

Sexual and Reproductive Health and Rights



Introduction

At the landmark 1994 International Conference on Population and Development in Cairo, 179 countries agreed that sexual and reproductive health and reproductive rights are fundamental human rights. The Cairo Programme of Action defined reproductive rights as “the right to decide freely and responsibly the number, spacing and timing of children,” to attain the highest standard of sexual and reproductive health and to make informed reproductive decisions free of discrimination, coercion and violence.¹ The international community has made some progress towards making those rights universal within a rapidly changing global environment.² One of the most prominent shifts has been the incorporation of sexual rights into the framework.³

Unfortunately, the acceptance of sexual rights as human rights has been slow and uneven, with the U.S. government partially to blame. For years, the United States strictly embraced the traditional framing of “sexual and reproductive health and reproductive rights,” objecting to efforts to add “sexual rights.” Seven years into the Obama-Biden administration, the 2016 Adolescent Girls Strategy became the first federal initiative to refer to sexual rights in policymaking and communications.⁴ However, the Trump-Pence administration tried throughout its four years in office to reverse this modest progress by implementing an array of policies to reduce bodily autonomy and crusaded against sexual and reproductive health and rights (SRHR) at the United Nations.⁵

Globally, while there is no mention of sexual rights in the U.N. Sustainable Development Goals,⁶ certain regional documents and individual countries have begun to recognize sexual rights as human rights, adopting the term SRHR and are pushing for its use at the United Nations.⁷

What are SRHR?

According to the report of the Guttmacher Lancet Commission, “Sexual and reproductive health is a state of physical, emotional, mental and social well-being in relation to all aspects of sexuality and reproduction, not merely the absence of disease, dysfunction or infirmity” and “relies on the realization of sexual and reproductive rights.”⁸ All people have the right to make decisions about their bodies and access medically accurate, high-quality services and resources.

FOR THE ACHIEVEMENT OF SRHR, EVERYONE MUST BE ABLE TO:

- Enjoy respect for bodily integrity, privacy and autonomy;
- Freely define sexuality and gender expression;
- Decide whether, when, how and with whom to be sexually active;
- Have safe and pleasurable sexual experiences;
- Determine whether, when and who to marry;
- Choose whether, when, how many and by what means to have children; and
- Access high-quality, prejudice-free resources, services and support.⁹

Guaranteeing sexual rights is particularly important for young people; Black, Brown and Indigenous people; LGBTQI+ individuals; people living with sexually transmitted infections; people with disabilities; people living in poverty; migrants; and people at risk of experiencing gender-based violence.¹⁰ Advocating for SRHR recognizes and supports the efforts of these groups to achieve bodily autonomy and access quality health care.

Biden-Harris Administration Policy

[Executive Memorandum on Protecting Women’s Health at Home and Abroad](#)

On January 28, 2021, the Biden-Harris administration issued an executive memorandum addressing women’s health. In addition to taking action to rescind the Global Gag Rule, which was in effect during President Trump’s term, and reestablishing funding for the United Nations Population Fund (UNFPA), the memo also declared that it is the policy of the Biden-Harris administration to “support women’s and girl’s sexual and reproductive health and rights in the United States, as well as globally.” It also initiated steps to pull the United States out of the so-called “Geneva Consensus,” an initiative created by the Trump-Pence administration to align anti-SRHR and anti-LGBTQI+ governments around the world, that has continued to gain momentum.

National Gender Strategy

On October 22, 2021, the White House Gender Policy Council released the National Strategy on Gender Equity and Equality.¹¹ This strategy, the first of its kind, reiterates the promise made in the January 28 executive memorandum and arguably takes it a step further by stating that the United States not only “supports” but is “promoting access to sexual and reproductive health and rights both at home and abroad.” This also aligns with one of the core commitments made by the United States at the Generation Equality Forum in July 2021. The strategy calls on the United States to remain the largest bilateral donor to family planning assistance; invest in high-quality, client-centered sexual and reproductive health services, particularly during humanitarian disasters and in post-conflict settings; continue contributing to UNFPA; support comprehensive sex education around the world; and permanently end the Global Gag Rule.¹² Thoughtful implementation throughout the federal government would signal an unprecedented commitment to SRHR, deliver sexual and reproductive health services to millions of people and bring universal bodily autonomy and integrity ever closer to becoming a reality.

Recommendations

Though the Biden-Harris administration has taken admirable strides to promote SRHR, it should:

- **Consistently use the term SRHR in federal directives and in diplomatic settings, including U.N. negotiations.** Sexual rights are human rights and must be acknowledged as such. Moreover, the federal government must adopt a strong definition of SRHR, one that aims to protect full bodily autonomy and integrity as well as the individual right to define sexuality and gender.
- **Apply the recommendations of the National Gender Strategy.** Without proper implementation, the strategy’s goals around SRHR will remain just goals. The State Department and U.S. Agency for International Development need to consult with a diverse array of stakeholders to develop evidence-based plans to operationalize the document’s recommendations. A failure to center and meaningfully incorporate the experiences of people impacted by U.S. policies and programs, who have been unable to fully exercise their SRHR, risks inadequate implementation.
- **Expand SRHR reporting in the State Department’s annual country human rights reports and include personal stories.** The State Department recently amended its 2020 Country Reports on Human Rights Practices to cover some aspects of reproductive rights that were slashed under the previous administration. The State Department should further expand this reporting to include additional components of SRHR. Furthermore, the reports should seek to include examples which illustrate and humanize the consequences of abstract, country-level policies.

Additionally, Congress should take action to:

- **Pass legislation to support SRHR globally,** including the Abortion is Health Care Everywhere Act to repeal the Helms amendment, the Global Health, Empowerment and Rights (Global HER) Act to permanently repeal the Global Gag Rule, the Reproductive Rights are Human Rights Act to codify the inclusion of SRHR reporting in the human rights reports, the Support UNFPA Funding Act and the Greater Leadership Overseas for the Benefit of Equality (GLOBE) Act to promote LGBTQI+ rights.
- **Modify the Siljander and Kemp-Kasten amendments** to allow for U.S. funds to be used to promote public health and evidence-based improvements on access to safe abortion care globally and to prevent U.S. funds from supporting reproductive coercion in any form.¹³

For more information about SRHR, please visit pai.org.

Sources

- 1 United Nations Population Fund. (2014). *Programme of Action of the International Conference on Population Development*. https://www.unfpa.org/sites/default/files/pub-pdf/programme_of_action_Web%20ENGLISH.pdf
- 2-3 Starrs, A.M., Ezeh, A.C., Barker, G., Basu, A., Bertrand, J.T., Blum, R., Coll-Seck, A.M., Grover, A., Laski, L., Roa, M., Sathar, Z.A., Say, L., Serour, G.I., Singh, S., Stenberg, K., Temmerman, M., Biddlecom, A., Popinchalk, A., Summers, C., & Ashford, L.S. (2018, June 30). Accelerate progress—sexual and reproductive health and rights for all: report of the Guttmacher-Lancet Commission. *The Lancet Commissions* 391(10140). [https://doi.org/10.1016/S0140-6736\(18\)30293-9](https://doi.org/10.1016/S0140-6736(18)30293-9)
- 4 U.S. Department of State, U.S. Agency for International Development, Peace Corps, and Millennium Challenge Corporation. (2016, March). *United States Global Strategy to Empower Adolescent Girls*. <https://2009-2017.state.gov/documents/organization/254904.pdf>
- 5 PAI. (n.d.). Global Gag Rule. <https://globalgagrule.org>
- 6-10 Starrs, A.M., Ezeh, A.C., Barker, G., Basu, A., Bertrand, J.T., Blum, R., Coll-Seck, A.M., Grover, A., Laski, L., Roa, M., Sathar, Z.A., Say, L., Serour, G.I., Singh, S., Stenberg, K., Temmerman, M., Biddlecom, A., Popinchalk, A., Summers, C., & Ashford, L.S. (2018, June 30). Accelerate progress—sexual and reproductive health and rights for all: report of the Guttmacher-Lancet Commission. *The Lancet Commissions* 391(10140). [https://doi.org/10.1016/S0140-6736\(18\)30293-9](https://doi.org/10.1016/S0140-6736(18)30293-9)
- 11 The White House. (2021, October 22). Fact Sheet: National Strategy on Gender Equity and Equality. <https://www.whitehouse.gov/briefing-room/statements-releases/2021/10/22/fact-sheet-national-strategy-on-gender-equity-and-equality>
- 12 The White House. (2021, October). *National Strategy on Gender Equity and Equality*. <https://www.whitehouse.gov/wp-content/uploads/2021/10/National-Strategy-on-Gender-Equity-and-Equality.pdf>
- 13 Kaiser Family Foundation. (2021, May 13). The U.S. Government and International Family Planning & Reproductive Health: Statutory Requirements and Policies. <https://www.kff.org/global-health-policy/fact-sheet/the-u-s-government-and-international-family-planning-reproductive-health-statutory-requirements-and-policies>