

Vulnerable Populations and Implications for Family Planning and Reproductive Health

Gerard Arbat*

Department of Family Medicine, Bursa Uludag University, Bursa, Turkey

ABOUT THE STUDY

The COVID-19 pandemic has significantly affected various sectors of society, and one area that has faced considerable challenges is family planning services. These services, need for reproductive health and the overall well-being of individuals, particularly women, have experienced disruptions, delays, and even complete cessation in some regions. The effects of the pandemic on family planning services are complex and multifaceted, with implications for accessibility, availability, and the quality of services.

Impact on access to family planning services

Access to family planning services has been severely impacted by the COVID-19 pandemic in both developed and developing countries. The pandemic led to widespread lockdowns, restrictions on movement, and the diversion of resources toward addressing the immediate health crisis. This disruption affected many aspects of healthcare delivery, including family planning.

Disruption of health services: In many parts of the world, healthcare systems were overwhelmed by the surge in COVID-19 cases. Hospitals and clinics that would typically provide family planning services were either closed or repurposed to manage COVID-19 patients. This disruption led to a significant decrease in the availability of services, particularly in Low-and Middle-Income Countries (LMICs), where health infrastructure is often less resilient.

Delay in family planning appointments: Many women and couples who relied on regular appointments for family planning services faced delays. This was particularly true for women seeking Long-Acting Reversible Contraception (LARC), such as Intrauterine Devices (IUDs) or implants, which require in-person visits for insertion or removal.

Reduced availability of contraceptive supplies: In many regions, the supply chains for contraceptives were disrupted during the pandemic. These disruptions were caused by factors such as border closures, reduced production, and logistical challenges. As a result, individuals seeking contraceptives were unable to

access the methods they preferred, and some were forced to use less effective or temporary methods.

Impact on vulnerable populations

The impact of the COVID-19 pandemic on family planning services was disproportionately felt by vulnerable populations, including low-income individuals, young people, refugees, and those in rural areas.

Challenges faced by adolescents and young people: Adolescents and young people, particularly those in rural or underserved areas, faced challenges in accessing family planning services during the pandemic. With schools and youth centers closed, many young people lost access to sexual and reproductive health education, as well as services such as contraception and counseling. Social distancing measures further limited their ability to seek out information or visit healthcare facilities.

Impact on refugees and migrants: For refugees and migrants, the pandemic further exacerbated the already precarious conditions they faced. Many were living in crowded camps or urban settings where access to healthcare services, including family planning, was limited. With the pandemic causing widespread travel restrictions and the diversion of healthcare resources, refugees found it even more difficult to access reproductive health services.

Economic and social barriers for low-income groups: In addition to the direct effects of the pandemic on healthcare access, low-income individuals faced additional barriers to family planning services. The economic downturn caused by the pandemic resulted in job losses, reduced income, and increased poverty. For many individuals, the cost of contraceptives or family planning services became unaffordable.

Impact on family planning policies and programs

The COVID-19 pandemic also had significant implications for family planning policies and programs at the national and global levels. Many governments and international organizations had to adjust their strategies in response to the crisis.

Correspondence to: Gerard Arbat, Department of Family Medicine, Bursa Uludag University, Bursa, Turkey, E-mail: gerardarbat@aku.edu.tr

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Shifts in family planning priorities: As the pandemic unfolded, family planning programs in many countries were restructured or temporarily suspended. National health authorities, in collaboration with international agencies such as the United Nations Population Fund (UNFPA), pivoted to address the urgent needs created by COVID-19. However, this shift often meant that family planning was deprioritized in favor of emergency response measures, such as the provision of Personal Protective Equipment (PPE) and testing kits, or the vaccination campaigns.

Impact on funding for family planning programs: Global funding for family planning services was also affected by the COVID-19 pandemic. Many governments and donors, including international organizations such as the Global Fund and USAID, faced financial constraints due to the economic repercussions of the pandemic. This led to reduced funding for reproductive health services, including family planning.

Adaptation to telemedicine and digital solutions: In response to the challenges of delivering in-person care during the pandemic, many family planning services began to integrate telemedicine and digital solutions. While this shift enabled some services to continue remotely, such as consultations and contraceptive prescriptions, it was not without its limitations.

Implications for family planning and reproductive health

The long-term implications of the COVID-19 pandemic for family planning services remain to be seen. However, several

trends have emerged that will likely influence the future of family planning and reproductive health services.

Increased focus on resilient healthcare systems: The COVID-19 pandemic has underscored the need for resilient healthcare systems that can continue to provide essential services, including family planning, during times of crisis. In the aftermath of the pandemic, there may be greater emphasis on strengthening health systems, improving infrastructure, and ensuring that family planning services can be delivered in emergencies.

Shifting attitudes toward telemedicine: The pandemic has accelerated the adoption of telemedicine and digital health solutions. In the context of family planning, this could lead to greater use of digital platforms for counseling, education, and even prescriptions for contraception.

Focus on equity and access: The pandemic has highlighted the deep inequities in access to family planning services, particularly for marginalized populations. In the future, there will likely be a greater focus on ensuring that reproductive health services are accessible to all individuals, regardless of income, geography, or status.

The COVID-19 pandemic has had a profound impact on family planning services worldwide, affecting access, availability, and the quality of care. Vulnerable populations, including adolescents, refugees, and low-income groups, have been disproportionately affected by these disruptions.