

Sexual and Reproductive Health and Rights: An essential element to achieving universal health coverage

A CALL TO ACTION

Every human being has a fundamental right to the enjoyment of the highest attainable standard of health without distinction of any kind. Achievement of this aim is essential for peace, security, equity, and socioeconomic development, and is at the core of the Universal Health Coverage (UHC) movement. For UHC to be realized, especially for women, girls and adolescents, we must commit to building a collective health for all movement, inclusive and promotive of sexual and reproductive health and rights (SRHR).

We, as members and allies of the Partnership for Maternal, Newborn and Child Health, fully support the Sustainable Development Goals and UHC targets, and are committed to advocating for the realization of health for all, including SRHR. We affirm that:

- UHC is a cornerstone of the 2030 Agenda for Sustainable Development: it is essential to ending poverty and to ensuring that all people can achieve their full potential in dignity and equality.
- UHC's goal of realizing the right to the highest attainable standard of health for all without financial hardship requires meeting the needs of women, girls and adolescents, including their need for sexual and reproductive health interventions and services.
- SRHR interventions are health-promotive, preventive, inexpensive and highly cost-effective; in many cases investing in these interventions saves lives as well as financial resources that would otherwise have to be spent on higher-level care. Provision of a comprehensive SRHR package of interventions benefits women and men, adolescents, children and societies at large.
- Gaps in coverage of key SRHR interventions are widespread, especially for population groups that are
 marginalized and disadvantaged, and for services that are stigmatized. Addressing these gaps is crucial to
 realizing rights and attaining equity, as well as to reducing preventable mortality and morbidity and minimizing
 the health, financial and economic burden on families, communities and nations.
- Improving the health of women, girls and adolescents, including their sexual and reproductive health and rights, can contribute significantly to the achievement of UHC's broad health and development goals.

We commit to working with national governments and the global community to realize health for all and ensure that UHC programmes and policies are inclusive of SRHR interventions and are based on principles of gender equality and equity in access. To do this, we will:

• Encourage strong linkages between the UHC and SRHR communities and cultivate new champions to build momentum on achieving health for all.

- Build broad alliances for the inclusion of gender equality, equity, and human rights principles, including respect for sexual and reproductive rights, in standard-setting conversations about UHC.
- Work with country-level, regional and global partners to build UHC monitoring frameworks that capture the full scope of SRHR, including by defining indicators and strengthening data quality, monitoring and accountability.
- Provide technical support on incorporating SRHR into national UHC frameworks to ensure health systems are ready and able to deliver quality services, and push for clear guidance on how countries can ensure UHC strategies are inclusive of SRHR.
- Improve coordination among donors to ensure that external funding supports national ownership, is aligned to country priorities and augments domestic resources.
- Strengthen the evidence base, fill research gaps and share lessons learned on ways to achieve health for all to inform decision-making at the local, national, regional and international levels.

To achieve health for all, including universal access to SRHR interventions, PMNCH and its allies call on the international community and national governments to:

- Adopt and endorse a <u>comprehensive package of SRHR interventions</u> to be delivered through UHC schemes, and support efforts to strengthen health care systems to deliver all essential interventions.
- Incorporate equity and rights-based factors into prioritization models and programme planning, and ensure that UHC strategies are based on the principles of non-discrimination, informed choice, transparency and accountability.
- Ensure that the UHC policy design process is inclusive, transparent and involves diverse stakeholders, including civil society organizations, community voices, marginalized and disadvantaged populations, and professional associations representing cadres providing the bulk of sexual and reproductive health interventions.
- Acknowledge the unique needs of young people and adolescents and ensure they can access accurate, high-quality, confidential SRHR information and services without third-party consent.
- Increase domestic financing to support UHC strategies, including SRHR interventions, and ensure financing schemes facilitate access to services for women, girls and adolescents.
- Train and support health workers at all levels to deliver SRHR interventions as part of a broader package of health services, in ways that protect, respect and fulfill the human rights of women, girls and adolescents, especially those from marginalized and stigmatized communities.
- Secure a consistent, affordable supply of essential medicines, diagnostics and other medical technologies, including those necessary to provide the comprehensive package of SRHR interventions, in all areas, especially rural areas.
- Integrate and develop metrics on the coverage, quality and impact of SRHR interventions into health information systems, improve data quality and disaggregate UHC coverage data by key characteristics, including wealth quintile, sex, age and geographic location.

We, the signatories of this call to action, affirm our commitment to ensuring the highest attainable standard of health for women, girls and adolescents, including the full realization of their sexual and reproductive health and rights.

The Partnership for Maternal, Newborn & Child Health