

SEXUAL AND REPRODUCTIVE HEALTH SERVICES ARE ESSENTIAL HEALTH SERVICES

The world we are living in today is mired by the COVID-19 pandemic, the largest health and socio-economic crisis that we have ever seen. As the pandemic continues to grow, governments and health systems are taking unprecedented action to contain the spread of COVID-19, restricting movements and redirecting resources to fight the outbreak.



In East Asia, South East Asia and Oceania Region (ESEAOR), access to sexual and reproductive health (SRH) services, from antenatal care, contraception, anti-retroviral treatment and abortion, has suffered significantly. The ESEAOR continues to be the most disaster-prone region and with COVID-19, countries may have to contend with multiple disasters, further stretching resources and reducing the population's ability to cope.

As the breadth of the pandemic continues to unfold and the true impacts emerge, sexual and reproductive health and rights (SRHR) must be a priority to ensure women and girls and other vulnerable groups have access to life-saving SRH services without discrimination.

The pandemic further exacerbates pre-existing gender and social inequalities and excludes vulnerable groups – essentially making a bad situation for women, girls and other vulnerable groups including the elderly, adolescents and young people, people living with disabilities, members of the LGBTQI+ community, indigenous people, migrants and refugees, even worse.

Governments must define and implement people-centred programmes grounded in human rights, with meaningful engagement of civil society organisations, that are both gender-responsive and youth-centred.

We call on Governments to recognise that SRHR is a public health issue and ensure adequate investment is made.

Women and girls must have uninterrupted access to sexual and reproductive health (SRH) information, services and commodities

In times of crisis, women's need for SRH services does not diminish and neither should the availability and accessibility to SRH services and commodities including contraception and other reproductive health supplies. SRH services and education must remain an integral part of the government's essential health services in response and beyond.

We are experiencing reduced access to and availability of SRH care services from maternal and child health, contraception, treatment of STIs, ARV treatment and abortion across the region. Additionally, the supply of life-saving medicines for maternal health and contraceptives are becoming less available as production sites are closed and global and local supply chains are impacted by the lockdowns.

Guttmacher Institute estimates that a 10% proportional decline in the use of short- and long-acting reversible contraceptive methods in low- and middle-income countries due to reduced access would result in an additional 49 million women with an unmet need for modern contraceptives and an additional 15 million unintended pregnancies over a year.ⁱ

Barriers to the availability of commodities and supplies must be removed to ensure women, girls and other vulnerable groups have access to a range of contraceptive methods that meet their needs and ensure access to rights-based SRH services for the most vulnerable communities.ⁱⁱ

We call on Governments to

- ❖ **Integrate a comprehensive package of SRH services** such as contraception (including emergency contraception, short- and long-term methods and treatment for complications), safe abortion and post-abortion care, sexually transmissible infections, including HIV, and reproductive cancers, and services to address gender-based violence; **as part of the essential health services and included in the basic package of health services available.**
- ❖ **Maintain a robust supply chain** to ensure essential medicines and equipment for SRH services are available where they are most needed.
- ❖ **Work in partnership with civil society to strengthen health systems** by integrating NGO-led health facilities into primary health structures with adequate resources and enable NGO-led health facilities to offer non-discriminatory and high-quality SRH services, complementing and lessening the burden carried by the public health system during the response to COVID-19 and to mitigate the impact of future outbreaks.
- ❖ **Disseminate clear and timely health information and education to everyone,** particularly the most marginalized groups.



The International Planned Parenthood Federation (IPPF) is a global service provider and a leading advocate of sexual and reproductive health and rights for all. We are a worldwide movement of national organizations working with and for communities and individuals.

IPPF ESEAOR is supporting 22 Member Associations and three (3) Collaborating Partners in a total of twenty-five countries.

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East & South East Asia and Oceania Region

- i Guttmacher Institute (2020) Estimates of the Potential Impact of the COVID-19 Pandemic on Sexual and Reproductive Health in Low- and Middle-Income Countries retrieved April 23, 2020 from https://www.guttmacher.org/journals/ipsrh/2020/04/estimates-potential-impact-covid-19-pandemic-sexual-and-reproductive-health?fbclid=IwAR0Zar-3imjLQ1IPs595xNMfAzDxhW6R_bSxa3DCBFcpWwj0oq5NoVxCF18
- iii IPPF (2019) Advocacy Common Agenda retrieved April 23, 2020 from <https://www.ippf.org/sites/default/files/2019-12/IPPF%20Advocacy%20Common%20Agenda%20English.pdf>