## Joint press statement by

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H.E. Mr. Peter Eriksson, Minister for International Development Cooperation of Sweden
H.E. Ms. Marise Payne, Minister of Foreign Affairs & Minister of Women of Australia
H.E. Mr. Alexander De Croo, Deputy Prime Minister & Minister for Development
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H.E. Ms. Karina Gould, Minister for International Development of Canada H.E Mr. Rasmus Prehn, Minister for Development Cooperation of Denmark H.E. Mr. Ville Skinnari, Minister for Development Cooperation & Foreign Trade of Finland H.E. Mr. Jean-Yves Le Drian, Minister for Europe & Foreign Affairs of France H.E. Ms. Diene Keita, Minister for International Cooperation & Regional Integration of Guinea H.E. Mr. Dag-Inge Ulstein, Minister of International Development of Norway H.E. Ms. Arancha González Laya Foreign Affairs, European Union & Cooperation of Spain H.E. Ms. Liz Sugg, Minister for International Development & the Foreign & Commonwealth Office of the United Kingdom

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## Protecting Sexual and Reproductive Health and Rights and Promoting Genderresponsiveness in the COVID-19 crisis

We, the Mi	nisters of S	South Africa, Sv	weden, Au	stralia,	Belgium	n, Canada	a, Denm	ark, Finland	d, France	e, Guinea,
Norway, th	e United	Kingdom and .				are hon	ored to	issue this į	joint stat	ement on
behalf of th	ne people	and governmer	nts of Aust	ralia, B	elgium,	Bulgaria	, Canada	a, Denmark	k, Finland	d, France,
Germany,	Guinea,	Netherlands,	Norway,	Peru,	South	Africa,	Spain,	Sweden,	United	Kingdom

Humanity is confronted with the unprecedented threat of COVID-19. Around the world, the pandemic is having a devastating impact on health systems, economies and the lives, livelihood and wellbeing of all, particularly older people. Responding effectively to this fast-growing pandemic requires solidarity and cooperation among all governments, scientists, civil society actors and the private sector.

COVID-19 affects women and men differently. The pandemic makes existing inequalities for women and girls, as well as discrimination of other marginalized groups such as persons with disabilities and those in extreme poverty worse and risk impeding the realization of human rights for women and girls. Participation, protection and potential of all women and girls must be at the center of response efforts. These efforts must be gender-responsive and consider different impacts surrounding detection, diagnosis and access to treatment for all women and men.

The restrictive measures designed to limit the spread of the virus around the world, increase the risk of domestic violence, including intimate partner violence. As health and social protection as well as legal systems that protect all women and girls under normal circumstances are weakened or under pressure by the COVID-19, specific measures should be implemented to prevent violence against women and girls. The emergency responses should ensure that all women and girls who are refugees, migrants or internally displaced are protected. Sexual and reproductive health needs, including psychosocial support services, and protection from gender-based violence, must be prioritized to ensure continuity. We must also assume responsibility for social protection and ensure adolescent health, rights and wellbeing during schools closedown. Any restrictions to the enjoyment of human rights should be prescribed by law, and in accordance with international law and rigorously assessed.

We support the active participation and leadership of women and girls at all levels of decision-making, including at community level, through their networks and organizations, to ensure efforts and response are gender-responsive and will not further discriminate and exclude those most at risk.

It is crucial that leaders recognize the central role of Universal Health Coverage (UHC) in health emergencies and the need for robust health systems to save lives. In this context, sexual health services are essential. We recommit to the immediate implementation of the UHC political declaration by all. Funding sexual and reproductive health and rights should remain a priority to avoid a rise in maternal and newborn mortality, increased unmet need for contraception, and an increased number of unsafe abortions and sexually transmitted infections.

Around the world, midwives, nurses and community health workers are essential to contain COVID-19 and they require personal protective equipment. Safe pregnancy and childbirth depend on all these health workers, adequate health facilities, and strict adherence to infection prevention. Respiratory illnesses in pregnant women, particularly COVID-19 infections, must be priority due to increased risk of adverse outcomes. As our national and international supply chains are impacted by this pandemic, we recommit to providing all women and girls of reproductive age with reproductive health commodities. And we call on governments around the world to ensure full and unimpeded access to all sexual and reproductive health services for all women and girls.

We welcome the multilateral efforts, including by the UN, including UNFPA and UN Women, WHO, the World Bank and IMF, and regional development banks, as well as the G7 and G20 declarations, towards a coherent and global response to COVID-19. We encourage them all in their efforts with national governments and other partners to ensure an effective response and assurance of the continuation of essential health services and rights.

We must coordinate our efforts in this global health crisis. We support the UN General Assembly resolution entitled *Global Solidarity to fight COVID-19*. And we encourage all governments, the private sector, civil society, philanthropists and others to join us in supporting the emergency response, particularly in the most vulnerable countries, and to give full effect to the global commitment to universal access to health care.