

***NGO Oral Statement***

**Statement Title:**

**FULFILLING WOMEN'S SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS DURING COVID-19.**

Thank you Mdm President.

I am Shamala Chandrasekaran, from the Asian-Pacific Resource and Research Centre for Women (ARROW) and I am making this statement on behalf of 32 civil society organisations (CSOs).

Today, almost everyone from all around the globe is affected by the COVID-19 pandemic but the gendered impacts experienced by women and girls especially by the marginalised and vulnerable, including but not limited to the poor, lesser educated, from rural and hard-to-reach areas, with disability, of lower caste, indigenous, ethnic minorities, diverse sexual orientation and gender identities, those suffered by humanitarian crisis resulting from conflict and climate change, stateless, and undocumented migrants who are disproportionately affected during this pandemic is undeniable, unquestionable.

The crisis has visibly deepened the multidimensional inequalities, reinforced the longstanding gender inequality and exacerbated the scale and severity of the impact, further disrupting the already challenged access to health including sexual and reproductive health services, education, basic food security and nutrition for women and girls in most parts of the world. The crisis has further increased the risk of sexual and gender-based violence, maternal mortality, early and unintended pregnancy, unsafe abortion, female genital mutilation/cutting, human trafficking, and child, early and forced marriage, and restricted access and availability of a range of essential sexual and reproductive health services including contraceptives, safe abortion, and maternal, new-born and child health services. Women are affected by the increased burden of unpaid care work and many women especially those who work in the informal sector experienced loss of employment and livelihoods.

While the disproportionate impact of the crisis on women and girls are undeniable, we must be cognisant that it is not irrevocable and it was never unavoidable. The time to act is now – to act fast for a robust, inclusive and sustained response placing the human rights of the most vulnerable including the marginalised women and girls in the centre of the response and interventions during times of crisis such as this.

With the shift in priorities for COVID-19 response, human rights including health and wellbeing of women and girls should not be compromised! We urge the Member States to:

- Uphold commitments and carry out human rights and constitutional obligations to adequately resource and ensure that all women and girls, in all of their diversity have safe, timely and uninterrupted access to full range of health information, supplies and services including sexual and reproductive health information and services such as access to contraceptives, safe abortion, respectful maternal care and new-born and child health, sexually transmitted infections and reproductive tract infections, anti-retroviral therapy (ART) and reproductive cancer prevention and treatment services which are essential and life-saving health services in the context of COVID-19.

- Place the most vulnerable and marginalised women and girls at the center of all crisis and disaster management policies and incorporate provision of sexual and reproductive health information and services into the national crisis and disaster management policies, budget and programmes.
- Ensure online education includes comprehensive sexuality education in contexts where schools remain closed.
- Ensure quarantine facilities are safe for women and girls and address the issue of SRHR especially menstrual hygiene management and is disable friendly.
- Recognise that women play a critical role in COVID-19 crisis management and mitigation and include them equally and meaningfully in the designing, implementation, financing and monitoring of the crisis response, ensuring that the response at the local, national, regional and international levels include gender and human rights perspectives.
- Provide adequate financial, human and infrastructural resources towards implementing health policies, which ensures the highest attainable standard of physical and mental health for all including their sexual and reproductive health and rights.
- Improve public investment in health and develop social protection systems including universal access to health and health strategies to provide comprehensive sexual and reproductive rights for all women & girls, especially the marginalised and vulnerable groups.
- Lastly, the investment should also be made on disaggregated data for monitoring and strengthening policies and programmes especially for decision making in all aspects of response and recovery during a crisis.

Thank you.

---

**This statement is endorsed by:**

1. Aahung
2. Bandhu Social Welfare Society
3. Bangladesh Legal Aid and Services Trust (BLAST)
4. Bargad
5. Beyond Beijing Committee (BBC) Nepal
6. Blue Diamond Society (BDS)
7. Blue Veins
8. BRAC Education
9. BRAC JPG
10. Channan Development Association (CDA)
11. Family Planning Association of Bangladesh (FPAB)
12. Federation of Reproductive Health Associations, Malaysia (FRHAM)
13. Federation of Sexual and Gender Minorities Nepal (FSGMN)
14. Forum for Dignity Initiatives-FDI
15. Idara-e-Taleem-O-Aaghahi (ITA)
16. Independent Youth Forum Papua
17. Indus Resource Centre (IRC)
18. Kamana Foundation Nepal
19. LOOM Nepal
20. Naripokkho, Bangladesh
21. Oboyob, Bangladesh

22. Pamflet Generasi
23. Rehnuma- Family Planning Association of Pakistan (R-FPAP)
24. RHSTEP, Bangladesh
25. SERAC, Bangladesh
26. The YP Foundation (TYPF)
27. UBR Alliance, Bangladesh
28. Visible Impact
29. Youth Advocacy Network (YAN)
30. Youth Development Center
31. YUWA
32. Yuwalaya