

# IAWG expresses its support for the continued commitment of the United Nations to protect, respect and fulfill the sexual and reproductive health and human rights of all girls, women, and gender non-conforming people in humanitarian settings

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As a global coalition of providers of and advocates for upholding sexual and reproductive health and rights (SRHR) in humanitarian settings, [the Interagency Working Group on Reproductive Health in Crises \(IAWG\)](#) is deeply concerned by the recent [letter](#) sent by the acting Administrator of USAID, to the United Nations (UN) Secretary-General demanding to 'remove references to "sexual and reproductive health" and its derivatives from the UN's Global Humanitarian Response Plan, [\(Global HRP\)](#) and drop the provision of abortion as an essential component of the UN's priorities to respond to the COVID-19 pandemic.'

Since 1995, IAWG – whose members include a diverse group of humanitarian organizations, sexual and reproductive health (SRH) service providers, advocates, and UN agencies – has worked to ensure that essential, life-saving and rights-fulfilling SRH services are a core element of the healthcare services provided in crisis-affected settings. **Years of evidence and direct experience have clearly demonstrated the acute need for SRH services in times of crisis and conflict** including access to contraception, intrapartum care for all births, emergency obstetric and newborn care, post-abortion care, safe abortion care to the full extent of the law, clinical care for rape survivors, and prevention and treatment for HIV and other sexually-transmitted infections.

Any effective global response to the COVID-19 pandemic must be embedded in an evidence-based approach to public health and in line with existing international legal obligations. **The evidence is clear, the de-prioritization of SRH services during previous epidemics has led to stark increases in preventable suffering and death amongst girls and women in humanitarian settings.** In fact, past epidemics have shown that shutting down or diverting funds from essential health services- including SRH - can result in more deaths than the epidemic itself. During the [2014-16 outbreak of Ebola in West Africa for example,](#) the number of women giving birth in safe conditions in hospitals and health clinics dropped by 30%, dramatically increasing risk of medical complications, and tragically, maternal mortality increased by 75% during the epidemic.

Every day, more than 500 girls and women in countries with emergency settings die during pregnancy and childbirth, mostly due to the absence of skilled birth attendants or lack of emergency obstetric procedures, as well as from complications of unsafe abortions. **Past experience tells us that these devastating numbers will only increase in the context of the COVID-19 pandemic.** In some crisis settings, [65% of women](#) report experiencing either sexual or physical violence in their lifetime, two times higher than the global average and amongst the highest levels of violence against women and girls in the world. Recent country-specific research has already shown an increase in reported gender-based violence as movement restrictions and quarantine measures are put in place to reduce the spread of COVID-19. This type of violence is linked to increases in unsafe abortion, maternal and low birthweight, miscarriage, premature labor, and sexually transmitted infections for girls, women, and gender non-conforming people in humanitarian settings.

Eliminating, reducing or restricting essential SRH services in the global response to COVID-19 will violate international human rights, further harm girls, women and gender non-conforming people already at risk , and, in turn, undermine global efforts to respond to not only the pandemic but the existing emergencies in humanitarian settings.

The IAWG applauds the UN, governments, donors and all gender and health advocates who have committed to the inclusion of SRH services, including contraception and access to safe abortion care to the full extent of the law, in the COVID-19 global funding and response. **In the face of a global pandemic, we cannot afford to waste finite time or resources derailing what decades of expert evidence and humanitarian experience have confirmed: that SRHR are human rights, needed, wanted, essential and lifesaving in every emergency.**

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COVID-19 threatens to disrupt the delivery of SRH services in humanitarian and fragile settings, please refer to [the IAWG Full Advocacy Statement](#) for a detailed set of policy recommendations extensively reviewed and validated by IAWG technical experts, policy specialists, and operational agencies working on the front-lines of the COVID-19 response.