

Sexual and Reproductive Health and Rights (SRHR) in climate policies and frameworks



There is an urgent need for integrated and intersectional approaches in national and global climate policy; approaches that have human rights and gender justice not just as an add on, but at their core.

The integration of SRHR – a cornerstone of women and girls’ empowerment – and human rights, has been recognised by the Intergovernmental Panel on Climate Change (IPCC), among others, as a fundamental pathway to climate resilient development and as an important multi-sectoral approach to climate adaptation and resilience building for individuals and communities.

This document compiles several country experiences of integrating SRHR into climate policies and frameworks, thus responding to the urgent need to understand the experiences of countries that have made progress, ensure scaling up and accountability regarding these important commitments to improve the lives of women and girls in the face of climate change.

The objectives of this note are to:

- provide negotiators, civil society actors, and policymakers more broadly with the necessary background to understand the importance of integrating sexual and reproductive health and rights as part of a human-rights based, intersectional approach to climate policy;
- collate and summarise best practices from highly climate vulnerable countries on how SRHR has been integrated into climate frameworks, to form the basis of advocacy and negotiation positions in additional contexts and countries also highly vulnerable to climate change and with a low adaptive capacity; and
- provide entry points for sexual and reproductive health and rights, gender justice and climate justice, as part of a strong and ambitious Gender Action Plan (GAP) ahead of COP30.

Integration of sexual and reproductive health and rights in practice: Benefitting women and girls, improving climate resilience

Women and girls in Low and Middle Income Countries (LMICs) face complex and intersecting challenges: climate change is a lived reality for the 218 million women and girls in LMICs who lack access to rights-based voluntary family planning and broader sexual and reproductive healthcare (SRH), information and services.

Access to SRH has long been recognised as a human right in international human rights treaties and agreements (International Conference on Population and Development 1994; Cairo Declaration, Beijing Declaration and Platform for Action 1995; and the Maputo Plan of Action). It is fundamental to the health of women and girls and their families as well as a cornerstone of their empowerment.

Women and girls residing in rural, last-mile communities are largely dependent on the natural resources surrounding them for their livelihoods. As these become increasingly scarce and affected by climate change (coastal communities in West Africa are experiencing fishery collapse due to ocean warming, illegal fishing practices and climate change), the lack of access to health services and increasing vulnerability of their livelihoods (communities in Uganda are facing severe wetland degradation and rising food insecurity due to human factors and climate change) create a convergence of complex development challenges that must be met by equally intersectional approaches that directly address and prioritise these realities and lived experiences.

It is important to note that the recent aid cuts will have grave consequences on the health of women and girls; a recent World Health Organization report highlights how decades of progress are likely to be eroded in areas including critical services during pregnancy, childbirth and the postnatal period, access to family planning services, and prevention of underlying health conditions like anaemia, malaria and noncommunicable diseases that increase risks for women and girls.¹

IPCC: strong references to SRH in the most recent Assessment Report (AR)

Following a reference to voluntary and rights-based family planning in the fifth Assessment Report, the most recent AR 6 calls for “multi-sectoral, integrated approaches” to adaptation, including “...health services including maternal, child and reproductive health. .”²

Additionally, there are calls for “increased access to reproductive health and family planning services, which contributes to climate change resilience and socioeconomic development through improved health and well-being of women and their children, including increased access to education, gender equity and economic status.”³

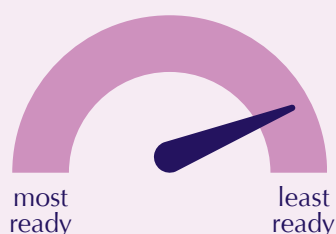
Uganda: Integrating SRHR into the Nationally Determined Contribution and the Health National Adaptation Plan



Climate Vulnerability score



Climate Readiness score



Uganda is highly vulnerable to climate change. According to the Notre Dame Global Adaptation Initiative (2022), Uganda ranks as the 36th most vulnerable country globally to climate change and 163rd out of 192 nations in terms of readiness to confront the threat.⁴ Ranked among the most vulnerable globally with rising temperatures and increased frequency and intensity of extreme weather events. Climate change vulnerability in Uganda is accentuated by the population's high level of dependence on climate-sensitive sectors such as agriculture, fisheries, tourism, and forestry.⁵

Uganda has a strong network of civil society and government champions who have been successful in making the case for SRHR in national climate policy, as well as elevating this position in global climate policy forums. The latest Nationally Determined Contribution (NDC 2.0) has taken a significant step forward by acknowledging the importance of reproductive health within its Priority Adaptation Targets. Whilst reproductive health is currently referenced under a broader commitment to “implement integrated health-related climate interventions considering policies on water and sanitation, education, social protection, and reproductive health care,” this inclusive language signals a growing recognition of the intersection between health, gender, and climate resilience.

One of the most tangible and impactful ways to address gender equality in the context of climate change is by acknowledging and addressing gaps in SRHR. Although reproductive health is not yet a standalone focus, its mere mention—however general—marks an important shift towards a more gender-responsive and people-centered approach to climate adaptation.

Uganda has a broad, multi-sectoral and inclusive approach to adaptation, which is an important element to highlight. Other sectors under adaptation include ecosystems; water and sanitation; transport; energy; agriculture; fisheries; forestry; disaster risk reduction; cities and built environment;

manufacturing, industrial processes and mining; education; and tourism.

This presents a promising opportunity for Uganda to further elevate reproductive health in its next NDC update, positioning it as a core component of climate resilience, particularly for women, girls, and youth, rather than merely part of a health strategy. By making reproductive health more explicit, Uganda can solidify its position as a regional and global leader in advancing integrated, equitable climate action. The progress so far is encouraging, and it lays a strong foundation for even greater impact in the years ahead.

In addition to the NDC, Uganda's Health National Adaptation Plan (HNAP) provides a strong foundation for advancing health, gender, SRHR within national climate action. The HNAP explicitly references SRHR and acknowledges the disproportionate impacts of climate change on vulnerable groups, including women, girls, youth, persons with disabilities, refugees, and indigenous communities. Importantly, the HNAP calls for research to explore the interconnections between SRHR, gender, and climate change, aiming to inform innovation, policy, and practice. It also advocates for the development of inclusive knowledge-sharing platforms—particularly those that amplify the voices of women and youth—and for the design, piloting, and scaling of integrated health programmes that link climate change, gender equality, and SRHR.

Uganda's current NDC 2.0 recognises the need to implement the HNAP, which already embeds SRHR considerations. Since the HNAP was finalised toward the end of the NDC 2.0 cycle, there is a strong likelihood that HNAP implementation will feature more prominently in NDC 3.0, offering a critical window to elevate SRHR as a priority within climate adaptation strategies. This presents a valuable opportunity to ensure that future climate commitments are not only gender-responsive but also explicitly prioritise SRHR as a core component of climate resilience.

STAKEHOLDERS



Uganda's integration of SRHR into climate frameworks, particularly the HNAP and the NDC 2.0, was the result of dedicated efforts by organisations like Regenerate Africa (RA), which led technical reviews and participated in national consultation processes. Civil Society Organisations (CSOs) like Clinton Health Access Initiative, Seed Global Health, AMREF Health Africa, Pathfinder, Tree Adoption Uganda, and Reproductive Health Uganda, and government ministries such as Ministry of Health; Ministry of Gender; Labour and Social Development; Ministry of Water and Environment; and Ministry of Finance; Planning and Social Development also took part in this process. These efforts ensured that SRHR and gender considerations were acknowledged, especially in identifying the disproportionate impacts of climate change on women, girls, youth, and other vulnerable groups.

PROCESS



The process was multi-phased, iterative, and highly collaborative. It began with a Vulnerability and Adaptation Assessment (VAA) conducted by the Ministry of Health (MOH) and Makerere University School of Public Health (MakSPH). The VAA, which followed the ten climate and health adaptation interventions recommended by the World Health Organization (WHO), was validated through a multi-stakeholder consultation and served as the foundation for drafting the initial HNAP.

This draft was presented at a stakeholder validation meeting, during which critical gaps were identified, especially the limited consideration of gender and SRHR. In response, RA initiated engagement with the Ministry of Water and Environment (MWE), Uganda's National Designated Authority (NDA) for climate change, to facilitate a comprehensive internal technical review. The findings from this review were later shared in a broader technical meeting involving MOH, MakSPH, CSOs, and representatives from various government ministries, departments and agencies.

Despite these efforts, the revised draft still lacked sufficient integration of SRHR and gender dimensions. RA, in close collaboration with MOH and MakSPH, proceeded to conduct three additional internal technical reviews to ensure these cross-cutting issues were meaningfully reflected.

OUTCOME



These sustained efforts ultimately led to the successful inclusion of gender-responsive and SRHR-related components in the final HNAP. Following the launch of the HNAP, the MOH established a Climate and Health Sub-Committee to steer implementation. This multi-sectoral committee includes CSOs, private sector representatives, and key government ministries, namely the Ministry of Health, Ministry of Gender, Labour and Social Development, Ministry of Water and Environment, and Ministry of Finance, Planning and Economic Development. To support implementation efforts, the committee formed a Resource Mobilisation Task Force which has since developed a resource mobilisation plan and tailored engagement messages to attract funding and technical support from a wide range of stakeholders for the five-year implementation period.

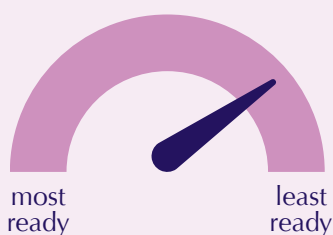
Tanzania: Affecting climate policy change to recognise maternal, child and reproductive health



Climate Vulnerability score



Climate Readiness score



Tanzania is highly vulnerable to climate change, facing increasing risks from droughts, floods, and sea-level rise. The majority of the population relies on climate-sensitive sectors like agriculture, making them particularly susceptible to impacts. Tanzania is the 47th most vulnerable country and the 150th most ready country.⁴

STAKEHOLDERS



Climate Action Network Tanzania used policy engagement (Dialogue and Consultative Meetings with government, H-NAP Technical Working Group Members, and other health stakeholders), and Evidence-based Advocacy (Generation of evidence on the nexus between climate change and SRHR in Tanzania, and development of Policy Briefs that aimed to inform National Climate Policy Frameworks Development processes) for their advocacy.

PROCESS



The project's adoption of a mixed approach in its design and implementation allowed it to effectively build a strong constructive engagement with the government (Ministry of Health) and other health sector stakeholders, and be able to achieve its intended outcome.

OUTCOME



The project exerted a notable impact on policy changes related to prioritisation of maternal, reproductive, and child health components as a

TANZANIA

stand-alone key priority adaptation in the draft HNAP 2018-2023. Qualitative assessment on the extent to which gender considerations and SRHR issues have been framed in the draft document is very strong. Additionally, the Ministry of Health and identified SRHR champions continue their efforts to ensure SRHR matters also feature in other national-level climate policy frameworks, including Nationally Determined Contributions (NDC 3.0) and the NAP. This is imperative to ensure effective synergy and coherence between these national climate policy frameworks.

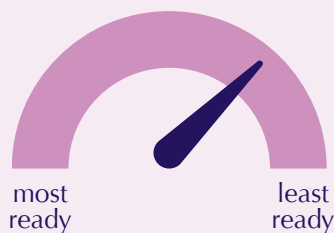
Zambia: Initiating the process of integrating SRHR into national climate discussions and policy



Climate Vulnerability score



Climate Readiness score



Zambia is the 56th most vulnerable country and the 140th most ready country. Currently, more than 70% of natural disasters in Zambia are related to climate change and linked to recurrent droughts and floods.⁴ The frequency and severity of these extreme climate change-related events are also likely to increase.

STAKEHOLDERS



MSI Zambia, after their initial engagement in climate talks at COP29 last year, and subsequent consultations with Ugandan CSO colleagues, has observed some progress on integrating gender and SRHR into Zambia's NDC.

PROCESS



Early this year, consultations were held with mid-level officers at the Ministry of Green Economy and Environment during the preliminary submission phase. Unfortunately, the submissions were not included in that version of the document. It is suspected that this may have been due to a lack of endorsement from some senior officials within the Ministry.

However, there now appears to be renewed momentum to build on. Next steps include meetings with a director at the Ministry of Green Economy and Environment in the Spring. It is important to note that this is someone known to MSI Zambia through their previous roles at the Department of Population and Development and at the Ministry of Finance. Therefore,

ZAMBIA

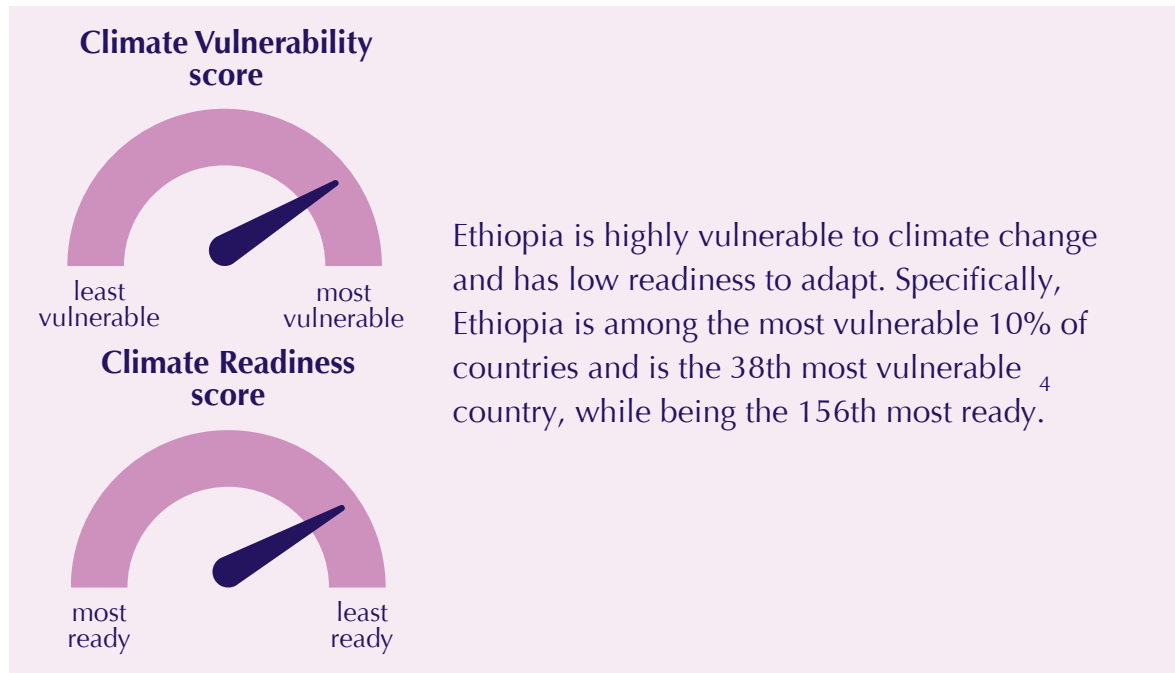
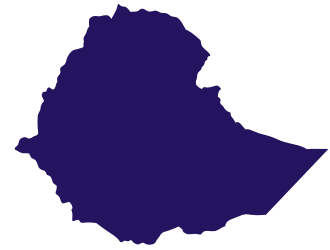
relationship building and management is key in this process. The hope is that this connection will help fast-track a meeting with the Permanent Secretary and formalise MSI Zambia's contributions.

OUTCOME



The goal is to ensure that the earlier submissions are included in the final version of the NDC. In parallel, there is ongoing work with the Ministry of Health to strengthen the integration of SRHR into Zambia's HNAP. MSI Zambia contributed to the gap analysis of the expired HNAP and jointly identified key indicators for SRHR and climate integration in the next iteration. The agreed indicators include contraceptive prevalence rate; maternal mortality ratio; antenatal care coverage; births attended by skilled health personnel; prevalence of low birth weight; incidence of anaemia in pregnancy; percentage of abortions; adolescent pregnancy rate; incidence of urethritis; incidence of sexual violence; coverage of condom distribution; neonatal mortality rate; and access to antiretroviral therapy.

Ethiopia: Experience in integrating SRHR into climate and biodiversity policy and structures



STAKEHOLDERS



MSI Ethiopia jointly with Population, Health and Environment (PHE) Ethiopia Consortium have been engaging with the Federal Ministry of Health (FMOH). The FMOH is increasingly recognising the link between climate change and SRHR service delivery and is a key government body involved in policy and program development.

Local and International NGOs are joining the conversation; organisations like PHE, MSI Ethiopia, and UNICEF are actively working on SRHR and increasingly addressing the climate change nexus through awareness campaigns, service delivery, and advocacy.

PROCESS



Ethiopia has begun integrating SRHR into its climate efforts through awareness campaigns and policy advocacy for inclusion in national climate plans like the NAP and NDCs. It is also incorporating SRHR into health and emergency responses, with the Federal Ministry of Health taking a leading role.

ETHIOPIA

The Ethiopian Biodiversity Institute (EBI) plays a crucial role in integrating biodiversity and climate change, by undertaking research on biodiversity conservation and sustainable use, which inherently contributes to climate change adaptation and mitigation strategies. EBI's work on ecosystem management and the conservation of genetic resources, particularly of climate-resilient species, supports broader climate resilience efforts. Collaboration between government ministries, NGOs, and UN agencies, along with capacity building and service delivery in climate-vulnerable areas, are essential to assessing how climate change exacerbates existing SRHR issues. This approach is crucial to fully integrate SRHR within Ethiopia's comprehensive climate action, where biodiversity conservation is a key component.

OUTCOME



Ethiopia is working towards integrating climate change, SRHR, and biodiversity considerations through its National Biodiversity Strategy and Action Plan (NBSAP), which increasingly emphasises the link between biodiversity conservation and climate resilience, offering potential co-benefits for SRHR by supporting livelihoods and reducing vulnerability to climate shocks. While a specific unified policy is still developing, the HNAP, the National Framework for Climate Services, and initiatives like Green-SRHR, alongside Ethiopia's Family Planning 2030 commitment and ongoing advocacy efforts, are contributing to a more integrated approach. These interconnected efforts across government, civil society, and international organisations aim to ensure that Ethiopia's climate actions are biodiversity-sensitive and address the SRHR needs of its population in the face of a changing climate.

Niger: Addressing the urgent need to integrate SRHR into climate adaptation policies & programmes



Climate Vulnerability score



Climate Readiness score



Niger is one of the most vulnerable countries to climate change. Due to its position as a landlocked country in the Sahel region, reliance on rain-fed agriculture, and rapid population growth. The country faces increasing risks from droughts, floods, and heatwaves, which have significant impacts on food security, livelihoods, and overall economic stability. In Niger, the expected effects of climate change are compounded by particularly unfavourable existing agro-climatic conditions, characterised by highly fragile agroecosystems, extreme spatial and temporal variability of rainfall, and severe environmental aridity. Niger is the 3rd most vulnerable country and the 130th most ready country.⁴

STAKEHOLDERS



Jeunes Volontaires pour L'Environnement (JVE) advocated strongly for the National Council for the Environment for Sustainable Development (CNEDD, the focal point for the climate convention), the ministries responsible for the environment (the NDC focal point) and Health (responsible for social affairs and population) to work on the interconnections between population, health, and the environment, considering the cross-cutting and complementary nature of these sectors in the face of the climate crisis.

In a context where the population is doubling every 18 years, Niger is witnessing competition for different uses of agricultural and pastoral land and the degradation of natural resources. These constraints exacerbate the vulnerability of agricultural and food systems to climate variability and change.

NIGER

PROCESS



In 2021, Niger's revised NDC was adopted by the government by presidential decree. Since the NDC did not specifically refer to reproductive health, Niger is now developing NDC 3.0 before COP30 that advocacy will need to be intensified, with the necessary human resources and the establishment of a multi-stakeholder task force to integrate these aspects into this highly strategic policy document for the country.

In December 2024, JVE published a Policy Brief, *The Urgent Need to Integrate Family Planning into Climate Adaptation Policies and Programmes in Niger* (English abstract [here](#)), advocating for the integration of family planning into Niger's NAP. This initiative led to the government assigning gender focal points within ministries and committing to a gender-responsive climate change strategy.

OUTCOME



The CNEDD, with support from the UNDP, developed the NAP, which considers Niger's seven most vulnerable sectors, including health. The HNAP was developed and specifically considers climate-sensitive diseases, capacity building for stakeholders, and infrastructure. A revision is essential to consider challenges related to demographics, sexual and reproductive health.

While each country's experience involves varied actors, processes and frameworks, there are some key lessons and learnings that have emerged as truly key to the successful integration of SRHR in climate policy and frameworks.

Namakando Simamuna, Adviser for Advocacy & Partnerships, MSI Zambia, shared that “our key lesson is **building cross-sectoral coalitions and technical working groups**, working with both climate and health CSOs and government departments to present a unified message.”

Charles Kabiswa, Executive Director, Regenerate Africa emphasised the importance of “being on your national delegation to climate conferences, using informal networking opportunities to build a network of support and champions across sectors. **Harnessing that network of champions and supporters when the time was ripe, was essential to success.**”

Sani Ayoub Abdou, Executive Director, Jeunes Volontaires pour l'Environnement, stated “**it is key to build the knowledge and capacity of policymakers on why the integration of SRHR will make a difference to the people in our country; providing evidence for the potential of impact and equally, the cost of inaction.**”

Dr Sixbert Mwanga, Executive Director, Climate Action Network Tanzania, highlighted that “**health partners should engage more with climate networks, groups and alliances such as ours.** This is key; their expertise is needed in climate policy dialogues, now more than ever. “

Abebe Shibru, Country Director, MSI Ethiopia, stated that the key learning was “**forging partnerships with new allies**, in our case this was developing a Memorandum of Understanding the Population, Health and Environment Ethiopia Consortium and using this as a basis to build a relationship with the Ethiopia Biodiversity Institute.”

Deepshikha Sharma, Director of Climate Sciences, Population Council
The most visible impacts of climate change are often dramatic disasters—floods, cyclones, wildfires. But **slow-onset changes like droughts, rising temperatures, and salinisation are just as dangerous, especially for women and girls. These climate stressors disrupt healthcare systems and exacerbate SRHR risks, particularly in under-resourced settings.**

The Population Council's Population, Environmental Risks, and the Climate Crisis (PERCC) Initiative explores these intersections, focusing on how extreme heat, salinity, and other environmental changes directly and indirectly affect SRHR outcomes. PERCC's work highlights that climate

adaptation and disaster response must integrate gender-responsive SRHR services. These services aren't secondary—they are essential to health, dignity, and resilience in a changing climate. NAPs must prioritise SRHR, especially in climate-vulnerable communities dependent on groundwater or facing disaster risk.

Carina Hirsch, Head of Advocacy and Policy, Margaret Pyke Trust stated that “It is so **important for national experiences to be shared and elevated in global policy making forums to ensure that there is a real exchange of lessons, opportunities and indeed the challenges or bottlenecks faced.** The Trust is proud to play a coordinating role supporting the creation of a strong global network of champions to ensure we scale up the integration of SRHR in climate policies and frameworks. “

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End Notes

1. <https://www.who.int/news/item/07-04-2025-aid-cuts-threaten-fragile-progress-in-ending-maternal-deaths-un-agencies-warn>
2. IPCC AR 6 WG II Chapter 7: Health, Wellbeing and the Changing Structure of Communities, 2022
3. IPCC AR 6 WG II Chapter 18: Climate Resilient Development Pathways
4. The ND-GAIN Country Index summarises a country's vulnerability to climate change and other global challenges in combination with its readiness to improve resilience. <https://gain.nd.edu/our-work/country-index/rankings/>
5. Population and Climate Change Vulnerability report, 2023

