

# SEXUAL AND REPRODUCTIVE HEALTH

Sustainable Development Goal Target 3.7

Heteronormative framing of sexual and reproductive health continues to exclude men and LGBTI people, Quality, comprehensive, non-discriminatory SRH services remain out of reach for many LGBTI people. Draconian and discriminatory measures which seek to control sexual behaviors have not resulted in decreasing SRH problems.



## HEALTH CARE WORKERS

The health care **workforce is ill-prepared** to address the sexual and reproductive health needs of LGBTI people.



## STIS

Many countries have documented **high incidence** to common STIs among gay and bisexual men and transwomen yet fear of discrimination, cost, and lack of social support impede these communities from accessing SRH services.

LGBTI people have **limited access** to SRH information relevant to their sexual lives and to their ability to protect themselves and their partners from sexual health risks, particularly when they are young adults.



## FERTILITY AND REPRODUCTION

Women in same-sex partnerships who wish to become pregnant are often **directed to utilize assisted reproductive technology**, such as fertility medication, available through costly private health care.

The **fertility related needs of trans people** have been **understudied** and are compromised in many countries where legal gender recognition requires irreversible surgical reassignment, resulting in sterilization.



## PLEASURE

SRH service provision within LGBTI communities should **enhance autonomy, pleasure, and healthy relationships**.

Holistic responses to enhancing the SRH of LGBTI people could help people achieve a sense of sexual well-being and allows them to explore having the **best sex with the least harm**.

***LGBTI people have limited access to SRH information relevant to their sexual lives.***



## Uganda

In Uganda, **one in three young adults** who have had same-sex sexual experiences reported unmet sexual health counselling needs in university health services.



## Guatemala

In Guatemala, gay and bisexual men and trans women prefer clinics where they felt a sense of belonging.

# MEMBER STATES MUST:

1

Collect the number of services that address the sexual and reproductive health (SRH) needs of LGBTI people nationally.

4

Ensure SRH care providers commit to non-discrimination and respect for human rights in provision of SRH information and services.

2

Measure access to reproductive health commodities relevant to LGBTI SRH including condoms, lubricants, dental dams, latex gloves and finger cots.

5

Legally prohibit non-consensual medical procedures, including intersex genital mutilation and forced sterilization.

3

Document inclusion of LGBTI topics in comprehensive sexuality education.

6

Provide viable options to alternative assisted reproductive technologies for LGBTI people with parenting intentions.



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