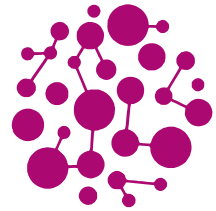


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# POLICY BRIEF

## SRHR AND CLIMATE CHANGE

*This Policy Brief was developed by the Balanced Stewardship Development Association (BALSDA) in collaboration with Earthspring International and Society for Women and Girl- Child Empowerment (SWOGE). Thanks to the financial contributions from Share-Net International.*

## **ACKNOWLEDGEMENTS**

This report was written by Wale Adeleye, Theresa Effa, Rev Victor Nyoro, Toyin Owolabi, Laretta Charles and Femi Stephen.

The drafting was supported through extensive expert feedback and review from the following contributors: Charlotte Van Tuijl, Michael Adetoun, Adegbite Godwin, Paul Ejembi, Aanu Rotimi, Oyindamola Adedapo, Osadare Temitope, Alagala Mathew, Stephanie Tobore. We thank them all for their time and insights.

Design- by Femi Williams

## CONTENTS

<b>ACKNOWLEDGEMENTS</b> -----	<b>1</b>
<b>ACRONYMS AND ABBREVIATIONS</b> -----	<b>2</b>
<b>BACKGROUND</b> -----	<b>3</b>
<b>SITUATION ANALYSIS</b> -----	<b>4</b>
<b>COMPELLING EVIDENCES</b> -----	<b>7</b>
<b>KEY RECOMMENDATIONS</b> -----	<b>11</b>
<b>CONCLUSION</b> -----	<b>13</b>
<b>REFERENCES</b> -----	<b>14</b>

## **ACRONYMS AND ABBREVIATIONS**

ARROW-	The Asian-Pacific Resource and Research Centre for Women
CEDAW-	Convention on the Elimination of All Forms of Discrimination against Women
CSOs-	Civil Society Organizations
GBV-	Gender-based violence
IUCN-	International Union for Conservation of Nature
LGBTQIA+	Lesbian, gay, bisexual, transgender, queer, intersex, asexual, and other diverse sexual orientations and gender identities
LMICs-	Low-and middle-income countries
NAP-	National Adaptation Plan
SRHR -	Sexual and Reproductive Health and Rights
UNFCCC -	United Nations Framework Convention on Climate Change
WHO-	World Health Organization

## 1.0 BACKGROUND

Climate change, the unprecedented warming of the earth from human activity, coupled with an increase in unpredictable and extreme natural disasters, is one of the greatest challenges the world faces today. Climate change will have consequences for all of humanity, some groups such as women, children, ethnic minorities and poor communities in developing countries are more vulnerable to the negative effects of this crisis (ARROW, 2014; Naswa, 2020). For example, after the devastation of hurricane Katrina in the USA, it was found that the majority of those unable to evacuate were African American women and their children who also coincidentally are one of the poorest demographic groups in that region. (IUCN, n.d.).

Gender inequality has been identified as a catalyst for women's vulnerability to climate change (ARROW, 2014). In combination with other factors, it impedes the ability of women to adapt to the climate crisis and this has consequences for their sexual and reproductive health and rights (ARROW, 2014; Naswa, 2020; Parkinson, Duncan and Weiss, 2014). Likewise, climate change exacerbates pre-existing issues in relation to women and their SRHR needs such as access to sexual and reproductive healthcare, forced marriage and pregnancy and gender-based violence (ARROW, 2014; CEDAW, 2018).

SRHR are under threat in the face of an unstable and unpredictable environment. Maternal health is threatened by increasing temperatures (Kuehn & McCormick, 2017) and climate-related diseases (WHO, 2017), while disasters can disrupt SRH services (Behrman & Weitzman, 2016; Benjamin, 2016) and lead to increases in gender-based violence and child marriage (McLeod, Barr & Rall, 2019)<sup>1</sup>.

Gender equality, SRHR, and climate change issues are inextricably linked but the linkages between them have received little attention. However, recognizing these links is key to creating an effective adaptive response to climate change, while also improving gender equality and access to SRHR services<sup>2</sup>.

With Governments around the world advancing their National Adaptation Plan (NAP) processes in an effort to build resilience to the negative impacts of climate change, the need for them to pay attention to SRHR in the national plans and strategies cannot be over-emphasized. ***The value of sexual and reproductive health***

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<sup>1</sup>[https://reliefweb.int/sites/reliefweb.int/files/resources/ndc\\_report\\_final.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/ndc_report_final.pdf)

<sup>2</sup><https://womendeliver.org/wp-content/uploads/2021/02/Climate-Change-Report-1.pdf>

*and rights as a key means of preparing and adapting to climate change must be recognized as a best buy by the government and all stakeholders.*

Providing reproductive choice can improve the health and resilience of women and their communities, enhancing their ability to prepare for and adapt to climate change. Providing family planning to women wishing to delay or cease child bearing can also contribute to sustainable population growth, decrease consumption and lower emissions. As a practical solution to climate challenges, sexual and reproductive health interventions should be integrated into climate change and development programs<sup>3</sup>.

As stakeholders, it is imperative to take appropriate actions to reduce the impact of these climate change issues on sexual and reproductive health and rights.

## **2.0 SITUATION ANALYSIS**

### **2.1 The NAP Process: An overview**

Countries around the world are advancing their NAP processes in an effort to build resilience to the negative impacts of climate change. These processes will guide investments in climate change over the coming years. With increased attention to gender issues in adaptation action comes an opportunity to ensure that NAP processes take SRHR issues into consideration, both to avoid missed opportunities for synergies and to ensure that adaptation actions do not negatively affect SRHR<sup>4</sup>.

The NAP process is a key mechanism for advancing adaptation to climate change under the United Nations Framework Convention on Climate Change (UNFCCC). First established in 2010 (UNFCCC, 2010), its importance was reiterated in the 2015 Paris Agreement as a means of achieving the global adaptation goal to foster climate resilience and increase the ability to adapt to the adverse impacts of climate change (UNFCCC, 2015). The NAP process is a “strategic process that enable countries to identify and address their medium and long-term priorities for adapting to climate change” (Hammill et al., 2019, p. 1).

The NAP process is led by national governments and involves coordination across sectors and levels of government, as well as with stakeholders, including civil society

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<sup>3</sup>[https://toolkits.knowledgesuccess.org/sites/default/files/climate-change\\_msi\\_cc\\_and\\_fp\\_may\\_2018\\_002.pdf](https://toolkits.knowledgesuccess.org/sites/default/files/climate-change_msi_cc_and_fp_may_2018_002.pdf)

<sup>4</sup><https://napglobalnetwork.org/wp-content/uploads/2021/02/napgn-en-2021-srhr-in-nap-processes.pdf>

organizations (CSOs), the private sector, and academia. In broad terms, the process involves analyzing current and future impacts of climate change and assessing vulnerabilities to these impacts.

**Figure 1. The NAP Process**



Source: Hammill et al., 2019

## 2.2 Current status of SRHR in Countries' NAP Processes

In order to understand better how SRHR-related issues have been addressed in country-level climate change adaptation planning processes to date, the NAP Global Network—in partnership with Women Deliver studied a sample of the available information on NAP processes in LMICs. The documents studied include NAP documents submitted to the UNFCCC, health sector NAPs, and funding proposals for adaptation planning support from the Green Climate Fund (GCF). The analysis is also informed by a review of the literature on climate change, adaptation, and SRHR.

The **key findings** from this analysis are<sup>5</sup>:

- 1. Governments are prioritizing adaptation in the health sector in their NAP processes.** All of the NAP documents identify health as a priority sector for adaptation and, though the degree of detail differs from country to country, all identify specific adaptation actions for the health sector.
- 2. There is some attention to gender considerations in the health sector in adaptation planning documents.** Though we are not yet seeing systematic analysis of gender considerations across NAP documents, we do find some instances where gender issues are considered in relation to health.
- 3. There is limited attention to SRHR in overarching NAP documents.** The review of NAP documents found that there are few references to SRHR-related issues—only 10 of the 19 documents reviewed contain any specific references to the components of SRHR included in the analysis.
- 4. Where health sector NAPs do address SRHR, this may not be reflected in the overarching NAP documents.** Among the health sector NAPs reviewed, there are some cases where specific details on SRHR-related issues are included; however, these have not translated into concrete actions in the overarching NAP documents.
- 5. Gender-responsive approaches present an entry point for consideration of SRHR**

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<sup>5</sup><https://napglobalnetwork.org/resource/srhr-in-nap-processes/>



**issues in NAP processes.** By integrating gender considerations in an intersectional approach that addresses other factors such as age, race, and sexual orientation, we can emphasize the role that SRHR can play as a basis for climate action.

#### **6. Investments in health sector adaptation may have indirect benefits for SRHR.**

Although there are limited actions directly targeting SRHR, there are a number of actions identified in NAPs and health sector NAPs that could provide indirect benefits, such as investments in health facilities but only if implemented in a gender-responsive and inclusive manner.

#### **7. Finance for adaptation action in the health sector falls short of the needs.**

There remain considerable gaps in the finance allocated for adaptation, and the amount dedicated to adaptation in the health sector is minimal. Greater investment in the resilience of health systems is sorely needed, particularly in the aftermath of the COVID-19 pandemic.

### **3.0 COMPELLING EVIDENCES FOR INCLUSION OF SRHR IN COUNTRIES' CLIMATE CHANGE ADAPTION PLAN**

1. As a climate change mitigation strategy, family planning programs are more cost-effective than other conventional, carbon energy solutions. For example, a recent estimate suggests reductions in emissions would cost \$4.50 per ton of CO<sub>2</sub> if directed to family planning, compared with \$20 per ton if directed to low carbon energy strategies. Furthermore, the study found that simultaneously investing in female education would enhance the productivity of family planning, thus resulting in higher emissions reductions and enhancing cost-effectiveness. It is critical that SRHR including family planning be considered as part of a comprehensive response to climate change<sup>6</sup>.
2. Scaling up access to voluntary, high quality family planning services in areas vulnerable to climate change can reduce the pressure that rapid population growth has on the living environment and reduce the harms associated with increasing numbers of people being exposed to climate risks.
3. A Tropical Cyclone formed in the Mozambique Channel and drifted to Malawi in 2019 caused heavy rains accompanied by strong winds. This led to severe flooding

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<sup>6</sup>[https://toolkits.knowledgesuccess.org/sites/default/files/climate-change\\_msi\\_cc\\_and\\_fp\\_may\\_2018\\_002.pdf](https://toolkits.knowledgesuccess.org/sites/default/files/climate-change_msi_cc_and_fp_may_2018_002.pdf)

across some districts in southern Malawi damaging infrastructure, including houses, roads, bridges, and irrigation systems. According to the initial rapid assessment conducted at the beginning of the flooding crisis by Malawi Red Cross Society, 75,000 people were displaced with 31,667 males, 45,164 females. Of these, 8,947 are children under five, 5,136 pregnant and lactating women (PLW), and 139 people living with disabilities<sup>7</sup>.

4. New Zealand police reported a 53 per cent rise in domestic violence after the Canterbury earthquake. In the US, studies documented a four-fold increase following two disasters and an astounding 98 per cent increase in physical victimization of women after Hurricane Katrina, with authors concluding there was compelling evidence that intimate partner violence increased following large-scale disasters (Schumacher, et al., 2010)<sup>8</sup>.

5. Dehydration during pregnancy can be especially devastating to both mother and child, as it can affect fetal growth, release labor-inducing hormones, cause preterm births, and increase the maternal risk of anemia and eclampsia<sup>9</sup>.

6. Increased temperatures are expected to increase transmission and spreading of vector-borne diseases by increasing mosquito density in some areas and increase in replication rate and bite frequency of mosquitoes<sup>10</sup>.

7. Vulnerability to GBV, including sexual violence, is exacerbated for girls and women living in socially or geographically isolated places and those who are migrants, refugees, asylum seekers, internally displaced persons, LGBTQIA+ individuals, girls and women with disabilities, and girls and women living in poverty.

8. The study of Neelormi, Adri and Ahmed (2009)<sup>11</sup> who reported that women are often the primary caregivers of the family, shouldering the burden of managing and

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<sup>7</sup>[https://cerf.un.org/sites/default/files/resources/19-RR-MWI-35650\\_Malawi\\_RCHC\\_Report.pdf](https://cerf.un.org/sites/default/files/resources/19-RR-MWI-35650_Malawi_RCHC_Report.pdf)

<sup>8</sup>[https://www.researchgate.net/publication/288432753\\_The\\_hidden\\_disaster\\_Domestic\\_violence\\_in\\_the\\_aftermath\\_of\\_natural\\_disaster](https://www.researchgate.net/publication/288432753_The_hidden_disaster_Domestic_violence_in_the_aftermath_of_natural_disaster)

<sup>9</sup><https://womendeliver.org/wp-content/uploads/2021/02/Climate-Change-Report-1.pdf>

<sup>10</sup><https://www.tandfonline.com/doi/full/10.3402/gha.v6i0.19538>

<sup>11</sup>Neelormi S., Adri N., & Ahmed A.U.. Gender dimensions of differential health effects of climate change induced water-logging: A case study from coastal Bangladesh. IOP Conference Series: Earth and Environmental Science, 2009, Vol 6.

cooking food, collecting drinking water, taking care of family members and livestock and because of these household responsibilities they often spend time in waterlogged premises and other settings. In addition to spending time around unhygienic water, they also drink unhygienic water since tube wells become polluted. This severely affects the health condition of women in affected communities and adds to more local water borne related diseases.

### **3.1 Key Opportunities for Consideration of SRHR in NAP Processes**

To date, there have been limited consideration of SRHR issues in countries NAP processes but opportunities still exist to advance SRHR. In the NAP process, there are opportunities at every stage in the process to increase the attention to these issues, as shown in Figure 2 below. Governments can use these opportunities to address SRHR-related issues in adaptation planning and action through a gender-responsive approach.



Source: Adapted from Hammill et al., 2019

## 4.0 KEY RECCOMENDATIONS

### RECOMMENDATIONS & ADVOCACY

This policy brief offers the following recommendations as key towards empowering women and girls, prioritizing their SRHR so as to adapt to climate change and reduce its negative in particular, lessen the negative effects during climate change-related disasters and aftermath of these disasters. These recommendations will be widely disseminated to advance SRHR issues in the national climate change adaption plans and programs.

#### Recommendations for Government -

- Governments: Policies such as climate change strategies should be people centered and inclusive in all ramifications. Ministries of Environment at national and sub national levels should strengthen their collaborations with relevant Ministries, Departments & Agencies, non-state actors (CSOs, Faith-based organizations, Associations, Media etc.)
- Another important step in NAP processes is the establishment of institutional arrangements for coordination of adaptation action across government structures and levels. The makeup of these central coordination mechanisms should include members from relevant ministries and agencies who have requisite knowledge and strong influence over the framing of adaptation issues and the priorities identified, so it is important that both gender and health actors are included to ensure the right mix of expertise across the decision-making process. This will provide the evidence needed and raise awareness of the linkages, thereby strengthening the argument for these issues to be addressed as a basis for adaptation action. This will increase the likelihood that SRHR will be considered and addressed in efforts to manage climate risks while also avoiding unintended negative impacts on SRHR from adaptation actions.
- The various policies that have incorporated gender mainstreaming exist in isolation. There is a need to integrate and provide coherence among the various policies. For instance, integrate SRHR into other policies for women development within the Ministries of Women Affairs and Health, integrate SRHR in the climate change policies including the Countries' Climate Change

- Strategy and Action Plan and integrate SRHR into Countries' National Disaster mitigation plans.
- Use the existing guidance on gender and health as a basis for integrating SRHR in NAP processes. As countries advance their NAP processes, this provides opportunity to delve deeper into SRHR issues in the NAP document. As they are further elaborating implementation strategies, developing funding proposals, and allocating resources to put priority actions in place, SRHR must be considered a best buy in the document.
- In order to establish the SRHR of women and girls within the context of climate change, it is also important for governments to recognize, implement and deliver on the commitments already made. This includes SRHR commitments made and adoption of the Beijing Declaration and Platform for Action.
- **Support systemic approaches to adaptation in the health sector.**  
NAP processes gave a high degree of priority for the health sector—as well as the COVID-19 pandemic, which is highlighting the weaknesses in health systems— This opines that adaptation in the health sector will receive increased attention in the coming years. With increased investment in adaptation in the sector comes an opportunity to work toward more integrated approaches that address broader health system resilience, including SRH services. The WHO provided a guidance for adaption planning in the health sector which identifies the important components for building climate resilience in health systems, focusing on foundational components, information, and risk management (WHO, 2014a).
- **Innovative financing to promote integrated approaches to resilience that address the linkages between SRHR and climate change.**

Paucity of funds may debar governments from fully addressing all of the factors that undermine resilience to climate change. Consequently, there are windows of opportunities for governments to maximize the impact of adaptation finance. Governments should innovatively leverage on other sources of funds—for example, health funding—that address the underlying causes of vulnerability, including gender inequality and the denial of SRHR.

- **Holistic M&E system for adaptation that integrate gender and SRHR.**  
Governments should establish a harmonized system that will track progress of implementation of the climate change adaptation plans and reducing vulnerability to climate change over time. The establishment of gender responsive M&E systems for adaptation provides an enabling environment that guarantees that differential impacts of adaptation actions for different groups are captured. Tracking gendered impacts of adaptation actions in the health sector, including those related to SRHR, will help build the evidence base on the linkages between SRHR and climate resilience, as well as to identify any unintended negative impacts of adaptation actions on SRHR.

## 5.0 Conclusions

The impacts of climate change will have adverse effects on SRHR particularly for girls, women, and people of diverse genders and sexual orientations. Therefore, inclusion and prioritizing SRHR in NAP process and, making investments in this area is essential.

In view of the close linkages between SRHR and advancing gender equality, these issues should be considered in a gender-responsive approach to the NAP process.

NAP process should leverage on the increased investment in adaptation in the health sector, this will provide windows of opportunity to take a systemic approach that addresses SRHR alongside other concerns related to climate change and health, utilizing existing guidance on gender and health in NAP processes. Achieving this will require increased evidence of the linkages between SRHR and climate change, as well as more attention to monitoring & evaluation, to build the evidence base for better informed decision making in this area. NAP processes should also ensure the relevant stakeholders are involved in identification of integrated solutions that link adaptation actions with investments in SRHR and gender equality so as to promote more equitable outcomes. An inclusive and gender-responsive implementation of actions to increase resilience of health system will help ensure access to sexual and reproductive health information and services, including during crises.

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