

Universal Access to Sexual and Reproductive Health and Rights (SRHR) in Asia and the Pacific: equality, quality & accountability

Access and inclusion of SRHR in UHC

COME TOGETHER

QUALITY SRHR FOR EVERYONE, EVERYWHERE,
THROUGH BARRIERS

In the next 6 years, IPPF must push forwards. Together, we will reach more people in more places. We will shape tomorrow – in the care we deliver, choices we make, connections we create, and solidarity we foster.

Centre Care
on People



Move the Sexuality
Agenda



Solidarity for
Change



Nurture Our
Federation



— A global Federation of SRHR organisations. Radically committed to social and gender justice. We provide care and promote choice.

UHC package: As agreed in the Political Declaration on UHC, a comprehensive package of SRHR interventions must be an integral part of UHC national strategies, policies, and programmes of action.
Comprehensive and integrated SRH services are health promotive, preventive, low cost and cost effective.

As such UHC policies, programmes, and efforts need to ensure that SRHR, including access to SRH services and self-care are an integral part of reformed health systems, primary health care services and preparedness strategies, with the understanding that self-care should never be a substitute for government's responsibility to provide quality services;

IPPF, UHC, Key-Ask!

Human Rights, Inclusiveness and Non-Discrimination: The right to the highest attainable standard of physical and mental health for all must be respected, protected, and fulfilled, regardless of wealth, gender, colour, race, sexual orientation or gender identity, HIV status, marital status, or any other ground.

Along the same line, *the principles of inclusiveness, non-discrimination, non-violence, social justice and solidarity must be at the center of any policy and or action plan on UHC*; Governments and implementation partners must reaffirm their commitment and implement *people-centered* UHC programs grounded on a human-rightsbased approach which is gender transformative and youth-centered, while tackling inequalities, including gender inequality, and social determinants of health, in particular for women, adolescents and girls, and marginalized communities;

IPPF, UHC, Key-Ask!



Ensure Political Leadership Beyond Health

Commit to achieve UHC for healthy lives and well-being for all at all stages, as a social contract.



Leave No One Behind

Pursue equity in access to quality health services with financial protection.



Regulate and Legislate

Create a strong, enabling regulatory and legal environment responsive to people's needs.



Uphold Quality of Care

Build quality health systems that people and communities trust.



Invest More and Better

Sustain public financing and harmonize health investments.



Move Together

Establish multi-stakeholder mechanisms for engaging the whole of society for a healthier world.

Gender Equality

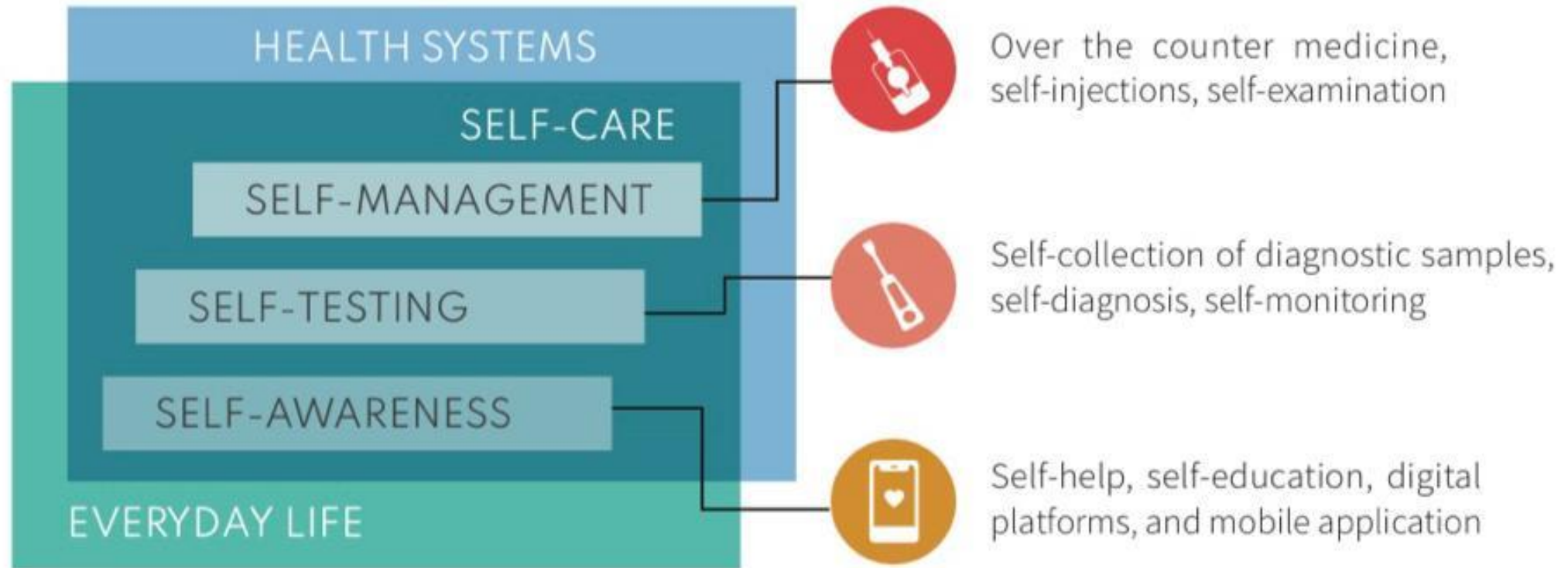
Emphasize gender equality, redress gender power dynamics and ensure women's and girls' rights as foundational principles for UHC.



Emergency Preparedness

Promote strong and resilient health systems for enhancing health emergency preparedness and response.

EXAMPLES OF SELF-CARE



THE CHALLENGE



Half the world's population lack access to essential health services.

925 million people spend more than 10% of their household's budget on healthcare.

218 million women and girls of reproductive age have an unmet need for modern contraception.

100 million people fall into extreme poverty each year due to health expenses.

18 million more health workers are needed by 2030 to prevent global shortage.

THE OPPORTUNITY

Self-care can contribute towards universal health coverage and help achieve Sustainable Development Goal 3 by making health systems stronger, more equitable, and more efficient.

3 GOOD HEALTH AND WELL-BEING



TARGET 3.8

ACHIEVE
UNIVERSAL
HEALTH
COVERAGE

WHAT'S NEXT?

To achieve a world where the practice of self-care leads to a more inclusive, equitable, and people-centered approach to optimizing health and well-being, let's work together to ensure:



The World Health Organization's Consolidated Guideline on Self-Care Interventions for Health is supported and implemented.



National policies, programs, and regulations support self-care as an essential part of UHC.

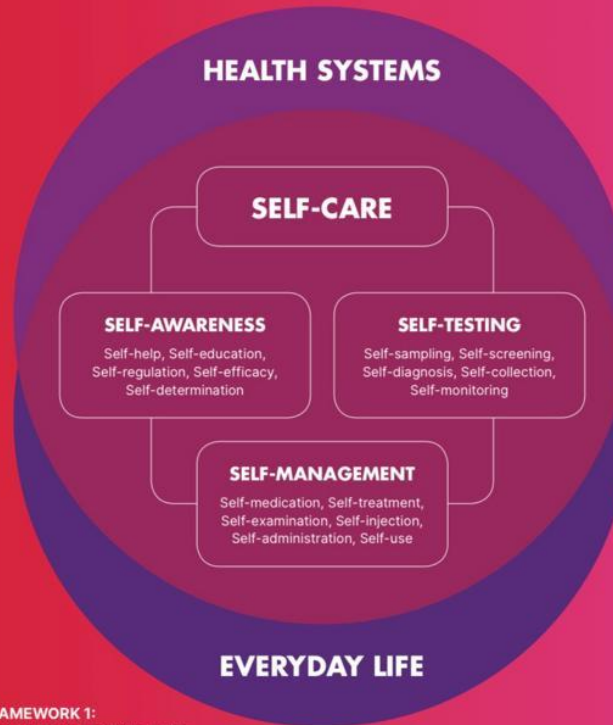


Self-care receives appropriate health financing and costs are not shifted to individuals.



Increase awareness and demand for promising practices in self-care – including expanding the use of digital solutions and information technologies in health.

THREE DIMENSIONS OF SELF-CARE



FRAMEWORK 1:
DIMENSIONS OF SELF-CARE
(Source: Remme, et al. 2019)

RECOMMENDATIONS FOR CSOs TO PROMOTE, ADOPT AND SCALE-UP SELF-CARE INTERVENTIONS



Self-care interventions have been used during the pandemic to provide a vital lifeline to people and ensure people's SRHR are fulfilled. A broad range of self-care strategies have been used by CSOs in the Asia Pacific region during the COVID-19 pandemic, presenting a unique opportunity to learn and gather evidence on the success of self-care interventions. These examples can support CSOs to apply such approaches, and to convince their governments of the need for self-care interventions.

The huge impact of the pandemic on the accessibility and workload of health care facilities has rapidly increased the need for alternative, non-facility based care models such as self-care. With limited opportunities for people to leave their homes or access traditional health services, self-care alternatives which bring SRHR information, testing and management options to people have become more pressing. At the same time, in many countries, the pandemic has brought the introduction, wide distribution and promotion of Covid-19 self-tests;

normalizing a self-testing culture in a way that has never been done before. This has the potential to influence attitudes and mindsets towards self-testing, and self-care more broadly.

While self-care interventions are becoming more widespread in Asia Pacific, there are also hesitations and questions. There are clear opportunities to learn from other countries—both within and beyond Asia Pacific—to ensure people's SRHR are fulfilled.

References

- <https://www.ippf.org/blogs/universal-health-coverage-uhc>
- <https://csemonline.net/lessons/ask-3-engage-meaningfully-with-civil-society/>
- https://www.asiapacificalliance.org/application/files/6016/3905/0320/APA_Self-Care_Advocacy_Toolkit_FINAL.pdf
- <https://www.psi.org/project/self-care/self-care-for-uhc-advocacy-toolkit/>





Thank you

Access and inclusion of SRHR in UHC! For all! NOW!