Sexual and Reproductive Health and Rights for All: Tracking Progress through SDG 5.6

Mengjia Liang Technical Division <u>United Nations Population Fund</u>



### GOAL 5: ACHIEVE GENDER EQUALITY AND EMPOWER ALL WOMEN AND GIRLS.

**TARGET 5.6:** Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences

INDICATOR 5.6.1: Proportion of women aged 15-49 who make their own informed decisions regarding sexual relations, contraceptive use and reproductive health care. INDICATOR 5.6.2: Number of countries with laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education.





Tracking women's decision-making for sexual and reproductive health and reproductive rights

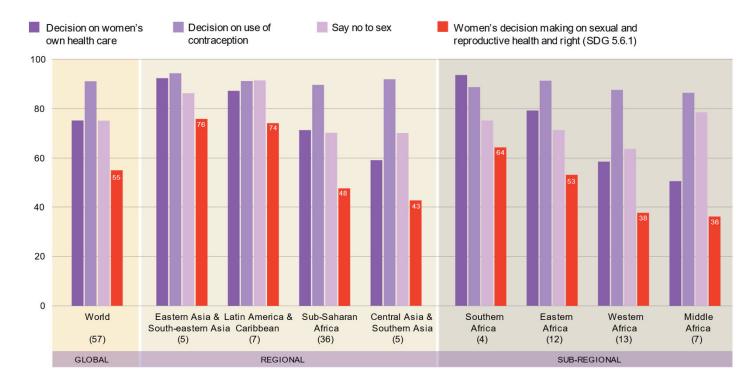
GOAL INDICATOR 5.6.1

### **Measurement of SDG Indicator 5.6.1**

Only women who assert that they make their own decisions in three key areas are considered to have autonomy in reproductive health decision-making and empowered to exercise their reproductive rights. Three questions are used in this composite indicator to assess women's autonomy:

Reproductive health care	Contraceptive use	Sexual relations
Who usually makes decisions about health care for yourself?	Who usually makes the decision on whether or not you should use contraception?	Can you say no to your husband/partner if you do not want to have sexual intercourse?
<ul> <li>You</li> <li>Your husband/partner</li> <li>You and your husband/partner jointly</li> <li>Someone else</li> </ul>	<ul> <li>Mainly respondent</li> <li>Mainly husband/partner</li> <li>Joint decision</li> <li>Other, specify</li> </ul>	<ul> <li>Yes</li> <li>No</li> <li>Depends/not sure</li> </ul>

Proportion of women aged 15-49 years who make their own decisions regarding sexual and reproductive health and rights (including deciding on their own health care, deciding on the use of contraception; and can say no to sex); by SDG region, most recent data 2007-2018.



Notes: The number of countries with comparable survey data included in the regional aggregations is presented in parentheses.

Source: United Nations Population Fund, global databases, 2020. Based on the Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) and other national surveys conducted in the 2007-2018 period.





Proportion of women aged 15-49 years who make their own decisions regarding sexual and reproductive health and rights (including deciding on their own health care, deciding on the use of contraception; and can say no to sex); by country, most recent data 2007-2018.

**Source:** United Nations Population Fund, global databases, 2020. Based on the Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) and other national surveys conducted in the 2007-2018 period.

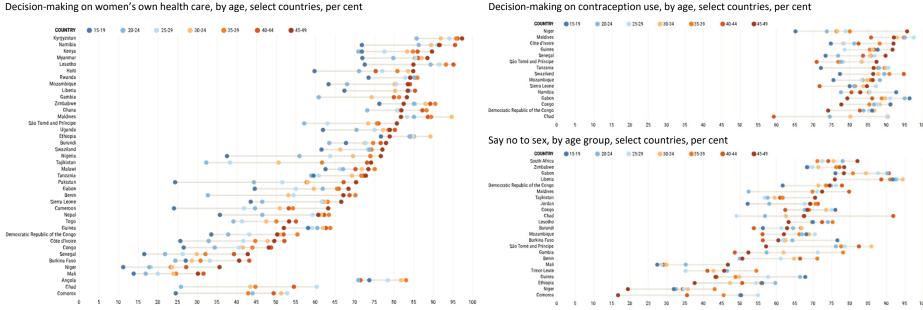
SDG Region	Country	Decision-making on women's own health care	Decision-making on use of contraceptive	Say no to sex	on sexual and reproduct health and right (SDG 5.
	Kyrgyzstan Maldives	94	95 93	71 85	58
	Nepal	59	85	91	48
	Pakistan	58	94	64	40
	Tajikistan	54	83	60	33
	Cambodia	91	89	93	76
and South-eastern		85	84	80	63
	Myanmar	85	98	81	68
	Philippines	97	94	88	81
	Timor-Leste	94	94	44	40
	Dominican Republic	88	92	93	77
	Ecuador	100	92	95	65
	Guatemala Guyana	92	91	89	71
	Haiti	78	90	80	59
	Honduras	84	88	94	70
Panama		94	89	95	79
Northern America	Albania	93	84	84	69
	Ukraine	98	95	86	81
	Angola	77	90	85	62
	Benin	55	90	62	36
	Burkina Faso	32	91	62	20
	Burundi	72	94	63	44
	Cameroon	48	89	89	38
	Chad	47	81	63	27
	Comoros Congo	47	71	47 71	21
	Côte d'Ivoire	43	87	67	25
	Democratic Republic of the Congo		85	74	31
	Eswatini	72	89	74	49
	Ethiopia	85	94	53	45
	Gabon	60	90	86	48
	Gambia	71	84	64	41
	Ghana	82	90	72	52
	Guinea Kenya	61	85	55	29 56
	Lesotho	91	93	71	61
Liberia Madagascar Malawi Mali Mozambique Namibia Nigeria Rwanda São Tomé and Príncipe Senegal Sierra Leone South Africa Togo Uganda United Republic of Tanzani		83	89	92	67
		90	93	88	74
		70	93	70	47
		22	77	31	8
		77	85	67	49
		91	83	35	71
		68	77	35 70	46
		84	90	83	70
		69	78	79	46
		31	85	19	7
		60	82	79	40
		95	89	75	65
		47	84	75	30
		75	93	87	62
	United Republic of Ianzania Zambia	66	89	76	47
	Zimbabwe	87	93	71	47
	Armenia Jordan	97	89	75 69	66
and Northern	Joidan		93	09	01







Overall, older women, more educated women, women living in urban areas, and women living in the wealthier households are more likely to make their own decisions

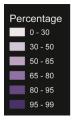


Notes: The number of countries with comparable survey data included in the regional aggregations is presented in parentheses. Source: United Nations Population Fund, global databases, 2020. Based on the Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) and other national surveys conducted in the 2007-2018 period.

#### Decision-making on women's own health care, by age, select countries, per cent

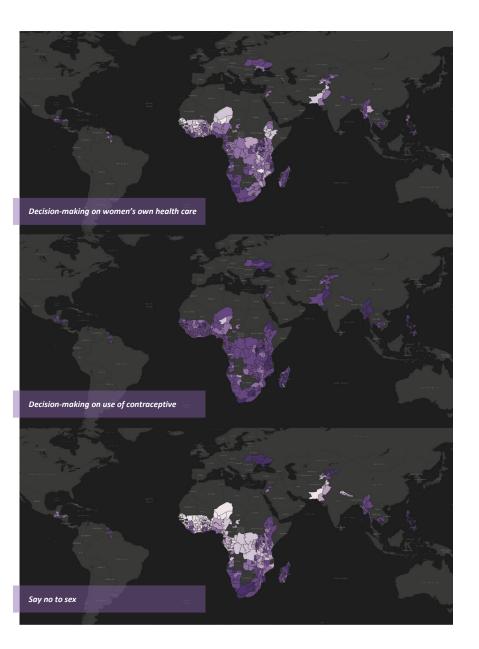
### SUB-NATIONAL LEVEL

Decision-making on women's own health care; decision making on use of contraceptive; decision making on sexual relations, at the subnational level, per cent



**Note:** The boundaries shown on this map do not imply the expression of any opinion whatsoever on the part of the United Nations Population Fund concerning the legal status of any country, territory, city or area or of its authorities, or concerning its boundaries.

**Source:** United Nations Population Fund, global databases, 2020. Based on the Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) and other national surveys conducted in the 2007-2018 period.









# New Data on SDG Indicator 5.6.2

INDICATOR 5.6.2: Number of countries with laws and regulations that guarantee *full and equal* access to women and men aged 15 years and older to sexual and reproductive health care, information and education. (Re-classified to Tier II in Sept 2018)

Custodian: UNFPA, in partnership with WHO, UN-Women, UN-DESA



## **SDG INDICATOR 5.6.2** measures 13 components (C1–C13) in four sections

#### **Maternity Care**

C1: Maternity CareC2: Life-saving CommoditiesC3: Legal Status of AbortionC4: Post-abortion Care

### Comprehensive Sexuality Education (CSE) and Information

**C8:** CSE Law **C9:** CSE Curriculum

### **Contraception and Family Planning**

C5: ContraceptionC6: Consent for Contraceptive ServicesC7: Emergency Contraception

#### **Sexual Health and Well-Being**

C10:HIV Testing and Counselling
C11: HIV Treatment and Care
C12:Confidentiality of Health Status for
Men and Women Living with HIV
C13: HPV Vaccine





5.6

UNIVERSAL ACCESS TO REPRODUCTIVE

EALTH AND RIGHTS

## For Each Component, UN Inquiry Collects Information On:

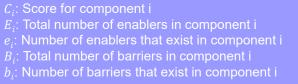
Legal/regulatory enablers	Legal/regulatory barriers (restrictions and contradictory plural legal systems)	
Does the country have any law(s) or regulation(s) that provide for access to maternity care? (Yes/No)	<ul> <li>Do the law(s) or regulation(s) include any restrictions by:</li> <li>Age (Yes/No)</li> <li>Marital status? (Yes/No)</li> <li>3<sup>rd</sup> Party authorization (e.g., spousal, parental/guardian, medical) (Yes/No)</li> <li>Sex (Yes/No) (where applicable- in other components)</li> </ul>	TA
	Are there any other <b>plural legal systems</b> that <b>contradict</b> (in part or in total) the law(s) or regulation(s)? (Yes/No)	1

The <u>nature</u> and <u>number</u> of enablers and barriers is <u>specific to each individual component</u> Legal barriers are not deemed applicable for the two operational components: C2. life-saving commodities and C9. CSE curriculum

### **Method of Computation**



$$C_i = \left(\frac{e_i}{E_i} - \frac{b_i}{B_i}\right) \times 100$$

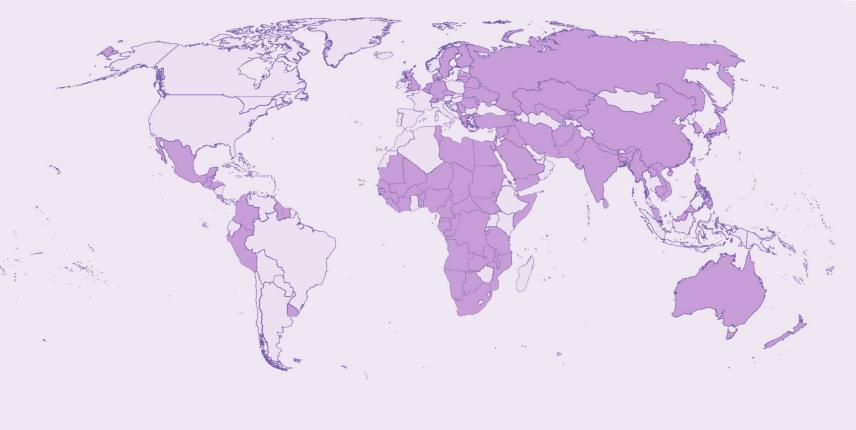


- Value for SDG 5.6.2 Indicator: arithmetic mean of 13 component data
- Value for four sections: arithmetic mean of constituent component data
- Data are reported on a percentage scale of 0 to 100, reflecting the extent to which laws and regulations exist to guarantee full and equal access to sexual and reproductive health care, information and education





### **Countries Responded to the 12th UN Inquiry**





**54%** of countries worldwide

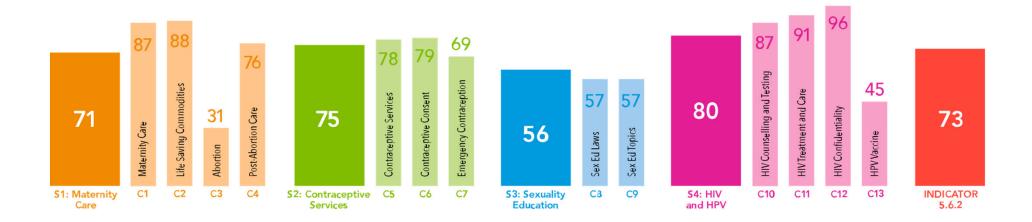
**107**/197 countries

**75%** population coverage

Extent to which countries have laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education, including Section (S1-S4) and Component (C1-C13) values, 2019 (per cent).



TARGET



Notes: Based on official responses to the United Nations 12th Inquiry among Governments on Population and Development. Data for SDG 5.6.2 are based on 75 countries with complete data; data for Sections are based as follows: 79 countries for Section 1 Maternity Care, 104 countries for Section 2 Contraceptive Services, 98 countries for Section 3 Sexuality Education, and 101 countries for Section 4 HIV and HPV. Source: United Nations Population Fund, global databases, 2020.

### Key Facts: Enablers

- Laws and regulations exist to guarantee access to maternity care in 95% of reporting countries;
- Abortion is legal on some or all grounds in 93% of reporting countries;
- 91% of reporting countries have laws and regulations that guarantee access to contraceptive services;
- 98% of reporting countries have laws and regulations that guarantee access to voluntary HIV counselling and testing services;
- 99% of reporting countries have laws and regulations that guarantee protection of the confidentiality of all people living with HIV;
- 87% of reporting countries have laws and regulations that ensure full, free and informed consent of individuals before receiving contraceptive services, including sterilization.







### **Restrictions Overview**

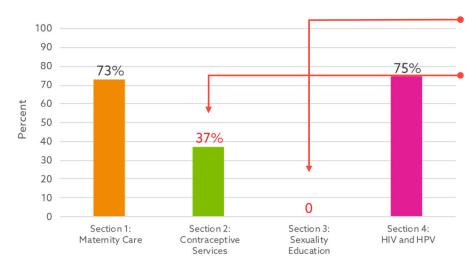
- Only 62% have laws, regulations or national policies that make sexuality education a mandatory component of the national school curriculum;
- Only 79% have laws or regulations that ensure access to post-abortion care irrespective of the legal status of abortion; in 54% of reporting countries, women can be criminally charged for having an illegal abortion;
- 9% have marital status restrictions to access maternity care services;
- 28% have minimum age requirements, and 21% have restrictions based on third-party authorization to access contraceptive services;
- 24% have minimum age requirements for voluntary HIV counselling and testing services.







### **Examples of how Indicator 5.6.2** data can be used at the country level to identify strengths and weakness in the legal and regulatory environment for SRHRR



#### Case Study: Country X (54%)

Does not have any laws/regulations that make sexuality education a mandatory component of the national school curriculum

Even though they have laws/regulations that guarantee access to contraceptive services, emergency contraception and contraceptive consent, there are also plural legal systems contradicting these laws. Additionally, there are also age restrictions for contraceptive services and consent

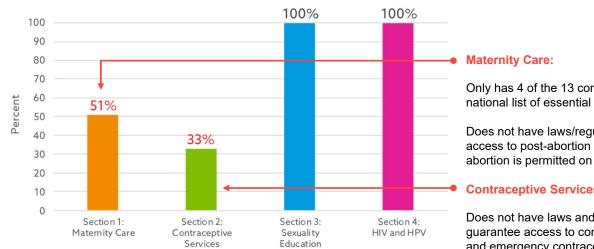
Country Focal Point's Explanation for Plural Legal Systems Contradictions:

"...the country with a majority of the population (around 72%) living in rural areas, poses a number of restrictive customary laws because of the strong influence of conservative religious beliefs, which in turn restricts the applicability of the laws or regulations to certain population groups at the rural and community level..."





### Examples of how Indicator 5.6.2 data can be used at the country level to identify strengths and weakness in the legal and regulatory environment for SRHRR



### Case Study: Country Y (70%)

Only has 4 of the 13 commodities on their national list of essential medicines

Does not have laws/regulations that ensure access to post-abortion care, even though abortion is permitted on some or all grounds

#### **Contraceptive Services:**

Does not have laws and regulations that guarantee access to contraceptive services and emergency contraception





United Nations Statistical Commission 51st Session

Sexual and Reproductive Health and Rights for All: Tracking Progress through SDG 5.6

The Sustainable Development Goals (SDGs) represent a landmark shift on the road towards universal access to Sexual and Reproductive Health and Rights (SRHR): For the first time an international development framework includes not only targets on sexual and reproductive health services, but also targets that address the barriers and human rights based dimensions of sexual and reproductive health and SRHR, through SDG target 5.6

Join UNFPA and the governments of Sweden, Georgia, Philippines, and the Democratic Republic of the Congo as they host a side event at the 51st session of the UN Statistical Commission to launch the new data on SDG 5.6.



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4 March 2020 1:15 - 2:30 pm Venue: UNFPA Orange Café, 605 3rd Avenue, 5th Floor

pment Branch

Opening remarks: Benoit Kalasa, Director, UNFPA, Technical Division

Special Presentation: Rachel Snow, Chief, UNFPA, Population and Develo

PANELISTS:

**Mr. Roger Shulungu Runika** General Director National Statistical Institute DRC

**Mr. Gogita Todradze,** Executive Director National Statistics Office of Georgia (Geostat)

**Dr. Dennis S. Mapa** Undersecretary National Statistician and Civil Registrar General Philippine Statistics Authority (PSA)

**Ms. Viveka Palm** Deputy Director Department for Regions and environment Statistics Sweden United Nations Statistical Commission 51st Session

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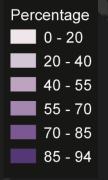
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### SUB-NATIONAL LEVEL

Women's decision-making on sexual and reproductive health and rights (SDG 5.6.1), at the sub-national level, per cent

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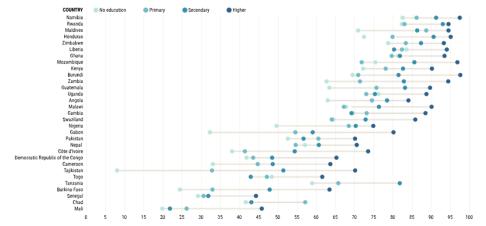




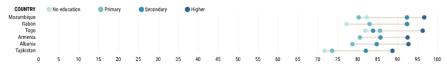
### HIGHEST LEVEL OF EDUCATION

Overall, older women, *more educated women*, women living in urban areas, and women living in the wealthier households are more likely to make their own decisions

Decision-making on women's own health care, by age, select countries, per cent

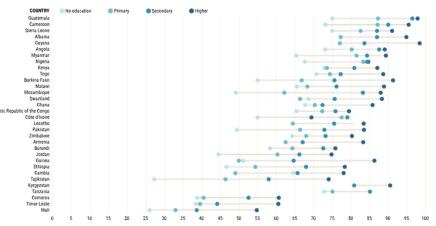


Decision-making on contraception use, by age, select countries, per cent



### Source: United Nations Population Fund, global databases, 2020. Based on the Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) and other national surveys conducted in the 2007-2018 period.

#### Say no to sex, by age group, select countries, per cent

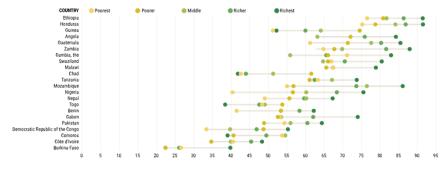




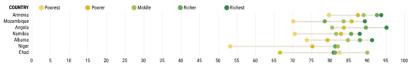
### HOUSEHOLD WEALTH

Overall, older women, more educated women, women living in urban areas, and **women living in the wealthier households** are more likely to make their own decisions

Decision-making on women's own health care, by age, select countries, per cent

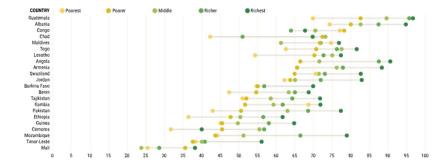


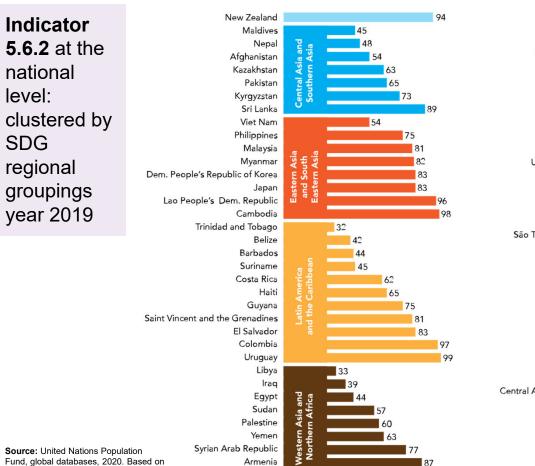
Decision-making on contraception use, by age, select countries, per cent



Source: United Nations Population Fund, global databases, 2020. Based on the Demographic and Health Surveys (DHS), Multiple Indicator Cluster Surveys (MICS) and other national surveys conducted in the 2007-2018 period.

#### Say no to sex, by age group, select countries, per cent





Georgia

0

20

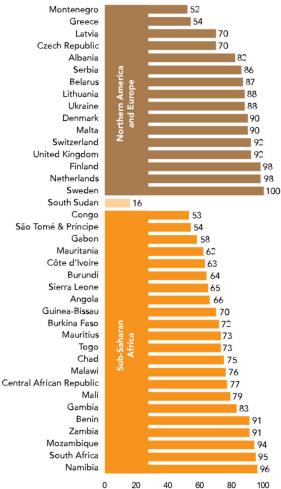
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