Covid-19 and the Sustainable Development Goals in Africa – A Reflection

A Presentation at the IUSSP Webinar
On
The Covid-19 Pandemic and Sexual & Reproductive Health in Africa

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Outline

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• What Sexual & Reproductive Health (SRH) isn’t
• SRH and Cognate Sustainable Development Goals (SDGs)
• Where We Were with the SDGs
• Covid-19 Situation Report
• Covid-19 Pathways for Impacting the Gains Made
• Sneak a Peek
• Conclusion
• Thank you
Sexual & Reproductive Health (SRH)

- Transcends the sexual and procreation acts
- Encompasses having access to a range of good-quality information and services that promote the individual population’s reproductive system and its functions and processes (UN, 1994; UN, 2017).
- It includes;
  - Family-planning counselling, information, education, communication and services and access to safe and effective contraceptive methods
  - Education and services for prenatal care, safe delivery, post-natal care, and infant and women's health care
  - Prevention of unsafe abortion and management of the consequences of abortion.
  - Prevention and treatment of reproductive tract infections, sexually transmitted diseases and other reproductive health conditions including infertility
  - Prevention of harmful practices such as female genital mutilation and eradication of gender-based violence
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| Reduce the global maternal mortality ratio to less than 70 per 100,000 live births | Maternal mortality ratio  
Proportion of births attended by skilled health personnel |
| End preventable deaths of newborns and children under 5 years of age | Neonatal mortality rate  
Under-five mortality rate |
| Ensure universal access to sexual and reproductive health-care services | Met modern contraceptive needs  
Adolescent birth rate (aged 10-19 years) per 1,000 women in that age group |
| Achieve universal health coverage | Coverage of essential health services, service capacity and access  
Number covered by health insurance or a public health system per 1,000 population |
<p>| Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries | Health worker density and distribution |</p>
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| Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation | Intimate partner violence  
Sexual violence by non-intimate partner |
| Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation | Proportion of women who were married or in a union before age 15 and 18  
Proportion of girls and women who have undergone female genital mutilation/cutting |
| Ensure universal access to sexual reproductive health and reproductive rights | Proportion of women who make their own decisions regarding sexual relations, contraceptive use and reproductive health care  
Number of countries with laws and regulations that guarantee women’s access to sexual and reproductive health care, information and education |
SRH and SDGs 1, 4, 6 & 10

- **SDG 1 – No Poverty**
  - Socioeconomic status and its implications for SRH, including sex commodification, access and inverse care / the underclass hypothesis

- **SDG 4 – Quality Education**
  - Gender disparity in access and its implications for knowledge of SRH choices

- **SDG 6 – Clean Water & Sanitation**
  - WASH facilities distribution and availability for menstrual hygiene, infant health and even for coitus

- **SDG 10 – Reduced Inequalities**
  - Place inequalities within countries and access to SRH services
State of the SDG Targets (1)

- MMR (per 100,000 livebirths)
- NMR (per 1,000 livebirths)
- AFR (births per 1,000 women ages 15-19)
State of the SDG Targets (2)

- Health Access (%)
- Physician (per 1,000 population)
Sexual Violence as reported here is as reported in the Annual Crime Statistics of the South African Police Service.
As at 30\textsuperscript{th} August, 2020 globally;
- New Cases – 265,888
- Confirmed cases – 24,854,140 (Africa – 1,044,513 / 4.2%)
- Fatalities – 838,924

Confirmed Cases (and deaths) in Africa as of 16\textsuperscript{th} August – Top 10
- South Africa – 583,653 (11,677)
- Nigeria – 48,770 (974)
- Ghana – 42,210 (231)
- Algeria – 38,133 (1,360)
- Kenya – 29,849 (472)
- Ethiopia – 28,894 (509)
- Cameroon – 18,469 (401)
- Cote D’Ivoire – 16,993 (108)
- Madagascar – 13,724 (166)
- Senegal – 12,032 (251)
Pathways for Eroding SDG Gains on SRH

- Reprioritization of public spending
  - Most SRH services are government funded with support from international development agencies.
  - Diverting the funds to R&D to combat Covid-19 and for providing stimulus packages to cushion the economic consequences of Covid-19 means less attention to SRH

- Movement Restriction impacts
  - Access to health facilities for SRH services including antenatal and post-natal care, contraceptives and legalized abortion.
  - It also affects coital frequency and associated pleasure, and intimate partner violence

- Healthcare Services
  - Prioritization of Covid-19 patients with respect to personnel and hospital bed spaces
**Sneaking a Peek into What to Expect**

- Women have died or suffered unsafe births after transport bans in Kenya and 44 other countries – Open Democracy online
- Covid-19 puts Sierra Leone’s expectant mothers at further risk – Mail & Guardian, 20th August, 2020
- Doctors’ exodus looms as international flights resume – Punch Newspaper, Nigeria. 26th August, 2020
- South African Police Service received 87,000 gender-based violence calls during first week of lockdown – Minister of Police, 2nd April, 2020
- After lockdown, Femicide rises in South Africa – Foreign Policy Online
Thank you.