Research Report

Leiden Model United Nations 2017
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Forum: *World Health Assembly*
Issue: *Providing universal access to reproductive health care*

Position: *Deputy Chair*

Introduction

Reproductive health care is something that has undeniable benefits to the society of today, so shouldn't the rights to it be undeniable, too? At this moment, globally 222 million women and girls have an unmet need for contraception, they are denied quality reproductive health care services and information. This said, providing universal access to reproductive health care is one of the biggest human right issue occurring in the world right now. Being able to provide access to these services, could result into fewer new-born and maternal deaths as well as better family planning. This leads to girls being able to stay in school longer, so they can make the most of their education and lifetime earnings. The Millennium Development Goals (MDG) 5 strived for universal access to contraception and reproductive health care by the end of 2015, however, these goals have not yet been met.

Definition of Key Terms

Millennium Development Goals (MDG)
These are eight goals constructed to improve the lives of the poorest people in the world. There are measurable targets and clear deadlines, which were set in 2000 at the United Nations Millennium Summit. It has been signed by 189 countries. The target achievement date for these eight goals – ranging from providing universal primary education to avoiding child and maternal mortality – was 2015.

Sustainable Development Goals (SDG)
They are also known as the Global Goals. They are a universal call to action to end poverty, protect the planet and ensure that all people enjoy peace and prosperity. There are 17 Goals, which were built on the successes of the Millennium Development Goals, but it includes new areas such as climate change, economic inequality, innovation, sustainable consumption, and among other priorities peace and justice.

Sexual and Reproductive Health and Rights (SRHR)
They encompass the right of all individuals to make decisions concerning their sexual activity and reproduction free from discrimination, coercion, and violence.

Family planning 2020
A global partnership that came out of the 2012 London Summit on Family planning. Governments, civil society groups, multilateral organizations — including the United Nations — and the private sector committed to expand access to contraceptives to an additional 120 million youth and women by 2020

General Overview

In *2000*, representatives from 189 United Nations Member States adopted the Millennium Declaration, showing their shared commitment to reducing poverty and improving the quality of life for all. From these commitments resulted eight Millennium Development Goals (MDGs), which contains MDG5: Improve maternal health.
In this issue, it is important to think about identifying areas where progress has been made and where it has lagged for three indicators of access to reproductive health: adolescent birth rate, contraceptive prevalence rate and unmet need for family planning. There is also a struggle of access in sub-Saharan Africa linked to key social and economic background characteristics: age (for contraceptive prevalence and unmet need for family planning), urban or rural residence, household wealth and educational attainment. Disaggregating data in this way emphasizes the extent and growth of internal disparities that may easily be overlooked in discussions that address only national or regional averages. Progress since 1990 has been substantial, but has stalled in the last decade.
Moreover, global averages remain largely unchanged since 2000. Diversity among regions has grown since 2000. All regions, with the exception of sub-Saharan Africa, showed major declines in adolescent birth rates during the 1990s. Those declines went on since 2000 in two regions—Latin America and the Caribbean and Southern Asia. Levels of access to reproductive health are diverse throughout developing regions, especially since 2000.
The poorest, least educated women in sub-Saharan Africa have lost ground, with adolescents being farthest behind. The data for 24 sub-Saharan African countries show that, while the region falls far behind the others on all three indicators, many women, including the most prosperous and those with secondary or higher levels of education, have seen notable progress in recent years. But the least educated and poorest women have lost significant ground in many settings, and adolescent girls retain the lowest level of contraceptive use and the highest level of unmet need for

family planning. Investing in data and research is a critical first step to improving our understanding of factors influencing fertility among adolescents as well as factors affecting demand and use of contraceptives, and to promoting cost-effective interventions.

In 2016, 77% of women globally who are of reproductive age and were married or in a relationship had their need for family planning met with a modern method met the 2030 Agenda for Sustainable Development. The Sustainable Development Goals (SDGs) reinforced previously existing obligations for states to make sure that there was adequate, accessible and good quality health care as outlined in several human rights instruments—including the Universal Declaration of Human Rights, the International Covenant on Economic, Social and Cultural Rights and the Convention on the Elimination of All Forms of Discrimination against Women—by stating the need for states to ensure "universal access to sexual and reproductive health care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programs". However, there is still a lack of access to these services, and it may even become more difficult.

UNRISD's research shows that each SDG requires sound social policy. This includes social protection programs firmly grounded in a human rights-abased approach. However, recent political developments and policy decisions taken around the world may have adverse effects on people's rights to health care access in both the Global North and South.

Men, women and gender non-conforming persons are all entitled to SRHRs and require these services. And while everyone is affected by limited access to these rights, individuals from already marginalised groups such as children and adolescents, lesbian, gay and transgender people, sex workers, drug users, indigenous peoples, and people living in poverty are the most affected, fatally at times. This has even more severe consequences for people living in many countries of the Global South, where complications arising from lack of access to adequate sexual and reproductive health services are a leading cause of death and disability. According to the United Nations Population Fund (UNFPA), "few things have a greater impact on the life of a woman than the number and spacing of her children. Yet, in this new century, some 225 million women who want to avoid or delay childbearing still lack access to the quality services and supplies needed to manage their fertility." SRHRs are also crucial in making sure that development practices are environmentally sustainable.

Useful documents

http://www.unfpa.org/publications/universal-access-reproductive-health-progress-and-challenges
https://www.devex.com/news/universal-access-to-reproductive-health-care-a-global-obligation-and-opportunity-84383
http://www.who.int/gho/maternal_health/reproductive_health/en/
http://www.ippf.org/sites/default/files/fp2020_web.pdf
https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3180951/