article 46 of the Constitution of the Republic of Uzbekistan: “Women and men have the equal rights”.

15. For today a woman accessing any medical help from a State Medical Institution, is interrogated by the doctor or by the specialist (the Surgeon, Ophthalmologist or the Endocrinologist, etc.) regarding the number of children she has, the kind of contraception she is using, and the doctors has to offer the surgical method of sterilization to her. If the woman agrees, they direct her to the Gynecologist for registration. If the woman changes her mind it only will delay the surgery, sooner or later it will occur. She will be pursued by doctors, they will send nurses to her home, in order to repeatedly have these conversations. More often than not woman eventually agrees.

16. The management pressurizes the doctor and force them to deceive patients. The doctor pressurize on nurses to go to homes of these women and bring women to meet the doctor. For defaulting on execution of the monthly plan on sterilization the doctor is reprimanded and pays the fine, nurses also pay fines and they are regularly fired for not meeting the target. According to management information, fines go to medical institution fund.

17. In one district of the city of Tashkent in which there are 5 polyclinic and 4 Gynecologist in each polyclinic. Every doctor should gather 4 women in a month. Thus, each polyclinic should make 16 sterilizations every month. On a regional scale it makes 80 sterilizations in a month, and in a year it is about 1000 sterilizations. That is in one region since 2004 for 2012 there have been about 8000 sterilizations.

18. According to the data received from gynecologists of the city of Tashkent and the Tashkent region for the last year the target for sterilization have increased from 4 to 6 in a month. In the search and persuasion of women all nurses of the State Medical Institutions and all doctors of any profile are involved. For these purposes they give travel cards for buses to nurses so that after work they could go round women houses. Nurses are compelled to come home to meet women of reproductive age, and to persuade them for

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sterilization. In case they cannot meet the target the management takes extreme measures, including a deceit. In 2 cases when such surgeries did not meet the target, on paper the nurses names have been reported. In fact these operations have not been made.

21. In one of the central regional hospitals the plan on sterilization is 2 operations in a week, but it is considered as a low rate, and the hospital management on meeting in the Regional Department of Public Health receive censures, they are dishonoured before heads of other regions. Besides, in maternity department for women (2 and more children) are being persuaded to make sterilization before leaving. Approximately 60% manage to be persuaded. If the woman does the second operation on Cesarean section, they tie up the pipes without the prevention. After the second Cesarean section a woman still can bear the third child without considerable damage to the health, but they deprive her of this possibility.

22. In the same central regional hospital in gynecologic branch on the average in a year about 4000 patients visit, from these 4000 about 6-7% is only for sterilization, that is in a year one hospital in one city, one region makes from 240 to 280 operations on sterilization. All surgeries in this Medical Institution, including abortions under medical indications, are made for a payment. Only sterilization are made free of charge. This is to ensure the only that the surgery would be conducted even on a poor family.

23. The Gynecologist of one large medical institution of Tashkent has spent 5 days in business trip in the region and has performed 25 surgeries. At staff meeting she was reprimanded for the low quantity for 5 days. They told that her it should be double that number. The doctor had to justify that fewer women were invited by local doctors and many women had already undergone such operations on sterilization. Now in that region they do not persuade women any more, they order them to go in for sterilization!

24. In one more region in the Central Maternity Hospital, according to the gynecologists working there, the plan for a week is 12-15 sterilizations, in a month is 50-60. In the last 8 months in the pointed medical institution 270 sterilizations have been made. In 2011 in this hospital there were more than 4000 labourers and spirals were inserted to all the women before they left and not one of them was informed fully.

**Recommendations:**

1. To stop compulsory sterilizations of women in the country. To leave the right to a woman to choose her methods of contraception and how many children she would like to have;

2. To stop infringements of Convention on Elimination of all Forms of Discrimination Against women;

3. To follow the international standards for prevention of cases of compulsory sterilization;

4. To follow the necessary procedure of inspection before any surgery, including consultation of the anesthetist;

5. To inform the population of Uzbekistan about modern methods of contraception and about family planning;

6. To forbid the propaganda of compulsory sterilization.