Responding to climate change requires **HEALTH SYSTEM STRENGTHENING**, including for **SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS SERVICES, SUPPLIES** and **GENDER-BASED VIOLENCE RESPONSES**

For displaced girls and women in **HUMANITARIAN SETTINGS**, **LACK OF ACCESS TO SRH SERVICES IS THE LEADING CAUSE OF DEATH** (International Peace Institute, 2018)

**EXTREME WEATHER EVENTS** — including storms, floods, and wildfires — can cause **PHYSICAL DAMAGE TO HEALTH FACILITIES AND INFRASTRUCTURE**, causing cut offs in medical supply chains and result in the loss of medical records (Benjamin, G., 2016; Health Care Without Harm, 2018; IPCC, 2018)

Globally, it is estimated that **26 MILLION GIRLS AND WOMEN** of reproductive age are living in **HUMANITARIAN SETTINGS AND FACE THREATS TO THEIR SRHR** (Onyango, M. et al., 2017; UNFPA, 2015)

When health facilities and supply chains are compromised, there is a direct and immediate **NEGATIVE IMPACT** on **ACCESS TO AND QUALITY OF SRH SERVICES**, such as post-exposure prophylaxis for HIV, HIV treatment and emergency contraception (CDC, 2019; Onyango & Heidari, 2017)

**SEXUAL AND REPRODUCTIVE HEALTH SERVICES are fundamental to health AND SHOULD BE CENTRAL TO STRENGTHENING HEALTH SYSTEMS’ RESILIENCE TO CLIMATE CHANGE.** This includes access to family planning and reproductive health supplies and HIV treatment and prevention services

CALL TO ACTION