

WHY WE NEED TO AGT NOW

We should all be able to make our own decisions about our body, our sexual life, our health.

Sexual and reproductive health and rights (SRHR) are fundamental aspects of human life and health. They are an essential condition for women's empowerment and gender equality, and a key factor in curbing maternal mortality worldwide. However, they remain particularly overlooked by public health policies and are under severe threat in many countries regardless of their level of development.

In the face of growing conservatism, social and moral stigmatization, and gender-based violence, our fight – together with feminist, humanitarian and health organizations and advocates - remains essential to protect the freedom of every person to have control over their body and to decide on their sexuality and their health, without danger, violence, or fear of unintended pregnancy or sexually transmitted infections (STIs).

340.000 PEOPLE

die every year from

new HIV infections are

recorded worldwide each year

cervical cancer

1.5 MILLION



257 MILLION WOMEN

who want to avoid pregnancy **are** not using modern contraceptives



39.000 DEATHS every year due to unsafe abortions





1/3 OF COUNTRIES

worldwide criminalize same-sex sexual relationships

WHO WE ARE

Médecins du Monde (MdM) – Doctors of the World is an international health organization that has been fighting for over 40 years for a fair and universal health system. We currently work in 35 countries across all continents. One of our priorities is to defend the right to health and access to sexual and reproductive health services for all.

As an independent organization, Médecins du Monde is engaged in action beyond the provision of medical care. We draw on our field experience to expose situations in which human dignity and human rights are under attack and advocate for social justice. We work alongside communities seeking social change and support them in their struggle to improve their situation.



ALL OUR SRHR PROJECTS ARE BASED ON 3 KEY PRINCIPLES:





so that all individuals have access to sexual and reproductive health services at all stages of their lives in order to fully experience and understand their sexuality, receive support in their choices and have their needs met.

2. To strengthen the capacity of service users in exercising their sexual and reproductive rights

so they are empowered and make informed decisions about their bodies and their lives.

3. To participate in social change and contribute to reforming public policies

through advocacy in alliance with civil society and community organizations, feminist movements and non-governmental and institutional organizations.





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Sexual and reproductive health is a state of physical, emotional, mental and social *well-being* in relation to all aspects of sexuality and reproduction, not merely the absence of disease, dysfunction or infirmity.

Therefore, **a positive approach to sexuality** and reproduction should recognize the part played by pleasurable sexual relationships, trust and communication in promoting selfesteem and overall well-being.

All individuals have a right to make decisions governing their bodies and to access services that support that right.

SRHR definition of the Guttmacher-Lancet Commission, adopted by MdM

WHAT WE FIGHT FOR

Médecins du Monde is fighting for SRHR by **PRIORITIZING 3 OFTEN NEGLECTED ASPECTS THAT REPRESENT BREAKPOINTS IN THE SRHR CONTINUUM OF CARE:**



"Dear parents, don't wait for a problem !

Talk to us about sexuality!"

1. Prevention and caring for unintended pregnancies through access to comprehensive sexuality education, contraception and



2. Preventing and treating

safe abortion care.

cervical cancer through vaccination, screening and early treatment of precancerous lesions.



Chers parents, n'attendez pas que tout soit gâté l Parlez de sexualité dès

maintenant avec nous (*

3. Responding to SRH needs in humanitarian settings, including preventing gender-based violence (GBV)

and caring for survivors

MdM is also involved in **projects dedicated** to harm reduction linked to sex work and advocates for the decriminalization of sex work.

Since 2019, MdM has adopted a **gender policy**, reaffirming that gender justice is part of the defense of human rights, especially women's and LGBTQIA+ people's rights. We defend an intersectional gender approach. We are committed to promoting a common culture that is sensitive to gender issues in all our actions and project and to fight gender inequalities and discrimination in health.

We also take part in global advocacy for gender mainstreaming into humanitarian settings, pushing for feminist foreign policies. This includes our active participation in the Generation Equality Forum and its coalition on SRHR.

PACKAGE OF ESSENTIAL SRHR SERVICES





Too many people, especially young girls and women, have no control over their sex life. They often have limited if no access to comprehensive sex education, modern contraception, and safe abortion. As a result, they are unable to prevent an unintended pregnancy. In many contexts where abortion is not legal, this leads

WE PARTICULARLY ADVOCATE FOR:



1. Comprehensive sexuality education, with a positive approach to sexuality that is not merely focused on fighting sexually transmitted infections.



2. Universal access to safe and effective methods of contraception, free of charge for everyone.



More than 340,000 women die every year from cervical cancer. 90% of deaths occur in low- and middle-income countries. Yet, cervical cancer – caused by a papillomavirus infection which is mainly transmitted sexually – can be avoided in most cases through vaccination, proper screening (inexpensive and low-tech screening equipment does exist) and the treatment of precancerous lesions. We take part in the global call for action to eliminate cervical cancer launched by the WHO, whose target is 90% of girls vaccinated for HPV by the age of 15, 70% of women screened, 90% of women with precancerous lesions treated and 90% of women with invasive cancer managed.

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Ultimately, the story of unintended pregnancy reflects the way that societies do and do not value women and girls

Diene Keita, Deputy Executive Director of UNFPA

to unsafe abortions, causing more than 7 million hospitalizations each year. Unsafe abortion is one of the leading causes of maternal mortality. Médecins du Monde works with civil society organizations and healthcare professionals to remove the barriers that are hampering access to key services.

3. Full decriminalization

of abortion, including the

effective application of the

Maputo Protocol in Africa.

Within this framework, **MÉDECINS DU MONDE SPECIFICALLY WORKS WITH THE MINISTRIES OF** HEALTH AND LOCAL PARTNERS TO:





2. Ensure access to vaccination for young girls and boys.

1. Integrate HPV screening

with self-sampling to provide

women with a wider range of

empowerment purposes, thus impacting their adherence to

and completion of treatment,

and to increase screening

coverage in remote areas.

sampling techniques for



3. Develop organized screening at community level to increase screening coverage and reduce barriers to healthcare access.



4. Call on governments and donors on the sharing of the HPV diagnostic production technologies held by a few laboratories, and to identify and finance alternative production platforms.

3. RESPONDING TO THE SRHR NEEDS IN CRISIS SETTINGS INCLUDING PREVENTING GENDER-BASED VIOLENCE AND CARING FOR SURVIVORS

Crisis situations destabilize healthcare systems and increase gender inequality, adding to the difficulties that women and sexual and gender minorities face in gaining access to healthcare services that meet their needs. Yet, more than 70% of women and girls suffer gender-based violence in countries affected by a crisis. The risk of maternal death is 90 times higher than in developed countries, due to the collapse of their healthcare systems. Yet, sexual and reproductive health services are often overlooked in crises responses, or considered as secondary although they are fundamental. Médecins du Monde intervenes both in conflict zones (including in Ukraine, Yemen, Syria, the Central African Republic and Burkina Faso) and in the aftermath of natural disasters.

During these interventions, **TOGETHER WITH THE OTHER PLAYERS INVOLVED, WE PROVIDE AND ADVOCATE FOR:**



1. The conduction of rapid gender analysis from the very beginning of a crisis.

2. Promote the implementation of specialized services in prevention and response to gender-based violence from the onset of the crisis.



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4. The systematic introduction of the Minimal Initial Service Package (MISP) for sexual and reproductive health, with a focus on contraception and abortion care.

HIGHLIGHTS



ENABLING ACCESS TO ABORTION IN DEMOCRATIC REPUBLIC OF THE CONGO

In Kinshasa, only 20.9% of women use modern contraceptive methods and 3 out of 5 pregnancies are unintended. The vast majority of these end in clandestine abortions. Unsafe abortions are the second cause of maternal mortality in the city. Since November 2018, **in collaboration with the Congolese Ministry of Health**,

MdM has developed a project providing a response to abortion requests. A referral network was created around three main actors: community workers, health centers and pharmacists. Through this, people wishing to have an abortion receive quality, non-judgmental information on selfmanaged abortion, including how to get the abortion drugs and how to use them. If necessary, post-abortion care is provided in each partner health facility. Through this harm reduction approach, 1800 women were able to access a safe abortion in 2022. The country has now liberalized its abortion legislation, implementing the Maputo Protocol.



MORE SRHR IN THE HUMANITARIAN RESPONSE

SRHR and especially prevention and care of gender-based violence are still neglected components in the humanitarian ecosystem, both politically and operationally Thus, **MdM takes part in many initiatives aiming at integrating SRHR into humanitarian responses.** This includes contributing to the Inter-Agency Working

Group on Reproductive Health in Crises which created the MISP. We are also part of the Call to Action on Protection from Gender-Based Violence in Emergencies, a multi-stakeholder initiative launched in 2013 to transform the way gender-based violence is addressed in humanitarian emergencies. In 2022, we created an inter-NGO group aimed at influencing the French humanitarian strategy, to push for gender and SRHR inclusion.



SUPPORTING FEMINIST ADVOCATES FOR THE LEGALIZATION OF AND ACCESS TO ABORTION IN COLOMBIA

In Colombia, Médecins du Monde works together with feminist advocates to promote access to safe abortion. We participated in the Causa Justa Coalition that is very active in advocating for the legalization of abortion.**Through technical and financial**

support, we contribute to tackling the legal barriers that hamper access to safe abortion for all.



FACILITATING CERVICAL CANCER SCREENING IN BURKINA FASO AND IVORY COAST

In Burkina Faso and Ivory Coast, cervical cancer is the second most common cancer in women. MdM is implementing projects in these countries, tailored to the contexts. In Burkina Faso, our interventions are based on **community mobilization, capacitybuilding in health facilities (over 250 professionals trained), and advocacy** for

greater awareness of the challenges of managing precancerous lesions and cervical cancer. Following an opportunistic model, meaning that screening is offered during consultations at health facilities, around 16,000 women were screened between 2019 and 2022. Nearly 20% tested positivef or HPV. By 2022, 100% of women eligible for thermocoagulation had been treated.

In Ivory Coast, together with the Ministry of Health, we developed a model based on **organized HPV screening carried out as part of health campaigns.** Within 6 months, 4,000 people were screened via home self-sampling. The project also promoted the use of thermocoagulation in the treatment of pre-cancerous lesions, which is more suitable than cryotherapy. People who tested HPV-positive were also tested for HIV. 10% of HPV-positive women were newly diagnosed with HIV and received treatment. HPV screening can also be a key tool to reduce HIV epidemics by reaching populations who do not usually test for HIV. Complementary prevention and advocacy initiatives are carried out to change standards and protocols in the fight against cervical cancer.



THE JASMINE PROJECT: INNOVATION AND EMPOWERMENT TO REDUCE GENDER-BASED VIOLENCE AGAINST SEX WORKERS IN FRANCE

Sex workers are particularly exposed to violence. This is not inherent to sex work but varies depending on the individual's situation, the way they work, and, above all, on the context in which they work, including the legal context, local policies, and the

perception of sex work in wider society. In this context, Médecins du Monde and community partners developed Jasmine, a project to fight GBV against sex workers. We put in place an **alert and information system that aims to improve sex workers' working conditions and to provide tools to protect them against violence.** The website allows users to report problematic clients and abusers and to consult alerts shared by others. It also provides information on rights, health and self-defense techniques, as well as where to find a nearby crisis center. The application allows sex workers to check a phone number in real time, if they have doubts about a client. The website and the app are available in 10 languages and are free of charge.



PROMOTING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS OF PRECARIOUS PEOPLE IN FRANCE

In France, people living in precarious conditions face considerable difficulties in accessing SRHR services. As a result of language, administrative and cost barriers

as well as stigma and repression, they are at increased risk of violence, unintended pregnancies and infections. Nine out of ten women of childbearing age we meet in our health centers do not use any contraception and have never had a vaginal smear. More than 70% of the people we meet do not know their serological status for HIV or hepatitis B and C. In this context, Médecins du Monde has integrated activities to improve access to SRHR for people living in precarious conditions in 30 of its projects, at both fixed sites and outreach locations. These activities comprise **dedicated prevention consultation, collective support groups, SRHR outreach in squats and slums, distribution of harm reduction material and the systematic use of professional translators.** We are also actively involved in the National Sexual Health Strategy, working with the Ministry of Health to ensure that precarious people are not marginalised.

EXPECTED IMPACT

ONCE SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS ARE RESPECTED:

→ 2/3 FEWER UNINTENDED PREGNANCIES and unsafe abortions will occur

→ Women and people concerned will **NO LONGER DIE** OF CERVICAL CANCER

1/3 FEWER MATERNAL DEATHS will occur

→ Women, girls and non-binary people will have a greater chance to pursue their EDUCATION and seize their wished-for opportunities

→ Men and boys will be more **RESPONSIBLE** for their own health and able to express their emotions

ALL OUR PROGRAMS AND ACTIONS ARE BASED ON THE FRAMEWORK PROVIDED BY THE SUSTAINABLE DEVELOPMENT GOALS





Created in 2014, the Foundation of Médecins du Monde aims at supporting women-led civil society organizations in their fight for the health and rights of the most vulnerable women - in France and internationally.

WITH THE SUPPORT OF



JOIN THE MOVEMENT

CONTACT Private Partnerships Department – Médecins du Monde France financementsprives@medecinsdumonde.net



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We can't accept women die because healthcare is criminalized. Abortion care is healthcare. As a health and feminist organization, we must ensure universal access to safe abortion care.



Dr Florence Rigal, President of Médecins du Monde-France