



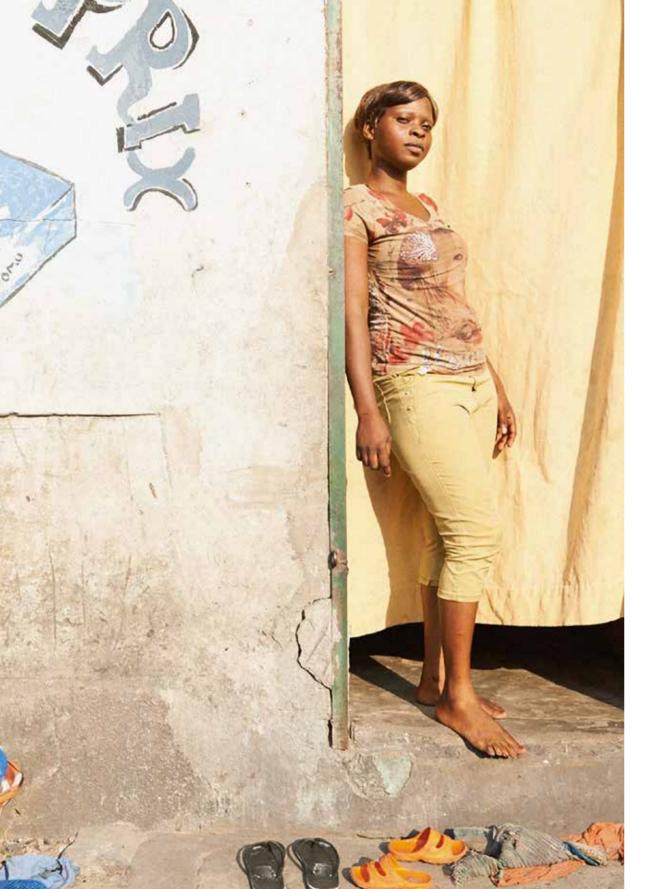




DOCTORS OF THE WORLD

# SEXUAL AND REPRODUCTIVE HEALTH

A PUBLIC HEALTH APPROACH BASED ON HUMAN RIGHTS



#### WHY TAKE ACTION?

As an international medical and humanitarian organisation, Doctors of the World - Médecins du Monde (MdM) provides care to the most vulnerable populations in the world and victims of armed conflicts and natural disasters.

As an independent organisation, Doctors of the World is engaged in action beyond the provision of medical care. It denounces situations in which human dignity and human rights are under attack and works alongside populations in their struggle to improve their situation.

For more than thirty years, Doctors of the World has been active in projects related to Sexual and Reproductive Health (SRH). By the term SRH, MdM refers to "a state of complete physical, mental and social well-being and not merely the absence of disease or disability, in all matters relating to the reproductive system and to its functions and processes" (ICPD [International Conference on Population and Development], Cairo, 1994).

Over the last twenty years, governments and international institutions have both eventually given the needed political priority to SRH. Several agreements adopted by a number of countries bear witness to this commitment and provide a strategic framework in which SRH projects can be implemented. MdM relies on this framework to bring about the recognition of sexual and reproductive rights in the areas where it operates.

225 million women who would prefer to postpone or avoid pregnancy still do not have access to safe and effective contraception. Each year, 1/3 of the 213 million pregnancies in the world are unwanted. Of these unwanted pregnancies, 1 out of 4 of them results in an unsafe abortion. Almost 50,000 women die every year following an abortion performed outside of any medical setting. This is 13% of the maternal mortalities in the world.

Those countries with the highest maternal death rate are countries which are involved in conflicts or have recently experienced conflict. In crisis situations, women are especially exposed to gender-based violence.

More than 270,000 women die each year from cervical cancer. More than 85% of these deaths occur in low or middle income countries where access to screening and treatment is inadequate.



### WHAT IS IT ABOUT?

## A PUBLIC HEALTH APPROACH BASED ON HUMAN RIGHTS

In an international context where women's rights come increasingly under threat, certain fundamental principles, such as those defined in the Beijing Declaration and Platform for Action Programme (fourth World Conference about Women, 1995) appear to have been challenged. A great majority of women still have no access to quality healthcare, leading to terrible consequences in terms of public health.

MdM advocates that these founding agreements and protocols on human rights and in particular those related to sexual and reproductive health, be applied. In this respect, MdM actively supports the right of women to control their own bodies as they wish, to choose whether or not to have children, and decide how many children they want and at what intervals. Exercising sexual and reproductive rights influences and strengthens the exercise of other basic human rights, and also helps not to get caught in a vicious circle of inequality and poverty.

MdM's involvement in SRH is based on a two-prong approach: provision of global, equitable, accessible and quality healthcare as well as an advocacy approach designed to support sexual and reproductive rights.



Some of the principles of the Beijing Conference in relation to sexual and reproductive rights:

- To decide freely and responsibly on all matters related to sexuality;
- To have a sexual life free from discrimination, coercion or violence,
- To decide freely on the number of children, the interval and timing of their births and to be given the information, education and means to be able to do so.

SRH refers to a person who is able "to have a responsible, satisfying and safe sexual life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. This implies [...] the right to be informed and to be able to use the methods of fertility regulation of their choice [...], the right to access the appropriate health care services that enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant."

## AN APPROACH BASED ON THE REDUCTION OF GENDER INEQUALITY

Gender inequality is manifested in the disparity of access to education, healthcare, work opportunities and a decent salary, and to positions of responsibility and political office. Fighting these

"Gender, [...] a constituent element of social relationships based on perceived differences between sexes, [...] is a primary way of signifying relationships of power"

J.W. Scott, 1988

inequalities requires calling into question the distribution of roles and activities taken on by men and women, with the aim of reaching a balance in the relationship between the sexes in terms of power. MdM's interventions aim to reduce the inequality between the sexes, in particular where access to healthcare services is concerned, but also to promote the freedom of women to make decisions about their health and the health of their families.

The three-tiered gender approach consists of:

- A concept: the gender approach analyses the power struggle in relationships between men and women based on the roles that have been designated and constructed by society according to sex.
- An objective: it promotes equal rights, as well as the equal division of resources and responsibilities between men and women.
- A methodology: it produces a comparative analysis of men's and women's situations as much from an economic point of view as from a social, cultural and political one. It is a cross-cutting approach and deals with all fields of development.

Gender inequality is a major obstacle to the respect of sexual and reproductive rights and in access to healthcare. Recognising these rights implies gender equality, the recognition of the existence of different sexual orientations, the participation in the fight against gender based violence, people trafficking and sexual

"The full development of a country, the welfare of the world and the cause of peace require the maximum participation of women on equal terms with men in all fields."

The Convention on the Elimination of all forms of Discrimination Against Women (United Nations Annual General Meeting 1979)

exploitation. For MdM, the sexual and reproductive healthcare services offered as part of MdM's healthcare projects, are a way to identify, refer or provide care and treatment to people who have suffered gender-based violence (GBV).



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#### CONTINUUM OF SRH CARE

#### **ADOLESCENCE** (before pregnancy) Sexual education **PREGNANCY** Antenatal care Cervical cancer screening **ABORTION** LABOUR AND DELIVERY Spontaneous or induced Immediate postpartum Post-abortion care and neonatal care **POSTPARTUM &** NEONATAL CARE Postpartum and newborn care Obstetric fistula **WOMEN'S HEALTH CHILDHOOD ADOLESCENCE**

#### THE ESSENTIAL COMPONENTS OF THE CONTINUUM IN A WOMAN'S LIFE

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Prevention of sexually transmissible infections



Access to contraception



Prevention of parent-child HIV transmission



Protection against gender based violence

## PRINCIPLES OF INTERVENTION

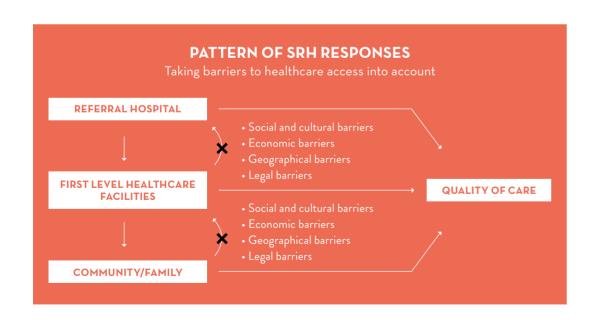
#### TO PROMOTE THE SRH CONTINUUM OF CARE

Doctors of the World works to provide comprehensive healthcare so that male and female teenagers, women and couples can have access to information, to quality services at each stage of their lives and can be given guidance when making their choices and decisions. This means ensuring that there is a continuum of care which extends from the community to the referral services, including the local health facilities - so providing an efficient referral system.

Enabling easier access to healthcare services and allowing people to exercise their right to health are essential elements for reinforcing the continuum of care. Four aspects have to be taken into consideration: legal and administrative barriers, geographic barriers (distances to services, absence of transportation means), financial barriers (direct and indirect costs), as well as social and cultural determinants (lack of decision making powers, no freedom of movement or no control by women over the family budget). Doctors of the World supports initiatives leading to the removal of these barriers in order to make the SRH services available and accessible. For example, in France, health and social mediation is one of the levers used to improve access to available healthcare. It helps also the stakeholders involved to improve their representation of the populations and to understand their difficulties.

## A COMMUNITY-BASED APPROACH AND WORKING WITH PARTNERS

The various SRH services need to be integrated within themselves as well as with the primary healthcare services. In this way, Doctors of the World intervenes to support and reinforce public healthcare systems as duty bearers towards the right to health. In order to ensure the continuum of care as a whole, it is necessary to mobilise all the various actors involved in the healthcare system and to connect them. Thus, Doctors of the World works in partnership with civil society organisations, community-based organisations, as well as health authorities. The active participation of communities is an essential element to implement projects adapted to meet needs, that are accessible, effective and that can bring about long-term change. Joint actions help to empower the population, in particular women, so that they can achieve greater control over their own health.





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## WHAT DO WE FIGHT FOR?

### PREVENTION AND MANAGEMENT OF UNWANTED PREGNANCIES

Too many young girls and women, especially in developing countries, have no control over their sex life. They have limited access to contraception and as a result, they are not able to prevent a pregnancy. Doctors of the World actively supports the right of all women to be able to use a safe and effective method of contraception in order to avoid an unwanted pregnancy and to have a safe and legal voluntary termination of pregnancy (VTOP), if need be.

The issue of unwanted pregnancies continues to encounter strong opposition internationally, with the result that only very slight and limited progress is being made. Yet, unwanted pregnancies represent a real public health challenge and are among the main factors relating to maternal morbidity and mortality. They are the cause of many abortions carried out under poor medical conditions or are the

causes of a disruption in the course of the lives of young girls or women who have not planned for their pregnancy.

We are committed to strengthen healthcare services and advocate to advance, on a permanent basis, the rights of women and teenage girls to have control over their bodies, in every country where MdM operates as well as in France. In those places where sexual and reproductive rights are not fully exercised, Doctors of the World works with civil society organisations and healthcare professionals to help remove the barriers that are hampering access to sexual education, safe and effective methods of contraception and the management of unwanted pregnancies. We work in particular with national and regional platforms in Latin America and Francophone Africa.

#### RESPONSE TO THE SRH NEEDS IN CRISIS SITUATIONS

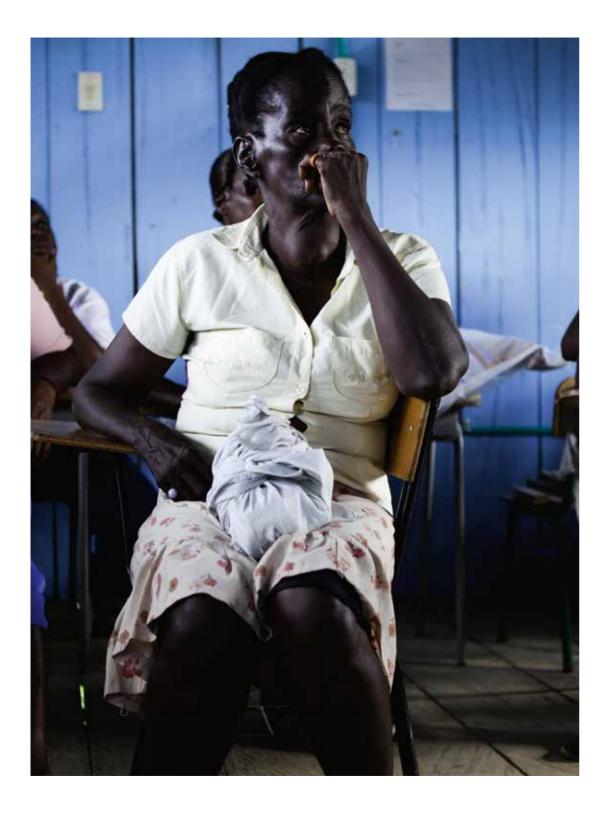
Crisis situations destabilise healthcare systems and often increase gender inequality, adding on to the difficulties that women face in gaining access to healthcare services and to treatment and care that meet their needs. As a result of greater economic, social and security problems, women and young girls are faced with situations where decision-making is even more difficult (in relation to their life choices, accessing healthcare services and exercising their rights).

Furthermore, the isolation that can occur when people are displaced worsens the vulnerabilities already being experienced. Overcrowding, the loss of livelihoods and lack of access to prevention means are all decisive factors that can lead to the higher prevalence of violence, transmission of sexually transmitted diseases, including HIV, and unwanted pregnancies. The feeling of impunity is also a significant factor that may explain the increase in the levels of violence.

As a medical organisation, Doctors of the World has a commitment to address the needs in SRH and to condemn the violence suffered by people in crisis situations. We provide a comprehensive and multidisciplinary response, together with the other actors involved. We intervene both in conflict zones (Syria, the Central African Republic, Ukraine, Colombia) and in the aftermath of natural disasters (Nepal). During these interventions, we improve the integration of minimum SRH services from the start of the humanitarian response and we alert the decision-makers to situations where basic human rights have been impeded (right to protection from physical injury, the right to safety, the right to health ...).



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#### PREVENTION OF CERVICAL CANCER

More than 270,000 women die every year as a result of cervical cancer; a disease resulting from a papillomavirus infection (HPV), which is transmitted sexually and can be avoided in the majority of cases by proper screening. More than 85% of deaths occur in low or middle income countries where access to screening and treatment is inadequate.

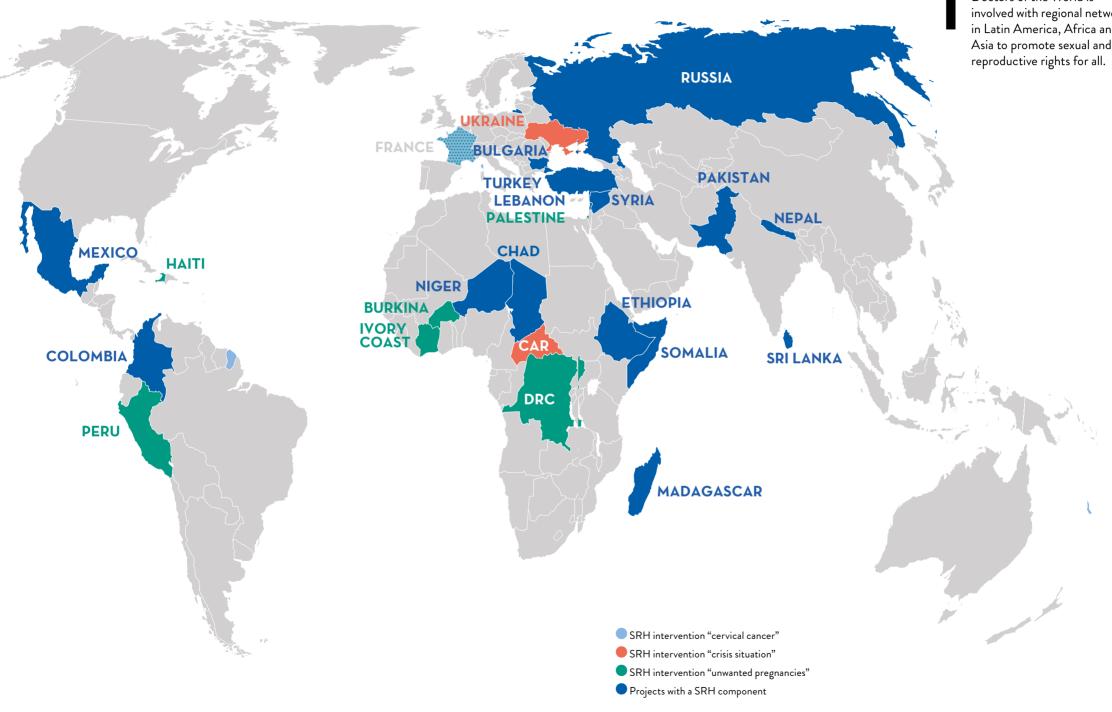
It is essential to prevent and detect pre-malignant lesions, by following up with the appropriate type of treatment as necessary in order to prevent the 530,000 new cervical cancer cases that are diagnosed each year, which does not include the cases that are not diagnosed.

Inexpensive and low-tech screening equipment is available. Using this could reduce the death toll caused by cervical cancer in developing countries, but there is a lack of resources to allow women to gain access to simple and effective prevention measures.

In France, Doctors of the World helps women who are vulnerable and at risk or suffering exclusion from gaining access to Pap smear screening by arranging information sessions and offering them a HPV self-swabbing kit. The aim of this process is to offer tools that make it easier to find information and have access to the front line of screening. In 2016, more attention will be given to the inclusion of this issue in our international projects, with a goal to promote women's access to preventative measures, regardless of their socioeconomic situation and their level of vulnerability at the time.

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#### PROJECTS' MAP



Doctors of the World is involved with regional networks in Latin America, Africa and Asia to promote sexual and



## DEMOCRATIC REPUBLIC OF THE CONGO

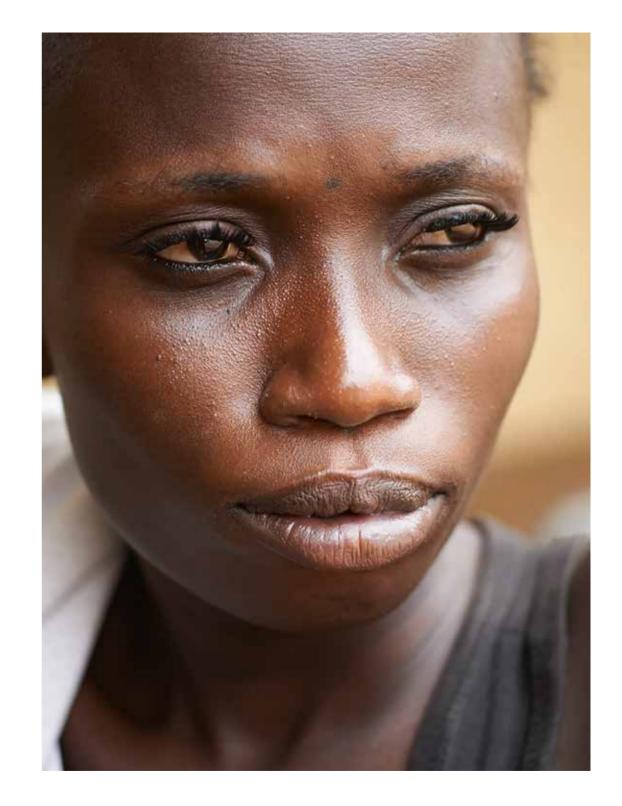
Facilitating access to contraception and to the sexual and reproductive health services for teenage girls in Kinshasa.

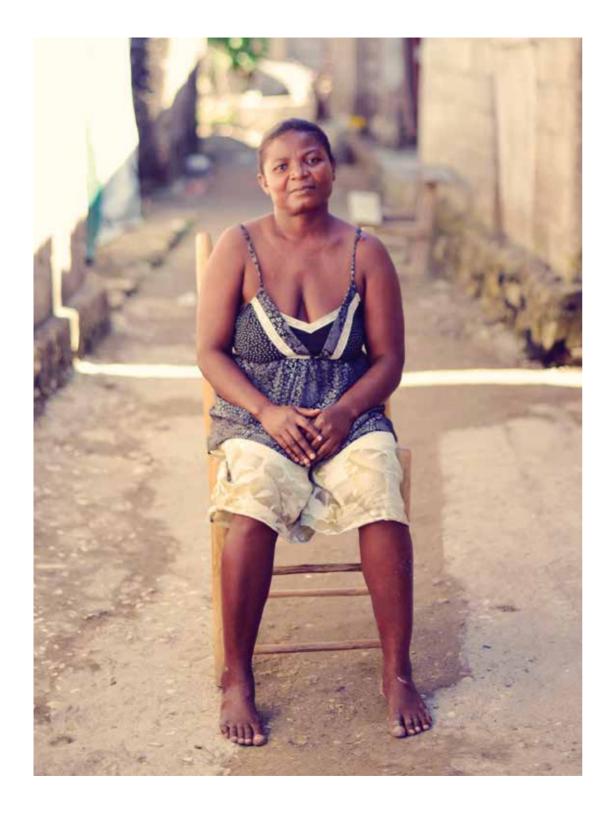
In DRC, more than 1 out of 4 teenage girls are pregnant before the age of nineteen. Amongst young girls between 15 and 19 years of age, it is estimated that 31% have an unmet need for contraceptives. Minors still cannot legally access contraceptives, and abortions are only permitted when the woman's life is in danger. In this situation, many young girls are excluded from their family, from their community or have to put an end to their education, as research undertaken by Doctors of the World in 2015 indicates.

In order to deal with this issue, Doctors of the World and its partners, together with the local and national authorities, operate in several Kinshasa healthcare districts with the aim of improving the sexual and reproductive health of young people from the age of 10 to 24. In cooperation with HPP-Congo, a national NGO, Doctors of the World organises and encourages the various community-based groups to deal with the issues relating to sexuality, to improve knowledge and to discuss with young people and families the practices relating to sexually transmitted diseases, including HIV, sexual violence and contraception. To that end, youth clubs and family action groups supported by HPP-Congo educators can facilitate discussion between members of the

community, in particular young girls and boys, within a safe space. They help to pass on various information on healthcare services and the current prevention methods. A referral system is provided to facilitate young people's access to SRH services in healthcare facilities that are located near the place where they live. We have also created friendly areas where young people can meet up within the healthcare facilities, to encourage relations and exchanges with the healthcare professionals. Doctors of the World works with health centres in order to ensure that there is quality healthcare available that meets the needs of young people and that helps give them access to healthcare without making a judgement on their situation. To help them do that, the healthcare professionals are trained in sexual and reproductive rights and in youthfriendly care and treatment, and the facilities are provided with supplies and equipment, etc.

Doctors of the World also supports the civil society in its efforts to help recognise the right to have free access to contraception for all and to open up the issue of unwanted pregnancies for public discussion. In this context, the organisation is an active member of national coalitions (such as the Permanent Multi-sector Technical Committee on the Repositioning of Family Planning in the Democratic Republic of the Congo), which are reviewing the current legislation and regulations.





#### HAITI

#### Improving access and quality of preventative and curative healthcare relating to unwanted pregnancies in the city of Port-au-Prince.

The Criminal Code of Haiti prohibits voluntary termination of pregnancies. Nevertheless, abortions are carried out on a massive scale, illegally and in terrible sanitary conditions. An investigation carried out in 2013¹ points out that abortion is the third most common cause of maternal mortality.

Doctors of the World has been working in Haiti for more than 25 years. Since 2014, the organisation has been working to help prevent and improve the care and treatment of unwanted pregnancies in Port au Prince. This project, which is being carried out in partnership with two organisations of the civil society in Haiti, is designed to promote access to information, to sexual education, to contraceptive methods for young people, women and couples, as well as improving the skills of the health workers so as to provide better post–abortion care and treatment.

The organisation POZ (Promoteurs objectif zéro sida), promoting the eradication of AIDS, has set up a hotline designed to help young people find information regarding sexuality, and in particular sexually transmitted diseases such as HIV/AIDS. Doctors of the World works with POZ to raise awareness among young people about the risks associated with unsafe abortions. Information about available healthcare services is also provided, to improve effective prevention and better management of unwanted pregnancies.

Doctors of the World also supports the SOFA organisation (Solidarité Des Femmes Haïtiennes - Haitian women solidarity) in its awareness raising activities among communities about sexual and reproductive rights and family planning services promotion. SOFA coordinates a network of civil society organisations, of which MdM is a member, which campaigns for safe abortions to be recognised as a public health problem, alongside with strong advocacy toward the recognition and respect of women's rights to make their own choices. MdM and its partners are mobilised around the reform of the Criminal Code initiated in 2016, which includes in its preliminary draft the decriminalisation of abortions.

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<sup>1.</sup> Mortality, morbidity and use of services investigation (Enquête Mortalité, morbidité et utilisation des services - EMMUS)

#### THE CENTRAL AFRICAN REPUBLIC

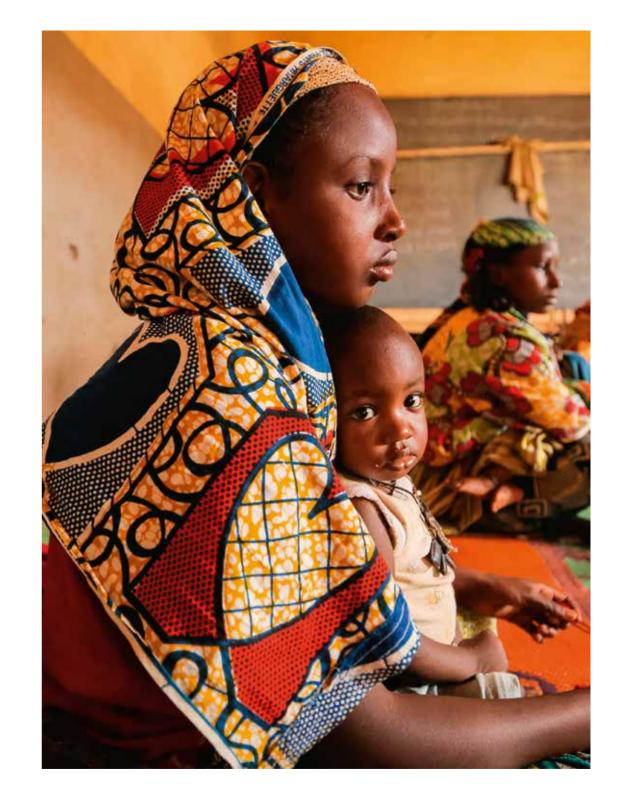
Improving access to sexual and reproductive health services for people in Bangui who are affected by the crisis.

Doctors of the World is operating in the Central African Republic, in an urban area (Bangui) and a rural area (Ombella M'Poko), in response to the crisis caused by the coup d'état in March 2013. Access to an already inadequate healthcare system has worsened with the crisis. As is the situation with other elements of primary healthcare, the SRH services do not meet the needs of the people, which has led to one of the highest maternal mortality rates in the world: 882 deaths per 100,000 live births (WHO, 2015). Starting as early as the first emergency response stage, the organisation has been including sexual and reproductive health services, in partnership with the local NGO ACABEF (Association Centrafricaine pour le Bien-Être et la Famille - Central African Organisation for well-being and family), which is affiliated with the IPPF (International Planned Parenthood Federation).

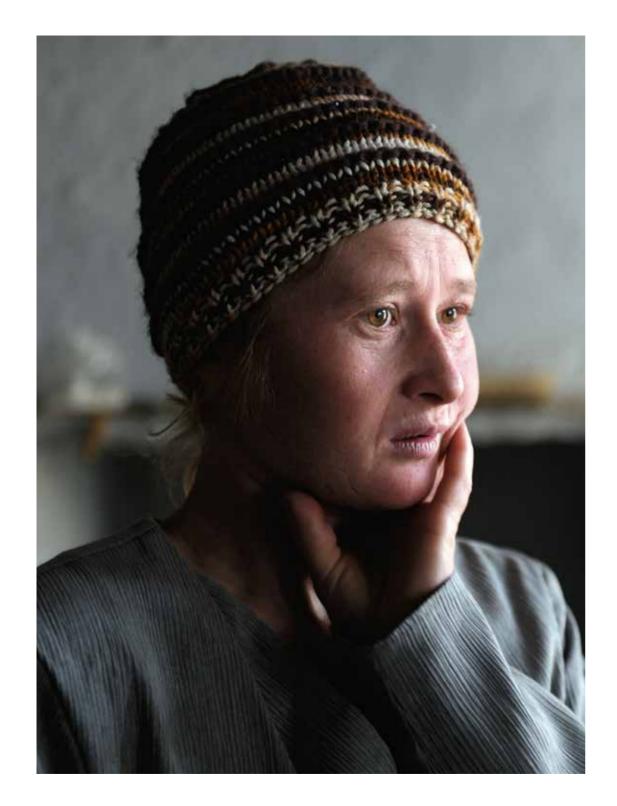
The MdM intervention aims to improve access to SRH services which are adapted to meet needs. To do so, MdM provides health centres with drugs and medical equipment, training and support of healthcare workers, along with maintaining a free referral system for obstetric emergencies and gender-based violence.

The socioeconomic dependency of women and girls within the Central African Republic society exposes them to rape, sexual assaults, forced marriages, sex slavery and other forms of gender-based violence. The presence of armed forces and groups increases the level of violence, which affects thousands of people. There are still reports of many cases of sexual violence and other types of gender-based violence amongst displaced people and amongst host communities. But the phenomenon is certainly underestimated, as people who have suffered violence do not always find it possible to use existing services.

So Doctors of the World's intervention is particularly focused on improving multi-sector care and the treatment of victims of physical and sexual violence in cooperation with health authorities, the ACABEF and the Association des femmes juristes (Association of Women Lawyers). The plan is to offer medical and psychosocial care and treatment which would help to reduce the complications associated with this violence but also to provide legal aid for the people who want it. Also, MdM works with community workers who help to provide the link up with the population, the people affected by the violence and the healthcare facilities. These community workers also make communities aware of the need to reduce the stigma that victims of violence suffer and the need to fight against the climate of impunity.



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#### UKRAINE

Improving access to the medical and psychosocial care and treatment of people who have suffered gender-based violence.

Doctors of the World has been operating since June 2015 in the eastern part of the country (Oblast de Louhanski) to re-establish access to primary healthcare for people affected by the conflict. The organisation helps to improve access to medical and psychological care and treatment for people who have suffered gender-based violence. Many cases of violence that are associated with the conflict, have been reported by United Nations agencies, the NGOs and local organisations, especially in heavy militarised areas. So there is a significant increase in domestic violence and sexual violence. While some data related to gender-based violence in Ukraine is starting to be published, the figures available are significantly underestimated. In fact, there are many victims who do not report this violence, whether because they are not aware of the services that are available or because they are not aware of the importance of prevention treatment, for fear of retribution from the person who has abused them (especially when the violence has been committed by the military) or because there is no money available to pay for treatment or for transport to the health facility.

While Ukraine has a rate of prevalence of HIV, which is one of the highest in Europe, access to medical care and treatment and especially to treatment that helps to prevent the transmission of HIV is crucial to victims. On the other hand, many people who live in areas of conflict have witnessed the violence, have suffered or taken part in this violence and have been traumatised. Without suitable healthcare, these traumatic experiences may have a medium or long-term effect on the life of the individual, may threaten whole generations and may continue the cycle of violence. In view of this situation Doctors of the World supports the local healthcare facilities by training the health professionals and by using mobile clinics to identify victims of gender-based violence and to provide them with psychosocial and medical care and treatment. The organisation intervenes at community level, raising awareness of local people about SRH and gender-based violence with a goal of preventing this violence and to increasing the use of existing services. We are also carrying out work to identify the organisations working on the issue of gender-based violence (legal, medical, welfare and social services) in order to improve coordination and offer a holistic response to the needs of the victims.

#### **FRANCE**

Improving access to cervical cancer screening by the use of HPV self-swabbing amongst vulnerable people.

Every year in France 3,000 women are diagnosed with cervical cancer and more than 1,000 die of it; that is the equivalent of three deaths per day¹. Cervical cancer is the cancer that is most associated with:

- Territorial inequality amongst the metropolitan regions and even more so in the case of the overseas departments;
- Socioeconomic inequality.

Currently the most advanced examination is Pap smear screening for cervical cancer which helps to detect any existing pre-cancerous and cancerous lesions. Despite an increasing coverage rate, it has to be said that there are marked social disparities when this examination is carried out. The women with Complementary Universal Health Insurance (CMUc - Couverture maladie universelle) or State Medical Aid undergo significantly less screening than other women. According to an investigation carried out amongst vulnerable people that were seen in Doctors of the World Healthcare, Advice and Referral Clinics in 2013<sup>2</sup>, nearly 67% of women aged between 25 and 65 years of age have not had this examination. The persistence of a high risk papillomavirus infection is the essential factor for the emergence of cervical cancer. Without

access to screening there is a major risk of dying as a result of invasive cancer. The obstacles to pap smear screening are many and have to do, most often, with not being aware of the existence of screening and of the advantages of screening, the fear of examinations or of the results of these examinations, the financial and social obstacles, and the language barrier. Other obstacles in the healthcare system include some doctors having little interest in performing pap smear screening, the lack of investment in providing information and giving advice to women, the doctor/patient relationship (discretion...).

Also, several tests on HPV self-swabbing have already been done in France. Self-swabbing is a technique that helps women carry out the test themselves at home and to send it to a laboratory for analysis. This approach seems to be well accepted and satisfactory.

Doctors of the World is proposing to set up sexual health prevention consultations dealing with cervical cancer for the women they meet in its projects. The goal is to provide suitable advice and to make it easier for vulnerable women to access screening and to provide them with close support and a medical follow-up. The testing will be carried out in several towns in France (Nantes, Saint-Denis, Lyon, Paris) and in several kinds of projects, at a fixed location or in mobile units, dealing with people working as sex workers, living in slums and/or migrants.



1. Duport.N. Données épidémiologiques sur le cancer du col de l'uterus. Etat des connaissances. InVS, 2008, 31 p.

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<sup>2.</sup> Enquête contraception et prévention des cancers féminins chez les femmes en situation de précarité en France, Doctors of the World. Mars 2013

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In 1994, the Cairo Conference marked a decisive turning point by introducing and defining the concept of sexual and reproductive health and rights. We are measuring the progress achieved since then but we remain committed because of the fragility of these achievements and the challenges that are still to be faced.

Sexual and reproductive health is a priority of Doctors of the World and we are fighting for the right of women to make decisions about their sexuality, their health and their lives everywhere throughout the world. The issue of voluntary termination of pregnancy especially is still a very taboo subject and there is fierce opposition to it in international forums. But universal access to SRH healthcare and the full exercise of sexual and reproductive rights are the prerequisites for sustainable development and progress towards gender equality.

Dr. Françoise Sivignon President

