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*Liberté
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France's international strategy for sexual and reproductive health and rights



2023-2027

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+ 25 million
unsafe abortions
are performed **each year**

+ 40% of women
of childbearing age
live in countries **with restrictive**
laws

6 out of 10
unintended
pregnancies
end in an **induced abortion**

1 woman dies
every 2 minutes
due to pregnancy or childbirth
complications

At least
200 million girls
and women
now between the ages of 15 and
49 have undergone female **genital**
mutilation

31 countries
still **practice** genital mutilation
of young girls

Almost
214 million women
do not have access to **effective**
contraception

66% of
young people
have inadequate knowledge of
HIV prevention and transmission

In some countries,
2 out of 3 girls
don't know what is happening
to them when they **begin**
menstruating

Introduction

In 2016, France adopted its first strategy on Sexual and Reproductive Health and Rights (SRHR), convinced that it is an essential prerequisite for gender equality and women's empowerment.

The challenges women face in having the freedom to control their own bodies, with sometimes even the outright denial of their rights, have a dramatic impact on their lives worldwide. The World Health Organization (WHO)¹ estimates that around 830 women die every day from preventable causes related to pregnancy and childbirth, with 94% of all maternal deaths occurring in low and lower middle-income countries. Unsafe abortions² are one of the leading causes of maternal death and morbidity.³ Similarly, every year, 70,000 adolescent girls die as a result of complications related to pregnancy and childbirth, even though 70% of maternal deaths are preventable.

Since 2018, with the active contribution of civil society, France has recognized and adopted the Guttmacher-Lancet Commission's definition of sexual and reproductive health as "a state

of physical, emotional, mental and social wellbeing in relation to all aspects of sexuality and reproduction, not merely the absence of disease, dysfunction or infirmity". This positive approach to sexuality and reproduction recognizes sexual relationships as sources of pleasure, based on trust and communication to promote self-esteem and overall wellbeing. All individuals have a right to make decisions about their bodies and to access services that support that right.

Recognized as a driving force for the development of a sustainable, equal, equitable and inclusive society, **SRHR are considered the keystone of the emancipation of all individuals, especially women and girls.** By supporting the exercise of human rights and giving everyone, including woman and girls, the freedom to make informed decisions about their bodies and access to high-quality sexual and reproductive health services, **France is helping to foster a virtuous circle that strengthens sustainable development.**

Therefore, as part of its feminist foreign policy, France has positioned itself as a leader of the Generation Equality Forum (GEF) Action Coalition on Bodily Autonomy and SRHR. The GEF celebrated the 25th anniversary of the 1995 Beijing Conference and

1. [who.int/en/news-room/fact-sheets/detail/maternal-mortality](https://www.who.int/en/news-room/fact-sheets/detail/maternal-mortality)

2. [who.int/en/news-room/fact-sheets/detail/abortion](https://www.who.int/en/news-room/fact-sheets/detail/abortion)

3. The total number of people who have a disease in a population at a given time.

launched a five-year action plan for gender equality. France regularly works to promote these issues through its international advocacy and feminist foreign policy.⁴

In response to the challenges and issues that threaten women's rights (rise in conservatism and rollback of abortion rights and SRHR, especially in emergency situations), **France is committed to promoting ambitious measures that embody its universal values of human rights, individual freedoms and justice for all, with particular focus on women, girls and LGBT+ people.**

France aims to maintain an environment that prioritizes SRHR by stepping up its political advocacy and fulfilling its significant financial commitments announced at the GEF. This document has two main objectives:

- **External:** to advance France's commitment to and influence on SRHR issues;
- **Internal:** by fostering a deeper understanding of SRHR issues and continuing the work carried out under the previous strategy with the French diplomatic network, all staff of the Ministry for Europe and Foreign Affairs (headquarters and diplomatic posts), and its agencies.

France will champion:

- Access to high-quality sexual and reproductive health services and products;
- Support for social and behavioural change: supporting comprehensive sexuality education and transforming masculinities;
- Access to safe abortion: promoting a favourable ecosystem;
- The fight against harmful practices and sexual and gender-based violence;
- Equality and access to rights for LGBT+ people;
- Access to sexual and reproductive health and rights in emergency situations.

4. diplomatie.gouv.fr/en/french-foreign-policy/feminist-diplomacy/

Part 1

Background and issues relating to sexual and reproductive health and rights

Chapter 1

From the emergence of SRHR issues to their institutional recognition

Historical background to the emergence of SRHR

Initially associated with the concept of “personal hygiene”, sexual health has evolved in recent years to become first a public health issue, and then a societal concern and a political battle.

In the 20th century, a demographic approach focusing on birth control and population regulation became less prominent, **giving way to a rights-based approach**. The feminist movements of the 1970s and the global fight for women and girls’ rights embedded the concept of sexual health in a positive view of sexual life based on control over sexuality and wellbeing. Recognition of the **link between sexual health and human rights** led to the “politicization” of sexual issues in the public sphere. Sexual health, perceived as a “state of wellbeing”, became associated with the concept of the “individual right to wellbeing”.

Respect for sexual rights as an essential condition for access to sexual and reproductive health finally gained acceptance in international forums in the 2000s. **Social and political factors became key determinants of health and wellbeing. The right to control one’s own body – bodily autonomy – and individual freedom took root.** In France, these issues began to emerge in the 1970s with the struggle for access to contraception and abortion.

Recognition of gender identity and sexual orientation issues as part of SRHR

The final stage in the definition of SRHR was the opening up of these rights to the lesbian, gay, bisexual and transgender+ (LGBT+) community. This became possible with the removal of homosexuality from the list of mental disorders in the WHO’s International Classification of Diseases (ICD) on 17 May 1990. However, it was not until

2018 that the subject of gender identity and transgender people was removed from the list of mental disorders and included in a chapter on sexual health. The eleventh revision of the ICD came into force in 2022.

The adoption of the **Principles on the Application of International Human Rights Law in relation to Sexual Orientation and Gender Identity**,⁵ known as the Yogyakarta Principles, presented to the United Nations Human Rights Council on 26 March 2007, was an essential step towards protecting and promoting LGBT+ rights through international legal principles.

In 2008, France and the Netherlands presented the Declaration on Human Rights and Sexual Orientation and Gender Identity at the 63rd session of the United Nations General Assembly (UNGA), which was supported and endorsed by 68 countries – more than one third of members. **This was the first time in the history of the UNGA that countries from every continent spoke out against human rights violations based on sexual orientation and gender identity.**

5. yogyakartaprinciples.org/principles-en



WORLD HEALTH ORGANIZATION DEFINITIONS¹

Sexual health

Sexual health is defined as “a state of physical, emotional, mental and social wellbeing in relation to sexuality; it is not merely the absence of disease, dysfunction or infirmity.

Sexual health 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. For sexual health to be attained and maintained, the sexual rights of all persons must be respected, protected and fulfilled” (WHO, 2006)

Sexual rights

“The fulfilment of sexual health is tied to the extent to which human rights are respected, protected and fulfilled. Sexual rights embrace certain human rights that are already recognized in international and regional human rights documents and other consensus documents and in national laws. Rights critical to the realization of sexual health include:

- the rights to equality and non-discrimination;
- the right to be free from torture or cruel, inhumane or degrading treatment or punishment;
- the right to privacy;
- the rights to the highest attainable standard of health (including sexual health) and social security;
- the right to marry and to found a family and enter into marriage with the free and full consent of the intending spouses, and to equality in and at the dissolution of marriage;
- the right to decide the number and spacing of one’s children;
- the rights to information, as well as education;
- the rights to freedom of opinion and expression;
- the right to an effective remedy for violations of fundamental rights.

The responsible exercise of human rights requires that all persons respect the rights of others.” (WHO, 2006, updated in 2010).

1. WHO definition, WAS, 2000, 10



YOGYAKARTA PRINCIPLES: DEFINITION OF SEXUAL ORIENTATION AND GENDER IDENTITY

Human Rights Council, 2007

Sexual orientation is understood to refer to each person's capacity for profound emotional, affectional and sexual attraction to, and intimate and sexual relations with, individuals of a different gender or the same gender or more than one gender.

Gender identity is understood to refer to each person's deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth, including the personal sense of the body (which may involve, if freely chosen, modification of bodily appearance or function by medical, surgical or other means) and other expressions of gender, including dress, speech and mannerisms.

Institutionalization and standardization of SRHR in the international context

At the same time, these conceptual developments underwent a process of institutionalization and standardization, gradually being incorporated into international texts and action programmes recognized by governments and supported by civil society, including human rights and feminist movements. The contribution of civil society was instrumental in developing an understanding and definition of SRHR, and in establishing standards and agreed terminology. This should therefore be considered the "agreed minimum". By conducting active advocacy with governments, civil society ensured the inclusion of its policy positions in bilateral and multilateral forums and national public policies.

For an overall understanding, the **MOOC⁶ "Genre et développement"⁷ ["Gender and Development", available in French only], created by the Agence française de développement (AFD), Expertise France, and the Ministry for Europe and Foreign Affairs (MEAE),** maps out the major stages in the development of SRHR.

6. Massive Open Online Course.

7. mooc-campus.afd.fr/enrol/synopsis/index.php?id=2 [in French]

The founding international conferences

1993

Vienna Declaration and Programme of Action of the World Conference on Human Rights¹

The first text to refer explicitly to sexuality as “a central aspect of being human throughout life”.

1994

International Conference on Population and Development (ICPD)², Cairo

A programme of action is established recognizing the right to sexual and reproductive health, gender equality and women’s empowerment as essential for achieving development. The ICPD applies a human rights-based approach. The principle of free choice and respect for women’s rights becomes a central part of public policy, putting an end to the demographic and population control approach.

Socio-economic development must now consider the sexual and reproductive health rights of women and men without discrimination, regardless of age, marital status or other circumstances. Enforcing these rights means ensuring widespread access to information on sexual and reproductive health and good quality family planning services.

1995

Beijing Declaration and Platform for Action³

A significant step asserting that gender equality and women’s empowerment are essential conditions for sustainable development, peace and democracy.

The defence of women’s rights and gender equality must include access to education and healthcare, and the elimination of all forms of violence through a holistic and cross-disciplinary approach. Women’s right to control their own fertility is recognized as a key element to enable them to achieve true empowerment.

2015

Sustainable Development Goals⁴

SRHR, and more generally gender equality, is established as a Sustainable Development Goal (SDG).

However, the definition adopted by the SDG remains limited to that developed at the Cairo Conference. Sexual rights, safe abortion, sexual orientation and gender identity issues, and comprehensive sexuality education, are excluded from the 2030 Agenda due to strong opposition from some countries.

2021

Generation Equality Forum

The GEF, a new international movement based on strong commitments to women and girls’ rights, makes SRHR a priority for achieving gender equality.

1. [ohchr.org/en/about-us/history/vienna-declaration](https://www.ohchr.org/en/about-us/history/vienna-declaration)
2. [un.org/en/conferences/population/cairo1994](https://www.un.org/en/conferences/population/cairo1994)
3. [un.org/womenwatch/daw/beijing/pdf/BDPfA%20E.pdf](https://www.un.org/womenwatch/daw/beijing/pdf/BDPfA%20E.pdf)
4. [agenda-2030.fr/en/the-17-goals/](https://www.agenda-2030.fr/en/the-17-goals/)



THE GENERATION EQUALITY FORUM AND THE ACTION COALITION ON BODILY AUTONOMY AND SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

The Generation Equality Forum (GEF)¹ was held in Paris from 30 June to 2 July 2021. Convened by UN Women and organized jointly by the governments of France and Mexico, the conference launched new international impetus based on strong commitments to the rights of women and girls, 26 years after the 1995 Beijing Conference.

GEF established an ambitious five-year roadmap for the six action coalitions on various themes relating to women and girls' rights and gender equality. Nearly US\$40 billion was pledged through the Global Acceleration Plan to advance gender equality worldwide.

As co-champion of this coalition alongside 15 other actors, France made a series of commitments on priority issues, including substantial progress in the promotion and accessibility of SRHR for all by 2026: "Women and girls in all their diversity are empowered to exercise their sexual and reproductive health and rights (SRHR) and make autonomous decisions about their bodies free from coercion, violence, and discrimination. SRHR information, education and services are freely available, accessible, acceptable and

of high quality. Girls, women's and feminist organizations and networks and their allies are strengthened to advance SRHR. More governments promote, protect, enforce and invest in SRHR, including as part of Universal Health Coverage. Working across Action Coalitions, with multiple stakeholders and at all levels, we transform gender and social norms, promote gender equality applying an intersectional, intercultural, human rights-based approach and improve SRHR outcomes, leaving no one behind."

This action coalition mobilizes governments, civil society, youth-led organizations, international and intercultural organizations, philanthropic foundations, and the private sector to deliver transformational progress through four concrete actions:

1. Expand comprehensive sexuality education;
2. Increase the availability, accessibility, acceptability and quality of comprehensive abortion and contraception services;
3. Increase SRHR decision-making & bodily autonomy;

1. forum.generationequality.org/

4. Strengthen girls, women's and feminist organizations and networks to promote and protect bodily autonomy and SRHR.

The European Union has also been a catalyst for collective action, making commitments

to gender equality a priority. The European Commission,² in its role as co-leader of the Action Coalition on Gender-Based Violence, participated in and contributed to the development of the "Global Acceleration Plan".

2. dashboard.commitments.generationequality.org/map



SRHR issues within EU and UN frameworks

The European Union (EU) has a robust policy framework on **SRHR and rights relating to sexual orientation and gender identity**.

The EU has adopted a new Action Plan on Human Rights and Democracy 2020-2024, which includes the promotion of SRHR. **The European Commission is also implementing the third Gender Action Plan (GAP III)⁸ for 2021-2025, published by the Presidency of the Council and endorsed by 24 EU Member States.**



SRHR IN THE SUSTAINABLE DEVELOPMENT GOALS

Goal 3 : Ensure healthy lives and promote wellbeing for all at all age.

3.1 By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births.

3.7. By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes.

Goal 5 : Achieve gender equality and empower all women and girls.

5.3. Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation.

5.6. Ensure universal access to sexual and reproductive health and reproductive rights as agreed in accordance with the Programme of Action of the International Conference on Population and Development and the Beijing Platform for Action and the outcome documents of their review conferences.

GAP III aims to promote gender equality and women and girls' empowerment in all EU external action by focusing on key areas of engagement, including SRHR. It also specifies that, by 2025, 85% of all new external actions will contribute to gender equality, in particular by adopting a cross-cutting approach to gender issues in all sectors and taking targeted action on these issues. The EU's new Neighbourhood, Development and International Cooperation Instrument (NDICI – Global Europe), with an overall budget of €79.5 billion for the period 2021-2027, also stipulates that 85% of actions financed must have gender equality as a principal or significant objective, and 5% of actions must have gender equality as a principal objective.

Lastly, the "New European Consensus on Development",⁹ adopted in 2017, **fully integrates SRHR by incorporating part of the ambitious language on these issues in Article 34**, which is now agreed language and a reference within a European framework.

8. consilium.europa.eu/en/press/press-releases/2020/12/16/gender-action-plan-iii-presidency-issues-conclusions-welcoming-an-ambitious-agenda-for-gender-equality-and-women-s-empowerment-in-eu-external-action
eeas.europa.eu/sites/default/files/overview_-_clip-gap_iii_burundi.pdf [in French]

9. op.europa.eu/en/publication-detail/-/publication/ca80bb57-6778-11e7-b2f2-01aa75ed71a1



REGIONAL FRAMEWORK ESTABLISHED BY THE AFRICAN UNION: MAPUTO PROTOCOL

Adopted in 2003, the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa (Maputo Protocol)¹ was a major step forward for women and girls' sexual and reproductive rights in Africa. It recognizes access to abortion (under certain conditions) as a right to which women must have unrestricted access: Article 14 of the Protocol calls on States to "take all appropriate measures to protect the reproductive rights of women by authorizing medical abortion in cases of sexual assault, rape, incest, and where the continued pregnancy

endangers the mental and physical health of the mother or the life of the mother or the foetus."

Although this unique agreement has been signed by 49 countries and ratified by 37, its effective implementation is still far from a reality. The African Union is responsible for implementing and monitoring the document in conjunction with governments and civil society organizations.

1. [ohchr.org/sites/default/files/Documents/Issues/Women/WG/ProtocolontheRightsofWomen.pdf](https://www.ohchr.org/sites/default/files/Documents/Issues/Women/WG/ProtocolontheRightsofWomen.pdf)

Finally, in order to complete the picture of the key institutional players involved in SRHR, it is essential to mention the United Nations Population Fund (UNFPA)¹⁰, which is the United Nations agency responsible for sexual and reproductive health and rights issues.

UNFPA advocates the extension of reproductive rights to all and promotes access to a wide range of sexual and reproductive health services, including voluntary family planning, maternal healthcare and comprehensive sexuality education.

10. United Nations Population Fund (UNFPA)

Chapter 2

A fragile international context: the challenges facing SRHR

Difficulty obtaining recognition and political and financial monitoring

While tangible progress has been made in recognizing and promoting women and girls' rights in recent years, developments remain slow and fragile. There are many challenges in incorporating these rights into national legislation, such as the right to safe abortion, the allocation of dedicated funding by governments, and the reversal of national policies.

Besides political reluctance, these challenges can be attributed to a lack of awareness and recognition of the issues due to the **limited representation of young people, women and LGBT+ people in political decision-making bodies at national, regional and international levels.**

At the same time, global resources allocated to meet sexual and reproductive health needs remain inadequate. The integration of sexual

and reproductive health programmes into national public policies is still fragile, **despite ongoing efforts to include SRHR in the essential healthcare package as part of universal health coverage.**

The rise of conservatism and anti-choice movements

Although gender equality and SRHR are now recognized as fundamental rights in international texts, there has been a **rise in tensions** around these issues in recent years. This is particularly due to the rising influence of conservative, reactionary, often patriarchal and sometimes religious forces, which oppose the recognition of these rights.

Often described by their critics as "cultural" or "moral" issues, gender equality and SRHR are central to conflicting views on a range of social issues, including what belongs or pertains to the public or private sphere, family and the traditional or expected



Gender Equal Health and Care Workforce Initiative¹

The Government of France, the World Health Organization and the NGO Women in Global Health joined forces in 2021, the International Year of Health and Care Workers, to launch the Gender Equal Health and Care Workforce as part of the Generation Equality Forum.

This initiative aims to promote the implementation of measures in the health and care sector supporting safe and decent jobs for women, the elimination of unpaid and underpaid work, equal and fair employment opportunities, an end to violence and harassment, and the equal participation of women and men

in management and decision-making processes in these sectors.

Fifteen countries, six international organizations and sixteen civil society organizations have joined the initiative and are committed to working to reduce gender inequality in the health and care sector. All countries are invited to join this initiative and adopt one of the objectives for implementation at national level.

1. diplomatie.gouv.fr/en/french-foreign-policy/development-assistance/priority-sectors/health/news/article/global-health-gender-equality-launch-of-the-initiative-on-the-position-of-women

role of women and girls, education, science and religion. **These conflicts can be found at all levels, and especially in international forums where negotiations are becoming increasingly challenging. They also exert greater influence on the European stage.**

These conflicts have been strengthened in recent years by the rise of anti-choice movements organized and largely financed by ultraconservative and religious groups of various denominations worldwide. One example is the “Geneva Consensus Declaration”, which opposes abortion and advocates a return to traditional family roles as the foundation of society. These movements promote a “return to the natural order” and family values, and specifically oppose the right to abortion, contraception and sexuality education, as well as issues related to gender identity and sexual orientation. In recent years, they have gained a foothold in the institutional landscape by deploying significant

communication and lobbying resources aimed at government representatives and within the public and political sphere.

Progress hampered by humanitarian, climate and health crises

Progress is still very slow for women and girls globally, and any advances made are undermined by **health crises, economic downturns, climate change, humanitarian crises and global conflicts, all of which are likely to intensify in the coming years. These events have a disproportionately severe impact on women and girls.** As a result, access to essential services is often disrupted, starting with education and healthcare. In order to limit the erosion of their rights, freedoms and living conditions, **their specific needs and interests need to be considered and addressed in the responses provided by humanitarian actors.**

Sexual and reproductive health is a **key issue in times of crisis**: it is imperative to facilitate access to standard and emergency contraception, safe abortion, and sexual, reproductive, maternal, newborn and child healthcare. Similarly, **menstrual health is an essential aspect of wellbeing**.

Difficult access to menstrual products and sanitation facilities, the lack of private spaces, and the taboos and ever-present stigma make managing menstruation all the more difficult. All these factors must be taken into account in the response to the issue.

Women and girls are more exposed to sexual and gender-based violence and harmful practices in crisis situations.

During the COVID-19 pandemic, there was a dramatic increase in domestic violence, female genital mutilation and child and forced marriages.

The widespread disruption to sexual and reproductive health services, maternity care and access to modern contraception methods led to an increase in unwanted pregnancies and an upsurge in unsafe abortions with severe consequences.

According to UNFPA estimates, more than 12 million women and girls lost access to contraception due to disruptions caused by the pandemic, leading to almost 1.4 million unintended pregnancies in 2020. Lastly, the increased rate of girls dropping out of school due to disruptions to education made them more susceptible to domestic violence. This is referred to as the “shadow pandemic”.

In some countries, particularly in situations of internal conflict, sexual violence is organized, planned and even systematized.¹¹ This weapon of war is intended to terrorize civilian populations, break up families and destabilize society.

Within the framework of the **Women, Peace and Security (WPS) Agenda**, and in response to these escalating threats, France played an active role in the adoption of United Nations Security Council Resolution 1820 in 2008. This resolution recognizes sexual violence as a weapon and tactic of war, whether systematically perpetrated for political or military purposes, or as a result of widespread impunity. France also has a longstanding commitment to defending and advancing the WPS Agenda. Launched in 2000 with the adoption of Resolution 1325, the WPS Agenda consists of a set of 10 resolutions adopted by the United Nations Security Council. In addition to its support for the United Nations Security Council, in June 2021 France adopted its **third National Action Plan for Women, Peace and Security**¹² (2021-2025), which is based on four commitments:

- **Prevention through awareness-raising on the challenges linked to fighting gender-based violence, and on women’s rights and gender equality;**
- **Protection of women and girls and the fight against impunity;**
- **Women’s participation in decisions regarding peace and security;**
- **Promotion of the “Women, Peace and Security” Agenda and the National Action Plan.**

11. digitallibrary.un.org/record/3967573?ln=en

12. France’s National Action Plan – Implementation of the United Nations Security Council resolutions on the “Women, Peace and Security” Agenda – Ministry for Europe and Foreign Affairs.

Since the National Action Plan aims to combat sexual and gender-based violence, its implementation will contribute to improving SRHR in crisis situations.

Humanitarian action that incorporates a gender-based approach (i.e. that takes a cross-cutting and targeted approach to gender issues) is crucial for preventing the erosion of the limited progress made over the last twenty years.

Lastly, climate change also impacts SRHR, either because migrating populations lose access to health services, or because climate crises run the risk of deprioritizing the commitment needed to enforce SRHR.



Iraq: preventing and responding to sexual and gender-based violence

In 2022, France contributed US\$1.4 million to UNFPA through its Crisis and Support Centre to support a shelter and three protection centres for women survivors of violence in Iraq. UNFPA collaborated with the government and its partners to prevent and respond to gender-based and sexual violence against women and girls in the country.

In 2014, following the major humanitarian crisis triggered by the armed conflict, UNFPA launched its first emergency humanitarian interventions to respond to needs related to reproductive health and gender-based violence. UNFPA provided counselling and treatment in cases of rape, legal aid, livelihood support and assistance through its sexual and reproductive health programmes.

The new agreement between France and UNFPA Iraq will help ensure the protection and safety of women and girls in Basra, Mosul and Anbar by creating three new protection centres in collaboration with local authorities. In Baghdad, a women's shelter will be refurbished in partnership with the Ministry of Labour and Social Affairs.

Chapter 3

Scope of France's intervention

In light of the challenges and issues facing the world, France is actively promoting **ambitious measures that uphold its universal values of human rights, freedom and justice**. Within the framework of its feminist foreign policy, France is committed to championing these values **through a cross-cutting and targeted approach, intersecting with several priority sectoral issues**.

International cooperation policy

Interministerial Committee for International Cooperation and Development (CICID)¹³

Establishing official development assistance as a priority in the context of the 2030 Agenda and the Paris Climate Agreement, **the CICID meeting on 8 February 2018 outlined the major strategic initiatives for France's cooperation and solidarity action**.

In particular, it stated that France will expand its activities in a number of sectors where it has significant added value: crisis areas, education, climate, gender equality and health.

The Presidential Development Council meeting of 5 May 2023 made the promotion of women's rights and gender equality a policy priority, in particular by supporting feminist organizations and institutions that promote women's rights. The CICID will meet again in 2023.

¹³. France's position will be adjusted at the next CICID meeting in 2023

Programming Act No 2021-1031 of 4 August 2021 on inclusive development and combating global inequalities.

The primary objectives of the programming act on inclusive development and combatting global inequalities are **“the protection of global public goods, the eradication of poverty in all its forms and dimensions, the fight against food insecurity and malnutrition, the protection of the planet, the promotion of human rights, the strengthening of the rule of law and democracy, and the achievement of gender equality”**. The law establishes equality as a secondary cross-cutting priority: “Women’s political, economic and social empowerment, the bodily autonomy of women and girls, and gender equality, form a necessary foundation for sustainable development.”

This new SRHR strategy therefore meets the requirements of the programming law, which establishes the promotion of human rights as one of its main priorities. In particular, France is committed to promoting gender equality, safe abortion access, sexual and reproductive health and education, the universal decriminalization of homosexuality, and the enforcement of economic, social and cultural rights as a foundation for sustainable development.

The policy on inclusive development and combatting global inequalities therefore forms part of a multilateral framework (SDG) and a European framework (the European Union’s Gender Action Plan and the implementation of the European Consensus on Development).

A human rights-based approach

The respect, protection and fulfilment of human rights are key priorities of France’s feminist foreign policy. In 2019, France adopted the **Human Rights and Development Strategy**, which sets out a human rights-based approach (HRBA) to development cooperation. The principles and standards of international human rights law are integrated into the design, implementation, monitoring and evaluation of all development policies and programmes.

The HRBA conceptual framework, formalized in 2003 by the United Nations, is based on **the interdependence between the fulfilment of human rights and the three dimensions of sustainable development: economic, social and environmental. Although the fulfilment of human rights is the common ideal to be attained, it is also a means and a goal of sustainable development.**

This approach suggests that individuals are bearers of rights and active participants in their own development, and partner states are duty bearers of obligations to respect, protect and fulfil human rights. Through cooperation, it aims to strengthen the ability of citizens to assert their rights, and to support partner countries in fulfilling their international obligations to protect and promote human rights. HRBA is guided by the preventive principle of doing no harm to human rights and by the proactive principle of maximizing the positive impact to fulfil human rights.

The French concept of HRBA emphasizes the universality and indivisibility of human rights, encompassing civil, political, economic, social and cultural rights. It cuts across all areas of development, taking into account the various and cumulative forms of violence and discrimination experienced by individuals. Inclusion for all is therefore central to France's human-rights based approach.

Applying a rights-based approach to sexual and reproductive health

For a long time, a demographic approach was applied to sexual and reproductive health (SRH), which made population control a core sustainable development objective and viewed individuals merely as beneficiaries. However, there has been a gradual shift to a rights-based approach. The demographic imperative has given way to an **approach centred on individuals and their right to control their bodies and decide freely on matters related to their sexual and reproductive health, giving rise to new objectives.**

This approach examines the effective access to these rights and the actual capacity of individuals to safeguard them. A rights-based approach implies that people know about their rights and freedoms, and can effectively claim and enjoy them. By examining the obstacles and barriers to the genuine recognition of rights and bodily autonomy, **HRBA requires a gender and equality dimension to be addressed in sexual and reproductive health.**

A rights-based approach involves the **transformative function of social and societal change, and the integration of international standards and principles on gender equality and combating inequalities in the design**

and implementation of development programmes on sexual and reproductive health. The aim of this perspective is to achieve the effective fulfilment of human rights for all, and especially for women and girls and LGBT+ people. Then there is also the involvement and **active participation of boys and young men as agents of change.** Their responsibility and commitment are essential in combating sexual and gender-based violence, sharing the mental burden of sexual and reproductive health, and achieving gender equality.

This requires measures to ensure access to sexual and reproductive health information and education, including comprehensive sexuality education, as well as ensuring the availability, accessibility, acceptability and quality of sexual and reproductive healthcare facilities, goods and services, and supporting defenders of sexual and reproductive rights, including civil society organizations working in the field of SRHR.

For and with young people and adolescents

To ensure respect for fundamental rights and individual freedoms, it is essential to acknowledge the specific characteristics and needs of young populations, taking prompt action to prioritize these needs and ensure the full, equal and effective participation of young people and adolescents. In view of the future challenges they will face and their unique experiences compared to other generations, young people must be recognized and considered as legitimate stakeholders in decision-making processes. The strong growth in the young population means that SRHR issues will be a major concern over the next decade.

Particular attention should therefore be paid to actions that improve effective access to accurate and comprehensive information and to services adapted to their specific needs, taking into account their sex, age, sexual orientation, gender identity, socio-economic status, disability and any other potential vulnerability factor. **It is imperative to target children, adolescents and young adults throughout their lives** so that they are prepared and have access to all the necessary accurate information. These initiatives must be accompanied by awareness-raising campaigns aimed at their families, healthcare providers and educational professionals in order to dismantle the prejudices associated with sexuality and remove the barriers to a fulfilling sex life.

Addressing specific needs must necessarily be accompanied by **action both for and by young people**. Strengthening their agency and ability to assert their rights is essential to ensure empowerment, especially for young and adolescent girls in this regard. **It is imperative that girls participate in advocacy and the definition, implementation and monitoring of policies, as well as mobilizing boys and fostering their accountability.**

The full, equal and effective participation of young people in all their diversity, and representative of the population, in actions to promote SRHR and **support youth movements and organizations** advocating for their rights are two complementary principles of action required to strengthen young people's agency over their bodies, their rights and society in general.

Part 2

France's approach to SRHR



Chapter 1

France's thematic priorities



Access to high-quality sexual and reproductive health services and products

Access to sexual and reproductive health services encompasses the quality, availability and accessibility of prevention and care services, and the strengthening and upgrading of health facilities. It is also important to consider the training of healthcare professionals, the strengthening of health product supply chains, and the promotion, procurement, transport and distribution of a wide range of modern contraceptives, including emergency contraceptives (both hormonal, such as the morning-after pill, and non-hormonal, such as the copper intrauterine device).

Special attention should be paid to constraints and barriers in accessing essential information, products and services. Such access must be available even for the most isolated people who, irrespective of gender, age and vulnerability, face multiple intersecting inequalities, such as disability, and financial or geographical obstacles. The challenge is to improve the quality of the services offered, and the acceptability and accessibility of sexual and reproductive health services to the general public.



Reducing maternal, neonatal and infant mortality through universal health coverage

The Chad Health Sector Support Programme (PASST 2), with a budget of €10 million provided to the Ministry of Public Health in 2015, aims to reduce maternal, neonatal and infant mortality in Chad by improving health coverage for essential obstetric and neonatal care and access to family planning. It also contributes to the management of obstetric and neonatal complications, as well as major episodes of illness in children under five years, the prevention of risks in pregnancy and childbirth, and the promotion of maternal and neonatal health at community level.

PASST 3 is the third phase of the project (following on from PASST 1 allocated in 2008 and PASST 2 allocated in 2015), with funding of €10 million allocated to the Ministry of Public Health in 2022. It aims to reduce gender inequalities and improve SRHR in Chad. More specifically, it aims to **support public health policies** that promote gender equality and equity, and **strengthen the supply and demand of reproductive maternal, newborn, child and adolescent health (SRMNCAH), SRHR and nutrition services** to meet the specific needs of women and adolescents and reduce gender inequality by promoting a rights-based approach.



ESSENTIAL PACKAGE OF SEXUAL AND REPRODUCTIVE HEALTH INTERVENTIONS AS DEFINED BY GUTTMACHER-LANCET¹

The Guttmacher-Lancet Commission recommends an essential package of sexual and reproductive health interventions that align with the comprehensive definition of sexual health and reproductive rights.

The package includes:

- Comprehensive sexuality education;
- Counselling and services for a range of modern contraceptives, with a defined minimum number and types of methods;
- Antenatal, childbirth and postnatal care, including emergency obstetric and newborn care;
- Safe abortion services and treatment of complications of unsafe abortion;
- Prevention and treatment of HIV and other sexually transmitted infections;
- Prevention, detection, immediate services and referrals for cases of sexual and gender-based violence;
- Prevention, detection and management of reproductive cancers, especially cervical cancer;
- Information, counselling and services for subfertility² and infertility;
- Information, counselling and services for sexual health and wellbeing.

1. guttmacher.org

2. Reduced ability to give birth.

France promotes the implementation of an integrated approach to the continuum of care for sexual, reproductive, maternal, infant and child health. This includes the provision of comprehensive services to women and children, from pre-pregnancy to birth, postnatal care, and during childhood. This approach also entails providing information about sexuality, preventive and treatment services for STIs (including HIV and HPV, which can lead to cervical cancer), preventing teenage and/or unwanted pregnancies, and ensuring safe and legal abortion and post-abortion care services.

Family planning

According to UNFPA,¹⁴ family planning (FP) is the information, means and methods that allow individuals to determine freely the number and spacing of their children. This includes a wide range of contraceptives, surgical procedures that limit fertility, barrier methods such as condoms, and non-invasive methods such as abstinence. Family planning also includes information on planned pregnancy and infertility treatment.

Unrestricted access to and full information about family planning are a **fundamental right that is essential** for improving the quality of life of women, couples, young people, families and communities. However, without access to relevant information and quality services provided by well-trained and compassionate personnel, this right cannot be exercised. Above all, they save the lives of women and adolescents and reduce infant and child mortality.

According to UNFPA,¹⁵ in 2022 an estimated 257 million women who wanted to avoid pregnancy were not using safe, modern methods of contraception for reasons ranging from lack of access to information or services, to lack of support from their partners or communities. More than half of women in Central and West Africa (54%)¹⁶ have unmet family planning needs. **If all women with an unmet need for contraceptives were able to obtain them, maternal deaths would be reduced by a quarter.**

Family planning is one of the most effective actions to improve health, and serves as a catalyst for sustainable development for all. Besides the public health concerns, effective access to family planning services is key to reducing poverty and nurtures a virtuous circle that gives greater empowerment to women and girls. By giving them the ability to control their fertility, women and adolescent girls can access education and continue their studies (including into higher education), secure skilled jobs, and participate in the political and public life of their country. This strengthens their economic security and wellbeing, and also benefits their families.

However, men and boys also have an active role to play in achieving this virtuous circle. They can show their commitment to family planning by using a family planning method, such as condoms or vasectomy, or positioning themselves as supportive partners who share the mental, economic and health-related responsibilities associated with contraception.

14. unfpa.org/family-planning#readmore-expand

15. unfpa.org/press/nearly-half-all-pregnancies-are-unintended-global-crisis-says-new-unfpa-report

16. unfpa.org/data/world-population-dashboard



Ouagadougou Partnership

The Ouagadougou Partnership (OP) was jointly initiated by France, the United States Agency for International Development (USAID), the Bill & Melinda Gates Foundation (BMGF) and the William and Flora Hewlett Foundation (WFHF). It was launched at the Regional Conference on Population, Development and Family Planning held in Ouagadougou, Burkina Faso, in February 2011, in collaboration with the governments of nine francophone West Africa countries: Benin, Burkina Faso, Côte d'Ivoire, Guinea, Mali, Mauritania, Niger, Senegal and Togo. The aim of the OP is to improve the coordination of international aid for family planning in order to increase the contraceptive prevalence rate and reduce the unmet need for family planning in these nine francophone West African countries.

The primary objective of the OP is to double the number of users of modern contraception by 2030 by focusing on improving coordination between donors to optimize their support across countries, as well as strengthening collaboration and cooperation at national and regional levels to ensure family planning needs are met.

The Ouagadougou Partnership exceeded its goals by helping to reach over 3.8 million additional users of modern family planning methods in the nine member countries in 2020.

Ensuring access to family planning strengthens human rights and reduces gender inequalities, which contributes to the sustainable development of societies.

While progress has been made in facilitating access to contraception, UNFPA highlights a slowing momentum, which can be explained by a number of factors:

→ “Logistical” challenges: remote or poor-quality family planning services, limited access to and choice of products up to the last mile, inconsistent availability, shortages or poor quality of products;

SHAPING EQUITABLE MARKET ACCESS FOR REPRODUCTIVE HEALTH (SEMA)

Launched in 2021 by the Bill & Melinda Gates Foundation, the Children Investment Fund Foundation (CIFF), and France under the GEF framework, SEMA is a groundbreaking initiative that aims to **establish equitable access to the sexual and reproductive health (SRH) market**. SEMA aims to transform the markets for SRH products and services, with the ultimate goal of ensuring that more women and adolescent girls can access them as needed.

SEMA is a **new collaborative platform** and financing vehicle that aims to build equitable and resilient markets for SRH products and services, enabling them to respond more effectively to the needs of women and adolescent girls. SEMA will support the stakeholders **to strengthen their capacity to design** and drive coordinated strategies to organize these markets.

The SEMA initiative is undergoing an incubation period at AMREF Health Africa in Nairobi (Kenya) and will spin out as an independent organization in a few years. France has pledged €5 million over the period 2021-2025 as part of the Generation Equality Forum Action Coalition on Bodily Autonomy and SRHR.



- A lack of information and education on the subject: misinformation or lack of knowledge, mistrust or fear, received ideas about contraception;
- Cultural, religious or gender barriers to accessing services: opposition from partners or families.

Population groups face multiple barriers to accessing these services: adolescents and young people, the poorest populations, people with disabilities, rural communities, those living with HIV/AIDS, and people in crisis or displacement situations. Special attention should therefore be paid to these groups to ensure they have access to comprehensive contraception and abortion care, as well as other sexual and reproductive health services.

Menstrual health access and rights

Taboos around menstruation exist and persist worldwide. Misconceptions about menstruation exacerbate existing vulnerabilities by subjecting women and girls to exclusion, discrimination and even violence, including sexual and gender-based violence.

The lack of access to suitable menstrual hygiene products has a negative impact on the health, education and employment of women and girls, including wellbeing,

self-esteem, gender equality (barriers to women's full participation in economic, social and family life, and girls' school absenteeism), and public health (risks associated with not changing menstrual hygiene products regularly, or the use of unsuitable products which can lead to infections such as toxic shock syndrome).

“Period poverty” is not solely an economic issue, it is also a political and social one. When women and girls struggle to access suitable sanitary facilities that ensure privacy and safety, or when they do not have access to menstrual health products, **they are unable to manage their menstruation with dignity.** The mockery, exclusion and shame associated with menstruation also undermine this right to dignity. Menstrual health is an integral part of SRHR, and the UNFPA and Equipop¹⁷ 2022 report on menstrual health and rights in West

17. wcaro.unfpa.org/sites/default/files/pub-pdf/equipop_etude_15.06.22_equipopdp.pdf [in French]

UNFPA SUPPLIES PARTNERSHIP

UNFPA Supplies is a multi-donor trust fund that primarily uses its budget (€150 million per year) to **purchase modern contraceptives in some 50 low-income countries with high maternal mortality rates. It is the world's largest provider of free contraceptives** and technical assistance to countries. The programme, with its unique approach of building national capacity, is an important driver of progress in expanding access to rights-based family planning services with a choice of contraceptives, and to maternal health medicines, including emergency obstetric and safe abortion supplies. The programme specifically targets countries with the lowest incomes and the highest unmet need for family planning.

Launched in 2007, UNFPA Supplies is currently entering its third implementation phase for the period 2021-2030. This latest phase places even greater emphasis on gender equality and human rights, sustainable financing through domestic resources, and implementing tailored and targeted approaches. These strategies aim to maximize the impact of resources based on needs and opportunity, and ensuring the last mile delivery of sexual and reproductive health products.

In 2021, France pledged €90 million to the programme over the next 5 years (2021-2025) as part of its commitments under the Generation Equality Forum.



and Central Africa notes that “stigma associated with menstruation and menstrual hygiene violates human rights, especially human dignity, but also the right to non-discrimination, equality, bodily integrity, health, privacy and freedom from inhuman and degrading treatment, abuse and violence.”

Access to water and sanitation are indispensable rights for ensuring access to menstrual health. Good menstrual health management requires access to sufficient, safe, accessible and affordable water for personal and domestic use, as well as access to sanitary facilities that are safe (equipped with water and soap), hygienic, secure and socially and culturally acceptable.

There is also the issue of the **right to health**: lack of access to appropriate menstrual hygiene products may heighten the risk of infection. Women and girls who do not have access to these products often resort to substitutes that can be detrimental to their health. The quality of menstrual hygiene products is also essential to ensure the health and safety of women and girls.

This issue is also closely linked to the **right to education for girls and young women**: the lack of private and decent sanitation facilities can contribute to increased absenteeism from school. Several studies have confirmed that when girls cannot properly manage their menstruation in school, their attendance and performance suffer, significantly increasing the risk of dropping out.

Finally, the issue of menstrual health cannot be separated from the **right to control one’s body and the fight against all forms of violence**. In many parts of the world, the onset of menstruation is often seen as a sign of maturity and adulthood. Consequently, girls and young women are viewed as being ready for marriage and sexual activity. This exposes them to a wide range of abuse, including child and forced marriage, teenage pregnancy and sexual and gender-based violence.



Ethiopia: improving menstrual health and hygiene through France's first Development Impact Bond¹

In January 2022, France's first Development Impact Bond (DIB)² to improve menstrual health and hygiene management in Ethiopia was signed in Paris by the various parties involved: CARE France, which is implementing the programme with a consortium of NGOs; BNP Paribas, which is providing the upfront funding; and the AFD, which, with the support of the Ministry for Europe and Foreign Affairs, is the final donor.

With a budget of €3 million over three years, the DIB will help to fund an intervention programme based on three pillars: **awareness-raising and advocacy, increasing the availability** of menstrual products through national supply chains, and improved **access to suitable sanitary facilities** in schools. Endorsed by the Support Fund for Feminist Organizations (FSOF), the programme will support Ethiopian civil society organizations.

The signing of the DIB formalizes the announcement made by the French President in July 2019 under the French Presidency of the G7, and is included in the Sahel Partnership Action Plan adopted by the G7 leaders.

The choice of this innovative public-private financing instrument to address an issue that is still a source of stigma and a major factor in school drop-out rates is in line with France's strong political ambition to promote gender equality in Africa and to build French expertise in innovative development financing solutions.

1. diplomatie.gouv.fr/fr/politique-etrangere-de-la-france/developpement/evenements-et-actualites-sur-le-theme-du-developpement/evenements-et-actualites-sur-le-theme-du-developpement-2022/article/signature-du-premier-contrat-a-impact-de-developpement-francais-destine-a

2. Under this financial arrangement, investors provide upfront funding for an innovative prevention programme with a high developmental impact. Once the programme is complete, if the outcomes defined at the outset are achieved, the outcome payer (in this case, the donor) reimburses the investors, with a possible return.

Commitments

- France will take advocate strongly to ensure access to high-quality sexual and reproductive health services and products.
- France will continue to support programmes and projects aimed at ensuring the availability, acceptability, accessibility and quality of sexual and reproductive health products and services. It will invest in programmes and projects to improve menstrual health and eradicate period poverty. It is imperative to promote programmes that help break the taboos surrounding these issues and defend the inclusion of these rights in international texts and conventions.
- The AFD will continue its commitment to SRHR, allocating €250 million between 2021 and 2025 on a bilateral basis.
- France has renewed its commitment to the French Muskoka Fund for the period 2021-2025, providing €50 million to reduce maternal and infant mortality in West Africa. UNFPA, UN Women, UNICEF and WHO are responsible for implementing its programmes.
- Over the period 2021-2025, France will support programmes to improve access to sexual and reproductive health products. France has allocated €90 million to the UNFPA Supplies Partnership to purchase and distribute contraceptives and sexual and reproductive health products. An additional €5 million has been allocated to the new Shaping Equitable Market Access for Reproductive Health (SEMA) programme to increase equitable access to sexual and reproductive health products.

2

Support for social and behavioural change: supporting comprehensive sexuality education and transforming masculinities

Social and behaviour change (SBC) is a key approach to promoting sexual and reproductive health and rights. While not specific to this theme, a rights-based approach makes it possible to examine gender role assignment in the perpetuation of inequality and unsafe behaviour, and the persistence of all forms of violence. This transformative approach equips children and young people with the knowledge, skills, attitudes and values needed to develop respectful social and sexual relationships. These changes in attitudes can be achieved in a number of ways.

Comprehensive sexuality education

Comprehensive sexuality education (CSE)¹⁸ has been defined in the United Nations International Guidelines¹⁹ as “**a curriculum-based process of teaching and learning about the cognitive, emotional, physical and social aspects of sexuality**”. It aims to equip children and young people with knowledge, skills, attitudes and values that empower them to realize their health, wellbeing and dignity; develop respectful social and sexual relationships; consider how their choices affect their own wellbeing

18. unfpa.org/comprehensive-sexuality-education

19. [International technical guidance on sexuality education: an evidence-informed approach, by UNESCO, UNFPA, WHO, UNAIDS, UN Women and UNICEF \(2018\)](#)



and that of others; and understand and ensure the protection of their rights throughout their lives.” The document identifies eight key concepts regarding CSE:

- 1– Relationships;
- 2– Values, rights, culture and sexuality;
- 3– Understanding gender;
- 4– Violence and staying safe;
- 5– Skills for health and wellbeing;
- 6– The human body and development;
- 7– Sexuality and sexual behaviour;
- 8– Sexual and reproductive health.

CSE has a strong gender dimension. Its objectives include raising awareness and understanding of the construction of gender and the impact of stereotypes and traditional social and cultural norms that perpetuate gender inequality in all types of relationships, as well as the impact of prejudice and gender stereotypes, including the risks of sexual abuse and gender-based violence. The aim is also for students to be able to identify the different elements of gender-based violence, including domestic violence, and to understand that these are human rights violations.

In addition, CSE must provide opportunities to acquire comprehensive, accurate, evidence-based and age-appropriate information on sexuality. It covers topics related to sexual and reproductive health, including sexual and reproductive anatomy and physiology, puberty and menstruation, reproduction, modern contraception methods, pregnancy and childbirth, and STIs, in particular HIV/AIDS. CSE enables learners to know their rights, as well as local and national laws and international agreements addressing human rights with an impact on sexual and reproductive health. CSE also looks at how social and cultural norms influence sexual behaviour and sexual health.

Furthermore, according to the UNFPA and Equipop Menstrual Health and Rights report, CSE should cover topics such as menstrual pain, discussing strategies to ease discomfort while clarifying that not all menstrual pain is “normal”. CSE should also raise awareness about menstrual disorders such as endometriosis and polycystic ovary syndrome.

CSE is a transformative approach that aims to provide rights-based sexuality education, and **to question social and societal attitudes and build positive values, including knowledge of and respect for human rights**. CSE is a **positive mechanism that helps young people** develop self-confidence, acquire essential everyday knowledge, hone their critical thinking skills and discover new communication tools, and **make responsible, informed decisions**.

One of the challenges of implementing a CSE programme is the sensitivity of some topics, which are often challenged in certain contexts. However, contrary to claims by its critics, CSE does not lead to earlier sexual activity, or risky, more frequent sexual behaviour. In fact, the opposite effect has been observed: according to UNFPA, two-thirds of evaluations showed a **decrease in risky behaviour, and around “60%²⁰ of programmes had a positive effect on at least one behavioural or biological indicator**, such as increased condom use or reduced unplanned pregnancies.” Therefore, a positive approach to sexuality is also essential and should recognize sexual pleasure and the importance of placing sexuality in a more general context of building individual lives and social ties.

The implementation of CSE programmes requires training and funding, and should also be based on an integrated approach that encourages the involvement of parents, communities, and political and religious leaders.

20. UNFPA. unfpa.org/fr/%C3%A9ducation-compl%C3%A8te-%C3%A0-la-sexualit%C3%A9#readmore-expand

Transforming masculinities

Incorporating an SBC approach makes it possible to **include men and boys as genuine agents of change**. This approach should start at an early age, as it helps raise awareness and bring about behavioural change to break the continuum of violence, especially sexual and gender-based violence, contraception and the prevention of STIs, including HIV. **Men will also benefit from the dismantling of gender stereotypes by reflecting on their perception of the roles and positions assigned to individuals within society, and the expectations these roles impose on both women and men.**

By using their social or economic capital, status, or decision-making power in public action, boys and men can influence their families, communities, peers, religious and political leaders, and society in general to promote gender equality. According to the best practices of civil society organizations (CSO) compiled by the AFD,²¹ “women whose spouses support family planning are nearly four times more likely to use modern methods. It appears that discussions between spouses about family size and their children’s future wellbeing could be linked to increased demand for family planning and SRH services.”

Two distinct approaches: involving men and transforming masculinities

No real progress can be made on gender equality, gender norms or SRHR without involving men and boys. It is essential to encourage them to play a proactive role in comprehensive sexuality education, dismantling masculinities stereotypes in sexuality, using male contraception, and being allies for women and girls’ health.

Including men and boys in promoting gender equality can take the form of official representation in advocacy organizations. Access to comprehensive information enables men to contribute to the co-design and implementation of programmes to promote women’s health and rights. However, an approach based solely on the involvement of men

21. AFD, Genre et santé sexuelle et reproductive – Capitalisation des projets financés par la division Santé et protection sociale de l’Agence française de développement [AFD, Gender and Sexual and Reproductive Health- Capitalization of projects financed by the Health division of the AFD] – June 2020.



Our Rights, Our Lives, Our Future (O3)

Launched in 2018, UNESCO’s “O3” programme was implemented in 33 sub-Saharan African countries with an annual budget of around US\$40 million between 2018 and 2022. It aimed to provide comprehensive sexuality education (CSE) to 24.9 million learners in 72,000 primary and secondary schools between 2018 and 2022, to address HIV, early and unwanted pregnancies, gender-based violence and gender equality in education. To date, this target has been comfortably exceeded, with more than 28 million learners reached between 2018 and 2020.

In addition, with UNESCO’s leadership, coordination, and technical and financial support, the programme conducted a situational analysis of adolescents and young people in West and Central Africa, supported national consultations in 14 countries, and designed an extensive advocacy campaign for CSE, “Education Saves Lives”.

In addition to supporting CSE in formal education, the O3 programme continues to innovate to reach adolescents and young people most at risk of unwanted pregnancy, HIV or violence via an Android mobile application, “Hello Ado”. The app, which is gradually extending its content to social media, provides information on sexual and reproductive health, puberty, gender and COVID-19. It also contains a directory of local health services near young users, with more than 4,000 service points mapped in the Francophone countries of West and Central Africa.

In 2022, France renewed its commitment by making a significant voluntary contribution of €2 million to UNESCO’s Dakar office, intended specifically for the O3 programme. In 2021, France’s financial support benefited 6 million learners in West and Central Africa.

is limited in its understanding and analysis of masculinities as an integral part of patriarchal structures. Similarly, an approach overly focused on the involvement of women and girls is out of step with the reality of gender-based inequalities and the weight of the norms that continue to constrain them.

Transforming masculinities is therefore a more ambitious approach that aims to address the root causes of gender inequality and violence, and the impact of conflict on the experiences of women and men, by addressing gender stereotypes, norms, values and social structures that shape masculinities. This approach enables men to play a leading role in dismantling stereotypes and to become allies in supporting women's health.

These complementary approaches provide the frameworks and tools to implement truly transformative approaches that can support long-term social and structural change and modify attitudes and power relationships within society to suit each specific context.

Commitments

- **France aims to promote, finance and support the implementation of comprehensive sexuality education programmes and to defend this approach, including in international forums.**
- **France will foster the development of studies and programmes aimed at accelerating social behaviour change, with specific focus on programmes that include men and boys as agents of change**



C'est la vie !, an edutainment series to promote awareness of sexual and reproductive health

In 2011, the NGO African Network for Education, Health and Citizenship (Réseau africain pour l'éducation et la santé, RAES) initiated the creation of a pan-African soap opera called *C'est la vie !*. It tells the story of a fictional health centre in a West African town, tackling political, socio-economic and health issues in turn. The show covers topics ranging from sexual and reproductive health to sexuality in schools and violence against women.

The aim is to empower its audience to make informed choices, encourage responsible practices and foster personal reflection, community dialogue and social and behavioural change through entertainment.

Supported by funding from France and the Bill & Melinda Gates Foundation, *C'est la vie !* has evolved into a broader edutainment programme (TV series, podcasts, web series, etc.) along with community campaigns to promote behavioural change.

The French Muskoka Fund contributed 75% of the funding for seasons 1 and 2, with the remaining 25% provided by the television networks A+, Canal France International and TV5Monde Afrique.

The French Muskoka Fund provided technical support for season 3, as well as technical and financial support to create, produce and distribute the teaching kit in the eight countries. Since 2017, the AFD and the Bill & Melinda Gates Foundation have each provided €3 million to finance the production of seasons 3 and 4, as well as outreach activities targeting the most vulnerable populations and those with little or no access to mainstream media.

The funding enabled:

- The creation of *C'est la vie !* – a realistic TV soap opera based on everyday issues which strikes a balance between health messages and entertainment (3 seasons, 92 episodes of 26 minutes), and a radio series (1 season with 31 episodes of 20 minutes) broadcast throughout Africa via TV5 Monde, A+, RFI, national channels and community radio stations;
- The dubbing of the TV and radio series into five languages (English, Bambara, Hausa, Fulani and Wolof);
- The production of innovative digital content;
- The creation of a new and innovative teaching kit to support community leaders in facilitating engaging, participative and impactful activities at local level.

In 2022, AFD provided €5 million to finance the production of season 4 of *C'est la vie !* and to continue community-based activities in four countries (Burkina Faso, Côte d'Ivoire, Niger and Senegal). The Bill & Melinda Gates Foundation is providing parallel funding of €4.5 million to focus on improving digital access to SRH.



3

Access to safe abortion: promoting a favourable ecosystem

The fundamental right to control one's body and access to safe abortion are critical health and survival issues for women and girls. These are essential for achieving gender equality and must be exercised under conditions that ensure safety, dignity and respect.

According to global estimates, in 2022, 257 million women²² wishing to avoid

²². unfpa.org/press/nearly-half-all-pregnancies-are-unintended-global-crisis-says-new-unfpa-report

pregnancy were not using safe, modern methods of contraception, and in countries where data is available, nearly a quarter of all women are unable to refuse sex. This situation leads to higher abortion rates in countries in Africa and South Asia. **The combination of limited contraceptives and restricted or even prohibited access to safe medical abortion is a double penalty for women, who are exposed to considerable health risks by seeking clandestine abortions.**

Today, according to the WHO,²³ 40% of women of childbearing age live in a country where laws restrict or prohibit abortion. Even in countries where abortion is legally permitted in certain circumstances (where there is a risk to the life of the mother or child, incest or rape), very few women are able to access a safe procedure. The WHO estimates that around 45% of all abortions are unsafe, of which 97% take place in developing countries, where the number of unsafe abortions is estimated at 25 million each year. Unsafe abortion is a leading cause of maternal death and morbidity. It accounts for at least 1 in 12 maternal deaths globally, and up to 13.2% in some African countries. Unsafe abortion can also lead to physical and mental health complications. Besides the immediate dramatic effects on women's health and lives, their families and society are also affected.



²³. apps.who.int/iris/bitstream/handle/10665/70914/9789241548434_eng.pdf%3Bjsessionid%3D1F7529207FAF2782314B840BC9BDA67E?sequence

Every year, three million women suffer from post-abortion complications, sometimes with irreversible damage that prevents them from returning to gainful activities. **The WHO estimates that around 7 million women in developing countries are hospitalized each year due to complications from unsafe abortions, at an estimated cost of US\$553 million.** Treating these complications increases the economic burden on poor households and on already fragile healthcare systems. It is therefore essential to ensure the availability of good quality “post-abortion” care. However, many women do not seek care for fear of social or legal repercussions, even though it significantly reduces maternal mortality and morbidity.

Recently, anti-abortion movements have taken up this issue in the public and political arena, mainly by putting pressure on political and parliamentary elites through aggressive lobbying, undermining access to abortion by

eviscerating laws, and seeking allies by signing the Geneva Consensus Declaration. The fight against abortion has been centred around “pro-life” movements funded by private players and conservative circles, whose aim is to influence doctors, lawyers and family planning centres by manipulating social pressure and attitudes.

Commitments

- **In response to the rise in conservatism, France will continue to advocate at the highest political level and in all forums to recognize safe abortion as a fundamental right, and will work to advance it globally.**
- **France will support programmes promoting access to safe abortion and will continue to support Le Centre ODAS by allocating €5 million over 5 years as part of its commitment to the Generation Equality Forum Action Coalition on Bodily Autonomy and SRHR (2021-2026).**



LE CENTRE ODAS: ORGANIZATION FOR DIALOGUE ON SAFE ABORTION

The main aim of Le Centre ODAS is to expand access to safe abortion care in Francophone Africa by addressing all aspects of the sustainable abortion ecosystem in collaboration with regional champions, governments and technical partners.

The first feminist institution in Francophone Africa dedicated to increasing access to safe abortion, Le Centre ODAS is made up of community, medical and legal organizations, intergovernmental institutions and various civil society organizations from 12 West African countries, the Democratic Republic of the Congo and Madagascar.

Specifically, ODAS commits to:

- Support regional technical working groups that accelerate progress in abortion service delivery, community engagement, resource security, research, policy and advocacy;
- Strengthen partnerships and the capacity of community organizations and women’s movements to implement the new WHO guidelines and the Maputo Protocol in their context, and to advocate government policies that comply with international treaties and local laws governing the right to abortion;
- Strengthen national coalitions and various alliances to improve the sociocultural context that influences abortion access and stigma associated with SRHR;
- Organize in each country regular national dialogues with government and civil society organizations to create common objectives and mechanisms for accountability and monitoring.

4

The fight against harmful practices and sexual and gender-based violence

Gender-based violence is one of the world's biggest scourges. Sexual and gender-based violence and harmful practices not only have devastating consequences for the health and wellbeing of women and girls, but they also compromise their freedom and autonomy to control their own bodies. **These forms of violence and harmful practices also impede access to education for girls and women, exacerbate vulnerabilities, especially economic vulnerability, and perpetuate the “vicious cycle of violence”.**

Sexual and gender-based violence

According to the United Nations High Commissioner for Refugees, sexual and gender-based violence (SGBV) refers to “any act that is perpetrated against a person’s will and is based on gender norms and unequal power relationships. It encompasses threats of violence and coercion. SGBV can be physical, emotional, psychosocial or sexual in nature, and can take the form of a denial of resources or access to services. It inflicts harm on women, girls, men and boys.” According to UN Women,²⁴ one in three women worldwide has been subjected to physical and/or sexual intimate partner violence and/or non-partner sexual violence at least once in their life (30% of women aged 15 and older).



Sexual and gender-based violence is a violation of human rights and has a significant impact on sexual and reproductive health, among other things. It deprives individuals of their human dignity and is detrimental to human development.

Holistic action is needed across the entire continuum to prevent violence, support survivors, punish perpetrators and train all those who come into contact with survivors.

²⁴ unwomen.org/en/what-we-do/ending-violence-against-women/facts-and-figures



ISTANBUL CONVENTION

Ratified by **37 member states of the Council of Europe**, the Convention on preventing and combating violence against women and domestic violence (Istanbul Convention), was adopted by the Council of Europe in 2011 and is open for universal ratification. It is widely recognized as the most advanced international instrument and the benchmark for preventing and combating violence against women. Its effectiveness is due to its global approach and gold standards, and its monitoring body (GREVIO), whose visits and assessments measure concrete progress in the States Parties. GREVIO is a multidisciplinary monitoring mechanism made up of 15 independent experts. It is responsible for overseeing the implementation of the Convention through visits to States Parties and interviews with NGOs or other sources, such as UN mechanisms. The Convention is considered to have contributed to increasing societal awareness and the response of Member States to the scourge of violence against women, which affects one in three women in their lifetimes and results in 3,000 deaths each year in Europe. For many years, France has been strongly campaigning at international level for universal adoption of the Convention. Three countries ratified the Convention in 2022: Moldova, the United Kingdom and Ukraine.

The holistic approach is based on four pillars:

1. Prevention;
2. Protection;
3. Prosecution;
4. Coordinated policies.

Child and forced marriage

Child marriage is a violation of human rights. Despite laws banning child marriage and with a minimum age stipulated in civil and criminal law, customary law often prevails, making this practice commonplace. According to UNFPA, 19% of girls worldwide are married before the age of 18. In developing countries, the figure is almost double – 36% of girls are married before age 18, and 10% of girls before age 15.

Child marriage is the result of both economic and gender inequality. Traditional beliefs held by the girls' parents and close relatives play a key role in the decision to marry them off. Many parents living in poverty believe that arranged marriages will secure a better future for their daughters by ensuring that another family is responsible for their care. This is also true in humanitarian crises, when many parents fear they will be unable to protect their daughters. Some mistakenly believe marriage will protect their daughters from sexual violence, which is exacerbated in times of crisis. Finally, it can also be seen as a solution to alleviate economic pressure on the family, particularly in communities where families receive a dowry or "bride price".

According to UNFPA,²⁵ child and forced marriages directly affect the health and wellbeing of minors. Girls who are not physically or emotionally ready to become wives and mothers are at increased risk of complications during pregnancy and childbirth, as well as sexually transmitted infections such as HIV. Girls aged 15-19 are twice as likely to die during pregnancy and childbirth as women aged 20-30. **Child marriage endangers the health and lives of girls and young women. It prevents them from continuing their education and, consequently, reduces their chances of entering the labour market and earning a decent income,** so their employment prospects are generally limited to domestic work. **Girls who are victims of child and forced marriage are at greater risk of violence on the part of their partner or their partner's family.** Girls are also more likely to describe their first sexual experience as forced and to experience repeated sexual violence.

25. unfpa.org/child-marriage

Female genital mutilation

According to the WHO definition **“female genital mutilation (FGM) comprises all procedures that involve partial or total removal of the external female genitalia or other injury to the female genital organs for non-medical reasons”**. More than 200 million girls and women alive today have undergone female genital mutilation. **UNFPA estimates that 68 million girls will be mutilated between 2015 and 2030 in 25 countries where FGM is routinely practiced and data is available.** Female genital mutilation is internationally recognized as a violation of the rights of girls and women. It reflects deep rooted gender inequality and constitutes an

extreme form of discrimination against women. It is nearly always carried out on minors and is a violation of the rights of the child. The practice also violates a person’s rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment. **Female genital mutilation has both immediate and long-term consequences for women’s physical and mental health, particularly during childbirth, and for sexual pleasure. It can lead to infection, disease, painful sexual intercourse, high-risk pregnancy and childbirth, and even death.**

France is committed to combating female genital mutilation through all available channels and at all levels of representation. Due to the strong presence in France of diasporas from FGM-practising countries, France will support the development of appropriate prevention tools, raise awareness and train professionals in detection and prevention, and improve the health of victims of female genital mutilation. The aim will be to acquire better knowledge, assess the prevalence of female genital mutilation in France, and take localized action in areas where the issue is most prevalent.

At the international level, the challenges will include dealing with the consequences of the health crisis, taking action to ban the medicalization of FGM in certain countries, and stopping the practice from spreading to countries where it was not previously practised. The medicalization of FGM creates a sense of legitimacy for mutilation and the impression that it is safe for human health. According to UNICEF,²⁶ around one in four girls and women who have undergone female genital mutilation (FGM), or 52 million survivors worldwide, were cut by



The Nengo project: providing care for victims of sexual violence in the Central African Republic

In the Central African Republic, France, through the AFD, supports the flagship project Nengo (meaning “dignity” in Sango), which assists victims of sexual and gender-based violence. The AFD has co-funded this project since its creation in 2020, allocating three successive funding packages totalling €4.2 million. The Pierre Fabre Foundation (FPF) has also co-financed the project with an additional €1.2 million. The project is implemented by the FPF, Panzi Foundation DRC, the Dr Denis Mukwege Foundation and the Francophone Institute for Justice and Democracy.

The project is the first to replicate Dr Mukwege’s holistic care model, originally implemented at the Panzi hospital in Sud-Kivu, in a country other than the Democratic Republic of the Congo. The project is structured around four pillars:

- Medical care;
- Psychological care;
- Legal assistance;
- Socio-economic assistance.

Since the end of 2020, healthcare providers, legal experts, psychosocial assistants and socio-economic workers have been offering a holistic approach to restore the dignity of survivors. More than 4,200 patients have already received support under the project, including around 100 who have undergone surgery at the Sino-Central African Friendship University Hospital (Centre hospitalier universitaire de l’amitié sino-centrafricaine).

26. [unicef.org/protection/female-genital-mutilation](https://www.unicef.org/protection/female-genital-mutilation)



UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change

Launched in 2008, the UNFPA-UNICEF Joint Programme on the Elimination of Female Genital Mutilation: Accelerating Change is the largest global programme dedicated to FGM. It aims to reduce the practice of female genital mutilation in 16 countries. More broadly, it works to reduce gender inequalities by advancing the SRHR of women and girls. The programme organizes dedicated

regional-level dialogue with community and religious leaders to collaborate on legal frameworks, statistics and community representation. In particular, it provides training for women and girls to help them take a stance against the practice of female genital mutilation within their communities. France has provided regular support to this programme since 2019.

healthcare personnel. It is therefore essential to adopt a rights-based approach to put an end to this practice. Another objective will be to monitor abuses of bodily autonomy, particularly through “cosmetic genital surgery”, which can be considered a new form of female genital mutilation.

Gynaecological and obstetric violence

Medical care for women can be marred by violent and disrespectful practices during gynaecological appointments and childbirth, or through “abusive” practices (i.e. those that are not medically justified). Article 39 of the Istanbul Convention specifically condemns forced sterilization, but it does not generally address gynaecological and obstetric violence. Back in 2014, the World Health Organization (WHO) strongly criticized the disrespectful and abusive treatment that women can suffer while giving birth in hospital.

According to the High Council for Gender Equality (Haut Conseil à l'égalité entre les femmes et les hommes, HCE), **“sexist acts during gynaecological and obstetrical care are gestures, comments, practices and behaviours**

performed or omitted by one or more members of the healthcare staff on a patient during gynaecological and obstetrical care, and that are part of the history of gynaecological and obstetrical medicine, which is marked by the desire to control women’s bodies (sexuality and ability to give birth). They are performed by male and female caregivers of all specialities, who do not necessarily intend to be abusive. They can take many different forms, from the seemingly harmless to the most serious.”

According to the Council of Europe, these include inappropriate or non-consensual acts, such as episiotomies and vaginal examinations carried out without consent, fundal pressure or painful interventions without anaesthetic. Sexist behaviour during consultations has also been reported. The HCE identifies **six types of sexist acts during gynaecological and obstetrical care**, some of which constitute violence:

- Sexual violence: sexual harassment, sexual assault and rape;
- Failure to take into account the patient’s discomfort due to the intimate nature of the consultation;



Combating gynaecological and obstetric violence in Senegal and Guinea

In line with France's commitment to gender equality, the AFD is mobilizing the NGO Sector Innovation Facility (FISONG) to finance innovative measures aimed at combating gynaecological and obstetric violence (GOV) in West Africa. Through calls for proposals totalling €2.5 million over a three-year intervention period, the Facility aims to fund innovative projects proposed by NGOs on specific themes. This process includes a strong capitalization and evaluation component to facilitate the scaling up of these innovations. AFD has selected two projects under the FISONG "Fight against GOV" initiative, one in Guinea, led by AMREF Health Africa, and another in Senegal, led by Equipop.

In Guinea, the project run by AMREF Health Africa in collaboration with the Guinean NGO CERREGUI aims to "provide training and raise awareness to fight against gynaecological and obstetric violence" in four vulnerable regions. Through a research-experimentation initiative to document GOV and change practices within health facilities, the project promotes rights-based care and the implementation of a national GOV prevention scheme.

In Senegal, the project – implemented by a consortium of Senegalese organizations coordinated by the French NGO Equipop – aims to improve women's health and rights by fighting against the factors that contribute to the occurrence of such violence. It seeks to shed light on GOV and its underlying causes, to empower women and girls in the Diamniadio district through discussion circles and training workshops, and to involve various actors (ministries, professional associations of gynaecologists and midwives, national associations and organizations of women and young feminists, stakeholders and power-holders, etc.) around these issues.

- Judgemental comments about sexuality, clothing, weight, or the choice to have, or not to have children, which reflect sexist expectations;
- Sexist insults;
- Acts (medical intervention, prescription, etc.) carried out without the patient's consent or contrary to her choice or wishes;
- Acts or refusal of acts without medical justification.

Gynaecological and obstetric violence (GOV) is part of a traditional, patriarchal system accompanied by systemic gender inequality, which can be reflected in power dynamics between healthcare personnel and patients.

Commitments

- **France is committed to fighting all forms of violence and supports the eradication of this scourge, in particular by continuing to campaign for the promotion and universalization of the Istanbul Convention and by supporting programmes to combat sexual and gender-based violence.**
- **France has chaired the Committee of the Parties to the Istanbul Convention since 1 February 2022.**



5

Equality and access to rights for LGBT+ people

The situation of lesbian, gay, bisexual and transgender (LGBT+) people is concerning in many countries, where they continue to face violence, discrimination and hate speech. Nearly 70 countries²⁷ specifically criminalize homosexual relations, and around 10 of them apply the death penalty. In addition to these laws, there are other restrictions that may limit LGBT+ people's freedom of expression,

[27. ilga.org/downloads/ILGA_World_State_Sponsored_Homophobia_report_global_legislation_overview_update_December_2020.pdf](https://www.ilga.org/downloads/ILGA_World_State_Sponsored_Homophobia_report_global_legislation_overview_update_December_2020.pdf)

association and assembly, such as laws prohibiting the dissemination of information about homosexuality and gender identity. Transgender people are also victims of specific forms of discrimination and violence.

Discriminatory practices and treatment remain widespread, even in countries that have taken steps to protect and defend LGBT+ rights. This discrimination is present everywhere (labour market, employment, school, home, and access to healthcare services).

Human rights are predicated on the recognition of the inherent dignity of all human beings, and LGBT+ people enjoy these same universal rights.

This includes the possibility to benefit from the same protection and equal opportunities.

Established in 2016, the UN Human Rights Council's independent expert on protection against violence and discrimination based on sexual orientation and gender identity is the only mandate in the UN system responsible for monitoring and regularly reporting on the situation of LGBT+ people. Strongly backed by France, the mandate was renewed for a three-year period in July 2022 (at the 50th session of the Human Rights Council), which will ensure continued focus on this issue in multilateral discussions. Through country visits and a dialogue-based approach, the independent expert has established close contact with the authorities in countries where the situation is concerning. **The expert's contribution is key in the fight for the universal decriminalization of homosexuality and an end to discriminatory practices against LGBT+ people.**



A number of important advances have also been made at European level. On 24 June 2013, the Council adopted “guidelines to promote and protect the enjoyment of all human rights by LGBT+ people”. The guidelines almost exclusively address the situation in third countries and contacts with international and civil society organizations within the scope of the European Union’s external action. The guidelines cover the following priority areas of action:

- Decriminalization and combating discriminatory laws and policies;
- Promoting equality and non-discrimination;
- Combating LGBT+ phobic violence;
- Support and protection for human rights defenders.

The guidelines also highlight a number of operational tools, including support for efforts by civil society (funding, enhancing their visibility, and political dialogue, with particular focus on “human rights” issues and specialized dialogue) and public representation and statements. Finally, the guidelines also encourage the European Union to advocate strongly in multilateral forums (United Nations in New York and Geneva, OSCE, and Council of Europe).

The European Commission has also made a commitment through its first-ever LGBTIQ Equality Strategy 2020-2025.²⁸ The strategy aims to amplify the voices of LGBT+ people and to bring together Member States and stakeholders at all levels in a collective effort to effectively combat discrimination against LGBT+ people. This strategy is organized across **four pillars**:

²⁸ commission.europa.eu/strategy-and-policy/policies/justice-and-fundamental-rights/combating-discrimination/lesbian-gay-bi-trans-and-intersex-equality/lgbtiq-equality-strategy-2020-2025_en

- 1– Tackling discrimination against LGBT+ people;
- 2– Ensuring LGBT+ people’s safety;
- 3– Building LGBT+ inclusive societies;
- 4– Leading the call for LGBT+ equality around the world.

“Conversion therapy”

The term “conversion therapy”, which originated in the United States in the 1950s, can be defined as **any treatment aimed at changing a person’s sexual orientation or gender identity, usually under duress and using particularly brutal methods** (electric shocks, etc.). These “therapies” are based on the assumption that homosexuality, bisexuality and trans-sexuality are illnesses that require treatment. **They are extremely harmful, causing severe suffering and long-term physical and psychological trauma (depression, isolation and suicide).** “Conversion therapies” are still widely practiced worldwide, perpetuating discrimination and violence based on sexual orientation and gender identity.

Access to primary healthcare and sexual and reproductive health services

LGBT+ people face significant challenges in the healthcare sector due to discrimination, lack of information, inadequate training of healthcare professionals, inappropriate services and lack of access to hormone therapy for those undergoing gender transition. Similarly, in countries where women are not permitted to access health services unless accompanied by a male parent or partner, lesbian and bisexual women in relationships with women are deprived of proper care. In addition, the mental healthcare needs of LGBT+ people are poorly met, even though they are more prone to depression, anxiety and addiction problems due



LEGISLATION REGARDING “CONVERSION THERAPY”

On 1 March 2018, the European Parliament passed a resolution condemning “conversion therapies” and called on EU Member States to legislate to ban them. Several countries and regions have already passed legislation in this regard: Malta in 2016, Germany in 2020 and several Spanish provinces. In France, a law enacted on 31 January 2022 established a specific offence for “repeated practices, behaviour or statements aimed at modifying or repressing a person’s sexual orientation or gender identity, whether real or supposed, and having the effect of altering their physical or mental health”. It is now an offence punishable by two years’ imprisonment and a €30,000 fine.

to the stigma and exclusion they often face.

The National Action Plan to Promote Equal Rights and Combat Anti-LGBT+ Hatred and Discrimination (2020-2023), which will soon be revised, acknowledges this aspect and outlines healthcare measures for LGBT+ people, such as educating medical professionals about non-discrimination and providing appropriate and respectful medical care, including gynaecological care. This position is also supported internationally.

Moreover, international funding support for projects promoting access to SRHR for LGBT+ people was historically managed through sexual health programmes, more specifically in the context of HIV/AIDS prevention and treatment.

Commitments

- **Following announcements by the French President and Prime Minister, France strengthened its commitment by appointing an Ambassador for LGBT+ rights²⁹ in October 2022.**
- **France will step up its political advocacy for the universal decriminalization of homosexuality and the fight against violence and discrimination targeting LGBT+ people.**
- **France will strengthen its support for civil society organizations and defenders of LGBT+ rights.**
- **France will continue its advocacy in international organizations for greater consideration of issues related to sexual orientation and gender identity. It will remain in close contact with the Human Rights Council’s independent expert working on this issue.**
- **France will maintain its commitment to bilateral and multilateral initiatives to implement health programmes that promote LGBT+ people’s rights to access healthcare. This will be executed through its financial contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria, and the Initiative.**

²⁹ diplomatie.gouv.fr/en/french-foreign-policy/human-rights/france-s-action-for-the-rights-of-lgbt-people/article/france-s-action-for-the-rights-of-lgbt-people#:~:text=criterion%20for%20asylum.-,An%20Ambassador%20for%20the%20rights%20of%20LGBT%2B%20people,-On%2026%20October

6

Defence of SRHR in crisis situations

The last decade has seen unprecedented growth in humanitarian needs. Health crises, economic downturns, political unrest, climate change, humanitarian crises and global conflicts regularly compromise access to sexual and reproductive health, rights that are already regularly threatened or undermined in many peaceful contexts. Women and girls are the first to suffer the consequences of these crises, which affect them disproportionately. This is because **when social structures and health systems are disrupted, the responses to sexual and reproductive health needs stall or are degraded.**



Global Survivors Fund

Co-founded by the two 2018 Nobel Peace Prize winners, Nadia Murad and Dr Denis Mukwege, the Global Survivors Fund for survivors of conflict-related sexual violence provides support and access to medical, physical, psychological and financial reparations enabling them to rebuild their lives. The Fund operates in a range of conflict and post-conflict zones, with projects in Guinea, the Democratic Republic of the Congo, Iraq, Turkey (with refugee populations), the Central African Republic, Nigeria and Ukraine.

The Fund is supported by various donors including France, which contributed €8.2 million between 2019 and 2022. Part of this sum was allocated as additional funding for operations to support survivors of sexual violence in Ukraine as a result of the war. France also sits on the Fund's Board of Directors. France renewed its commitment to the Fund in 2023.

Consequently, these crisis situations result in an increased risk to women's health due to the higher likelihood of unwanted pregnancies, maternal mortality and disability, sexual and gender-based violence, unsafe abortions and STIs, including HIV. These key issues were accentuated with the outbreak of the COVID-19 pandemic. According to a UNFPA report,³⁰ "in the first 12 months of the COVID-19 pandemic, the estimated disruption in contraceptive supplies and services lasted an average of 3.6 months, leading to as many as 1.4 million unintended pregnancies".

30. unfpa.org/swp2022

Disruptions to contraceptive services continued into 2021, and they remained some of the worst affected services. Similarly, in such emergency situations, women often lose access to contraceptives, and sexual violence increases, affecting over 20% of refugee women and girls. In Afghanistan, UNFPA estimates that war and disruptions to health systems could lead to 4.8 million unintended pregnancies by 2025.

To address the challenges in accessing sexual and reproductive health services, an immediate humanitarian health response is the Minimum Initial Service Package (MISP). According to the Inter-Agency Working Group on Reproductive Health in Crisis³¹ (IAWG), the MISP for sexual and reproductive health is “a set of priority life-saving sexual and reproductive health (SRH) services and activities to be implemented at the onset of every humanitarian emergency to prevent excess SRH-related morbidity and mortality”, encompassing access to emergency contraception and comprehensive abortion care, including medical abortions. “All service delivery activities of the MISP need to be implemented simultaneously through coordinated actions with all relevant partners. It is important to note that the components of the MISP form a minimum requirement and are intended to be implemented in all circumstances. These services should be sustained and built upon as soon as possible (ideally 3-6 months) with comprehensive SRH services and supplies during protracted crises and recovery.”

Commitments

- **France will step up its advocacy efforts in high-level multilateral and international forums to ensure that women and girls have access to sexual and reproductive health services and products in emergency situations. France will also work to prevent and protect against gender-based violence and conflict-related sexual violence used as a weapon of war.**
- **France is committed to promoting the MISP for SRH, in particular access to emergency contraception and comprehensive abortion care, including medical abortion as a critical humanitarian response.**
- **Through its support for the UNFPA Supplies Partnership (€90 million between 2021 and 2025), France supports the deployment of the Minimum Initial Service Package (MISP) in humanitarian and crisis situations.**

31. cdn.iawg.rygn.io/documents/MISP-Reference-English.pdf?mtime=20200322131753&focal=none#asset:26025

Chapter 2

Operational objectives

The aim of this chapter is to describe the operational implementation of the ambitious priorities and positions that France intends to adopt with regard to SRHR.

This operational part has two main objectives: **to develop a “methodology for external action”** to advance France’s commitment to and influence on SRHR issues, and **to set out “areas for internal action”** to facilitate the integration of this thematic area by the French diplomatic network and operators.

OBJECTIVE 1

Meet the financial commitments made for SRHR and ensure accountability for them

→ **ACTION 1**

Fulfil the financial commitments announced at the Generation Equality Forum

France has stepped up its financial support since its first SRHR strategy in 2016. In July 2021, at the Generation Equality Forum, France announced that it would allocate €400 million

to SRHR and women’s health over the period 2021-2025. The annual SRHR strategy review meeting will be an opportunity to report on the successful implementation of these commitments.

France will participate in the mid-term review of the Generation Equality Forum in September 2023 and in the final review of the Forum in 2026 to assess its own progress and reaffirm its commitment to this issue.

FRANCE'S FINANCIAL COMMITMENTS

France, as co-champion of the Generation Equality Forum Action Coalition on Bodily Autonomy and SRHR, announced the allocation of **€400 million euros between 2021 and 2025** to advance SRHR globally.

€100 million allocated across multiple initiatives:

- **€90 million to the UNFPA Supplies Partnership** to purchase and distribute contraceptives and sexual and reproductive health products;
- **€5 million to the new Shaping Equitable Market Access for Reproductive Health (SEMA)** programme to ensure equitable access to sexual and reproductive health products;
- **€5 million to the Organization for Safe Abortion Dialogue (ODAS)** in West and Central Africa, led by the NGO Ipas;
- **€250 million** channelled through the AFD for SRHR up to 2026;
- **€50 million to the French Muskoka Fund** until end-2026 to reduce maternal and child mortality in West Africa. UNFPA, UN Women, UNICEF and WHO are responsible for implementing the activities under this fund, which was launched by France in 2011.



→ **ACTION 2** Ensure regular and transparent financial monitoring of SRHR

There is currently no shared international accounting methodology for SRHR. However, France is implementing international standards for transparency in official development assistance. This can be seen with the Development Assistance Committee (DAC) of the Organisation for Economic Co-operation and Development (OECD) through Sector Code 130 Population Policies/ Programmes & Reproductive Health, and more specifically purpose code 13030 Family Planning. However, this

sector code alone does not provide a comprehensive overview of SRHR funding. France also reports its funding on a voluntary annual basis to the Family Planning 2030 initiative and the Countdown 2030 Europe project. Once again, it should be noted that this methodology has not yet been standardized so it only provides a partial view.

In order to facilitate access to information, ownership and transparency of funding, France will participate in initiatives aimed at establishing a standardized national monitoring methodology, which will enable the systematic tracking of global SRHR funding. Updating the OECD DAC markers could be a means of ensuring they are more representative of the issues covered by SRHR.

OBJECTIVE 2

Step up political advocacy for SRHR at the international level

→ **ACTION 1** Defend ambitious positions in multilateral forums through high-level French representation

France will continue to defend the most ambitious positions possible in multilateral, UN and European bodies and high-level international forums, while maintaining a culture of compromise and respect for the rules of multilateralism. France will engage in dialogue in all forums where SRHR are discussed, and at all political levels, including international, multilateral and bilateral. This is particularly applicable for UNFPA, WHO, UNICEF, UNESCO, UN Women, UNAIDS, UNDP, and individual governments. France will push for ambitious language in all negotiating forums and will leverage its influence

to advance SRHR in international texts, and also to encourage normative and legislative changes at country level. France will seek to maintain and expand its influence on these issues by holding firm positions in all international negotiating forums and bodies such as the UNGA, UNSC, HRC, CSW, CPD, G7, G20, European Union and World Health Assembly. France will build and join coalitions that promote SRHR.

To this end, France will continue to participate in as many summits, meetings and dialogues on SRHR as possible, seeking both the highest possible level of representation and the opportunity to reassert its vision and approach.

→ **ACTION 2**
Include the six thematic priorities of the SRHR strategy in bilateral, European and multilateral dialogue and exchanges

France will continue its efforts to systematically include human rights and SRHR in bilateral, European and multilateral dialogue and exchanges, as well as in its G7 and G20 partnerships. Whenever possible, France will reiterate that SRHR are an essential part of sustainable social development and should be considered a priority.

Example of action: the Francophonie Strategy for the promotion of gender equality and women and girls' rights and empowerment was adopted at the Francophonie Summit in Yerevan (2018). France played an active part in drafting the strategy and has supported its implementation ever since.

Objective 11.4 aims to "ensure access to sexual and reproductive healthcare for all, ensure that everyone can exercise their reproductive rights in accordance with the international obligations of States and governments, and work to eliminate sexual and gender-based violence."

OBJECTIVE 3

Strengthen multi-stakeholder partnerships

A partnership approach is the underlying principle of France's action. France will focus on seeking partnerships and strengthening alliances and collaborations through ongoing dialogue.

→ **ACTION 1**
Involve and support French and international civil society organizations

French and international civil society organizations, women's movements, feminist movements and youth organizations are key players in health, gender and SRHR issues. "These organizations play a leading role in ensuring access to and promotion of SRHR at local, national and international levels. They have unique knowledge of the issues on the ground and privileged access to target populations."³² France will work to strengthen ties with these stakeholders through regular consultations and will ensure that they are included in strategic discussions. The aim will be to develop joint positions and continue to provide financial support to civil society organizations and women's movements through the Support Fund for Feminist Organizations (FSOF) and other available funding mechanisms, including the FSPI-PISCCA (French Solidarity Fund for Innovative Projects – Innovative Projects from Civil Society and Stakeholder Coalitions).

32. generationsfeministes.org/ [in French]



→ ACTION 2

Foster alliances and support regional and European initiatives

France will seek to maintain close relations with like-minded countries and participate in collaborative initiatives with this group of nations. It will also participate in and support the work of international network structures such as the She Decides advocacy movement. France will continue to support regional organizations and initiatives in promoting SRHR, especially in West and Central Africa, such as the Ouagadougou Partnership and the French Muskoka Fund, as well as international initiatives such as L'Initiative.

France will also continue to work with the European Union on the new Neighbourhood, Development and Cooperation Instrument (NDICI – Global Europe). It will place particular emphasis on the implementation of the Team Europe Initiative on SRHR in Sub-Saharan Africa to increase the visibility of “Team Europe” among the relevant Regional Economic Communities.

Support Fund for Feminist Organizations

Launched on 15 July 2020, the goal of the Support Fund for Feminist Organizations (Fonds de soutien aux organisations féministes, FSOF) is to support feminist civil society organizations in partner countries of France's development and international solidarity policy. By co-developing this fund with civil society and as part of its commitment to feminist foreign policy, France actively contributes to financing feminist civil society organizations, targeting those that are usually left out from funding. France has already provided €134 million in funding to the FSOF (2020-2022) and has renewed its commitment for a further three years (2023-2025).

The FSOF targets feminist civil society organizations in all their diversity, whether formally constituted or not, whose objective is to promote gender equality and transformative change in gender-based social relations, especially organizations whose main mission is to defend and promote the effective rights and empowerment of women and girls.

Over the three-year period 2020-2022, the Fund addressed the following issues:

- Sexual and reproductive health and rights, and comprehensive sexuality education;
- The fight against gender-based and sexual discrimination and violence, including against harmful practices (female genital mutilation, child and forced marriage);
- Women's empowerment and economic participation;
- Women's social and political leadership;
- Girls' access to primary, secondary, and higher education;
- The “Women, Peace and Security” agenda and the role of women in crises;
- Gender and climate.

Feminists in Action is the first project financed by the Support Fund for Feminist Organizations. With €15 million in funding provided by the AFD, the project is led by a consortium of six associations headed by CARE France. It aims to support the fight against gender inequality from a multi-sectoral perspective (sexual and reproductive health rights, gender-based violence, access to rights and economic empowerment). It also seeks to support the actions of feminist CSOs that defend women's rights in priority countries where France focuses its grant-based solidarity efforts.

This project will provide between €5,000 and €250,000 to CSOs for actions including advocacy, sexuality education, and access to contraception and abortion, in over 30 countries.



She Decides

The She Decides initiative was launched in 2017 by four European countries (Belgium, the Netherlands, Denmark and Sweden) in response to US funding cuts to NGOs that advocated for or supported abortion. Since then, the initiative has reorganized its efforts to defend bodily autonomy and sexual and reproductive health and rights in a challenging global context.

The initiative brings together governments, civil society organizations, youth leaders, parliamentarians, activists, service providers, researchers, media, artists and donors. This global collective action movement for the right of all women and girls to make decisions about their body, their life and their future aims to ensure that all women, girls and young people, in all their diversity, have:

- Access to information about their bodies and their rights;
- Access to the appropriate organizations to act on these rights and make decisions;
- Access to sexual and reproductive health services, including access to safe and legal abortion services.



Team Europe Initiative

The Team Europe Initiative (TEI) aims to support cooperation between the EU, Member States (including agencies) and European financial institutions (EIB, EBRD) on large-scale programmes focusing on a specific sector or objective. The goal is to have a transformational impact in the country or region identified, and to give greater visibility to European aid.

The European Commission and ten EU Member States (Belgium, Czech Republic, Denmark, Finland, France, Germany, Ireland, Luxembourg, Netherlands and Sweden) have joined forces to develop a new TEI on SRHR in sub-Saharan Africa. The aim is to improve the coordination of combined investments by the ten Member States in SRHR in this region.

The TEI has been approved on the basis of the following three pillars:

- Strengthen political commitments and capacities to implement regional SRHR;
- Strengthen regional mechanisms to address supply-side constraints and improve access to quality assured SRH-commodities;
- Strengthen advocacy and social accountability of regional commitments on SRHR.

Following the mapping of financial commitments, Team France's contribution to SRHR within the framework of the TEI is estimated at nearly €300 million for the period 2022-2023, distributed across 43 projects with most of the investment in pillars 1 and 2 (71% of the total amount). The AFD is the largest French contributor (52%), followed by the MEAE (42%) and Expertise France (6%).

OBJECTIVE 4

Ensure long-term ownership of the SRHR strategy by the French diplomatic network

To promote SRHR at international, regional, national and local levels, it is important to create and maintain an environment willing to put SRHR on the agenda, which requires a good understanding of the issues involved. The French network (i.e. all the staff of the Ministry for Europe and Foreign Affairs and its agencies) is the primary means for achieving this objective.

→ **ACTION 1** Increase information and communication on SRHR

It will be important to regularly inform the French network about developments in SRHR and communicate on the positions taken, as well as on French actions and funding. Special attention will be paid to communications and information concerning the thematic priorities established by France as part of this strategy.

This action must include the establishment of tools for regular communication with diplomatic posts (including the entire French diplomatic network, such as embassies, consulates and French representations abroad) and other French actors. Embassies, diplomatic representations,

equality officers, regional global health advisers and agencies will all be mobilized.

Implementing the objectives of France's SRHR strategy will require close collaboration with operators, starting with the AFD and Expertise France. The aim is not only to maintain and strengthen collaboration in the production of strategic documents, but also to foster a common understanding of the issues involved.

→ **ACTION 2** Organize regular monitoring of the implementation of the SRHR strategy

To ensure the effective implementation of this strategy, the Human Development Department (DGM/ DDD/HUMA) will carry out regular monitoring through an annual steering committee. This will allow for annual reporting on the implementation of the strategy, including internally and with agencies. The steering committee will involve various stakeholders: ministries, diplomatic posts, civil society organizations and agencies. This meeting will be guided by the accountability framework outlined in the appendix to this document. Lastly, an external review will be conducted in the final year of the strategy's implementation.

Chapter 3

Linkage with sectoral strategies

Because of their cross-cutting nature, SRHR intersect with several French strategies. Actions to promote SRHR must be included and reflected in all of these strategies, as well as in the action plans of thematic ambassadors (LGBT+ rights, human rights and global health).

French feminist foreign policy

Today, women and girls' rights are still contingent on protecting their sexual and reproductive rights. True gender equality cannot be achieved unless women and girls have complete control over their bodies and their future. France has been pursuing a feminist foreign policy since 2019 and has adopted its third International Strategy for Gender Equality (2018-2022), which is currently being updated. France is championing this issue in a cross-cutting and focused manner through its activities, as well as through ambitious advocacy in all international, multilateral and bilateral arenas. This commitment is also reflected in the mobilization of agencies around the

objective of gender equality. Lastly, one of the main pillars of this strategy is to improve gender mainstreaming in official development assistance, as well as in security, defence and trade policies.

France follows the OECD-DAC gender equality policy markers:

- DAC 1, if gender equality is an important objective, but not the principal reason for undertaking the project/programme;
- DAC 2, if gender equality is the main objective of the project/programme and is fundamental to its design and expected results.

France has also set the ambitious target that all AFD-funded projects and programmes should have a gender marker, and that half of the annual commitment volume should have gender as a principal or significant objective by 2022. In this regard,³³ France has pledged that by 2025, 75% of programs financed by French bilateral official development assistance should include gender equality as either a principal or significant objective, and at least 20% as a principal objective.

France's human rights and development strategy

Through its rights-based approach, France's 2019 Human Rights and Development strategy establishes a new method to ensure that all international cooperation actions fully contribute to the respect for human rights and are resolutely more sustainable and efficient in achieving the SDGs. The rights-based approach has two guiding principles:

- **Do no harm:** French-led projects must not violate human rights or have a direct or indirect negative impact on local populations;
- **Maximize the positive impact:** French-led projects must aim to have a maximum positive impact on human rights, in particular by helping to empower rights holders to assert their rights, and duty bearers to comply with their obligations.

This strategy defines four priority areas for France to promote and protect human rights through cooperation:

- Education on human rights and the rights-based approach;

- Assist development stakeholders to implement the rights-based approach;
- Support human rights defenders in a context of shrinking space for civil society;
- Support the effective implementation of international mechanisms to promote and protect human rights.

The issue of SRHR is therefore an integral part of the human rights and development approach

France's global health strategy

French action on health and sexual and reproductive health

France has had a global health strategy the 2010s. It is fully aligned with the achievement of the SDGs. In addition, sexual and reproductive health was included in France's Global Health Strategy 2017-2021, under the following two angles:

- Promote the inclusion of sexual and reproductive health and rights in the fight against communicable diseases (priority 1);
- Improve SRHR, especially for adolescents, girls and women (priority 3).

France's next global health strategy 2023-2027 will continue to promote the full inclusion of SRHR in healthcare and services to ensure equitable access for all, especially adolescent girls and boys.

Through its 2017-2030 National Sexual Health Strategy, France has also outlined its objective to improve the international normative framework for sexual health and rights within the European Union, multilateral organizations and dedicated funds and programmes.

³³ legifrance.gouv.fr/jorf/id/JORFTEXT000043898536

This expertise is provided through the operators Expertise France and the AFD.

Implementing gender equality and SRHR for inclusive and accessible healthcare

To achieve universal health coverage (UHC), it is essential to promote gender equality and ensure universal access to comprehensive sexual and reproductive health services for everyone to enjoy the highest attainable standard of health.

To this end, the range of SRH services needs to be strengthened lastingly and integrated into the broader healthcare system to meet the specific needs of the population. People must have access to good quality healthcare and services, including health promotion, disease prevention, treatment and rehabilitation. Care and services must be provided by trained and qualified healthcare professionals. Achieving UHC requires removing all barriers to healthcare access, addressing health determinants, and combating vulnerability, poverty and discrimination.

FRENCH MUSKOKA FUND¹

The French Muskoka Fund (FMF) has been operating since 2011 in West and Central Africa to help reduce maternal and child mortality and improve sexual, reproductive, maternal, newborn, child and adolescent health and nutrition (SRMNCAH-N).

France's financial support enables this innovative mechanism for coordination, technical support and implementation at regional and national level to bring together the complementary mandates and distinct comparative advantages of four UN agencies: WHO, UN Women, UNFPA and UNICEF. Today, the FMF is an operating model that enables better coordination of regional and national strategies, harmonizes technical support in countries, and mobilizes partners and funds to promote SRMNCAH-N in nine countries (Benin, Burkina Faso, Chad, Côte d'Ivoire, Guinea, Mali, Niger, Senegal and Togo).

Since 2011, France has invested more than €160 million through the French Muskoka Fund for interventions on the ground in collaboration with local authorities, organized around four main intervention areas:

- Maternal, newborn and child health and family planning;
- Adolescent and youth sexual and reproductive health;
- Strengthening health systems;
- Nutrition.

Denmark also contributed €3 million to the fund in 2019 and 2020.

Between 2010 and 2017, all Muskoka countries saw a significant reduction in their maternal mortality rates, with substantial decreases in Guinea (44%), Senegal (43%) and Burkina Faso (38%). All the activities developed as part of the French Muskoka Fund fully align with the countries' national health development plans and form part of the Global Strategy on Women's, Newborn, Child and Adolescent Health (2016-2030).

In July 2021, at the Generation Equality Forum, France renewed its political, technical and financial support for the FMF, with funding of €10 million per year up to and including 2026.

1. ffmuskoka.org



Today, there is a gradual shift from the long-standing disease-centred approach in healthcare to an integrated response to HIV in sexual and reproductive health services. This is part of a broader approach to combat and prevent all STIs, with a focus on young people and adolescents.

France's international strategy for education

France is involved across the entire education-training-employment continuum, both in development

contexts and in emergency and protracted crisis situations.

France's external action in this sector align with its overall education strategy. It supports universal access to high-quality essential foundational skills and is also committed to fostering access to quality education for all by promoting lifelong learning opportunities. This involves strengthening the management and governance of education systems and initial and continuing teacher training, and promoting access to a diversified landscape of higher



Global Fund to Fight AIDS, Tuberculosis and Malaria

The Global Fund is an international organization that aims to end the HIV/AIDS, tuberculosis and malaria pandemics while strengthening health systems for greater impact and resilience.

Today, the Global Fund provides the majority of international financing to fight pandemics in developing countries, with 30% for HIV/AIDS, 76% for tuberculosis and 63% for malaria programmes. It mobilizes and invests more than US\$4 billion a year to support programmes led by local experts in more than 100 countries.

France is a founding member of the Global Fund and plays an important role in its governance. It is the second largest donor overall, with a total contribution of €6.14 billion since the fund's creation in 2002. At the 7th Replenishment Conference in September 2022, France pledged an additional €300 million over three years to the Global Fund, representing a total contribution of almost €1.6 billion for 2023-2025, a 23% increase compared with 2020-2022. France also actively campaigns for the integration of a human rights-based approach within the Global Fund and prioritizes gender issues and SRHR as a key focus of the Global Fund.

The Global Fund has developed an ambitious new strategy that reinforces the imperative to maximize gender equality. It will focus on scaling up programmes to remove human rights and gender-related barriers and leverage the Global Fund's diplomatic influence for more equitable, gender-responsive and rights-based responses. SRHR are an explicit focus of this new strategy, which emphasizes the need to support comprehensive sexuality education and its inclusion in HIV programmes for women in all their diversity and their partners. In this regard, the Global Fund is currently developing a gender equality marker to assess and report on the extent to which its funding contributes to advancing gender equality.

The Global Fund has increased its investments more than five-fold to reduce the incidence of HIV among adolescent girls and young women in 13 priority countries in Africa. An innovative matching funds programme launched in 2017 has used US\$55 million to mobilize an additional US\$140 million for programmes to reduce new HIV infections, violence and unwanted pregnancies among one million adolescent girls and young women in the 13 countries. These countries are on course to achieve a 40% to 45% reduction in incidence by 2022.



L'Initiative¹

L'Initiative is France's indirect contribution to the Global Fund, managed by Expertise France under the supervision of the MEAE. It finances technical assistance missions and catalytic projects to fight the three pandemics. At the 7th Replenishment Conference of the Global Fund to Fight AIDS, Tuberculosis and Malaria in September 2022, which took place on the sidelines of the United Nations General Assembly, French President Emmanuel Macron announced an increase in the contribution to the Global Fund of €300 million and a sharp rise in the share allocated to L'Initiative.

SRHR have been an integral part of the L'Initiative's investments since its creation, mainly through project funding. L'Initiative has developed expertise in access to high-quality sexual and reproductive health services and products, promoting equality and access to LGBTQIA+ rights. The priority themes are as follows:

- SRHR issues from a community health perspective;
- Prevention and treatment of STIs and HIV;
- HPV screening and secondary prevention of cervical cancer for women living with HIV;

- Engaging with key populations and adolescents in sexual health;
- Gender equality;
- Gender issues in sexual health.

Since 2011, L'Initiative has supported 55 projects addressing at least one SRHR component in 29 countries, with a budget of €63 million. It has also provided €6.7 million to support 46 technical assistance projects in 24 countries with at least one SRHR component. In September 2022, France announced a significant increase in the portion of funding channelled to L'Initiative, bringing it to 20% of the total French contribution (compared with 9% in the previous cycle), amounting to €319 million over three years. The goal is to enhance the Global Fund's actions to strengthen health systems (healthcare professionals, laboratory networks, local supply chains, capacity building of community players and integration of community health systems, and human rights and gender-based approach to remove barriers to accessing services). This increase will naturally be extended to the funding of projects with an SRHR component.

1. [initiative5pour100](#)

education and technical and vocational training.

Girls' education and gender equality are emphasized. France is therefore committed to expanding access to education and keeping all girls and adolescents in the school system, especially at secondary level where social and gender norms often lead them to drop out of education. Advocating education for all creates a virtuous circle that leads to greater empowerment, including in making informed decisions about their bodies and their sexuality. Therefore, action to promote girls' education

complements the recognition of youth and adolescent SRHR, which is one of France's top priorities.

To achieve its strategic goals, France aims to eliminate the many socio-economic barriers that exist. These include insufficient family income, high schooling costs, lack of suitable, good quality educational facilities and equipment, including as regards health, period poverty and sanitation, poor teacher training, lack of female teachers in certain geographical areas (particularly in Africa), negative perceptions of school, stereotypes about the role of women in relation



UNITAID: priority to women and children's health

UNITAID's programmatic priorities include a specific focus on women and children's health, with the aim of improving access to better tools for safe pregnancy and childbirth for women and their babies.

UNITAID facilitates access to tools that prevent, diagnose and treat conditions that lead to maternal and neonatal deaths. For example, UNITAID is accelerating the adoption of new measures to combat post-partum haemorrhage and pre-eclampsia/

eclampsia, which cause 40% of maternal deaths. This is achieved through evidence generation, market shaping and demand generation. UNITAID also supports the scaling up of existing tools and market entry of late-stage development products that address maternal and neonatal sepsis more widely. UNITAID's experience and mandate enable it to help overcome access barriers through evidence generation, market shaping and demand generation activities.

to domestic and care work, child and forced marriages, teenage pregnancies, and sexual and gender-based violence in schools.

France's international strategy for food security, nutrition and sustainable agriculture

France adopts a holistic, multi-sectoral and multi-stakeholder approach to addressing malnutrition. It will continue to prioritize undernutrition and the critical period of the first 1,000 days (pregnant and breastfeeding women and children under the age of 2). France confirmed its commitment to nutrition at the last Nutrition for Growth (N4G) Summit on 7 December 2021, including through its Programmed Food Assistance (Aide alimentaire programmée, AAP – see *below*). Given that France will host the next edition of this summit in 2024 or 2025, in connection with the Olympic Games, expectations will be high in this regard.

France aims to address both the direct and the underlying causes of malnutrition, such as gender inequality and education. Women are often responsible for preparing

meals and childcare, without control over the budget, adequate education (particularly with regard to nutrition) or even access to balanced meals. Micronutrient deficiencies (iron-deficiency anaemia, calcium, etc.) are risk factors for carrying a pregnancy to term. In addition, women with stunted growth are more likely to give birth to low-weight babies. Finally, it is worth noting that early pregnancy and breastfeeding among girls increase nutritional needs, while pregnant and breastfeeding women have specific nutritional needs.

AAP is France's main mechanism for responding to food crises. In particular, it aims to meet the food needs of vulnerable populations in "post-humanitarian emergency" situations, and also to strengthen their resilience and combat malnutrition by promoting the restoration of food autonomy and livelihoods. The budget allocated to AAP has increased significantly in recent years, rising from €33.5 million in 2018 to more than €140 million in 2022. Under the terms of its 2019-2024 international strategy, 50% of France's AAP funding is earmarked for combating malnutrition.



Global Partnership for Education¹

The Global Partnership for Education (GPE) is the largest multilateral fund focused on basic education (primary and secondary). It finances education support projects in over 80 partner countries to transform education systems. France is a long-standing partner of the GPE and the third largest donor in the 2021-2025 cycle, with total funding amounting to €333 million over the period. Its contributions have helped fund programmes and initiatives to promote girls' education and gender equality through and for education, including raising awareness of sexual and reproductive health and rights, which are one of the pillars of the GPE 2025 Strategic Plan. France also supports this priority, dedicating half of its contribution (nearly €167 million) to the 2021-2025 financing campaign

to promoting girls' education and gender equality in and through education (announcement at the Generation Equality Forum). This includes ensuring that school textbooks and teacher training do not convey gender stereotypes.

Since the GPE's launch, 160 million more children in partner countries – more than half of them girls – are in school, and 67 million more children have access to qualified teachers. Similarly, 70% of partner countries with data have improved their learning outcomes, and 97% of sector plans include strategies to support the most marginalized, including girls and children with disabilities.

1. globalpartnership.org/en

France's humanitarian strategy

France's next Humanitarian Strategy (2023-2027), which is currently being drafted, will place significant emphasis on the protection of women and girls and vulnerable populations.

In its crisis response, France aims to ensure that women and girls receive an equal share of humanitarian aid, and that the humanitarian response fully addresses their priority needs and rights. This will be done in coordination with United Nations agencies, European partners and civil society organizations, including international and local feminist organizations. A cross-cutting and targeted approach to gender in France's humanitarian action will be implemented to ensure a comprehensive response to the needs of women and girls, with concrete commitments and performance indicators.

The Humanitarian Strategy 2023-2027 should also focus on measures to ensure:

- The prevention and fight against sexual and gender-based violence;
- The protection of women and girls against conflict-related sexual and gender-based violence used as a weapon of war;
- The participation of women in decision-making processes relating to conflict prevention, management, resolution and peace negotiations, in accordance with the Women, Peace and Security Agenda;
- Access to sexual and reproductive health services in humanitarian contexts, including the MISF.

Annexes



Accountability framework

To ensure the strategy is monitored and implemented by all stakeholders, the monitoring and accountability framework identifies indicators associated with each of the strategy's four operational objectives.

This **framework will be updated annually by MEAE's Human Development Department** (Gender, Education, Population and Youth Unit), which will be **responsible for steering and monitoring the deployment of the strategy**. To this end, each year it will collect information from all the stakeholders concerned (MEAE departments, operators and partners) to enable it to update the indicators. It will create a data collection tool to facilitate the reporting of these indicators by the various parties involved in implementing the strategy.

It will consolidate the information gathered into a report that will be presented at an annual meeting to MEAE departments and agencies involved in implementing the strategy.

A **final review** will be carried out in the last year of the strategy's implementation. A survey could be carried out in parallel to determine the extent to which the SRHR strategy has been adopted by the French network.

OBJECTIVE 1: Meet the financial commitments made for SRHR and ensure accountability for them

<p>Actions and implementation steps</p>	<p>Action 1.1. Fulfil the financial commitments announced at the Generation Equality Forum.</p> <p>Between 2021 and 2025, provide €400 million to fund SRHR in line with the commitments made at the GEF.</p> <p>The funding supports the thematic priorities set out in this strategy.</p>	<p>Action 1.2. Ensure regular and transparent financial monitoring of SRHR by carrying out the following actions:</p> <ul style="list-style-type: none"> → Collect and consolidate financial data from the various stakeholders following the GEF announcements (UNFPA Supplies, ODAS, SEMA, French Muskoka Fund, AFD); → Prepare an annual financial report on French funding commitments to SRHR and share this report with the various actors involved; → Provide a funding status report each year to Countdown 2030 Europe, FP2030 and the OECD DAC; → Actively participate in European and international discussions on establishing a standardized monitoring methodology.
<p>Outcome indicators</p>	<p>R1 – For the period 2021-2025, measures have been implemented to meet the financial commitments and ensure their regular and transparent monitoring.</p>	
<p>Sources</p>	<ul style="list-style-type: none"> → Update an annual financial tracker that groups the funding sources by theme: annual bilateral aid budget (AFD), UNFPA Supplies, ODAS, SEMA, French Muskoka Fund. → Reporting elements are submitted to international funding monitoring bodies. → Minutes of meetings on the financial monitoring of GEF commitments, with UN Women. 	
<p>Actors</p>	<ul style="list-style-type: none"> → MEAE departments (DEV, HUMA, NUOI, CDCS, DPO, etc.). → Stakeholders involved in the commitments announced at the GEF (AFD, UNFPA Supplies, ODAS, SEMA, French Muskoka Fund) with UN Women. → International monitoring bodies for SRHR funding (FP2030, Countdown 2030 Europe, OECD DAC). → European partners (European Commission, Member States and their agencies, European financial institutions (EIB, EBRD), other States). 	

OBJECTIVE 2: Step up political advocacy for SRHR at the international level

<p>Actions and implementation steps</p>	<p>Action 2.1. Defend ambitious positions in multilateral forums through high-level French representation with the following stakeholders:</p> <ul style="list-style-type: none"> → International organizations such as: UNFPA, WHO, UNICEF, UNESCO, UN Women, UNAIDS, UNDP; → National authorities of States. <p>And within the following bodies:</p> <ul style="list-style-type: none"> → International negotiating bodies such as: UNGA, UNSC, HRC, CSW, CPD, EU, World Health Assembly; → Intergovernmental economic forums: G7, G20. 	<p>Action 2.2. Include the 6 thematic priorities of the SRHR strategy in bilateral, European and multilateral dialogue and exchanges.</p>
<p>Outcome indicators</p>	<p>R2 – France is positioned as a champion of SRHR on the international stage and advocates an ambitious agenda for SRHR at a high level.</p>	
<p>Sources</p>	<p>Minutes and notes from meetings and summits.</p> <p>Create and update a database listing the SRHR advocacy efforts carried out by France within high-level international forums and meetings and in bilateral partnerships, specifying the level of participation and differentiating between the SRHR strategy's 6 thematic priorities:</p> <ul style="list-style-type: none"> → Access to high-quality sexual and reproductive health services and products; → Support for social and behaviour change management through comprehensive sexuality education and actions to transform masculinities; → Access to safe abortion; → The fight against harmful practices and sexual and gender-based violence; → Equality and access to rights for LGBT+ people; → SRHR in crisis situations. <p>During the final review, consult with other States and international organizations to gauge their perception of France's stance on SRHR issues.</p>	
<p>Actors</p>	<ul style="list-style-type: none"> → Diplomatic posts, regional global health advisers (CRSM). → MEAE departments (HUMA, CDCS, NUOI, etc.). 	

OBJECTIVE 3: Strengthen multi-stakeholder partnerships

<p>Actions and implementation steps</p>	<p>Action 3.1. Involve and support French and international civil society organizations through the following actions:</p> <ul style="list-style-type: none"> → Regularly consult civil society organizations, involve them in strategic discussions and international meetings, and call on them for their expertise; → Financially support civil society and feminist movements implementing SRHR projects through available funding mechanisms, such as FSOF or FSPI-PISCCA; → Monitor the funding of SRHR actions as part of L’Initiative. 	<p>Action 3.2. Foster alliances and support regional and European initiatives through the following actions:</p> <ul style="list-style-type: none"> → Maintain close relations with like-minded countries; → Participate in and support regional and international networks and initiatives promoting SRHR, mainly as part of the Team Europe Initiative; → Between 2022 and 2027, monitor the deployment of €300 million in SRHR funding as part of the Team Europe Initiative.
<p>Outcome indicators</p>	<p>R3 – France is involved in the various alliances and initiatives related to SRHR and supports French and international CSOs by maintaining ongoing dialogue with its partners.</p>	
<p>Sources</p>	<p>Annual review of the strategy, including a situational analysis to quantify and assess:</p> <ul style="list-style-type: none"> → CSO consultations carried out via ad hoc meetings; → Financial support for their SRHR projects; → French contributions to regional and international initiatives, as well as with like-minded countries. 	
<p>Actors</p>	<ul style="list-style-type: none"> → MEAE departments (RES, CIV, HUMA). → CSOs (including Equipop, MDM, Plan, Ipas and Family Planning). → Members of the Team Europe and NDICI initiatives. → Regional and European initiatives. → Ouagadougou Partnership. → L’Initiative. → French Muskoka Fund. → AFD, FSOF. → FSPI. 	

OBJECTIVE 4: Ensure long-term ownership of the SRHR strategy by the French diplomatic network

<p>Actions and implementation steps</p>	<p>Action 4.1. Increase information and communication on SRHR by carrying out the following actions:</p> <ul style="list-style-type: none"> → Communicate to all MEAE stakeholders and operators about the new SRHR strategy and encourage them to incorporate these SRHR issues in their own strategies, projects and communication and advocacy tools; → Provide regular information to diplomatic posts, MEAE departments and SRHR news operators at the international level and ask diplomatic posts to report regularly on SRHR developments in their respective host countries. 	<p>Action 4.2. Organize regular monitoring of the implementation of the SRHR strategy by carrying out the following actions:</p> <ul style="list-style-type: none"> → Prepare an annual review of implementation of the strategy to report on the achievements over the past year (projects, advocacy, events, partnerships, etc.) in each of the strategy's 6 thematic areas by consolidating the information gathered from the various stakeholders; → Share the results of the annual review with MEAE departments, agencies and civil society organizations involved in implementing the strategy (meeting); → In the last year of the strategy's implementation, perform a final review involving stakeholders and civil society organizations.
<p>Outcome indicators</p>	<p>R4 – The entire French network has adopted the SRHR strategy and is contributing to its implementation.</p>	
<p>Sources</p>	<ul style="list-style-type: none"> → Meeting minutes. → Information and communication notes produced by HUMA, diplomatic posts, MEAE departments and agencies. → Strategies and projects by MEAE and agencies. → Annual review performed by HUMA. → During the final review, consult with MEAE departments, diplomatic posts and operators to measure ownership of the strategy's issues. 	<ul style="list-style-type: none"> → Meeting minutes. → Information gathering tools. → Annual review performed by HUMA incorporating the contributions of the various stakeholders grouped into the six thematic priorities of the SRHR strategy. → Access to high-quality sexual and reproductive health services and products. → Support for social and behaviour change management through comprehensive sexuality education and actions to transform masculinities. → Safe abortion.
<p>Actors</p>	<ul style="list-style-type: none"> → Diplomatic posts, regional global health advisers (CRSM), equality officers. → MEAE departments (HUMA, CDCS, NUOI, CIV, GOUV, etc.). → Agencies (AFD, EF, etc.). 	

Acronyms and abbreviations

AFD	Agence Française de Développement (French Development Agency)
CICID	Comité Interministériel de la Coopération Internationale et du Développement [French Interministerial Committee for International Cooperation and Development]
CSE	Comprehensive Sexuality Education
CSO	Civil Society Organization
CSW	Commission on the Status of Women
CRSM	Conseillers Régionaux en Santé Mondiale [regional global health advisers]
EF	Expertise France
FGM	Female Genital Mutilation
FP	Family Planning
FSOF	Support Fund for Feminist Organizations (Fonds de Soutien aux Organisations Féministes)
FSPI	French Solidarity Fund for Innovative Projects (Fonds de Solidarité pour les Projets Innovants)
GEF	Generation Equality Forum
GAP	Gender Action Plan
HRBA	Human Rights-Based Approach
HRC	Human Rights Council
ICD	International Classification of Diseases
ICPD	International Conference on Population and Development
LGBT+	Lesbian, gay, bisexual, transgender + people
MISP	Minimum Initial Service Package

NGO	Non-governmental organization
OECD	Organisation for Economic Co-operation and Development
ODAS	Organization for Safe Abortion Dialogue (Organisation pour le dialogue en faveur de l'avortement sécurisé)
OP	Ouagadougou Partnership
SDG	Sustainable Development Goals
SEMA	Shaping Equitable Market Access for Reproductive Health
SRH	Sexual and Reproductive Health
SRHR	Sexual and Reproductive Health and Rights
STI	Sexually Transmitted Infection
UHC	Universal Health Coverage
UNGA	United Nations General Assembly
UNFPA	United Nations Population Fund
WHO	World Health Organization

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