

Reproductive Health: A Priority of Health for All

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Received 2017 August 19; Accepted 2017 August 21.

The theme of the 6th international conference on females' health focused on reproductive health, a salient issue on persons' health especially females. The concept of reproductive health arose in the 1980s with a growing movement away from population control and demographic targets toward a more holistic approach to females' health. It was first internationally accepted in the international conference for population and development (ICPD) in 1994 and the fourth world conference on women (FWCW) in 1995 (1).

The program of action of the ICPD defines reproductive health as a "state of complete physical, mental, and social well-being, and not merely the absence of disease or infirmity in all matters relating to the reproductive system and to its functions and processes". The plan of action spells out that people have the right to have "a satisfying and safe sex life". Besides, they should have the "capability to reproduce and the freedom to decide if, when, and how often to do so" (2). A healthy reproductive and sexual life is now considered to be a basic human right for all (3).

Five priorities of sexual and reproductive health (SRH) were determined in the 57th World Health Assembly including improving antenatal, delivery, postpartum, and newborn care; providing high-quality services for family planning, including infertility services; eliminating unsafe abortion; combating sexually transmitted infections (STIs), including HIV, reproductive tract infections, cervical cancer and other gynecological morbidities, and promoting sexual health (4).

Despite acceptable achievements in sexual and reproductive health regarding ICPD goals and MDGs in Iran, the country faces remarkable challenges in this arena. According to the increasing trend in the number of people living with HIV (PLWH), there is a gap between estimated and registered cases. Some reasons could be the lack of linkage among HIV/AIDS, STIs, and SRH programs, inadequate programs for destigmatization, and access to high risk population as well as unsafe abortion as a social anomaly threaten females' health in Iran. However, the Therapeutic Abortion Act (TAA) permits therapeutic abortions in 29 fetal abnormalities and 22 maternal diseases (5). Lack of awareness in general population about unsafe abortion consequences alongside inadequate comprehensive interventions in abortion reduction program is the key challenge to decline unsafe abortion rates and prevention of the consequences. In the subject of infertility, comprehensive insurance coverage to support infertility treatment and types of artificial reproductive therapy is a salient issue in moving toward new population policy in Iran.

In conclusion, selection of reproductive health theme for the forthcoming International Conference on Females' Health seems to be logical consideration for the aforementioned challenges in sexual and reproductive health in Iran.

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