



Health: Both a prerequisite and an outcome of sustainable development.

[BRIEF]

Sexual and Reproductive Health and Rights

Sexual and reproductive health and rights (SRHR) are based on the right and the ability of all individuals to decide over their own bodies, and to live healthy and productive lives. Addressing SRHR is thus key to ensuring sustainable development. Sweden has a long history of prioritizing SRHR as part of its health, gender, human rights and sustainable development work. Sida does this through support to global, regional and bilateral initiatives.

SRHR CRITICAL FOR SUSTAINABLE DEVELOPMENT

The evidence for investing in SRHR is undisputable. Here are some examples:

- **Sexual and reproductive health services** and the ability to access them can save up to 99% of the almost 300,000 lives that are lost to complications in pregnancy and childbirth in the world annually
- **Access to contraception** alone can reduce maternal mortality by up to 44%.
- **Access to safe abortion services** can reduce maternal mortality by another 13%.
- **Prevention of HIV** is up to 28 times more cost-effective than the provision of HIV treatment and health care services.
- **Providing health services to young people** prevents early parenthood, and allows them to finish school, enter the labour market, and participate in democratic processes and the development of their societies.

Sexual health

The state of physical, emotional, mental and social well-being in relation to sexuality; not merely the absence of disease, dysfunction or infirmity. It includes the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence. (WHO, 2006)

Sexual rights

The human rights of women¹ include their right to have control over and decide freely and responsibly on matters related to their sexuality, including sexual and reproductive health, free of coercion discrimination, and violence. (Beijing Platform for Action, paragraph 96)

The International Conference on Population and Development (ICPD) in Cairo in 1994 was a turning point for how the world viewed population issues. From having been exclusively focused on family planning, demographic trends and population control, the language became rights-focused and expanded to include sexual health and reproductive rights, and other population-related issues such as migration and urbanisation. The needs of young people were also highlighted.

The 4th World Conference on Women in Beijing in 1995 further advanced the agenda by linking SRHR to a broader gender perspective. It established that women had the right to decide on all matters related to their sexuality, including sexual and reproductive health, free from coercion, discrimination and violence, and linked these rights to their ability to participate in democratic processes, economic activities and development at large.

¹ The Commission on Population and Development, resolution 2012/1 on Adolescents and youth translates this right to "all couples and individuals."

Sexual and reproductive health and rights include, among others, access to sexual and reproductive health services, the ability to exercise one's rights over one's body, comprehensive sexuality education, safe motherhood, access to commodities such as contraceptives, and HIV and AIDS prevention and treatment. The provision of sexuality education and sexual and reproductive health services to young people to promote safer sex, reduce unwanted pregnancies and school drop-out rates – enabling young people to participate in democracy, economic growth and sustainable development – is also an integral part of SRHR.

SWEDEN'S ENGAGEMENT IN SRHR

Sweden has been a champion of women's health and access to reproductive and maternal health services since the 1960's. Men and boys' roles and responsibilities in achieving gender equality and sexual and reproductive health have been a priority since ICPD in 1994. In 1997, Sida wrote its first "Strategy for Sexual and Reproductive Health and Rights," which was a trailblazer in international development assistance. The International Policy for Sexual and Reproductive Health and Rights in 2006 reaffirmed the spirit of Cairo and Beijing by highlighting the gender and human rights aspects of SRHR, in addition to the public health benefits.

Reproductive health

A state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity, in all matters relating to the reproductive system and to its function and processes. (ICPD PoA article 7.2)

Reproductive rights

The right to freely decide the number, spacing and timing of children, and to have the information, education and means to do so. These rights should be exercised without discrimination, violence or force (ICPD PoA article 7.3).

SRHR AT SIDA

In 2012 Sweden contributed 2.5 billion Swedish kronor to supporting SRHR programs globally, regionally and bilaterally in the following areas:

- **Health systems** (about 60% of funds), that build on national health systems to provide primary health care services, including reproductive, maternal, sexual and adolescent health.

- **Knowledge, methods and normative work** (about 30% of funds) to global, regional and local organizations.
- **Policy and advocacy** (about 10%) to organizations involved in policy dialogue, advocacy and awareness-raising on controversial issues such as access to safe abortion and respect of lesbian, gay, bisexual, transsexual and intersexual (LGBT) persons' rights.

Key areas of focus for Sida's SRHR support

- Young people and SRHR
- Maternal health
- Contraception, including condoms
- HIV and AIDS
- Gender-based violence, including female genital mutilation (FGM)
- Comprehensive sexuality education
- Access to safe abortion
- LGBT rights issues
- Menstrual hygiene management

SRHR IN CONFLICT AND FRAGILE COUNTRIES

SRHR needs in conflict and post-conflict countries are the same as in peacetime. However, these needs are intensified by ruptures in basic health services, increasing vulnerability to sickness and death, primarily in women, youth and children. In addition, rape and other forms of sexual violence are commonly used as weapons of war. Sweden supports the implementation of UN Resolutions 1325 and 1820 on women, peace and security. In countries like the DR Congo, South Sudan, and Somalia Sida support includes improving access to basic SRHR services through the health system, treatment and prevention of gender based violence, and the provision of minimal initial service package (MISP) including contraceptives and post-rape kits.

KEY READING

UNFPA: [ICPD Beyond 2014 Global Review Report](#)

Ministry for Foreign Affairs: [From population issues to SRHR](#)

The Guttmacher Institute: [Adding it up: Investing in sexual and reproductive health](#)