



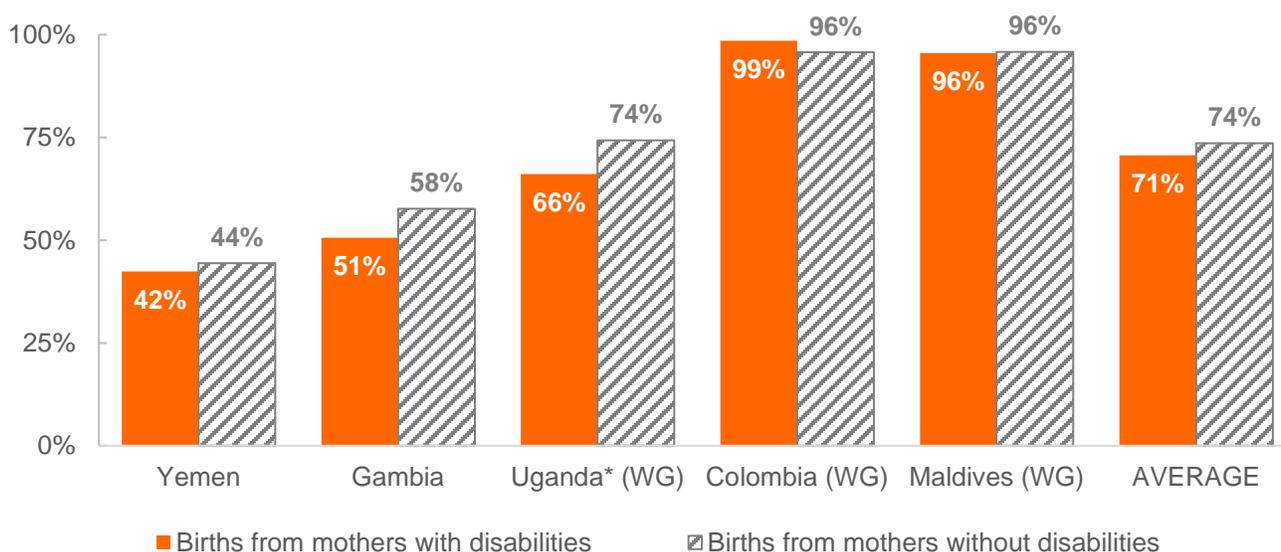
Accessing sexual and reproductive health services and reproductive rights for all persons with disabilities (Targets 3.7 and 5.6)

Disability-inclusive development

The 2030 Agenda for Sustainable Development and its 17 SDGs provide a powerful framework to guide local communities, countries and the international community toward the achievement of disability-inclusive development. The 2030 Agenda pledges to leave no one behind, including persons with disabilities and other disadvantaged groups, and recognizes disability as a cross-cutting issue to be considered in the implementation of all of its goals. The Agenda also includes seven targets and 11 indicators explicitly referencing persons with disabilities, covering access to education and employment, availability of schools that are sensitive to students with disabilities, inclusion and empowerment of persons with disabilities, accessible transport, accessible public and green spaces, and building the capacity of countries to disaggregate data by disability.

Persons with disabilities have equal needs to access sexual and reproductive health-care services as those without disabilities and have similar requirements for family planning and childbirth. However, misperceptions about persons with disabilities and the assumption that persons with disabilities are not sexually active has contributed to little attention being paid to ensuring that persons with disabilities have access to sexual and reproductive health-care services. **Limited evidence in a few developing countries shows that 29 per cent of births by mothers with disabilities are not attended by a skilled health worker (Figure 1) and 22 per cent of married women with disabilities have an unmet need for family planning (Figure 2).** These percentages are higher in rural areas. Without access to sexual and reproductive health, persons with disabilities are at higher risk of unwanted pregnancies and sexually transmitted infections including HIV/AIDS.

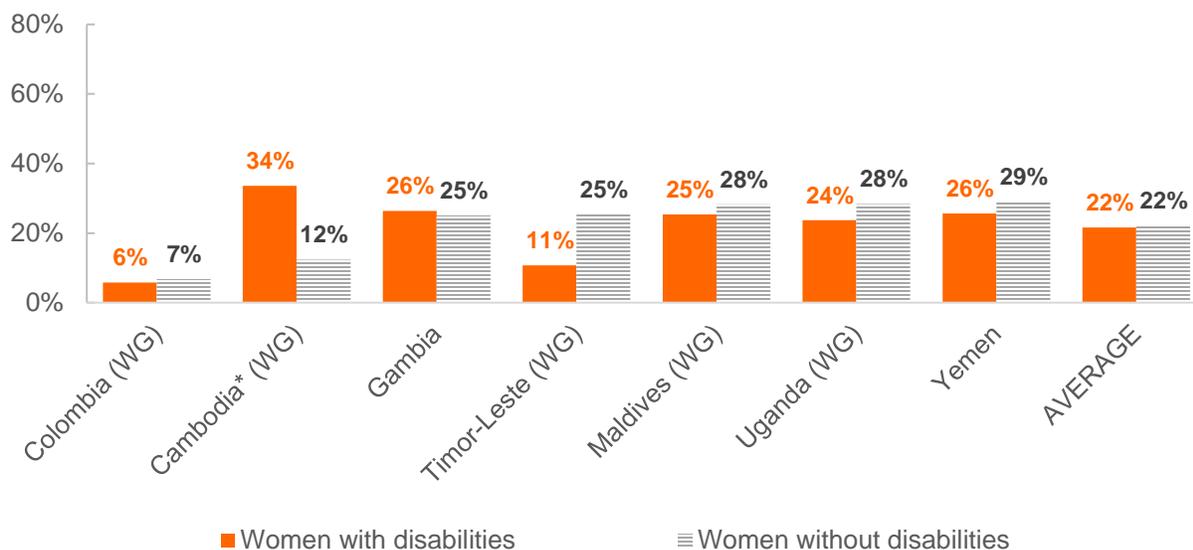
Figure 1: Percentage of live births attended by skilled health personnel, by disability status of the mother, in 5 countries, around 2014.



Note: (WG) identifies countries with data produced using the Washington Group Short Set of Questions. An asterisk (*) indicates that the difference between births from women with and without disabilities is statistically significant at the level of 5%.

Source: UNDESA¹ (on the basis of data from DHS²).

Figure 2: Percentage of married women aged 15 to 49 having an unmet need for family planning, by disability status, in 7 countries, around 2014.



Note: (WG) identifies countries with data produced using the Washington Group Short Set of Questions. An asterisk (*) indicates that the difference between women with and without disabilities is statistically significant at the level of 5%. Data from Cambodia and Timor-Leste are based on 25 to 49 observations and should be interpreted with caution.

Source: UNDESA¹ (on the basis of data from DHS²).

Apart from the societal stereotypes, the barriers that persons with disabilities face to accessing sexual and reproductive health services include lack of accessibility of services and information. Persons with disabilities, particularly women and those with intellectual disabilities, also fear abuse and violation of their reproductive rights when accessing these services because many persons with disabilities have been subjected to involuntary sterilization in various countries.

While examples exist of national sexual and reproductive health policies and programmes that are inclusive of persons with disabilities, in most countries, persons with disabilities remain invisible in such frameworks, as well as in their monitoring and evaluation.

Actions to ensure that persons with disabilities have access to sexual and reproductive health and reproductive rights

- Develop national policies and laws that guarantee access to sexual and reproductive health and reproductive rights for persons with disabilities.
- Make sexual and reproductive health-care facilities and information accessible for persons with disabilities.
- Train sexual and reproductive care workers on disability inclusion, combat discriminatory practices and improve service delivery for persons with disabilities.
- Educate persons with disabilities, including adolescents with disabilities, on sexual and reproductive health and reproductive rights.
- Establish a monitoring and evaluation mechanism to track the implementation of policies and programmes on access to sexual and reproductive health for persons with disabilities.
- Improve research and data to monitor, evaluate and strengthen sexual and reproductive health and services for persons with disabilities.

¹ Country estimates calculated or commissioned by UNDESA.

² ICF International, Demographic and Health Surveys, various data sets from 2006 to 2016. Data available at: www.dhsprogram.com/ (accessed in 2017 and 2018).