

# Sexual and Reproductive Health and Rights Globally

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## Relevance of the Findings and the Guttmacher – Lancet Commission for Pakistan

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# SRHR Package has to be Prioritized and Aligned with SDGs

2020 – 2025

- **Maternal and Neonatal Health**
- **Contraception**
- **Abortion**

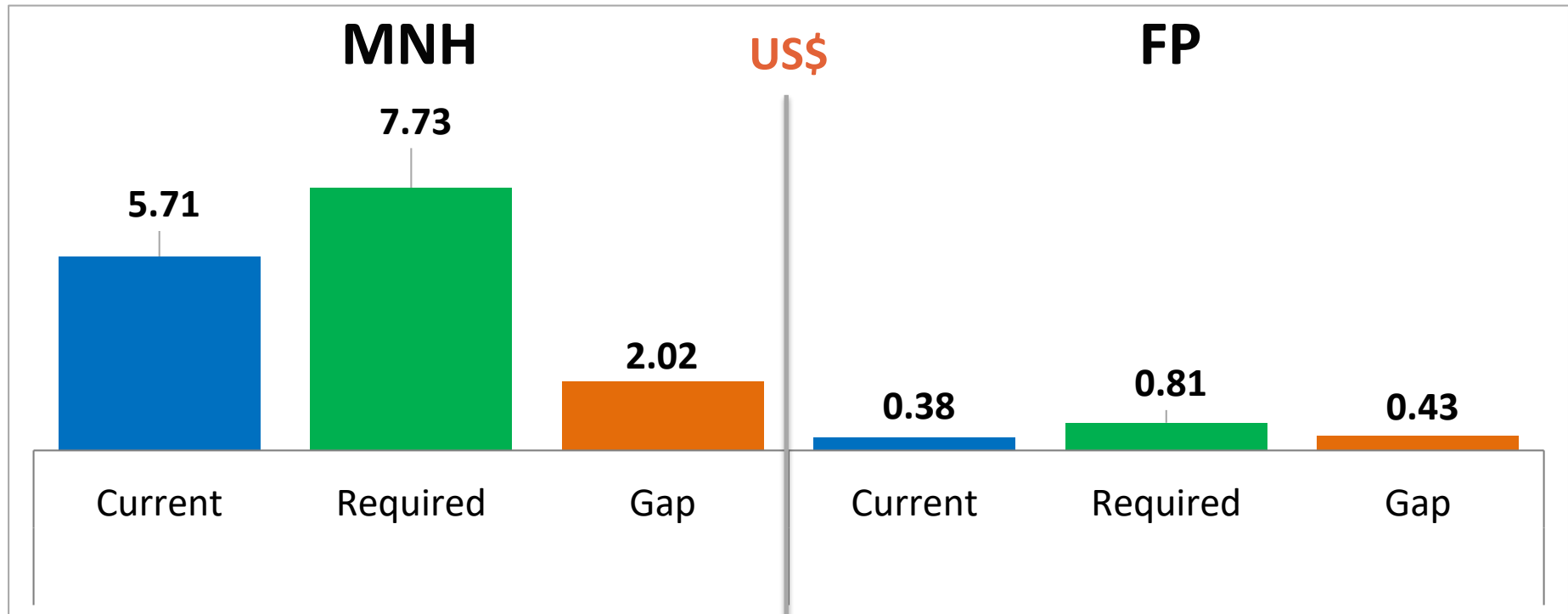
2025 – 2030

- **Gender Based Violence**
- **HIV/AIDs and other STIs**
- **Infertility**
- **Reproductive Cancers**

**Source:** Starrs, A. M., Ezeh, A. C., Barker, G., Basu, A., Bertrand, J. T., Blum, R., ... & Sathar, Z. A. (2018). Accelerate progress—sexual and reproductive health and rights for all: report of the Guttmacher–Lancet Commission. *The Lancet*, 391(10140), 2642-2692.

# Funding Gap for Full MNH Care is \$431 Million and \$93 Million for Family Planning Annually in Pakistan

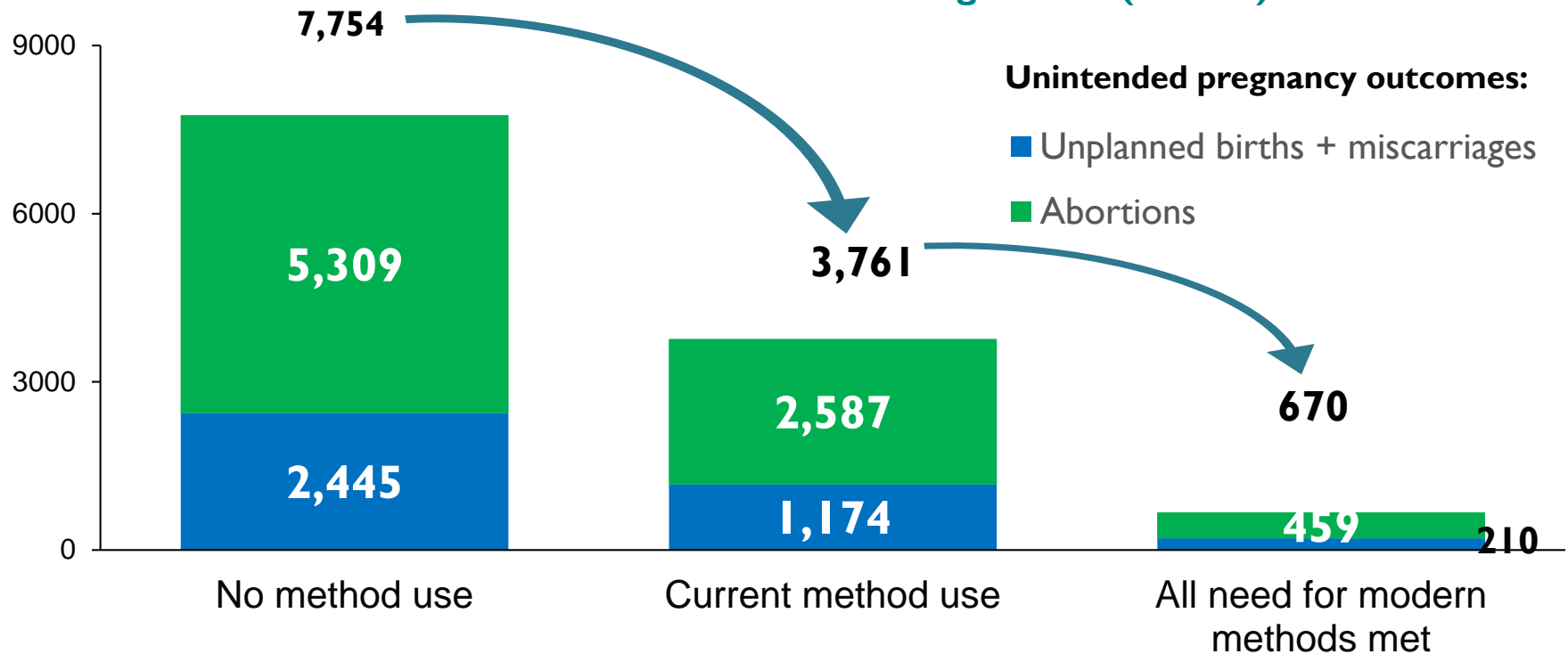
**Per Capita** current spending, required spending and the gap in funding for full family planning and maternal and newborn health care in Pakistan



**Source:** Sundaram A et al., Adding It Up: Costs and Benefits of Meeting the Contraceptive and Maternal and Newborn Health Needs of Women in Pakistan, New York: Guttmacher Institute, 2019

# Fulfilling Unmet Need for Modern Contraceptive Services would Reduce at least 3 Million Unintended Pregnancies in Pakistan

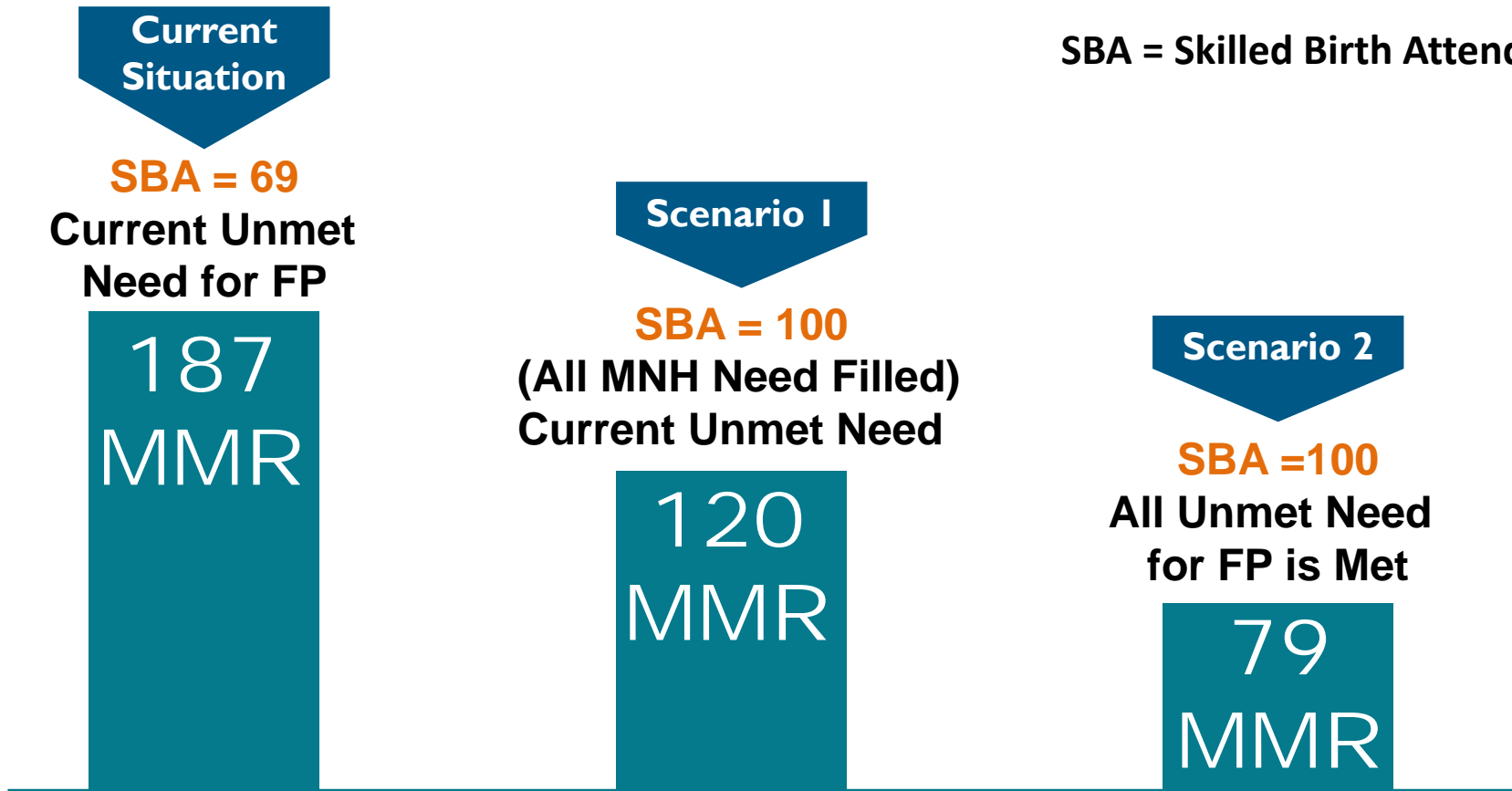
Unintended Pregnancies (in 000s)



**Source:** Sundaram A et al., Adding It Up: Costs and Benefits of Meeting the Contraceptive and Maternal and Newborn Health Needs of Women in Pakistan, New York: Guttmacher Institute, 2019

# Getting to the SDG Goal of 70 Maternal Deaths per 100,000 Live Births Possible only by Prioritizing Zero Unmet Need in Pakistan

SBA = Skilled Birth Attendance



**Source:** Population Council calculation based on PDHS 2017-18 and simulations based on Maternal Mortality 2000 Estimates developed by WHO, UNICEF and UNFPA, WHO, and Liu et al. (2008)

## Reaffirming GLC Priorities for Pakistan

- Pakistan cannot afford the full SRHR package but prioritizing the lower hanging gains of eliminating unmet need has to be a priority for 2020 – 2025
- Equity should be core value for additional spending – **3 million** women in the lowest two quintiles with unmet need for modern contraception and **2 million** for full maternal & neonatal care must be give priority
- Reproductive health needs of women have emerged as a priority likely to be overlooked during the COVID-19 pandemic as not regarded as emergency services
- Cheaper solutions in telehealth and helplines have emerged as cheaper and wider reach for women during COVID19 but will extend beyond

Thank You

## For More Information

### **Adding It Up 2019:**

Adding It Up: Investing in Sexual and Reproductive Health 2019

### **Abortion and unintended pregnancy:**

Unintended pregnancy and abortion by income, region, and the legal status of abortion: estimates from a comprehensive model for 1990–2019

### **Global Gag Rule:**

Investigating the Early Impact of the Trump Administration's Global Gag Rule on Sexual and Reproductive Health Service Delivery in Uganda

### **The Guttmacher-Lancet Commission:**

Accelerate progress—sexual and reproductive health and rights for all: report of the Guttmacher–Lancet Commission

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