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Sexual Health links with Reproductive Health: the WHO's operational framework in the Pacific context


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Presented on behalf of WHO Dept of Reproductive Health and Research

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 World Health Organization

human reproduction programme **hrp**
research for impact
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Purpose

- ❑ Explain/Launch the WHO Operational Framework on the Integration of Sexual Health with Reproductive Health Services
- ❑ Explore how the Framework is and could be implemented in the Pacific region

Sexual health background

- Global understanding of sexual health (SH) has evolved over time, as has its relationship to reproductive health (RH). This has included:

- SH being subsumed under RH
- SH being interpreted to reference specific populations or specific health/ill-health conditions

- Why is this problematic?

SDG 3.7 calls for universal access to sexual and reproductive health-care services by 2030



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A reminder: sexual health

WHO working definition (2006)

“...a state of physical, emotional, mental and social well-being in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity...”

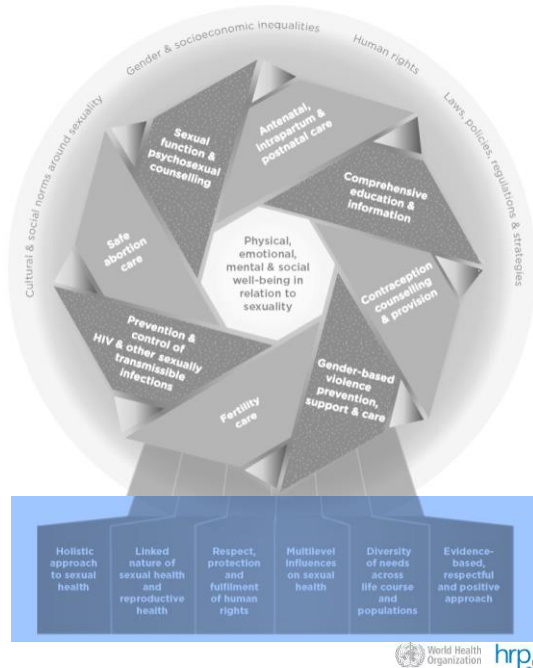
- **positive and respectful approach** to sexuality and sexual relationships
- **Pleasurable and safe** sexual experiences
- **freedom from violence**, coercion, discrimination.
- Respect, protection, and fulfilment of **sexual rights**

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Guiding Principles

- ❑ **SIX**, equally weighted principles
- ❑ In particular:
 - RH and SH linked
 - Human rights (including sexual rights)
 - Diversity of needs across populations



The Rosette

- ❑ Two intertwined ribbons
- ❑ **EIGHT** intervention areas
- ❑ Together: comprehensive SRH

Defined by health SERVICE,
rather than health TOPIC

Can be tailored based
individual or specific
population needs

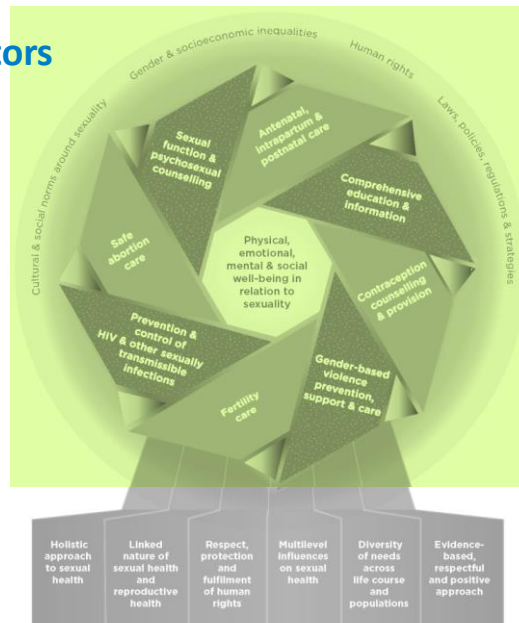


7 Sexuality and Mental Health



Climate of Social-Structural Factors

- ❑ **FOUR** contextual factors to take into consideration
- ❑ Sustainable SH improvement requires progress in these areas as well



8 Sexuality and Mental Health



Demystify, Detail, Demand: using the framework to advocate for improved SRH

- ❑ **Demystify:** Places sexual health and reproductive health on equal footing
 - Distinct, but inherently intertwined
 - Services delinked from population groups or stigma
- ❑ **Detail:** Describe what comprise *comprehensive* SRH – broader awareness as to what is necessary to achieve SDG 3.7 **sexual and reproductive health services for all**
- ❑ **Demand:** Acknowledge that individuals are heterogeneous, with evolving needs

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Pacific Society for Reproductive Health

- ❑ PSRH has been advocating and supporting our members and health professionals to deliver a holistic reproductive service that includes family planning and sexual health.
- ❑ Our membership is broad - nurses, midwives, general practitioners, O&G specialists, STI experts, FP experts, public health - therefore PSRH plays both an advocacy and operational role in implementing the WHO framework
- ❑ Pacific health workers integrate sexual health and reproductive health all the time without realizing they are actually integrating elements of two streams of health care.

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Pacific Society for Reproductive Health

- ❑ We promote research and human resource capacity building to enable health professionals to provide comprehensive sexual and reproductive health.
- ❑ Pacific health workers are multiskilled in order to address both areas. This is appropriate in Pacific countries where shortage of health workforce is a common problem and therefore the need to train multiskilled health workers and to undertake task-shifting if required.

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Challenges remain

- ❑ Donor driven "silo" programs
- ❑ Perverse incentives e.g. SIA
- ❑ Health "programme" areas.
 - “PNG due to the polio and measles outbreak, international agencies drive an emergency response with big funding. So instead of vaccines and SRH being delivered through routine planned integrated outreach services to remote areas; staff stop doing these routine patrols and wait for the crisis of an outbreak when then they get paid additional allowances to go and do the job they should have been doing all along.”

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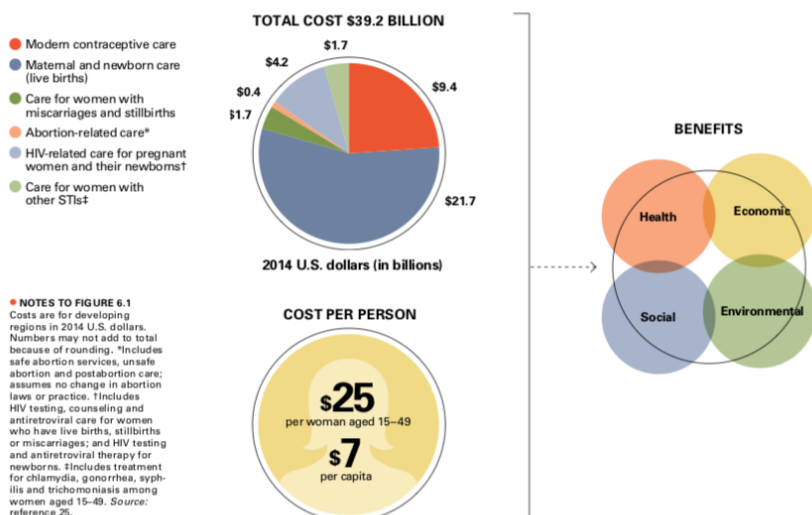
The Pacific Islands Need Investment

- ❑ Advocate to MOHs to formulate and implement policies on all aspects of integrated care in order to deliver on SDG 3.7 – monitor progress through regional forums
- ❑ Training more multiskilled HW in all aspects of integrated reproductive and sexual health care = “holistic approach”
- ❑ Assist countries with sustainable procurement programmes to address shortages of pharmaceuticals, consumables and equipment
- ❑ Address the Unmet Need in Family Planning

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6.1 Providing sexual and reproductive health services for all women and newborns would cost \$39.2 billion.



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THANK YOU

Access the framework here: <https://goo.gl/MeSNtW>

For more questions, contact Lianne Gonsalves: gonsalvesl@who.int