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Statement submitted by International Planned Parenthood Federation, a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

^{*} The present statement is issued without formal editing.





Statement

A) About IPPF

The International Planned Parenthood Federation welcomes the priority theme of the 60th Session of the Commission on the Status of Women.

As a leading advocate of sexual and reproductive health and rights and a global service provider, The International Planned Parenthood Federation works through 163 Member Associations and Collaborating Partners in 170 countries to empower the most vulnerable women, men and young people to access life-saving services and programmes, and to live with dignity. We have had general consultative status with the Economic and Social Council since 1973 (E/2010/INF/4).

B) Sexual and Reproductive Health and Rights — The key to Gender Equality and Women's Empowerment

The introduction of the new sustainable development goals — "Transforming our world: the 2030 Agenda for Sustainable Development" — has shifted the landscape of gender equality and sustainable development. Through a standalone goal on gender equality and women's and girls' empowerment and targets on sexual and reproductive health and reproductive rights, the global community has recognised that "the achievement of full human potential and of sustainable development is not possible if one half of humanity continues to be denied its full human rights and opportunities."

However, action on gender equality and Sexual and Reproductive Health and Rights is not restricted to just goal 3 on health and goal 5 on gender equality and women's and girls' empowerment. Elements of Sexual and Reproductive Health and Rights can also be found in other goals, demonstrating how it is critical to the success of the whole 2030 Agenda. We will not end poverty for all — the overarching ambition of the 2030 Agenda — if we do not allow women to determine their family size and participate in education. Ensuring that girls have access to sanitation facilities and do not leave school due to pregnancy has strong bearing on whether goal 4 — inclusive and equitable quality education — becomes a reality. Sexual and Reproductive Health and Rights is an essential precondition to enabling women to participate fully in the workforce and the lives of their communities. In order to achieve goal 8 on sustainable economic growth, full and productive employment and decent work, women must have access to modern methods of contraception and be empowered to make decisions about if, when and how many children to have. Without gender equality and access to Sexual and Reproductive Health and Rights, sustainable development will not become a reality.

However, despite the ambition of the Agenda, huge challenges remain. For women and girls to lead healthy, empowered lives, and to be free to participate in social, economic and political life, they need universal access to quality services, information and education, and conditions that allow them to realize their Sexual and Reproductive Health and Rights free from violence and coercion. Sexual and Reproductive Health and Rights services are critical for women and girls to be able to open doors to opportunities.

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C) Sexual and Reproductive Health and Rights and Access to Health

Target 3.7 of the 2030 Agenda commits to ensuring universal access to sexual and reproductive health services, which brings positive gains for the health of girls and women. When women and girls have access to mental and physical health, they are able to take advantage of the opportunities available to them, participate fully in society or improve their social position. Providing services and conditions that allow women to maintain good health is critical to women's empowerment, gender equality and socio-economic development. Globally, the single leading risk factor for death and disability in women of reproductive age in low- and middle income countries is unsafe sex, mainly due to HIV, and to maternal mortality. Access to antiretroviral therapy and contraceptives is important to ensure that women remain HIV-negative as well as ensuring that women living with HIV can live a healthy life. About 19 per cent of young women in developing countries become pregnant before age 18; pregnancy related complications are a leading cause of death among young women between 19-24 years. Women and girls face specific risks in humanitarian settings, including the danger of sexual exploitation, having access to contraception and being able to deliver a baby in safe, hygienic circumstances.

D) Sexual and Reproductive Health and Rights and Access to Education

The education of women and girls is widely recognized as a powerful tool to empower women and girls within the family and society, and is considered a key pathway to employment and earning. Goal 4 of the Agenda — ensure inclusive and equitable quality education and promote lifelong learning opportunities for all recognises how important this is, and especially for women and girls. Educated women are more likely to marry later, use family planning and access health care; and to understand their rights and have the self-confidence to act on them. Each additional year of schooling for girls improves their employment prospects, increases future earnings by about 10 per cent and reduces infant mortality by up to 10 per cent. Comprehensive sexuality education is a promising strategy by which to shift norms and attitudes, and empower young people to negotiate safe, consensual and enjoyable sex. A review of 87 studies of comprehensive sexuality education programmes around the world showed that it increased knowledge, and two thirds of programmes led to a positive impact on behaviour, including increased condom or contraceptive use, or reduced sexual risk-taking. However, such programmes are not available in most countries. Enabling adolescent girls to continue to secondary school is particularly important. Girls with only primary education are twice as likely to be married before the age of 18 as those with secondary or higher education. Early marriage reduces girls' access to education, and anticipation of an early marriage often prevents secondary education for girls. Studies have shown that for each additional year that a girl delays marriage, her likelihood of being literate increases by 5.6 per cent and the prospect of her completing secondary school rises by 6.5 per cent. Moreover, adolescent childbearing may interrupt school attendance and impair young women's long-term social and economic mobility and, indirectly, their empowerment. However, girls and young women often do not have access to the contraceptives they want and need; in most countries, schoolgirls who become pregnant are required to drop out of school and the number of new mothers returning to school tends to be low. In some countries, young women are expelled from school if they have an abortion.

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E) Sexual and Reproductive Health and Rights and Economic Empowerment

Women's economic rights, especially in relation to work and income, advance economies, sustainable development and improve livelihoods, and the importance of promoting sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all is emphasised in Goal 8. However, women still remain more affected by poverty, unpaid care burdens and insecure work than men. Women's care burden can limit their access to sexual and reproductive health services, which in turn, can increase their care work burden by impeding their decisions on if, when and how many children to have. Given the benefits of child care and other support programmes, and the fact that women will continue to work in both the formal and informal economy, support for care work remains extremely important to women's economic empowerment, and to the health and well-being of women and their families. In addition to support for care work, regulatory frameworks, including policies and practices that support and promote universal access to Sexual and Reproductive Health and Rights, should be expanded across both the informal and formal economy to help women access decent work, to become healthier and to gain more economic stability.

F) Sexual and Reproductive Health and Rights and Political Participation

Women's participation and leadership in public and political life is essential for tackling poverty and gender inequality. If we are to achieve target 5.5 — ensure women's full and effective participation and equal opportunities for leadership — women's participation must be transformative, their voices need to be heard across public life, from households and community meetings to national parliaments. However, often social norms that dictate women's domestic roles and responsibilities limit women to the reproductive sphere, and restrict their time to engage outside the household. In addition, women seeking or in public positions are often subject to violence and sexual harassment. It is particularly important to address sexual violence as a fundamental part of promoting women's political participation and engagement in peace building and reconstruction processes in post conflict situations. Greater attention is needed to promote feminist constituency building and organizing at the grassroots to build networks to strengthen women's individual and collective capacity to participate in political and public life.

G) Recommendations

The International Planned Parenthood Federation recommends that:

- a) Governments must prioritize the inclusion of Sexual and Reproductive Health and Rights within global and regional policy processes and prioritise Sexual and Reproductive Health and Rights in national plans to ensure investment.
- b) Governments must prioritize Sexual and Reproductive Health and Rights within the context of both health and gender equality. At the national level, this requires commitment and investment from the ministry of health and the ministry of gender/women, as Sexual and Reproductive Health and Rights span the range of women's human rights.
- c) Governments should ensure that domestic laws support the Sexual and Reproductive Health and Rights of women and girls and meet

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- international obligations under human rights treaties such as the Convention on the Elimination of All Forms of Discrimination against Women.
- d) Governments must include access to Sexual and Reproductive Health and Rights in regulatory frameworks that support women's access to decent work. Such frameworks should be expanded across the formal and informal economy.
- e) Governments must prioritize greater investment and effort to fill knowledge gaps and collect robust data. United Nations agencies and multi-lateral institutions should work with governments to increase data collection, disaggregated by sex and age, on Sexual and Reproductive Health and Rights and other core areas relating to gender equality.
- f) Governments must ensure that domestic laws protect women from sexual and gender-based violence in line with international obligations and commitments under human rights treaties and that these laws are enforced at all times.
- g) Governments must prioritise the development and implementation of comprehensive sexuality education programmes.
- h) Governments, donors and civil society should support the integration of sexual and reproductive health, HIV, and sexual and gender-based violence services in order to promote women's health and empowerment.
- i) Governments, donors and civil society must ensure that sexual violence is addressed as part of promoting women's political participation and engagement in peace building and post-conflict reconstruction, and must ensure that women have access to the full range of Sexual and Reproductive Health and Rights services in conflict, emergency and humanitarian settings.
- j) Governments, United Nations agencies, multi-lateral institutions and civil society must prioritize Sexual and Reproductive Health and Rights in order to tackle harmful gender norms.
- k) Donors, multi-lateral institutions and national governments should continue and increase investment in the full range of Sexual and Reproductive Health and Rights services, including rights-based family planning.
- Governments and civil society must ensure that the post-2015 sustainable development financing mechanisms and strategies that detail what financing will cover prioritize the sexual and reproductive health of women and girls.
- m) Donors and multi-lateral institutions should increase investment to support civil society and academic networks to examine the links between sexual and reproductive health and the empowerment of women and girls.

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