

Recent evolutions and research agenda in the field of SRHR

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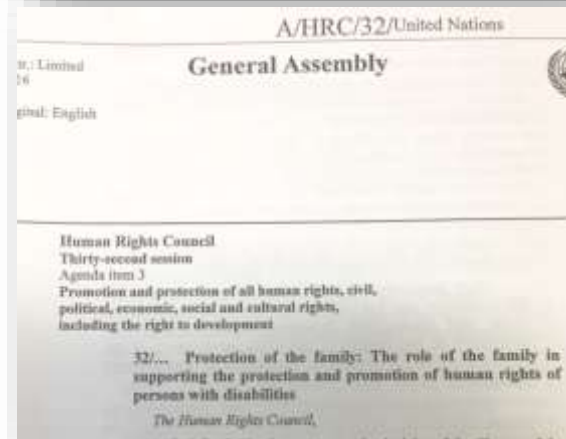
Magnitude of the problems related to sexual and reproductive health and rights

- ❑ As of recent, an estimated
 - **287 000 women women died from pregnancy-related causes**¹
 - **2.3 million babies died** during the first 28 days of life² and
 - **1.9 million babies were stillborn**. 98% of stillbirths take place in low-income and middle-income countries.³
- ❑ **Child marriages: 12 million girls every year.**⁴
- ❑ An estimated **birth rate of 1.5 per 1000 women for girls 10–14 years** .⁵
- ❑ An estimated **257 million women have unmet need in contraception** in developing countries.⁶
- ❑ Recent estimates: **73 million induced abortions** occurred each year worldwide.⁷
- ❑ Each year, there are an estimated **374 million new infections with 1 of 4 STIs**: chlamydia, gonorrhea, syphilis and trichomoniasis.⁸
- ❑ **1 in 3** women worldwide have experienced either **physical and/or sexual intimate partner violence**.⁹

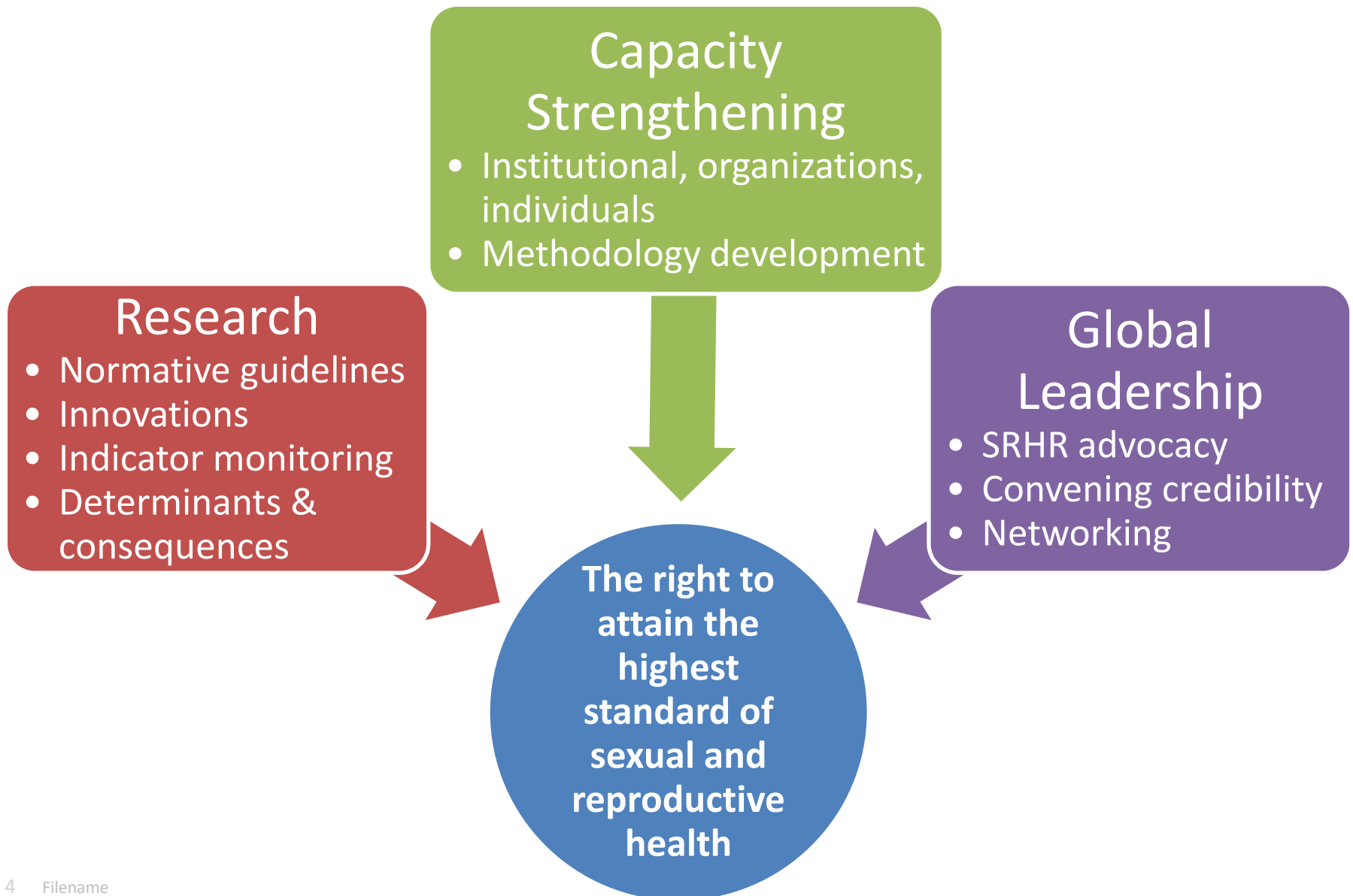


Several challenges to ensuring and protecting SRH rights remain

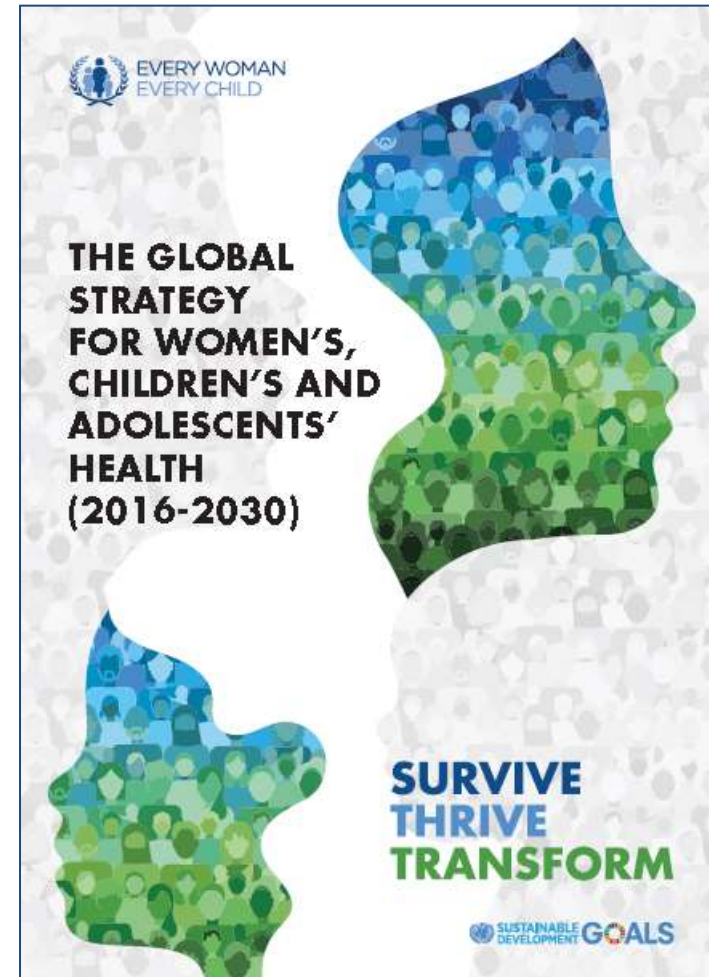
- ❑ Addressing sexuality, sexual health, safe abortion, and gender relations continue to be challenging politically
- ❑ Integrating SRHR in humanitarian responses essential but modalities unclear



WHO/HRP's core functions



Aligning with the SDGs and Global Strategy for Women's, Children's and Adolescents' Health





EVERY WOMAN
EVERY CHILD

What is new?

- **Equity**

Focus on reaching the most vulnerable and leaving no one behind

- **Universality**

For all countries, with an explicit focus on humanitarian settings

- **Adolescents**

The “SDG generation” –
a 10 year old in 2016
will be 24 in 2030

- **Life-course approach**

Health and well-being interconnected at every age,
and across generations

- **Multisector approach**

Joint progress across core sectors e.g., nutrition, education, WASH



Contributing to SDG indicators related to SRHR





SDG 3.1.1	Guidance on increasing access to contraception and improving maternal health services to reduce maternal deaths and improve well-being
SDG 3.1.2	Guidance on strategies to increase access to SBA and quality of SBA services
SDG 3.2	Research to improve quality of perinatal care and development of normative guidance
SDG 3.3	Implementation research to support implementation of the global STI strategy and to strengthen SRHR-HIV linkages
SDG 3.7.1	Implementation research to support scaling up of effective interventions to satisfy demand for contraception
SDG 3.7.2	Implementation research to support reduction of unintended pregnancy among adolescents




SDG 5.2	Implementation research to support the global plan of action to strengthen health systems response to violence against women, girls and children
SDG 5.3.1	Research and technical support to parliamentarians to determine how to legislate effectively against CEFM
SDG 5.3.2	Research to improve medical care and management of girls & women with FGM in accordance with WHO guidance
SDG 5.6	Technical support to enable states to safeguard rights to universal access to SRH services

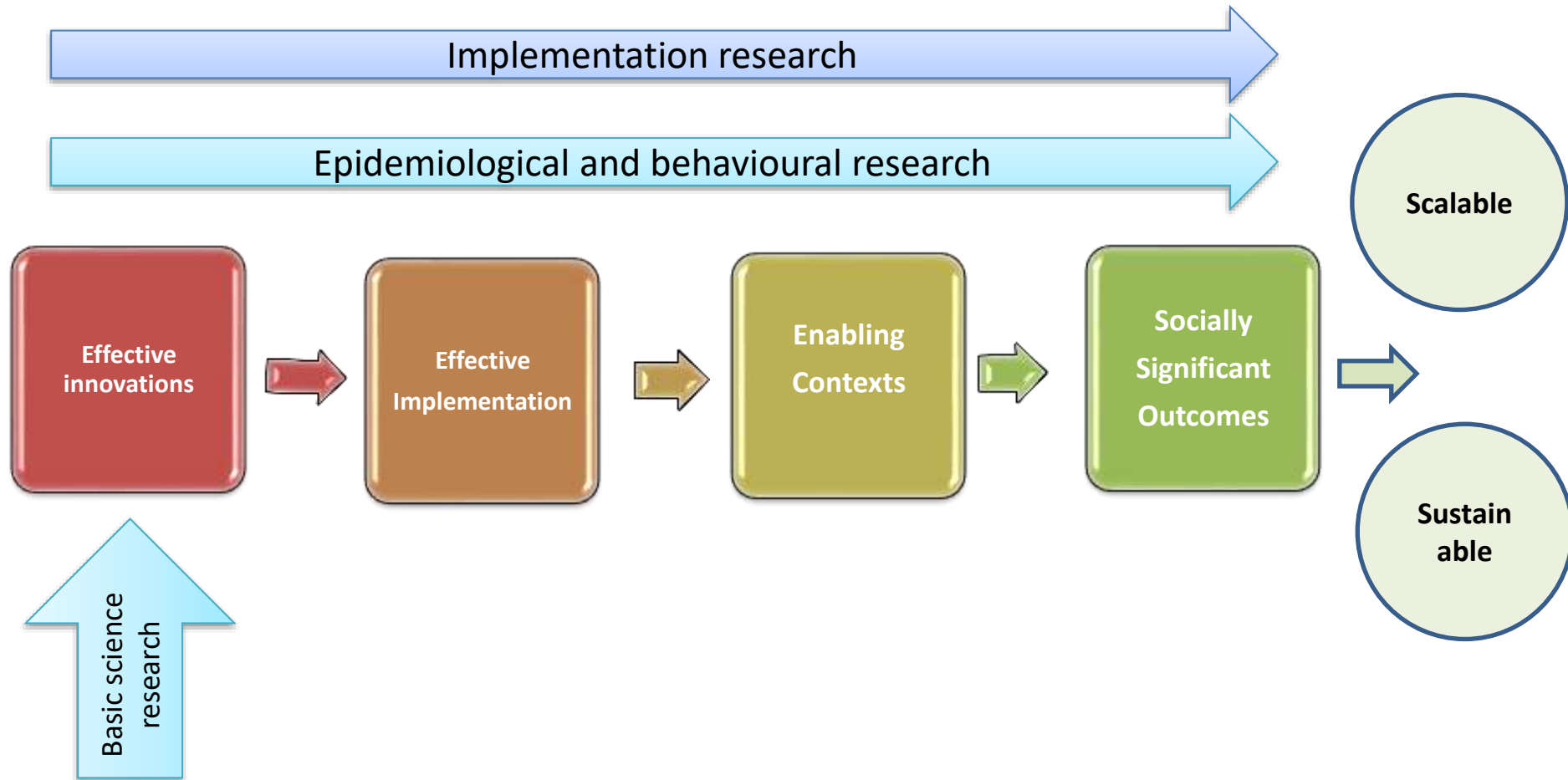
Strategic directions for WHO/HRP: Transitions to align with trends

- Global  National LEVEL
 - Application of norms & standards, best practices
 - Implementation research for institutionalization
 - Capacity-building for production and use of evidence

- Medical  Systems INTERVENTION
 - Building blocks, especially financing (UHC)
 - Integration, wherever appropriate
 - Total Market Approaches

- Protection  Well-being OUTCOMES
 - Mortality, morbidities and rights
 - Personal / couple desires

Framework of Evolution of SRHR Research: Discovery to Delivery



Key areas of research

- ❑ Innovation in technology (POCT, maternal health management, HPV vaccines)
- ❑ Integration of services (HIV and syphilis, HIV and contraception, immunization)
- ❑ Research to support development and implementation of guidelines at country level
- ❑ Innovative financing (vouchers, conditional cash transfer)
- ❑ Capacity building (multipurpose workers, staff retention)
- ❑ Social determinants in health
- ❑ Equity aspect (adolescent health issues)
- ❑ Monitoring and accountability (MMR, STI estimates)
- ❑ Emerging issues (Zika, Ebola, covid)

Overall alignment good; some reorientation needed

- ❑ **UHC** as a platform for an integrated approach for delivering SRH services; health security and greater consideration of socio-economic interactions needed
- ❑ **Intersectoral action:** stronger integration with the economic, social and environmental determinants needed
- ❑ **Equity:** absolutely critical, and for all countries; need for focus on sub-national data and actions
- ❑ **Gender Equality and Human Rights:** need for stronger and deeper integration of gender equality and human rights
- ❑ **Financing shifts** to greater domestic financing; least developed and fragile countries continue to need ODA assistance
- ❑ **Monitoring and accountability framework** requirements enormous; increased role for HRP

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