



BRIEF

SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR) IS A CLIMATE ISSUE:

Recommendations for U.S. Foreign Policy and Assistance

INTRODUCTION

Climate change¹ is inextricably linked with sexual and reproductive health and rights (SRHR)² and gender equality.³ Any efforts to mitigate and adapt to the impacts of climate change and environmental degradation therefore need to include SRHR and recognize and address systems of inequality, including both the racist and colonial roots of access to sexual and reproductive health and rights and impacts of climate change.^{4,5,6}

The worsening climate crisis is disrupting access to SRHR services, especially for groups that face additional barriers due to race, ability, indigeneity, sexual orientation or gender.^{7,8,9} Yet the solutions to both climate change and SRHR challenges are often couched in terms of individual responsibility

to make a difference—for instance, by using public transportation—rather than changes by systems, governments and industries that can achieve impact at scale.¹⁰ As one of the biggest contributors of climate emissions¹¹ and the largest family planning donor,¹² the United States (U.S.) in particular should take a leadership role in policy reform and industry regulation, in a manner that addresses the harmful impacts of climate change while advancing SRHR.

This brief provides an overview of the connections between climate change and sexual and reproductive health and rights, outlining specific recommendations the U.S. government can take in its foreign policy and assistance that will advance progress on both of these related issues.

CONNECTIONS BETWEEN SRHR AND CLIMATE CHANGE



Extreme weather events and humanitarian crises:

Devastating climate-related events—including floods, hurricanes and uncontrollable fires—continue to shock communities, with low- and middle-income countries (LMICs) facing the earliest and most severe effects.^{13,14} Increasingly, extreme weather is becoming the norm, and these events will continue to create environmentally displaced persons and new humanitarian crises.¹⁵ This has the potential to overwhelm SRHR services, as emergency response teams are largely under-equipped to deal with the interruptions to SRH services¹⁶ or the devastating impacts that an acute economic shock like a weather event can have on SRHR.¹⁷ The impacts can include increases in early, child, and forced marriage; entry into unwanted and/or degrading sex work; and exposure to intimate partner or other gender-based violence.^{18,19,20} From a logistical perspective, loss of access to SRHR goods and services and disrupted continuity of healthcare (including abortion, contraceptive coverage, HIV care or gender-affirming hormone therapy) create multi-generational setbacks in the advancement of SRHR and the disruption of poverty.²¹ Women and girls are especially vulnerable in these circumstances and experience more dangerous antenatal and birthing conditions.²² Overall, women who experience climate-related disasters are likely to have shortened life expectancy and are more likely to face mortality.²³



Water scarcity:

Climate change is increasingly shifting water availability away from predictable seasonal trends, meaning that established mechanisms for obtaining water are no longer reliable for a growing number of populations. Water scarcity and resulting livelihood insecurity are associated with a tendency to return to harmful gender norms both in division of labor (e.g., collecting water) and in other areas of family and social life that influence women's and girls' SRHR autonomy, such as forced or early marriage.^{24,25} Increasing dependence on less safe water sources, sanitation and water storage practices heightens risk for diseases, including female

genital schistosomiasis, mosquito-borne illnesses (malaria, dengue, and zika) and Listeria—all of which differentially threaten pregnant people.²⁶ Further, girls whose growth is stunted by water-borne and water-related infectious diseases have increased risk for obstructed labor and maternal mortality when they reach adulthood.²⁷



Infectious disease risk changes:

Nearly every type of infectious disease will change its pattern in response to climate change.²⁸ Mosquito-borne diseases that are especially dangerous to pregnant people, including zika virus (ZIKV), malaria, and dengue, fluctuate with extreme climate events. Rainfall and outbreaks will worsen over time.²⁹ For example ZIKV, which can cause congenital disabilities when women become infected before or during pregnancy, is increasingly able to spread to new zones due to climate change. Inequalities in SRHR make ZIKV advisories to avoid pregnancy useless to populations that cannot reliably access birth control or abortion, potentially contributing to worse birth outcomes—unless access to comprehensive SRHR is addressed.^{30,31,32,33} For example, during the 2015-16 ZIKV outbreak in Brazil, vulnerability was strongly associated with race and socioeconomic status, where women of color were at much higher risk of having a child with Congenital Zika Syndrome than white women in the same areas.³⁴

Additionally, risks for sexually transmitted infections, including syphilis, are expected to change as ambient temperatures change—further highlighting the need to include SRHR as part of climate change efforts.³⁵



HIV:

While HIV, as a crisis, has had laudable gains in prevention and treatment, climate change threatens to reverse these gains as vulnerable populations experience risks that increase their exposure to new HIV infections or interruptions to HIV care.^{36,37} Beyond healthcare lapses following acute climate events, new infections can be expected to increase when people, especially women, are confronted with difficult choices

around food and water insecurity. In such cases they may be more willing to face HIV-related risks than they otherwise would, in order to provide for their families. One study found that an estimated 11 percent increase in new HIV cases after periods of rain shortfall reduced income generation.³⁸



Maternal and child health:

Food insecurity, infectious disease and environmental exposures to toxins, polluted air and polluted water can have lifelong implications for both pregnant people and their fetuses. For example, pregnant people are more vulnerable to heat stress, including pregnant workers with few pregnancy-specific labor rights. Epidemiological studies have linked heat and wildfire smoke exposure to premature birth and low birth weight.³⁹ Poor maternal and child health outcomes have also been linked to racial and ethnic disparities which lend to greater exposures to toxins.^{40,41}

IMPLICATIONS

As noted above, climate change will exacerbate negative health and SRHR outcomes if mitigation and response efforts continue to overlook SRHR. These include poorer health outcomes, including lower birth weight babies, decreased life expectancy, increased maternal mortality, increased rates of HIV, and an increase in infectious diseases. Additionally, broader knock-on effects are likely to result. Food insecurity may increase, since providing women with contraceptives allows them to plan for and combat food insecurity for their families by timing their pregnancies according to their own preferences and resources in a given year.^{42,43} Similarly, women's ability to time and space their families has been directly linked to greater workforce participation, earnings, income and savings, and economic growth more broadly.⁴⁴

Ultimately, ensuring access to SRHR promotes resilience of individuals and communities to climate change and its associated impacts, contributing to health, nutrition, and economic well-being, and recognizes that realizing the rights of women and girls is a systemic solution to the inequalities that climate change exacerbates.

RECOMMENDATIONS

The evidence is clear: SRHR is a climate change issue. Thus, as the Biden-Harris administration develops its global climate efforts laid out in the *Executive Order on Tackling the Climate Crisis at Home and Abroad*,⁴⁵ it must include a focus on gender equality, SRHR and the structural impact of colonialism and racism.^{46,47}

The following are a set of actions the administration should take to clearly integrate a focus on SRHR in its global efforts to mitigate and respond to the climate crisis:

- 1. Climate financing:** Commit to gender mainstreaming 100 percent of all climate financing and to targeting gender equality in 20 percent of climate financing, as part of the climate financing plan.^{48,49} Within both funding streams, support for women's rights organizations and Black, Indigenous and People of Color (BIPOC)-led organizations based in lower income countries should be increased, including for humanitarian response to climate disasters.
- 2. Personnel:** Appoint a national gender and climate change lead to support the integration of intersectional gender considerations, including SRHR, into all aspects of White House climate change policy-making and coordination.⁵⁰ Ensure there is both sufficient staff with gender and SRHR expertise, as well as widely-available training for all staff on the intersections of these issues and how to integrate them into climate mitigation and response.
- 3. Nationally determined contribution:** Ensure the effective integration of gender equality considerations and human rights into the U.S.' nationally determined contribution (NDC).⁵¹
- 4. Data and evidence:** Ensure that all climate change efforts disaggregate data by sex, age and other key demographic information specific to the country or region; data on gender equality impacts including SRHR are collected; and that there is investment in research where evidence gaps on the links between SRHR and climate data exist. This should include gaps on impacts to marginalized communities, including racial, ethnic, and religious minorities and LGBTQI+ people.

5. COVID-19 recovery: Take an integrated approach to address climate change, gender equality, and SRHR in COVID-19 response and recovery, and future pandemic prevention plans and actions.

6. Consultation and community engagement: Undertake a consultative process to hear from and design efforts along with impacted communities, especially youth, organizers, women of color and Indigenous people.

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Skye Wheeler, Human Rights Watch (HRW)

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- 2 According to the Guttmacher Institute, SRHR describes a “state of physical, emotional, mental and social well-being in relation to all aspects of sexuality and reproduction, not merely the absence of disease, dysfunction, or infirmity.” [https://doi.org/10.1016/S0140-6736\(18\)30293-9](https://doi.org/10.1016/S0140-6736(18)30293-9).
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