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Sexual and reproductive health and rights is a critical platform to promote and ensure HIV prevention. HIV prevention should be addressed together with sexual health to be most effective. But in many respects, such as contraceptive services, we don't yet see this. How do we address these imbalances?

Three Key points!

1. Become pragmatic- and go beyond theories.

- We need to strengthen HIV services within SRHR services- It is basically common sense.
- Adolescent girls and young women account for 25% of new infections in sub-Saharan Africa, yet make up only 10% of the total population. Still, dedicated HIV prevention programs are lacking, even in places with high HIV incidence among young women.
- During my time as an ambassador in Mozambique, I have experienced why:
 - 1) Health workers in the clinics are too busy. Medical doctors and nurses get added responsibilities- but not additional time. In many countries, for an HIV consultation there are 60 seconds - for family planning: three minutes.
 - 2) There is shortage of health staff. You need complementary support from civil society and community based organizations.
 - 3) Many girls I met did not consider themselves as being at risk of HIV-infection. Nor did they feel empowered to discuss safe sex with a boyfriend. Comprehensive Sexuality Education should have our focus.

2. Double Dutch approach to contraception

- In the Netherlands we have a dual protection of unwanted pregnancies and Sexually Transmitted Diseases, including HIV. This is known as the Double Dutch approach to contraception: Combined use of pills and condoms.
- If you go to a family planning clinic and you get a contraceptive- you still need to know that pills do not protect you against HIV.
- We need a global double Dutch approach to contraception.

3. In the end we need to talk about sex

- We are sexual beings- including adolescent girls and young women.
- For young women and girls in all their diversity, SRHR comes down to bodily autonomy.
- Sex is part of life and of HIV: as my minister said during the General Debate: 'Sex should be safe and enjoyable for everyone.'
- In the family planning clinics, we need not shy away from talking about sexuality. We need to recognize the realities of life.
- Handing out a three months contraceptive doses, while in the meantime a lot is happening in your sexual live, simply isn't effective.

- In term of leadership: we need to do something different. We should take the responsibility to make that change. We shouldn't be afraid to talk about sexuality. This is a live saving intervention.

And as the Dutch ambassador for Women's Rights and Gender Equality, I am fully engaged to ensure young women and girls in all their diversity have access to SRHR services, which include HIV prevention!