

Spotlight

on Pandemics and women's sexual and reproductive health

August 2020

Pandemics have historically had a disproportionate impact on women,* including on their sexual and reproductive health and access to health services.¹ For example, in Brazil during Zika, many women, particularly women on low incomes and those in rural and remote areas, were unable to access vital sexual and reproductive health services including contraception,² limiting their ability to exercise their sexual and reproductive rights, as a result of public health measures compounding restrictive gender norms and inequities.³

In 2020, COVID-19 has impacted women's sexual and reproductive health and wellbeing both directly through infection risk and indirectly through pandemic-response planning and measures. There is an opportunity to learn from past pandemics to reduce the impact of the COVID-19 emergency and recovery on women's sexual and reproductive health.

Pregnancy impacts

Past pandemics have been shown to cause adverse pregnancy outcomes including pregnancy loss, prematurity, foetal growth restriction and maternal death.⁴ The Royal Australian College of Obstetricians and Gynaecologists (RANZCOG) acknowledges that although pregnant women do not appear to be more severely unwell if they develop COVID-19, understanding of the impact of the infection on women and their babies is limited by the recency of the disease's emergence.⁵

When outbreaks emerge, particularly for novel diseases, information about their impacts on pregnant woman is slow to emerge, a phenomenon typified by the Zika outbreak in Columbia, Brazil and El Salvador 2016.³ Though data on pregnancy and COVID-19 are incomplete, emerging research has found that pregnancy can increase susceptibility to severe COVID-19.⁶

Health care facilities are often avoided during pandemics due to fear of exposure to the disease. A survey conducted by the Australian College of Midwives (ACM) found that around 30% of respondents reconsidered their birthing venue due to COVID-19, with a major trend towards homebirth options.⁷ ACM reported that inconsistent information and rapid changes were causing additional anxiety and stress for women, many of whom expressed significant concern about giving birth alone.⁷ Consistent, timely advice and messaging that applies a precautionary approach to pregnancy care and the impact of a novel virus helps women and their families seek early advice and make timely decisions.⁸

Impacts on access to sexual and reproductive health services

Evidence from past epidemics, including Ebola and Zika, indicates that efforts to contain outbreaks often divert resources from routine health services including pre- and post-natal health care, and exacerbate often already limited access to sexual and reproductive health services.⁹ Worldwide, reduced access to health care during epidemics and this pandemic magnifies the risk of maternal mortality due to unsafe abortion, postpartum hemorrhage and heart disease.¹⁰ Travel restrictions and advice to stay indoors can reduce access to contraception and abortion services, and have led to staffing shortages in health services.¹¹ Pandemics can also interrupt the supply chain of medical goods, including medications, leading to a shortage of contraceptive methods. This lack of access to contraception and abortion is

* WHV acknowledges that trans men, and people who are gender diverse, non-binary and live with intersex variations may also experience pregnancy and are disproportionately impacted by pandemics

particularly felt by women in rural areas and those who have limited financial means.¹⁰ Experts fear a rise in unplanned pregnancy during COVID-19 as a result of domestic violence, including reproductive coercion.¹² It is also feared that more women seeking abortions will be presenting at later gestations compared to pre-COVID, which can present more cost and complexities for patients and health services.¹³

The economic impact of pandemic responses also impacts family planning decisions. Job loss and financial disadvantage brought on by pandemic response measures can influence women to terminate otherwise wanted pregnancies. Recently, callers have told Women's Health Victoria's sexual and reproductive health referral service *1800 My Options* that they are unable to pay for sexual and reproductive health services due to job loss and financial difficulties. Temporary visa holders in Australia do not have access to Medicare and the government has deemed them ineligible for COVID-19 income support, making healthcare, including for sexual and reproductive health, often unaffordable.¹⁴

Lessons from previous pandemics

While each situation is different, previous pandemics and public health emergencies can provide useful lessons in terms of the risks and unintended consequences of response and recovery measures, including:

- The need for a human rights-based, gendered and intersectional approach to sexual and reproductive health planning for pandemics. Approaches must not assume that women and girls are a homogeneous group and must address other forms of systemic discrimination that overlap with gender inequality, such as racism, ableism and homophobia, in order to reduce barriers to sexual and reproductive health.¹⁵
- Consideration of the impact of an epidemic on reproductive health services from the outset to avoid disruption or loss of confidence in those services.¹⁰ As there will be a lag between the onset of a novel virus and what is known about its impacts on pregnancy and birth outcomes, a precautionary approach should be taken to health advice for pregnant people until more is known. This should be accompanied by a commitment to continually updating guidelines and communications about the impact of the virus on pregnancy as evidence emerges.
- Prioritisation of timely and affordable access to abortion and contraception. During COVID-19, abortion has been classified as an essential health service by Australian governments and medical abortion is able to be accessed via telehealth. However, since 20 July 2020, the COVID rebate has been limited to a patient's regular GP, who is often not the person who will provide a medical termination.^{13,16}
- Investing in research to understand the impact of the pandemic on sexual and reproductive health, especially pregnancy, so that women are informed and can make decisions accordingly, and social supports can be put in place if required.
- Collecting data that is disaggregated by gender and other population characteristics (such as migration status) and using this data to monitor the health and other impacts of the pandemic and response measures on women and men and address any disparities.¹⁷ In the case of Zika, the virus and its long-term impacts are still poorly understood, and the experiences of women have been ignored by governments and health authorities.³

WHV thanks the following expert reviewers for their input:

- Prof Danielle Mazza, Department of General Practice and Director of SPHERE at Monash University
 - Jacque O'Brien, Marie Stopes Australia
-

Overview – COVID-19

[Situational report: Sexual and reproductive health rights in Australia: a request for collaboration and action to maintain contraceptive and abortion care throughout the SARS-COV-2 / COVID-19 pandemic](#) Marie Stopes Australia, 2020

[Statements on contraception and abortion-related issues](#), SPHERE COVID-19 Coalition, 2020

[Sexual and reproductive health in the context of COVID-19 \[Fact sheet\]](#) GENVic, Women's Health Victoria and Women's Health East, 2020

[Early Impacts of the COVID-19 pandemic: findings from the 2020 Guttmacher Survey of Reproductive Health Experiences \[US\]](#) Guttmacher Institute June 2020

[Intersectionality as a lens to the COVID-19 pandemic: implications for sexual and reproductive health in development and humanitarian contexts](#) *Sexual and Reproductive Health Matters*, 2020

[ASHM COVID-19 Taskforce report on sexual health services in Australia and New Zealand](#), Australasian Society for HIV, Viral Hepatitis and Sexual Health Medicine, 2020

Overview – Past pandemics

[The reproductive health fall-out of a global pandemic](#) *Sexual and Reproductive Health Matters*, 2020

[Covid-19 and reproductive health: what can we learn from previous epidemics?](#) *BMJ Opinion*, 2020

[Unheard voices: women's experiences with Zika: the global response](#) Center for Reproductive Rights, 2018

[Zika virus and global implications for reproductive health reforms](#) *Disaster Medicine and Public Health Preparedness*, 2016

[The HIV epidemic and sexual and reproductive health policy integration: views of South African policymakers](#) *BMC Public Health*, 2015

Sexual and reproductive health rights

[COVID-19: what implications for sexual and reproductive health and rights globally? \[Editorial\]](#) *Sexual and Reproductive Health Matters*, 2020

[COVID-19: A gender lens: protecting sexual and reproductive health and rights, and promoting gender equality](#) United Nations Population Fund (UNFPA), 2020

[A gendered human rights analysis of Ebola and Zika: locating gender in global health emergencies](#) *International Affairs*, 2016

[Sexual and reproductive health and rights: integration as a holistic and rights-based response to HIV/AIDS](#) *Women's Health Issues*, 2011

[The AIDS pandemic: a catalyst for women's rights](#) *International Journal of Gynaecology and Obstetrics*, 2006

Pregnancy, childbirth and maternal health – COVID-19

[Women's Experiences of Maternity Care at the Height of COVID-19](#) Australian College of Midwives 2020

[Women should have access to a known birth partner in labour \[Media Release\]](#) Australian College of Midwives, 2020

[Why pregnant women face special risks from COVID-19](#) *Science*, 2020

[COVID-19: why digital maternal health must be addressed now \[Opinion\]](#) Croakey.org, 2020

[Perinatal mental health during the COVID-19 pandemic](#) *Women and Birth*, 2020

[Managing postpartum depression: new moms isolated by coronavirus pandemic](#) *The Conversation*, 2020

Pregnancy, childbirth and maternal health – past pandemics

[Influenza in pregnancy](#) *O & G Magazine*, 2019 – *Spanish flu, H1N1 - Aust. and NZ perspective*

[Immunisation and pregnancy: who, what, when and why?](#) NPS MedicineWise, 2017 – *influenza and whooping cough are the two vaccines routinely recommended for all Australian pregnant women*

[Psychosocial support for pregnant women and for families with microcephaly and other neurological complications in the context of Zika virus](#) World Health Organization, 2016

[Pregnancy and pandemic influenza A \(H1N1\) 2009: Information for programme managers and clinicians](#) World Health Organization, 2010

Fertility and family planning

[Emergency and ongoing contraception in the COVID-19 pandemic](#) *Australian Journal of Pharmacy*, 2020

[IVF sector in limbo as coronavirus crisis threatens to shut down infertility industry](#) *The Age*, 2020

[Opinion: How will COVID-19 affect global access to contraceptives: and what can we do about it?](#) Devex 2020

[Half a million fewer children? the coming COVID baby bust](#) Brookings Institute, 2020

[Access to contraception in the context of Zika: health system challenges and responses](#) *Obstetrics and Gynecology*, 2017

[Family planning and HIV: strange bedfellows no longer](#) *AIDS*, 2012

Abortion

[Abortion in the context of COVID-19: a human rights imperative](#) *Sexual and Reproductive Health Matters*, 2020

[COVID-19 abortion bans and their implications for public health](#) *Perspectives on Sexual and Reproductive Health*, 2020

[Self-managed abortions should be universally available \[Opinion\]](#) *The Conversation*, 2020

[Zika, abortion and health emergencies: a review of contemporary debates](#) *Globalization and Health*, 2019

[Could there be a silver lining to Zika?](#) *Contexts (American Sociological Association)*, 2017

Violence

[Sexual and reproductive health, violence and coercion during COVID-19](#) *Medium. Coronavirus Blog* 2020 – by Marie Stopes Australia

[Impact of the COVID-19 pandemic on family planning and ending gender-based violence, female genital mutilation and child marriage](#) UNFPA, 2020

Policy

[Expansion of telehealth services \[Media Release\]](#) Australia. Department of Health 2020 and [Temporary Telehealth bulk-billed items for COVID-19](#) MBS Online 2020 - *obstetrics, midwifery cited*

[Ten things State policymakers can do to protect access to reproductive health care during the COVID-19 pandemic \[US\]](#) Guttmacher Institute, 2020

[The importance of gender in emerging infectious diseases data](#) *Measure Evaluation*, 2017

Disaster and humanitarian response

[Programmatic guidance for sexual and reproductive health in humanitarian and fragile settings during COVID-19 pandemic](#) Inter-Agency Working Group on Reproductive Care in Crises, 2020

[In a state of crisis: meeting the sexual and reproductive health needs of women in humanitarian situations](#) *Guttmacher Policy Review*, 2017

Alternative modes of healthcare delivery

[Q&A: Self-care interventions for sexual and reproductive health and rights \(SRHR\) and COVID-19](#) World Health Organization, 2020

[WHO consolidated guideline on self-care interventions for health: sexual and reproductive health](#) World Health Organization, 2019.

References

1. UNFPA (2020) [COVID-19: A gender lens: protecting sexual and reproductive health and rights, and promoting gender equality](#) United Nations Population Fund (UNFPA), New York. 19 March.
2. Diniz D, Ali M, Ambrogi I, Brito L (2020) [Understanding sexual and reproductive health needs of young women living in Zika affected regions: a qualitative study in northeastern Brazil](#) *BMC Reproductive Health* 17(1):22.
3. Center for Reproductive Rights, Harvard T. H. Chan School of Public Health and Yale Law School and Yale School of Public Health (2018) [Unheard voices: women's experiences with Zika: the global response](#) Center for Reproductive Rights, New York.
4. Hussein, J (2020) [COVID-19: what implications for sexual and reproductive health and rights globally?](#) [Editorial] *Sexual and Reproductive Health Matters*, 28:1.
5. RANZCOG (2020) [A message for pregnant women and their families: COVID-19 Statement](#) The Royal Australian and New Zealand College of Obstetricians and Gynaecologists, Melbourne. 29 April.
6. Wadman M (2020) [Why pregnant women face special risks from COVID-19](#) *Science*, Vol 369 (6504), pp 606-607. 7 August.
7. Cooper M, King R (2020) [Women's Experiences of Maternity Care at the Height of COVID-19](#) Australian College of Midwives, Canberra. 6 July.
8. Black B, McKay G (2020) [Covid-19 and reproductive health: what can we learn from previous epidemics?](#) *BMJ Opinion*. 19 March.
9. Smith J (2019) [Overcoming the 'tyranny of the urgent': integrating gender into disease outbreak preparedness and response](#) *Gender and Development* 27:2, pp 355-369.
10. Thorne JG, Buitendyk M, Wawuda R et al (2020) [The reproductive health fall-out of a global pandemic](#) *Sexual and Reproductive Health Matters*, 28:1.
11. Melville C, O'Brien J, Corbin B (2020) [Sexual and reproductive health, violence and coercion during COVID-19](#) *Medium*. 11 June.
12. MacLennan L (2020) [SA reproductive rights experts worried coronavirus is creating more barriers to abortion](#) *ABC Online*. 1 April.
13. Marie Stopes Australia (2020) [Situational report: Sexual and reproductive health rights in Australia: a request for collaboration and action to maintain contraceptive and abortion care throughout the SARS-COV-2 / COVID-19 pandemic](#) Marie Stopes Australia (Marie Stopes International), Melbourne. 24 July.
14. Gender Equity Victoria, Women's Health Victoria, Women's Health East (2020) [Factsheet: Sexual and reproductive health in the context of COVID-19](#) Melbourne. 17 June.
15. Lokot M, Avakyan Y (2020) [Intersectionality as a lens to the COVID-19 pandemic: implications for sexual and reproductive health in development and humanitarian contexts](#) *Sexual and Reproductive Health Matters*, 28:1.
16. Rushton G (2020) [The government has improved abortion access during the pandemic. Doctors are fighting to keep it that way](#) *Crikey*. 8 July.
17. Measure Evaluation (2017) [The importance of gender in emerging infectious diseases data](#) Measure Evaluation, North Carolina, USA.

Produced by Women's Health Victoria 2020

GPO Box 1160 Melbourne, Victoria 3001 - Phone: [+61 3 9664 9300](tel:+61396649300)

Email: library@whv.org.au - Website: www.whv.org.au

Women's Health Victoria acknowledges the support of the Victorian Government.

[Subscribe here](#) to receive future Spotlight series titles.
