**Questionnaire: Working Group on discrimination against women and girls - Australian Submission**

***Women’s and girls’ sexual and reproductive health and rights in situations of crisis***

Sexual and reproductive health is a priority for Australia and Australian women and girls. There is a need to consider sexual and reproductive health within the social and cultural context of women’s lives. A complex array of factors is implicated in women’s sexual and reproductive health. Sexual and reproductive health is affected by the socioeconomic, cultural and political environment. Principal among these is the place of women in their society, particularly in terms of their control over their own bodies, reproductive choices and lifestyles.

Challenges and good practices

The Australian Government is committed to ensuring that all Australians are able to access timely and affordable high-quality health care through Australia’s health-care (Medicare) rebates for services listed on the Medicare Benefits Schedule. A number of Medicare rebates are available for services provided by eligible medical providers in any location and include GP-based services, maternal health services, screening services and sexual and reproductive health services. In addition, the comprehensive expansion of primary healthcare services including telehealth has allowed all Australians greater access to health services, including for sexual and reproductive health.

The Australian Government subsidises a range of contraceptive medicines through the Pharmaceutical Benefits Scheme, including intrauterine devices and oral contraceptives.

Access to termination services is the responsibility of Australia’s constituent states and territories and the laws relating to pregnancy termination are ultimately a matter for individual jurisdictions. Early abortion (up to 14 weeks) is available Australia-wide and later-term abortions are available in most states and territories.

The Australian Government is coordinating the implementation of the National Blood Borne Virus (BBV) and Sexually Transmissible Infections (STI) Strategies (2018-2022) to reduce transmission, morbidity, mortality and personal and social impacts.

Experiences of crisis

Recent crises in Australia, including the ongoing COVID-19 pandemic and 2019-2020 bushfires, have impacted the ability of health services to fully deliver culturally safe primary health care, including sexual and reproductive health. This impact has been seen where local Aboriginal Community Controlled Health Services have been forced to close due to bushfires or where freedom of movement has been affected by COVID-19 public health measures. For a group which experiences existing barriers to access to sexual and reproductive health services, these additional crises may have compounded these barriers in certain circumstances.

Restrictions on movement can impact access to medical professionals and health service providers with adequate provision for training in sexual and reproductive health, including the provision of emergency contraception and safe abortion services.

Aboriginal and Torres Strait Islander women and girls face additional challenges, compared to their non-Indigenous counterparts, in relation to access to sexual and reproductive health services. These issues of access may be exacerbated for individuals experiencing crisis (family violence, mental health) or during a time of crisis or change (COVID-19 pandemic, recent bushfires).

Challenges faced include:

* Sexual and reproductive health services that may not be culturally appropriate or culturally safe
* For those living in regional, rural or remote areas, the full range of sexual and reproductive health services may not be readily available or may require significant travel to access
* Educational resources and public health information relating to sexual and reproductive health may not be culturally safe, adapted for local cultural expectations or available in languages for people who do not speak English as a first language.

Aboriginal and Torres Strait Islander women and girls are more likely than non-Indigenous women and girls to experience gender-based violence. Rates of hospitalisations resulting from family violence are higher within Aboriginal and Torres Strait Islander populations. Aboriginal and Torres Strait Islander children receive child protection services at higher rates than non-Indigenous children.

Under the Indigenous Australians’ Health Programme (IAHP), the Australian Government funds approximately 210 organisations, including around 140 Aboriginal Community Controlled Health Services (ACCHS) to deliver culturally appropriate, comprehensive primary health care to Aboriginal and Torres Strait Islander people, including women’s sexual and reproductive health services such as:

* health assessments and/or screening for sexually-transmissible infections
* antenatal care services, which may include providing advice about healthy eating and physical activity; referrals to other health services, support services or specialists; parenting advice; social and emotional wellbeing and antenatal consultations
* postnatal care services, which may include breastfeeding support/information; parenting advice about providing supportive and nurturing healthy environments, nutrition and healthy eating support; and midwife consultations
* health promotion activities, which may include physical activity, sexual health, blood borne viruses, holistic health services, women’s health services, harm and injury reduction activities
* health crisis intervention.

ACCHSs are able to use IAHP grant funding to undertake a range of sexual health promotion and screening activities. The extent of these activities is mostly unknown, as it is not required to be accounted for in a separate format as the IAHP is provided as flexible funding to allow organisations to meet the health needs of their communities.

A number of Australian state and territory funded organisations have an allocation for sexual health included in their Primary Health Care IAHP funding. This funding is designed to ensure that remote communities, where there is no ACCHS, have access to sexual health services.

The Australian Nurse-Family Partnership Program (ANFPP) is a nurse-led, home visiting program for women who are pregnant with an Aboriginal and/or Torres Strait Islander baby. Visits commence during pregnancy and continue until the child is two years old. Due to the COVID-19 pandemic and associated restrictions, the ability of ANFPP staff to conduct home visits has been limited. Innovative modifications to the program implementation model have enabled program staff to maintain relationships with participants and ensure participants remain supported at this time. Innovations include increased use of telehealth, conducting ‘driveway’ visits and meeting in public parks while maintaining appropriate social distancing, and creating closed Facebook groups for mothers to continue meeting in an online setting.

Preparedness, recovery and resilience

One of the priority actions under Australia’s National Women’s Health Strategy is to increase access to sexual and reproductive health care information, diagnosis, treatment and services.

To achieve this, the Women’s Strategy commits to:

* promote access to sexual and reproductive health education, inclusive of gender and sexual diversity;
* improve access to information, screening services (such as cervical screening), and self-education tools;
* raise awareness of under-recognised sexual and reproductive health conditions (such as endometriosis) and reproductive risk factors;
* improve treatment and support for urinary and faecal incontinence in women;
* remove barriers to support equitable access to timely, appropriate and affordable care for all women (including a commitment to work towards universal access to sexual and reproductive health information, treatment and services); and
* strengthen access to sexual and reproductive health services across the country, particularly in rural and remote areas.

Australia’s National Men’s Health Strategy recognises that there are sexual and reproductive health conditions where men are over-represented (including some sexually transmissible infections and blood borne viruses, prostate and testicular cancer, and Klinefelter’s syndrome).

The Men’s Strategy commits to investing in health promotion campaigns on sexual and reproductive health, including fertility, pre-conception health, parenting and fatherhood.

Australia is a leading supporter of international efforts to provide crisis-affected communities with lifesaving sexual and reproductive health (SRH) services. Our well-established partnerships with the International Planned Parenthood Federation and UNFPA operate programs in both humanitarian and development contexts, providing essential services and supplies to meet the needs of women and girls, especially in the Indo-Pacific region.  These health services are often underfunded during crises, leaving women and girls vulnerable to preventable illness and death.  Quick, equitable and sustainable scaling up of SRH services during an emergency not only saves lives – it empowers  women, revitalises the health system, and expedites the recovery of an affected country following a disaster or crisis.

In line with Australia’s humanitarian aid strategy, Australia supports two key humanitarian initiatives which provide focused SRH responses to disasters and crises. The [**Regional Pre-positioning Initiative**](https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fasiapacific.unfpa.org%2Fen%2Frpi&data=02%7C01%7CSamuel.Kwon%40dfat.gov.au%7Cac47d8ea8c1341ac576d08d847e08360%7C9b7f23b30e8347a58a40ffa8a6fea536%7C0%7C0%7C637338376887600170&sdata=%2FwmYbk%2BKsKrMDgMrzUozpq59T4N7lnqXA9ahYVCsMSI%3D&reserved=0)**,** managed by UNFPA, positions SRH supplies throughout the Indo-Pacific region for rapid distribution in a crisis. Supplies include dignity/hygiene kits, clean delivery kits, reproductive health kits, tents and equipment necessary for maternity/delivery facilities and safe spaces for women and girls.  The [**Sexual and Reproductive Health Program in Crisis and Post Crisis Situations**](https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.ippf.org%2Four-approach%2Fprogrammes%2Fsprint-sexual-and-reproductive-health-crisis-and-post-crisis-situations&data=02%7C01%7CSamuel.Kwon%40dfat.gov.au%7Cac47d8ea8c1341ac576d08d847e08360%7C9b7f23b30e8347a58a40ffa8a6fea536%7C0%7C0%7C637338376887600170&sdata=N24Jgypgywu4x1klxwelC2aaY%2Bd9CvUVDoJ9vhgxyhM%3D&reserved=0), delivered by the International Planned Parenthood Federation, supports access to sexual and reproductive health services, including obstetric care, contraceptives, HIV and STI testing/counselling/treatment, and counselling, referral and clinical services for survivors of rape and sexual violence.