

Sexual and Reproductive Health and Rights in Turkey Amid Pandemic



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Starting with the second half of the 20th Century, the perception that the rapid population growth has a negative impact on economic and social development led first to demographic solutions, then to health-dominated approaches, and finally, towards the end of the century, to thinking in terms of the health rights (United Nations International Conference on Population and Development (ICPD) in Bucharest in 1974, in Mexico City in 1984, and in Cairo in 1994). The viewpoint adopted at this point in time is that the steps to enhance the sexual and reproductive health of the individuals is rather significant for economic and social development.

People need sexual and reproductive health (SRH) services as an offspring of their growth and development processes throughout their lives. All individuals should be sufficiently informed on reproductive attitudes and they should be given the freedom to decide when and how to use their reproductive capacity. To achieve this, one needs to have access to certain information, products, facilities and services on reproductive behaviors and health. Minimization of the people's health risks is only possible through protecting and improving their human rights – especially those of the women – and enhancing their awareness of their rights.

Due to the COVID-19 pandemic that broke out in Wuhan, China on 31 December 2019 and gradually spread to the whole world, the focal point of the health system in all countries shifted mainly to the diagnosis and treatment services for this disease, increasing the countries' burden in terms of the labor force and financial resources. Reduction in time and availability of the healthcare professionals, shortage of the protective equipment, increased workload of the healthcare professionals due to their infected colleagues makes it extremely difficult to effectively maintain, and for the people to access to the sexual and reproductive health services just like all other healthcare services. Although the World Health Organization (WHO) considers the sexual and reproductive health services as a priority basic health service during the COVID-19 period, it is obvious that the service capacity of many countries has been significantly reduced in this period.

Planning is becoming increasingly more important under these hard conditions. Failure to plan the SRH services accurately and adequately will no doubt cause many adversities in our country and globally. According to the universal findings of the United Nations Population Fund (UNFPA), there are serious problems in accessing the diagnosis, medicine and treatment services as well as the major medical products regarding the sexually-transmitted infections under SRH services during the pandemic process.

Poorness of family planning services which are highly crucial for maternal and child health, and reduction of the healthcare services before, during and after the childbirth increase mother and child mortality due to causes such as higher illegal abortion and child deliveries under unhealthy conditions. According to the estimates of the UNFPA, the access of about 47 million women in 144 low to middle-income countries to modern birth control methods may be disrupted if the pandemic lasts longer than six months, and unintended pregnancies may increase by 7 million (UNFPA, 2020c).

Another study predicts that the number of women suffering from complications during delivery will increase by 1.745 million in low and middle-income countries during the pandemic period and this will result in the deaths of 28,000 mothers and 168,000 newborns (Riley et al., 2020). The occurrence of 3,600 mother and child deaths and stillbirths due to a 22 percent drop in services during the Ebola pandemic is an important experience that must be taken as a benchmark. More research is needed on the effects of COVID-19 on pregnant women and newborn babies and additional measures are required for the final phase of pregnancy and newborn care in particular. All of this data reveals the urgency to discuss in depth the problems, needs and proposals for solutions in the field of sexual and reproductive health (SRH) and to act with comprehensive planning.

As CISU Platform, in all of our works and studies starting with our opening meeting, we aim to monitor and support the field of SRH services on the basis of data and address together with all related parties the subject of how these services should be approached during and after the pandemic.



Platform for Sexual and Reproductive Health and Rights (CISU)

Platform for Sexual and Reproductive Health and Rights (CISU) which operated as "Cairo +20 and Sustainable Development Targets Platform" and carried out works and advocacy activities in the field of SRH in line with sustainable development goals in the previous years, implements data and evidence-based advocacy campaigns, aiming to disclose the current situation of reproductive and sexual health services and rights in Turkey and make all related rights and services accessible to each segment of the society.

Objectives of the Platform:

- To support the accessibility of sexual and reproductive health rights and services for all segments of society,
- To raise awareness of sexual and reproductive health on the basis of related rights,
- To monitor and report access to rights and services related to sexual and reproductive health,

As part of the Support to Civil Society Networks and Platforms Program of the European Union, CISU has accelerated its activities as of February 2020 with the project titled "Strengthening the Reproductive Rights and Health Platform in Turkey."



About TAPV

Turkish Family Health and Planning Foundation (TAPV) was established in 1985 to support mother and child health and family planning activities which are provided within the framework of preventive health services. TAPV has a rights-based approach on the basis of societal gender equality in the field of sexual and reproductive health. It carries out works on the topics of sexual education, safe motherhood, risks to reproductive health, fertility regulation, sexual health and sexually transmitted infections and tries to increase sensitive groups' access to sexual and reproductive health services in collaboration with local administrations. TAPV operates as the secretariat of the CISU Platform for a period of three years effective from February 2020.



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The content of this publication does not reflect the official opinion of the European Union. Responsibility for the information and views expressed in the publication lies entirely with Platform for Sexual and Reproductive Health and Rights.