## Ensuring human rights in the provision of contraceptive information and services

**Guidance and recommendations** 



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The following annexes are included as part of this guidance and are available online at www.who.int/reproductivehealth/publications/family\_planning/human-rights-contraception/en/ Annex A Guideline Steering Group Annex B Guideline Development Group Annex C Grade Summaries and Evidence Tables Annex D Health and human rights standards pertaining to contraception



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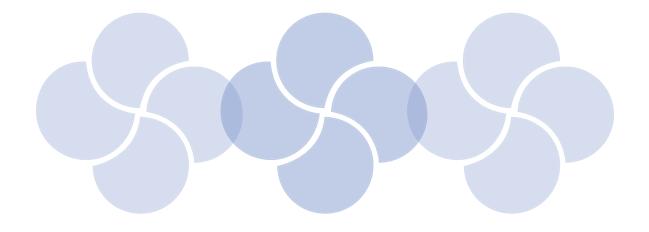
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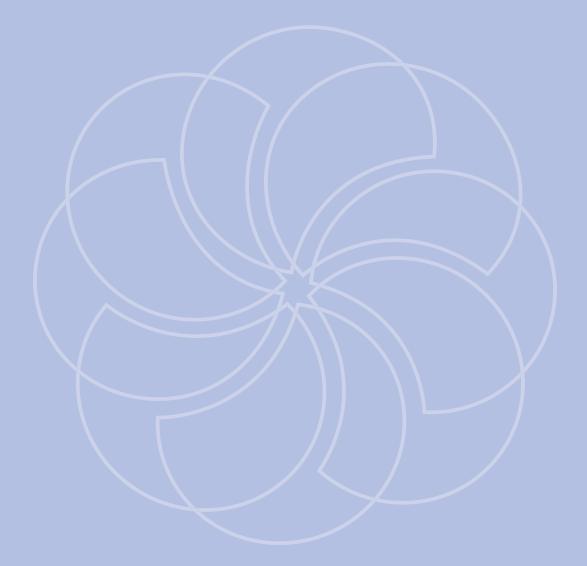
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### Acronyms and abbreviations

CEDAW	Convention on the Elimination of All Forms of Discrimination against Women
CESCR	United Nations Committee on Economic, Social and Cultural Rights
DFID	United Kingdom's Department for International Development
GDG	Guideline Development Group
GRADE	Grading of Recommendations Assessment, Development and Evaluation
HIV	human immunodeficiency virus
ICPD	International Conference on Population and Development
IUD	intrauterine device
LARC	long-acting reversible contraception
MSI	Marie Stopes International
PBF	performance-based financing
PSI	Population Services International
SRH	sexual and reproductive health
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
WHO	World Health Organization





#### **Executive summary**

Unmet need for contraception remains high in many settings, and is highest among the most vulnerable in society: adolescents, the poor, those living in rural areas and urban slums, people living with HIV, and internally displaced people. The latest estimates are that 222 million women have an unmet need for modern contraception, and the need is greatest where the risks of maternal mortality are highest.

The World Health Organization's primary mandate is to provide assistance to its Member States in achieving the goal of the highest attainable standard of health for all, including sexual and reproductive health. Among other interventions, the provision of high-quality contraceptive information and services is essential for achieving this goal. It has been recognized that this cannot be done without respecting, protecting and fulfilling the human rights of all individuals.

International and regional human rights treaties, national constitutions and laws provide guarantees specifically relating to access to contraceptive information and services. In addition, over the past few decades, international, regional and national legislative and human rights bodies have increasingly applied human rights to contraceptive information and services. They recommend, among other actions, that states should ensure timely and affordable access to good quality sexual and reproductive health information and services, including contraception, which should be delivered in a way that ensures fully informed decision-making, respects dignity, autonomy, privacy and confidentiality, and is sensitive to individuals' needs and perspectives.

In order to accelerate progress towards attainment of international development goals and targets in sexual and reproductive health, and in particular to contribute to meeting unmet need for contraceptive information and services, the World Health Organization (WHO) has developed this guideline. WHO standards for guideline development were followed including: identification of priority questions and outcomes; retrieval, assessment and synthesis of evidence; formulation of recommendations; and planning for dissemination, implementation, impact evaluation and updating. A Guideline Development Group, comprising members of an international panel of public health and human rights experts, reviewed and revised the draft recommendations based on the evidence profiles, through a participatory, consensus-driven process. Human rights standards and principles that are directly or indirectly applicable to contraceptive information and services were systematically incorporated.

This guidance is complementary to existing WHO recommendations for sexual and reproductive health programmes, including guidance on maternal and newborn health, sexuality education, safe abortion, and core competencies for primary health care.

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