

## Sexual and Reproductive Rights in times of COVID-19

As the global COVID-19 **pandemia spreads and intensifies, we get to witness the impact such crisis is having on the sexual and reproductive rights of women and people that belong to the LGBTQI+ community.** As availability and access are being compromised all around the globe, the barriers they usually face to access sexual and reproductive health services magnify.

The understandable response from different governments and other public institutions has revolved around controlling the pandemic and providing care to those affected by the virus, showing the obvious need to ensure universal health coverage and how that needs to be one of the cornerstones of any effective health system and fair society.

Due to the lack of means and resources to face the pandemic, in a lot of countries most of the health professionals have been referred to provide care to those infected by the coronavirus and to control the crisis. As a consequence, **the specialised services that provide sexual and reproductive health care have ceased their activity or reduced it to the bare minimum.**

The lockdown and restriction of movement measures implemented worsen even more the current barriers to access sexual and reproductive health services. For instance, the confinement situation entails that **a lot of women can't access oral contraception, emergency contraception or exercise their right to receive an abortion**, be it for the movement restrictions or for the fear of catching the virus if they leave their household.

Additionally, we also see how in a lot of places, the crisis is being utilised to **impose restrictive measures against accessing abortion provision.** We have seen [it in the states of Ohio and Texas, where abortion has been banned for as long as the crisis lasts](#). In every corner of the world, fundamentalist groups are raising their voices and demanding for abortion services to be banned and that those centres with proper accreditation refer their care to people with COVID-19, [demands that we have also heard in Spain](#). Therefore, a global crisis is being used to impose an ideology sustained in the denial of human rights.

However, we are also seeing **inspiring and committed responses born from collaborative efforts between providers and sexual and reproductive rights defenders** to cover the essential needs of women. For instance, [England, Ireland and Scotland](#) have approved effective immediately a measure that will allow women to access pharmacological abortion at home, assisted and accompanied through telemedicine. **In Catalonia**, the Health Department is preparing a special regulation through which they will improve access to abortion services, reducing it to just one appointment and supporting it via telemedicine. Moreover, specialised grassroots organisations are working together with sexual and reproductive care providers on a daily basis to ensure everyone has access to these services.

With all certainty, **the economic, occupational and social impact of this crisis will increase the vulnerability and financial instability of women**, which in turn, will make the need to guarantee access abortion services even more essential. **We know that women are more prone to get**

**exposed to coronavirus**, mainly due to their work commitments, as many work as domestic workers, health professionals, cleaning personnel, supermarket workers, etc. In a high-risk of contagion scenery and with significant chances of losing their jobs, women will probably choose interrupting their pregnancy.

It's also important to note that restrictions of movement and punitive measures affect disproportionately those individuals and groups who are normally stigmatised and placed in situations of vulnerability, **such as transgender people, people living with HIV and sex workers**, who suffer a higher degree of institutional violence.

[As activists and specialised organisations are highlighting](#), in a lot of places since the crisis started, testing for sexually transmitted infections has been suspended, as it's no longer considered an essential service. Moreover, people living with HIV have seen their access to antiretroviral therapy compromised, requiring in some cases help from civil society organisations to access them properly in a nearby hospital.

It's also important to give visibility to the fact that access to hormonal treatment for transgender people is also being jeopardised as well as gender affirming care, which has been cancelled in many places. Transgender people still suffer strong social stigma both in general and in healthcare settings. This stigma, combined with the current state of alarm, the lockdown and the constant warnings to avoid health facilities can have without a doubt a negative impact on access to hormonal treatment as well as further reduce transgender people's access to essential care, which is already substantially precarious.

Added to all this, **we also want to bring forward the growing concerns of many international distributors, as there is a possibility of a complete stockout due to the lockdowns** in China and India, two of the main providers in terms of contraception and abortion materials. The spread of this potential stockout in many countries could result, as always, in less access to individuals and groups placed in situations of vulnerability.

[As the United Nations Population Fund warns](#): *"The pandemic is also impacting the supply chains. Border lockdowns and limitations for manufacturers are affecting negatively the importation, availability and distribution of contraception, essential medicines for maternal health and other essential treatments, including antiretroviral therapy"*.

**Previous pandemics have demonstrated how gender as well as sexual and racial division of work, through which the system is sustained, impact the sexual and reproductive health of women and people that belong to the LGBTQI+ community.** In times of pandemic, the number of discriminatory policies increases disproportionately.

Taking all this into account in this trying times, it's essential that sexual and reproductive health service provision remains urgent, essential and covers the need of all women and people in the LGBTQI+ community.

**As Sexual and Reproductive Rights Defenders, we call upon governments and institutions** to develop and implement, with the required resources, creative measures centred in people and in strict collaboration with sexual and reproductive rights professionals and activists. Only by doing so, we can guarantee sexual and reproductive rights for all. **With this shared purposed,**

**as a public service, we hereby offer our capacity, knowledge, expertise and will to collaborate and propose the need to:**

1. Guarantee during this crisis access to essential and comprehensive sexual and reproductive health services for all women and people that belong to the LGBTQI+ community, regardless of their administrative status.
2. Guarantee that the network of primary care center and specialised centers in sexual and reproductive health cover the needs of all the population and remain open offering services and care throughout the crisis.
3. Guarantee the urgency of these needs above ideologies and beliefs.
4. Ease access to abortion with a single appointment and the follow-up via telemedicine to reduce the risk of exposure and transmission among women and professionals.
5. Ease, when possible and recommended, access to medical abortion at home without the need to get leave the household and through telemedicine.
6. Guarantee the protection measures and mental health support for all the professionals who offer sexual and reproductive health services.
7. Open quality information provision channels on sexual and reproductive health which are affordable, accessible and adapted to the needs of all the population.
8. Guarantee access to sexual and reproductive health products, such as menstrual health products, oral contraception, condoms, spermicides and lube.
9. Guarantee pregnancy, delivery and puerperium care. Women are entitled to receive information, care and accompaniment throughout the whole process, to choose where and how to give birth and to be provided services that respect their dignity and their decisions whether they are affected or not by COVID-19.
10. Demand accountability and information from the relevant companies on the chain supply and the availability of sexual and reproductive health treatments in the upcoming months.
11. Guarantee a response built from an intersectional and human rights based point of view, identifying all the potential oppressions to guarantee no one is left behind. That includes groups placed in situations of vulnerability when it comes to their rights, such as migrated women in an irregular administrative situation, transgender people and sex workers.

12. Guarantee that sexual and reproductive rights defenders are an essential part of the response as well as the measures implemented throughout and after the emergency situation.

We need to and we will continue to stay vigilant and attentive throughout this situation to ensure that the pandemic doesn't affect those placed in a vulnerability situation and enhances discrimination that worsens people's health and wellbeing.

Finally, we once again thank with solidarity, recognition and admiration all those health professionals. Their efforts and dedication when it comes to care, prevention, research, accompaniment and healing are key to ensure the common good and to provide the services everyone is entitled to, even in the current situation.

**We are here to take care of each other. Everything will okay.**



**Més informació:**

**Sílvia Aldavert Garcia**

Coordinadora de L'Associació de Drets Sexuals i Reproductius  
[coordinacio@lassociacio.org](mailto:coordinacio@lassociacio.org) | 663 91 71 70

**Ainhoa Yll Subirà**

Comunicació de L'Associació de Drets Sexuals i Reproductius  
[comunicacio@lassociacio.org](mailto:comunicacio@lassociacio.org) | 630 37 06 77

 @lassociaciotsr

 t.me/lassociacio