



Expert Group Meetings on 2021 HLPF Thematic Review

Over one year since the global spread of COVID-19 began, the deep disruptions in health care access that the pandemic has caused are beginning to emerge: overburdened health systems, reversals in prior gains with increases in unmet needs for essential health services, intensifying inequities, and more. It is now clear that the pandemic has likely set back global health efforts significantly, including when it comes to sexual and reproductive health and rights.

Sustainable Development Goals Provide Clear Targets for Rebuilding

The global community has a unified platform that can form the basis for planning on how to recoup these losses and how to regain momentum in driving progress toward the fulfillment of established commitments. This platform is the Sustainable Development Goals (SDGs) adopted in 2015 by 193 countries, including the United States; they commit countries to providing universal access to sexual and reproductive health care services by 2030. The success of the SDGs will depend in significant part on the extent to which key stakeholders—including governments, UN agencies and nongovernmental organizations—take seriously the specific targets related to sexual and reproductive health and rights and fully implement the relevant policies and programs needed to attain them. Efforts to advance the SDGs must be coupled with new strategies that ensure everyone benefits from the gains in access to sexual and reproductive health and rights that will follow from efforts to build back better and regain lost ground after the pandemic.

Accelerating Progress Towards Sexual and Reproductive Health and Rights for All

The Guttmacher-*Lancet* Commission on Sexual and Reproductive Health and Rights has provided a roadmap for countries to take gradual steps toward universal access to sexual and reproductive health and rights through mechanisms like universal health coverage. By integrating elements that are rarely recognized and addressed in global discussions, the Commission makes the case that investing comprehensively in sexual and reproductive health and rights is essential to sustainable development and human rights fulfillment at all levels, as well as providing cost savings over the longer term. The Commission's model of progressive realization may be especially useful for policy and programmatic planning as countries face resource constraints in the context of the pandemic.

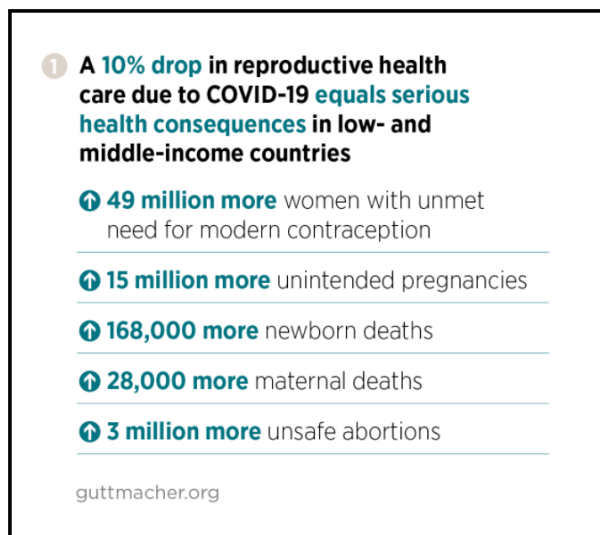
This framework can help countries make progress towards addressing inequities in sexual and reproductive health care. In 2019, there were 218 million women in low- and middle-income countries (LMICs) who wanted to avoid pregnancy but were not using a modern form of contraception; annually, this led to 111 million unintended pregnancies and 35 million unsafe abortions. In addition, 16 million women and 13 million newborns did not receive care for major complications in pregnancy and childbirth, and there were 299,000 pregnancy-related deaths and 2.5 million newborn deaths, most of which are preventable.

The challenges were even greater for key populations such as adolescents, who already faced immense gaps in access to sexual and reproductive health care. As of 2019, there were 14 million adolescent women aged 15–19 in LMICs with an unmet need for modern contraception. This contributed to 10 million unintended pregnancies among this age-group each year, as well as long-term negative effects including disruptions in education, and loss of professional opportunities and, fundamentally, reproductive autonomy.

While significant progress has been achieved on the SDGs overall in recent years, some disparities have persisted, including between rural and urban communities as well as by socioeconomic status, gender, age and other demographics. Inequities such as these motivated a central pillar of the SDGs: to leave no one behind.

Impact of COVID-19 on Sexual and Reproductive Health Care

COVID-19 has further delayed progress towards the SDGs, as scarce resources and attention have been diverted away from sexual and reproductive health care to pandemic-related response efforts. In 2020, a Guttmacher team estimated how sexual and reproductive health outcomes could change in many countries following only a modest decline of 10% in access to care. The findings were staggering: A 10% decline in sexual and reproductive health care in LMICs would equal an additional 49 million women with an unmet need for modern contraception, leading to millions of unintended pregnancies and unsafe abortions and thousands of maternal and newborn deaths.



While these estimated numbers are extremely worrisome, the reality could be far worse if sexual and reproductive health care declines by more than 10%. And the burden of reduced access to care is likely to fall hardest on people who already faced structural and systemic barriers to care before the pandemic, including people with disabilities, those living in humanitarian settings, LGBTQ people and others.

Annex: Additional Resources

Guttmacher-Lancet Commission on Sexual and Reproductive Health and Rights

[Read more:](#) *Accelerate Progress: Sexual and Reproductive Health and Rights for All — Executive Summary*

- The Guttmacher-Lancet Commission’s report lays out the scope of the unfinished sexual and reproductive health and rights (SRHR) agenda; articulates a bold and evidence-based vision for SRHR that is grounded in human rights; provides an integrated, new definition of SRHR to guide this vision; and recommends a comprehensive package of essential SRHR interventions, going beyond the commonly recognized components of sexual and reproductive health. The report also highlights the benefits of investing in SRHR, not just from a health perspective, but also in terms of broader social and economic development.

Investing in Sexual and Reproductive Health

[Read more:](#) *Adding It Up: Investing in Sexual and Reproductive Health 2019*

- This report examines the need for, impact of and cost of fully investing in sexual and reproductive health care—services that together ensure people can decide whether and when to have children, experience safe pregnancy and delivery, have healthy newborns, and have a safe and satisfying sexual life. It focuses on the need for contraceptive services, maternal and newborn care, abortion services and treatment for the major curable STIs among women of reproductive age (15–49) in 132 low- and middle-income countries. The report’s goal is to illustrate for national and local governments, the private sector and international development partners the magnitude of investments needed to expand and improve essential sexual and reproductive health services.

[Read more:](#) *Adding It Up: Sexual and Reproductive Health Profiles for 132 Countries*

- The Guttmacher Institute has published 132 country profiles highlighting country-specific sexual and reproductive health data from its Adding it Up body of work. Each country profile features more than 40 indicators that include the use of and need for modern contraception and maternal and newborn health care, as well as the costs and impacts of fully investing in comprehensive sexual and reproductive health care and services. The profiles contain these data for women of reproductive age (15–49) and in many cases give the option to see the evidence for adolescents aged 15–19, as well as other population subgroups.

COVID-19

[Read more:](#) *Research and Policy Resources: COVID-19’s Impact on Sexual and Reproductive Health and Rights*

- Guttmacher Institute experts have been assessing the impact of the evolving COVID-19 pandemic on sexual and reproductive health and rights at multiple levels: the challenges posed

by the virus itself, as well as by longstanding gaps in policies and programs that have left society struggling to respond to the crisis. This page highlights Guttmacher’s growing body of research and policy resources in this area.

[Read more:](#) *Estimates of the Potential Impact of the COVID-19 Pandemic on Sexual and Reproductive Health in Low- and Middle-Income Countries*

- We present two scenarios of how the COVID-19 pandemic could disrupt sexual and reproductive health service provision in LMICs, and illustrate the impact of these changes on the number of unintended pregnancies, unsafe abortions, and maternal and newborn deaths. We use data from the 2019 Adding It Up study of sexual and reproductive health care provision in 132 LMICs in Africa, Asia, Eastern and Southern Europe, and Latin America and the Caribbean, which together had 1.6 billion women of reproductive age. The study included estimates of current coverage of essential sexual and reproductive health services—derived using the most recent available data from such national surveys as Demographic and Health Surveys and Multiple Indicator Cluster Surveys—and estimated the health impact and cost of meeting all need for contraception and more than 80 essential pregnancy-related and newborn care interventions.

[Read more:](#) *From Bad to Worse: The COVID-19 Pandemic Risks Further Undermining Adolescents’ Sexual and Reproductive Health and Rights in Many Countries*

- Even before the COVID-19 pandemic, global health programs and institutions fell far short of fully serving the sexual and reproductive health needs of young people in low- and middle-income countries, leading to critical gaps in information and services. The pandemic is now taking a disproportionate toll on this population, as they find themselves cut off from educational opportunities, at greater risk of human rights violations and with reduced access to health care, all of which could have multigenerational impacts. New Guttmacher Institute estimates illustrate the large impact the pandemic could have on young people’s sexual and reproductive health and rights if policymakers do not take swift action.