



**AMREF INTERNATIONAL UNIVERSITY DEPARTMENT OF COMMUNITY HEALTH**

**HSR 701**

**END OF SEMESTER 3 EXAMINATION  
(SEPTEMBER-DECEMBER 2025)**

**AMREF INTERNATIONAL UNIVERSITY  
SCHOOL OF PUBLIC HEALTH  
DEPARTMENT OF COMMUNITY HEALTH  
MASTER OF PUBLIC HEALTH  
END OF SEMESTER EXAMINATION**

**DECEMBER 2025**

**UNIT CODE: INTRODUCTION TO PRINCIPLES OF HUMAN RIGHTS AND THEIR LINKAGES TO SEXUAL AND REPRODUCTIVE HEALTH RIGHTS (SRHR)**

**DATE: December**

**TIME: Three Start: XXX Hours Finish: XXX Hours**

**INSTRUCTIONS**

1. This exam is marked out of 100 marks
2. This Examination comprises TWO Sections  
**Section A:** Compulsory Question (25 marks)  
**Section B:** Long Answer Questions (75 marks)

## **COMPULSORY QUESTION 1 (15 MARKS)**

### **Read the passage below:**

In 1994, States at the International Conference on Population and Development (ICPD) Cairo, recognized conditions where legal abortion should be safe and accessible. International and regional human rights treaties have strengthened and broadened the rights around safe termination of pregnancy (medical abortion.) Globally, unsafe abortions account for an estimated 13% of all maternal deaths, though this can be significantly higher in certain regions, such as sub-Saharan Africa where it can be up to 50%. Article 14 of the Protocol on the Rights of Women in Africa promotes the right to health including sexual and reproductive health.

The World Health Organization (WHO) notes as below: -

- 6 out of 10 unintended pregnancies end in induced abortion.
- Unsafe abortions are a leading cause of maternal mortality, contributing to approximately 68,000 deaths each year.
- Abortion is a common health intervention and it is very safe when carried out using a method recommended by WHO, appropriate to the pregnancy duration and by someone with the necessary skills.
- Notably, complications from abortion are rare when performed by a skilled health care provider in sanitary conditions, unsafe abortions result in high rates of complications.
- Unsafe abortion is an important preventable cause of maternal deaths and morbidities. It can lead to physical and mental health complications and social and financial burdens for women, communities and health systems.
- Lack of access to safe, timely, affordable and respectful abortion care is a critical public health and human rights issue.
- Post-abortion care for unsafe abortion cannot replace the protection of women's health and their human rights afforded by safe, legal induced abortion.

### **Respond to questions (a) (b) and (c) below.**

- a) Evidence demonstrates that legal restrictions on abortion do not reduce the number of induced abortions in practice; rather, they contribute to higher rates of unsafe abortion.

Discuss five (5) known barriers that deny girls and women access to safe/medical abortion in sub-Saharan Africa **(5 Marks)**

- b) States have legal obligations to promote, protect and fulfil human rights.

Discuss five (5) key sexual and reproductive rights (SRHR) that are violated when states fail to put in place mechanisms to meet the above said human rights obligations. **(5 marks)**

- c) In Monitoring State obligations, the Committee on Economic, Social and Cultural Rights in its General Comment No. 14 on Article 12 on the Right to Health requires States to remove barriers to women's access to health services in the area of sexual reproductive health and rights (SRHR). Your country has selected you as a member of a multidisciplinary national review team to reduce maternal mortality and morbidity from unsafe abortion.

Elaborate 5 (five) strategies you will recommend to the Government to implement ensuring that no one is left behind. **(5 marks)**

## **SECTION B- ANSWER ANY 3 QUESTIONS OF YOUR CHOICE - (TOTAL 45 MARKS)**

### **QUESTION 2 (15 marks)**

The Maputo Plan of Action (MPoA) (2016-2030) outlines ten key strategies for operationalizing the Continental Policy Framework on Sexual Reproductive Health and Rights (SRHR) in Africa. Reflecting on the strategies:

Discuss how States in Africa are expected to meet the obligations in delivery of three selected strategies below for improved access to Reproductive, Maternal, New-born, Child and Adolescent Health (RMNCAH).

- a) Instituting health legislation and policies for improved access to RMNCAH services **(5 marks)**
- b) Ensuring gender equality, women and girls' empowerment and respect of human rights. **(5 marks)**
- c) Investing in SRH needs of adolescents, youth and other vulnerable marginalized populations (orphans, the elderly, people with disabilities, rural populations, displaced persons, migrants) **(5 marks)**

### **QUESTION 3 (15 marks)**

Sexual and Reproductive Health is defined by the International Conference on Population and Development (ICPD) in Cairo 1994 and it encompasses a broad range of aspects related to the reproductive system at all stages of life including reproductive rights. It emphasizes the importance of access to comprehensive reproductive health services and rights.

- a) Elaborate five (5) key components of sexual and reproductive health rights identified and stipulated in the ICPD Cairo 1994 Platform of Action, stating why they are important for any development agenda of your country. **(5 marks)**
- b) Discuss the role of male engagement in securing SRHR **(5 marks)**
- c) Discuss the challenges of persons with disabilities in accessing their SRHRs in any African country. **(5 marks)**

#### **QUESTION 4 (15 marks)**

Discuss (i) **contributory factors** and (ii) the **sexual and reproductive health rights violations** experienced in any sub-Saharan African country if the Government fails to make the services **available, affordable, accessible and of good quality** under the following headings:

- a) Maternal health. **(5 marks)**
- b) Family planning, contraception, and infertility care. **(5 marks)**
- c) Comprehensive sexuality education. **(5 marks)**

#### **QUESTION 5 (15 marks)**

**Target 5.6 of the Sustainable Development Goal 5** is to ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development (ICPD Cairo 1994) and the Beijing Platform for Action (1995) and the outcome documents of their review conferences. Access to sexual and reproductive health care, information and education remain a huge challenge in most African countries.

Countries have adopted a myriad of policies and legal frameworks supportive of the goal of universal access to sexual and reproductive health services, but consistent implementation of these policies is threatened by a number of factors.

- a) Discuss five (5) key factors that threaten the realization of the Target 5.6 in your country. **(5 marks)**
- b) Discuss five (5) key strategies that you would recommend to the African Union on how to accelerate progress towards ensuring universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the ICPD, the Beijing Platform for Action and the outcome documents of their review conferences, the Continental Framework on SRHR and its MpoA by 2030. **(10 marks)**

#### **QUESTION 6 (15 marks)**

**Mrs Ayoti** (now deceased), was an African adult and married woman and mother of 3 young children aged 4, 3 and 1 years old. She lived in one of the Sub-Saharan African countries and got married at the age of 15 years. She died from pregnancy related complications/causes after a health service facility she visited misdiagnosed her symptoms and delayed providing her with emergency obstetric care.

Her husband filed a civil claim of negligence in the country's judicial system but the court dismissed his case and found instead that the delay was occasioned by many other reasons including the facts that she was malnourished and that there was delay to get her to the facility from home. It was also clear that she had not spaced her children and that may have weakened her body.

**Mr. Ayoti** argues that the courts failed to find that the Government had responsibility to ensure that Mrs. Ayoti and other women enjoyed their rights to health, including maternal health. Further, that the Government had the duty and responsibility to prevent maternal mortality and morbidity in health facilities.

- a) Discuss key factors that exacerbate high maternal mortality and morbidity in Africa. **(10 marks)**
- b) Propose to the Government key strategies to include in a proposed implementable action plan in order to give increased attention and resources to preventable maternal mortality and morbidity as a human right issue using a human rights-based approach/framework. **(5 marks)**

