

# SUPPORTING SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS BEYOND 2020: A EUROPEAN VISION

The year 2020 is a critical time for sexual and reproductive health and rights. It not only marks the five-year milestone for delivering the Sustainable Development Goals (SDGs), but also sees governments recommitting to gender equality and the Beijing Declaration and Platform for Action<sup>1</sup>, following global reaffirmation of the International Conference on Population and Development (ICPD) at the Nairobi Summit<sup>2</sup> in November 2019. The COVID-19 pandemic has also made 2020 a year of unprecedented crisis, exacerbating existing health, social and economic inequalities worldwide.



This paper is the outcome of a consultation with the foreign affairs ministries and development agencies of Belgium, Denmark, Finland, France, Germany, Ireland, the Netherlands, Norway, Spain, Sweden, Switzerland, the UK and the EU institutions. These governments and institutions share a common goal: to work for the realization of sexual and reproductive health and rights globally. This paper explores their approaches and priorities and how these reinforce each other, and maps out the elements of a shared vision for a full sexual and reproductive health and rights (SRHR) agenda worldwide. The analysis is based on policy documents and insights gathered from discussions with government representatives in April and May 2020.

In the 25 years since the first ICPD in 1994, collaboration between European donors and civil society has paved the way for protecting and promoting SRHR domestically and in partner countries worldwide. But while there have long been obstacles to progress, the current global situation may bring challenges that are unprecedented in scope, speed and intensity. Never has it been more critical to protect and bolster a strong voice from progressive European states on SRHR. It is now crucial to identify a vision that can guide efforts in the next decade, overcome the challenges that threaten the highest attainable standard of SRHR, and fulfil the 2030 Agenda for Sustainable Development.

<sup>1</sup> Adopted in 1995, the [Beijing Declaration and Platform for Action](#) outlines an agenda for realizing gender equality.

<sup>2</sup> The 2019 Nairobi Summit celebrated 25 years of the [ICPD agenda and its programme of action](#). This was the first time governments linked the importance of reproductive health, gender equality, population and sustainable development.

The Countdown 2030 Europe Consortium (C2030E)<sup>3</sup> brings together 15 leading European non-governmental organizations working with European governments to count down to 2030 and ensure that sexual and reproductive health and family planning are a priority in Europe and globally. The Consortium works specifically in Belgium, Denmark, Finland, France, Germany, Ireland, the Netherlands, Norway, Spain, Sweden, Switzerland, the UK and with the EU institutions.

## EUROPEAN GOVERNMENTS' INTERWOVEN PERSPECTIVES FOR SRHR: A VISION FOR BEYOND 2020

The European governments interviewed during this consultation are committed to sexual and reproductive health and rights as a core aspect of international development policy for the next decade. Their visions for SRHR – albeit diverse in focus and framing, depending on the context – are based on a common set of values, with goals and approaches that overlap and reinforce each other. Our consultation revealed how governments hold one or more of the following perspectives on SRHR:



### PERSPECTIVE 1:

**a world where access to SRHR ensures human rights for all and strengthens gender equality**

SRHR are human rights applied to sexuality and reproduction – both central aspects of being human. The United Nations has repeatedly stated that the right to health of individuals, and particularly women and girls, includes their sexual and reproductive health. It is not just about the right of protection from violence or coercion, disease or infirmity, but of positively promoting agency and a life of informed choices. Upheld by international and universal norms, SRHR are instrumental to the achievement of all human rights and a precondition for gender equality. This is the premise for action championed by all the European governments interviewed for this report.



### PERSPECTIVE 2:

**a world where SRHR are a pre-condition for human development**

Sexual and reproductive health services that are available, accessible, acceptable, equitable and high quality are vital to improving health, and have many other benefits. Better health is an asset of both inherent value, as it is a source of well-being, and instrumental value, as it improves education standards, contributes to economic development and has benefits now and for generations to come. All these dimensions are integral to gender equality and women's agency, without which it is impossible to achieve human development. This perspective makes some European donors believe that SRHR are cost-effective and that there is no sustainable development without investing in health.

The approach, for example, of the Belgian, Dutch, Finnish, French, German, Irish, Swedish, Spanish and UK governments is based on this understanding.



### PERSPECTIVE 3:

**a world where universal access to quality SRHR leaves no one behind**

Given the above perspectives, representatives from European governments – particularly Norway, Spain and Sweden – consider the protection and promotion of SRHR to be a goal in itself. It is about ensuring universal access to an essential services package that meets human rights standards, while focusing on the most vulnerable and those facing discrimination. Women and young people are central to this agenda, as they are often the most affected by the lack of access to SRHR. Furthermore, to make sure development programmes avoid discriminating on the grounds of sexual orientation or gender identity, it is vital to guarantee access to high quality SRHR for lesbian, gay, bisexual, transgender, intersex and other sexual orientation or gender identity (LGBTI+) people.



### PERSPECTIVE 4:

**a world where SRHR are a building block of the 2030 Agenda**

For all the reasons outlined above, European donors believe that ensuring access to SRHR is a precondition for successfully advancing the 2030 Agenda for Sustainable Development and ensuring equitable development for all people. This perspective guides the actions of many different governments, and is a particular impetus for Belgium, the European Commission, Finland, France, the Netherlands, Spain and Switzerland.

<sup>3</sup> More information can be found here: <https://www.countdown2030europe.org/>



## WHAT CAN EUROPEAN GOVERNMENTS BRING TO THE TABLE?

European governments have unique advantages over other countries to accelerate progress on sexual and reproductive health and rights.

Several countries bring **insights gained nationally** – where investment in SRHR has proven central to their own national positive development outcomes – into international development policies and programmes. This is the case for the Netherlands, which has pursued comprehensive domestic SRHR policies for many years. Finland, Norway and Sweden have long promoted gender equality and women's empowerment as a national priority, leading to the cementing of SRHR as part of their health systems. Belgium, Germany and Spain have a long track record in providing universal health coverage that incorporates SRH. These experiences place countries in a good position to help other nations integrate SRH services within their national health systems. Ireland has also been sharing its journey of law reform on reproductive rights, illustrating how the new norms can meet the needs of key populations. These kind of national experiences lead to wide political consensus around SRHR, as can be observed in Denmark, the Netherlands, Norway and Sweden.

European governments also have valuable experience of **multi-stakeholder partnerships**. Ongoing dialogues between governments, civil society, UN agencies and others have been instrumental for mobilizing global support for SRHR and advancing the different elements of the SRHR agenda. Ireland has also been encouraging better coordination on SRHR between government ministries spanning different sectors. Furthermore, the close formal and informal coordination on SRHR between progressive European states brings benefits. Representatives – namely from France, Germany, Norway and Switzerland – reported that diplomatic representation in partner countries and coordination between embassies allows them to **link the local and global** contexts. This helps inform evidence-based decisions for drawing up policies and programmes.

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The different strengths of European governments have helped spur important achievements for the international SRHR agenda. Examples include the **SheDecides** movement – a 2017 response to the US President's reinstatement of the Mexico City Policy<sup>4</sup> –

led by the Netherlands, Belgium, Denmark and Sweden and joined by Finland, France and Switzerland, among others. The organisation of major global summits and interventions prove how effective governments can be when they work together to protect and promote SRHR internationally. These include the Nairobi Summit on ICPD25, co-organized in 2019 by the United Nations Population Fund (UNFPA), Kenya and Denmark, and the **cross-regional statement on SRHR** endorsed by 58 countries for the UN High-Level Meeting on Universal Health Coverage<sup>5</sup> in September 2019. The COVID-19 crisis also saw 59 countries from all regions rally together to ask for the protection of SRHR and gender-responsiveness to counteract the unparalleled threat of the pandemic.<sup>6</sup>

*These achievements are grounded in complementary approaches, which may diverge in focus and tactics but always try to advance the common goal of promoting access to SRHR.*



<sup>4</sup> The Mexico City Policy, also known as the Global Gag Rule, is a US government policy that closes federal funding for organizations that provide any abortion-related service, including counselling or referrals. First implemented in 1984, the policy was reinstated by the Trump administration in 2017.

<sup>5</sup> Joint Statement on SRHR in UHC, delivered by the Netherlands, 2019.

<sup>6</sup> Joint press statement Protecting Sexual and Reproductive Health and Rights and Promoting Gender-responsiveness in the COVID-19 crisis, 6 May 2020

## HOW TO ACHIEVE EUROPEAN GOVERNMENTS' VISION FOR SRHR: CRITICAL PILLARS

To achieve a European vision for sexual and reproductive health and rights, governments have identified fundamental components for action. European support to SRHR will, in principle, follow many of the governments' current and complementary approaches, but the next decade will see priorities shift and new issues emerge.

The European plan for SRHR will remain based on a **two-pronged approach**: efforts will be pursued at both the **political and programme** level. The political level is crucial to advance the international norms that promote the highest attainable standard of SRHR for all, while also pushing back against organized movements that erode human rights and women's agency. At programme level, SRHR leadership improves access to essential and quality services, and helps change norms at the local level – combatting gender inequality in particular. The SRHR programmes supported by European governments rely on several partners and channels, including the multilateral system and UN agencies like UNFPA, government-to-government cooperation, civil society organizations (CSOs), and global initiatives, such as the Global Fund to Fight AIDS, Tuberculosis and Malaria or the Global Financing Facility.

**Gender equality and human rights** remain burning issues for which SRHR is both a means and an end. European governments prioritize a human rights-based approach to help change social norms and fight any form of sexual and gender-based violence (SGBV). France and Sweden have matched the commitment they have shown to prioritizing gender equality nationally with the adoption of feminist foreign policies. LGBTI+ people will also remain an important focus for European governments. Certain causes of gender inequality linked to SRHR will become more central in the next decade. For example, European donors are committed to the fight against harmful practices such as child marriage and female genital mutilation. At the Nairobi Summit in November 2019, for example, Norway announced its new strategy to combat harmful practices, in addition to the country's ongoing action on SRHR. States including France, Sweden and Switzerland believe that reinforcing the engagement of men and boys in this process is crucial to progress.

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All European governments put the promotion of universal **access to contraception** at the centre of their SRHR agendas, guided by the belief that ensuring people's right to access contraceptive information and services is fundamental to achieving gender equality and human development. For example, access to contraception is one of the SRHR priorities announced by Denmark's current government. But government representatives confirm they have different ways of addressing **family planning**, and will likely continue to use these in the next decade. Some donors, such as Belgium, the European Commission, Denmark, France, Germany, the Netherlands, Norway, Spain and the UK consider family planning a central pillar of SRHR. Germany has further included population development and family planning as an initiative theme of its BMZ 2030 Strategy, and governments like the UK consider family planning as an entry point for broader SRHR discussions. Others, like Finland, Ireland, Sweden and Switzerland, advance the full SRHR package in a broader way, without differentiating family planning efforts.

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How far European donors will support access to contraception in years to come also varies across governments. Denmark, the Netherlands, Norway and the UK will continue to prioritize contributions through the UNFPA Supplies programme, while others such as Belgium, the European Commission and Spain will still offer support but at a lesser level. Other approaches, often complementary to UNFPA Supplies, include: more comprehensive support to the building and strengthening of health systems, including through government-to-government cooperation; core funding to UNFPA; and projects led by CSOs. Norway and the UK in particular provide significant core and earmarked funding to UNFPA.

The **nexus between humanitarian and development aid** has become predominant and will remain so in the next decade. Governments say they will prioritize making sure that essential SRH services are not disrupted in humanitarian settings, as well as providing protection against sexual and gender-based violence.



Some European governments are already intensifying efforts in this area, guided by the principle of leaving no one behind. These include the European Commission, Finland, Germany, Ireland, Norway (which co-hosted the 2019 international conference on ending SGBV in humanitarian crises), Spain, Sweden, Switzerland and the UK. Others such as Belgium, France and the Netherlands say they may also give this area more attention in future.

Following the adoption of the 2030 Agenda for Sustainable Development, the international community pledged to **'leave no one behind'**, focusing first on reaching those furthest behind. This commitment will become more prominent in the European approach to SRHR. Governments will focus more on the poorest and most fragile countries, which score poorly on the human development index. While European donors are committed to promoting SRHR for all people, specific groups will continue to receive special attention, given the particular vulnerabilities of their sexual and reproductive health and – linked to this – the restrictions on their rights. This is the case for women, adolescent girls and young people. European governments are increasingly turning their attention to addressing young people's needs, as can be seen in programmes promoted by Belgium, the European Commission, Finland, the Netherlands, Norway and Switzerland.

The increasing use of an **intersectional approach**, which acknowledges that different dimensions of identity may lead to discrimination, will help SRHR programmes prioritize people with the greatest need within vulnerable groups. The needs of people with disabilities will become more central, as the intersectionality of factors such as age, gender and disability exacerbates the unmet needs of this group. European governments such as Finland will also address SRHR needs related to the life cycle of the individual, from young to older people. This has already been recommended by the Beijing Platform for Action, which committed donors to addressing services throughout the life cycle.

The impact of the COVID-19 pandemic has helped reaffirm the importance of robust **health systems**, which are expected to become central to development policy and programmes again. Given the severity of the crisis, European governments will keep investing – or even reinvesting – in system strengthening and sustainability to address the needs of those falling through the cracks. Increased technical support to local services and human resources might also become more pressing.



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In this context, and with the aim of achieving universal health coverage, European governments warn against diluting the importance of SRHR and the sustainable integration of SRH into health systems. Access to contraception and maternal and child health should be safeguarded in all contexts. Moreover, the **new, more comprehensive SRHR definition introduced by the 2018 Guttmacher-Lancet report**<sup>7</sup> shed light on some elements of the essential services package that tend to be neglected and need to be reinforced, depending on local need. While several European governments refer to this interpretation, Sweden and the UK have endorsed it as a working definition. The UK has been implementing the multi-country WISH (Women's Integrated Sexual Health) programme, which aims to scale up support for integrated SRHR in line with the new definition.

In addition to these adjustments, the fight against HIV/AIDS remains a SRHR priority through which donors such as Germany, the Netherlands and Switzerland advance the SRHR agenda. Governments such as the UK's recognize the need to reinforce further integration of HIV/AIDS and SRHR programmes. Also, Denmark, France, the Netherlands, Norway, Sweden and the UK will continue to promote safe and legal abortion as a key health investment, while Germany will keep prioritizing maternal and child health.

According to government representatives, the new decade will call for learning how to **work across**

<sup>7</sup> Guttmacher-Lancet Report 'Accelerating progress – SRHR for all', published in 2018.

**sectors** to promote development and SRHR, including exploring links between SRHR and sectors going beyond the usual suspects. Several European donors are starting to use educational programmes to promote access to SRHR information and education, be it through Comprehensive Sexuality Education (CSE) or broader education programmes that include life skills-based health education. With a view to the demographic dividend<sup>8</sup>, European governments may also encourage links between SRHR and technical and vocational education and training (TVET) for young people, as Germany is already doing. European programmes will also address the interdependency of outcomes linked to SRHR and water, sanitation and hygiene (WASH). Additionally, European donors such as Denmark, Germany, Norway and Sweden are increasingly addressing SRHR needs in the context of environment and climate change programmes, understanding that such interconnections require a human rights-based approach. The UK will also strengthen attention on these links.

Over the coming decade, European governments will place increasing emphasis on the importance of **domestic resource mobilization** in partner countries for achieving sustainable systems that advance SRHR. The Addis Ababa Action Agenda on Financing for Development<sup>9</sup> called for the scaling up of efforts in support of domestic resource mobilization, and European donors such as the European Commission and Norway are increasingly keen to see their

resources used in a way that encourages domestic funding in support of SRHR. At the same time, domestic resource mobilization is considered a key financing model to achieve universal health coverage.

Finally, European governments such as Belgium and Germany believe the promotion of innovative and **digital approaches** can unleash significant potential for achieving SRHR. This includes digital communications and the strengthening of national health information systems.

To support all these efforts and a holistic approach, several European governments are investing in the **capacity building of their staff**. Some countries, such as the Netherlands, are placing experts in partner countries, while others including Belgium and France – will provide SRHR training to diplomats. Ireland will also develop a ‘new initiative on Sexual Reproductive Health and Rights’, which will provide guidance on how Irish teams can protect and promote SRHR in their work, according to the context. Overall, European donors tend to provide SRHR expertise from headquarters rather than placing experts in each partner country.

European governments believe it is vital to reinforce or introduce complementary approaches based on the strategies above over the next decade to ensure they achieve their vision for SRHR beyond 2020.



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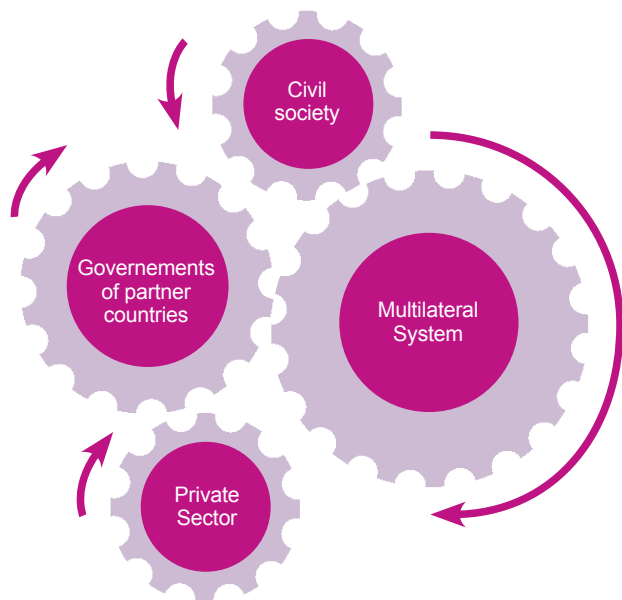
<sup>8</sup> The demographic dividend can be interpreted as the opportunity to reduce poverty and drive sustainable economic growth that comes about when a population's age structure changes to include more people of working age than those dependent on them.

<sup>9</sup> Adopted in 2015, the *Addis Ababa Action Agenda* provides the global framework for financing the 2030 Agenda.



## A VIBRANT VISION BASED ON VIBRANT PARTNERSHIPS

European governments rely on multi-stakeholder partnerships to protect and promote sexual and reproductive health and rights. For example, governments might forge partnerships with civil society or other governments to advance SRHR. While not all states use the same tactics for these partnerships, they all work with different partners who can reinforce and complement each other's work. This has often been the case so far, and is likely to accelerate in the coming decade.



Representatives from European governments say the **multilateral system** will remain crucial to advancing the SRHR agenda, be it through hosting political discussions or supporting implementation of programmes. In particular, UNFPA will be a central partner for advancing SRHR at policy and programme level.

**Civil society** will remain a vital partner for protecting and promoting SRHR on all fronts, through advocacy, service delivery and accountability. Civil society organizations are very familiar with local people's needs and can help inform evidence-based decisions. According to European representatives, the 2019 Nairobi Summit has reinforced the good practice of establishing dialogue between governments and practitioners, and they believe this could remain a norm.

**Government-to-government cooperation** will remain paramount to advance universal access to SRHR. European representatives believe that engaging in dialogue with and channelling resources through governments of partner countries helps ensure local needs are met with local solutions. This way of working is a priority for donors such as Belgium and the European Commission.

The 2030 Agenda and Addis Ababa Action Agenda called for the mobilization of **private sector** resources to help meet the SDGs. Donors are also increasingly interested in engaging the private sector on SRHR. European governments are not just interested in the resources that the private sector can bring, but in

how they can contribute to innovative approaches and technologies and help address the market failures of SRH commodities. European government representatives believe the private sector might also play a role in helping change gender norms, by promoting policies that are more gender sensitive. There is a caveat here, however. While European governments are very interested in engaging the private sector, they also think further exploration and research is needed to better understand how to engage private sector actors in a way that will sustainably increase access to SRHR for all, rather than hampering it.

**Academia** is another important partner. Researchers can help strengthen the evidence base for decisions, grounding them in robust data, and also help support the evaluation of programmes.

All in all, expanding partnerships with other European and non-European stakeholders will be vital. Several governments among those not involved in Countdown 2030 Europe support at least some SRHR elements through their international development programmes, even when they are not vocally supportive of the broad agenda. European governments involved in the consortium believe that, if no one is to be left behind, coordination between supporting allies will remain fundamental, both at political and programme level. It



will be important to engage in **active partnerships that build consensus and mobilize resources**. Existing examples include the SheDecides movements or Family Planning 2020 (FP2020), an outcome of the 2012 London Summit on Family Planning where more than 60 governments committed to addressing the barriers to women accessing contraceptive information, services and supplies. FP2020 is soon expected to be replaced by a successor. While several European governments could politically and financially support its successor as an important cross-regional collaboration for SRHR-related normative processes, others feel uncertain about using it as a commitment platform, because they are concerned it could lessen the use of more integrated approaches. Co-hosted by France, the Generation Equality Forum is another future partnership that can contribute to this logic. Denmark and France, together with other countries and organizations, are co-leading an action coalition on SRHR in that context.

## OVERCOMING CHALLENGES: THE NEED FOR WISE AND BETTER COORDINATED SOLUTIONS

**The push to increase universal access to sexual and reproductive health and rights has long faced steep and entrenched challenges, and the next decade may be no different. If the European vision is to be achieved, it will be crucial to address these obstacles.**

European governments have observed a growing tide of opposition to SRHR in Europe and globally in recent years, with the expansion of right-wing populist movements coming into office. This opposition has been felt in UN negotiations – namely following the 2017 reinstatement of the US Global Gag Rule – and EU discussions, for example, around the new EU Consensus on Development<sup>10</sup>. This opposition is very well organized – meaning that they are potentially able to mobilize new resistance from countries that would otherwise not have opposed SRHR. European governments are strongly committed to keep engaging in and leading coalitions to promote the highest attainable standard of SRHR globally, as these alliances have brought positive changes. Partnerships for SRHR are decisive both at the political and programme level, depending on the nature of the challenge. They are also valuable for supporting accountability for action on commitments.

The COVID-19 crisis (2019-2020) will affect efforts on the SRHR agenda. The pandemic will aggravate existing inequalities, as it deprives vulnerable groups of access to vital SRHR services and increases the risk of domestic violence. The crisis will also have an effect on the allocation of financial resources to development programmes. Donors tend to plan their official development assistance (ODA) in line with their gross national income (GNI). As European GNI will most certainly decrease in the aftermath of the crisis, we can expect to see a decline in funds for international development – and this may be the case even if respective share of GNI remains at the same level. Some government representatives, including from Ireland and the UK, recognize that the new focus on health system strengthening could distract from SRHR efforts. Should this happen, all representatives interviewed for this report confirm their commitment to keep the same focus on SRHR at the political level at least, with some, such as Germany, expected to sustain the same level of resources for SRHR. European governments also believe it is crucial to communicate in a way that appeals to international solidarity, raising public support for sustaining current levels of ODA at the very least.

Linked to this, governments also expect unreliable and false information to continue undermining efforts to promote SRHR. For this reason, representatives of European governments believe it will be important to develop anti-rumour strategies and to partner with key actors, such as CSOs, which can help break down terminology, educate people and address resistance. In this context, the [Guttmacher-Lancet report](#) could also become even more instrumental. Connecting SRHR with educational programmes, while engaging with men and boys, is another approach considered by European governments to help combat misinformation.

European government representatives also identify the escalating climate change crisis as a possible obstacle to this European vision. While it is not always clear how to address this, current and growing efforts from European governments to integrate SRHR in their environment and climate change programmes can help bring co-benefits, such as increasing resilience, always bearing in mind a human rights-based approach.



<sup>10</sup> Adopted in 2017, the new consensus frames the EU implementation of the 2030 Agenda and recommits the EU and its member states to SRHR.



## COUNTDOWN 2030 EUROPE'S PERSPECTIVE ON THE EUROPEAN GOVERNMENTS' VISION

**European governments may adopt different perspectives and approaches to sexual and reproductive health and rights, complementary in nature and tactics, but they share a common set of values and overlapping and mutually reinforcing goals.**

Despite significant advances, the SRHR agenda remains unfinished. 2020 is a landmark year both to protect progress, including those announced during the 2019 Nairobi Summit, and encourage new commitments. The European voice and endeavours have never been more important. Coordinated European efforts are crucial to safeguard and promote SRHR in global negotiations and programmes on the ground. This is even more relevant in light of the current health, economic and social crisis imposed by COVID-19, which requires a comprehensive short- and long-term response, with SRHR at its centre.

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Countdown 2030 Europe (C2030E) and the governments interviewed for this report share a commitment to the realisation of the highest attainable standard of SRHR. The Consortium commends the political and financial resources that European donors direct towards protecting and promoting a comprehensive SRHR agenda for all. For a common European vision to be successful, it will be crucial to ensure open dialogue between all stakeholders and to focus on a robust SRHR strategy in the face of new challenges over the next decade. This means it is vital to keep SRHR at the centre of essential health services and promote a human rights-based, gender-responsive and intersectional approach throughout. More than ever, we need joint diplomatic efforts to ensure international norms promote the highest attainable standard of SRHR and so that additional resources meet the increasing SRHR needs. C2030E believes that the unwavering promotion of these efforts is the only way to ensure that all people can enjoy the best possible sexual and reproductive health, and access

services to support this. European governments should not shy away from this commitment in the next decade.

The COVID-19 pandemic presents a challenge that will affect the way European donors prioritize and cooperate with each other in numerous ways. The crisis may threaten progress that has already been made on SRHR, including its sustainable integration in health systems.

But it may also offer an opportunity to innovate and advance the SRHR agenda in a more comprehensive way. Countdown 2030 Europe believes that, in order to build back better for SRHR in international development, European donors must rethink the global health architecture and fully embed SRHR into universal health coverage. Governments must also rethink international cooperation to end inequalities, safeguard the nexus between humanitarian and development aid, promote feminist approaches that are conducive to more resilient, equal and inclusive societies and, finally, improve civil society involvement in this agenda.

Countdown 2030 Europe remains committed to working with governments who champion this agenda, at the political and programme level, and jointly advocating critical approaches to protect and promote access to SRHR at all times<sup>11</sup>. In line with its pledge made at the ICPD in Nairobi<sup>12</sup>, the Consortium will also continue to challenge and call European governments to account for the implementation of their commitments. By working together, Countdown 2030 Europe and governments will continue to promote human rights and the achievement of governments' own goals and visions towards making the highest attainable standard of SRHR a reality for billions of people.

Published July 2020

<sup>11</sup> To learn more about C2030E recommendations in different areas, please visit: <https://www.countdown2030europe.org/resources>

<sup>12</sup> Countdown 2030 Europe's commitment made at the Nairobi Summit

