



The SHE Network Advocates for the Continuous and Unhampered Delivery of Reproductive Health Services During the COVID-19 ECQ

The Sexual Health and Empowerment (SHE) network is advocating for the continued and unhampered delivery of reproductive health (RH) services during the enhanced community quarantine (ECQ). The provision of RH services is life-saving and should be made integral and essential to the government's COVID-19 response.

The right to reproductive health applies to all people at all times. As such, ensuring the unhampered delivery of RH services contributes to preventing unwanted or unplanned pregnancies, preventable maternal and infant deaths, and the spread of sexually transmitted infections, including HIV/AIDS.¹ Implementing this call to action will also go a long way in supporting our already stretched healthcare system and will enable our health workers and frontliners to focus their efforts in caring for patients with COVID-19.

Even before COVID-19, the state of sexual and reproductive health (SRH) of women and girls was already a grave public health challenge in the Philippines: according to the 2017 NDHS survey, one in five girls is a mother by age 19, two thirds of women are not using any form of birth control. More than a third of women's pregnancies in the country are unplanned or unwanted;² and 24 percent of women with little or no education have unmet need for family planning, leading to a lot of unplanned and even forced pregnancies.³ The number of rapes, sexual and physical violence and child abuse cases remain inexcusably high.⁴ The Philippines is the only country in Southeast Asia where teenage pregnancy are not falling according to UNFPA figures.⁵ Approximately 196,000 girls and young women between the ages of 15 and 19 years old get pregnant each year⁶ which has led to Commission on Population and Development (PopCom) to declare a "national social emergency" in 2019.⁷

Health emergencies, like the COVID-19 crisis, have a disproportionate effect on the poorest and most vulnerable, particularly women and children. While the imposition of the ECQ serves to contain the spread of the virus, it may also lead to the increase the spread and surge of COVID-19's negative consequences on women and girls. Mandatory home isolation reinforces the conditions that give rise to a host of violations against an individual's sexual and reproductive health and rights. These are compounded by gendered expectations that women should be the primary carers for their families, the sick or for the quarantined in the absence of enough hospital beds and access to critical medical and social services, which increases risk of exposure to the virus and less time to care for their own health.

Women may have to bear the consequences of unintended and forced pregnancies and its inevitable economic, social, and physical consequences. Any recovery prospects will be that much more difficult. Sexual abuse perpetrators and survivors are forced to stay in a confined space resulting in severe psycho-social trauma and even physical violence.

¹ WHO. "The Sustainable Development Goals, Violence and Women's and Children's Health." <https://doi.org/10.2471/BLT.16.172205> <Last accessed: 29 April 2020>

² Philippine Statistics Authority (PSA), "One in Three Births in the Philippines Is Unplanned," 2010. <https://psa.gov.ph/article/one-three-births-philippines-unplanned> <Last accessed: 29 April 2020>

³ PSA, 2017 National Demographic Health Survey Key Indicators Report. https://pdf.usaid.gov/pdf_docs/PBAAJ317.pdf <Last accessed: 29 April 2020>

⁴ PSA. "2019 Philippine Statistical Yearbook." Philippine Statistics Authority, October 2019. https://psa.gov.ph/sites/default/files/2019%20PSY_as%20of%2010March20revised_0.pdf <Last accessed: 29 April 2020>

⁵ UNFPA Asia & the Pacific. "Maternal Mortality in Asia-Pacific - 5 Key Facts." UNFPA Asia & the Pacific, May 4, 2018. <https://asiapacific.unfpa.org/en/news/maternal-mortality-asia-pacific-5-key-facts> <Last accessed: 29 April 2020>

⁶ Paunan, Jerome Carlo R. "The Risks of Teenage Pregnancy." Philippine Information Agency, July 2019. <https://pia.gov.ph/features/articles/1026925> <Last accessed: 29 April 2020>

⁷ Commission on Population and Development. "Commission on Population and Development." POPCOM: Number of Girls 10-14 y/o Who Give Birth Continue to Rise, 2019. <http://popcom.gov.ph/popcom-number-of-girls-10-14-y-o-who-give-birth-continue-to-rise/> <Last accessed: 29 April 2020>

Even before the COVID-19 crisis, one in four women have experienced spousal violence in the Philippines.⁸ Now, with COVID-19 measures hampering mobility and disrupting access to courts and other protection mechanisms, cases of gender-based violence are expected to rise further. Young women and men might also resort to unhealthy and unsafe sexual practices since they have no access to age-appropriate sexuality education, further driving up adolescent fertility rates.

To stop the worsening effects of COVID-19 on women and girl's reproductive health, the SHE network is urgently calling on both national and local health decisionmakers and policymakers, including the COVID-19 National Task Force; local chief executives; emergency managers in health and other sectors, and other actors to urgently implement the following actions:

1. Include reproductive health commodities, such as menstrual health items, oral contraceptives, condoms, spermicide, and lubrication, in relief packages and dignity kits distributed during and immediately after the ECQ.
2. Ensure the availability of comprehensive sexual and reproductive health services during the ECQ, such as emergency contraception and continuity of post and pre-natal care, which should be easily accessed by women and girls in a timely manner.
3. Ensure that reproductive health clinics are able to operate and continue to offer services; and that communities are fully informed where to go for their needs.
4. Strengthen gender-based violence referral pathways, including hotlines, social protection, and community care services, to enable the timely reporting of gender-based violence and the availability of safe houses.
5. Empower young people to access sexual and reproductive health services in times of crisis through continuous flow of SRHR information to reduce unsafe and unhealthy sexual practices.
6. Ensure psychosocial support is provided to all affected individuals, including women who represent 70 percent of the health and social workforce combatting COVID-19.
7. Incorporate a gender perspective into plans and strategies to enable response operations reach underserved and at-risk individuals. Where plans and strategies have already been developed, ensure that information and interventions do not reinforce discrimination. Rather, these should respond adequately to the different needs of women and girls, LGBTIQ+ persons, homeless and displaced, refugees, migrants, asylum seekers, indigenous peoples, persons with disabilities, and other groups who are most marginalized and excluded.

SHE shall work with our Local Government Unit (LGU) and Rural Health Unit (RHU) partners to ensure the continuous flow and prioritization of reproductive health services that will keep our communities, especially women and girls, safe and healthy amidst these difficult times.

#YesSHECan because #SHEmatters.

Philippines, 4 May 2020.

The Sexual Health and Empowerment (SHE) Project is a five-year project (from 2018 to 2023) funded by Global Affairs Canada (GAC). It works in six disadvantaged and underserved regions of the Philippines – Bicol, Eastern Visayas, the Bangsamoro Autonomous Region of Muslim Mindanao (BARMM), Zamboanga Peninsula, Northern Mindanao and Caraga – to empower women and girls to secure their sexual and reproductive health and rights. The project is being implemented with eleven partners, namely: Al-Mujadillah Development Foundation (AMDF), United Youth of the Philippines Women (UnYPhil-Women), Mayon Integrated Development Alternatives and Services (MIDAS), Family Planning Organization of the Philippines (FPOP), Pambansang Koalisyon ng Kababaihan sa Kanayunan (PKKK), Sibog Katawhan Alang sa Paglambo (SIKAP), University of the Philippines Women and Gender Studies (UPCWGS), Women's Global Network for Reproductive Rights (WGNRR), Davao Medical School Foundation-Institute of Primary Health Care (DMSF-IPHC), FriendlyCare Foundation, and Jhpiego, the technical service delivery partner of the SHE Project.

⁸ Philippine Statistics Authority, "One In Four Women Have Ever Experienced Spousal Violence (Preliminary Results from the 2017 National Demographic and Health Survey)." Philippine Statistics Authority, March 26, 2018. <https://psa.gov.ph/content/one-four-women-have-ever-experienced-spousal-violence-preliminary-results-2017-national> <Last accessed: 29 April 2020>