

REPRODUCTIVE RIGHTS AND INTERNATIONAL LAW: THE STRUGGLE FOR GENDER EQUALITY IN HEALTH POLICY

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Abstract

Reproductive rights have emerged as the latest topic of international law, taking into account the interest of the entire world to promote gender equality within health care policies. Such rights encompass reproductive health-care services, decision-making capacity, autonomy of body, and freedom from discrimination, and they constitute the basis for the social participation of women. Thanks to international instruments such as CEDAW and the ICPD Programme of Action, the rights of the state have been enhanced in terms of ensuring their obligations for fulfilling their rights by providing equal rights-based health services. However, there are many social and cultural barriers, ineffective legislation, and policy gaps that limit the reproductive rights of women everywhere. Therefore, the problem of gender equality in health policy cannot be separated from the human rights approach since the need for the presence of measures for improving accountability, participation in policymaking, and effective implementation remains highly relevant. This research highlights the transformation of the language of reproductive rights in the modern world and shows how states should respond by introducing the appropriate health policies.

INTRODUCTION

Reproductive rights have transformed to be a component of contemporary-day international human-rights laws that are centered on bodily autonomy, gender equality, and health-care equity (Arif et al., 2025). These are also reflected in some international documents, such as the Convention on Elimination of Discrimination against Women (CEDAW), the International Covenant on Economic, Social and Cultural Rights, and the Programme of Action of the International Conference on Population and Development (Ahmed et al., 2022; Yaqoob & Haq, 2025). The translation of these principles into national health policy is however one of the largest challenges in

most countries, particularly in developing countries such as Pakistan where societal and cultural practices determine the impacts of the policy (Ishaque et al., 2025).

The studies show that there is a great gap in the level of the social awareness as various levels of social awareness regarding the reproductive rights of women are present among the students of a university, therefore, the urgent necessity to change the situation by means of education and legislation (Ali et al., 2024). In addition, provincial policies particularly policies concerning the Punjab province remain to be challenged in terms of implementation in the delivery of reproductive health as per policy assessment. Social-cultural

restrictions imposed by patriarchal values and problems with mobility remain the obstacles to reproductive freedom of women (Shehzadi et al., 2024).

Legal discourse also shapes reproductive governance especially in law related to assisted human reproduction where religious and advisory institutions affect the final legislation especially in relation to fertile married women (Brown et al., 2019). The claim that although there has been a shift in national legislations, patriarchy and discrimination still prevail in the legal and professional arenas is also supported by increased gender equality research (Yaqoob & Haq, 2025), and the significance of health policy approach in Pakistan to in line with international responsibilities on reproductive rights in gender equality (Iqbal et al., 2017).

Research Justification

One of the most debatable topics of the international law is reproductive rights since they have been elaborated with the purpose to promote gender equality and guarantee that everybody has equal access to health care amenities. Countries have to safeguard and advance reproductive rights that have been decided by international treaties like CEDAW and ICESCR. These institutions appreciate that the reproductive rights of women are a field of their autonomy and empowerment in the society. The case jurisdiction is the overlap of the international law system and the international human rights laws, which can offer a point of entry where the application of policies can be challenged. The states should ensure coherence between the national and international health policies, as well as give consent, access to services, and nondiscrimination in reproductive health.

However, even with such promises, there are still significant loopholes especially in developing countries where the legal, cultural and political landscapes restrict effective actions. A struggle towards equality between genders in the health policy sphere, thus, is the difficulty that cannot be confined to law to enshrine reproductive rights, but to break the barriers that the socio-economic, cultural, and systemic factors create. That is, the international law is both a guideline and a tool to

hold nations responsible towards an equitable health outcome.

Literature Review

There is a huge amount of discussion on issues relating to reproductive rights on an international level over the last 20 years, with experts noting the link between gender equality, the right to health, and legislation (Starrs et al., 2018). It is clear that such reproductive health frameworks as CEDAW and the ICPD Programme of Action play an important role in shaping reproductive health policy for developing countries; however, there are still significant obstacles to be addressed (Hashmi & Malik, 2023).

Previous studies have consistently cited the social norms, economic inequality, and the strictness of the legislation as major obstacles for ensuring reproductive rights that result in poor maternal health and no equality regarding access to reproductive care (Brown et al., 2019). Studies have shown that lack of funding, lack of training among healthcare providers, and lack of reproductive-health centers contribute to the growing gap in health between rural and urban areas (Ali et al., 2024). According to scholars, policy implementation has been hindered by sociopolitical resistance from conservative or religious groups that are opposed to policies related to family planning and safe abortion (Yaqoob & Haq, 2025). This results in an outdated framework regarding reproductive rights and contradicts international human rights standards (Ahmed et al., 2022).

Moreover, there is a line of research focused on accountability and right-based strategies that will help improve reproductive health. Researchers have indicated that increasing legal strategies, gender-sensitive governance, and involvement of the community can be helpful in improving policies (Ishaque et al., 2025). Research shows that the greater the number of states who adopt transparent mechanisms and follow the principles of human rights in their health care systems, the more such states are expected to improve reproductive rights and gender equality (Arif et al., 2025).

Historical Context of Reproductive Rights and International Law

Reproductive rights have historically been a part of international law since the mid-20th century. By that time, more people took interest in well-being of women, their ability to control their bodies, and the problem of population control policies (Yaqoob & Haq, 2025). The initial wave of arguments proved to be effective after the signing of the 1948 Declaration of Human Rights, wherein respect to people and equal rights and right to well being were proclaimed as the foundations of reproductive rights (Starrs, 2018). During the next decades, feminist movements managed to broaden the discussion in terms of the right to use contraception, deliver healthy babies, and resist coercion in matters of population regulation (Ali et al., 2024).

The biggest change was witnessed in the '90s, after the International Conference on Population and Development (ICPD) and Beijing Platform for Action which identified the rights to reproduction as basic human rights and encouraged governments to ensure gender equality in their health policies (Ahmed et al., 2022). Both these documents transformed the language of demographic regulation to that of women empowerment on the basis of freedom, safe childbirth and universal health service provision yet even with all these, gender inequality in reproductive rights is still observed because of some unavoidable issues such as legal and cultural barriers (Hashmi & Malik, 2023).

Theoretical Context of Reproductive Rights and International Law

Reproductive rights have legal basis in the context of international laws, according to the idea that the main clue to interpreting these rights is the principles of human rights where the emphasis is made on individual autonomy, equality, and human dignity. The very point of this issue is that a person must be able to exercise his or her freedom of choice in relation to reproductive health without any form of discrimination and even force and violence.

The other advantage of using the capability approach is that it reinforced the conceptual

foundation of reproductive rights by laying stress on the necessity to provide a chance to exercise the rights. Based on this strategy, the reproductive freedom is not only a legal right but also a prerequisite of human development and gender equality. Understanding the problem of reproductive rights as a component of justice in the healthcare field through the lens of the public health approach is possible, as well. According to this theory, governments are bound to make sure that citizens have access to reproductive health services that are accessible, affordable and not discriminatory.

The other perspective that contributes to the discussion is the feminist legal theory. This view illuminates the social power relations issue in the context of reproductive rights. This theory emphasizes that gender discrimination needs to be overcome in order to attain reproductive autonomy.

Laws Regarding Reproductive Rights and International Law

The right to reproductive health care is known to be the fundamental human rights, which include the right to determine how one should handle his or her body, the right to get health care and the right to avoid coercion. The international law serves as an arena under which these rights can be safeguarded through human rights agreements.

1. CEDAW (1979) obligates the states to abolish discrimination in all its facets and these aspects include reproductive rights through family planning, maternal health care and education.

2. In the article 12 of the International Covenant on Economic, Social and Cultural Rights (1966), there is the right to access to the maximum standards of health including reproductive and sexual health.

3. The Programme of Action of the International Conference on Population and Development (1994) and Beijing Declaration and Platform for Action (1995) support the idea that gender equality is premised on the importance of reproductive rights and, thus, states have to eliminate the obstacles to accessing healthcare services and ensure informed decisions.

But in Pakistan, the national law does not reflect such international commitments, at least partially.

1. The Constitution of Pakistan (1973) guarantees the right to life and dignity based on Article 9 and Article 14 respectively, which was construed by the courts to encompass some elements of reproductive health.

2. The termination of pregnancy is governed by Pakistan Penal Code (1860) which provides exceptional circumstances that allow the procedure in case of safeguarding the life and health of the pregnant woman.

3. National Health Policy (2016) and Population Welfare Ordinance (1960) provide the principles of family planning, maternal care, and health programs, which means that the government of Pakistan takes into account reproductive health. But such rights are never actually realized because of a number of factors, among them being culture, religion, and socioeconomic issues.

The interaction between the international law and the domestic law in Pakistan has shown that reform, implementation of policy and educational awareness can be highly beneficial in empowering women and giving them equal reproductive rights. This synergy needs to be enhanced so as to foster gender equality and protect the dignity of these individuals, and so the state must meet its international and domestic legal obligations.

Challenges for Reproductive Rights and International Law

Although the international laws have been able to safeguard reproductive rights, numerous challenges have been encountered in the process of actualizing these rights especially in matters of gender equality in health policy. International legal mechanisms like CEDAW (1979), ICESCR (1966) and ICPD Programme of Action (1994) set the standards of reproductive health and gender equality. Nonetheless, it is still hard to make sure that these standards are translated into the national policies because there are political, social, and economic obstacles. The reproductive rights of women are often restrained through social practices, religious beliefs and patriarchal systems. This translates to the inability to access contraception, maternal health services as well as

abortion and this weakens the objectives of international law and international efforts to gain gender equality.

It is also the issue of international and local incompatibility of international legal duties and their practice. While it may be that the treaty and policies have been adopted, the institutional strength is lacking; and inadequate funding and proper monitoring procedures are some of the obstacles that hinder implementation. International documents on accountability is not powerful enough to achieve a significant change, but reporting to international community to serve as compliance only can be employed as an accountability mechanism. Marginalized groups, such as rural women, teenagers, and the economically disadvantaged, are affected by social marginalization, illiteracy and access to healthcare facilities.

The provisions of the Constitution (Articles 9 and 14) in Pakistan, the provisions under the Pakistan Penal Code on abortion and the National Health Policy (2016) are all domestic laws designed to advance reproductive health. However, there are still some practical issues like social resistance, ignorance, and disparate distribution of health facilities. The conflict between international law and the national application of the same would necessitate massive changes in the legal system, strong national policies enforcement, citizen education and creation of health care infrastructure. These will play a critical role in the achievement of gender equality, human rights respect, and formulation of reproductive health policies that will not only favor women but also enhance the population health.

Opportunities for Reproductive Rights and International Law

International law presents many opportunities for advancing reproductive rights and gender equality through health policy. CEDAW (1979), ICESCR (1966) and ICPD (1994) are some of the international instruments that establish the normative standards in the protection of reproductive rights. The international instruments serve as legal and policy guides for states in ensuring there is a robust healthcare system,

improved access to family planning, maternal care services and sex education and passing laws that would ensure the protection of women from discrimination and coercion. Providing a globally recognized framework, the international instruments create avenues for advocacy, accountability and policy changes at national and regional levels.

Another opportunity presented by international law is the increasing awareness within the global community of the link between reproductive rights and development outcomes such as sustainable development goals like SDG 3 (good health and well-being) and SDG 5 (gender equality). The international law will provide the government, civil society organizations, and health organizations the mandate to prioritize reproductive health within their government policy agenda, thus making it possible to implement certain measures intended to reduce maternal deaths, unsafe abortions, and inequalities. The international law will also create an avenue for collaboration and sharing of knowledge and capacity building between nations in matters related to health policies and gender equality initiatives.

In Pakistan, national policies like the Constitution (Articles 9 and 14), the National Health Policy (2016), and the Population Welfare Programme give an opportunity to use international obligations to enhance reproductive health services. There are chances to enhance policy implementation, raise awareness, and incorporate gender sensitive health programs in the national planning. Through harmonizing national policies and international norms, Pakistan and other nations can strengthen the empowerment of women, decrease disparities in health, and develop a sustainable and rights-based model of reproductive health and gender equality.

Discussion

The subject of reproductive rights in the sphere of international law shows how complex is the connection among the normative framework, national laws, and social culture. The conventions such as CEDAW in 1979 and ICESCR in 1966 have already established the legal recognition of

women's reproductive rights; however, the effectiveness of the treaties relies mainly on its implementation at the national level. While international laws might set an example of gender equality and health care, factors such as culture, religion, economic differences, among others, continue to hinder the use of reproductive rights. Legal grounds in countries like Pakistan include the National Health Policy (2016) along with some of the constitutional rights guaranteed in Articles 9 and 14. However, certain shortcomings are visible in terms of awareness and availability of health facilities, more so in rural areas and marginalized communities. Such shortcomings indicate that apart from being legally consistent with international standards, the need for comprehensive health policies and public education is also felt.

Moreover, international law serves as a tool for advocacy and accountability purposes. With the help of international commitments, it becomes possible to improve access to maternal health services, family planning, and safe reproductive health services. What is interesting is that the analysis shows that the concept of reproductive rights must be viewed as a multi-dimensional provision that includes several dimensions.

Conclusion

Gender equality, public health and human dignity can only be achieved through reproductive right. The international laws have given very strong foundation upon which the states can rely on to make sure that these rights are exercised by them by applying strategies like CEDAW (1979) ICESCR (1966) and the ICPD Programme of Action (1994). The focus of these laws is on the autonomy of women, access to reproductive health facilities and guard against discrimination, thereby establishing entry points to legal, policy and social reforms. As is often the case in practice, though, the cultural resistance, socio-economic barriers, and the insufficient health facilities are likely to act as constraints on the full exercise of reproductive rights, especially in such a country as Pakistan.

It can be based on domestic laws (constitutionally guaranteed protection and health policy), but the effectiveness of its implementation must be

achieved through consciousness, competence, and alignment with the international law standard. In general, the creation of reproductive rights should be an integrated process that will consider the international law norm, domestic laws, health care programs, and social activity. This way, states would be poised to provide equality of reproductive health services, liberation of women, and sustainable gender equality in health policy.

Recommendations

To achieve the promotion of reproductive rights and gender equality in the area of health policies, it is necessary to make sure that the national legislation and policies are in full adherence to the international human rights standards. Any legislative change aimed at enhancing access to reproductive care services which include contraception, pregnancy care, and safe abortion as part of the legal system and the autonomy and right of choice of women should be in accordance with international conventions like CEDAW (1979) and ICESCR (1966).

In addition, capacity-building and the growth of consciousness are also essential in overcoming socio-cultural barriers. Education in communities, training of health workers and interaction with policy makers can address stigma, lack of adequate information about reproductive rights and empowering women to make good decisions with regard to their health.

It is also important that the infrastructural support of the healthcare services be strengthened so as to provide equal access and to bridge any gaps that may be present between the outcomes of mothers and their reproductive health. Moreover, measures should be put in place to make sure that there is monitoring and accountability to see any slip-ups or weaknesses in the process. This may also involve more transparency and demand on the policy as reporting to international human rights organizations on a regular basis and the inclusion of civil society organizations.

It would also introduce a chance to have the cooperation of the government authorities, the international bodies and the NGOs in the sharing of information and mobilizing of resources to employ the best possible practices. All these may

be positively applied in the advancement of reproductive rights and gender equality.

Research Limitations

Some limitations of reproductive rights and international laws include certain restrictions that may affect the scope and significance of research on this issue. The most significant limitation involves inconsistencies in applying international laws within individual countries. There are international legal frameworks, for example, CEDAW (1979) and ICESCR (1966), but differences in the laws of each country render comparison difficult.

Moreover, socio-cultural factors like religion, patriarchy, and the attitude towards reproductive health issues cannot be easily quantified and may also affect service delivery and the reporting of results. The absence of reliable data, particularly in rural or marginalized areas, will limit the possibility for conducting a comprehensive analysis. Lastly, since the current literature is heavily drawn from secondary information and policy papers, this means that there could be other dimensions not covered by the available studies. Such limitations demonstrate that despite the use of international law to provide a general framework, there are other considerations that must be considered in assessing the results of the study and formulating policy recommendations.

Research Implications

The importance of the research conducted on reproductive rights and international law lies in its applicability towards policy making, practical use, and further research. First, it is important to understand that research has demonstrated the need to harmonize international discourses like CEDAW (1979) and ICESCR (1966) with domestic laws. The harmonization of international and domestic laws would make reproductive services available, accessible, and rights-based. Such harmonization could be used by policymakers to develop such policies and laws that could reduce gender differences between men and women, giving women the freedom of choice related to reproduction. Moreover, the research has also pointed out the challenges associated with

socio-cultural and structural barriers, which include patriarchy, religion, and lack of health care facilities, which pose obstacles to implementing reproductive rights.

Finally, this research provides the groundwork for further research that can assess the impact of the policies, follow up on the implementation of commitments at an international level, and develop ways of improving health equity, reproductive rights, and sustainability in reproductive health equality.

Future Research Directions

Several domains need to be addressed when studying reproductive rights and international law in order to gain further knowledge in the matter and formulate policies. Comparative analysis of how international laws are applied in various regions in light of such treaties as CEDAW (1979) and ICESCR (1966) may be helpful in providing information about efficient legal and policy solutions. Investigation of how socio-cultural, economical, and religious factors affect access to reproductive healthcare services may reveal barriers to accessing healthcare and provide a way for developing an intervention strategy. Second, one can study how efficient certain national health policies, family planning programs, and maternal healthcare services can be in terms of achieving gender equality and improving reproductive health. Community-based campaigns, training of healthcare workers, and involving civil society in the process in order to strengthen women's position in relation to decision making is yet another field worthy of investigation. Lastly, conducting longitudinal and mixed method research will be helpful in examining the sustainability of policy interventions.

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