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HEALTH REPORTER: focus on universal access to sexual and reproductive health services 13 March 2007

produced by the [IDS Health and Development Information](#) team
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This is our monthly email bulletin, bringing together research to inform policy debates on health in developing countries.

The Health Reporter aims to provide readers with a more in-depth look at a particular area of health policy. This month's theme is [universal access to sexual and reproductive health services](#). The bulletin also features summaries of new documents and other additions to the [Health Resource Guide](#)

[Health Reporter archive](#) - an archive is now available on the Health Resource Guide. See previous issues of the Health Reporter at www.eldis.org/health/archive.htm

All documents listed below are available free on the web. If you are unable to access any of these materials online and would like to receive a copy of a document as an email attachment, please contact r.wolfe@ids.ac.uk

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Feature: universal access to sexual and reproductive health services

Lack of access to sexual and reproductive health (SRH) services and information contributes to high levels of morbidity and mortality for largely preventable SRH problems, particularly in developing countries. Every year, half a million women die during childbirth because there is not a skilled attendant present at the birth, and insufficient provision of condoms has contributed to the spread of sexually transmitted infections, including HIV. Restrictions on information about sexuality, contraception, prevention and healthcare, limit people's ability to make choices regarding their own sexual and reproductive health and rights.

In September 2006, as a result of advocacy by international and national NGOs, the UN General Assembly finally adopted the target of universal access to reproductive health. Whilst the importance of reproductive health has been acknowledged in international agreements, many countries still do not consider sexual health as a legitimate health issue, and conservative ideology emanating particularly from current US policy, prevents it from receiving global recognition. Donor support for SRH services (apart from HIV) has been falling; and stigma, discrimination and restrictive laws and policies continue to prevent many people from utilising services.

Achieving universal access to sexual and reproductive health services requires that attention is focused towards addressing the inequities in service delivery and discriminatory practices that marginalise people and deny them the opportunity to seek care, and justifies prioritising efforts towards fulfilling their SRH needs and rights. Approaches towards expanding access to services include: integrating SRH services with primary health care facilities; strengthening participation and accountability; improving the quality of care; and drawing on international human rights legislation and advocacy.

This health reporter is based on the health [key issues guide on universal access to sexual and reproductive health services](#). The guide is based on a literature review written by Sally Griffin for the PANOS Relay Programme in association with the Realising Rights Consortium.

For more information see:

- Health key issues guide: universal access to sexual and reproductive health services
www.eldis.org/health/Universal/index.htm
- Health key issues guide: sexual and reproductive health and rights
www.eldis.org/health/srhr/index.htm
- Section on sexual and reproductive health
www.eldis.org/health/sexrepro/index.htm
- Realising Rights consortium
www.realising-rights.org/

Recommended readings on universal access to sexual and reproductive health services

Sexual and reproductive health: a matter of life and death

Authors: Glasier, A.; Gulmezoglu, A. M.; Schmid, G. P.; et al
Produced by: The Lancet (2006)

This article is the first in a series of papers on Sexual and Reproductive Health published by the Lancet. The article notes that worldwide, the burden of sexual and reproductive ill-health remains enormous: unsafe sex is the second most important risk factor for disease, disability and death in the poorest communities. The authors identify core components of sexual and reproductive health care. These are: improvement in maternal and newborn care, provision of high-quality services for family planning, elimination of unsafe abortion, prevention and treatment of sexually transmitted infections (STIs), and promotion of healthy sexuality. The article provides an overview of these components and discusses trends and accomplishments in the fields.

Men's sexual and reproductive health is examined and the authors observe that men can also be the subject of sexual and reproductive ill-health, for instance they acquire STIs and can be victims of non-consensual sex. Finally, the article investigates why sexual and reproductive health, with the exception of HIV and AIDS, has failed to capture broad support from the donor community. One explanation given is that funding and policy decisions concerning sexual and reproductive health are being increasingly influenced by conservative political, religious and cultural forces which have undermined recent progress in the field.

Please note: To read this article, you will first need to register with The Lancet. This process and access to the article is free of charge. If the document link does not work, go to the Lancet website and then enter the document title into the Search box near the top of the page.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23031>

Mapping of experiences of access to care, treatment and support

Authors: International Community of Women Living with HIV/AIDS (ICW)
Produced by: International Community of Women Living with HIV/AIDS (ICW) (2006)

As a positive woman, how do you try to stay healthy? What barriers do you face in trying to access medication? In 2006, ICW mapped positive women's experiences of access to care, treatment and support in three countries - Tanzania, Kenya and Namibia. Treatment is meant to be free in all three countries, yet focus group discussions with HIV positive women and health care workers revealed a number of factors that negate women's ability to access and use antiretrovirals (ARVs) to improve their health.

Partner control can make it impossible for women to access health services. Partners may refuse to let women go to the hospital or deny them the money for treatment. In other cases women faced pressure from partners to share their medications with them. Having to bribe health care workers to ensure access to care, treatment and support was reported by all focus groups. Other problems included the financial and time costs of travelling to clinics or health centres; lack of confidentiality; unavailability of treatment; and poor nutrition leading to ill-health, problems with adherence, and pressure to sell medications. Changes needed to improve treatment, care and support include better transport services, health services near villages, income generation opportunities, and improved nutrition.

[Summary adapted from Siyanda www.siyanda.org]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23857>

Public choices, private decisions: sexual and reproductive health and the Millennium Development Goals

Authors: Bernstein, S.; Hansen, C.J.

Produced by: Millennium Project (2006)

This report, published by the UN Millennium Project, examines the global burden of diseases and risks related to sexual and reproductive health (SRH), analyses the implications for the Millennium Development Goals, and asks what needs to be done. Key findings include that millions of women lack access to family planning services they need and want. The unmet need for contraception is especially acute among adolescents in the developing world. One in 16 women in sub-Saharan Africa dies from complications of pregnancy and childbirth, compared with one in every 2800 in highly-developed countries.

The report argues that providing safe, effective, voluntary family planning services prevents death and disability, spurs development, and fights poverty. It calls for a massive expansion of family planning, maternal health, and AIDS prevention efforts by mobilising political will, institutional capacity, and technical and financial resources. It estimates that US\$36 billion per year will be needed in order to meet the developing world's SRH needs. Recommendations to integrate SRH into development strategies include: incorporating SRH in both national poverty reduction strategies and strengthened health systems; allocating enough funds for commodities, supplies and logistics while strengthening health systems; and meeting the needs of special populations, particularly young people, the poor and victims of humanitarian crisis.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC22106>

Strengthening linkages for sexual and reproductive health, HIV and AIDS: progress, barriers and opportunities for scaling up

Authors: Druce, N.; Dickinson, C.; Attawell, K.; et al

Produced by: Department for International Development (DFID) Health Resource Centre (HRC) (2006)

This review, produced by the DFID Health Resource Centre, explores the policy, financing and institutional factors that enable or constrain the integration of sexual and reproductive health and rights programmes with policy programmes for HIV prevention and AIDS treatment and care. Based on a review of the literature, key informant interviews and policy and programme analysis, it discusses the main constraints to developing linkages and the possible strategies and opportunities for engagement. Key challenges to scaling up include: downward trends in donor financing for reproductive health and family planning and weak international leadership for the promotion of linkages. Institutional arrangements and support for targeted disease specific programmes also create incentives that weaken synergistic approaches.

The review provides examples of enabling processes to promote linkages. These include improved government and donor coordination and cross programme working groups and task forces. Finally, the authors suggest potential opportunities for engagement. These opportunities fall into four categories; civil society and private sector engagement, actions on commitments, opportunities among multi and bilateral donors, and support to harmonised country processes with key stakeholders. [adapted from authors]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23520>

The right reforms? Health sector reforms and sexual and reproductive health

Authors: Sundari Ravindran, T. K.; de Pinho, H.

Produced by: Initiative for Sexual & Reproductive Rights in Health Reforms (School of Public Health, University of the Witwatersrand) (2005)

This publication, from the Initiative for Sexual and Reproductive Rights in Health Reforms, pulls together available information on how health sector reform has impacted on sexual and reproductive health services (SRH), and identifies information gaps and advocacy issues. It draws on findings from Africa, Asia and Latin America on financing, public-private interaction, priority-setting, decentralisation, integration of services and accountability in health sector reform.

The authors argue that four principles need to be applied in response to the impact of neo-liberal health sector reform and to promote the provision of quality SRH services based on an equity and rights approach. These are: strengthening state legitimacy and reinforcing good governance; building political will and commitment to a discourse of equity and rights that ensure an inclusive health system; strengthening health systems through the provision of adequate resources and the capacity to manage these resources; and developing constructive accountability and participative mechanisms that facilitate meaningful involvement and advocacy from even the most vulnerable groups. The authors also highlight knowledge and research gaps that need to be addressed, including: context and actors in health sector reform and SRH services; assessing the impact of reform on health systems; and methods and tools for research. [adapted from author]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC21720>

Other recommended readings

Neurological disorders: public health challenges

Authors: World Health Organization

Produced by: World Health Organization (WHO) (2007)

This report from the World Health Organization examines the public health aspects of neurological disorders. Neurological disorders, ranging from epilepsy to Alzheimer disease, from stroke to headache, affect up to one billion people worldwide. They affect people in all countries, irrespective of age, sex, education or income. The report finds that access to appropriate care is difficult for many people with neurological disorders, their families and caregivers. The reasons for the non-availability of treatment include: inadequate health delivery systems; lack of trained personnel; the absence of essential drugs; and prevalence of traditional beliefs and practices.

The report concludes that neurological disorders are a significant and increasing public health problem. Many of them can be either prevented or treated at a relatively low cost yet significant inequalities in provision of neurological treatment and care exist between developed and developing countries. The report recommends a series of simple but effective actions. It argues for: greater commitment from decision makers; increased social and professional awareness; strategies that address stigma and discrimination; national capacity building and international collaboration. [adapted from author]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23907>

Slum health: diseases of neglected populations

Authors: Riley, L. W.; Albert, I. K.; Unger, A.; Reis, M. G.

Produced by: BMC International Health and Human Rights (2007)

This article examines the distinct set of health problems that occur in urban slums. With one billion people currently estimated to live in such communities, this neglected population has become a major reservoir for a wide spectrum of health conditions that are not well recognised by the formal health sector. Because of the informal nature of slum settlements, and cultural, social, and behavioural factors unique to the slum populations, little is known about the spectrum, burden, and determinants of illnesses in these communities.

The article discusses observations made in one slum community in Salvador, Brazil. It highlights the existence of a spectrum and burden of chronic and acute illnesses that are not likely to be detected by the formal sector health services until they result in complications or death. The paper concludes that continued neglect of urban slum populations in the world could lead to greater expenditure and diversion of health care resources to the management of end-stage complications of diseases that are preventable. Concerted effort is urgently needed to assess health burden and determinants of disease morbidity among slum residents at the community level. [adapted from author]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23562>

Global climate change: implications for international public health policy

Authors: Campbell-Lendrum, D.; Corvalan, C.; Neira, M.

Produced by: Bulletin of the World Health Organization(2007)

This article considers the health impacts of climate change and discusses policies and interventions to address these effects. Many of the most important global killers including malaria and diarrhoea are highly sensitive to climatic conditions, yet a comprehensive strategy to support a public health response is lacking. The paper discusses preventative environmental health interventions including scaling up water and sanitation services and providing point-of-use disinfection; and examines integrated measures that address the root causes of vulnerability to natural disasters. Post flooding health effects can be reduced by adequately planned and funded health-sector responses, including interventions to control outbreaks of vector-borne and water-related diseases.

The paper concludes that climate change strains existing weak points in health protection systems and calls for reconsideration of public health priorities. The most effective priorities are likely to be strengthening of the key functions of environmental management, surveillance and response to safeguard health from natural disasters and changes in infectious disease patterns, and a more pro-active approach to ensure that development decisions serve the ultimate goal of improving human health. [adapted from author]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23517>

Women and girls living with HIV/AIDS: overview and annotated bibliography

Authors: Esplen, E.; International Community of Women Living with HIV/AIDS (ICW)

Produced by: BRIDGE (2007)

HIV/AIDS is both driven by and entrenches gender inequality, leaving women more vulnerable than men to its impact. This report - consisting of an overview, annotated bibliography, and contacts section - considers the specific challenges faced by women and girls who are living with HIV and AIDS. Women's social, economic, and legal disadvantage is exacerbated by a positive HIV status, and vice versa. Violations of women's social, economic, and legal rights in turn obstruct their ability to seek care, treatment and support, and to realise their sexual and reproductive health and rights (SRHR).

In many contexts, social and cultural values surrounding the importance of female purity mean that women and girls living with HIV and AIDS are also subject to greater discrimination than men. Sex workers, drug users, prisoners and migrants may face additional stigma. Women and girls living with HIV/AIDS are calling for recognition of their fundamental human rights, including their SRHR and the right to decide whether or not to have children; their meaningful involvement at all stages of the policy-making process; and government provision of accessible and equitable healthcare.

[Summary adapted from Siyanda www.siyanda.org]

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23849>

Global health partnerships: the UK contribution to health in developing countries

Authors: Crisp, N.

Produced by: Department of Health, UK (2007)

This report, published by the United Kingdom's (UK) Department of Health, examines how the UK's experience and expertise in health can be used to best effect to support developing countries. It sets out examples of individual and National Health Service (NHS) partnerships working to improve health and

share learning, and reviews the need to strengthen health systems in developing countries. The report finds that developing countries need to take the lead and own the solutions for improving health systems and services; support by international, national and local partnerships must be based on mutual respect; the UK and other developed countries have a responsibility to support scaling-up of training, education and employment of health workers in developing countries.

The report provides recommendations to help develop partnerships that fit in with country's plans, respond to their needs and enhance UK support. Specific recommendations are incorporated into broader categories including: stronger links between health and development; making the UK contribution more effective and sustainable; strengthening health systems through partnerships and learning; tackling the staffing crisis; and making evidence and best practice available to health workers, policy makers and the public.

Available online at: <http://www.eldis.org/cf/rdr/rdr.cfm?doc=DOC23871>

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- Health Resource Guide - www.eldis.org/health
- Health Systems Resource Guide - www.eldis.org/healthsystems
- HIV and AIDS Resource Guide - www.eldis.org/hiv aids

The HRC provides access to technical assistance and information for the Department for International Development (DFID UK), and its partners, in support of pro-poor health policies as well as health systems, service delivery and public health topics and programmes.

Eldis currently includes descriptions and links to over 4,500 organisations and over 16,000 full-text online documents covering development and environmental issues. It can be searched or browsed free over the Internet.

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