

EMPOWERING WOMEN THROUGH SEXUAL AND REPRODUCTIVE HEALTH RIGHTS (SRHR)

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ABSTRACT

Safeguarding Sexual and Reproductive Health Rights (SRHR) is important for the overall well-being, health and socio-economic growth of Women globally. There are many International agreements where Governments invest in Sexual and Reproductive Health Rights but there still remains some deficit due to political fortitude, insufficient funding, insistent gender discrimination and an unwillingness to openly confront problems surrounding Sexuality. SRHR includes a range of human rights relating to sexuality and reproduction. It comprises the right to make informed choices about their sexual and reproductive lives, as well as family planning, without facing discrimination, compulsion (oppression) or violence. There is a necessity for SRHR (Sexual and Reproductive Health Rights) in India because of Challenges to Women's Autonomy and Reproductive Health; High Incidence of perilous Abortions; Restricted access to Contraception; Adults Reproductive Health Challenges; Focus of Government on Population Control and Women's Death due to Unsafe Abortion. There are Global and National Initiatives associated with Sexual and Reproductive Health Rights (SRHR). The journey in the direction of ensuring Sexual and Reproductive Health Rights (SRHR) in India is continuing, marked by progress so far underscored by persistent challenges. As we navigate the complications of gender equality, healthcare access and societal norms, it is imperative to remain persistent in our commitment to promoting autonomy, dignity and well-being for all.

Empowering Women through Sexual and Reproductive Health Rights (SRHR)

Introduction:

Safeguarding Sexual and Reproductive Health Rights (SRHR) is important for the overall well-being, health and socio-economic growth of Women globally. In spite of international agreements obliging governments to invest in SRHR, progresses have been caught up by a deficit in political fortitude, insufficient funding, insistent gender discrimination and an unwillingness to openly confront problems surrounding Sexuality.

Defining SRHR:

SRHR includes a range of human rights relating to sexuality and reproduction. These rights include Civil and Political independences, as well as financial, societal and cultural rights, all important for safeguarding that women have equal access to optimum sexual and reproductive well-being.

It comprises the right to make informed choices about their sexual and reproductive lives, as well as family planning, without facing discrimination, compulsion (oppression) or violence. According to UN, "Rights to reproductive and sexual health contains the right to life, liberty and the security of the person; the right to health care and information; and the right to non-discrimination in the allocation of resources to health services and in their accessibility and convenience."¹

The Puttaswamy judgment² precisely recognised the Constitutional right of women to make reproductive choices, as a personal liberty under Art. 21 of the Indian Constitution.

Necessity for SRHR (Sexual and Reproductive Health Rights) in India:

1. Challenges to Women's Autonomy and Reproductive Health:

Several women continue to lack physical autonomy. As per the most recent National Family Health Survey (NFHS-5),³ only 10% of women in India are autonomously able to make decisions about their personal health and 11% of women accept as true that marital violence is tolerable if a woman denies to engage in sexual relationship with her husband. Approximately half of all pregnancies in India are unplanned.

2. High Incidence of perilous Abortions: Nearly 78% of the 15 million abortions in India occur without medical facilities, showing a noteworthy lack of access to safe abortion facilities.

¹ Retrieved from <https://www.un.org/womenwatch/daw/csw/shalev.htm> last visited 24-11-2025

² Justice K.S. Puttaswamy & Anr. vs. Union of India & Ors. AIR 2017 SC 4161

³ Retrieved from <https://www.drishtiias.com/> last visited 28-11-2025

3. Restricted access to Contraception: Above 30 million married women in India in their reproductive years are unable to use contraception, highlighting the barriers to family planning services.

4. Adults Reproductive Health Challenges: In India, nearly 2 million adolescent women do not use modern contraception and a noteworthy percentage of adolescents who give birth do not have access to the recommended minimum of four antenatal care appointments.

5. The Focus of Government on Population Control: The government's historical method to reproductive rights has always prioritised population control measures over individual autonomy and use of comprehensive sexual and reproductive health services, following a lack of focus on initiatives such as universal access to abortion and use of contraception.

6. Women's Death due to Unsafe Abortion: According to the United Nations Population Fund (UNFPA)'s⁴ State of the World Population Report 2022, unsafe abortions are the 3rd leading reason of maternal mortality in India and close to eight women die from causes related to risky abortions each day.

Initiatives associated with Sexual and Reproductive Health Rights (SRHR)

1. Global Initiatives:

(a) The Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW): It is an international legal instrument that entails countries to eliminate discrimination towards women and girls in all fields and promotes their equal rights.

CEDAW⁵ is often described as the international bill of rights for women it is one of the key international agreements that guides the work of UN Women in achieving gender equality and empowering all women and girls.

(b) The International Covenant on Civil and Political Rights (ICCPR)⁶: It purposes to safeguard the protection of civil and political rights including: Freedom from discrimination, Right to equality between men and women, Right to life, Freedom of non-citizens from arbitrary expulsion, Freedom from torture, Right of children to birth registration and a nationality, Freedom from slavery, Right to liberty and security of person, Right to be treated with humanity in detention, Freedom of movement, Right to fair trial, Right to recognition before the law, Freedom of association, Right to privacy Freedom of religion and belief, Freedom of expression, Right of peaceful assembly, Right to marry and found a family, Right to participate in public affairs, Right to equality before the law and Minority rights.

⁴ Retrieved from <https://www.unfpa.org> last visited 28-11-2025

⁵ Retrieved from <https://www.unwomen.org> last visited 28-11-2025

⁶ Retrieved from <https://en.wikipedia.org> last visited 28-11-2025

(c) **Beijing Declaration and Platform for Action⁷**: The Beijing Declaration and Platform for Action is a visionary plan for the empowerment of women. It is also one of the reference outlines to analyse the situation of women around the world and to assess the efforts of States in support of women's empowerment.

2. **National Initiatives:**

1. **Development and Strengthening of the Contraceptive Technique**: India's commitment towards the Family Planning 2030 partnership⁸ includes expanding its contraceptive basket. The insertion of innovative contraceptive options advances women's rights and autonomy, leading to a spike in contemporary contraceptive incidence. Access to timely and affordable family planning services is vital because unspaced pregnancies may have a harmful effect on the newborn's health as well as major effects on maternal mortality, illness and healthcare expenses.

2. **India's National Health Policy 2017⁹**: It prioritises guaranteeing the availability of free, complete prime health care services, for all aspects of reproductive, maternal, child and adolescent health through optimal use of existing resources.

In addition to this the Government of India has introduced midwifery services¹⁰ across the country to expand the provider base for reproductive health services.

3. **Launch of the Rashtriya Kishor Swasthya Karyakram¹¹ (National Adolescent Health Programme)**: This initiative, started in 2014, focuses on promoting healthy development during adolescence, addressing the specific sexual and reproductive health needs of young people.

4. **Solving Gaps in Adolescent Sexual and Reproductive Health Services**: In spite of progress, significant challenges persist, like limited access to accurate information and comprehensive abortion care. Efforts are desirable to overcome blockades such as provider bias and insufficient data.

5. **India's Commitment to SRHR in SDGs**: The incorporation of SRHR into the Sustainable Development Goals (SDGs)¹² and its recognition in international policy frameworks enforces a duty on nations to uphold these rights and mandates sexual and reproductive health as fundamental human rights. As a signatory to the 2030 Agenda for Sustainable Development

⁷ Retrieved from <https://www.icsspe.org> last visited 28-11-2025

⁸ Retrieved from <https://www.fp2030.org> last visited 6-12-2025

⁹ Retrieved from <https://india.gov.in> last visited 6-12-2025

¹⁰ Retrieved from <https://nhm.gov.in> last visited 6-12-2025

¹¹ Retrieved from <https://nhm.gov.in> last visited 6-12-2025

¹² Retrieved from <https://sdgs.un.org> last visited 6-12-2025

and home for a significant portion of the global population, India is bound to ensure the execution of policies and legislation that safeguard sexual and reproductive health rights.

Both SDG 3 on health and SDG 5 on gender equality and women's and girls' empowerment include goals relating to sexual and reproductive health and reproductive rights.

Findings:

The Indian government's health, population and development programmes have shown firm progress over few years. Life expectancy at birth has suggestively increased in India over the past few years.

In contrast to the 1990s, Indians are presently living an era longer. In terms of maternal health, India has made inspiring steps. As of late 2025, India's Maternal Mortality Ratio (MMR) has significantly improved, reaching 88 per 100,000 live births for the 2020-22 period, meeting national targets and showing continued decline from earlier years like 93 (2019-21) and 130 (2014-16)¹³.

Another achievement of these programmes is Gender Empowerment. Since the commencement of 2000, India has reduced the number of child marriages by half.

Teen age pregnancies, too, have decreased significantly. Reaching out to vital services, together with health, education and nourishment has also improved.

Steps to be taken to ensure Sexual and Reproductive Health Rights (SRHR)

(1.) Comprehensive Sexuality Education (CSE): Executing age-appropriate, culturally sensitive and evidence-based sexuality education programs in schools and communities can deliver individuals with precise information about sexual health, relationships, contraception, and consent. Augmented Reality (AR) and Virtual Reality (VR) skills can create immersive and interactive learning experiences for menstrual health education.

(2.) Use of Contraception and Family Planning Services: Safeguarding affordable and accessible contraception and family planning services permits individuals to make informed selections about their reproductive health and avoid unintended pregnancies.

(3.) Health Workforce Capacity: It's important to improve the capacity and skills of healthcare providers to deliver appropriate, high-quality and respectful sexual and reproductive healthcare.

(4.) Intersectoral Collaboration: Firming sexual and reproductive health services needs collaboration across several sectors, including health, education and transportation, to ensure accessibility and support through the life cycle.

¹³ Retrieved from <https://www.pib.gov.in> last visited 7-12-2025

(5.) Necessity for Targeted Investment: As per recommendations by Guttmacher–Lancet Commission¹⁴ for India, targeted investment in adolescent sexual and reproductive health is necessary for reducing unwanted pregnancies, unsafe abortions, unplanned deliveries, maternal mortality as well as safeguarding young people’s bodily autonomy and well-being.

(6.) Community-based Peer Education Programs: Engaging local communities through innovative peer education programs can help breakdown the silence and stigma surrounding menstruation. These programs can train and empower women and girls to become menstrual hygiene representatives.

Conclusion

The journey in the direction of ensuring Sexual and Reproductive Health Rights (SRHR) in India is continuing, marked by progress so far underscored by persistent challenges. As we navigate the complications of gender equality, healthcare access and societal norms, it is imperative to remain persistent in our commitment to promoting autonomy, dignity and well-being for all. By acceptance inclusivity, education and collaborative efforts, we pave the way for a future where every individual can exercise their rights and prosper within a supportive and impartial society.

¹⁴ Retrieved from <https://www.guttmacher.org> last visited 6-12-2025