

## Comprehensive Sexual and Reproductive Health Services

### Overview

In 2017, an estimated 18.2 million women were living with HIV and AIDS worldwide<sup>1</sup> and more than 214 million women in the developing world who wanted to use modern contraception were not doing so.<sup>2</sup> Modern methods of contraception include intrauterine devices, internal and external condoms, implants, injectables, oral contraceptives, patches, spermicides, emergency contraceptive pills, vaginal rings, tubal ligation, and vasectomy.

People seeking HIV services and those seeking family planning have needs that intersect, including protecting themselves against unintended pregnancy and HIV. Evidence shows that integrating family planning and HIV programs along with other sexual and reproductive health services improves health outcomes.<sup>3,4,5</sup>

Integrated sexual and reproductive health services includes: contraception, including emergency contraception; fertility planning; HIV prevention, treatment, and care; gender-based violence screening and care; HIV pre- and post-exposure prophylaxis; and safe abortion and post-abortion services. As a part of an integrated prevention strategy, it is critical that people have access to relevant, appropriate, and correct information in one place to help them make informed decisions about their health.

### Recommendations to Members of Congress

#### **Policymakers should support integrated sexual and reproductive health services.**

Sexual and reproductive health services must be integrated, comprehensive, accessible, and offered free of any form of discrimination. A lack of integrated services results in critical health care gaps that limit the effectiveness of U.S. foreign assistance and negatively impact people's health.

**Members of Congress should advocate for full funding** for the U.S. President's Emergency Plan for AIDS Relief (PEPFAR); Maternal, Newborn, and Child Health; International Family Planning; and gender-based violence prevention. In addition, they should support the humanitarian accounts and adequate multilateral funding for the United Nations Children's Fund (UNICEF), the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), and Global Fund. They should also restore funding to the United Nations Population Fund (UNFPA).

<sup>1</sup> UNAIDS, UNAIDS Data 2018 (2018), available at [http://www.unaids.org/sites/default/files/media\\_asset/unaids-data-2018\\_en.pdf](http://www.unaids.org/sites/default/files/media_asset/unaids-data-2018_en.pdf).

<sup>2</sup> The Guttmacher Institute, Adding It Up: Investing in Contraception and Maternal and Newborn Health (2017), available at <https://www.guttmacher.org/fact-sheet/adding-it-up-contraception-mnh-2017>.

<sup>3</sup> Janet Saul, Gretchen Bachman, Shannon Allen, Nora Toiv, Caroline Cooney, Ta'Adhmeeka Beamon, *The DREAMS core package of interventions: A comprehensive approach to preventing HIV among adolescent girls and young women*, 13 PLoS ONE 1-18 (2018).

<sup>4</sup> Kathryn Church, Carlotta Warren, Isolde Birdthistle, George Ploubidis, Keith Tomlin, Weiwei Zhou, James Kimani, Timothy Abuya, Charity Ndwiga, Sedona Sweeney, Susannah Mayhew & The Integra Initiative, *Impact of Integrated Services on HIV Testing: A Nonrandomized Trial among Kenyan Family Planning Clients*, 48 STUDIES IN FAMILY PLANNING 201-218 (2017).

<sup>5</sup> Craig Cohen, Daniel Grossman, Maricianah Onono, Cinthia Blat, Sara Newmann, Rachel Burger, Starley Shade, Norah Bett & Elizabeth Bukusi, *Integration of family planning services into HIV care clinics: Results one year after a cluster randomized controlled trial in Kenya*, 12 PLoS ONE 1-15 (2017).

## Benefits of Comprehensive Sexual and Reproductive Health Services

### **Increases awareness on how to prevent HIV infections.**

Integrating HIV and sexual and reproductive health programs, such as family planning and maternal health, improves access to these health services<sup>6</sup> and extends programs to people residing in remote areas with a lack of health services.<sup>7</sup>

### **Promotes human rights.**

People have the right to access information and resources to decide when and whether to have children and how many children to have. Access to comprehensive and voluntary family planning services ensures that people have control of their family size and can prevent the spread of HIV.<sup>8,9</sup> Everyone should be empowered to make informed choices for themselves, and have access to a wide range of contraceptive and HIV prevention methods.

### **Improves access to quality health programs.**

Integrated and prevention-based sexual and reproductive health programs give people the information and services they need to protect themselves and their partners from unintended pregnancies, HIV, and other sexually transmitted infections.<sup>10</sup>

### **Offers critical protection methods.**

Correct and consistent use of internal and external condoms reduces the risk of unintended pregnancy and acquiring HIV.<sup>11, 12</sup> These methods can also be used with hormonal and non-hormonal methods of contraception to provide additional protection against unintended pregnancies and HIV.<sup>13</sup>

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<sup>6</sup> Daniel Grossman, Maricianah Onono, Sara Newmann, Cinthia Blat, Elizabeth Bukusi, Starley Shade, Rachel Steinfeld & Craig Cohen, *Integration of family planning services into HIV care and treatment in Kenya: a cluster-randomized trial*, 27 AIDS 77-85 (2013).

<sup>7</sup> *Supra* note 4.

<sup>8</sup> World Health Organization, Family planning/Contraception (2018), available at <https://www.who.int/news-room/fact-sheets/detail/family-planning-contraception>.

<sup>9</sup> Wolfgang Hladik, John Stover, Godfrey Esiru, Malayah Harper & Jordan Tappero, *The Contribution of Family Planning towards the Prevention of Vertical HIV Transmission in Uganda*, 4 PLoS ONE 1-7 (2009).

<sup>10</sup> Richard Mutemwa, Susannah Mayhew, Charlotte Warren, Timothy Abuya, Charity Ndwiga & Jackline Kivunaga, *Does service integration improve technical quality of care in low-resource settings? An evaluation of a model integrating HIV care into family planning services in Kenya*, 32 HEALTH POLICY AND PLANNING 91-101 (2017).

<sup>11</sup> Susan Weller & Karen Davis-Beaty, *Condom effectiveness in reducing heterosexual HIV transmission*, 1 COCHRANE DATABASE OF SYSTEMATIC REVIEWS (2002).

<sup>12</sup> Lisa Haddad, Caryl Feldacker, Denise Jamieson, Hanoock Tweya, Carrie Cwiak, Thomas Chaweza, Linly Mlundira, Jane Chiwoko, Bernadette Samala, Fanny Kachale, Amy Bryant, Mina Hosseinipour, Gretchen Stuart, Irving Hoffman & Sam Phiri, *Pregnancy Prevention and Condom Use Practices among HIV-Infected Women on Antiretroviral Therapy Seeking Family Planning in Lilongwe, Malawi*, 10 PLoS ONE 1-14 (2015).

<sup>13</sup> Alison Roxby, Leila Ben-Youssef, Grace Marx, Freda Kinoti, Rose Bosire, Brandon Guthrie, Romel Mackelprang, James Kiarie, Grace John-Stewart & Carey Farquhar, *Dual contraceptive method use in HIV-serodiscordant Kenyan couples*, 42 BMJ SEXUAL & REPRODUCTIVE HEALTH 264-270 (2016).