



CEDAW Secretariat
OHCHR - Palais Wilson
52, rue des Pâquis
CH-1201 Geneva 10
Switzerland

June 20, 2014

Re: Submission for Half-Day of General Discussion and Draft General Recommendation on the Right to Education

Dear Committee Members:

The Center for Reproductive Rights (CRR), a global legal advocacy organization headquartered in New York, with regional offices in Nairobi, Bogotá, Kathmandu, Geneva, and Washington, D.C., submits this contribution in response to the Committee on the Elimination of Discrimination against Women's (CEDAW Committee) call for submissions for the half day of general discussion and draft general recommendation on the right to education.

As the CEDAW Committee recognizes, education is an essential vehicle for the realization of women's equality, as it enhances women and girls' economic opportunities, public and political participation, and development of leadership skills.¹ Yet, while the past several decades have seen vast improvements in education worldwide, gender remains a primary indicator of educational attainment,² which in turn prevents girls from achieving higher social and economic statuses and perpetuates cycles of inequalities and discrimination. This submission details two violations of girls' reproductive rights that seriously undermine girls' ability to enjoy the right to education and thereby achieve substantive equality: mandatory pregnancy testing and the expulsion of pregnant schoolgirls and lack of comprehensive sexuality education. In order to ensure that education creates an enabling environment and provides girls with the necessary skills to determine their life course, states must ensure that the right to education incorporates sexual and reproductive rights, including girls' right to reproductive autonomy.

I. Girls' Sexual and Reproductive Health and Rights, Substantive Equality and the Right to Education

The CEDAW Convention "requires that women be given an equal start and that they be empowered by an enabling environment to achieve equality of results."³ The CEDAW Committee has noted that "[t]he position of women will not be improved as long as the underlying causes of discrimination against women, and of their inequality, are not effectively addressed."⁴ The realization of the right to education is critical for providing girls with the tools necessary to overcome entrenched discrimination and inequalities. As the ESCR Committee has noted, "education is the primary vehicle by which economically and socially marginalized adults and children can lift themselves out

of poverty and obtain the means to participate fully in their communities.”⁵ To this end, education must provide girls with essential life skills and empower girls to determine the course of their lives and their futures.⁶

For girls to be able to utilize education as a means of achieving substantive equality, education must also enable girls to make meaningful decisions about their lives and their bodies without undue influence or coercion. As the CEDAW Committee recognizes, the burden of childrearing disproportionately falls on women, impacting their rights to education and employment, among others.⁷ The CEDAW Committee further recognizes that the disproportionate burden women carry in relation to childcare is one of the most significant factors inhibiting women’s ability to participate in public life⁸ and that reduced domestic burdens enable women to engage more fully in activities outside the home.⁹ As such, even where girls are able to access schooling, where the content of the education reinforces gender-based stereotypes about the roles of women and girls or fails to include comprehensive sexuality education, or where the school environment perpetuates discrimination against girls, the rights to education and substantive equality will remain unfulfilled. Using the examples of forced pregnancy testing and expulsion of pregnant schoolgirls and the denial of comprehensive sexuality education, this submission demonstrates the interdependent nature of girls’ reproductive rights, substantive equality and right to education and provides recommendations for ensuring that these rights can be effectively realized.

II. Mandatory Pregnancy Testing and the Expulsion of Pregnant School Girls

Adolescents who become pregnant are particularly vulnerable to violations of their right to education, as they experience elevated school drop-out rates and lower education attainment. While in some instances, they are unable to continue attending school due to lack of economic resources or childcare needs, the practice of mandatory pregnancy testing and expulsion of pregnant schoolgirls is an egregious violation of girls’ human rights, extending beyond the right to education and also violating their rights to substantive equality and non-discrimination, dignity, information, health, and freedom from cruel, inhuman and degrading treatment.

Mandatory pregnancy testing and expulsion of pregnant school girls has been documented in a number of African countries including Tanzania,¹⁰ Ghana,¹¹ Kenya,¹² Nigeria,¹³ Sierra Leone,¹⁴ Uganda¹⁵ and Zimbabwe.¹⁶ In Tanzania, for example, as the Center’s fact finding report *Forced out: Mandatory Testing and the Expulsion of Pregnant Students in Tanzanian Schools* reveals, this discriminatory practice has taken place for over 50 years. While neither the testing or expulsion are mandated by any law, policy or regulation,¹⁷ research has shown that teachers, school administrators, and education officials nonetheless believe that they are required by law to administer pregnancy tests to girls and expel those who are pregnant.¹⁸ As a result, each year thousands of adolescent girls in mainland Tanzania are forced to undergo pregnancy testing and are expelled if found to be pregnant: in the last decade alone, over 55,000 girls have been forced out of school due to pregnancy.¹⁹

The Committee on the Rights of the Child (CRC) has expressed “deep concern that girls who become pregnant whilst still attending school are often excluded from school,” noting that “such action is not only discriminatory against girls but also a violation of the right to education.”²⁰ As such, the CRC has made clear that “discrimination based on adolescent pregnancy, such as expulsion from schools, should be prohibited, and opportunities for continuous education should be ensured.”²¹ It has also mandated governments to “foster positive and supportive attitudes towards adolescent parenthood for their mothers and fathers” and “develop policies that will allow

adolescent mothers to continue their education.”²² The CEDAW Committee has further urged numerous states to ensure that pregnant girls stay in school and are able to continue their education.²³

A. Coerced and forced pregnancy testing in schools

Pregnancy testing in schools can take two forms: coercive testing which occurs immediately prior to admission with the aim of excluding those who are found to be pregnant from admission; and forced testing which is conducted during the school year to identify and expel pregnant girls.²⁴ Most often, coercive pregnancy testing is used as a precondition for matriculation—even though, technically, the student can refuse to undergo the test, it would mean that she will not be admitted to the school, thereby forfeiting her educational opportunities.²⁵ While certain medical tests are required prior to admission to school,²⁶ such tests are usually to determine whether students have any communicable or chronic diseases, allergies or asthma, with the aim of preventing the spread of diseases and/or providing the student with care and treatment, if necessary. In such instances, students are not refused matriculation if found to have any medical condition.²⁷ However, in the context of pregnancy testing, it appears that the sole rationale behind the practice is to discriminatorily deny admission to the girls found to be pregnant.²⁸ As one teacher explained, pregnancy is the only condition that would result in denial of admission.²⁹

Pregnancy testing that occurs during the school year can occur per a pre-set schedule either every month or quarter, or twice a year.³⁰ It can also occur based on suspicions that a student is pregnant: in such instances, the suspected student may be tested individually or all of the girls in the school may be tested.³¹ Testing can be conducted manually, through a urine-based pregnancy test, or both. Most students described manual pregnancy testing—which seems to be the preferred method in most schools—as being physically invasive and painful.³² Students recounted how health care professionals, and in some cases teachers, palpated their stomach and squeezed their breast to check for signs of pregnancy.³³ As one student explains:

When you get [to the classroom], they tell you that you will be tested. They ask you to lie on the desk They don't put down a sheet or anything, you just lie on the desk. They release your clothes but you don't undress fully... The nurse matron does the testing by pinching [your] stomach and breasts. It hurts.³⁴

As the Center's research in Tanzania shows, pregnancy tests in schools are performed without any prior information or consent. School officials who arrange the tests do not give prior notice to the girls regarding the scheduled testing.³⁵ In fact, by not giving prior notice about the scheduled testing, schools ensure that girls are not able to avoid the testing.³⁶ Similarly, health care professionals do not usually provide counselling regarding the procedure before or during the testing.³⁷ The students are not informed of what the procedure entails and are not given the option to choose a less invasive method.³⁸ As one student recounts:

During the testing, [the teacher and nurse] don't explain what they are doing or why. They talk about the effect of early pregnancy on health and that we should wait until you're young, you can experience something when you grow up—your health will be affected. They say you will develop health problem[s] on your reproductive organs.³⁹

In addition, since the pregnancy testing is carried out in a custodial setting, the imbalanced power dynamic makes it impossible for the girls to refuse testing. Typically, students are “expected to be

respectful, obedient, and unquestioning of school authority.”⁴⁰ As such, refusing to be tested can be regarded as disobeying a teacher or the school administration, which can be a ground for expulsion by itself.⁴¹ Further, since pregnancy testing is used as a disciplinary measure—by expelling those found to be pregnant—school administrators and teachers have expressed the belief that students have the obligation to submit to the testing.⁴² One secondary school teacher, explaining her own experience undergoing testing while a student, said that:

They do it like a surprise. They say it’s time to test and then they go for testing the same day. They call all the girls and put them in one room and then they lock you in there so you can’t escape No one ever said no to the test. It is impossible to say that.⁴³

International human rights law clearly establishes that health care providers are obligated to seek a patient’s consent before disclosing confidential health information to third parties.⁴⁴ The CRC Committee has clarified that “[h]ealth care providers have an obligation to keep confidential medical information concerning adolescents” and that “such information may only be disclosed with the consent of the adolescent.”⁴⁵ Similarly, the CEDAW Committee has recognized that lack of confidentiality can disproportionately affect women by deterring them from seeking services,⁴⁶ and has called on governments to ensure sexual and reproductive health services to adolescents that respect the right to privacy and confidentiality.⁴⁷ Despite these requirements, health care professionals routinely disclose pregnancy test results to school officials;⁴⁸ in turn, schools also breach this confidentiality, sharing the results with other teachers, staff or students. In fact, the student might not find out she is pregnant until she is informed by the school that she is expelled. One of the students interviewed, for instance, was informed that she was pregnant during a school-wide assembly.⁴⁹ In other cases, those students who are pregnant are asked to stay behind from those who are not pregnant—this indirectly reveals the results of the pregnancy tests as it is obvious that those staying behind are pregnant.⁵⁰

B. The expulsion and exclusion of pregnant school girls

Data from the Tanzanian Ministry of Education indicates that, every year, thousands of adolescent girls drop-out of school due to pregnancy. For instance, in 2009, 2010 and 2011, about 9,800,⁵¹ 8,000⁵² and 5,767⁵³ girls respectively were forced out of school due to pregnancy. However, this high number of drop-outs due to pregnancy is likely an underestimate since it only captures those girls who are formally expelled by the school: the Center’s fact-finding report revealed that girls who become pregnant often drop-out without being formally expelled since they know that they would not be allowed to stay in school.⁵⁴

Schools, education officials and students cite various, and often discriminatory, justifications for the expulsion of pregnant students. Some deem expulsion necessary in order to punish girls for engaging in pre-marital sex.⁵⁵ Others see the practice as an important step to discourage and prevent others—particularly adolescent girls—from engaging in pre-marital sex.⁵⁶ As one student explained: “If they let a pregnant girl continue to go to school, it will spoil the others. So it’s better to expel them.”⁵⁷ Also, many people justify the practice based on the mistaken and stereotypical belief that a pregnant girl—and subsequently an adolescent mother—cannot concentrate in class and will not be able to focus on her education.⁵⁸

Further, the practice is used to force girls to conform to stereotypical role of a mother. By expelling pregnant school girls, schools ensure that the girls devote themselves entirely to being a mother.⁵⁹ They also deny them their right to make autonomous decisions regarding their reproductive health

by using the expulsion as a method of preventing adolescent girls from making a decision whether or not to carry the pregnancy to term.⁶⁰ Revealing the pregnancy early on exposes girls who choose to terminate their pregnancy to the stigma attached to abortion, thereby discouraging girls from ending the pregnancy. Furthermore, even those girls who choose to terminate the pregnancy, and are therefore no longer pregnant, have been denied the ability to reenter school, further confirming that expulsion is used to compel women into motherhood and punish those that do not conform.⁶¹ In addition, there is no exception to this practice of expelling pregnant school girls. Whether the student became pregnant as a result of sexual violence, early marriage or economic necessity, she will still be expelled and not be allowed to re-enroll.⁶² This further applies to those girls who miscarry.⁶³

Additionally, regardless of how the student became pregnant, schools do not offer any counselling, support,⁶⁴ information on available maternal health care, or referrals for health care professionals.⁶⁵ Even though stigma and condemnation associated with extra-marital adolescent pregnancy is strong in Tanzania, girls are not provided counseling that can potentially assist them in coping with the situation.⁶⁶ Many interviewees recounted stories of girls who were exposed to stigma and rejection from their parents, families, and peers.⁶⁷

Even after giving birth or terminating the pregnancy, girls are still denied access to education as government schools often use previous expulsion as a ground for denying re-enrollment to girls. As one Ministry of Education official explained: “Government schools are not allowed [to admit adolescent girls after giving birth]. Private schools can decide that they can reaccept girls if they want. [But] if a government school allowed a pregnant girl back it would be serious. Stern measures can be taken against [the head teacher] because it’s not allowed.”⁶⁸ Apart from being discriminatory by itself, this disproportionately disadvantages girls from low-income families and those living in rural areas, as only those who can afford private school fees and child care are able to exercise this option.⁶⁹ For girls in rural areas, in addition to the cost, private schools might not be available or easily accessible. As such, adolescent girls are forced to either enter a non-formal or vocational school or forgo their right to education entirely.

Denying access to education through expulsion and exclusion due to pregnancy has devastating consequences on the lives and futures of adolescent girls. In addition to discriminatorily targeting pregnant school girls and exposing them to stigma and stereotypes against extra-marital pregnancy, it also perpetuates inequality and discrimination by limiting their access to educational and employment opportunities. As stated above, although some of the expelled girls are able to continue with formal education through private schools, the vast majority of girls do not have the opportunity to do so. As the U.N. Special Rapporteur on Education has emphasized, both primary and secondary education are “key to reducing poverty.”⁷⁰ Research has also shown that there is a direct correlation between the level of education and income, as increase in educational level also increases the possibility of attaining a higher income.⁷¹ However, “for many of these adolescent girls, the prospects for providing their children with a better life are greatly diminished by their own incomplete education and consequently limited employment opportunities.”⁷²

As the Center’s fact-finding report revealed, some adolescent girls who became pregnant are forced out of their homes and made to live on the streets due to the stigma and shame surrounding adolescent pregnancy.⁷³ This exposes them to the risk of forced commercial sex, as these girls may have no choice but to resort to such work in order to support themselves and their children.⁷⁴ Some of the girls who are expelled are also forced into early marriage as parents, unable or unwilling to

support a pregnant daughter, marry her off to the person who impregnated her.⁷⁵ This further puts them at risk to additional early pregnancies—thereby risking their life and health—and physical violence from their partners.⁷⁶

III. The Right to Comprehensive Sexuality Education

Comprehensive sexuality education is a critical component of the rights to education, substantive equality and nondiscrimination, and health, among others.⁷⁷ Treaty monitoring bodies recognize that sexuality education contributes to the prevention of HIV/AIDS,⁷⁸ teenage and unwanted pregnancies,⁷⁹ unsafe abortion,⁸⁰ and maternal mortality.⁸¹ Where girls are not provided with comprehensive sexuality education, it disproportionately hinders the realization of their human rights by inhibiting their knowledge about, and thereby access to, necessary sexual and reproductive health services, exposing them to greater risk of unintended pregnancy. While both boys and girls require sexuality education, girls must bear the physical burden of unplanned pregnancy. As noted above, due to the discrimination and gender stereotypes that girls face, unplanned pregnancy can interrupt their education, compromise their ability to plan for their lives and their futures, and deny them the ability to exercise reproductive autonomy and enjoy the rights to substantive equality and non-discrimination.

Parental authorization requirements for comprehensive sexuality education constitute a serious barrier to the realization of the right to education. While parents and other legal guardians are afforded particular rights and responsibilities in relation to children, the primary aim is to enable children to exercise their rights.⁸² To this end, the CRC has indicated that minors should have access to such information regardless of whether their parents or guardians consent.⁸³ The Committee on Economic, Social and Cultural Rights and the Special Rapporteur on the Right to Health have further urged states to implement mandatory sex education programs.⁸⁴ Additionally, the CEDAW Committee has characterized parental authorization requirements as barriers to the realization of the right to health.⁸⁵ To ensure that all individuals can access comprehensive sexuality education, it is critical that states remove parental consent requirements and treat it in the same manner as other school subjects.

Furthermore, treaty monitoring bodies have urged states to implement sexuality education programs in all schools⁸⁶ as well as in other settings in order to reach adolescents who are not enrolled in schools.⁸⁷ To comply with international human rights standards, sexual and reproductive health information and education should be comprehensive, unbiased, and scientifically accurate.⁸⁸ Sexuality education should also aim to transform cultural views about adolescents' need for contraception and other taboos regarding adolescent sexuality⁸⁹ and should not reinforce stereotypes or prejudices or include discriminatory information on sexual minorities.⁹⁰

IV. Recommendations

As the right to education is an interdependent and indivisible right that creates the foundation upon which other rights are realized, girls' ability to enjoy this right free from discrimination is paramount. The Center hopes that the following recommendations will be useful in ensuring girls' rights to substantive equality and non-discrimination in the context of the right to education.

1. Recognize that forced pregnancy testing and expulsion of pregnant schoolgirls constitutes a gross violation of the right to education, in addition to perpetuating discriminatory stereotypes and exacerbating the inequalities that girls face. States should immediately adopt

policies barring discrimination on the basis of pregnancy in schools and take affirmative steps to accommodate the educational needs of pregnant schoolgirls.

2. States should be urged to take affirmative measures to address the structural barriers that result in lower levels of education attainment for girls, including by implementing laws, policies and programs to ensure that all girls, including marginalized populations such as those who bear children, are able to continue attending school.
3. To comply with their obligations under the rights to substantive equality and nondiscrimination, states must ensure that girls not only have the same educational opportunities as boys, but also that there is equality of results in regards to their educational attainment.
4. To ensure that girls have the necessary information and resources to exercise their reproductive autonomy, states should ensure all minors receive appropriate and quality comprehensive sexuality education, including by removing parental consent requirements. Comprehensive sexuality education must be unbiased and scientifically accurate and address the unique health needs of girls.
5. States should take positive measures to eradicate gender-based stereotypes generally, but particularly in educational settings and curricula and to remediate the effects that socialized gender roles have on girls' ability to exercise their human rights, including their sexual and reproductive rights. Such measures should include educational campaigns on gender equality and targeted programs to increase girls' educational attainment and participation in career fields historically dominated by males.

We hope that this information is useful in the development of the draft general recommendation on the right to education. Should the Committee have any questions or would like additional information, please do not hesitate to contact the undersigned.

Sincerely,



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¹ See Committee on the Elimination of Discrimination Against Women (CEDAW Committee), *Concept Note on the Draft General Recommendation on Girls'/Women's Right to Education*, paras. 4.1-4.5 (June 11, 2014).

² UN Department of Public Information, *We can end poverty: Millennium Development Goals and Beyond 2015* (September 2013), http://www.un.org/millenniumgoals/pdf/Goal_2_fs.pdf; See also UNESCO, *World Atlas of Gender*

Equality in Education (2012), <http://www.uis.unesco.org/Education/Documents/unesco-world-atlas-gender-education-2012.pdf>.

³ CEDAW Committee, *General Recommendation No. 25: Article 4, Paragraph 1 of the Convention (Temporary special measures)*, (30th Sess., 2004), in *Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies*, at 366, at para.8, U.N. Doc. HRI/GEN/1/Rev.9 (Vol. II) (2008)[hereinafter CEDAW Committee *Gen. Recommendation No. 25*].

⁴ *Id.* para. 10.

⁵ Committee on Economic, Social and Cultural Rights, *General Comment No. 13: The Right to Education (Art. 13)*, (21st Sess., 1999), in *Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies*, at 63, para. 1, U.N. Doc. HRI/GEN/1/Rev.9 (Vol. I) (2008) [hereinafter ESCR Committee, *Gen. Comment No. 13*].

⁶ See Convention on the Elimination of All Forms of Discrimination against Women, *adopted* Dec. 21, 1965, arts. 3, 10, G.A. Res. 34/180, U.N. GAOR, 34th Sess., Supp. No. 46, at 193. U.N. Doc. A/24/46, U.N.T.S. 13 (*entered into force* Sept. 3, 1981) [hereinafter CEDAW]; Committee on the Rights of the Child, *General Comment No. 1: The Aims of Education*, (26th Sess., 2001), in *Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies*, at 386, para. 9, U.N. Doc. HRI/GEN/1/Rev.9 (Vol. II) (2008) (noting that “[e]ducation must also be aimed at ensuring that essential life skills are learnt by every child and that no child leaves school without being equipped to face the challenges that he or she can expect to be confronted with in life” and that “[t]he overall objective of education is to maximize the child’s ability and opportunity to participate fully and responsibly in a free society”) [hereinafter Committee on the Rights of the Child, *Gen. Comment No. 1*].

⁷ CEDAW Committee, *General Recommendation No. 21: Equality in marriage and family relations*, (13th Sess., 1994), in *Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies*, at 341, para. 21, U.N. Doc. HRI/GEN/1/Rev.9 (Vol. II) (2008) [hereinafter CEDAW Committee, *Gen. Recommendation No. 21*].

⁸ CEDAW Committee, *General Recommendation No. 23: Women in political and public life* (16th Sess., 1997), in *Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies*, at 349, para. 10, U.N. Doc. HRI/GEN/1/Rev.9 (Vol. II) (2008) [hereinafter CEDAW Committee, *Gen. Recommendation No. 23*].

⁹ *Id.* para. 11.

¹⁰ CENTER FOR REPRODUCTIVE RIGHTS, *FORCED OUT: MANDATORY PREGNANCY TESTING AND EXPULSION OF PREGNANT STUDENTS IN TANZANIAN SCHOOLS* 13 (2013), *available at* <http://reproductiverights.org/en/document/tanzania-report-forced-out-mandatory-pregnancy-testing-expulsion> [hereinafter *FORCED OUT*].

¹¹ *17 senior high school students dismissed*, GHANAWEB (Mar. 29, 2011), <http://www.ghanaweb.com/GhanaHomePage/features/artikel.php?ID=205872> (last visited Jun. 13, 2014); Taniele Gofers, *Teenage Pregnancy Should Not End Girl’s Education*, GHANAWEB (Oct. 6, 2012), <http://www.ghanaweb.com/GhanaHomePage/NewsArchive/artikel.php?ID=252382> (last visited Jun.13, 2014); *‘Do not dismiss girls who get pregnant in School,’ GRAPHIC ONLINE* (Mar. 3, 2013); Samuel Serpaning, *Faydi- Striving to Stem School Dropout Rate in Ghana*, AMMADO (Jun. 13, 2014), <https://www.ammado.com/community/113659/articles/38975> (last visited June 13, 2014).

¹² Although Kenya has introduced a reentry policy for pregnant students, it is not clear how widely the policy is being implemented in practice. Further, the policy requires “voluntary” pregnancy testing in schools. MINISTRY OF PUBLIC HEALTH AND SANITATION AND MINISTRY OF EDUCATION (KENYA), *NATIONAL SCHOOL HEALTH POLICY* 23 (2009). See also Cynthia Vukets, *Testing schoolgirls for pregnancy not likely to cut number of teenage mothers*, DAILY NATION (Dec.22, 2009, 22:00), <http://www.nation.co.ke/News/-/1056/829400/-/vo7vw2/-/index.html> (last visited June 13, 2014) (for discussion of how “voluntary” pregnancy testing may effectively mean mandatory pregnancy testing).

¹³ See, e.g., Ifeoma Onyeka, Juhani, Miettola, Amobi Ilika & Tuula Vaskilampi, *Unintended pregnancy and termination of studies among students in Anambra state, Nigeria: Are secondary schools playing their part?*, 15 AFR. J. REPROD. HEALTH 109, 100 (2011).

¹⁴ *Sierra Leone: President Koroma says, ‘No to teenage pregnancy’*, ALLAFRICA (May 14, 2013), <http://allafrica.com/stories/201305150100.html?viewall=1> (last visited June 16, 2014); *Sierra Leone: Pregnancy automatic dismissal for male and female students*, IRIN (March 6, 2009), <http://www.irinnews.org/report/83356/sierra-leone-pregnancy-automaticdismissal-for-male-and-female-students> (last visited June 16, 2014).

¹⁵ Charles Ekyagonza, *Uganda: Pregnant Mothers Cannot Stay in School*, ALLAFRICA (February 17, 2013), http://allafrica.com/stories/201302201700.html?aa_source=slideout (last visited June 16, 2014).

¹⁶ *See Zimbabwe: Pregnancy need not put an end to education*, IRIN (Aug. 25, 2010), <http://www.irinnews.org/Report/90286/ZIMBABWE/Pregnancy-need-not-put-an-end-to-education> (last visited June 13, 2014).

¹⁷ MINISTRY OF HEALTH AND SOCIAL WELFARE, NATIONAL ADOLESCENT REPRODUCTIVE HEALTH STRATEGY 2011-2015 5 (2011) [hereinafter NAT'L ADOLESCENT RH STRATEGY]; MINISTRY OF EDUCATION AND CULTURE, GUIDELINES FOR IMPLEMENTING HIV/AIDS/STDs AND LIFE SKILLS EDUCATION IN SCHOOLS AND TEACHER'S COLLEGES 24 (2002); UNITED REPUBLIC OF TANZANIA, PRIME MINISTER'S OFFICE, NATIONAL POLICY ON HIV/AIDS para. 5.2 (2001) [hereinafter NAT'L POLICY ON HIV/AIDS].

¹⁸ FORCED OUT, *supra* note 10, at 13.

¹⁹ *Id.* at 17 (2013); HAKIELIMU, LITIGATING THE RIGHT TO EDUCATION IN TANZANIA: LEGAL, POLITICAL, AND SOCIAL CONSIDERATIONS AND POTENTIAL APPLICATIONS, *Expulsion of Pregnant Students* 3 (2011), available at <http://hakielimu.org/files/publications/Litigating%20the%20Right%20to%20Education%20in%20Tanzania.pdf> [hereinafter LITIGATING THE RIGHT TO EDUCATION IN TANZANIA]; MINISTRY OF EDUCATION AND VOCATIONAL TRAINING, BASIC EDUCATION STATISTICS IN TANZANIA (BEST) (2012), T2.12&2.13 DropRep and 4.11, Chap 4.5. Drop [hereinafter BEST 2012].

²⁰ Committee on the Rights of the Child, *Concluding Observations: Lesotho*, para. 53, U.N. Doc. CRC/C/15/Add.147 (2001).

²¹ Committee on the Rights of the Child, *General Comment No. 15: The right of the child to the enjoyment of the highest attainable standard of health (art. 24)* (62nd Sess., 2013) para. 56, U.N. Doc. CRC/C/GC/15 (2013) [hereinafter CRC Committee *Gen. Comment No. 15*].

²² Committee on the Rights of the Child, *General Comment No. 4: Adolescent health and development in the context of the Convention on the Rights of the Child* (33rd Sess., 2003), in *Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies*, at 417, para. 27, U.N. Doc. HRI/GEN/1/Rev.9 (Vol. II) (2008) [hereinafter CRC Committee *Gen. Comment No. 4*].

²³ *See, e.g.*, CEDAW Committee, *Concluding Observations: Chile*, para. 29(a), U.N. Doc. CEDAW/C/CHL/CO/5-6 (2012); CEDAW Committee, *Concluding Observations: Saint Lucia*, para. 28, U.N. Doc. CEDAW/C/LCA/6 (2006).

²⁴ FORCED OUT, *supra* note 10, at 54.

²⁵ *Id.*

²⁶ *See e.g.*, Moshi University College of Co-operative and Business Studies, Student's Medical Examination Form, <http://www.muccobs.ac.tz/pdf/MEDICAL%20EXAM%20FORM.pdf> (last visited June 16, 2014); Ardhi University (Dar es Salaam), Form C (on file with the Center for Reproductive Rights); WIZARA YA ELIMU NA UTAMADUNI [MINISTRY OF EDUCATION AND CULTURE] KIONGOZI CHA MKUU WA SHULE YA SEKONDARI TANZANIA [GUIDELINES FOR SECONDARY SCHOOL HEAD TEACHERS IN TANZANIA] 78 (1997) [hereinafter KIONGOZI (1997)].

²⁷ FORCED OUT, *supra* note 10, at 55.

²⁸ Interview with teachers at a government secondary school, Dar es Salaam (March 21, 2013) (on file with the Center for Reproductive Rights); telephone interview between Alisha Bjerregaard and headmaster at a government secondary school, Dar es Salaam (March 27, 2013).

²⁹ Interview with teacher at government secondary school, in Dar es Salaam (Mar. 21, 2013) (on file with the Center for Reproductive Rights).

³⁰ FORCED OUT, *supra* note 10, at 57.

³¹ *Id.*

³² *Id.* at 61; interview with Nurse in Charge and with Assistant Medical Officer, Government Health Clinic, in Dar es Salaam (June 12, 2013) (on file with the Center for Reproductive Rights); Interview with Nursing Officer, at Nursing School, in Dar es Salaam (June 12, 2013) (on file with the Center for Reproductive Rights); *See, e.g.*, Interview with Sophia, former secondary school student, in Mafinga (Jan. 23, 2013) (on file with the Center for Reproductive Rights); interview with Martha, student, in Mafinga (Jan. 23, 2013) (on file with the Center for Reproductive Rights); interview with Joyce, student, in Mafinga (Jan. 23, 2013) (on file with the Center for Reproductive Rights).

³³ Interview with Martha, *supra* note 32; interview with Joyce, *supra* note 32; interview with Sophia, *supra* note 32; interview with Sikudhani, former secondary school student, in Dar Es Salaam (Nov. 29, 2012) (on file with the Center for Reproductive Rights); interview with HakiElimu official, in Dar es Salaam (Jan. 17, 2011) (on file with the Center for Reproductive Rights).

³⁴ Interview with Sophia, *supra* note 32.

³⁵ FORCED OUT, *supra* note 10, at 68.

³⁶ *Id.*

³⁷ *Id.* at 67.

³⁸ *See, e.g.*, interview with Martha, *supra* note 32.

³⁹ Interview with Anna, student, in Mafinga (Jan. 23, 2013) (on file with the Center for Reproductive Rights).

⁴⁰ FORCED OUT, *supra* note 10, at 70.

⁴¹ *Id.* at 71.

⁴² *Id.* at 68-69.

⁴³ Interview with Salma, Biology and Geography Teacher, in Mafinga (Jan. 23 2013) (on file with the Center for Reproductive Rights) (recalling testing at her secondary school at Mkwawa High School, Iringa).

⁴⁴ Convention on the Rights of Persons with Disabilities, *adopted* Dec. 13, 2006, art. 22(2), G.A. Res. A/RES/61/106, U.N. GAOR, 61st Sess., U.N. Doc. A/61/611, (entered into force May, 3 2008) (ratified Nov. 10, 2009) [hereinafter CRPD]; Committee on Economic, Social and Cultural Rights, *General Comment No. 14: The right to the highest attainable standard of health*, in *Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies*, at 80-81, 84, paras. 12 & 23, U.N. Doc. HRI/GEN/1/Rev.9 (Vol. I) (2008) [hereinafter ESCR Committee, *Gen. Comment No. 14*]; CEDAW Committee, *General Recommendation No. 24: Article 12 of the Convention (women and health)* (20th Sess., 1999), in *Compilation of General Comments and General Recommendations Adopted by Human Rights Treaty Bodies*, at 362, paras. 12(d), 22, 31(e), U.N. Doc. HRI/GEN/1/Rev.9 (Vol. II) (2008) [hereinafter CEDAW Committee, *Gen. Recommendation No. 24*]; CRC Committee, *Gen. Comment No. 4*, *supra* note 22, at 412 and 418, paras. 7, 29; Human Rights Committee (HRC), *Concluding Observations: Moldova*, paras. 12-13, U.N. Doc. CCPR/C/MDA/CO/2 (expressing concern about the failure of healthcare professionals to respect the confidentiality of patients with HIV/AIDS).

⁴⁵ CRC Committee *Gen. Comment No. 4*, *supra* note 22, at 412, para. 11.

⁴⁶ CEDAW Committee, *Gen. Recommendation No. 24*, *supra* note 44, at 360, para. 12(d).

⁴⁷ *Id.* para. 18.

⁴⁸ FORCED OUT, *supra* note 10, at 74-76.

⁴⁹ Interview with Maria, student, in Mafinga (Jan. 23, 2013) (on file with the Center for Reproductive Rights).

⁵⁰ FORCED OUT, *supra* note 10, at 76.

⁵¹ LITIGATING THE RIGHT TO EDUCATION IN TANZANIA, *supra* note 19.

⁵² Songa wa Songa, *Special Report: The case for keeping our girls in school*, THE CITIZEN (Mar. 8, 2012), <http://www.thecitizen.co.tz/magazine/woman/-/1843796/1816544/-/1xbk1g/-/index.html> (last visited June 16, 2014); UNICEF, *Tanzania: Education equity and quality: Overview*, http://www.unicef.org/tanzania/6911_10874.html (last visited June 16, 2014) (revealing that over 7,000 girls dropped out due to pregnancy in 2010).

⁵³ BEST 2012, *supra* note 19.

⁵⁴ FORCED OUT, *supra* note 10, at 84 and 98 (2013).

⁵⁵ Interview with Maria, *supra* note 49.

⁵⁶ Interview with Salma, *supra* note 43.

⁵⁷ Interview with Anna, *supra* note 39.

⁵⁸ *See* Interview with representatives from Women's Legal Aid Center (WLAC), in Dar es Salaam (Jan. 19, 2011); interview with Joyce, *supra* note 322; interview with Winifrida Rutaindurwa, Gender Focal Point, Ministry of Education, in Dar es Salaam (Jun. 10, 2013) (on file with the Center for Reproductive Rights).

⁵⁹ FORCED OUT, *supra* note 10, at 90-91.

⁶⁰ Interview with Salma, *supra* note 43; interview with Winifrida Rutaindurwa, *supra* note 59; interview with Nursing Officer, *supra* note 32

⁶¹ FORCED OUT, *supra* note 10, at 91.

⁶² Interview with Winifrida Rutaindurwa, *supra* note 58.

⁶³ *Id.*

⁶⁴ FORCED OUT, *supra* note 10, at 67 (*citing* interview with Sikudhani, *supra* note 33; interview with Chika, former primary school student, in Dar es Salaam (Jan. 29, 2013) (on file with the Center for Reproductive Rights); interview with Neema, former secondary school students, in Dar es Salaam (Nov. 29, 2013) (on file with the Center for Reproductive Rights); interview with Ashura, former secondary school students, in Dar es Salaam (Jan. 29, 2013) (on file with the Center for Reproductive Rights); interview with Hamida, former secondary school student, in Dar es Salaam (Nov. 29, 2012) (on file with the Center for Reproductive Rights)).

⁶⁵ *Id.* (*citing* interview with Sikudhani, *supra* note 33; interview with Chika, *supra* note 64; interview with Neema, *supra* note 64; interview with Ashura, *supra* note 64; interview with Rehema, former secondary school student, in Dar

es Salaam (Nov. 29, 2012) (on file with the Center for Reproductive Rights); Interview with Gender Desk Office, Ministry of Education and Vocational Training, in Dar es Salaam (Jan. 15, 2011) (on file with the Center for Reproductive Rights); interview with teacher from a private girls' secondary school, in Dar es Salaam (Jan. 19, 2011) (on file with the Center for Reproductive Rights); interview with official, Medical Women's Association of Tanzania (Jan. 19, 2011) (on file with the Center for Reproductive Rights).

⁶⁶ FORCED OUT, *supra* note 10, at 92.

⁶⁷ *Id.* at 90-101 (2013).

⁶⁸ Interview with Winifrida Rutaindurwa, *supra* note 59.

⁶⁹ FORCED OUT, *supra* note 10, at 82, 113.

⁷⁰ Special Rapporteur on the Right to Education, *Annual report of the Special Rapporteur on the Right to Education, Katarina Tomaševski, submitted pursuant to Commission on Human Rights resolution 2001/29*, para. 62, U.N. Doc. E/CN.4/2002/60 (Jan. 7, 2002) ("Available evidence indicates that the key to reducing poverty is *secondary* rather than primary education.").

⁷¹ For instance, a 2010 study conducted in Tanzania indicated that "the higher the level of education of the household head, the higher the household per capita income. Indeed, if the education of a rural household head was raised by one level, per capita household income would rise by approximately one-third." See JEHOVANESS AIKAEI, DETERMINANTS OF RURAL INCOME IN TANZANIA: AN EMPIRICAL APPROACH 13 (Research on Poverty Alleviation, Research Rep. 10/4, 2010), available at http://www.repoa.or.tz/documents_storage/Publications/10_4.pdf.

⁷² FORCED OUT, *supra* note 10, at 110.

⁷³ *Id.* at 107-108; Damian Carrington, *Why women's education in Tanzania is critical for slowing population growth*, THE GUARDIAN (Oct. 24, 2011), <http://www.theguardian.com/global-development/2011/oct/24/women-education-tanzania-population> (last visited June 16, 2014) ("Stigmatisation is intense. Elena, from a small village, dropped out after two years at secondary school when she became pregnant at 18. She says: 'I was ashamed. After my baby was born, I went to live with my sister. My parents would have been insulted by their neighbours that they had educated a girl only for her to go and get pregnant.'").

⁷⁴ FORCED OUT, *supra* note 10, at 107-108.

⁷⁵ *Id.*

⁷⁶ *Id.*

⁷⁷ ESCR Committee, *Gen. Comment No. 14*, *supra* note 44, at 80, para. 11 (noting that the right to health extends "to the underlying determinants of health, such as... access to health-related education and information, including on sexual and reproductive health"); Special Rapporteur on the right to education, *Report of the United Nations Special Rapporteur on the right to education, transmitted by Note of the Secretary General*, para. 24, U.N. Doc. A/65/162 (July 23, 2010) (by Vernor Muñoz) ("United Nations treaty bodies have viewed the lack of access to sexual and reproductive education as a barrier to compliance with the State's obligation to guarantee the rights to life, health, non-discrimination, education and information.") (hereinafter Special Rapporteur on the right to education, *Rep. of the Special Rapporteur on the right to education*).

⁷⁸ See, e.g., CEDAW Committee, *Concluding Observations: Dominican Republic*, para. 349, U.N. Doc. A/53/38/Rev.1 (1998); CEDAW Committee, *Concluding Comments: Togo*, para. 29, U.N. Doc. CEDAW/C/TGO/CO/5 (2006).

⁷⁹ See, e.g., CEDAW Committee, *Concluding Observations: Chile*, paras. 226-227, U.N. Doc. A/54/38/Rev.1 (1999); CEDAW Committee, *Concluding Comments: Togo*, para. 29, U.N. Doc. CEDAW/C/TGO/CO/5 (2006); CEDAW Committee, *Concluding Observations: Belize*, para. 56, U.N. Doc. A/54/38 (1999); CEDAW Committee, *Concluding Observations: Nepal*, para. 148, U.N. Doc. A/54/38 (1999).

⁸⁰ See, e.g., CEDAW Committee, *Concluding Observations: Burundi*, para. 62, U.N. Doc. A/56/38 (2001); CEDAW Committee, *Concluding Comments: Cape Verde*, para. 29, U.N. Doc. CEDAW/C/CPV/CO/6 (2006).

⁸¹ See, e.g., CEDAW Committee, *Concluding Comments: Cape Verde*, para. 29, U.N. Doc. CEDAW/C/CPV/CO/6 (2006); CEDAW Committee, *Concluding Comments: Togo*, para. 28, U.N. Doc. CEDAW/C/TGO/CO/5 (2006).

⁸² Committee on the Rights of the Child, *General Comment No. 12: The Right of the child to be heard*, (51st Sess., 2009), para. 101, U.N. Doc. CRC/C/GC/12 (2009).

⁸³ CRC Committee *Gen. Comment No. 4*, *supra* note 22, at 418, para. 28; see also CRC Committee, *Concluding Observations: Ireland*, para. 52, U.N. Doc. CRC/C/IRL/CO/2 (2006) (expressing concern that parents are permitted to exempt their children from receiving necessary information on reproductive health).

⁸⁴ See ESCR Committee, *Concluding Observations: Republic of Korea*, para. 31, U.N. Doc. E/C.12/KOR/CO/3 (2009); Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, *Rep. of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard physical and mental health, Anand Grover – Addendum – Mission to Poland*, para. 85(b), A/HRC/14/20/Add.3 (May

20, 2010); ESCR Committee, *Concluding Observations: The Kingdom of the Netherlands*, para. 27, E/C.12/NDL/CO/4-5 (2010).

⁸⁵ CEDAW Committee, *Gen. Recommendation No. 24*, *supra* note 44, at 361-362, paras. 14 and 21.

⁸⁶ *Id.* at 363, para. 23; *see also* CEDAW Committee, *Concluding Comment: Turkmenistan*, para. 30, U.N. Doc.

CEDAW/C/TKM/CO/2 (2006); CRC Committee, *Concluding Observations: Uruguay*, para. 52, U.N. Doc.

CRC/C/URY/CO/2 (2007); ESCR Committee, *Concluding Observations: The Kingdom of the Netherlands*, para. 27, U.N. Doc. E/C.12/NDL/CO/4-5 (2010).

⁸⁷ CRC Committee *Gen. Comment No. 4*, *supra* note 22, para. 22.

⁸⁸ CRC Committee, *Concluding Observations: Antigua and Barbuda*, para. 54, U.N. Doc. CRC/C/15/Add.247 (2004);

ESCR Committee, *Concluding Observations: Benin*, para. 42, U.N. Doc. E/C.12/1/Add.78 (2002); Special Rapporteur

on the right of everyone to the enjoyment of the highest attainable standard of physical and mental health, *Interim rep.*

of the Special Rapporteur on the right of everyone to the enjoyment of the highest attainable standard of physical and

mental health, transmitted by Note of the Secretary-General, para. 65, U.N. Doc. A/66/254 (Aug. 3, 2011) (by Anand

Grover); *see also* Special Rapporteur on the right to education, *Rep. of the Special Rapporteur on the right to education*,

supra note 77, paras. 14-15.

⁸⁹ *See, e.g.*, CEDAW Committee, *Concluding Comments: Eritrea*, para. 23, U.N. Doc. CEDAW/C/ERI/CO/3 (2006);

CRC Committee *Gen. Comment No. 4*, *supra* note 22, at 416-417, paras. 22, 24, 26.

⁹⁰ *See* INTERIGHTS v. Croatia, No. 45/2007 European Committee of Social Rights, para. 48 (2009).