

SEXUAL & REPRODUCTIVE HEALTH & RIGHTS THEORY OF CHANGE

INCREASING BODILY AUTONOMY, AGENCY
AND ENJOYMENT OF SRHR

Elizabeth, 16, is one of many young women receiving services and support from Oxfam's partner NAFEZA in Mozambique.

Photo: Caroline Leal/
Oxfam Canada



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This resource outlines Oxfam Canada’s Theory of Change for its Sexual and Reproductive Health and Rights programming. A theory of change shows how we expect outcomes to occur over the short, medium, and longer term as a result of our work. In this document we outline how we understand SRHR; why we focus on SRHR; the ultimate aim of our SRHR programming; our Theory of Change for our work in this area; and highlights and best practices stemming from our SRHR programs.

WHAT ARE SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS (SRHR)?

Sexual and reproductive health and rights (SRHR) are a comprehensive, integrated, and interdependent set of civil, political, economic, social, and cultural human rights. These rights are not “new” – they are already recognized in international human rights treaties, consensus documents, and national laws in countries around the world.^{1,2}

Among these **RIGHTS**³ are the right of all persons to:

- the highest attainable standard of sexual and reproductive health (SRH), including access to SRH services;
- make decisions concerning reproduction and sexuality free of discrimination, coercion, and violence;
- seek, receive, and share information related to sexuality;
- freely define one’s own sexuality, including sexual orientation, gender identity, and expression (SOGIE);
- freely decide whether and when to have children;
- bodily autonomy;
- choose one’s partner;
- decide whether, when, and whom to marry;
- decide whether to be sexually active; and
- have a satisfying and safer sex life.

Comprehensive SRH **SERVICES** include but are not limited to:

- accurate, evidence-based, and non-judgmental information and counselling on SRH;
- access to a range of contraceptive methods;
- maternal care (including skilled antenatal, childbirth, and postnatal care);
- safe abortion and post-abortion care;
- prevention, detection, and treatment of HIV/AIDS and sexually-transmitted infections (STIs), and of reproductive tract infections;
- prevention, detection, and treatment of reproductive cancers;
- prevention, management, and treatment of infertility;
- actions to eliminate harmful traditional practices such as female genital mutilation and child, early and forced marriage (CEFM); and
- prevention and counselling of gender-based violence (GBV).

1 UNFPA et al. (2014). *Reproductive Rights are Human Rights: A Handbook for National Human Rights Institutions*, p. 21. Retrieved 12 March 2020, from <https://www.unfpa.org/publications/reproductive-rights-are-human-rights>.

2 Asian-Pacific Resource and Research Centre for Women (ARROW). (2016). *Universal Access to Sexual and Reproductive Health and Rights in Asia: A Regional Profile*, p. 9-10. Kuala Lumpur: ARROW. Retrieved 12 March 2020, from <https://arrow.org.my/publication/regional-profile-srhr-asia/>.

3 For a more detailed overview of the different components of SRHR and related SRH services, see: Starrs, Ann M. et al. (2018). “Accelerate Progress—Sexual and Reproductive Health and Rights for All: Report of the Guttmacher–Lancet Commission,” *The Lancet* (391): 2645–46. Retrieved 12 March 2020, from <https://www.thelancet.com/commissions/sexual-and-reproductive-health-and-rights>.



WHY DOES OXFAM CANADA WORK ON SRHR?

At their most basic level, SRHR involve peoples’ ability to exercise meaningful decision-making power over their health, bodies, and lives, as well as the wider social systems and enabling environment necessary for them to do so. Ensuring that all people have full autonomy and agency over their lives and bodies is necessary for improved health and education outcomes, as well as their freedom to participate in all aspects of economic life.⁴ In this sense, realizing SRHR is fundamental to achieving gender justice, sustainable development, and fulfilling women and young people’s human rights and wellbeing. Yet SRHR are some of the most challenging rights to achieve, particularly for adolescent girls and young women. This is largely because barriers to realizing SRHR are rooted in unequal gender power relations, stigma, and entrenched social norms, with ripple effects at individual, household, community, and policy levels.

“Women’s rights are human rights. This includes sexual and reproductive rights—and the right to access safe and legal abortions. These rights are at the core of our foreign policy. [...] Evidence shows that when women and girls are educated and have control over their sexual and reproductive choices, maternal and child mortality rates decrease and families thrive.”

Global Affairs Canada, Canada’s Feminist International Assistance Policy

4 Oxfam Canada. (2019). *If We Want Women’s Economic Empowerment, Then Let’s Talk About SRHR*. Retrieved 12 March 2020, from <https://www.oxfam.ca/publication/womens-economic-empowerment-srhr/>.

WHAT IS THE ULTIMATE AIM OF OXFAM CANADA'S SRHR PROGRAMMING?

Through our SRHR programming, our ultimate aim is

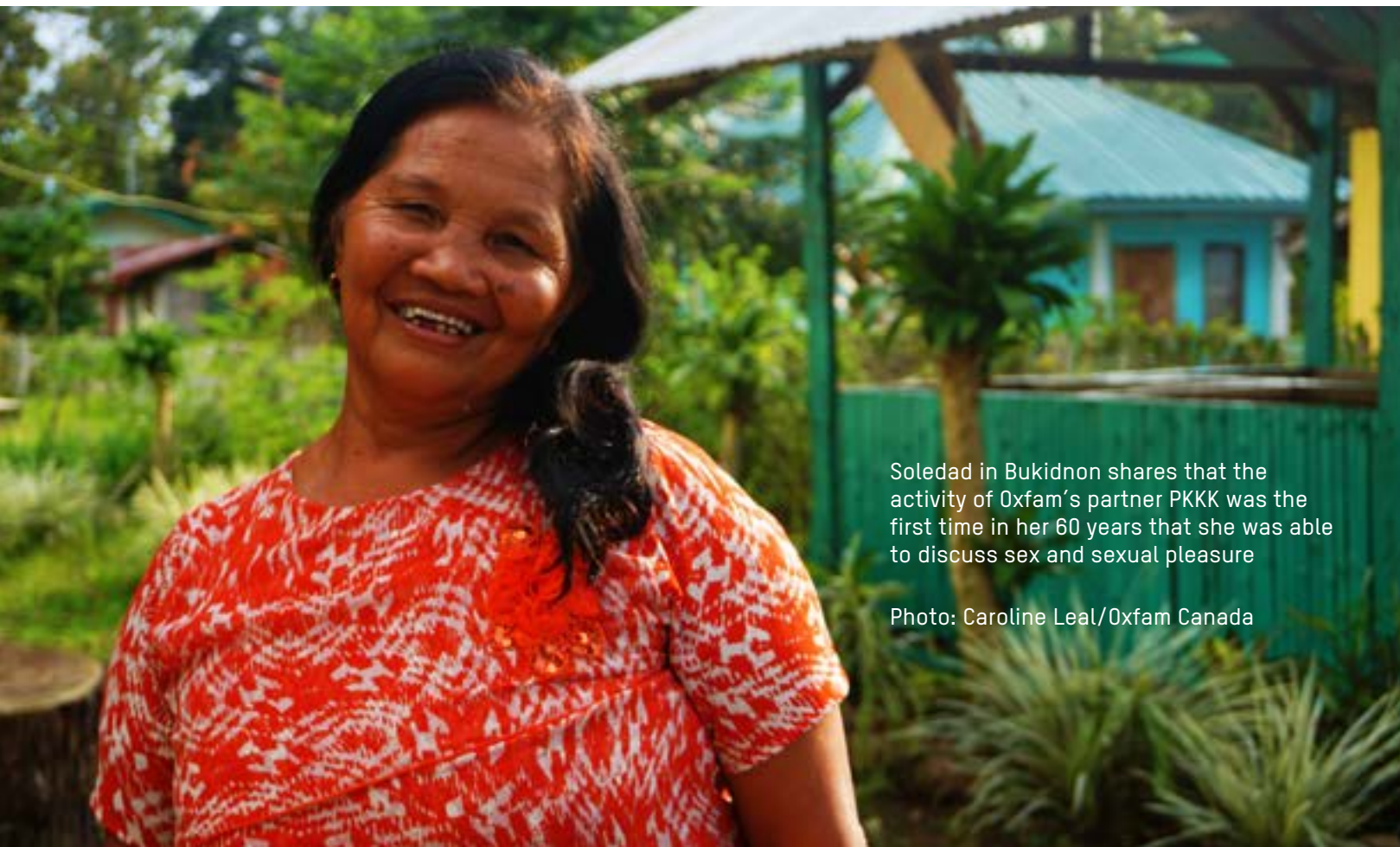
to increase bodily autonomy, agency, and enjoyment of SRHR by those least able to claim these rights, including women, girls, adolescents, and persons of diverse sexual orientation, gender identity and expression.

This goal requires addressing power imbalances and harmful social norms regarding gender and sexuality, eliminating structural and systemic barriers, and achieving long lasting and transformative change, from a comprehensive, intersectional, and reproductive justice approach. It also requires a focus on some of the most neglected areas of SRHR, such as adolescent SRHR, comprehensive contraceptive care, safe abortion care, and advocacy for SRHR.

DEFINING REPRODUCTIVE JUSTICE

Reproductive justice is when all people have the social, political and economic power to enjoy their right to bodily autonomy and sexual and reproductive self-determination. It is the realization of economic, social and cultural rights and freedoms, and the ability to make and exercise choices not limited by oppression, discrimination, stigma, coercion or violence. It aims to transform power imbalances and achieve systemic change.⁵

⁵ Women's Global Network for Reproductive Rights. *Abortion Policy Paper*. Retrieved 28 February 2020 from: <http://wgnrr.org/resources-and-materials/policy-positions/> and Joint Civil Society Statement, 42nd Session of the UN Human Rights Council. International Safe Abortion Day, 28 September 2019. Personal correspondence. Also see Sistersong, *Reproductive Justice*, www.sistersong.net.



Soledad in Bukidnon shares that the activity of Oxfam's partner PKKK was the first time in her 60 years that she was able to discuss sex and sexual pleasure

Photo: Caroline Leal/Oxfam Canada

OXFAM CANADA'S SRHR THEORY OF CHANGE

PILLARS OF WORK

- | | | |
|-----------------|---|---|
| PILLAR 1 | SHIFTING SOCIAL NORMS and raising individual and community awareness regarding SRHR. | ➤ |
| PILLAR 2 | STRENGTHENING THE PROVISION of comprehensive SRH information and services. | ➤ |
| PILLAR 3 | SUPPORTING CSOs , especially WROs and YLOs, in undertaking action, advancing rights related to SRHR, and influencing related policies. | ➤ |

WHAT IS OXFAM CANADA'S THEORY OF CHANGE FOR ITS SRHR PROGRAMMING?

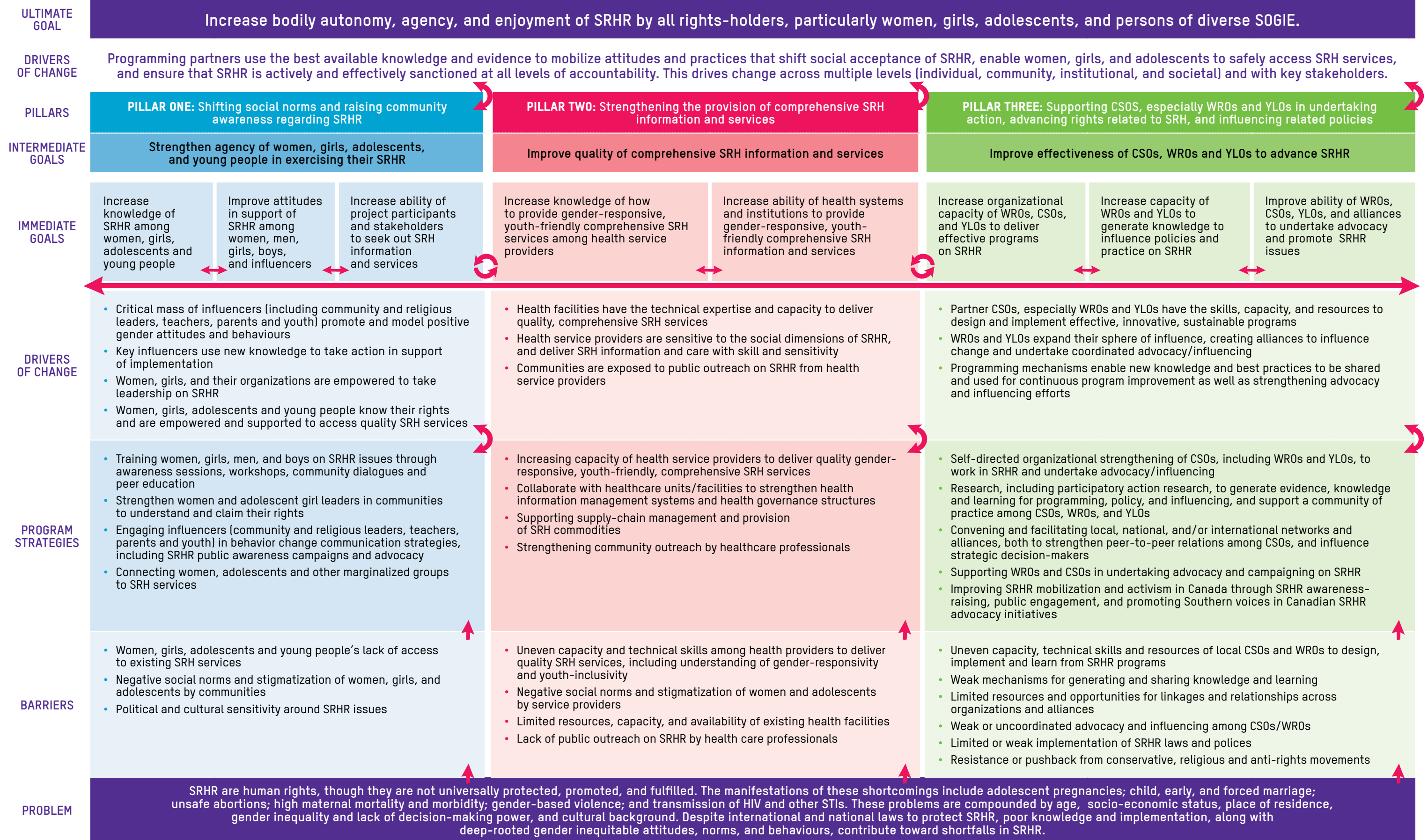
To achieve the sustainable, transformative change needed to reach our ultimate aim, our SRHR programming is informed by the following overarching Theory of Change comprised of three interconnected, mutually reinforcing pillars of work:

OVERALL, OUR SRHR THEORY OF CHANGE IS GROUNDED IN THE FOLLOWING GENERAL PRINCIPLES:

- SRHR are fundamental human rights that are essential to advancing gender justice;
- While comprehensive SRHR programming should address both the provision and uptake of SRH services in an environmentally sustainable manner, it also entails more than just the provision of SRH services;
- Promoting feminist agency (that is, women's and girls' autonomy and meaningful decision-making power) is integral to achieving SRHR;
- Collaboration, participation, and learning are key to successful outcomes;
- Southern-based, grassroots CSOs – particularly WROs and YLOs – are key agents of change. As such, strengthening partner capacity to effectively promote SRHR is key to long-term sustainability;
- Meaningful advocacy and influencing for SRHR requires a rights-based, evidence-informed approach that places women and young people's voices and leadership at its core; and
- Advocacy efforts to advance existing SRHR laws and policies and efforts to shift attitudes, norms and behaviours are synergistic, and potentially mutually reinforcing in driving change. As such, these efforts are best undertaken at the same time.

Building on Oxfam Canada's experience of working to shift power relations, the SRHR Theory of Change takes a non-linear view of change, recognizing that work to promote, protect, and fulfill SRHR is likely to provoke backlash or attempts to push back or reverse previous gains – these results must be anticipated and managed.

OXFAM CANADA'S SRHR THEORY OF CHANGE



HOW DOES OXFAM CANADA IMPLEMENT ITS SRHR THEORY OF CHANGE?

Our SRHR Theory of Change takes an integrated and multi-faceted approach, acting on multiple levels (individual, community, institutional and societal) with diverse actors. We strive to achieve our ultimate goal through program strategies undertaken with key actors and influencers, also known as **DRIVERS OF CHANGE**, informed by the following assumptions:

| PILLAR 1 | PROGRAM STRATEGIES | ASSUMPTIONS |
|---|--|--|
| Shifting social norms and raising individual and community awareness regarding SRHR | <ul style="list-style-type: none"> • Training women, girls, men, and boys on SRHR issues • Strengthening women and adolescent girl leaders in communities • Engaging influencers in behaviour change communication strategies • Connecting women, adolescents and other marginalized groups to SRH services | <ul style="list-style-type: none"> • Improving communities, especially women, girls, adolescents' and persons of diverse SOGIE's awareness of SRHR will increase uptake of SRH services. • Fostering women's leadership potential, including adolescent girls and young women, will support shifts towards positive norms that model gender equality. • Engaging men and boys in support of SRHR can lead to changes in attitudes, norms, and behaviours. Including men and boys also mitigates the risk of backlash to the changes in SRHR that our programming promotes. • Exposing influencers to more positive gender and sexuality-related norms, while providing opportunities to reflect on and discuss these norms with peers, will support attitude and behavioural change. These shifts in attitudes will eventually result in a "tipping point" related to changes in the social norms that underpin unequal access to quality, respectful SRH services and information, unmet SRHR, and broader gender inequality. • Facilitating connections to services will help increase marginalized groups' uptake of SRH services. |

PILLAR 1 IN ACTION

As part of efforts to shift norms and raise individual and community awareness, Oxfam's *Sexual and Health Empowerment (SHE)* project partners in the Philippines are undertaking trainings and stigma reduction workshops with local communities to address attitudes and/or misconceptions around gender and sexuality. This includes using activities like body mapping to identify individual sources of pride, shame, pleasure, or pain, and using these kinds of activities as an entry point to facilitate conversations about taboo but integral SRHR issues.



Aurora works at a Rural Health Unit in Bulusan, Bicol in the Philippines which provides sexual and reproductive health information and services.

Photo: Denvie Baladoy/Oxfam Philippines

| PILLAR 2 | PROGRAM STRATEGIES | ASSUMPTIONS |
|---|---|---|
| Strengthening the provision of comprehensive SRH information and services | <ul style="list-style-type: none"> • Increasing capacity of key health service providers • Collaborating with healthcare units/facilities • Supporting supply-chain management and provision of SRH commodities • Strengthening community outreach by healthcare professionals | <ul style="list-style-type: none"> • Improving the knowledge and skills of service providers in how to provide quality services can shift adverse attitudes and behaviours among service providers, and in turn improve the quality of SRH service provisions. Increasing the capacity of SRH service providers will improve the health system's ability to attract and maintain service users. • Providing technical assistance to health facilities regarding health system management and governance will in turn help strengthen their ability to deliver quality, comprehensive SRH services. • Increasing healthcare professionals' public outreach will increase awareness of and access to SRH information and services among target populations. It will also serve to counter perceptions of health facilities as "adverse" or "hostile" for underserved groups, such as young women, adolescent girls, or persons of diverse SOGIE. |

PILLAR 2 IN ACTION

Across Ethiopia, Malawi, Zambia, and Mozambique, Oxfam's *Her Future Her Choice (HFHC)* project partners are working with local healthcare professionals in project implementation sites to define "quality of care" with communities, conduct mobile outreach on contraception services, and implement community health fairs, among other activities related to local SRH service and policy outreach.

| PILLAR 3 | PROGRAM STRATEGIES | ASSUMPTIONS |
|--|---|--|
| <p>Supporting CSOs, especially WROs and YLOs in undertaking action, advancing rights related to SRHR, and influencing related policies</p> | <ul style="list-style-type: none"> Self-directed organizational strengthening of CSOs, including WROs and YLOs Research, including participatory action research Convening and facilitating local, national, and/or international networks and alliances Supporting WROs, CSOs and YLOs in undertaking advocacy and campaigning Improving SRHR mobilization and activism in Canada | <ul style="list-style-type: none"> Strengthening the capacities of WROs and YLOs is critical to advancing sustainable, context-driven, long-term change. WROs and YLOs are best placed to determine what they need to improve upon to carry out more effective SRHR initiatives and work with their communities. SRHR programs, advocacy, and influencing are more effective if these efforts are evidence-based. Increasing the space for and use of research, best practice, and learning in SRHR initiatives is critical for undertaking evidence-based projects, advocacy, and influencing for SRHR. Alliance building (locally, nationally and globally) is integral to advancing and sustaining SRHR advocacy and influencing efforts (i.e. there is “strength in numbers”). Fostering strategic relationships with “friendly” decision-makers will also increase the impact of advocacy and influencing efforts. Full implementation and/or advancement of SRHR related laws and policies provides a more enabling context for women, girls, and persons of diverse SOGIE to realize their rights. Ongoing resistance or pushback from conservative, religious, and anti-rights movements requires ongoing investment in advocacy and action to protect SRHR-related gains, hold the line, and/or continue to advance SRHR in policy and practice. SRHR issues are global in nature, regardless of the income level or strength of a country’s health system, and thus require collaborative solutions internationally and domestically across restrictive and less restrictive settings. Working with Canadian populations will help increase awareness of ongoing gaps and limitations to SRHR domestically, and receptivity and awareness of SRHR globally, which in turn will help sustain continued Canadian funding for SRHR initiatives domestically and globally. |

PILLAR 3 IN ACTION

Oxfam’s SHE partners in the Philippines are undertaking art action research initiatives, including photos, video documentation, poetry, paintings, and drawings as a means to creatively engage diverse constituents on stigmatized SRHR issues, and create an evidence base from which to inform SRHR advocacy efforts and help influence related policies.



“I am driven to fight for reproductive health and rights because for me, it’s really a basic human right for a woman to know that if she cannot assert control or if she cannot make decisions about her body, that will really affect her choices in life. It will affect her future, her family, if she wants to have a family and where she wants to go—all of that is a basic human right.”

Daryl Leyesa is a Program Manager at PKKK, one of Oxfam’s partners in the Philippines.

Photo: Caroline Leal/ Oxfam Canada

Oxfam Canada works collaboratively with Southern-based, grassroots CSOs – especially WROs and YLOs – to plan, implement, monitor, and evaluate projects. These partner organizations are key agents of change in realizing visions of gender justice in their contexts. As such, Oxfam Canada works with them to strengthen their capacities to manage and sustain themselves, and effectively promote SRHR, in order to ensure long-term sustainability.

We will measure our success in achieving our ultimate aim, by assessing whether there is:

- A change in harmful social norms, traditional practices, and taboos regarding gender and sexuality;
- Improved information on and access to comprehensive quality SRH services;
- Improved meaningful decision-making power by women, girls, adolescents, and persons of diverse SOGIE regarding their health and sexuality;
- Strengthened capacity of WROs and CSOs, especially YLOs, to effectively advocate for SRHR in their communities, and influence legislative and policy change.



Inácia Nunes Armando is a 25 year old activist from Mocuba, Mozambique. She works with Oxfam partner NAFEZA to provide SRHR information and training to young women and girls in 5 communities.

Photo: Caroline Leal/
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For more information on our SRHR programming, visit:

[https://www.oxfam.ca/what-we-do/issues-we-work-on/
sexual-reproductive-health-rights/](https://www.oxfam.ca/what-we-do/issues-we-work-on/sexual-reproductive-health-rights/)



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