

# Poverty and Sexual and Reproductive Health and Rights: *Understanding the Link*

**“Without access to reproductive health information and services and the freedom to make reproductive decisions, significant poverty reductions will not be possible.”**

–Poul Nielson

Former Commissioner for Development and Humanitarian Aid and  
Chief Executive Officer for EuropeAid Co-Operation Office

## Poverty is...

- lack of access to quality health care
- lack of choice, opportunities and dignity
- lack of possibilities to provide for one's family
- the inability to choose if and when to have children
- the inability to send one's children to school
- the inability to protect oneself from harm or disease
- hunger
- discrimination

...and the list goes on.

Poverty is much more than an economic phenomenon. Today, it is viewed from a broader perspective that encompasses many dimensions of human development:

Human development is about much more than the rise or fall of national incomes. It is about creating an environment in which people can develop their full potential and lead productive, creative lives in accord with their needs and interests...<sup>1</sup>

In the year 2000, 189 governments agreed to work toward the reduction of human poverty in all its forms when they committed to the Millennium Development Goals (MDGs). Since that time, factors such as longevity, literacy, health and the ability to make choices about one's life have been widely recognized as essential to alleviating poverty for the billions who suffer.

The MDGs are a powerful framework for tackling the problem of human poverty because they recognize the importance of improving some aspects of sexual and reproductive health as imperative to reducing poverty.

**But the MDGs do not go far enough.** To change the living conditions of the multitudes living in poverty, a full spectrum of sexual and reproductive health and rights issues must be addressed.

## Improving Sexual and Reproductive HEALTH is Vital to Poverty Alleviation

Sexual and reproductive health contributes to the overall health of families, communities and societies – the essential components of economically and socially secure nations. In fact, three of the eight MDGs are distinct sexual and reproductive health goals:

Goal 4. Reduce child mortality

Goal 5. Improve maternal health

Goal 6. Combat HIV/AIDS, malaria and other diseases

In addition, Goal 3 – promote gender equality and empower women – is a direct benefit of programmes that improve sexual and reproductive health and rights.

Governments cannot achieve the MDGs without devoting resources to reducing child and maternal mortality, combating HIV/AIDS and improving gender equality. And governments cannot realize the full benefits of these efforts unless they also work to improve a broader spectrum of sexual and reproductive health and rights.

To truly understand the complex relationship between poverty and the full spectrum of sexual and reproductive health and rights, it is important to recognize the following facts.

<sup>1</sup> United Nations Development Program, [www.undp.org](http://www.undp.org), 'Human Development Reports', 2004

## Benefits of Investing in Sexual and Reproductive Health and Rights

Investing in sexual and reproductive health services  
 can  
 help a woman avoid maternal death and ill-health  
 which can  
 improve the health and education level of her children  
 and  
 help both her and her family break the cycle of poverty.

### FACT: Women and girls are exposed to and affected by poverty disproportionately and in different ways compared to men.

Women account for 70% of the 1.2 billion people who live in absolute poverty worldwide due to a variety of factors, including:

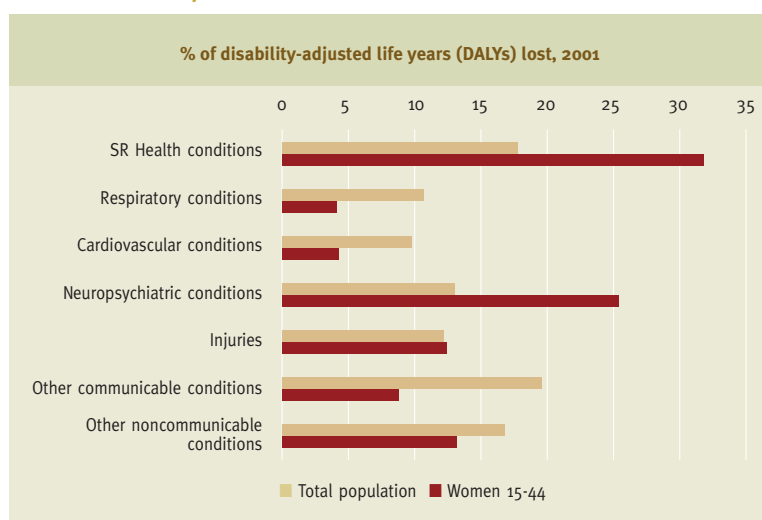
- reduced access to health care, education, employment and social and legal institutions
- gender-based violence
- death or disability related to pregnancy and childbirth
- discrimination
- vulnerability to sexually transmitted infections, HIV and AIDS
- responsibility to care for family members

### FACT: Women and girls, especially those living in poverty, are seven times more vulnerable to reproductive health problems than men.<sup>2</sup> The reason is simple:

women and adolescent girls experience pregnancy and childbirth, which, in the developing world, are the leading causes of death, disease and disability among women of reproductive age<sup>3</sup> (see Table 1) and the leading cause of death among girls aged 15 to 19.<sup>4</sup>

According to the United Nations Population Fund (UNFPA), "...while most other health indicators have improved in the developing world over the last decades, maternal mortality and morbidity continues to take a high toll."<sup>5</sup> In fact, every minute a woman dies during pregnancy and birth because she did not receive adequate care and prompt treatment.<sup>6</sup>

Table 1: Much of the global burden of disease is due to sexual and reproductive ill health.



Source: UNFPA and The Alan Guttmacher Institute

"Increasing access to contraception can significantly reduce maternal deaths simply by reducing the number of times a woman becomes pregnant..."<sup>7</sup> If the unmet need for contraception were filled and women had only the number of pregnancies at the intervals they chose, maternal mortality would drop by 20-35%. In addition, unsafe abortions – those performed by untrained providers or under unhygienic conditions or both – are the cause of 13% of maternal deaths.<sup>8</sup> By improving access to safe abortion services, thousands of women's lives could be saved.

2 Population Action International, Fact Sheet 'How Reproductive Health Services Work to Reduce Poverty', 2003

3 [www.safemotherhood.org/facts\\_and\\_figures/good\\_maternal\\_health.htm](http://www.safemotherhood.org/facts_and_figures/good_maternal_health.htm)

4 Save the Children, State of the World's Mothers 2004

5 UNFPA press release, "UNFPA Calls On World Leaders To Ensure Safe Motherhood For All Women", 9 May 2003

6 UNFPA, [www.unfpa.org/issues/](http://www.unfpa.org/issues/)

7 UNDP Human Development Report, 2003, p 99

8 Ibid.

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**FACT: A woman's health directly impacts the physical health of her family.**

Thirty to forty percent of infant deaths are the result of poor care of the mother during pregnancy and delivery, and children whose mothers die are three to ten times more likely to die before they reach two years of age<sup>9</sup>.



**FACT: There is a direct link between a woman's health and empowerment and the educational level and living conditions of her family.**

For example, a woman's education level strongly determines her family's level of income and living standard and the education and future income potential of her children. Women play a central role in family survival, both as income-earners and as primary caretakers. When women cannot work due to disability or illness, their families suffer.

Additionally, when teenage girls become pregnant, they are often forced to leave school, lowering their chances of being able to work and provide for their families later in life and to break the cycle of poverty. In order to ensure that the educational level of girls improves, sexual and reproductive health must be a priority in poverty alleviation efforts.

**FACT: Women and girls have multiple vulnerabilities to HIV and AIDS. And whether they are infected or affected by the disease, the stigma associated with it and the lack of social support available for these women and girls increases their susceptibility to poverty.**

In addition to biological factors, many women and girls do not have equal power to men in sexual relationships, making them more vulnerable than men and boys to contracting HIV. Moreover, when family members are infected, women and girls bear the burden of caretaking. Stigma and discrimination related to HIV/AIDS contributes to conditions of poverty and quality of life for all those infected and affected. Additionally, "AIDS kills people at the height of their reproductive and productive years, with devastating consequences for families, communities and national economies."<sup>10</sup>

HIV/AIDS prevention and care are integral parts of comprehensive sexual and reproductive health services and programmes.

### Safeguarding Sexual and Reproductive RIGHTS Helps Alleviate Poverty

**FACT: Empowering women, girls and couples to protect and make choices about their own sexual and reproductive health is one of the best investments governments can make in efforts to combat poverty.**

It is a fact that the poorest households tend to have the most children<sup>11</sup>.

However, the solution to reducing poverty does not lie in mandating the number of children a family can have. Instead, the solution is empowering women, girls and couples to make their own choices about fertility and giving them the services they need to choose whether or not to have children and when.

Today, many poor women and couples do not have adequate access to sexual and reproductive health information and services.

- According to UNFPA, "Developing countries that have invested in health and education, [thereby] enabling women to make their own fertility choices, have registered faster economic growth than those that have not."<sup>12</sup>
- When women and couples are able to choose when to have children and how many, they can better ensure that they have enough resources to keep each child healthy.
- Access to family planning resources, including modern contraception, allows women to plan their pregnancies. This helps ensure that the mother is physically and psychologically prepared to give birth and care for her child.<sup>13</sup>

All of these factors depend upon providing sexual and reproductive health services as well as ensuring that people are given access to the information and support they need to make decisions about their own fertility.

<sup>9</sup> WHO, Making Pregnancy Safer, <http://www.who.int/mediacentre/factsheets/fs276/en/>

<sup>10</sup> Population Action International, [www.populationaction.org](http://www.populationaction.org), 2003

<sup>11</sup> World Bank, 2002

<sup>12</sup> UNFPA, <http://www.unfpa.org/issues/>

<sup>13</sup> Save the Children, "Early Motherhood Report", 2004



## Benefits of Investing in Sexual and Reproductive Health and Rights

### Improving sexual and reproductive health services

enables women and girls

to delay childbearing until they have achieved education and training goals

and helps them

avoid stigmatizing medical conditions

all of which help

improve women's social position

and

increase their community and political participation.<sup>14</sup>

**FACT: Gender discrimination plays a crucial role in women's vulnerability to poverty.** Strict gender roles ascribed to women limit their access to education, training, employment and resources. Societal and community pressure denies many women the power to make choices about their lives, including choices about whether and when to have sex and with whom and whether or not to have children. Additionally, physical violence and coercion are a common reality for many women and girls, which dramatically affect their ability to be healthy and safe.

Without information about sexual and reproductive health and services such as contraception, pre- and post-natal care and safe abortion, many girls and women do not have a say in the direction of their own lives.

Poverty alleviation initiatives, therefore, must include sexual and reproductive health services and mechanisms to promote equal rights for women and girls.

## Moving Beyond the MDGs

As the collective understanding of poverty has evolved – from purely economic to encompassing multiple aspects of human development – the strategies for alleviating poverty must also evolve. Holistic approaches that include comprehensive sexual and reproductive health services and protection of rights are imperative for improving lives and breaking the cycle of poverty for the millions who suffer.

### Action Steps

With the MDGs as a starting point, governments and organizations can and must play a decisive role in this evolution by:

1. Ensuring that comprehensive sexual and reproductive health services are available to all women, men and young people, especially those from vulnerable and marginalized groups who are least likely to have access to these services.
2. Upholding and promoting sexual and reproductive rights, especially of women and girls, at all levels of society and government.
3. Work with civil society organizations on projects that help accomplish these goals.
4. Support the introduction of a ninth MDG that recognizes the vital importance of universal access to SRH information and services in the effort to reduce global poverty.

<sup>14</sup> UNFPA and The Alan Guttmacher Institute, "Adding it Up: The Benefits of Investing in Sexual and Reproductive Health Care", Executive Summary, 2003

## IPPF European Network

International Planned Parenthood Federation (IPPF) is the largest voluntary organization in the field of sexual and reproductive health and rights. The IPPF European Network increases support for and access to sexual and reproductive health services and rights throughout Europe and Central Asia.

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