Why Realizing Sexual and Reproductive Rights in Africa Remains a Dream

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Sexual and reproductive health rights in Africa remain largely unrealized despite the fact that these rights are well articulated in many international documents and national laws. These rights are often misunderstood/misinterpreted by many African leaders. For example, the East African Community (EAC) Council of Health Ministers in March 2008 refused to sign the EAC Sexual and Reproductive Health and Rights strategy as they felt the ‘rights language’ within the document would promote homosexuality and what they described as ‘other undesirable sexual practices' in the sub-region. This was revealed at a Regional East African Community’s Multi-Sectoral Consultative Meeting on Sexual and Reproductive Health (held in Arusha on June 25-26, 2008). This may imply that many African leaders are struggling to understand the rationale for rights-based approaches in addressing sexual and reproductive health challenges.

A recently published paper by APHRC researchers, Drs. Chimaraaoke Izugbara and Chi-Chi Undie entitled “Who owns the body? Indigenous African discourses of the body and contemporary sexual rights rhetoric” published in Reproductive Health Matters 2008;16(31):159-167, attempts to explain why the realization of sexual and reproductive health rights remains a challenge in most of sub-Saharan Africa today.

The paper highlights a possible but neglected reason why this may be so – ideas about ownership of the body. According to the researchers, “current sexual rights declarations derive from the notion that the body, as a physical entity, belongs to the individual”. But the researchers’ work in two Nigerian cultures, the Ngwa-Igbo and the Ubang, shows an alternative view of the body – as being owned by the wider community, rather than the individual. The researchers state that, “In the two cultures, rights are embodied in the community, which also lays powerful claims on all its members, including the claim of body ownership. Individuals are thus more likely to seek and realize their rights within the communal space, rather than by standing alone.”

The researchers argue that for many sub-Saharan African communities, the social sphere within which individuals live - families and communities, and their social and cultural beliefs and practices – articulates its own versions of sexual
and reproductive health rights and influences the extent to which they are realized. The sphere either protects or violates individual’s rights.

For instance, in the Ngwa-Igbo community, rape is an abominable crime and is seen as crime committed by the offender’s community against the community of the rape victim; it is not seen at the individual level of the rapist and the rape victim as these are seen as belonging to their communities. Thus, it is the communities that decide the punishment and the compensation. It is also the communities that cleanse and restore the individuals – the rapist and the rape victim – back into their respective communities. In this case, the community serves as a channel to the realization of the individual right.

Among the Ubang people, when the community gives out a woman’s body in marriage, it is made clear that only one right is being transferred to the community of her in-laws: the reproductive right (the right to her ‘underneath’) to link the children borne out of the union with their patrilineage. The rights to her ‘head’, however (symbolizing her own life) are retained by her own community, irrespective of her marital status. Her ‘head’ or life belongs to her community, not to herself.

As demonstrated, in the Ngwa-Igbo and Ubang cultures, rights are embodied in the community, which also lays powerful claims on all its members, including the claim of body ownership. The individual is thus unable to pursue and realize all his/her rights by him/herself; rather, the community assigns rights to the individual and confirms them.

Therefore, because notions of the body are not necessarily universally shared, any attempt to operationalize international sexual rights declarations must begin with an understanding of how the communities concerned conceptualize the body and body ownership. The examples shown by the researchers demonstrate that, for certain communities, individual rights cannot be expressed or fully achieved individually. The researchers recommend that a concerted effort be made to take into account how the individual’s rights are linked to the community and to understand how rights are communally expressed and articulated. They emphasize that in many African cultures, rights are embodied in the community and the community sees the individual as part of it. They note that given this reality, it is likely that individuals will tend to seek their rights within the communal space, rather than standing alone. Thus, in such communities, operationalizing declarations and laws that conceptualize the body as owned by the individual, will be met with resistance and will be hard to realize. The researchers conclude that programs need to be sensitive to varying conceptualizations of the body in order to deliver the expected impact.

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