Advancing SRHR in Universal Health Coverage:

Key Takeaways from the WHO Side Event at HSR Symposium

EVENT OVERVIEW

On Monday, November 18th, the WHO Department of Sexual and Reproductive Health, including the Special Programme HRP and the WHO IBP Network, hosted a side event at the Health Systems Research Symposium in Nagasaki, Japan. The session brought together over 60 researchers, policymakers, and civil society advocates to discuss the role of sexual and reproductive health and rights (SRHR) in achieving Universal Health Coverage (UHC) and justice. Participants exchanged resources and experiences while engaging in dialogue on policy and advocacy strategies.

Technical Panel

Moderated by: Veloshnee Govender, WHO/HRP

Panelists: Rosemary Mburu, WACI Health; Goran Zangana, NHS Lothian, HSG Board Member; Beverly Johnston, USAID; Merette Khalil, Your Egyptian Doula; Jesper Sundewall, UNFPA

Key Insights

- **Misconceptions about UHC:** UHC is often seen as an end goal rather than a means to improve health, equity, and financial protection. Stakeholders interpret UHC differently—politicians view it as free public services, health administrators as insurance, and citizens as an entitlement.

- **Elevating SRHR in UHC:** Strategies include emphasizing the cost-effectiveness of SRHR interventions (maternal health, family planning, reproductive cancers), integrating SRHR into health benefits packages, and advocating for a human rights-based approach to policy and resource allocation.

- **Addressing Socio-Cultural Barriers:** Tackling gender norms, increasing male allyship, and ensuring representation of women and marginalized groups in decision-making are essential to integrating SRHR into national health plans.

- **Strengthening Civil Society's Role:** SRHR-focused CSOs must enhance their engagement in national policymaking by understanding government budget allocations, participating in technical committees, and improving advocacy strategies.

Interactive Sessions

Moderated by Nandita Thatte, WHO/HRP/IBP Network

Facilitators: Ravi Ram; Director Research and Evaluation, Medwise Solutions, Kenya; Kyu Kyu Than, Burnet Institute, Myanmar; Heloise Widdig and Eelco Jacobs, KIT Institute, Netherlands; Radhika Arora and Anteneh Asefa, Institute of Tropical Medicine, Belgium

Key Insights

Participants identified key priorities across three thematic areas:

1. Social Participation in SRHR

CHALLENGES:
- Limited representation of women, LGBTQIA+ individuals, and marginalized groups.
- Cultural and religious barriers perpetuating stigma and fragmentation.
- Donor restrictions and lack of financial resources for civil society engagement.
- Authoritarian governance limiting civil society influence.

OPPORTUNITIES:
- Co-production of agendas with civil society to foster shared goals.
- Capacity building for civil society advocacy and priority-setting.
- Reframing SRHR as essential for equity and well-being.

2. SRHR in Humanitarian Settings

CHALLENGES:
- Inconsistent governance and competing political priorities marginalizing SRHR.
- Climate change and conflicts exacerbating access disparities.
- Aid mechanisms influenced by geopolitical interests.
- Limited capacity building for local institutions and rights protection.

OPPORTUNITIES:
- Innovative financing models, AI, and technology for SRH delivery.
- Localized interventions amplifying affected populations' voices.
- Strengthening research, partnerships, and evidence-based action.

3. Intersectoral Approaches: SRHR, HRH, Education, and Climate Change

CHALLENGES:
- Poor quality of care, fragmented health systems, and weak governance.
- Siloed sectors (education, transport, food security) hindering integrated approaches.
- Inequities exacerbated by conflict and climate change.

OPPORTUNITIES:
- Locally driven, multisectoral interventions for resilience and community engagement.
- Technology-driven advocacy, green health systems, and life-course health approaches.
- Integration of self-care and digital health solutions.
- Cross-sectoral collaboration, particularly in education and pre-service training.

CONCLUSION

This session underscored the urgent need for systemic change to ensure SRHR is a core component of UHC. Addressing inclusivity, strengthening civil society's role, and leveraging multisectoral collaboration will drive transformative and sustainable progress in SRHR globally.