FRANCE’S EXTERNAL ACTION ON THE ISSUES OF POPULATION AND SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS 2016-2020
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Acknowledgments
The authors would like to thank all those who have contributed for their availability and the quality of their contributions.
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Demographic growth is one of the biggest challenges that Africa will face in the decades to come. While it holds promise for the future, it is also a risk factor for the stability of the continent, which has the highest rate of adolescent pregnancy in the world.

Because few, if any, family planning services are available to women, many young women must cut their studies short, watching their chances to gain employment and a steady income dissipate. Meeting the needs and aspirations of youth and helping them drive economic development is an investment in a sustainable and equitable future. This is the goal France is pursuing through its activities supporting youth.

Universal access to sexual and reproductive rights is essential to empowering women, who pay a very steep price when they are powerless to determine their own future. Still today, some 225 million women lack access to contraceptives, and more than 300,000 women around the world die each year due to pregnancy- and childbirth-related causes. These deaths are the number one cause of adolescent mortality in Africa.

Ensuring sexual and reproductive rights is the first step to achieving equality of opportunity between women and men. This statement is not an interference in cultural or religious beliefs, which are unique to each State. Guaranteeing these rights means ensuring access to adequate, high-quality services that will prevent women from dying during childbirth as well as allow them to choose when to get pregnant and how many children to have. It is about giving women access to education and employment and enabling them to contribute to their country’s development and social progress. It is about saving lives.

This is why we must act to ensure that women have the right to control their own bodies and guarantee unhindered access to sexual and reproductive health services.

This will require not only providing access to family planning services and contraceptives, but also supporting development policies based on individual rights by improving legislation and family policies as well as shifting social norms.

We are aware that these are difficult and complex issues. This is why we wanted France to draw up its first strategy on population and sexual and reproductive health and rights. With broad input from civil society, this document sets out France’s priorities for action on these issues and creates a framework of reference for all our partners. It is a diplomatic tool that can provide a cogent, effective and collective response to major demographic challenges at this early stage of the 21st century.

Jean-Marc Ayrault
Minister of Foreign Affairs and International Development

André Vallini
Minister of State for Development and Francophonie
Chapter 1
FRANCE’S APPROACH TO POPULATION ISSUES

1.1 The challenges of demographic growth in Africa

The twentieth anniversary of the International Conference on Population and Development (ICPD) in Cairo was an opportunity to celebrate the progress achieved through the programme of action adopted by consensus of the United Nations Member States in 1994. There has been genuine improvement in living conditions in many of the regions of the world. However, for many, access to fundamental human rights, global public goods and essential services is still not guaranteed. Violations of rights to sexual and reproductive health are widespread and persistent.

Population dynamics at the global and national scales – rapid demographic growth, urbanization, migration – continue to be at the heart of a sustainable development. These dynamics impact economic development, income distribution, poverty, social protection and pensions. They affect access to health care, education, water, food security and various infrastructures (e.g., housing, sanitation, energy). They influence the sustainability of cities and rural areas, environmental conditions and climate change. Providing a cogent response to these issues will require reconsidering how the world is changing from a demographic standpoint, taking a dynamic and forward-looking perspective.

The ICPD Programme of Action

This programme of action, adopted by 179 United Nations Member States in September 1994, marked the beginning of a new era of intergovernmental debates that placed the promotion, protection and attainment of human rights and gender equality at the centre of the sustainable development agenda.

In its resolution 65/234 in 2010, the United Nations General Assembly, noting that the objectives in the programme of action would not be achieved, extended the programme and asked the United Nations Secretary-General to create a new framework for action to be implemented beyond 2014.


The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW)

This Convention was adopted in 1979 by the United Nations General Assembly. It reaffirms the principle of gender equality, defines discrimination and sets out a programme of action to achieve equality in all areas: political, economic, social, cultural, civil, and national. It is an international framework to combat discrimination against women. France lifted its reservations regarding the Convention in 2013.
Based on United Nations projections, the worldwide population could grow by more than a billion individuals from today’s 7.3 billion to 8.5 billion in 2030. Forecasts for the global population are set at 9.7 billion by 2050 and 11.2 billion by 2100. The majority of this population growth can be attributed to a small list of countries with high birth rates, mainly located in Africa.¹

Life expectancy has risen significantly around the world over the past 20 years to an average of 70 years. Between 1990 and 2015, maternal and under-five mortality dropped sharply, by 45% and 53%, respectively, in large part due to lower birth rates (23%) and improved health care systems. This global trend conceals major discrepancies between countries, and populations within a country due to environment (urban/rural), income levels and gender. For example, under-five mortality in Sub-Saharan Africa remains at 100 deaths per 1,000 births. This means that a child born in Africa has a 14-times greater risk of death than a child born in Europe or North America (7 per 1,000). Nearly half of these deaths occur before the age of one, most often following preterm births or complications at birth when a woman lives through early, closely-spaced or numerous pregnancies.


Demographic and reproductive health dynamics in West and Central Africa

The population of West and Central Africa is expected to double by 2040. Women in this region have an average of five to six children and the adolescent pregnancy rate is greater than twice as high the world average rate, with more than one in ten girls aged 15 to 19 giving birth. The rate of contraceptive use (all methods) is only 18%.

The demographic pressure that weighs on social sectors (education, employment, health care) and on land management (geography and agricultural market dynamics) is a factor of instability (social conflicts, internal migration, food insecurity) and risks weakening State governance. Population growth in West and Central Africa is one of the biggest challenges this region’s countries will face over the next thirty years.

Additionally, the maternal mortality rate is very high: in 2015, it was 679 for 100,000 live births.² More than 100,000 women in West and Central Africa die each year due to preventable pregnancy-related causes, more than in any other region in the world.

1.2. A rights-based approach

As massive numbers of young people reach working age, many countries have an opportunity to accelerate their development. This potential demographic dividend depends on major investments to ensure youth’s access to health, education and decent employment, as well as to guarantee their fundamental rights. This is why France, through its actions in support of youth in developing countries, is providing a multi-sectoral response, based on the rights and specific needs of youth to support them in becoming drivers of development and innovation.3

Commitment to gender equality and non-discrimination is far from being universal, and violations of basic human rights are still widespread. It is estimated that nearly 142 million girls could be married before age 18 by 2020. During the next ten years, 30 million girls are at risk of becoming victims of genital mutilation. Furthermore, discrimination and physical and emotional violence against people due to their sexual orientation or gender identity have worsened.4 Today, 76 countries in the world still have laws criminalizing homosexuality.

With regards to sexual and reproductive health and rights (SRHR), current solutions and investments do not match the needs. The effectiveness of programmes depends on access for all to information, products and services. Women and men must work together to ensure their rights to sexual and reproductive health, because everyone benefits equally from these rights.

The promotion of sexual and reproductive rights has become a key component in France’s political advocacy for gender equality. It lies at the intersection of several pillars of France’s foreign policy, including the promotion of sustainable development, human rights and gender equality; the fight against maternal and infant mortality; and world health, especially the fight against HIV/AIDS and sexually transmitted infections (STIs).

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The 2030 Agenda for Sustainable Development and population, rights and health issues

Progress achieved in the fight against poverty since 2000 has been stymied by global challenges such as population growth, fragility and conflict, deteriorating ecosystems, the continual decline in our limited natural resources, and climate change. The adoption of the 2030 Agenda for Sustainable Development was a historic decision to address these problems. The international community set 17 sustainable development goals (SDGs) to achieve by 2030, focused on ending poverty and hunger, improving access to health care and education for all, building more sustainable cities, combating climate change and protecting oceans and forests.

Sexual and reproductive health and rights are linked to several SDGs: they can help eliminate vulnerability; improve the health of adolescents, youth, women and mothers; and promote gender equality.

The need to ensure sexual and reproductive health and rights for all is more urgent than ever. This strategy for the 2016–2020 period aims to ensure these rights through addressing three priority objectives. The issues raised in this strategy lie at the heart of sustainable development – responding to these issues contribute to responding to the 21st century’s most important challenges. By honing in on women’s rights, the strategy aims to guarantee that their abilities, freedoms and responsibilities are valued. By helping to strengthen institutions and legal systems for the benefit of all women, it fights inequality. By offering a continuum of care, it helps ensure that young people stay healthy and reduces early pregnancies. By targeting young women, it helps further gender equality. France is focussing its actions on a region where population and SRHR challenges are the most critical: West and Central Africa.

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3 - Acting for Youth Policy Strategy (MAEDI/DGM, 2015).
1.3. France’s actions

France’s development cooperation policy aims to respond to four interlinked issues which are challenges for both France and its partners:

1) The promotion of peace, stability, human rights and gender equality;
2) Equity, social justice and human development;
3) Sustainable economic development with access to employment;
4) Protection of the environment and of global public goods.

The Law of 7 July 2014 on its development and international solidarity policy identifies the strengthening of sexual, reproductive, maternal, neonatal and infant health, as well as population policies, in priority Sub-Saharan African countries as one of three priorities to help bolster health care and social protection systems. It also stipulates that France will strive, in European and international forums, to promote women’s rights, the fight against gender-based violence, and universal access to family planning and sexual and reproductive rights.

France’s Gender and Development Strategy (2013–2017) also identifies women’s sexual and reproductive health and rights as a core component.

France’s action on population issues and SRHR is an integral part of its development policy, and takes as its starting point women’s rights and gender equality. It draws from the movement led by French civil society, which has fought since the 1960s for the right to access contraceptives and abortion—especially through groups such as the Mouvement de libération des femmes (MLF; Women’s liberation movement) and the Mouvement français pour le planning familial (French movement for family planning, now called Planning familial).

This action is carried out through political advocacy as well as through programmes and projects under the authority of the Ministry of Foreign Affairs and International Development (MAEDI).

1.3.1 Political advocacy

“In European and international forums, France shall strive to promote women’s rights; the fight against gender-based violence; universal access to family planning and sexual and reproductive rights; women empowerment; professional equality; and women’s access to education, training and economic, political and social responsibilities.”

Law No. 2014-773 of 7 July 2014 on guidelines and programme priorities relating to development and international solidarity policy

France uses its political influence in multilateral and regional forums, in bilateral exchanges and in funds and programmes with the aim to reduce gaps and inequalities in access to sexual and reproductive health and rights, which affect first and foremost adolescents and women. It plays a leading role in the promotion of sexual and reproductive rights during sessions of the UN Commission on Population and Development and the UN Commission on the Status of Women. France also lobbied for these rights to be fully incorporated into the 2030 Agenda for Sustainable Development.

France maintains a continuous dialogue with the World Bank with a view to promoting women and girls’ empowerment, and has encouraged the World Bank to invest more heavily in women’s empowerment initiatives, especially in southern

Sexual and reproductive rights

“Sexual and reproductive rights are fundamental human rights. They are the rights of everyone to make free, informed and responsible decisions and have full control over very basic aspects of one’s private life – one’s body, sexuality, health, relationships, and if, when and with whom to marry and have children – without any form of discrimination, stigma, coercion or violence. This includes rights to enjoy and express one’s sexuality, be free from interference in making personal decisions about sexuality and reproductive matters, and to access sexual and reproductive health information, education and services.

Sexual and reproductive rights embrace human rights that are already recognized in international, regional and national legal frameworks, standards and agreements.”


At the European level, France has long been a driving force for defending ambitious positions on sexual and reproductive health and rights, and does not hesitate to take the issue to the highest political level. During the negotiations of the European Council’s Conclusions on Gender in Development in May 2015, France instigated a joint letter from countries sharing its values to the High Representative and European Commissioner for Development. The letter served as a reminder of the importance of sexual and reproductive health and rights for development and underlined the primordial role of the European Union, through its influence and finance, to defend these rights. The issue was brought to the ministerial level in the Foreign Affairs Council.

Between 2016 and 2020, France will continue to advocate for sexual and reproductive rights in multilateral and regional forums, as well as to support to the strengthening of its partners’ sectoral policies and legislative frameworks.

France will remain a committed member of the Ouagadougou Partnership, launched in 2011 by nine governments in francophone countries in West Africa and their technical and financial partners with a view to addressing the high rates of unmet needs for contraceptives.

1.3.2 A concerted approach with civil society

Civil society is an integral part of France’s diplomacy for women’s rights. MAEDI and French civil society share the vision and approach to sexual and reproductive health and rights. The relationship is based on a demanding and constructive dialogue, which allows for successful cooperation in implementing programmes and undertaking political advocacy. France works on these issues in particular with Médecins du monde, Équilibres & Populations and Planning familial. During the 60th UN Commission on the Status of Women, some twenty women’s rights organizations were part of the French delegation.

1.3.3 Financing for programmes and projects

France’s Official Development Assistance (ODA) allocated in the sector of population, sexual and reproductive health and rights is mainly channelled to and through multilateral organisations. In 2014, France contributed an estimated €331.1 million to this sector through the multilateral aid channel via several organizations: the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM, €265 million); UNITAID (Innovation for Global Health, €43.4 million); EU institutions (€5 million); the International Development Association (IDA) of the World Bank (€2 million); United Nations Population Fund (UNFPA, €0.7 million); United Nations Children’s Fund (UNICEF, €0.44 million); African Development Fund (AIDB, €0.4 million); World Health Organization (WHO, €0.4 million); United Nations Development Programme (UNDP, €0.3 million); and the Joint United Nations Programme on HIV/AIDS (UNAIDS, €0.3 million).

The total French ODA allocated to population and sexual and reproductive health (as part of and in addition to the Muskoka Initiative – see below) through the bilateral aid channel amounted to €55 million in 2014.

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5 - OECD Creditor Reporting System (CRS) database, stats.oecd.org/.
6 - To estimate France’s multilateral aid that went to the population and SRHR sector, these figures were calculated as follows: 1) multilateral organization X gave an average of Y% of its allocated aid by sector to the population sector in 2014; 2) French multilateral aid to the population sector through multilateral organization X was Y% of France’s budget allocation to multilateral organization X in 2014.
In the 2016–2020 period, France will continue its funding to the sector through voluntary contributions to multilateral organizations, namely the Global Fund, UNITAID, EU institutions, IDA, UNFPA, UNICEF, UNDP, and UN Women (Fonds français Muskoka).

In 2010, the Group of Eight (G8) launched the Muskoka Initiative on Maternal, Newborn and Child Health. As part of this initiative, France increased its funding to the sector by €488 million for the 2011–2015 period. The Muskoka Initiative was implemented by France through both multilateral and bilateral channels via:

1) A joint UN programme with the participation of WHO, UNICEF, UNFPA and the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women): the Fonds français Muskoka;

2) GAVI, The Vaccine Alliance;

3) The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM);

4) The Aga Khan Development Network;

5) The bilateral programmes implemented by the Agence française de développement (AFD).8

France will continue its commitment through an extension of the Muskoka Initiative. This commitment will be implemented through the joint UN programme between WHO, UNICEF, UNFPA and UN Women (the Fonds français Muskoka), as well as bilateral funding managed by AFD in the following countries: Benin, Chad, Côte d’Ivoire, Guinea, Mali, Niger, Senegal and Togo.

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7 - ffmuskoka.org

France will also continue its **bilateral** funding to the population sector via the AFD, guided by the Agency’s Intervention Framework in the health and social protection sector for 2015-2019. One of the three strategic focus areas of this document is to “pursue efforts to improve maternal and child health and sexual and reproductive health”, in line with operations undertaken through the Muskoka Initiative. AFD will opt for a comprehensive approach to sexual, reproductive, maternal, infant and child health and use its services to support a continuum of care, in addition to paying special attention to free access to family planning and the needs of adolescents. AFD boasts a wide array of projects for maternal and child health and family planning, especially in francophone Africa, implemented by partner governments and civil society organizations.

### 1.3.4 Guiding principles

France’s action is developed around four guiding principles: universality, equity, effectiveness and collective action.

**Universality.** Promoting universal access to sexual and reproductive health and rights is an international priority for France. France reaffirms the right to good health, including the fundamental right of all individuals to decide freely and be able to make an informed choice about the number of children they wish to have and how they space their pregnancies, as well as the right to quality sexual and reproductive health.

**Equity.** France promotes the right to dignity and non-discrimination of all individuals and the protection of rights of populations subject to stigmatization, discrimination or persistent marginalization, including due to their sexual orientation or gender identity. France works to reduce inequality through its international development policy, including through the implementation of universal health care to meet the need for information, products and services on sexual and reproductive health. France emphasizes the preventive aspect of its action through interventions targeting adolescents and youth, as well as highly disadvantaged and marginalized populations, in line with its youth strategy.

**Effectiveness.** Cost effectiveness is a key concern for France in its priority countries and areas, and its investments are results-focused. France monitors and evaluates its interventions and ensures accountability of its development assistance to the sector. France focuses its political advocacy and interventions first and foremost on West and Central Africa.

**Collective action.** Development assistance in the sexual and reproductive health and rights sector is implemented through numerous funds, programmes and instruments. The international aid structure for SRHR is fragmented (the Global Fund, UNITAID, European development instruments, the World Bank, UN agencies, AFD, cooperation between line ministries, etc.). Concertation and coordination with partners – through multilateral and bilateral channels – are constant concerns for France. More than for other issues, access to sexual and reproductive health and rights implies collective action, especially through the identification of partners.

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**Sexual health** is defined as “a state of physical, emotional, mental and social well-being 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.”

**Reproductive health**, within the framework of WHO’s definition of health is defined as a state of “complete physical, mental and social well-being, and not merely the absence of disease or infirmity, addresses the reproductive processes, functions and system at all stages of life. Reproductive health, therefore, implies that people are able to have a responsible, satisfying and safe sex life and that they have the capability to reproduce and the freedom to decide if, when and how often to do so. Implicit in this are the right of men and women to be informed of and to have access to safe, effective, affordable and acceptable methods of fertility regulation of their choice, and the right of access to appropriate health care services that will enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant.”

Source: WHO
Chapter 2

FRANCE’S VISION, OBJECTIVES AND COMMITMENTS FOR 2016-2020

France’s vision in the context of sexual and reproductive health and rights is that of a world where these rights are recognized, valued and guaranteed for everyone. It is that of a world where everyone has access to comprehensive sexuality education and where no woman needs to risk her life when ending an unwanted pregnancy. It is that of a world where everyone has access to comprehensive sexual and reproductive health services and where no woman needs to risk her life when ending an unwanted pregnancy. It is that of a world where everyone has full access to quality care and services, including to modern contraceptives, without facing discrimination or financial difficulty. France’s vision is that of a world where young people no longer have to risk being subjected to harmful practices such as early or forced marriage or female genital mutilation, but have access to education and sexual and reproductive health.

France’s action is focused on three objectives:
1) Strengthen international, regional and national normative frameworks for sexual and reproductive rights;
2) Increase access to modern contraceptives through a comprehensive approach;
3) Facilitate access for adolescents and youth to sexual and reproductive health services and reduce harmful practices.

2.1. Objective 1: Strengthen International, Regional and National Normative Frameworks for Sexual and Reproductive Rights

Sustainably improving people’s lives begins with establishing and ensuring their fundamental human rights. The respect, protection and guarantee of human rights is a core component of France’s foreign policy. Considerable attention is paid to the principles of equality, non-discrimination and equity; to stakeholders’ participation and capacity development; and to transparency and accountability in the design, implementation and evaluation of France’s development policies and programmes.

Respecting women’s rights requires access to a full range of high-quality reproductive health services and to related information. France was greatly involved in making universal access to sexual and reproductive health and rights an integral part of the SDGs (goals 3 and 5).

Regional commitments also guarantee health and reproductive rights and education on family planning. The Protocol to the African Charter on Human and Peoples’ Rights on the Rights of Women in Africa (2003) addresses, among other issues, the right to sexual health. The Protocol affirms that the “States Parties shall 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” (Article 14.c). The Maputo Plan of Action for the Operationalisation of the Continental Policy Framework for Sexual and Reproductive Health and Rights (2006) aims to ensure universal access to comprehensive sexual and reproductive health services in Africa.

Most West African countries have ratified the conventions and international and African charters on women’s and children’s health and rights. However, there are exceptions and certain States have issued reservations.

At the national level, laws and legal texts have been adopted to ensure consistency of national law with international conventions and ensure their implementation. Several of these texts reflect real progress towards increased equality between men and women and the recognition of women’s rights. Nevertheless, further progress can be made in national legal frameworks. Many countries still have legal vacuums, or laws and texts (especially Family Codes) that discriminate against women and fail to grant them the same rights as men, particularly with regards to legal age of marriage, inheritance and parental authority. In most countries, there are insufficient resources to enforce laws and penalize the infringements of rights. Laws are not made public and are unknown to many. Customary and religious law often remain the point of reference.
France’s diplomatic corps is mobilized to strengthen normative frameworks through development activities and political advocacy in bilateral exchanges as well as in international forums, especially at the United Nations and the European Union.

France has set as its objective:

1) To contribute to strengthening international, regional and national normative frameworks for sexual and reproductive rights by 2020. To achieve this objective, France is putting into place a rights-based approach to development.

Monitoring indicators:

1.1 The number of international and regional commitments that recognize:
   - reproductive health rights;
   - comprehensive sex education.

1.2 The number of countries that have changed their legislation to better recognize sexual and reproductive health and rights.

Link to the SDGs

Objective 1 and its monitoring indicators address namely:

SDG 3: Ensure healthy lives and promote well-being for all at all ages and the following targets:

- By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births (target 3.1).
- By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases (target 3.3).
- 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 (target 3.7).

SDG 5: Achieve gender equality and empower all women and girls and the following targets:

- End all forms of discrimination against all women and girls everywhere (target 5.1).
- Eliminate all forms of violence against women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation (target 5.2).
- Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation (target 5.3).
- 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 conference (target 5.6).
2.1.1 Means and modalities to implement Objective 1

As set out in its development and international solidarity policy from 2014 (Act No. 2014-773 of July 2014), France will address sexual and reproductive rights through its political advocacy at the international level through UN forums (Commission on the Status of Women, Commission on Population and Development), the Group of Seven (G7) and the World Bank; at the regional level through the European Union and the West African Health Organisation; and at the national level through governments in order to strengthen legal frameworks.

France will also support civil society in its work to strengthen legal frameworks so that they better protect women’s rights, and to inform populations and local government staff of these frameworks.

2.1.2 France supports key complementary actions

To ensure that individual fundamental rights are implemented and to support the objective of strengthening normative frameworks, France undertakes the following key complementary actions:

- **Strengthen national capacities** to draft laws and regulations and to enforce the right to health.

- **Intensify political dialogue on access to safe, legal abortions in multilateral bodies as well as in bilateral dialogue with partners.** Respecting women’s rights requires access to a full range of high-quality reproductive health services, including safe abortion services for unwanted pregnancies. Abortion is legal under certain conditions in most francophone countries in West Africa. However, in practice, access to abortion is rare and it is often not included in public health care services.

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Universal access to modern contraceptives and safe, legal abortion services

**Unmet contraceptive needs.** It is estimated that 225 million women who would like to prevent, limit or space their pregnancies lack access to contraceptives. A majority of unmet contraceptive needs (90%) are in developing countries.

**Safe, legal abortion.** The average rate of unsafe abortion in Africa is thought to be twice as high as the worldwide average. WHO estimates that more than 1.8 million unsafe abortions are practised every year in West Africa.

Support for Ipas to improve access to safe abortion in francophone countries in West Africa

With French funding, the American non-governmental organization (NGO) Ipas brought together health care leaders and providers from around West Africa for a study visit in Ghana in January 2016. Delegates from Benin, Burkina Faso, Cameroon, Mali, Senegal and Togo toured health centres to observe how Ghanaian women were able to exercise their right to abortion using the public health system. Participants committed to pursuing similar programmes in their respective countries. To meet demand for technical assistance, Ipas hosted a regional planning workshop in Togo in May 2016 with French funding. More resources will be necessary to re-energize efforts to include comprehensive abortion care in health systems across West Africa.

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9 - French Act No. 2014-773 of 7 July 2014 on its guidelines and programme priorities relating to its development and international solidarity policy.
• Urge authorities at various levels to adopt laws and policies that ensure equality and prevent discrimination of any kind, including due to sexual orientation, gender identity or HIV/AIDS status, and allow for everyone to enjoy their social, cultural, economic, civil and political rights.

• Support policies and measures that prevent, punish and help eliminate violence against women, within and outside the family sphere, including during periods of conflict. Actions focus on advocating to change laws that allow perpetrators of violence to be absolved by marrying their victims, and on advocating to eliminate sexual violence from post-conflict amnesty clauses.

• Advocate in favour of recognizing the diversity of families and support countries in implementing policies that recognise and assist single parent families and isolated, young and elderly people, especially with regards to housing and collective spaces.

2.2. OBJECTIVE 2: INCREASE ACCESS TO MODERN CONTRACEPTIVE METHODS THROUGH AN INTEGRATED APPROACH

France promotes the implementation of an integrated approach to a continuum of care with regards to sexual, reproductive, maternal, infant and child health: comprehensive provision of services to women and children, including from pre-pregnancy to birth, postnatal care and during childhood. This approach entails providing information about sexuality, preventive and treatment services for STIs (including HIV), preventing unwanted pregnancies, and ensuring safe and legal abortion services, post-abortion care services, and follow-up and care for mothers and children during pregnancy until birth, postnatal care and during childhood. The continuum of care approach also involves strengthening health systems and involving schools, civil society, intermediaries and communities. Specific attention is given to the barriers that may hamper access to essential information, products and services.

In this context, improving access to modern contraceptives by supporting the promotion, purchase, supply and distribution of a wide range of modern contraceptive methods remains crucial – including emergency contraception (the morning-after pill and intrauterine devices). Spacing of pregnancies from the first birth is a key concern that can be addressed by integrating family planning into maternal health care services.

French Act No. 2014-773 of 7 July 2014 on guidelines and programme priorities relating to development and international solidarity policy

With regards to strengthening health care systems and social protection, France’s actions will focus on the three following major objectives:

• Improving sexual, reproductive, maternal, infant and child health, as well as population policies in priority Sub-Saharan African countries;

• Adapting health and social protection systems to address growing chronic illnesses and health problems due to rising living standards and ageing;

• Strengthening of public health surveillance and the capacities of countries to act on environmental and social health factors.
France has set as its objective:

2) To increase, in eight priority countries, access to modern contraceptive methods by 2020. To achieve this objective, France promotes an integrated approach.

Monitoring indicators:

2.1 By 2020, increase the rate of modern contraceptive use among women of childbearing age in the eight priority countries (Benin, Chad, Côte d’Ivoire, Guinea, Mali, Niger, Senegal and Togo).

<table>
<thead>
<tr>
<th>Country</th>
<th>Objective for 2020</th>
<th>Current rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>16.5%</td>
<td>9%</td>
</tr>
<tr>
<td>Chad</td>
<td>–</td>
<td>1.5%</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>24.5%</td>
<td>13.9%</td>
</tr>
<tr>
<td>Guinea</td>
<td>12.9%</td>
<td>7%</td>
</tr>
<tr>
<td>Mali</td>
<td>14.3%</td>
<td>9.6%</td>
</tr>
<tr>
<td>Niger</td>
<td>15.1%</td>
<td>11%</td>
</tr>
<tr>
<td>Senegal</td>
<td>21.1%</td>
<td>14.7%</td>
</tr>
<tr>
<td>Togo</td>
<td>21.8%</td>
<td>16.7%</td>
</tr>
</tbody>
</table>

2.2 By 2020, reduce the maternal mortality rate in the eight priority countries (Benin, Chad, Côte d’Ivoire, Guinea, Mali, Niger, Senegal and Togo).

<table>
<thead>
<tr>
<th>Country</th>
<th>Current rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>400/100 000</td>
</tr>
<tr>
<td>Chad</td>
<td>1 098/100 000</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>614/100 000</td>
</tr>
<tr>
<td>Guinea</td>
<td>724/100 000</td>
</tr>
<tr>
<td>Mali</td>
<td>368/100 000</td>
</tr>
<tr>
<td>Niger</td>
<td>535/100 000</td>
</tr>
<tr>
<td>Senegal</td>
<td>484/100 000</td>
</tr>
<tr>
<td>Togo</td>
<td>401/100 000</td>
</tr>
</tbody>
</table>

10 - Target rates set by the Ouagadougou Partnership.
11 - “Percentage of all women using any modern contraceptive method” during the most recent Demographic and Health Survey. Source: www.statcompiler.com (consulted in February 2016).
12 - “Number of maternal deaths per 100,000 live births” during the most recent Demographic and Health Survey. Source: www.statcompiler.com (consulted in February 2016). The worldwide objective is to reduce by 2030 the global maternal mortality rate to less than 70 per 100,000 live births.
2.2.1 Means and modalities to implement Objective 2

France will help increase access to modern contraceptive methods via its multilateral support to international organizations, its bilateral support, and its support to global and regional partnerships.

France will continue to contribute voluntary funds to UNFPA, which supports family planning policies, ensures continual and reliable supplies of high-quality contraceptives, helps strengthen national health systems and gathers data to support its interventions.

The Ouagadougou Partnership: high impact action

The Ouagadougou Partnership was launched following the Regional Conference on Population, Development, and Family Planning held in Ouagadougou, Burkina Faso, in February 2011 by nine West African governments and their technical and financial partners. Its objective is to speed up progress in the use of family planning services in Benin, Burkina Faso, Côte d’Ivoire, Guinea, Mali, Mauritania, Niger, Senegal and Togo.

The partnership focuses on improving coordination between donors to optimize their support to the countries. It also works to ensure cooperation at the national and regional levels to lower the high rate of unmet family planning needs.

In 2011, the partnership set the target of an additional one million women using modern contraceptive methods by 2015 in the nine countries. This target was greatly exceeded. By 2020, the nine countries aim for another two million women using modern contraceptive methods.

Source: partenariatouaga.org
One of the focus areas of the *Fonds français Muskoka* is the strengthening of health systems, especially the supply and distribution systems for medication and health supplies. These interventions will be implemented mainly by UNFPA and WHO in Chad, Guinea, Mali and Niger.

**AFD** promotes an **integrated approach** to maternal and child health and family planning by including these services in a **continuum of care**. A key concern will be the strengthening of family planning services by improving supply (bringing health infrastructures up to standard, health care provider training, reinforcing health product supply systems, etc.) and demand (promoting social anthropology research, sexuality education, communication to change behaviours, community outreach, etc.). AFD will roll out its operations at various levels: at the State level by supporting national policies; at the civil society level through its funding of French NGOs, via public-private partnerships established between beneficiary countries and civil society organizations; and at the regional level through various mechanisms (Ouagadougou Partnership, West African Health Organisation).

Along with the Bill & Melinda Gates Foundation, AFD finances the “Mobilizing for sexual and reproductive health and rights” project, led by Équilibres & Populations, from 2015 to 2018. This project aims to boost the capacities of the **Alliance Droits et Santé** network of 15 civil society organizations from five francophone West African countries to improve sexual and reproductive health and rights, and especially women’s and adolescents’ access to contraceptives (see box).

The **Global Fund to Fight AIDS, Tuberculosis and Malaria** encourages countries to associate reproductive, maternal, infant, child and adolescent health interventions with HIV, tuberculosis and malaria prevention programmes and to improve the overall health of women and girls. During the development of the Global

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**Alliance Droits et Santé**

Created in 2013 by the NGO *Équilibres & Populations*, Alliance Droits et Santé brings together 15 different partners (specialized associations, youth movements and women’s networks) from five countries (Benin, Burkina Faso, Mali, Niger and Senegal). The network aims to improve the status and health of women and girls in West Africa. Its actions are centred on three areas: political mobilization, communication for social change and capacity building.

The network focuses specifically on improving sexual and reproductive health and rights (SRHR), especially access to contraceptives, as part of the project “Mobilizing for sexual and reproductive health rights: an alliance for women and adolescents in West Africa” (2015–2018), supported by France.

In terms of advocacy, the project backs national strategies in favour of sexual and reproductive health and rights, provides tailored assistance for member associations, and creates various tools (factsheets, webinars, and guides). In the areas of communication and awareness raising, some twenty champions working for women and adolescents will be identified to talk about their efforts, including through radio broadcasts, a dedicated website and special SRHR and family planning events. Finally, support will be provided to members for organizational development, resource mobilization and administrative/financial management on a collective and individual basis via on-site training and remote monitoring (follow-up, briefing cards, etc.).

This broad approach will help improve quality and in turn the impact of the associations’ actions, as well as build sustainable capacities to create lasting policy and social change with regards to the sexual and reproductive health and rights of women and adolescents in West Africa.
Fund’s Strategy for 2017–2022, France strongly supported the adoption of a strategic objective aiming to “build resilient and sustainable systems for health”, for which one of the operational objectives is to “support reproductive, maternal, child¬ren’s, and adolescent health, and integrated platforms for service delivery”. France will be following the progress made by the Global Fund in implementing this operational objective, as a member of the board and through its representatives in partner countries.

France participates in the Ouagadougou Partnership, whose main objective is to increase the rate of use of modern contraceptive methods in the following nine countries: Benin, Burkina Faso, Côte d’Ivoire, Guinea, Mali, Mauritania, Niger, Senegal and Togo (see box). France remains strongly committed to this partnership.

France participates in the Reproductive Health Supplies Coalition (RHSC), a global partnership of partner countries, development agencies, pharmaceutical companies, private foundations, civil society organizations and international organizations. It works to ensure that low- and middle-income countries can access and maintain the supply chains for and use affordable, high-quality products to prevent unwanted pregnancies, guarantee women safe births, and treat STIs.

### 2.2.2 France supports key complementary actions

To ensure an integrated approach to the continuum of care and achieve the priority objective of expanding access to modern contraceptive methods, France undertakes the following key complementary actions:

- **Develop national capacities and human resources** for managing contraceptive products and health systems.
- **Raise awareness about and involve** men in initiatives designed to promote gender equality. Men and boys must be encouraged to share family planning responsibilities. They can also motivate other men to follow their lead.
- **Boost the dissemination of information about and prevention of HIV and STIs** by supporting screening, treatment and quick care for people living with HIV and fostering the social inclusion of individuals living with HIV by supporting interventions to change mind-sets and combat stigmatization and discrimination.
- **Provide essential services for abused women**, namely by improving access to services and treatments such as hot-lines and new technologies for victims, post-rape care (emergency contraception, abortion in the event of pregnancy following a rape, prophylaxis to prevent the transmission of HIV and other STIs, etc.), psychological support, police protection, access to safe housing, the establishment of documented evidence, legal aid and court services.
- **Bolster social protection, including by supporting universal health coverage mechanisms** to ensure fair and equal participation for all beneficiaries of essential services in the countries. AFD plans to assist developing countries shift towards universal health coverage that both strengthen health systems and ensures equity-based health financing mechanisms. (AFD Intervention Framework in the health and social protection sector for 2015–2019).
- **Improve care for women dealing with unwanted pregnancies** by supporting pre-abortion, safe abortion and post-abortion care.

### UNFPA

UNFPA’s stated mission is to ensure that “every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled”. UNFPA advocates for family planning policies, ensures continual and reliable supplies of high-quality contraceptives, helps bolster national health systems and gathers data to support its interventions. It also provides global guidance to improve access to family planning: it brings together its partners – especially governments – to draft policies and offer programme, technical and financial assistance to developing countries.

UNFPA is a strategic partner for France on issues of sexual and reproductive health and rights, especially in francophone Africa. France finances UNFPA through voluntary contributions and the extension of the Muskoka Initiative on Maternal, Newborn and Child Health.
• Improve prenatal care as an essential link in the continuum of care through handling unwanted pregnancies; preventing and treating malnutrition; preventing malaria, tetanus and anaemia; screening for and treating STIs and HIV/AIDS; identifying abuse victims; and screening for complications during pregnancy.

• Develop national capacity for gathering vital statistics, especially for the production, dissemination and use of data on marital status, census and survey data, as well as for the strengthening of monitoring and assessment mechanisms and public policy outlooks.

2.3. Objective 3: facilitate access for adolescents and youth to sexual and reproductive health services and reduce harmful practices

More than 15 million girls aged 15 to 19 give birth every year, most in situations of forced and early marriage. When an adolescent is pregnant or gives birth, her health and life may be in jeopardy much more often than young women who have reached the age of 18. The risks of pregnancy-related complications and death are five times greater for adolescents than for adult women.

Strengthening access to comprehensive sex education, products and services for adolescents, youth and key populations is a priority for France, in line with its Acting for Youth Policy Paper (MAEDI/DGM, 2015). A particular focus is paid to prevention and health care via suitable care options free of discrimination and which respect users’ confidentiality. Investing in the sexual and reproductive health of adolescents and youth is a priority for France.

Expertise France’s ESTHER Initiative

The ESTHER Initiative (“Ensemble pour une solidarité thérapeutique hospitalière en réseau”), launched in 2001 and run by Expertise France since 2015, is based on partnerships and skills transfer to ensure comprehensive care for people living with HIV. It also strives to strengthen health systems through an integrated approach. It works through hospital twinning initiatives that mobilize health care professionals to improve the quality of care through a mentoring system and by supporting community organizations and health care providers.

From 2012 to 2014, ESTHER ran a “Sexual Health and Human Rights” training for trainers programme in partnership with the United Nations Educational, Scientific and Cultural Organization (UNESCO) Chair on sexual health and human rights. Around 15 doctors, psychologists, psychosocial counsellors and other care providers from Benin, Burkina Faso, Burundi, Central African Republic, Côte d’Ivoire, Haiti, Mali, Morocco, Niger, Senegal and Togo participated in the programme. The training dealt with the topics of counselling on sexuality, youth sexuality, human and sexual rights, sexual abuse and family planning. The health care professionals who participated in the training course are now able to train other professionals in their respective countries, creating a task force able to carry out activities in several countries.

Adolescent and youth health

Pregnancy-related complications are the top cause of death for adolescent girls in most developing countries. West Africa has the highest prevalence of adolescent pregnancy in the world, with around 120 births per 1,000 girls aged 15 to 19, i.e., double the worldwide average.

HIV/AIDS is the second leading cause of death for young people aged 10-24 in developing countries due to a lack of sufficient responses and investment in overcoming the epidemic.
France has set as its objective:

3) To help facilitate access for adolescents and youth to sexual and reproductive health services and reduce harmful practices in eight priority countries by 2020.

Monitoring indicators:

3.1 By 2020, increase the rate of prevalence of modern contraceptive methods among young women (aged 15 to 19) in the eight priority countries (Benin, Chad, Côte d’Ivoire, Guinea, Mali, Niger, Senegal and Togo).

<table>
<thead>
<tr>
<th>Country</th>
<th>Current rate¹³</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>9.5%</td>
</tr>
<tr>
<td>Chad</td>
<td>0.9%</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>11.9%</td>
</tr>
<tr>
<td>Guinea</td>
<td>4.4%</td>
</tr>
<tr>
<td>Mali</td>
<td>5.5%</td>
</tr>
<tr>
<td>Niger</td>
<td>3.7%</td>
</tr>
<tr>
<td>Senegal</td>
<td>4.1%</td>
</tr>
<tr>
<td>Togo</td>
<td>10.1%</td>
</tr>
</tbody>
</table>

3.2 By 2020, reduce the percentage of women married before age 15 in the eight priority countries (Benin, Chad, Côte d’Ivoire, Guinea, Mali, Niger, Senegal and Togo).

<table>
<thead>
<tr>
<th>Country</th>
<th>Current rate¹⁴</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>14.3%</td>
</tr>
<tr>
<td>Chad</td>
<td>34.2%</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>11.6%</td>
</tr>
<tr>
<td>Guinea</td>
<td>27.3%</td>
</tr>
<tr>
<td>Mali</td>
<td>20.1%</td>
</tr>
<tr>
<td>Niger</td>
<td>30.2%</td>
</tr>
<tr>
<td>Senegal</td>
<td>11%</td>
</tr>
<tr>
<td>Togo</td>
<td>9%</td>
</tr>
</tbody>
</table>

3.3 By 2020, reduce the percentage of women subjected to genital mutilation in the eight priority countries (Benin, Chad, Côte d’Ivoire, Guinea, Mali, Niger, Senegal and Togo).

<table>
<thead>
<tr>
<th>Country</th>
<th>Current rate¹⁵</th>
</tr>
</thead>
<tbody>
<tr>
<td>Benin</td>
<td>7.3%</td>
</tr>
<tr>
<td>Chad</td>
<td>44.9%</td>
</tr>
<tr>
<td>Côte d’Ivoire</td>
<td>38.2%</td>
</tr>
<tr>
<td>Guinea</td>
<td>96.9%</td>
</tr>
<tr>
<td>Mali</td>
<td>91.4%</td>
</tr>
<tr>
<td>Niger</td>
<td>2%</td>
</tr>
<tr>
<td>Senegal</td>
<td>24.7%</td>
</tr>
<tr>
<td>Togo</td>
<td>4.7%</td>
</tr>
</tbody>
</table>

¹³ - “Percentage of women aged 15 to 19 using any modern method of contraceptives” during the most recent Demographic and Health Survey. Source: www.statcompiler.com (consulted in February 2016).

¹⁴ - “Percentage of women who were married by age 15” during the most recent Demographic and Health Survey. Source: www.statcompiler.com (consulted in February 2016).

¹⁵ - “Percentage of women who were victims of female genital mutilation” during the most recent Demographic and Health Survey. Source: www.statcompiler.com (consulted in February 2016).
Objective 3 and its monitoring indicators address namely:

**SDG 3: Ensure healthy lives and promote well-being for all at all ages** and the following targets:

- By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births (target 3.1).
- By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases (target 3.3).
- 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 (target 3.7).

**SDG 4: Ensure inclusive and quality education for all and promote lifelong learning** and target 4.1:

- By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and Goal-4 effective learning outcomes.

**SDG 5: Achieve gender equality and empower all women and girls** and the following targets:

- End all forms of discrimination against all women and girls everywhere (target 5.1).
- Eliminate all forms of violence against women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation (target 5.2).
- Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation (target 5.3).
- 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 conference (target 5.6).
2.3.1 Means and modalities to implement Objective 3

France will address Objective 3 through its political advocacy, multilateral support to international organizations, its support to international partnerships, its bilateral programme and its support to civil society.

France will address the issue of sexual and reproductive rights of adolescents and youth, including access to comprehensive sexuality education (see Objective 1 and indicator 1.1) through its political advocacy at the international, regional and national levels vis-à-vis governments. At UNESCO, France argues for the inclusion of comprehensive sexuality education in lower-secondary school curricula. It has also called on UNESCO to adopt the resolution on “Learning without Fear”.

One of the focus areas of the Fonds français Muskoka is the sexual and reproductive health of adolescents and youth. Interventions include training of health care providers; setting up safe spaces for adolescents; supply, distribution and quality assurance of contraceptive products; and comprehensive sexuality education in school curricula with the development of specific teaching tools. These interventions will be undertaken mainly by UNFPA, UNICEF and WHO in cooperation with civil society to sustain activities that are already being implemented.

France supports programmes that promote education for girls led by international organizations, especially as part of its commitment to the Global Partnership for Education, which works to develop effective and sustainable educational systems and guarantee the mobilization of financial and technical resources.

AFD envisages providing specific support to the supply and demand of care for adolescents. This target group will be addressed in the various programmes on sexual, reproductive, maternal, infant and child health that will be developed over the 2016–2020 period. AFD will promote approaches and actions that improve education and support women’s rights.

France finances projects in Cameroon, Senegal and Togo that strive to combat school-related gender-based violence. These projects contribute to creating safe, inclusive school environments that encourage equality between girls and boys. They are led by UNICEF, UNESCO and the NGO Plan International France over a three-year period, with total funding of €1.5 million.

The Global Fund to Fight AIDS, Tuberculosis and Malaria encourages countries to associate reproductive, maternal, infant, child and adolescent health interventions with HIV, tuberculosis and malaria prevention programmes. In particular, Expertise France, through the Global Fund’s 5% Initiative, enables stakeholders in francophone countries to access resources or ensure the implementation of received funding. A 2015 call for proposals for the 5% Initiative funded eight three-year projects with the theme “adolescents and girls” in Africa and Asia with a total funding of €6.8 million. With the objective of preventing the transmission of HIV, these projects will help adolescents take charge of their sexuality and offer diagnostics and suitable solutions to respond to the challenges and differentiated needs of young women and men.

In 2013, the Ministry of Foreign Affairs and International Development’s Consular network for French nationals abroad created a programme to combat forced marriage of French nationals abroad, both to better serve individuals facing or subjected to forced marriage and to inform them of their rights and means of recourse with a view to preventing forced marriage.

2.3.2 France supports key complementary actions

To facilitate access by adolescents and youth to reproductive health services and reduce harmful practices, France undertakes the following key complementary actions:

- Support the implementation of comprehensive sexuality education programmes in formal education courses and in communities as well as in teacher curricula and training. Comprehensive sexuality education is a “curriculum-based education that aims to equip children and young people with the knowledge, skills, attitudes and values that will enable them to develop a positive view of their sexuality, in the context of their emotional and social development”.

campaigns on adolescent sexual and reproductive health, especially through the establishment of hotlines for adolescents and youth. (See Objective 1.)

- **Advocate for the adoption and/or strengthening of laws raising the legal age of marriage** and criminalizing forced marriage. Efforts will also include supporting programmes and multi-sectoral strategies to assist their implementation.

- **Support outreach among and training of health care providers and social workers**, and to the adaptation of health care structures, to strengthen the accessibility and acceptability of services by and for adolescents.

- **Raise awareness among communities and religious leaders, especially men**, to abandon harmful practices and to change social norms, and train social workers and health care professionals with a view to providing victims with appropriate health care services.

- **Raise awareness among and educate boys on the principles of equality and respect for all, especially girls, from early childhood.**

- **Strengthen the prevention of and combat against adolescent pregnancies** by supporting national strategies to facilitate access to information on contraceptive products and services, and by supporting the strengthening of legal and political frameworks to protect and ensure sexual and reproductive rights for adolescents and youth.

- **Strengthen the prevention and fight against HIV/AIDS amongst adolescents, youth and key populations** through universal access to information, education, prevention and HIV counselling services, screening and antiretroviral drugs within shorter timeframes, and through the creation of an appropriate offer of care which is free of coercion or discrimination and which respects the confidentiality of adolescents, youth and key populations.

- **Increase input from youth in population and development policies**, including policies on sexual and reproductive health, education, professional training and access to decent employment by supporting youth organizations and advocating on behalf of youth.

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**The ICPD Programme of Action (1994) affirms that:**

“The response of societies to the reproductive health needs of adolescents should be based on information that helps them attain a level of maturity required to make responsible decisions. In particular, information and services should be made available to adolescents to help them understand their sexual ity and protect them from unwanted pregnancies, sexually transmitted diseases and subsequent risk of infertility. This should be combined with the education of young men to respect women’s self-determination and to share responsibility with women in matters of sexuality and reproduction.”

(Paragraph 7.41)

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**Fonds français Muskoka**

Following the G8 Summit held in Canada in 2010, France made a commitment to support the joint efforts of four UN agencies as part of the Muskoka Initiative on Maternal, Newborn and Child Health. As a result, the Fonds français Muskoka was created, implemented by WHO, UN Women, UNFPA and UNICEF. Through its strong regional ties, the Fund has been lauded as one of the most original advances of the Muskoka Initiative. It has been particularly effective in countries such as Chad, Niger and Senegal, which have recorded significant reductions in maternal and child deaths during the programme.

While 2016 marks the end of the commitments undertaken in 2010, France is pursuing its support to the Fonds français Muskoka with €10 million in 2016. The programme will benefit from stronger coordination and a re-centred geographical and thematic focus. Interventions will be oriented towards eight countries (Benin, Chad, Côte d’Ivoire, Guinea, Mali, Niger, Senegal and Togo) and will prioritize reproductive, maternal, child, adolescent and youth health as well as nutrition and the strengthening of health systems.
### Acronyms and Abbreviations

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>AFD</td>
<td>Agence française de développement (French Development Agency)</td>
</tr>
<tr>
<td>AfDB</td>
<td>African Development Bank</td>
</tr>
<tr>
<td>AIDS</td>
<td>Acquired Immune Deficiency Syndrome</td>
</tr>
<tr>
<td>CRS</td>
<td>Creditor Reporting System</td>
</tr>
<tr>
<td>DGM</td>
<td>Directorate-General for Global Affairs, Culture, Education and International Development of the Ministry of Foreign Affairs and International Development</td>
</tr>
<tr>
<td>ESTHER</td>
<td>Ensemble pour une solidarité thérapeutique hospitalière en réseau</td>
</tr>
<tr>
<td>G7</td>
<td>Group of Seven</td>
</tr>
<tr>
<td>G8</td>
<td>Group of Eight</td>
</tr>
<tr>
<td>GAVI</td>
<td>Vaccine Alliance (formerly the Global Alliance for Vaccines and Immunizations)</td>
</tr>
<tr>
<td>GFATM</td>
<td>Global Fund to Fight AIDS, Tuberculosis and Malaria</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immunodeficiency Virus</td>
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<tr>
<td>ICPD</td>
<td>International Conference on Population and Development</td>
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<tr>
<td>IDA</td>
<td>International Development Association</td>
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<tr>
<td>MAEDI</td>
<td>French Ministry of Foreign Affairs and International Development</td>
</tr>
<tr>
<td>MLF</td>
<td>Mouvement de libération des femmes</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-Governmental Organization</td>
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<tr>
<td>ODA</td>
<td>Official Development Assistance</td>
</tr>
<tr>
<td>OECD</td>
<td>Organisation for Economic Co-operation and Development</td>
</tr>
<tr>
<td>RHSC</td>
<td>Reproductive Health Supplies Coalition</td>
</tr>
<tr>
<td>SDG</td>
<td>Sustainable Development Goal</td>
</tr>
<tr>
<td>SRHR</td>
<td>Sexual and Reproductive Health and Rights</td>
</tr>
<tr>
<td>STI</td>
<td>Sexually Transmitted Infection</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
</tr>
<tr>
<td>UN Women</td>
<td>United Nations Entity for Gender Equality and the Empowerment of Women</td>
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<tr>
<td>UNAIDS</td>
<td>Joint United Nations Programme on HIV/AIDS</td>
</tr>
<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
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<tr>
<td>UNESCO</td>
<td>United Nations Educational, Scientific and Cultural Organization</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>UNITAID</td>
<td>International Drug Purchase Facility</td>
</tr>
<tr>
<td>WHO</td>
<td>World Health Organization</td>
</tr>
</tbody>
</table>
FRANCE’S EXTERNAL ACTION ON THE ISSUES OF POPULATION AND SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS
2016-2020

In 2030, the global population is expected to exceed 8.5 billion people. Access to fundamental sexual and reproductive health and rights is a critical priority for the 21st century. Currently, solutions and investments have not kept pace with needs. The effectiveness of interventions depends on access for everyone to information, products and services. To tackle these challenges, France has developed its first strategy on population and sexual and reproductive health and rights.

France’s action is focused on a geographical area where health and demographic issues are the most pressing: West and Central Africa.

This strategy, which is the result of concerted efforts between French and international stakeholders working on these challenges, sets out a framework for France’s development institutions and pursues three priority objectives: strengthen international, regional and national normative frameworks for sexual and reproductive rights; improve access to modern contraceptive methods by promoting an integrated approach; and facilitate access for adolescents and youth to sexual and reproductive health services and reduce harmful practices.