COVID-19 Response: Sexual and Reproductive Health and Rights of Youth & Adolescents

As the world is starting to open up in different stages depending on where you are, our priority remains: to serve the communities that need us most while ensuring the highest standards of safety for our service providers and clients. IPPF Member Associations (MAs) continue to deliver sexual and reproductive health care to women and girls, in all their diversity, in 25 countries in East Asia, South East Asia and the Pacific.

Under the shadow of this pandemic, IPPF MAs are working tirelessly to engage the communities they work in through house-to-house visits while physically distancing and increasing engagement on Facebook, YouTube and Instagram to disseminate information on contraceptives, STI and HIV prevention, support for survivors of gender-based violence, and other SRH needs. IPPF MA service providers, peer educators and youth volunteer continue to lead the way on virtual community awareness, sexuality education sessions, and responding to humanitarian crises.

Impact of COVID-19 on Young People and their Sexual and Reproductive Health and Rights (SRHR)

The COVID-19 response is already putting immense stress on health systems around the world. It is disrupting the delivery of routine health services and information to young people, sharply limiting access to sexual and reproductive healthcare, disrupting immunization schedules, and cutting off young people’s access to health services and information delivered through schools and universities (including the continuation of preventive measures such as physical exercise), now shut because of physical distancing measures. (Compact for Young People in Humanitarian Action)

In the education sector, over 90 per cent of the world’s students, 1.5 billion young people in 188 countries, are being kept away from school and universities due to physical distancing measures (Lancet). Young people are additionally affected by closures of non-formal education opportunities. Youth in humanitarian contexts especially rely on informal learning, online courses (where feasible), and social interaction as a means of personal development.

With or without COVID-19, adolescents and youth still have sexual and reproductive health needs and the disruption of SRH service delivery, especially contraception and safe abortion services, and interrupted access to SRH information must be addressed. Furthermore, adolescents and youth, who already experience domestic and intimate partner violence, are exposed to potentially even higher levels of violence due to the lockdown measures. Vulnerable young people, such as young people living with HIV, young migrants, sexual and gender diverse young people, and young people in detention centres, amongst others, are at higher risk.

Adolescents and young people are agile and creative thinkers, and this generation is more connected through technology than ever. They can play an active part in the COVID-19 solution at home and in their communities, such as disseminating accurate information on COVID-19 and sexual and reproductive health, to prevent and respond to sexual and gender-based violence, and provide peer-to-peer support for young people seeking SRH services. It is important to acknowledge and address the diversity of adolescents and youth, and the critical role they play in our communities.
The pandemic continues to have a huge impact on the delivery of sexual and reproductive health care to adolescents and youth in the region.

What Do We Need

However innovative IPPF MAs are, we cannot hope to offset the effect of this pandemic without additional support, either financial or donations-in-kind:

- To keep our health facilities open and our health workforce employed
- To meet the increased need for Personal Protective Equipment (PPE) for service providers and outreach workers
- To ensure the ongoing supply of reproductive health and contraceptive commodities
- To set up technologies or new approaches to reach our clients, including adolescents and young people, such as virtual consultations, virtual education sessions and telemedicine including hardware and software. Young people are connecting through technology, despite the digital inequalities and physical distancing, hence we would like to provide some form of an online community for young people to support and empower each other.

You can support us by getting in touch with Gessen Rocas, Director Strategic Partnerships, Advocacy and External Affairs: gessenrocas@ippf.org or rdeseaor@ippf.org

Call to Action

Many governments have already taken a positive stand in defence of women and girls, and some have gone further during this pandemic to support access to sexual and reproductive healthcare, such as access to telemedicine. IPPF calls on all governments to adopt such sensible and practical measures to make it easier for women and girls to get the care they need so badly in these difficult times, and to ignore the voices of coercive opponents who seek to impose their radical views on others.
Cambodia

In April 2020, with support from the Reproductive Health Association of Cambodia (RHAC), Community Youth Activist groups established online group discussions via Facebook Messenger, connecting with youths in their community to raise and help to address SRHR issues during the COVID-19 pandemic.

Eleven (11) youth activist groups, made up of 118 persons, have linked virtually with 687 youths in Kampot and Siem Reap provinces to discuss SRHR resources during COVID-19, violence in the communities, sexual harassment and sexual rights during COVID-19. Six (6) youth activists organized Zoom meetings for their friends and discussed SRHR issues, including the urgent needs of SRHR for youths.

RHAC has developed and shared resources such as posters and short videos on their website, and written articles to guide youth activists and peer educators on using the resources for their knowledge and for sharing with their networks and their family members.

This “new way of working” and the use of technology is proving helpful to youths during this difficult situation as the resources are easily accessed by young people across Cambodia. Youth feel more comfortable to open up and actively participate, asking more questions based on individual issues on virtual platforms; unlike face-to-face group discussions where most of the youth are passive participants, focusing on receiving information only. Furthermore, online discussions allow them to continue their discussion topics whenever they are free.

Democratic People’s Republic of Korea

The Democratic People’s Republic of Korea declared a State of Emergency on January 29th, completely restricting all forms of travel (domestic and international), to contain the spread of COVID-19.

The Korean Family Planning and Maternal & Child Health Association (KFP&MCHA) ceased operations immediately, closing its training centre (an income-generating venture) and cancelling their 30th Anniversary celebration.

In early February, the Board and Management were in talks with the Central Anti-Epidemic Headquarter to lobby for the re-opening of KFP&MCHA health facilities to ensure contraception and other SRH services are available for the public. The engagement was fruitful and KFP&MCHA established a Committee for Leading Emergency Anti-epidemic Response (CLEAR) to ensure all KFP&MCHA health facilities are re-opened and awareness-raising activities are re-initiated with more stringent infection prevention protocols and procedures to comply with anti-epidemic guidelines.

CLEAR is in constant contact with the Anti-Epidemic Headquarters at each level (national and county-level), distributing PPE supplies and coordinating disinfection protocol, service delivery and integrated SRHR & COVID-19 awareness-raising activities to all health facilities, and working together with government hospitals for referral cases.
FIJI

Early in the spread of the COVID-19 pandemic, Pacific countries closed their borders to contain a virus that would cripple already fragile health systems if an outbreak occurred. Limitations on travel directly affected the Family Planning New South Wales (FP NSW) international programmes’ capability to deliver training and capacity building in the Pacific.

FPNSW, with full support of the Department of Foreign Affairs and Trade (DFAT) Australian NGO Cooperation Program (ANCP), was able to reallocate funding towards supporting Reproductive and Family Health Association of Fiji (RFHAF), to remain operational and provide essential services to women, girls and marginalized communities.

RFHAF has used the funding to purchase pregnancy test kits, emergency contraceptive pills, and extra medical equipment. Additional nurses have been employed casually to increase the capacity and number of outreach teams, and they have printed information, education and communications materials for their Suva clinic.

RFHAF has seen a significant increase in clients accessing services, with more than 100 clients seen in April alone. This includes new clients, such as sex workers and LGBT persons, who had never accessed SRH clinics previously, and a dramatic increase in adolescent girls visiting.

RFHAF also redirected some funds to conduct social media advertising to increase their potential client reach. This campaign was successful, with a significant increase in client numbers – predominantly adolescent girls - following just three weeks of digital advertising.

"It is crucial for young people to share the responsibility and take action and respond to the needs of others, especially during this pandemic. We believe that once young people are meaningfully engaged, we can make unique contributions to our communities and the whole world."

An interview with Yueping Guo, a Member of the China Youth Network (China Family Planning Association)

HONG KONG

The Family Planning Association of Hong Kong (FPAHK) has been utilizing its website, Facebook page, Instagram account and YouTube channel to share learning resources and make sexuality education accessible for everyone in the local community.

FPAHK adopted multiple social media platforms to encourage parents to talk about sexuality with children at home during the lockdown. 15 short videos were posted on the Association’s channel with tips on family sexuality education and demonstration of FPAHK’s learning resources.

This year, as Mother’s Day celebrations were muted by the pandemic, two youth volunteers developed animations in Minecraft, using FPAHK’s playful icons Tak Tak and Kar Kar to bring out the message of “how to cheer up your mum during lockdown”.

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MONGOLIA

Pivoting from their usual face-to-face sessions, Mongolia Family Welfare Association (MFWA) youth peer educators have adapted to the unprecedented situation by developing online content such as virtual sexuality education lessons, which are available on their website and Facebook (main, Family Clinic, Tuv Branch and Umnugovi Branch) channels aimed at young people and their parents. MFWA took to Facebook to publish a series of posts on “Issues you know but don’t know” answering questions received from the public on STIs prevention, contraceptives and other sexual and reproductive health issues. MFWA has also recorded videos to motivate young people and parents to build positive relationships with each other.

MYANMAR

Myanmar has reported one of the lowest numbers of confirmed COVID-19 cases mostly recorded in the Yangon Region. The Myanmar Maternal and Child Welfare Association (MMCWA) offices and health facilities are operating with a reduced workforce (by shifts) with greater hygiene and physical distancing protocols. MMCWA donated ventilators and thermometers to the Ministry of Health and Sport (MoHS) and built hand-washing facilities outside of health facilities in Yangon. The MMCWA’s female-only volunteer network, in their recognisable lilac traditional dress uniforms, are on the streets, providing hand sanitizers, face masks, pamphlets, and posters to community members to control the spread of COVID-19.

TUVALU

Tuvalu Family Health Association (TuFHA) have been travelling to the outer islands to conduct awareness on COVID-19, as these islanders would not have received news on the pandemic due to the lack of reliable communication technologies reaching remote islands.

KIRIBATI

As schools are closed and movements of young people restricted to protect the population, Kiribati Family Health Association (KFHA) had to suspend their youth programme. However, the pandemic has not stopped KFHA’s youth, KFHA youth volunteers and peer educators are connecting more and more using traditional media, social media and the use of drama.

Young people have compiled a script and drama on COVID-19, SRHR and SGBV. A recording of this drama is being used on radio and a visual recording will be uploaded on social media with subtitles to reach out to non-I-Kiribati speaking viewers and also those who are hearing impaired. KFHA youth have started performing these dramas and short skits in the communities and they hope to enlarge their scope in the next few weeks.
South Korea, at its peak of the COVID-19 outbreak, reported 909 cases on 29 February with the government ramping up measures amid the pandemic. The Korea Population, Health and Welfare Association (KoPHWA) a leading non-profit organization founded under the national Maternal and Child Health Law, assessed their sustainability measures, decided on the role they would play during the pandemic and developed COVID-19 prevention measures (in line with the government’s COVID-19 safety guidelines for medical institutions) to ensure the safety and security of their service providers.

Official Notices were disseminated to their 13 branches and clinics on practising physical distancing at work and home, and KoPHWA instituted new communications measures to increase the frequency of check-ins with branches and clinics, sharing information on how to receive medical care if they suspect to have COVID-19, and training on infection prevention measures such as hand washing, respiratory hygiene and surface hygiene.

During the COVID-19 pandemic, the Planned Parenthood Association of Thailand (PPAT) under the patronage of H.R.H the Princess Mother, engaged with provincial government offices, district hospitals, and health offices to ensure that these partner entities are aware of PPAT clinics operating and supporting the public health response during the pandemic. PPAT also works with the Referral System for Safe Abortion (RSA) to ensure that the Thai Government integrated Safe Abortion Care into the essential health care services during the pandemic. This was done through a series of meetings with the Department of Health, Ministry of Public Health (MoPH) where PPAT shared that throughout April and May, with the lockdown in full force, PPAT clinics were receiving calls from clients, expressing their need for SRH services, especially safe abortion care, convincing MoPH to ensure access to SRH services of women and girls are not interrupted during the pandemic.

In Northeast Thailand, clients would have to cross provincial borders to access the PPAT clinic in Khon Kean Province. The Khon Kean clinic manager, Mrs Warunee Tungsiri contacted the provincial authority to allow clients to cross the border to receive SRH services. Once clients contact PPAT Khon Kean clinic either by phone or LINE application, they are sent appointment cards online which they use as identification at the provincial border checkpoints. Around 80 women have travelled across the provincial border from Roi et, Maha Sarakham and Chaiyaphum to receive SRH services at the PPAT Khon Kean clinic.

"Yes, we are young, but we can do something for other people especially for our fellow youth. We are not just young people. No matter how small or big our deed is, the important thing is that we contribute to ease the condition of our people during this pandemic and that our contribution could save lives."

An interview with Louria Joy Paragon IPPF Youth Representative, Family Planning Organization of the Philippines (FPOP).
While dealing with the threat of this global pandemic, Vanuatu was hit by Tropical Cyclone (TC) Harold in April causing widespread destruction in its wake. Vanuatu Family Health Association (VFHA)’s Santo Clinic was not spared from the impact of the disaster. The clinic’s newly installed hygiene facilities, i.e. outdoor sinks, taps with running water, and soap holders – as recommended by the Santo Province COVID-19 Task Force - was damaged. The damages also extended to the clinic’s verandah and client seating areas.

Although some Pacific countries have been preparing for disasters of this kind, COVID-19 has hampered relief and recovery efforts. VFHA mobilised two (2) emergency outreach teams to respond to reproductive health needs at the onset of TC Harold on Pentecost and Santo islands, the most affected by the disaster. VFHA provided general health check-ups, syndromic management of STIs, cervical cancer screening, clinical and first-line support to survivors of SGBV, and referrals for follow up care, as well as provide comprehensive family planning and reproductive health care to women and men reaching around 1,305 beneficiaries with SRH services, and 173 of these beneficiaries were provided with contraceptives such as implants, injectables, IUDs and condoms.

In the wake of TC Harold, VFHA re-install the hygiene facilities and procured PPE for service providers to ensure strict infection prevention protocol is followed – and within two (2) weeks all VFHA clinics re-opened to meet the demand for essential services such as antenatal care. VFHA volunteers play the role of educators to ensure clients follow infection prevention protocols while at the clinics.

"Family planning is an individual right. We won’t force anyone to take it. But there’s a need. The more we stay with them, the more we explain, then they can begin to change their mind-set. Then they can freely choose to take family planning."

Leias Obed, registered nurse, Vanuatu Family Health Association (VFHA).
The International Planned Parenthood Federation

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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