SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS: AN ESSENTIAL ELEMENT OF UNIVERSAL HEALTH COVERAGE

- Prevention and treatment of HIV and other STIs
- Safe abortion services and treatment following unsafe abortion
- Counselling and services for modern contraceptives
- Detecting and preventing sexual and gender-based violence
- Comprehensive sexuality education
- Antenatal, childbirth and postnatal care
- Counselling and services for infertility
- Detecting, preventing and managing reproductive cancers
- Counselling and services for sexual health and well-being
- Quality of care, accountability and equity in access
At the International Conference on Population and Development (ICPD) in 1994, governments of 179 countries adopted the programme of action, agreeing to deliver universal access to comprehensive reproductive health care, including voluntary family planning and safe pregnancy and childbirth services. Twenty-five years later, at the Global Summit in Nairobi, the world community made strong commitments and agreed on a visionary agenda to accelerate progress, with a stronger focus on universal access to sexual and reproductive health (SRH) as part of universal health coverage (UHC) under the following principles.

- UHC is not universal without addressing the SRH needs and realizing the rights of each individual, and most importantly, the rights of the most vulnerable people.
- A comprehensive approach is required to effectively meet people’s sexual and reproductive health and rights (SRHR) needs. This entails adopting the full definition of SRHR and providing an essential package of SRHR interventions with a life-course approach, applying equity in access, quality of care and accountability across implementation, without discrimination.
- SRHR is an essential part of UHC. Countries moving towards UHC need to consider how the SRHR needs of their population are met throughout the life course, from infancy and childhood through adolescence and into adult life.

**PLANNING AND DELIVERING SRH SERVICES: A LIFE-COURSE APPROACH FOR HIGHER IMPACT**

**Infancy and Childhood (0-9)**
- Antenatal, childbirth and postnatal care, including emergency obstetric and newborn care
- Prevention, detection, immediate services and referrals for cases of sexual and gender-based violence
- Prevention and treatment of HIV and other sexually transmitted infections

**Adolescence (10-19)**
- Comprehensive sexuality education (in and out of school)
- Prevention, detection and management of reproductive cancers, especially cervical cancer
- Counselling and services for a range of modern contraceptives, with a defined minimum number and types of methods
- Safe abortion services and treatment of complications of unsafe abortion
- Prevention, detection, immediate services and referrals for cases of sexual and gender-based violence
- Information, counselling and services for sexual health and well-being
- Prevention and treatment of HIV and other sexually transmitted infections
adulthood and old age. This requires holistic, comprehensive, innovative approaches and cost-effective, strategic investments in SRHR.

- The benefits of investing in SRHR are manifested at different levels and over different periods of time. In addition to improving health and well-being and enhancing human rights, these investments yield economic benefits, due to decreased expenditures on health services as a result of an expanded focus on prevention. The social and economic benefits resulting from improved SRHR will continue to pay dividends over time and generations as the health and well-being of women, children and adolescents improves.

- A comprehensive approach to SRHR is cost-effective and affordable for most countries, though some will require increased investments to successfully adopt and progressively realize SRHR in UHC. Increased mobilization of domestic resources is critical to sustain gains made so far and enable additional investments.

- Countries can take concrete steps towards adopting UHC and ensuring universal access to an essential package of quality SRHR interventions. These include mobilizing stakeholders within and beyond the health sector; analysing SRHR needs among all people and throughout the life course; mapping available resources and systems constraints; and prioritizing and progressively implementing interventions at various levels of the health system and beyond.

### 15-49

**REPRODUCTIVE AGE & ADULTHOOD**

- Prevention, detection and management of reproductive cancers, especially cervical cancer
- Counselling and services for a range of modern contraceptives, with a defined minimum number and types of methods
- Safe abortion services and treatment of complications of unsafe abortion
- Information, counselling and services for subfertility and infertility
- Prevention, detection, immediate services and referrals for cases of sexual and gender-based violence
- Information, counselling and services for sexual health and well-being
- Prevention and treatment of HIV and other sexually transmitted infections
- Comprehensive sexuality education
- Antenatal, childbirth and postnatal care

### 50+

**POST-REPRODUCTIVE AGE**

- Prevention, detection, immediate services and referrals for cases of sexual and gender-based violence
- Information, counselling and services for sexual health and well-being
- Prevention and treatment of HIV and other sexually transmitted infections
- Prevention, detection and management of reproductive cancers, especially cervical cancer
- Menopausal and post-menopausal counselling and treatment of related morbidities
For more information, see the UNFPA publication “Sexual and Reproductive Health and Rights: An Essential Element of Universal Health Coverage”