Forum: youth, contraception, and maternal mortality. Pending issues

In 2005, the Brazilian National Commission on Population and Development (CNPD) celebrated its tenth anniversary with the seminar "*Gender, Generation, and Race*", including participation by experts, scientists, scholars, and staff from different Ministries. I was in charge of organizing the session on reproductive health, which I hereby present in this Forum section.

The three aspects of reproductive health discussed here are related to the systematic violation of women's reproductive rights by Brazilian society. Childbearing-aged women are at the peak of their lives, and their death is unacceptable, especially since we now have both the means and the technology to avoid it. Another aspect is the denial of women's right to plan their children. In other words, the Unified National Health System, according to Article 226 of the Brazilian Constitution, Federal Act 9.263, and Ministry of Health Ruling 144, should be providing the means and resources for women to experience their sexuality and reproductive lives with little or no risk to their health. The third point is the fact that this difficulty begins early in women's lives, when they become sexually active, since they already become exposed to the risk of HIV infection and unwanted pregnancy.

All three themes presented here are interrelated and are not emerging issues, but old and pending, in urgent need of solutions, since they place the survival of numerous women in jeopardy. Although legally resolved, the issues dealt with here have not been incorporated definitively into Brazilian health services' daily practice. In other words, the policy exists on paper, but not in practice.

The article by Villela & Doreto speaks of young people, their vulnerabilities, and the changes we need in order to understand public policies for adolescents, taking their reproductive health into account. Data on teenage pregnancy indicate that there is now a huge contingent of young females exposed to HIV/AIDS, the second most common cause of death among Brazilian women. Meanwhile, the article by Martins provides a review of studies on maternal mortality rates and race/color, discussing maternal mortality in black Brazilian women (including *pardas* and *pretas* according to the official census classification). Using data from the Committees on Maternal Mortality, the authors identify a higher maternal mortality ratio among black women. According to the United Nations, this is one of the indicators of underdevelopment that has changed the least in the last 20 years. In Brazil, maternal mortality is still a public health problem. Like teenage pregnancy, race and social class permeate this indicator. The Forum concludes with the study by Osis et al., an evaluation of family planning under the National Health System, focusing on operational aspects of family planning activities, including access to contraceptive methods, educational activities, professional training, and the demand for definitive surgical sterilization.

Basic health care should be supplying the activities that guarantee women's reproductive rights, such as prevention of sexually transmitted diseases (including AIDS) and unwanted pregnancy. The right to quality prenatal care and humanized childbirth should also be ensured, as well as access to contraceptive methods, as provided in the report by the 12th United Nations International Conference on Population and Development in Cairo in 1994, to which Brazil is a signatory.

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