NAIROBI PRINCIPLES on Abortion, Prenatal Testing and Disability
In October 2018, CREA convened a Global Dialogue on Abortion, Prenatal Testing and Disability in Nairobi, Kenya, bringing together feminist organizations, organizations of women with disabilities and organizations supporting sexual and reproductive health and rights (SRHR) from different contexts and regions. These international experts came together in recognition of the human rights violations women, and in particular women with disabilities, face when exercising SRHR and to reaffirm the growing need for dialogue around the intersection of SRHR and disability.

The aim of the Nairobi Principles on Abortion, Prenatal Testing and Disability is to serve as the beginning of a cross-movement dialogue between disability, SRHR and women’s rights and a continued initiative to forge greater dialogue on the intersection of these rights issues. It lays the groundwork for critical advocacy work to address these intersectional rights issues often overlooked by governments, policy makers and human rights frameworks and forge solidarity between movements.
Preamble
Affirming that sexual and reproductive rights, including access to safe abortion, are important priorities for both sexual and reproductive rights advocates and for women and girls with disabilities and recognizing that there is no incompatibility between guaranteeing access to safe abortion and protecting disability rights, given that gender and disability-sensitive debates on autonomy, equality and access to health care benefit all people;

Recognizing that sexual and reproductive rights, and particularly access to safe abortion, are under threat in countries around the world, and that disability rights language is often co-opted by anti-abortion advocates to restrict these rights;

Acknowledging that throughout history persons with disabilities, particularly women and girls with disabilities, have been targeted by eugenics policies which continue to inform law and policy in many countries, particularly
to force or coerce them not to reproduce; to deny them their bodily, sexual and reproductive autonomy; and to prevent them from accessing the information, education and means to exercise their sexual and reproductive rights;

**Renouncing** the harmful legacy of eugenics, and calling for productive conversations between the sexual and reproductive rights movement and the disability movement that ensure women and girls with disabilities are full participants in discussions on abortion rights and their rights are fully taken into consideration in those discussions;

**Recognizing** the important contributions that women and girls with disabilities make to discussions on sexual and reproductive rights, including access to safe abortion, and that their inclusion in conversations that affect them is essential to ensuring both their rights and the rights of all women and all persons with disabilities;
Welcoming the recent Joint Statement by the UN Committees on the Rights of Persons with Disabilities and on the Elimination of All Forms of Discrimination against Women (CRPD and CEDAW Committees) on “Guaranteeing sexual and reproductive health and rights for all women, in particular women with disabilities,” and in particular the progress this statement makes in advancing human rights standards surrounding abortion;

Recognizing the important opportunity to bring advocates working on sexual and reproductive rights and on the rights of women and girls with disabilities together for advocacy on the right to safe abortion;
Principles
We recognize that human rights begin at birth and apply to everyone on an equal basis.
We affirm that autonomy and self-determination guide our work. This means that people have the right to make decisions about their own bodies and lives. We will advocate for the autonomy and self-determination of all persons, including pregnant persons and persons with disabilities, as a fundamental aspect of our work on sexual and reproductive health and rights (SRHR).
We affirm that women and all people who can become pregnant have the right to decide whether to become pregnant and whether to continue a pregnancy, and must have the right to all scientific, evidence-based and unbiased information available to make their decisions, regardless of what that decision might be. Individual choices about one’s own pregnancy are not eugenics, and nobody exercises discrimination when making choices about their own pregnancies.
We recognize that ableism is widespread and that persons with disabilities face diverse forms of discrimination in many aspects of their lives, which are rooted in disability stigma and harmful stereotypes that perpetuate ideas that the lives of persons with disabilities are less valued or that they lack agency to decide on their lives and futures. We will advocate for laws, policies, and practices related to SRHR that do not perpetuate stigma and discrimination against persons with disabilities, and we will consciously avoid using stigmatizing language in our advocacy.
We recognize that laws, policies, and practices that limit access to SRHR give rise to human rights violations. In particular, we recognize that using criminalization to restrict access to safe abortion has an enormous impact on women’s health, including increasing maternal morbidity and mortality. Criminal laws and other restrictions on abortion violate international human rights law and are not the way to eliminate disability stigma or support persons with disabilities.
We affirm that the only way of supporting all prospective parents to make informed decisions about continuing or terminating their pregnancies is through affirmative measures, such as combating ableism in prenatal testing and counseling processes, ensuring all parents are operating in an enabling environment and have the social and economic supports they need to raise any child, including a child with disabilities or who is otherwise socially excluded, and promoting the rights and inclusion of persons with disabilities in all spheres of public and private life.
We commit to advocating for access to safe abortion on demand worldwide. On the global level, we will advocate for or support international human rights standards that recognize a right to safe abortion without restriction as to reason and that promote the accessibility of abortion. In restrictive contexts where abortion is only available on particular grounds, or where advocacy is still limited to incremental strategies on specific grounds, we will work to ensure that the laws are not used to further stigmatize or marginalize women or persons with disabilities.
We will work to promote the autonomy and self-determination of persons with disabilities not only with regards to pregnancy termination but within the full spectrum of reproductive justice, especially concerning violations that disproportionately affect women and girls with disabilities, such as forced and coerced abortion, contraception, and sterilization. We will support the autonomy and self-determination of women and girls with disabilities, including those deprived of legal capacity, to decide on matters related to their reproductive health, including whether to continue pregnancies. We will work to ensure that sexual and reproductive health goods and services are physically and financially accessible and that information and communication on sexual and reproductive health is provided in accessible formats. We will also work to
ensure the support services needed to access sexual and reproductive health. We also support the right of persons with disabilities to parent, recognizing that parents with disabilities should not be limited in this right based on stereotypes about disability or economic or social obstacles and that persons with disabilities should have equal access to assisted reproductive technologies and adoption, as well as personal assistance and other supports for parenting.
We will actively include women with disabilities from diverse constituencies in conversations on all issues. We will ensure participation of women with disabilities not only within disability-specific debates but within all areas of sexual and reproductive health and rights.

1 We will ensure a diverse representation of women with disabilities, especially those who experience multiple and intersecting forms of discrimination in exercising their sexual and reproductive rights, including but not limited to: women with intellectual disabilities, women with psychosocial disabilities, Deaf women, Deafblind women, women with albinism, indigenous women with disabilities, women with disabilities who are ethnic or religious minorities, and LBTQI women with disabilities.
We will advocate for the accessibility of SRHR information, communication, goods, and services, as well as for accessible spaces for dialogue about laws, policies, and programs. We will refer to persons with disabilities themselves for guidance on ensuring accessible information, communication, goods, services, and spaces.
We recognize and respect that people of all faiths and ethical perspectives can have different understandings on the limits and possibilities of their reproductive choices. Indeed, many people from diverse religious backgrounds support abortion rights as consistent with their religious convictions, and others who may personally oppose abortion do not seek to impose their views on others. Unfortunately, some religious actors are co-opting disability rights language to restrict access to abortion. It is critical that laws and policies on SRHR be based on sound scientific evidence and recognized human rights standards rather than on privately held beliefs, even when those beliefs are predominant in a given community.
As prenatal science and technology advance, we recognize that providers should offer evidence-based information to pregnant people neutrally and without bias during the prenatal screening and diagnostic process. We will advocate for professional and ethical standards and medical education that ensures that providers are trained on the rights and lived realities of people with disabilities or are able to refer to relevant people who can provide this information.
We will actively contribute to cross-movement education to inspire gender and disability mainstreaming in both movements.
ORGANIZATIONS at the Nairobi meeting that contributed to and endorsed the Principles

- Amnesty International
- ANIS - Institute of Bioethics, Human Rights and Gender, Brazil
- Asia Safe Abortion Partnership, India
- ASTRA Network, Poland
- Center for Reproductive Rights, US
- CREA, India/US
- Federation for Women and Family Planning, Poland
- Forum For Medical Ethics Society, India
- International Planned Parenthood Federation, Western Hemisphere Region (IPPF/WHR)
- International Women’s Health Coalition, US
- Ipas, US
- Legal Action for Persons with Disabilities, Uganda
- Stowarzyszenie Strefa Wenus z Milo (Strefa Wenus z Milo Association), Poland
- Sexual Rights Initiative, Switzerland
- Women Enabled International, US
INDIVIDUALS at the Nairobi meeting that contributed to and endorsed the Principles

- Amar Jesani, Independent Researcher and Teacher (India)
- Andrea Parra (Colombia)
- Catherine Hyde Townsend, Independent Consultant (USA)
- Everlyn Milanoi Koiyiet, Disability Rights Advocate (Kenya)
- Iñaki Regueiro de Giacomi (Argentina)
- Jane Fisher, Director, Antenatal Results and Choices (UK)
- Katrina Anderson, Gender and Sexuality Advocate (USA)
- Rebecca Cokley, Disability Justice Advocate (USA)
- Shamim Salim, Disability Rights Advocate (Kenya)
- Silvia Quan, Gender and Disability Advocate (Guatemala)

Endorsements updated until 28 February, 2019
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AND ENDORSE
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