



## Sexual and Reproductive Health Position Statement

### Definition

Sexual and reproductive health is a holistic and multidimensional issue that has a defining impact on women from puberty to post-menopause. 'It is an important factor in shaping how women develop and maintain meaningful interpersonal relationships; appreciate their bodies; interact with others; express affection, love, and intimacy; and by choice, bear children' (Women's Health Victoria, 2013).

Sexual health is not merely the absence of disease, dysfunction or infirmity; it requires a positive and respectful approach to sexuality and sexual relationships, as well as the possibility of having pleasurable and safe sexual experiences, free of coercion, discrimination and violence (World Health Organisation, 2006).

Reproductive health addresses the reproductive processes, functions and system at all stages of life and therefore, implies that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so (International Conference on Population and Development, 1994).

Women's Health In the North recognises that sexual and reproductive health (SRH) is a vital aspect of women's health and wellbeing. Data for the northern metropolitan region of Melbourne (NMR) indicates that:

- Five LGA's had birth rates for 15-19 year old women higher than the Melbourne average (Department of Education and Early Childhood Development, 2014).
- Five LGA's have a prevalence of hepatitis B higher than the Victorian rate (Australasian Society for HIV Medicine & Victorian Infectious Diseases Reference Laboratory, 2013).
- Four LGA's have fertility rates higher than the Victorian average (Australian Bureau of Statistics, 2013).
- Four LGA's have lower Pap screening participation rates than Victorian average (Victorian Cervical Cytology Registry, 2012).
- Four LGA's have HPV vaccination coverage rates lower than the Victorian average (National HPV Vaccination Program Register, 2014).
- Two LGA's have had significant increases in birth numbers in the past five years (Australian Bureau of Statistics, 2013).
- There were 2946 cases of chlamydia diagnosed in the NMR in 2013 which is a 17% increase since 2010. Women experienced 53% of these cases and 60% of the women diagnosed were less than 25 years old. Yarra had a female chlamydia rate of 563.92 per 100,000 women which is significantly higher than the Victorian rate of 391.5 per 100,000 (Victorian Department of Health Communicable Disease Epidemiology and Surveillance, 2014).

For further information please refer to *Going South in the North: A snapshot of the sexual and reproductive health status of women living in Melbourne's northern metropolitan region* available from [www.whin.org.au](http://www.whin.org.au).

### Priorities

Given the above data WHIN's work will focus on the following areas of sexual and reproductive health:

- teenage pregnancy
- chlamydia
- hepatitis B
- HPV vaccination
- Pap screening
- family planning services including contraception and termination

Young women aged 12-24 years have been selected as the priority population target group.

## Our Vision

WHIN has **Sexual and Reproductive Health** as a health promotion priority and is committed to advocating for a northern metropolitan region where:



- Women and service providers are educated about, and have a developed understanding of, women's sexual and reproductive health.
- Sexual and reproductive health services are appropriate and accessible.
- Women are free to express their sexuality without experiencing ill health, discrimination or abuse.

## Action Plan 2014-2016

1. Engage with women and communities to facilitate, influence and support positive change to their health, safety and wellbeing.
  - Establish and resource a regional sexual and reproductive health network.
  - Actively influence SRH policy, planning and program of regional partners.
  - Consult with young women to capture their personal experiences of SRH issues and service access.
2. Build and maintain a picture of the SRH status of women living in the NMR.
  - Conduct a service mapping activity to determine clinical, education and support services currently available to NMR women and to identify service gaps.
  - Collect, maintain and analyse data to create an ongoing gendered picture of the SRH status of NMR women.
3. Develop a shared regional understanding of women's sexual and reproductive health needs
  - Engage, consult and educate key stakeholders about women's SRH.
  - Develop resources to support knowledge translation and development across the NMR.
  - Develop and implement strategies which support SRH programs and services in the NMR.
4. Continue to advocate for the elimination of FGC
  - Deliver and resource the *Girls Talk Health* sexuality education program young people across the NMR.
  - Deliver professional development for health practitioners to develop awareness of the practice and capacity to respond with culturally sensitive clinical care.
  - Develop and deliver community education and resources on the issue of FGC.

WHIN will work to improve NMR women's sexual and reproductive health by providing leadership; building strategic partnerships; undertaking research, resource development and workforce development; and engaging with women and communities.

## Our Approach

WHIN's work is underpinned by a feminist and human rights approach. Strategies draw on health promotion, community development and social change approaches and theories. Women's Health In the North works from primary prevention to response.

WHIN acknowledges that women's sexuality is often influenced by societal, gender or cultural norms which can have negative implications on their sexual and reproductive health. Women need to be free to express their sexuality in a way that is consensual, pleasurable, with their partner of choice and safe from STIs and unplanned pregnancy.

## Key Messages

- Women should be free to express their sexuality without experiencing ill health, discrimination or abuse.
- Health services providing comprehensive sexual and reproductive health services including contraception, STI and Pap testing and termination services need to be affordable, appropriate and accessible for women in the north.
- Choosing when or if to reproduce is a woman's right. Women need to be empowered to safely access methods of contraception as well as termination services.
- The majority of sexual assault victims are women. Further work to establish gender equality and the prevention of violence against women needs to occur.
- Sexuality and respectful relationships education is crucial. Young people need to be acknowledged as sexual beings and provided with the information and skills to negotiate and form healthy relationships.
- WHIN believes that primary prevention strategies must be informed by the lived experiences of women.

Women need to have **voice, choice** and **power** in maintaining positive sexual and reproductive health.

## References

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