

UKRAINE: PUTTING **SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS** AT THE HEART OF THE EU RESPONSE

Since the outbreak of the war in Ukraine on 24th February 2022, humanitarian needs have been increasing by the hour. Millions of people across Ukraine are fighting for their lives. As of 6th April 2022, around **11.4 million** people have been forcibly displaced, with 7.1 million internally displaced persons (IDPs) and nearly **4.3 million** who have fled the country, seeking a safe haven in neighbouring countries.¹ This is the largest refugee crisis Europe has seen since the Second World War, and the current numbers might further escalate. The majority of displaced people and refugees are women and children².



Sexual and reproductive health and rights (SRHR) needs in Ukraine are particularly high. **9.4 million women** are of reproductive age, and many of them have been or will be forced to flee by the conflict. According to official figures, by the beginning of March, **4,311 babies** were born since 24th February. There were an estimated **265,000 pregnant women** at the start of the crisis, some 80,000 of whom expected to deliver over the coming three months.³ Although maternal health facilities might remain operational in several cities throughout the country, with their basements transformed into bomb shelters and nurseries, they urgently need reproductive health medical supplies to properly function⁴ and their lifesaving services remain at high risk of being interrupted due to the escalation of the conflict.⁵ Moreover, **reports of sexual and gender-based violence (SGBV)**, including human trafficking, in areas of active fighting, but also for people crossing the borders, are increasing by the day.⁶ The country is also home to 260,000 adults and children living with HIV⁷, whose lifesaving treatment is jeopardized by the lack of availability of retroviral supplies in a war context. Finally, pre-existing shortages of hormones for trans and intersex people are exacerbated by the conflict, causing interruptions to vital therapies⁸.

WHAT DOES SEXUAL AND REPRODUCTIVE HEALTH MEAN IN A CRISIS?

Amid the terrifying devastation experienced through a humanitarian crisis, people need first and foremost safety and protection. Sexual and reproductive health (SRH) services can save lives and prevent further suffering.

SRH in crisis is access to safe delivery and newborn care, access to safe abortion, and access to contraceptives to prevent unintended pregnancies which could further endanger the life of the woman and her family. It also includes other key elements like prevention, detection and treatment for SGBV, protection for people of diverse sexual orientation and gender identities, prevention and treatment of HIV and other sexually transmitted infections, menstrual health products, and comprehensive sexuality education for young people. SRH is an essential component of the universal right to the highest attainable standard of physical and mental health, protection from violence and the right to safety, and essentially the right to life, all enshrined in the Universal Declaration of Human Rights. Like all other human rights, it applies to refugees, internally displaced persons and anyone living in humanitarian settings. Prioritizing the needs of women and adolescent girls in emergencies is therefore a human rights imperative and should be at the heart of the response to the humanitarian crisis in Ukraine.

KEY RECOMMENDATIONS TO THE EU

The EU must put SRHR and protection from SGBV at the heart of its response to the crisis, to respond to the SRHR needs of Ukrainian people affected by the war, especially of all women, girls and underserved populations, whether they are in third countries or in EU Member States.

EU EXTERNAL ACTION

CALL FOR UNHINDERED HUMANITARIAN ACCESS TO UKRAINE AND UNCONDITIONAL RESPECT OF INTERNATIONAL HUMANITARIAN LAW (IHL):

- Urge parties to the conflict, especially Russia, to allow the safe and unhindered passage of humanitarian aid within Ukraine, and its safe reception by local actors;
- Urge parties to the conflict, especially Russia, to unconditionally respect IHL and refrain from attacking essential healthcare and other civilian infrastructure, which are critical to ensuring sustained access to healthcare and humanitarian aid.

PRIORITISE FUNDING FOR SRHR CARE, BOTH IN UKRAINE AND IN NEIGHBOURING THIRD COUNTRIES:

- Ensure that all humanitarian response plans, financing and assistance respect human rights and prioritize the SRHR of all women, girls and underserved populations;
- Allocate sufficient funding for comprehensive and non-discriminatory SRH services. The Minimum Initial Service Package (MISP)⁹ for Sexual and Reproductive Health in crisis situations must be a critical component of all EU humanitarian response in Ukraine, including by sending a number of dignity and reproductive health kits in humanitarian packages and convoys to Ukraine and to the neighbouring transit or refugee host countries. The EU and its Member States should also ensure to invest in supply chain and logistics for the SRH supplies required to fully implement the MISP. In particular, Member States should request the inclusion of SRH commodities¹⁰ in the Union Civil Protection Mechanism response;
- Remind all stakeholders that the full MISP is a non-negotiable international standard of care that should be implemented at the onset of every emergency, including in the humanitarian crisis resulting from the conflict in Ukraine, both in Ukraine itself, but also in neighbouring transit or refugee host countries;

- Ensure funding for the transition from MISP interventions to comprehensive roll-out of sexual and reproductive health programming as soon as possible, or within 3-6 months of the onset of a crisis, aiming to shift in time from the phase of distribution of dignity kits and contraceptives to support the healthcare services and efforts at local level;
- Recognise that SRHR services and services to support SGBV survivors are essential and ensure, including through funding and advocacy, that they are accessible in Ukraine and in the neighbouring transit or refugee host countries. This should also encompass essential SRHR services for SGBV survivors, including access to safe abortion care and post-abortion care.

ADDRESS THE SRHR NEEDS OF THE MOST MARGINALISED AND UNDERSERVED, WITHOUT DISCRIMINATION:

- Prioritise, including through funding, the protection of the most marginalised and underserved people¹¹, responding to their SRHR needs and leaving no one behind;
- Ensure access to humanitarian aid and health services, including SRHR services, is guaranteed to all, free from discrimination.

SUPPORT, INCLUDING FINANCIALLY, SRHR AND WOMEN'S RIGHTS ORGANISATIONS PROVIDING FRONTLINE SERVICES TO THE UKRAINIAN POPULATION IN UKRAINE AND MOLDOVA:

- Scale up funding to local and women's rights organisations and enhance funding streams that are either flexible or tailored to enable locally grounded effective interventions and to foster complementarity with multilateral and governmental initiatives.

EU INTERNAL ACTION

For the many women and girls fleeing Ukraine and entering some neighbouring EU Member States, access to sexual and reproductive health (SRH) services, including safe and legal abortion, may be problematic. In Hungary, Romania, Slovakia and particularly in Poland, a range of pre-existing legal and policy restrictions, and economic barriers, are severely hindering access to urgent and essential SRH care (in particular emergency contraception and abortion care, including medical abortion) not only for the local population, but also for those fleeing Ukraine. As a result of the restrictive frameworks in these EU Member States, the MISF is not being fully provided in many settings in these countries. This should be a particular point of attention for the EU¹². Survivors of sexual violence in particular, must have access to urgent SRH care, including abortion care. Forcing them to carry out pregnancies that result from rape would amount to torture or cruel, inhuman or degrading treatment.

ENSURE ACCESS TO THE FULL RANGE OF SRH SERVICES IN TRANSIT AND REFUGEE HOST EU MEMBER STATES:

- **Ensure sufficient funding for comprehensive SRH services** in all transit and refugee host EU Member States, including the MISF, and for protection from SGBV, for all women, girls and other underserved populations fleeing Ukraine. **Pay particular attention to the SRHR needs of Ukrainians refugees, who are in EU Member States that violate women's SRHR (Poland).**
- **Prioritise, including through funding, the protection of the most marginalised and underserved people¹¹**, responding to their SRHR needs without discrimination.
- **Encourage the governments of transit and refugee host EU Member States to prioritise SRHR in their response**, to ensure Ukrainian refugees have access to comprehensive SRH services; and to use all relevant EU funds to this end, notably by requesting the inclusion of SRH commodities¹⁰ in the Union Civil Protection Mechanism response.
- **Immediately facilitate cross-border access to SRH care, notably through telemedicine, and/or transfers to other EU Member States to access SRHR care**, where necessary to overcome national barriers and severe restrictions in transit and refugee host EU Member States. In particular, to access abortion care. Guarantee that people with urgent SRH care can be quickly transferred to other EU Member States, who do provide SRH care, through the EU solidarity mechanism.

DIRECTLY SUPPORT FINANCIALLY CIVIL SOCIETY ORGANISATIONS, PROVIDING FRONTLINE SERVICES TO UKRAINIAN REFUGEES, ESPECIALLY THOSE FOCUSED ON SRHR:

- **Provide rapid, direct, political and financial support to local authorities, civil society organizations (CSOs) and human rights defenders**, who in many contexts are providing most of the frontline support to refugees in transit and host EU Member States¹³. Support to CSOs is essential in all transit and refugee host EU Member States, but **particularly in countries where CSOs are bearing the brunt of the humanitarian crisis**, as central governments are falling short on their humanitarian duty (Poland, Hungary).
- **Provide such support to gender equality, SRHR and women's rights organisations and women human rights defenders (WHRDs)**, in all transit and refugee host EU Member States, but **particularly in countries that impose restrictions on SRHR (Poland).**

IF EU FUNDS GO TO THE GOVERNMENTS OF POLAND AND HUNGARY, ENSURE THAT THEY ARE FULLY AND EFFICIENTLY USED TO RESPOND TO THE NEEDS OF THE UKRAINIAN POPULATION:

- **The risks of mismanagement of EU funds by the Polish and Hungarian governments are high**, given the extremely concerning breaches of the rule of law in these two countries¹⁴. The EU has a legal and moral obligation to mitigate these risks, and to ensure that EU funds reach those who urgently require assistance. The EU should not distribute funds to Member States' governments, without an effective monitoring and accountability mechanism in place.¹⁵

USEFUL RESOURCES

IPPF RESPONSE ON THE GROUND:

Given IPPF EN's deep engagement with national members and partners across Europe, we have quickly been able to connect with Member Associations and collaborative partners on the ground in Ukraine, Moldova, Poland, Hungary, Romania, and surrounding countries to link those fleeing the conflict with critical sexual and reproductive health services as well as provide them with essential items.

IPPF's response will focus on providing sexual and reproductive health and rights support and SGBV services both in Ukraine and neighbouring regions - particularly for those who suffer from systemic barriers in accessing care. IPPF will also support in increasing capacity around safety and security in a conflict environment, a major limiting factor in being able to implement services.

Interventions focus on an SRHR-GBV integrated model that facilitates access to and delivery of SRHR services (MISP) in-person and through virtual and hotline consultation, including contraceptives, STI and HIV care, safe abortion access, clinical management of rape and psychosocial support and GBV mitigation strategies, and the distribution of dignity kits and menstrual hygiene items.

FACTSHEETS, BRIEFINGS AND CALLS TO ACTION:

- Countdown 2030 Europe, **Ukraine crisis: sexual and reproductive health and rights are non-negotiable and lifesaving**, March 2022
- 90+ international and national organisations urge the EU, Member States, and the international community to protect the SRHR of Ukrainians fleeing the war, **Call to Action on Ukraine**, March 2022
- **Public letter** from 11 international NGOs to the EU to oppose the unblocking of EU funds to the Polish and Hungarian governments, March 2022

IPPF MEDIA STATEMENTS AND PRESS COVERAGE RELATED TO SRHR:

- IPPF, **Statement on the growing humanitarian crisis in Ukraine** (03.03.22)
- **U.S officials say Russian escalation in Ukraine could lead to Humanitarian crisis** – POLITICO (01.03.22)
- **Ukrainian women's 'lives at risk' by giving birth in bomb shelters with lack of equipment** – The Independent (05.03.22)
- **Humanitarian aid is urgently needed to help the 80,000 babies that will be born in war-torn Ukraine in the next 3 months, say women's health experts** – Business Insider (06.03.2022)
- **The War in Ukraine Is a Reproductive Health Crisis for Millions** – Wired (16.03.2022)

1. **UNHCR, OCHA Ukraine, Relief Web, Ukraine Flash Appeal 2022**
2. IDPs (**58.6% women as of 05.03.22**); Refugees (**90% women and children as of 22.03.22**).
3. UNFPA Ukraine Emergency Situation Report #4.
4. UNFPA Ukraine Emergency Situation Report #4.
5. A maternity and children's hospital in the city of Mariupol has been hit by a Russian air strike on 9th March, causing several deaths, injuries and catastrophic damages to the buildings and medical equipment.
6. UNFPA Ukraine Emergency Situation Report #4.
7. **UNAIDS**.
8. **ILGA Europe**
9. The Minimum Initial Service Package (MISP) for Sexual and Reproductive Health in crisis situations is a series of crucial, lifesaving activities required to respond to the sexual and reproductive health needs of affected populations. It includes a full package of SRHR services, including family planning, maternal and newborn health, contraception, abortion, etc.
10. Including contraception and emergency contraception, STI and HIV treatment, commodities necessary for safe-abortion and post-abortion care services and obstetric and delivery kits for women giving birth, etc.
11. Emergencies have a disparate effect on the poorest and most marginalized or underserved members of a community: women, children and adolescents, as well as the elderly; people of diverse sexual orientations, gender identities and expressions, and sex characteristics; and those with a migrant background or from refugee communities. Their vulnerabilities are compounded, and they face multiple forms of discrimination, as existing inequalities are magnified in times of crises.
12. Council of Europe Commissioner for Human Rights **Statement**, March 2022
13. **Op Ed**, Thank Poles, not government, March 2022
14. Contrary to demonstrating positive reforms the Polish Parliament tried to amend a law to ensure impunity for authorities during the Ukraine crisis. In addition, a **legislative proposal**, attempting to ensure that government officials could not be held accountable for their disposition of emergency funds, was narrowly defeated, by only one vote in the Polish Parliament.
15. **Public letter** from 11 international NGOs to the EU to oppose the unblocking of EU funds to the Polish and Hungarian governments, March 2022; **Public letter** and petition by 41 Polish CSOs, urging the EU not to distribute funds to the Polish government, and to support CSOs instead, March 2022; **Public letter** by S&D, Renew, the Greens/EFA and the Left Groups in the European Parliament



IPPF European Network cares.

We are working through our 30 autonomous national **Member Associations** across Europe and Central Asia so that all women, men, children and young people can lead safe and dignified sexual and reproductive lives, free from harm and discrimination.