Sexual and reproductive health services, information and education for all

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How can people enjoy their SRHR?

• When SRH services, information and Education are
  
1. Available
2. Affordable
3. Accessible
4. Acceptable
Do you think everyone are enjoying SRH services?

- Queer community
- People with disability
- Indigineous group
- Rural population
- Young people
Ensuring Inclusion

• Community engagement
• Youth friendly spaces
• Education and training
• Inclusive Education and infrastructure
• Advocacy and Awareness
Gaps and emerging issues

- Lack of CSE
- Gender Inequality that leads to Gender based Violence
- Cultural taboos/harmful cultural practices (Eg. Chhaupadi pratha in Nepal)
- Uneven access
- Health Workforce Shortages
- COVID
• According to the United Nations, in 2019, the contraceptive prevalence rate in South Asia (which includes Nepal) was 46.3%, reflecting challenges in accessing contraception.

• The World Bank reported that in 2019, only about 50% of girls in low-income countries in the Asia-Pacific region completed their lower secondary education, which is linked to SRH education.

• The Demographic and Health Surveys (DHS) program found that in Nepal, as of 2016, only around 40% of women aged 15-49 had comprehensive knowledge of HIV/AIDS.

• The United Nations Economic and Social Commission for Asia and the Pacific (ESCAP) reported that around 38% of women in the Asia-Pacific region have experienced intimate partner violence.

• According to the Guttmacher Institute, in 2019, Nepal had an abortion rate of 43 per 1,000 women aged 15-49.
Opportunities and Best practices

- Implement evidence-based CSE programs that are age-appropriate, inclusive, and promote gender equality.
- Create safe spaces for youth to participate in decision-making, program design, and advocacy.
- Leverage technology to expand access to SRH information and services.
- Utilize community health workers to bridge gaps in SRH service delivery, especially in remote areas.
- Legal and Policy advocacy
- Multisectoral Collaboration between health, Education, and social sectors
- Train healthcare providers
Lessons from COVID

• Telehealth and digital solutions
• Integrating SRH with primary health care
• Community Resilience
• Supply chain Resilience
Recommendations

• **Comprehensive sexuality education**
  
  Recommendation: Integrate age-appropriate, gender-sensitive CSE into school curricula, emphasizing reproductive health, gender equality, and consent.
  
  Action: Collaborate with education authorities to develop standardized CSE modules and train teachers on effective delivery.
• **Youth-Friendly Services:**
• Recommendation: Establish youth-friendly clinics and platforms offering confidential SRH information, counseling, and services.
• Action: Design and implement designated spaces in healthcare facilities, equipped with trained staff and resources for young people.
• **Multisectoral Collaboration:**

• Recommendation: Foster collaboration between healthcare, education, social services, and civil society to provide holistic SRH programs.

• Action: Establish working groups comprising representatives from various sectors to develop and implement integrated SRH initiatives.
• **Technology for SRH Access:***

• **Recommendation:** Utilize digital platforms, apps, and telemedicine to provide SRH information, consultations, and appointment reminders.

• **Action:** Develop user-friendly mobile apps that offer accurate SRH information, virtual consultations, and service scheduling.
THANK YOU