Acknowledgements

UNFPA commissioned Accenture to conduct research and develop a measurement framework and metrics to advance sexual and reproductive health and rights (SRHR) in the private sector.

UNFPA would like to extend its sincere thanks to the following organizations for their contributions: Global Reporting Initiative, United Nations Global Compact, United Nations Foundation, Philips, Overseas Development Institute, Gender Fair, Leitner Center for International Law and Justice, L’Oreal Fund for Women, Global Fairness Initiative, Responsible Business Alliance, Rhia Ventures, Hübner Management, Organon, Bayer, The Prada Group, Essity, and 2X Global.


About UNFPA

The United Nations Population Fund (UNFPA) is the sexual and reproductive health agency of the United Nations, with a mission to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person’s potential is fulfilled. UNFPA promotes gender equality and empowers women, girls and young people to take control of their bodies and their futures. UNFPA is working with partners in more than 150 countries to provide access to a wide range of sexual and reproductive health services. To advance the rights and health of women and girls, UNFPA is working towards three transformative results: ending unmet need for family planning, ending preventable maternal deaths and ending gender-based violence and harmful practices.

In line with the ICPD paragraph 8.25, UNFPA does not consider or promote abortion as a method of family planning. Rather, UNFPA accords the highest priority to voluntary family planning to prevent unintended pregnancies. UNFPA does not fund or perform abortions. UNFPA respects the sovereign right of countries to decide the extent to which abortion is legal. In all countries, UNFPA supports the right of women to receive post-abortion care to save their lives.

UNFPA collaborates with the private sector to create large-scale impact in sexual and reproductive health globally. This collaboration fosters the co-creation of innovative and sustainable programmes that support corporate social responsibility (CSR), improve environmental, social and governance (ESG) standards and promote inclusivity within diversity, equity and inclusion teams.

UNFPA’s engagement with the private sector also extends to workplace interventions, which is creating a transformational shift in the health of women workers. Workplace settings also provide an opportunity to engage with decision makers on SRHR promotional and treatment interventions.

In 2022, UNFPA established the multi-stakeholder Coalition for Reproductive Justice in Business (www.unfpa.org/coalition-reproductive-justice-business) to accelerate corporate investment in SRHR in the private sector. The coalition is working towards leading the integration of SRHR and gender equality in the workplace, with the specific objectives to:

- Build a movement to lead advocacy around the integration of SRHR and gender equality in corporate strategies and operations
- Promote increased investments in SRHR by the private sector through workplace policies and programmes
- Develop SRHR-centric metrics and indicators for companies to be measured and assessed against to advance corporate accountability
- Attain the endorsement of SRHR metrics by leading ESG reporting frameworks
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Women represent nearly 40 per cent of the global workforce. Yet, the average workplace was not built with a woman in mind.

Barriers to women’s full and equal participation at work can include insufficient parental leave and childcare, sexual harassment, and lack of support for their sexual and reproductive health and rights.

Investing in the health and wellbeing of women is not just the right thing to do, it’s also good for business. By some estimates, subsidizing sexual and reproductive health products and services increases workplace productivity by up to 15 per cent.

Measuring progress is the key to sustained change. That is why UNFPA and consultancy group Accenture are providing companies with a starting point: a scorecard for measuring the degree to which organizations meet their employees’ needs for sexual and reproductive health.

This policy paper focuses on metrics that can help businesses track and unpack their success.

Like other environmental, social and corporate governance (ESG) metrics, the scorecard represents a way to understand how successful an organization is in delivering on indicators that both advance a social good and support the bottom line, measures such as preventing and addressing workplace sexual harassment and supporting employees’ family planning goals.
These sexual and reproductive health indicators represent a crucial step towards the broader goal of advancing gender equity in the workplace. Reproductive health, rights and autonomy are the foundation for equal economic participation. Prioritizing employee sexual and reproductive health can improve morale, decrease absenteeism and reduce employee turnover.

Financial support for fertility treatments, surrogacy, adoption and egg freezing can expand women’s choices and help them thrive in the workplace. Expanded paid parental leave can attract younger workers, both female and male. Private spaces for breastfeeding, free or subsidized menstrual products, and other similar initiatives can create a supportive workplace for everyone.

Gender equity in the workplace also means full respect. Instituting protocols to prevent sexual harassment and discrimination demonstrates a commitment to ethical business practices and to employee well-being.

When the workplace works for women, it tends to work for everyone. To attract and retain top talent — women and everyone else — companies should embrace investment in sexual and reproductive health. Such investments will lead to a happier, more productive workforce, and that will translate into a more prosperous, inclusive future where employees thrive and businesses flourish.
EXECUTIVE SUMMARY

Private sector action on sexual and reproductive health and rights (SRHR) can unlock significant benefits and is critical to achieving gender equality

SRHR are pivotal to achieving women’s empowerment and gender equality, yet almost 4.3 billion people of reproductive age worldwide will have inadequate sexual and reproductive health services over the course of their lives [1].

Given that employees spend a significant proportion of their reproductive years at work, the private sector has an opportunity to play a key role in supporting the SRHR of its workforce by enabling access to essential health information and services. However, SRHR remains largely overlooked in the workplace, often existing as incomplete offerings within health care and inclusion and diversity efforts.

By integrating SRHR into workplace policies and benefits, companies can create transformational improvements in the health and socioeconomic advancement of their workers, in turn increasing productivity, reducing absenteeism and improving the attraction and retention of talent.

This not only tangibly boosts business performance, but also advances crucial sustainability goals on human rights, gender equality and employee well-being, thereby driving progress towards a just and equitable society.

Measurement and reporting are crucial to advancing progress on SRHR

Regardless of where businesses are on their SRHR journey, it is critical that they measure and track their progress by adopting appropriate indicators and metrics. This will allow them to understand the impact and effectiveness of their current initiatives and make continuous improvements in advancing SRHR for their workforce. Additionally, UNFPA strongly encourages companies to report publicly on their SRHR initiatives to showcase the positive impact these efforts have on their employees, businesses and broader society. By publicly championing SRHR in the workplace, businesses will pave the way for SRHR to become an integral part of corporate sustainability agendas globally, and catalyze a collective drive towards meaningful action.
Businesses can enable SRHR for their workforce by taking action across six key areas

There is no one-size-fits-all approach to addressing SRHR in the workplace. As a first step, companies should consider the needs of their workforce and their existing initiatives across six focus areas:

1. Detection and prevention of sexual and gender-based violence.
4. Counselling and services for women's reproductive, menstrual and menopausal health.
5. Counselling and services for modern contraceptives and comprehensive family planning.

Companies can then take tangible action across each focus area through three action levers: enacting workplace policies that promote SRHR, raising awareness of those policies and the resources available to employees, and enabling access to sexual and reproductive health services. Companies should start by focusing on the most important SRHR areas for their workforce, with a vision to expanding their efforts over time.
Businesses can follow four practical steps as they look to advance SRHR for their workforce:

1. **ASSESS**
   - Take stock of where the organization currently stands across each focus area.

2. **DESIGN**
   - Plan and activate SRHR initiatives and metrics across the three action levers.

3. **EMBED**
   - Implement initiatives and disclose progress through annual ESG reporting.

4. **ENHANCE**
   - Continuously pursue a higher level of maturity across the six SRHR focus areas.

To support businesses on their journey, this paper provides a set of tools and additional resources to assess current maturity, prioritize focus areas for adoption, design SRHR initiatives and report on progress, which businesses can select and adapt to their business context and current maturity.

**Embark on an SRHR transformation now**

It is clear that businesses hold the power to make a transformative difference in the lives of their employees and their families through prioritizing their sexual and reproductive health. Through this paper, UNFPA calls upon businesses to:

- Commit to advancing SRHR for their workforce.
- Measure and report on their progress through their annual ESG reporting.
- Engage with the Coalition for Reproductive Justice in Business to advance SRHR in the private sector.

Together, let us create workplaces that uphold, empower and champion the rights and well-being of every employee and build an equitable and prosperous world.
INTRODUCTION

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A transformational opportunity

Almost 4.3 billion people of reproductive age worldwide will have inadequate sexual and reproductive health services over the course of their lives [1]. Good sexual and reproductive health and rights (SRHR), centred on bodily autonomy and agency, are critical to achieving an inclusive, equitable and sustainable world. However, there has been an erosion of sexual and reproductive rights in recent years across the world. The surge in gender-based violence, exacerbated by Covid-19 lockdowns, coupled with the defunding of essential services and the introduction of policies reversing access to rights, highlights a pressing and escalating demand for global reproductive justice. Moreover, millions of women and girls are displaced amidst ongoing geopolitical and climate change-related conflicts, and as a result, confront severe health care challenges, underscoring the critical need for action worldwide.

The private sector plays a critical role in supporting the SRHR of its workforce by enabling access to essential health services through employee benefits and environmental, social and governance (ESG) investments. However, not many companies are currently prioritizing SRHR. Ensuring reproductive justice in the workplace is pivotal to achieving socially responsible business practices around inclusion and diversity, human rights and occupational health and well-being, thereby generating significant financial returns and having a positive social impact. While businesses have made notable advancements on environmental sustainability, the social piece has been left behind. The 2023 Global Health 50/50 Report [2] demonstrates that women’s health and SRHR remain largely overlooked in the workplace, creating a significant barrier to gender equality and women’s empowerment. With sustainability reporting becoming standard practice for many companies, embedding SRHR into the ESG reporting landscape will position women’s health and rights at the forefront of the sustainability agenda, accelerating private sector action on this hugely important topic.
Understanding SRHR

Sexual and reproductive health refers to physical, emotional, mental and social well-being in relation to all aspects of sexuality and reproduction. It goes beyond reducing disease and dysfunction, emphasizing a positive and respectful approach to sexual experiences and reproduction [1].

Sexual and reproductive rights include the rights of individuals to make decisions governing their bodies and to access information and services for sexual and reproductive health, without discrimination, coercion or violence. They are a key component of the human rights to health, education and social security, and a safe and healthy working environment, outlined in the International Covenant on Economic, Social and Cultural Rights [3], International Conference on Population and Development Programme of Action [4], the International Labour Organization (ILO) Declaration on Fundamental Principles and Rights at Work [5], and the Beijing Declaration and Platform for Action [6].

SRHR encompasses multiple dimensions, including sexual and gender-based violence, antenatal, childbirth and postnatal care, menstrual and menopausal health, family planning and contraceptives, HIV and other sexually transmitted infections (STIs), and reproductive cancers. Achieving universal access to SRHR is an explicit target under the United Nations Sustainable Development Goals (SDGs) for health (SDG 3) and gender equality (SDG 5), and is inextricably linked to the broader SDGs on decent work and economic growth (SDG 8), reduced inequalities (SDG 10) and peace, justice and strong institutions (SDG 16).

SRHR information and services play a crucial role in realizing reproductive justice by safeguarding the right to have a child, the right to choose not to have a child, and the right to parent a child or children in safe and healthy environments. Although the lack of sexual and reproductive health care and literacy often disproportionately affects women, it is important to recognize that SRHR is an intersectional topic that impacts people of all genders and should be championed for all individuals within a workforce. A comprehensive approach must be taken to effectively engage men, women and people of other genders on SRHR, and the workplace provides a unique platform to transform attitudes and practices on SRHR and gender equality and facilitate access to sexual and reproductive health services.

A comprehensive approach must be taken to effectively engage men, women and people of other genders on SRHR.
WHY SHOULD THE PRIVATE SECTOR ADOPT SRHR PRACTICES AND REPORTING?

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A significant gap in addressing SRHR in the workplace

In recent years, companies have acknowledged that they play an important role in creating a sustainable, prosperous, and just future. Many have committed to protecting human rights, achieving gender equality and improving employee well-being within their organizations and supply chains, in accordance with internationally ratified standards set forth by the ILO. The ILO’s Labour Conventions outline the minimum expectations for governments and employers on sexual and reproductive rights in the workplace.¹ For example:

- Similarly, the ILO Maternity Protection Convention [8] requires employers to provide at least 14 weeks of maternity leave and daily breastfeeding breaks to expectant and nursing mothers
- Through its HIV and AIDS Recommendation [9], the ILO also recognizes HIV and AIDS as workplace issues and calls upon employers to facilitate destigmatization, prevention, treatment and care around HIV and other STIs

Companies’ labour rights obligations under the ILO are complemented by pledges to voluntary sustainability frameworks such as the United Nations Guiding Principles on Business and Human Rights, the Ten Principles of the United Nations Global Compact,
and the Women’s Empowerment Principles. Advancing SRHR at the workplace is a key stepping-stone to creating the safe, healthy and equitable workplaces defined within these human rights and sustainability commitments.

However, SRHR at the workplace remain largely overlooked, often existing as small fragments within health care offerings and inclusion and diversity efforts. While many companies have established sexual harassment and parental leave policies, our research reveals a notable absence of workplace provisions to support employees with SRHR related to menstruation, menopause, fertility, breastfeeding, childcare, STIs, reproductive cancers, and domestic violence. Furthermore, existing policies are not always equitable, accessible, and inclusive of different sexual orientations, gender identities, gender expressions, sex characteristics and types of parentage (e.g. adoptive and foster parents), leading to significant gaps in reproductive health care across the workforce.

Women spend 40–60 per cent of their reproductive years at their place of employment [10].

Approximately 190 million women work in global supply chains concentrated in countries with high unmet needs for women’s health services [11].

38 per cent of countries do not provide maternity leave that meets the ILO standard of 14 weeks, and 44 per cent of countries across the world do not guarantee paid employment leaves for both parents after childbirth [12].
The critical role of the private sector

Given that employees spend a significant proportion of their reproductive years at the workplace, decisions that employers make around SRHR have a profound impact on their employees’ long-term health and socioeconomic participation. However, not many companies are currently prioritizing sexual and reproductive health services as part of their well-being offerings to employees. Facilitating access to reproductive health care empowers women to make autonomous decisions about whether and when to have children and share the domestic burden they often disproportionately bear. This in turn enables them to participate fully in the workforce, fostering gender equality and diversity in the workplace and in society at large. Improving SRHR is therefore part of companies’ broader corporate social responsibilities towards their employees, supply chain workers, customers, local communities and other stakeholders. Particularly in regions where government laws and regulations pertaining to SRHR fall short of the minimum standards outlined in internationally recognized labour frameworks, there is an impetus for companies to proactively contribute to upholding the sexual and reproductive rights of their workforce. Whether it is ensuring time off to receive essential sexual and reproductive health care, or subsidizing treatments through insurance coverage or on-site health clinics, companies play a critical and complementary role to governments and civil society in addressing the diverse sexual and reproductive needs of the workforce.

The business case for adopting SRHR practices

Investing in SRHR not only has a significant positive impact on employees’ lives, but also enriches the bottom lines of businesses by enhancing women’s participation and advancement in the workforce. Research from different manufacturing sectors has shown that investing in SRHR services and information in the workplace can yield up to a 22 per cent increase in productivity, a 62 per cent reduction in absenteeism, and a 23 per cent reduction in staff turnover. More comprehensive research will help to fully demonstrate the links between SRHR provision in the workplace and improved business metrics. The key business benefits of investing in SRHR include:

- **Increased productivity and reduction in absenteeism and staff turnover**: SRHR programmes contribute to employees’ overall physical, mental and financial health and well-being, allowing them to focus and perform better at work. Flexible working arrangements for new parents or those experiencing menstrual symptoms, as well as early treatment of reproductive health issues, also reduce absenteeism and extended leave from work.

- **Improved talent attraction and retention**: women with access to contraception and adequate childcare are more likely to pursue full-time employment and invest in their career advancement [13]. Almost a quarter of women have considered quitting due to the impact of menopause or menstrual symptoms at work, and more than 1 in 10 are actively planning to quit [14]. Supporting employees’ SRHR needs fosters a competitive talent pipeline and boosts employee retention, especially among women and young workers.

- **Improved employee engagement**: providing comprehensive SRHR benefits reflects a commitment to employees’ well-being, making them feel valued at work and boosting their morale and motivation.
• **Enhanced brand value:** supporting SRHR is a crucial way to achieve workforce diversity and inclusivity, and positions companies as socially responsible entities. This enhances their reputation with consumers and other stakeholders who are increasingly demanding corporate action on social sustainability issues.

• **Reduced legal, reputational and operational risks:** SRHR initiatives support compliance with labour laws and regulations and reduce the likelihood of associated legal and reputational challenges. Decreased absenteeism and turnover also contribute to overall operational stability and business resilience.

**Investing in SRHR can yield up to a**

- 22% increase in productivity
- 62% reduction in absenteeism
- 23% reduction in staff turnover [16]
Moreover, many SRHR initiatives can be delivered through low-cost investments that are inexpensive in relation to a company’s overall health-care costs. The cost of meeting all women’s needs for contraceptive, maternal and newborn care is estimated to be on average $9 per capita annually in developing regions [1], and none of the companies in the United States surveyed in a recent report by Rhia Ventures [13] named cost as a limiting factor for reproductive health care. On the other hand, unmet SRHR needs can create sizable long-term costs for companies. For example, victims of workplace sexual harassment are six times more likely to change jobs and their employers can incur costs of more than $22,500 per person in lost productivity [17]. In the United States, studies show that inadequate childcare costs $13 billion in lost productivity for employers and $37 billion in lost wages for working parents each year [18].

Addressing gaps in sexual and reproductive health services is not only essential to unlocking the full potential of individuals at work, but it also represents a compelling business imperative that will yield enormous benefits for employees and employers alike. Addressing the health gap women face could boost the global economy by adding at least $1 trillion to the global economy by 2040, equating to a 1.7 per cent increase in the average per capita gross domestic product (GDP) generated by women [15]. Given the significant positive impacts that SRHR investments have on business performance, as well as on gender equality and economic development at a societal level, it is clear that SRHR is a material topic that must be addressed in the broader framework of social sustainability.

**CASE STUDY 01**

**Ferring Pharmaceuticals**

Ferring Pharmaceuticals is committed to advocating for everyone’s right to build a family and has introduced a comprehensive and generous family building benefits package for its employees globally. This includes a minimum of 26 weeks of equal paid parental leave for both birthing and non-birthing parents, as well as paid time off and unlimited financial support to access fertility treatments, surrogacy programs, adoption, egg freezing, counselling and related services in partnership with external healthcare providers Carrot and Progyny. The Building Families at Ferring program also positively impacts the broader organization by actively encouraging the roles of colleagues on leave to be covered internally. As well as offering opportunities for career development and skill acquisition, this reduces the cost impact of cover and enhances internal mobility. For more information, please see here.

“By investing in the advancement of our employees’ sexual and reproductive health and rights, we’ve fostered a culture of inclusivity and empowerment. This not only promotes a healthier and happier workforce but also generates positive societal impact.”

*Per Falk*, President, Ferring Pharmaceuticals.
HOW SHOULD COMPANIES ADDRESS SRHR?

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Adopting SRHR practices is a journey

There is no one-size-fits-all approach to addressing SRHR in the workplace. The sexual and reproductive health needs of employees and what a business should do to support them vary significantly based on the demography of its workforce, the industry and regions in which it operates, and the associated political and legal landscape.

UNFPA recognizes that businesses are at different starting points and face unique challenges and opportunities in their SRHR journey. Some companies may already have robust programmes in place, while most are just beginning their journey to improve the SRHR of their workforce. Regardless of where businesses stand, UNFPA calls on them to take a positive step towards advancing SRHR in their workplace, focusing first on the most important areas for their employees and business, then scaling their efforts across their organization and supply chain over time.

The following sections provide a blueprint for assessing and understanding where companies stand across the key SRHR areas relevant for the workforce, as well as the ways in which they can take action and deliver tangible impact. UNFPA encourages businesses to adapt them for their own contexts and share their progress through their annual ESG reporting.

Six SRHR focus areas where companies can make an impact

There are six key areas to consider as businesses aim to advance SRHR for their workforce and suppliers (see figure I).
Figure I. Six key areas to consider to advance SRHR

1. **Detection and prevention of sexual and gender-based violence:** reducing sexual and gender-based harassment and violence, at the workplace and at home.

2. **Antenatal, childbirth and postnatal care and family-friendly workplaces:** supporting employees to fulfill their career and family aspirations, across different parentage options and family structures.

3. **Prevention and treatment of HIV and AIDS and other STIs:** reducing transmission of HIV and other STIs, especially within high-prevalence regions through facilitating access to testing and treatment.

4. **Counselling and services for women’s reproductive, menstrual and menopausal health:** can include supporting women through menstruation, menopause and reproductive disorders (e.g. endometriosis, polycystic ovary syndrome [PCOS]) and providing comprehensive abortion care, to the full extent of the law.

5. **Counselling and services for modern contraceptives and comprehensive family planning:** enabling access to contraceptives, fertility treatments and family planning services.

6. **Detection, prevention and management of reproductive cancers:** supporting workers with reproductive cancers, such as ovarian, cervical, testicular and prostate cancers.
## Three key levers for action

Within each focus area, businesses can improve SRHR for their workforce through three key levers: enacting policies to address the SRHR needs of workers, raising awareness of available resources, and enabling access to sexual and reproductive health care. Assessing their efforts through these three lenses can help determine their current maturity and potential areas for further improvement (see table 1).

### Table I. Three key levers for action

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<tr>
<th>POLICIES</th>
<th>AWARENESS</th>
<th>ACCESS</th>
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<tr>
<td>Creating and enforcing company policies that protect sexual and reproductive rights, and promote sexual and reproductive health and the well-being of workers.</td>
<td>Raising awareness among workers of SRHR and the company- and government-offered resources, benefits and services available to them.</td>
<td>Providing access to affordable, high-quality and confidential counselling and services on SRHR.</td>
</tr>
<tr>
<td>For example, via stand-alone policies on SRHR, or embedded within policies on human rights, health care provision, occupational health and safety, flexible working, and sick leave.</td>
<td>For example, via internal newsletters, employee resource groups, trainings (delivered internally or with external partners), employee handbooks, educational pamphlets, and onboarding sessions for newly hired employees.</td>
<td>For example, via provision of paid time off, on-site facilities (e.g. workplace clinics, breastfeeding rooms) and broader health services (e.g. via referrals and insurance coverage for external health care providers).</td>
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Research shows that while many companies have implemented policies on parental leave and sexual harassment, other SRHR-related policies are rare. Additionally, many companies provide general medical coverage, but access to SRHR-specific care is very limited. However, there have been notable advancements from leading companies such as Marks & Spencer, De Beers and Drive Agency, which provide generous paid time off and financial support to their employees across a range of SRHR focus areas (see case studies 1–4).
CASE STUDY 02
Marks & Spencer

With 70 per cent of Marks & Spencer (M&S) employees experiencing menopause in their lifetime, M&S is actively working to break down stigma and provide support. Initiatives include menopause trainings for managers (in partnership with external experts Henpicked), a menopause Hub with useful tools and resources, a menopause absence code for those experiencing symptoms, and a menopause network with 2000+ members to share advice and experiences. Additionally, more than 61,000 pieces of breathable ‘menopause-friendly’ uniforms have been ordered by colleagues since launch. In recognition of its efforts, Marks & Spencer has been accredited as a ‘Menopause Friendly Employer’ by Menopause Friendly. For more information, please see here.

CASE STUDY 03
De Beers Group

To tackle HIV amongst its employees and the communities in which they operate (South Africa, Namibia, and Botswana), De Beers launched a first-of-its-kind HIV Disease Management Program in 2001, which offered free testing and free anti-retroviral treatment for its employees and their families. Having achieved its 90-90-90 goals, it has set new 95-95-95 ambitions for 2030: 95 per cent of employees to be aware of their status, 95 per cent of HIV-positive individuals to be on a life-saving antiretroviral treatment, and 95 per cent of those on antiretroviral treatment to be achieving viral suppression. Over the past 20 years, the program has saved an estimated 650+ lives and prevented 100+ babies from being born HIV-positive. For more information, please see here.

CASE STUDY 04
Drive Agency

Drive Agency is a social enterprise that puts employee health and wellbeing at the heart of everything it does. It offers employees 6 months fully-paid parental leave to both parents (including adoptive parents), unlimited sick and personal leave, and insurance coverage for reproductive healthcare including In Vitro Fertilization (IVF). This has led to significant benefits, including zero turnover in three years, increased employee engagement, and improved talent attraction.

“Even as a small start-up, it is possible to invest in the sexual and reproductive health of employees. Our focus on employee wellbeing has meant that our people are more motivated and work harder. It has allowed us to win work with clients over and over again.”

Jessy Tolkan, CEO, Drive Agency
What gets measured, gets prioritized

As companies start to implement SRHR initiatives through policies, awareness, and access, it is critical that they measure and track their progress by adopting appropriate indicators and metrics. This will allow them to understand the impact and effectiveness of their initiatives and make continuous improvements along their SRHR journey. Given the clear link between SRHR and other material social sustainability topics like human rights, labour practices, employee health and safety, women’s empowerment, and diversity and inclusion, UNFPA strongly encourages companies to publicly report on their SRHR efforts as part of their annual ESG reporting. This will not only showcase the positive impact they are making on their employees and business, but also highlight how a focus on SRHR advances their commitments to social sustainability and inclusivity, thereby accelerating action and accountability on reproductive justice across the private sector.

UNFPA strongly encourages companies to publicly report on their SRHR efforts as part of their annual ESG reporting.
SRHR INDICATORS AND METRICS

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Objectives and scope of indicators and metrics

Recognizing that there is a lack of standardized SRHR metrics in current ESG frameworks, this paper defines a list of SRHR indicators and metrics that provide a starting point for companies to measure and report on their SRHR progress. The list was drafted based on research on existing SRHR and ESG metrics in sustainability reporting standards, international labour standards and private sector sustainability reports. The indicators and metrics were then reviewed and refined through interviews, organizational feedback, and working sessions with businesses, ESG standard-setting bodies and NGOs. A summary methodology can be found in annex II.

The indicators and metrics can be used by companies of all sizes, across different sectors, regions and levels of maturity. They relate to a company’s direct employees (full-time and part-time) and direct (tier 1) suppliers.

The proposed indicators and metrics are not designed to be a rigid set of requirements for comprehensive reporting, but rather a blueprint for what companies can start to report on, based on their current maturity and SRHR priorities. Businesses are encouraged to select the most relevant SRHR focus areas, indicators and metrics for their organizations to start reporting on, then expand this as they scale their SRHR efforts over time.

UNFPA expects these indicators and metrics to evolve over time as it works to embed SRHR into ESG frameworks. It looks forward to learning from companies’ experiences implementing these indicators and metrics, collaborating with them to build upon this initial guidance, and collectively strengthening SRHR reporting across the private sector in the future.

The indicators and metrics can be used by companies of all sizes, across different sectors, regions and levels of maturity.
Overview of SRHR indicators and metrics

The proposed indicators and metrics are split into two categories (see figure II):

1. **SRHR focus area-specific**: indicators and metrics relating to each of the six SRHR focus areas, centred around the three action levers of policies, awareness and access

2. **Overall**: overarching indicators on SRHR, relating to a) the integration of SRHR into the company’s day-to-day operations and b) supplier-related SRHR initiatives, focused on direct (tier 1) suppliers

<table>
<thead>
<tr>
<th>SRHR FOCUS AREAS</th>
<th>List of material SRHR topics for the company.</th>
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<tr>
<td>INDICATORS</td>
<td>High-level overview of focus area-related policies, awareness initiatives, and counselling and services.</td>
</tr>
<tr>
<td>METRICS</td>
<td>Qualitative or quantitative descriptions highlighting actions and progress from focus area-related policies, awareness initiatives, and counselling and services.</td>
</tr>
<tr>
<td>OVERARCHING SRHR INDICATORS AND METRICS</td>
<td>Overarching indicators and qualitative metrics on the integration of SRHR into day-to-day operations.</td>
</tr>
<tr>
<td>SUPPLIER-RELATED INDICATORS AND METRICS</td>
<td>Supplier-specific indicators &amp; qualitative metrics relating to tier 1 suppliers.</td>
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</tbody>
</table>
List of SRHR indicators and metrics

The potential indicators and metrics that businesses can adopt to report on their SRHR progress can be found in annex II. An example of the indicators and metrics for antenatal, childbirth and postnatal care is provided in figure III.

The next chapter will provide practical guidance to companies on how to identify their SRHR priorities and initiatives and start reporting on the relevant SRHR indicators and metrics.

The proposed indicators and metrics are not designed to be a rigid set of requirements for comprehensive reporting, but rather a blueprint for what companies can start to report on, based on their current maturity and SRHR priorities.

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Figure III. Example of indicators and metrics for antenatal, childbirth and postnatal care and family-friendly workplace

ANTENATAL, CHILDBIRTH AND POSTNATAL CARE AND FAMILY-FRIENDLY WORKPLACE

POLICIES
Does your company have policies on family-related benefits?
• If yes, please indicate the topics covered within the policies, including: antenatal care, childbirth care, postnatal care.

AWARENESS
Does your company conduct awareness initiatives to communicate the policies, available facilities, and available services on antenatal, childbirth and postnatal care?
• If yes, please indicate the topics covered within the awareness initiatives, including: antenatal care, childbirth care, postnatal care.

ACCESS
Does your company offer counselling and services on antenatal care, childbirth care, postnatal care?
• If yes, please indicate the topics covered within counselling and services, including: antenatal care, childbirth care, postnatal care.

INDICATOR
Do existing Health & Safety policies address impacts specific to pregnant women and nursing mothers?
• If yes, please indicate the topics covered within the policies, including: antenatal care, postnatal care.

QUALITATIVE METRIC
Please describe what the policies on family-related benefits entail (including post-leave return-to-work), including:
• Scope of the family-related leave (maternity, paternity, parental, carers’, adoption, surrogacy, foster, bereavement)
• Eligibility and length of the leave (in days or weeks)
• Paid/ unpaid time-off (if paid, how much is covered by the company)
• Flexible working arrangements
• Reasonable accommodation
• Geographies/ sites in scope
• Scope of employees (and genders) covered by the policy
• Other family-related benefits (if any)

QUALITATIVE METRIC
Per cent of employees entitled to take family-related leave (by gender)

QUALITATIVE METRIC
Per cent of entitled employees who took parental or family-related leave (by gender)

QUALITATIVE METRIC
Return to work and retention rates of employees that took parental leave (by gender)
PRACTICAL STEPS FOR SUCCESSFULLY ADOPTING SRHR PRACTICES

OVERVIEW OF TOOLS  29
KEY ENABLERS FOR SRHR INTEGRATION  32
A NOTE ON INCLUSIVITY AND CONFIDENTIALITY  33
As stated earlier, businesses are at different starting points in their SRHR journeys. Regardless of where companies currently stand, UNFPA encourages them to follow four key steps – assess, design, embed and enhance – to advance SRHR in their workplace. To help them on their journey, this paper provides some high-level guidance and a set of supporting tools they can leverage and adapt to their own business context and needs.

Table III. Steps for adopting SRHR practices

<table>
<thead>
<tr>
<th>STEP</th>
<th>SUGGESTED ACTIONS</th>
<th>USEFUL TOOLS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSESS</strong> Take stock of where the organization currently stands.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Understand current maturity across policies, awareness and access, considering the scope and quality of existing policies and employee benefits</td>
<td>The SRHR Maturity Self-assessment Tool</td>
</tr>
<tr>
<td></td>
<td>• Set ambition levels around the scope and desired impact across policies, awareness and access initiatives for each SRHR focus area</td>
<td>enables companies to understand their current maturity across each focus area and define their future ambition</td>
</tr>
<tr>
<td></td>
<td>• Prioritize SRHR focus areas for adoption across the short-, medium- and long-terms (1–2 years, 3–5 years, 5+ years) by evaluating the SRHR needs of the workforce and the potential impact on the company</td>
<td>The SRHR Focus Area Prioritization Tool</td>
</tr>
<tr>
<td></td>
<td></td>
<td>enables companies to prioritize the six SRHR focus areas and create a plan for adoption of SRHR practices</td>
</tr>
<tr>
<td></td>
<td></td>
<td>The ROI-T: Invest in her Tool enables companies to calculate the expected business benefit associated with investments in SRHR, which supports their prioritization and plans for adopting SRHR practices and reporting</td>
</tr>
<tr>
<td><strong>DESIGN</strong> Plan and activate SRHR initiatives and metrics across three levers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Set measurable goals and objectives based on current maturity and ambition levels</td>
<td>See annexes II, III and IV for examples and key factors to consider as companies design their initiatives and define corresponding metrics</td>
</tr>
<tr>
<td></td>
<td>• Define appropriate SRHR initiatives and metrics to measure progress towards goals</td>
<td></td>
</tr>
<tr>
<td><strong>EMBED</strong> Implement initiatives and disclose progress.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Implement SRHR initiatives and integrate SRHR into ongoing efforts on gender equality and employee well-being</td>
<td>See annexes II and V for potential ways to report on SRHR efforts</td>
</tr>
<tr>
<td></td>
<td>• Report on progress achieved via annual ESG report to share impact and learnings on SRHR action</td>
<td></td>
</tr>
<tr>
<td><strong>ENHANCE</strong> Continuously pursue a higher level of maturity across the six SRHR focus areas.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Evaluate the impact and effectiveness of SRHR initiatives on a regular basis by collecting feedback from employees and analyzing metrics</td>
<td>The ROI-T: Invest in her Tool can also be used to monitor and evaluate the effectiveness of SRHR initiatives</td>
</tr>
<tr>
<td></td>
<td>• Enhance and scale SRHR initiatives across the organization and suppliers over time, for example by expanding the types and coverage of initiatives within an SRHR focus area, or expanding the number of SRHR focus areas addressed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Continuously assess and adapt initiatives based on the evolving SRHR needs of the workforce and stakeholder expectations</td>
<td></td>
</tr>
</tbody>
</table>
Overview of tools

**SRHR Maturity Self-assessment Tool**

The SRHR Maturity Self-assessment Tool (see figure IV) enables companies to understand their current maturity and progress across the levers of policy, awareness and access across each SRHR focus area.

For each focus area, there are 14 qualitative, multiple-choice questions on the existence, scope and impact of current SRHR initiatives. There are also four overarching questions on the level of maturity across key organizational SRHR enablers (organization and people, process and governance, data and technology, and ecosystem and partnerships).

By selecting answers from a drop-down list of three possible options, companies will get a 'heat map' of their current maturity across each SRHR focus area. The heat map shows the level of maturity, from basic to high, across each lever of policy, awareness and access, as well as at an aggregated level for the focus area. This will help companies understand where they are doing well and where there are gaps to be addressed.

For optimal results, the self-assessment questions should be answered with a good understanding of the company’s commitment to the SRHR focus areas and knowledge of current SRHR policies and initiatives for employees. The assessment can also be done with a forward-looking view to understand future ambition levels for each focus area.

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**SRHR MATURITY HEATMAP**

### SRHR ENABLERS AT THE COMPANY LEVEL

<table>
<thead>
<tr>
<th>SRHR enablers in your company</th>
<th>Self-assessed maturity level</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

### SRHR FOCUS AREA AND LEVERS

<table>
<thead>
<tr>
<th>Detection and prevention of sexual and gender-based violence</th>
<th>Overall Focus Area maturity</th>
<th>Policy</th>
<th>Awareness initiatives</th>
<th>Access initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Basic</td>
<td>Basic</td>
<td>Basic</td>
<td>High</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Antenatal, childbirth and postnatal care and family-friendly workplaces</th>
<th>Overall Focus Area maturity</th>
<th>Policy</th>
<th>Awareness initiatives</th>
<th>Access initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>High</td>
<td>High</td>
<td>High</td>
<td>High</td>
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</table>

<table>
<thead>
<tr>
<th>Prevention and treatment of HIV and AIDS and other STIs</th>
<th>Overall Focus Area maturity</th>
<th>Policy</th>
<th>Awareness initiatives</th>
<th>Access initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Basic</td>
<td>Basic</td>
<td>Basic</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Counselling and services for women’s reproductive, menstrual and menopausal health</th>
<th>Overall Focus Area maturity</th>
<th>Policy</th>
<th>Awareness initiatives</th>
<th>Access initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Basic</td>
<td>Basic</td>
<td>Basic</td>
<td>Basic</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Counselling and services for modern contraceptives and comprehensive family planning</th>
<th>Overall Focus Area maturity</th>
<th>Policy</th>
<th>Awareness initiatives</th>
<th>Access initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Moderate</td>
<td>High</td>
<td>Moderate</td>
<td>Basic</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Detection, prevention and management of reproductive cancers</th>
<th>Overall Focus Area maturity</th>
<th>Policy</th>
<th>Awareness initiatives</th>
<th>Access initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Basic</td>
<td>Basic</td>
<td>Basic</td>
<td>Moderate</td>
</tr>
</tbody>
</table>

**Maturity level:**

- Basic
- Moderate
- High
**SRHR Focus Area Prioritization Tool**

The SRHR Focus Area Prioritization Tool (see figure V) helps companies conduct an initial prioritization of the SRHR focus areas by assessing each focus area against two axes: SRHR needs of and impact on the workforce, and impact on the company.

Based on their workforce demography, business context and current maturity, companies will answer seven qualitative, multiple-choice questions for each focus area, covering topics such as scope of workforce the SRHR need applies to, potential risk to the workforce if the need is not served, whether the SRHR need is already addressed by others (e.g. governments), potential benefits to the company, and resources required to address the SRHR focus area.

Based on the answers, the tool will score and prioritize SRHR focus areas on a matrix, with those scoring highly on both axes to be adopted in the short term. Figure V provides an example, with the blue, yellow and white areas indicating SRHR focus areas to be adopted across the short-, medium- and long-terms, respectively.

For optimal results, the self-assessment questions should be answered with a good understanding of the company’s commitment to the SRHR focus areas and knowledge of current SRHR policies and initiatives for employees. Companies are welcome to adapt the scoring to suit their own needs and are strongly encouraged to validate the outputs from the assessment tool with relevant stakeholders (e.g. from human resources, compliance, inclusion and diversity, and sustainability teams) to define a more comprehensive plan.

**Figure V. Example of the SRHR Focus Area Prioritization Tool**

![SRHR Focus Area Prioritization (illustrative example)](image)

1. Detection and prevention of sexual and gender-based violence
2. Antenatal, childbirth and postnatal care and family-friendly workplaces
3. Prevention and treatment of HIV and AIDS and other STIs
4. Counselling and services for women’s reproductive, menstrual and menopausal health
5. Counselling and services for modern contraceptives and family planning
6. Detection, prevention and management of reproductive cancers
Key enablers for SRHR integration

To establish a strong foundation for enhancing reproductive justice within the workforce, it is important to embed SRHR into a company’s day-to-day operations. This can be achieved through considering the following components.

Organization and people
Emphasize SRHR as a key part of employee well-being through regular awareness sessions on the SRHR resources and services available to employees, especially among the management team. Additionally, integrate the delivery of SRHR policies and initiatives into job descriptions and individual performance metrics within relevant functions, such as human resources, inclusion and diversity, occupational health and safety, employee well-being and benefits, compliance, and sustainability, to enable tangible actions on SRHR.

Process and governance
Ensure SRHR is integrated into the company’s core values and goals by securing leadership buy-in and commitment ‘from the top’. Define a clear governance and delineation of responsibilities for each SRHR focus area, such that SRHR considerations are systematically woven into various functions within the business. Finally, set up confidential reporting mechanisms for employees to raise concerns and share feedback on SRHR initiatives, fostering a culture of openness and continuous improvement on SRHR.

Data and technology
Integrate SRHR data collection and analysis into existing processes (e.g. employee engagement surveys and new-hire onboarding) and reporting systems, ensuring sensitive data is anonymized and protected. To go a step further, companies should disaggregate data by dimensions such as gender, organizational hierarchy, race and region, to understand the specific needs of their workforce and deploy targeted actions.

Ecosystem and partnerships
Collaborate with unions, external health care providers, local governments and NGOs to provide sexual and reproductive information and health care to the workforce. Incentivize suppliers to advance SRHR through supplier-related policies, procurement processes and supply chain sustainability programmes. Finally, catalyze collective actions on SRHR by engaging peers and the value chain through industry platforms that allow participants to share successes and lessons learned.
A note on inclusivity and confidentiality

Given the highly personal and sensitive nature of sexual and reproductive health, care must be taken to safeguard the privacy of employees while actively acknowledging and accommodating their diverse SRHR needs.

As businesses design and implement their SRHR initiatives, they should reflect on the following questions to ensure they are as inclusive and respectful of their workforce as possible.

**INCLUSIVITY**

- Do existing inclusion and diversity policies prevent bias and discrimination against those of reproductive age, pregnant women, parents, carers and people who are actually or perceived to be affected by HIV or AIDS?

- Are SRHR-related policies and resources available in accessible languages and formats, for example, in the local language and accessible to people with disabilities and neurodiverse needs?

- How might SRHR initiatives be tailored for different sexes, genders, races, sexual orientations and expression, religions, family structures, means of reproduction (e.g. adoption, surrogacy, fostering), cultures, and people with disabilities?

**DATA PRIVACY AND CONFIDENTIALITY**

- Is workforce SRHR data collected anonymously, with the informed and explicit consent of employees, and in line with a human rights-based approach?

- Are the tools used to collect, process and store SRHR data secure?

- Are there guardrails in place to ensure that the company cannot access private data from health care providers and use SRHR data against employees?
EMBARK ON AN SRHR TRANSFORMATION NOW
It is clear that investing in SRHR can bring bountiful benefits. As employers of millions of people globally, the private sector holds the power to make a transformative difference in the lives of its employees and their families through prioritizing sexual and reproductive health. UNFPA calls upon businesses to:

- COMMIT TO ADVANCING SRHR FOR THEIR WORKFORCE
- MEASURE AND REPORT ON THEIR PROGRESS THROUGH THEIR ANNUAL ESG REPORTING
- ENGAGE WITH THE COALITION FOR REPRODUCTIVE JUSTICE IN BUSINESS TO ADVANCE SRHR IN THE PRIVATE SECTOR

Together, let us create workplaces that uphold, empower and champion the rights and well-being of every employee and build an equitable and prosperous world.
### Annex I

**Glossary**

<table>
<thead>
<tr>
<th>TERM</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antenatal, childbirth and postnatal care</td>
<td>Includes measures to support the physical and mental health of the mother and baby during pregnancy, labour, birth and postpartum. This includes nutrition, antenatal screenings, safe and varied options for delivery, and baby feeding</td>
</tr>
<tr>
<td>Benefit</td>
<td>Direct benefits in the form of care or financial contributions, or indirect benefits consisting of a reimbursement of the expenses borne by the person concerned</td>
</tr>
<tr>
<td>Comprehensive abortion care</td>
<td>Includes the provision of information, abortion management and post-abortion care. It encompasses care related to miscarriage (spontaneous abortion and missed abortion), induced abortion (the deliberate interruption of an ongoing pregnancy by medical or surgical means), incomplete abortion as well as fetal death (intrauterine fetal demise)</td>
</tr>
<tr>
<td>Comprehensive family planning</td>
<td>A holistic approach to family planning and formation. It encompasses family planning services, a variety of contraceptive methods, fertility treatments, adoption, fostering and surrogacy</td>
</tr>
<tr>
<td>Domestic violence</td>
<td>Violence that occurs within the private, domestic sphere, generally between individuals who are related through blood or intimacy. It includes intimate partner violence, which is violence that occurs between people in sexual or romantic relationships. Both men and women can be perpetrators or victims of domestic violence.</td>
</tr>
<tr>
<td>Employee</td>
<td>An individual who is in an employment relationship with the organization, according to national law or its application. For the purposes of the indicators and metrics proposed in this paper, employees refers to direct full-time and part-time employees, and excludes temporary employees, non-guaranteed hours employees, interns, apprentices, contractors and subcontractors.</td>
</tr>
<tr>
<td>Facility</td>
<td>The physical environment or infrastructure provided by an organization to support its employees in carrying out their job responsibilities. This can include office buildings, workspaces, amenities and equipment necessary for the effective functioning of the workforce.</td>
</tr>
<tr>
<td>Family-friendly workplaces</td>
<td>Workplaces which support employees in balancing and achieving work and family aspirations, and typically provide three types of essential resources needed by parents and caregivers of young children: time, finances and services. Examples include flexible working policies and shared parental leave.</td>
</tr>
<tr>
<td>Family-related leave</td>
<td>Includes Maternity leave: employment-protected leave of absence for employed women directly around the time of childbirth (or, in some countries, adoption and surrogacy) Paternity leave: leave from work for fathers or, where and insofar as recognized by national law, for equivalent second parents, on the occasion of the birth of a child for the purposes of providing care Parental leave: leave from work for parents on the grounds of the birth, adoption or fostering of a child to take care of that child Carers’ leave: leave for workers to provide personal care or support to a relative, or a person who lives in the same household, in need of significant care or support for a serious medical reason Bereavement leave: leave from work for parents in the event of a miscarriage</td>
</tr>
<tr>
<td>Women’s reproductive, menstrual and menopausal health</td>
<td>Refers to the overall health of the female reproductive system, including aspects related to the menstrual cycle. It includes menstruation and period-related symptoms, menstrual hygiene, perimenopause, menopause and post menopause, and other reproductive conditions such as PCOS, endometriosis and fibroids.</td>
</tr>
<tr>
<td>Gender-based violence</td>
<td>An umbrella term for any harmful act that is perpetrated against a person’s will and that is based on sexual orientation, gender identity, gender expression or sex characteristics. It includes sexual violence (rape, sexual assault, sexual harassment), physical violence (hitting, slapping, beating), emotional violence (psychological and verbal abuse), economic violence (restriction of movement, denial of resources), and harmful traditional practices (child marriage, female genital mutilation, ‘honor’ killings).</td>
</tr>
<tr>
<td>TERM</td>
<td>DESCRIPTION</td>
</tr>
<tr>
<td>-----------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>High-prevalence regions of HIV and AIDS</td>
<td>Please refer to the World Health Organization for data on prevalence of HIV across different countries (<a href="http://www.who.int/data/gho/data/themes/hiv-aids/data-on-the-size-of-the-hiv-aids-epidemic">www.who.int/data/gho/data/themes/hiv-aids/data-on-the-size-of-the-hiv-aids-epidemic</a>)</td>
</tr>
<tr>
<td>Modern contraceptives</td>
<td>Includes oral contraceptive pills, implants, injectables, contraceptive patches, vaginal rings, intrauterine devices (IUD), male and female condoms, male and female sterilization, vaginal barrier methods (including the diaphragm, cervical cap and spermicidal agents), lactational amenorrhea methods, withdrawal and fertility awareness-based methods</td>
</tr>
<tr>
<td>Reasonable accommodation</td>
<td>Any modification or adjustment to a job or to the workplace that is reasonably practicable and enables employees to have access to or participate or advance in employment</td>
</tr>
<tr>
<td>Reproductive cancers</td>
<td>Cancers of the reproductive system, including cervical, ovarian, uterine, vaginal, vulvar, breast, prostate, testicular and penile cancers</td>
</tr>
<tr>
<td>Reproductive justice</td>
<td>The three core values of reproductive justice are the right to have a child, the right to not have a child, and the right to parent a child or children in safe and healthy environments</td>
</tr>
<tr>
<td>Scope of employees covered by policies/awareness initiatives/ counselling and services</td>
<td>The employee gender(s), age ranges, management levels, geographies and/or sites of employment for which the initiative applies</td>
</tr>
<tr>
<td>Sexual and reproductive health</td>
<td>Physical, emotional, mental and social well-being in relation to all aspects of sexuality and reproduction. It goes beyond reducing disease and dysfunction, emphasizing a positive and respectful approach to sexual experiences and reproduction.</td>
</tr>
<tr>
<td>Sexual and reproductive rights</td>
<td>The rights of individuals to make decisions governing their bodies and to access information and services for sexual and reproductive health, without discrimination, coercion, or violence</td>
</tr>
<tr>
<td>Sexual violence</td>
<td>Any sort of harmful or unwanted sexual behaviour that is imposed on someone, including acts of abusive sexual contact, forced engagement in sexual acts, attempted or completed sexual acts without consent, sexual harassment, verbal abuse, threats, exposure, unwanted touching, incest and others</td>
</tr>
<tr>
<td>Sexually transmitted infections (STIs)</td>
<td>Infections that are spread predominantly by unprotected sexual contact, although some can also be transmitted during pregnancy, childbirth, breastfeeding and through infected blood. Common STIs include trichomoniasis, chlamydia, gonorrhea, syphilis, human immunodeficiency virus (HIV), viral hepatitis B, human papillomavirus (HPV) and human T-lymphotropic virus type 1 (HTLV-1). STIs can impact fertility and maternal and newborn health outcomes.</td>
</tr>
<tr>
<td>Site</td>
<td>Physical locations and facilities where business operations and activities are conducted. This includes corporate offices (headquarters and satellite offices), retail sites and production facilities.</td>
</tr>
<tr>
<td>WASH</td>
<td>Water, sanitation and hygiene</td>
</tr>
<tr>
<td>Workforce</td>
<td>People who perform work in the organization, including, but not limited to, employees</td>
</tr>
<tr>
<td>Workplace</td>
<td>All places where workers need to be or to go by reason of their work and which are under the direct or indirect control of the employer</td>
</tr>
</tbody>
</table>
### Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS</td>
<td>Acquired immunodeficiency syndrome</td>
</tr>
<tr>
<td>ARVs</td>
<td>Antiretroviral drugs</td>
</tr>
<tr>
<td>CSR</td>
<td>Corporate social responsibility</td>
</tr>
<tr>
<td>GBV</td>
<td>Gender-based violence</td>
</tr>
<tr>
<td>HIV</td>
<td>Human immunodeficiency virus</td>
</tr>
<tr>
<td>HPV</td>
<td>Human papillomavirus</td>
</tr>
<tr>
<td>ESG</td>
<td>Environmental, social and governance</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Organization</td>
</tr>
<tr>
<td>IUI</td>
<td>Intrauterine insemination (also called in vivo fertilization)</td>
</tr>
<tr>
<td>IVF</td>
<td>In vitro fertilization</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
</tr>
<tr>
<td>PCOS</td>
<td>Polycystic ovary syndrome</td>
</tr>
<tr>
<td>PMDD</td>
<td>Premenstrual dysphoric disorder</td>
</tr>
<tr>
<td>PMS</td>
<td>Premenstrual syndrome</td>
</tr>
<tr>
<td>PPE</td>
<td>Personal protective equipment</td>
</tr>
<tr>
<td>SDGs</td>
<td>Sustainable Development Goals</td>
</tr>
<tr>
<td>SRHR</td>
<td>Sexual and reproductive health and rights</td>
</tr>
<tr>
<td>STI(s)</td>
<td>Sexually transmitted infection(s)</td>
</tr>
<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
</tr>
</tbody>
</table>
ANNEX II

SRHR indicators and metrics

The list of indicators and metrics were developed following the process below:

- Primary and secondary research on existing sexual and reproductive health and rights (SRHR) initiatives, indicators and metrics in sustainability reports of seven representative companies, ESG reporting standards, ILO labour standards, voluntary sustainability and human rights frameworks, and public sector reports on SRHR
- Development of overarching SRHR framework (SRHR focus areas relevant for the workplace, levers for action, indicators and metrics) and validation via 16 one-to-one interviews with subject-matter experts
- Prioritization of SRHR indicators and metrics, considering feasibility of adoption and value of indicator/metric
- Feedback collection and refinement of indicators and metrics through a survey and a collaborative working session with 15 participants from both the private and public sectors
### SRHR focus area

**DETECTION AND PREVENTION OF SEXUAL AND GENDER-BASED VIOLENCE**

#### POLICIES

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Qualitative metric</th>
<th>Quantitative metric</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does your company have policies: • against sexual and gender-based harassment and violence in the workplace? • supporting victims of domestic sexual and gender-based harassment and violence?</td>
<td>Please describe what the policies entail, including: Measures to prevent and combat sexual and gender-based harassment • Safe, fair and effective channels for reporting sexual and gender-based harassment incidents • Remediation process to address sexual and gender-based harassment incidents • Access to remedies and support for victims of workplace and/or domestic violence • Provision for sanctions • Protection against retaliation • Scope of employees (and genders) covered by the policies • Company geographies/sites in scope</td>
<td>Percentage of employees covered by policies against sexual and gender-based harassment and violence Percentage of remediated workplace sexual harassment incidents</td>
</tr>
<tr>
<td>If yes, please indicate the topics covered within the policies, including: sexual and gender-based harassment and violence at the workplace; domestic sexual and gender-based harassment and violence.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### AWARENESS

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Qualitative metric</th>
<th>Quantitative metric</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does your company offer training(s) on sexual and gender-based harassment and violence?</td>
<td>Please describe the type(s) of training, its frequency, format(s) and scope of the employees covered by the training(s)</td>
<td>Percentage of employees who completed training(s) on sexual and gender-based violence and harassment</td>
</tr>
<tr>
<td>Does your company conduct awareness initiatives to communicate the policies and services offered by the company for people who experience sexual and gender-based violence at work or in the domestic setting?</td>
<td>Please, describe awareness initiatives to communicate the policies and services offered by the company for people who experience sexual and gender-based violence at work or who experience domestic violence, including: type(s) of awareness initiatives, frequency, format(s), scope of the employees covered (e.g. company geography, offices/subsidiaries), and topics covered by each awareness initiative.</td>
<td></td>
</tr>
<tr>
<td>If yes, please indicate the topics covered within the trainings and awareness initiatives, including: sexual and gender-based harassment and violence at work; domestic sexual and gender-based harassment and violence.</td>
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#### ACCESS

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<tr>
<th>Indicator</th>
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<tbody>
<tr>
<td>Does your company offer counselling and services for victims of sexual and gender-based harassment and violence at the workplace?</td>
<td>Please describe the types of counselling and services offered by your company for the victims of domestic violence, the scope of employees covered, the delivery method (e.g. via health insurance/external providers), and outcomes achieved (if any).</td>
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</tr>
<tr>
<td>Does your company offer counselling and services for victims of domestic sexual and gender-based harassment and violence?</td>
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<tr>
<td>If yes, please indicate the topics covered within counselling and services, including: sexual and gender-based harassment and violence at the workplace; domestic sexual and gender-based harassment and violence.</td>
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### Policies

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<tbody>
<tr>
<td>Does your company have policies on family-related benefits?</td>
<td>Please describe what the family-related benefits entail (including post-leave return to work), including: - Scope of the family-related leave (i.e. maternity, paternity, parental, carers, adoption, surrogacy, foster, bereavement) - Eligibility and length of the leave (in days or weeks) - Paid/unpaid time off (if paid, how much is covered by the company) - Flexible working arrangements - Reasonable accommodation - Company geographies/sites in scope - Scope of employees (and genders) covered by the policy - Other family-related benefits (if any)</td>
<td>Percentage of employees entitled to take family-related leave (by gender)</td>
</tr>
<tr>
<td>Do existing health and safety policies address impacts specific to pregnant women and nursing mothers?</td>
<td></td>
<td>Percentage of entitled employees who took parental or family-related leave (by gender)</td>
</tr>
<tr>
<td>Does your company conduct awareness initiatives to communicate the policies and available facilities and services for antenatal, childbirth and postnatal care and family-friendly workplaces?</td>
<td>Please describe the awareness initiatives related to the policies and available facilities and services for antenatal, childbirth and postnatal care and family-friendly workplaces, including the type(s) of awareness initiative(s), frequency, the scope of employees, and topics covered by each awareness initiative.</td>
<td>Return to work and retention rates of employees who took parental leave (by gender)</td>
</tr>
</tbody>
</table>

### Awareness

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<tbody>
<tr>
<td>Does your company offer counselling and services for antenatal, childbirth and postnatal care and family-friendly workplaces?</td>
<td>Please describe the types of counselling and services offered by your company for antenatal, childbirth and postnatal care and family-friendly workplaces, the scope of employees covered, delivery method (e.g. via health insurance/external providers), and outcomes achieved (if any).</td>
<td></td>
</tr>
<tr>
<td>Does your company offer facilities for antenatal and postnatal care and family-friendly workplaces?</td>
<td>Please describe the types of facilities offered by the company for antenatal and postnatal care and family-friendly workplaces and the company geographies/sites in scope.</td>
<td></td>
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### Access

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<td>Please describe the types of counselling and services offered by your company for antenatal, childbirth and postnatal care and family-friendly workplaces, the scope of employees covered, delivery method (e.g. via health insurance/external providers), and outcomes achieved (if any).</td>
<td></td>
</tr>
<tr>
<td>Does your company offer facilities for antenatal and postnatal care and family-friendly workplaces?</td>
<td>Please describe the types of facilities offered by the company for antenatal and postnatal care and family-friendly workplaces and the company geographies/sites in scope.</td>
<td></td>
</tr>
<tr>
<td>Does your company conduct awareness initiatives to communicate the policies and available facilities and services for antenatal, childbirth and postnatal care and family-friendly workplaces?</td>
<td>Please describe the awareness initiatives related to the policies and available facilities and services for antenatal, childbirth and postnatal care and family-friendly workplaces, including the type(s) of awareness initiative(s), frequency, the scope of employees, and topics covered by each awareness initiative.</td>
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</table>
## Policies

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<th>Indicator</th>
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</table>
| Does your company have policies aimed at the prevention and treatment of HIV and AIDS and other STIs for employees? If yes, please indicate the topics covered within the policies, including: HIV, AIDS and other STIs (please specify; other STIs may include herpes, gonorrhea, syphilis, chlamydia, human papillomavirus (HPV), hepatitis B). Do your inclusion and diversity and recruitment policies explicitly address the elimination of discrimination based on actual or perceived HIV status? | Please describe what the policies entail, including:  
- Company geographies/sites in scope  
- Employees (and genders) covered by the policy  
- Eligibility and length of treatment and recovery-related leave  
- Reasonable accommodation provided by the company  
- Measures to protect data confidentiality related to HIV testing, treatment and other data points  
- Inclusion of other STIs (other than HIV and AIDS) in the scope of employee health | Percentage of employees covered by policies aimed at the prevention and treatment of HIV and AIDS and other STIs |

## Awareness

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<tbody>
<tr>
<td>Does your company offer trainings to raise awareness of prevention and treatment of HIV and AIDS in high-prevalence regions? If yes, please indicate the topics covered within awareness initiatives, including: HIV, AIDS and other STIs (please specify)</td>
<td>Please describe the type(s) of training on HIV and AIDS, its frequency, format(s), scope of the employees covered by the training(s) (e.g. high-prevalence regions, company offices/subsidiaries) and the content.</td>
<td>Percentage of employees in high-prevalence regions who completed training(s) on the prevention and treatment of HIV and AIDS</td>
</tr>
<tr>
<td>Does your company conduct awareness initiatives to communicate the policies and available services offered by the company for the prevention and treatment of HIV, AIDS or other STIs? If yes, please indicate the topics covered in awareness initiatives, including HIV, AIDS and other STIs (please specify)</td>
<td>Please describe the awareness initiatives related to the policies and available facilities and services for prevention and treatment of HIV, AIDS or other STIs, including the type(s) of awareness initiative(s), frequency, scope of employees, and topics covered by each awareness initiative.</td>
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<tbody>
<tr>
<td>Does your company offer counselling and services for the prevention and treatment of HIV and AIDS for employees at the workplace? Does your company offer counselling and services for the prevention and treatment of STIs other than HIV and AIDS, for employees at the workplace? If yes, please indicate the topics covered in counselling and services, including: HIV, AIDS or other STIs (please specify)</td>
<td>Please describe the types of counselling and services offered by your company for the prevention and treatment of HIV and AIDS, the scope of employees covered, delivery method (e.g. via health insurance/external providers), and outcomes achieved (if any). Please describe the types of counselling and services offered by the company (or via external providers) for prevention and treatment of STIs other than HIV and AIDS, for employees.</td>
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### Policies

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<tr>
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</table>
| Does your company have menstrual health and menopause policies in place? If yes, please indicate the topics covered in the policies, including: menstruation (including premenstrual syndrome [PMS], premenstrual dysphoric disorder [PMDD]), perimenopause and menopause, other reproductive conditions (e.g. polycystic ovary syndrome [PCOS], endometriosis, fibroids) | Please describe what the policies entail, including:  
- Paid/unpaid time off (if paid, how much is covered by the company) (if any)  
- Flexible working arrangements (if any)  
- Company geographies/sites in scope  
- Scope of employees (and genders) covered by the policy | Percentage of entitled employees covered by menstrual health and menopause policies (entitled employees are those who may experience menstruation or menopause) |

| Does your company have policies that support access to comprehensive abortion care? | Please describe what the policies entail, including:  
- Paid/unpaid time off (if any)  
- Flexible working arrangements (if any)  
- Reimbursement of travel expenses (if any)  
- Company geographies/sites in scope  
- Reimbursements for accessing medical abortion medications (through telemedicine, web-based platforms or other)  
- Scope of employees (and genders) covered by the policy | Percentage of entitled employees covered by policies on access to comprehensive abortion care (entitled employees are those who may require abortions, where abortions are permissible to the full extent of the law) |

### Awareness

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<tbody>
<tr>
<td>Does your company conduct awareness initiatives to communicate the policies and facilities and services available for reproductive, menstrual and menopausal health? If yes, please indicate the topics covered in the awareness initiatives, including: menstruation (including PMS, PMDD), perimenopause and menopause, other reproductive conditions (e.g. PCOS, endometriosis, fibroids), comprehensive abortion care.</td>
<td>Please describe the awareness initiatives related to the policies, facilities and services available for reproductive, menstrual and menopausal health, including the type(s) of awareness initiative(s), frequency, scope of employees, and topics covered by each awareness initiative.</td>
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### Access

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<tbody>
<tr>
<td>Does your company offer counselling and services for women’s reproductive and menstrual and menopausal health? If yes, please indicate the topics covered in counselling and services, including: menstruation (including PMS, PMDD), perimenopause and menopause (including to help with menopausal symptoms like hot flushes, fatigue, anxiety and sleep disruption), other reproductive conditions (e.g. PCOS, endometriosis, fibroids), comprehensive abortion care</td>
<td>Please describe the types of counselling and services offered by your company for reproductive, menstrual and menopausal health, the scope of employees covered, delivery method (e.g. via health insurance/external providers), and outcomes achieved (if any).</td>
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### ACCESS

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<tbody>
<tr>
<td>Does your company provide menstrual hygiene facilities at its sites, for example, water, sanitation and hygiene (WASH) facilities such as running water, functional toilets or facilities to dispose of menstrual products?</td>
<td>If yes, please describe the types of menstrual and menopause products provided at your sites and the company geographies/sites in scope.</td>
<td>Percentage of company sites with provision of free menstrual and menopause products (e.g. sanitary pads, tampons, menstrual cups, fans for hot flushes, breathable uniforms)</td>
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</tbody>
</table>

### POLICIES

**SRHR focus area**

**PREVENTION AND TREATMENT OF HIV AND AIDS AND OTHER STIS**

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<tr>
<th>Indicator</th>
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<tbody>
<tr>
<td>Does your company have policies that support family formation? If yes, please indicate the topics covered in the policies, including: fertility diagnosis and treatments, adoption, fostering and surrogacy</td>
<td>Please describe what the policies entail, including: • Paid/unpaid time off (if paid, how much is covered by the company) (if any) • Flexible working arrangements (if any) • Reimbursement of travel expenses (if any) • Company geographies/sites in scope • Scope of employees (and genders) covered by the policy</td>
<td>Percentage of employees covered by policies that support family formation</td>
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### AWARENESS

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<tbody>
<tr>
<td>Does your company conduct awareness initiatives to communicate the policies and available services for modern contraceptives and comprehensive family planning? If yes, please indicate the topics covered: contraceptives, family planning, fertility, adoption, surrogacy, fostering.</td>
<td>Please describe the types of counselling and services offered by your company related to modern contraceptives and comprehensive family planning, the scope of employees covered, delivery method (e.g. via health insurance/external providers), and outcomes achieved (if any).</td>
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</table>
### Policies

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<tr>
<th>Indicator</th>
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</table>
| Does your company have policies aimed at the detection, prevention and treatment of reproductive cancers? If yes, please indicate the topics covered in the policies, including: cervical, ovarian, uterine, vaginal, vulvar, breast, testicular, penile and prostate cancers. | Please describe what the policies entail, including:  
- Scope of time off/leave (for testing, treatment and recovery)  
- Eligibility and length of testing, treatment and recovery-related leave  
- Paid/unpaid time off (if paid, how much is covered by the company)  
- Company geographies/sites in scope  
- Reasonable accommodation provided  
- Scope of employees (and genders) covered by the policy | Percentage of employees covered under policies aimed at the detection, prevention and management of reproductive cancers |

### Awareness

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<tr>
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</thead>
<tbody>
<tr>
<td>Does your company conduct awareness initiatives to communicate the policies and available services offered by the company, in the detection prevention and management of reproductive cancers? If yes, please indicate the topics covered in the awareness initiatives, including: cervical, ovarian, uterine, vaginal, breast, testicular, penile and prostate cancers.</td>
<td>Please describe the awareness initiatives related to the policies and available services for the detection, prevention and management of reproductive cancers, including the type(s) of awareness initiative(s), frequency, employees in scope, and topics covered by each awareness initiative.</td>
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</tbody>
</table>

### Access

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<tr>
<th>Indicator</th>
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<tbody>
<tr>
<td>Does your company offer employees counselling and services for modern contraceptives and comprehensive family planning? If yes, please indicate the topic(s) covered in counselling and services: provision of contraceptives, family planning, fertility diagnosis and treatments, adoption, surrogacy, fostering.</td>
<td>Please describe the types of counselling and services offered by your company related to modern contraceptives and comprehensive family planning, the scope of employees covered, delivery method (e.g. via health insurance/external providers), and outcomes achieved (if any).</td>
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</table>
### OVERARCHING SRHR INDICATORS AND METRICS

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<tr>
<th>Indicator</th>
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<tbody>
<tr>
<td>Is SRHR integrated into the day-to-day operations of your company via the following enablers: process and governance, organization and people, data and technology, ecosystem and partnerships?</td>
<td>If yes, please provide a high-level description of how SRHR is integrated into your company’s day-to-day operations, covering: • Process and governance • Organization and people • Data and technology • Ecosystem and partnerships</td>
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### SUPPLIER-RELATED SRHR INDICATORS AND METRICS

#### POLICIES

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<tbody>
<tr>
<td>Does your company address SRHR focus areas in your supplier code of conduct or other supplier-related policies? If yes, please indicate which SRHR focus areas are covered in the supplier code of conduct or other supplier-related policies.</td>
<td>Please describe what your company’s supplier code of conduct or other supplier-related policies entail in relation to the SRHR focus areas.</td>
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<tbody>
<tr>
<td>Does your company include SRHR criteria/requirements in supplier-related processes? If yes, please indicate which supplier-related processes are covered: supplier selection, contracting, regular supplier assessments, supplier partnerships, supply chain audits, etc.</td>
<td>Please describe the SRHR criteria/requirements used and the corresponding supplier-related process.</td>
<td></td>
</tr>
<tr>
<td>Does your company encourage and enable your suppliers to adopt SRHR at their workplace? If yes, please indicate which measures are leveraged: training, targeted guidance/consultation, knowledge and data sharing, co-developed initiatives, etc.</td>
<td>If your company is encouraging/ enabling your suppliers to adopt SRHR, please describe the types of measures, including: • Description of the measure (trainings, targeted guidance/consultation, knowledge and data sharing, co-developed initiatives, etc.) • Scope of targeted suppliers (e.g. strategic suppliers, operational suppliers) • Company geographies covered • Frequency of the measures taken</td>
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</tbody>
</table>
Example SRHR initiatives

There are many ways in which companies can develop initiatives around the sexual and reproductive health and rights (SRHR) focus areas across the three levers of policies, awareness and access. The table below contains select examples of SRHR policies, awareness and access initiatives to provide an inspiration for potential initiatives companies can adopt. Please also consult annex IV (Design considerations for SRHR initiatives) for factors to consider when designing or enhancing SRHR initiatives.
SRHR focus area
DETECTION AND PREVENTION OF SEXUAL AND GENDER-BASED VIOLENCE

POLICIES

Policies supporting the detection and prevention of sexual and gender-based violence can include:

- Measures for prevention (e.g. zero-tolerance approach, mandatory training)
- Channels for reporting (e.g. third-party whistleblowing platform, anonymous hotlines, with anti-retaliation and whistleblower protections)
- Remediation process (e.g. non-forced arbitration procedures, presence of nominated or elected employee union representatives at various/all organizational levels)
- Support for employees facing domestic violence and intimate partner violence, beyond the workplace

AWARENESS

Trainings initiatives can include:

- Understanding and detecting gender-based violence and sexual harassment
- Impacts of gender-based violence and sexual harassment
- Bystander training on reacting and responding to situations of sexual and gender-based violence

Awareness can be created via the following channels at the workplace:

- Onboarding sessions
- Awareness sessions and workshops
- Newsletters
- Information brochures and pamphlets
- Trainings
- Hoardings
- Employee notice boards
- Town hall meetings
- Employee resource groups

ACCESS

Counselling and services can include provision of:

- 24-7 response hotlines providing emergency support (outsourced)
- Licensed psychological support
- Emergency shelters
- Medical care
- Legal advocates

SRHR focus area
ANTENATAL, CHILDBIRTH AND POSTNATAL CARE AND FAMILY-FRIENDLY WORKPLACES

POLICIES

Policies can include:

- Entitlements for specific paid leave during antenatal and postnatal periods for both parents, regardless of means of reproduction and marital status
- Extend benefits to the non-birthing parent, in specific cases of hospitalization or death of the newborn or mother, during or immediately after childbirth

Policies can also include reasonable accommodation for new parents to re-enter the workforce such as:

- Flexible working hours (e.g. late starts)
- Flexible breaks
- Adjusted work roles where physical exertion is reduced to manageable levels
- Relaxed uniform policy

AWARENESS

Awareness can be created via the following channels at the workplace:

- Awareness sessions and workshops
- Newsletters
- Information brochures and pamphlets
- Trainings
- Hoardings
- Employee notice boards
- Employee resource groups (e.g. family network)

ACCESS

Counselling and services can include referrals to and subsidized provision of:

- Midwives
- Antenatal and postnatal check-ups
- Lactation specialists
- Mental health support, including for postpartum anxiety or depression
- Day care support (childcare centers, nurseries, etc.)
- At-home childcare support

Facilities may include:

- Breastfeeding and lactation rooms, with fridges to store breast milk
- On-site crèches

Health and safety measures may include:

- Ergonomic assessments
- Personal protection equipment
- Restrictions on/adjustments to physical activities
## SRHR focus area
### PREVENTION AND TREATMENT OF HIV, AIDS AND OTHER STIS

<table>
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<tbody>
<tr>
<td>Policies introducing measures of reasonable accommodation in the workplace for persons living with HIV, such as:</td>
<td>Trainings for the prevention and treatment of HIV and AIDS may include:</td>
<td>Counselling and services for the prevention and treatment of HIV, AIDS and other STIs can include:</td>
</tr>
<tr>
<td>• Flexible working hours when suffering from periodic episodes of illness or medication side-effects</td>
<td>• HIV risk factors</td>
<td>• Confidential testing for HIV, AIDS and other STIs, and partner notification (where appropriate)</td>
</tr>
<tr>
<td>• Adjusted work roles where physical exertion is reduced to manageable levels</td>
<td>• HIV transmission methods</td>
<td>• Provision of (male and female) condoms and (personal) lubricants</td>
</tr>
<tr>
<td>• Outsourcing of initiatives to ensure confidentiality of personal data/health data</td>
<td>• Preventing HIV transmission</td>
<td>• Free or subsidized medicines and medical devices to help prevent or treat HIV infections (e.g. antiretroviral drugs, including oral pre- and post-exposure prophylaxis products, dapivirine vaginal rings, injectable long-acting Cabotegravir) and other STIs</td>
</tr>
</tbody>
</table>

Combating stigma and discrimination

Awareness of HIV, AIDS and other STIs can be created via the following channels at the workplace:

- Onboarding sessions
- Awareness sessions and workshops
- Newsletters
- Information brochures and pamphlets
- Trainings
- Hoardings
- Employee notice boards
- Town hall meetings
- Employee resource groups

## SRHR focus area
### COUNSELLING AND SERVICES FOR MODERN CONTRACEPTIVES AND COMPREHENSIVE FAMILY PLANNING

<table>
<thead>
<tr>
<th><strong>POLICIES</strong></th>
<th><strong>AWARENESS</strong></th>
<th><strong>ACCESS</strong></th>
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</thead>
<tbody>
<tr>
<td>Policies at the workplace covering modern contraceptives and comprehensive family planning can include:</td>
<td>Awareness can be created via the following channels at the workplace:</td>
<td>Counselling and services for comprehensive family planning can include referrals to and subsidized provision of:</td>
</tr>
<tr>
<td>• Medical or cost coverage for emergencies</td>
<td>• Awareness sessions and workshops</td>
<td>• Fertility diagnosis and counselling</td>
</tr>
<tr>
<td>• Coverage of a spectrum of fertility treatment options</td>
<td>• Newsletters</td>
<td>• Fertility treatments, including in vitro fertilization (IVF), intrauterine insemination, sperm/egg/embryo freezing</td>
</tr>
<tr>
<td>• Outsourcing of initiatives to ensure confidentiality of personal data/health data</td>
<td>• Information brochures and pamphlets</td>
<td>• Adoption, surrogacy and fostering services</td>
</tr>
<tr>
<td></td>
<td>• Trainings</td>
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<td>• Hoardings</td>
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<td></td>
<td>• Employee notice boards</td>
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<td></td>
<td>• Employee resource groups (e.g. family network, women’s networks)</td>
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SRHR focus area
COUNSELLING AND SERVICES FOR WOMEN’S REPRODUCTIVE, MENSTRUAL AND MENOPAUSAL HEALTH

POLICIES

Policies at the workplace to support employees experiencing menstruation and menopause can include:

- Flexible working hours
- Flexible breaks
- Adjusted work roles where physical exertion is reduced to manageable levels
- Relaxed uniform policy
- Paid time off to support employees experiencing menstrual and menopausal symptoms, such as severe menstrual cramps, polycystic ovary syndrome (PCOS), premenstrual dysphoric disorder (PMDD), premenstrual syndrome (PMS), hot flushes, fatigue, anxiety and sleep disruption

Policies at the workplace to support employees’ access to comprehensive abortion care can include:

- Flexible working hours
- Flexible and remote working opportunities
- Unpaid/paid time off

AREAWNESS

Awareness can be created via the following channels at the workplace:

- Onboarding sessions
- Awareness sessions and workshops
- Newsletters
- Information brochures and pamphlets
- Trainings
- Hoardings
- Employee notice boards
- Town hall meetings
- Employee resource groups (e.g. menopause network)

ACCESS

Facilities for women’s reproductive, menstrual and menopausal health can include:

- Hygienic and well-equipped bathrooms with water, sanitation and hygiene (WASH) facilities such as running water, functional toilets and facilities to dispose of menstrual products at all sites
- Break rooms or lounge rooms
- Clothing changes (e.g. spare clothes)
- Free menstrual products (e.g. sanitary pads, tampons)
- Relaxed and breathable uniforms
- Access to fans for hot flushes
- Iron tablets and over-the-counter pain medication

Services and counselling for women’s reproductive, menstrual and menopausal health can include:

- Referrals to female reproductive health specialists
- Free or subsidized counselling avoid telemedicine, face-to-face or web-based portals, and medication, including for medical abortions
- Access to comprehensive abortion care, including coverage for any travel costs or medications
SRHR focus area

DETECTION, PREVENTION, AND MANAGEMENT OF REPRODUCTIVE CANCERS

POLICIES

Policies covering detection, prevention and management of reproductive cancers can include:

- Time off to receive treatment
- Flexible working hours when suffering from periodic episodes of illness or medication side-effects
- Adjusted work roles where physical exertion is reduced to manageable levels
- Medical coverage for all cancers, including reproductive cancers (cervical, ovarian, uterine, vaginal, vulvar, breast, prostate, testicular and penile cancer)

AWARENESS

- Awareness can be created via the following channels at the workplace:
  - Cancer awareness sessions and workshops
  - Newsletters
  - Information brochures and pamphlets
  - Hoardings
  - Trainings
  - Employee notice boards
  - Employee resource groups
  - Annual awareness campaigns (e.g., Movember, Breast Cancer Awareness Month)

ACCESS

- Counselling and services for reproductive cancers can include provision of:
  - Regular cancer screenings
  - On-site mobile units offering safe and private screenings
  - Referrals to advanced specialty care facilities
  - Mental wellness support

SRHR focus area

OVERARCHING SRHR INDICATORS AND METRICS FOR THE WORKFORCE

Enablers’ for integrating SRHR into the company’s day-to-day operations include the following components: process and governance, organization and people, data and technology, ecosystem and partnerships.

- Process and governance can include: reporting and whistle-blowing mechanisms, governance bodies and processes, leadership commitment, feedback channels for employees to provide input on the company’s SRHR benefits, etc.
- Organization and people can include: integration of the delivery of SRHR policies and initiatives into job descriptions/responsibilities, presence of SRHR ‘ambassadors’, regular training or awareness initiatives, etc.
- Data and technology can include: process to collect SRHR information (e.g., employee engagement survey), internal systems leveraged for data collection and reporting, external systems/platforms for benchmarking on SRHR, etc.
- Ecosystem and partnerships can include: multi-stakeholder initiatives and partnerships via collaboration with unions, external health care providers, local governments, non-governmental organizations, private sector peers, etc.

SRHR focus area

SUPPLIER-RELATED SRHR INDICATORS AND METRICS

Integrating SRHR into supplier-related processes can include adding SRHR-related criteria (e.g., presence of policies against gender-based violence, presence of adequate WASH facilities to enable menstrual hygiene at supply chain sites) into the following processes: supplier selection, contracting, regular supplier assessments, supplier collaboration, supply chain audits, etc.

SRHR focus areas can be integrated into suppliers’ due diligence/social assessments and initiatives related to human rights.
Design considerations for SRHR initiatives

As companies start to design their SRHR initiatives across the three levers of policies, awareness and access, they should consider the following factors. To foster a culture of openness and transparency related to SRHR, businesses are highly encouraged to work directly with their workers and workers’ representatives to design SRHR initiatives that meet employees’ needs, and to collect feedback for continuous improvement.

### POLICIES
- Policy coverage of SRHR need
- Local laws, regulations and standards
- Inclusivity of policy
- Plans and processes to activate and enforce policy
- Frequency of reviews and updates to policy

### AWARENESS
- Communication channels, for example, training (online/in-person), educational resources, internal newsletters, employee resource groups, and onboarding sessions
- Frequency of awareness initiatives
- Mandatory versus voluntary sessions
- Language and content tailored to each location
- Effectiveness of communication channels

### ACCESS
- Level and quality of existing counselling and services available locally, provided by government social protection or non-governmental organizations
- Existing agreements with health care providers and/or insurance providers
- Specific needs relating to access of services:
  - Physical (e.g. on-site versus off-site, travel requirements)
  - Financial (i.e. costs of health care services and travel)
  - Time (i.e. allowance for paid time off or flexible working)
- Potential for telemedicine

### Considerations for all three action levers
- Workforce (or suppliers) in scope, including employee types (full-time, part-time, shift workers, temporary workers) and functions in scope
- Company geographies and/or sites in scope
- Size of company
- Specific SRHR needs to be addressed, considering nuances for people of different sexual orientations, gender identities, gender expressions, sex characteristics, religions, family structures and parentage options, cultures, and people with disabilities
• Capital expenditure (CapEx) and/or operating expense (OpEx) required
• Internal and/or external capabilities required to deliver the initiative
• Potential implementation partners (e.g. local health care providers, unions, non-governmental organizations, civil society)
• Indicators and metrics to measure progress and impact of the initiative (see annex II for examples)

**Considerations specific to each lever**

Additionally, businesses are encouraged to consult and align with international standards on human rights and labour rights, such as:


**Useful external tools and resources**

In addition to the tools proposed as part of this policy paper, external tools and resources that may be helpful in designing SRHR initiatives include:

• **UNFPA ROI-T – Invest in Her**: this return on investment (ROI) tool helps organizations calculate the expected business benefit from investment in sexual and reproductive health programmes for women workers ([https://roi.asia.unfpa.org/](https://roi.asia.unfpa.org/))
• **Reproductive and Maternal Health Compass** (specific to US-based workforce): this survey helps measure and benchmark a company’s reproductive and maternal health benefits ([https://rmhcompass.org/](https://rmhcompass.org/))
How to embed SRHR into environmental, social and governance reporting

Integrating sexual and reproductive health and rights (SRHR) indicators and metrics into annual environmental, social and governance (ESG) reporting is crucial for companies to demonstrate their commitment to and action on socially sustainable business practices. This not only showcases their efforts to support the health and well-being of their workforce, but also enables better transparency and accountability around SRHR in the private sector.

To share their initiatives and progress on SRHR, businesses can consider the three following options:

1. INCORPORATION WITHIN EXISTING ESG SECTIONS
   SRHR indicators and metrics can be seamlessly integrated into existing ‘social’ and ‘governance’ sections, such as human rights, occupational health and safety, health and well-being, inclusive workplace, and women’s empowerment. This approach aligns with the broader ESG framework and demonstrates how the company’s focus on SRHR contributes to its sustainability goals.

2. A DEDICATED SRHR SECTION
   For a more focused and in-depth presentation of SRHR initiatives and achievements, a dedicated section entitled ‘SRHR in the Workforce’ can be created within the annual or ESG report. This section can provide detailed information on SRHR policies, awareness initiatives and health care benefits across SRHR focus areas, as well as company processes for monitoring and evaluation. It can allow companies to clearly demonstrate their commitment to improving SRHR for their workforce.

3. A STAND-ALONE SRHR REPORT
   For companies seeking to provide a specialized and targeted summary of their SRHR efforts, a stand-alone SRHR report can be developed. This report can be tailored to specific stakeholder groups, such as investors, customers, government agencies or relevant civil society organizations.

The following section gives an example of how to disclose indicators and metrics for the SRHR focus area ‘antenatal, childbirth and postnatal care and family-friendly workplaces’. using an imaginary company called Max Mustermann & Co. Please note that this information can be structured to best suit companies’ specific reporting needs and preferences.
Max Mustermann & Co. has the following family-related policies related to antenatal, childbirth and postnatal care and family-friendly workplaces:

**INDICATOR**

Our policy on paid leave for antenatal appointments allows employees time off with pay to attend medical appointments and other medical consultations related to pregnancy.

**QUALITATIVE METRIC**

- The policy is applicable to all female employees in all regions where the company has its facilities and offices.
- The policy provides five paid days off for antenatal appointments and medical consultations.

**INDICATOR**

Our Parental Leave Policy outlines the procedures and benefits offered to our employees who take time off work to care for a newborn or newly adopted child. It encompasses both maternity leave, which can be used by the birth mother, and paternity leave, used by the father or equivalent partner.

**QUALITATIVE METRIC**

The Parental Leave Policy has the following features:

- It is applicable to all employees in all regions, regardless of their sexual orientations, gender identities, gender expressions, sex characteristics or marital status.
- The number of paid days varies depending on the country where the employee is located. In the United States, for example, our company offers six weeks of paid paternity leave.
- We are also providing financial assistance to employees who adopt a child, for both domestic and international adoptions, in the amount of up to $5,000 for adoption, along with additional benefits such as paid parental leave (the amount depends on the country of operation).
- Our company offers a variety of flexible options for returning to work, to help parents ease back into their jobs after taking leave. These options include reduced hours, phased-in work schedules and telecommuting.

**QUANTITATIVE METRICS**

In fiscal year 2023:

- 35 per cent of entitled women employees took parental or family-related leave
- 10 per cent of entitled men employees took parental or family-related leave
- 60 per cent of women employees that took parental leave returned to work

**INDICATOR**

Some of the issues related to the health and safety of pregnant women and nursing mothers are also addressed in the general Occupational Health and Safety Policy, which is applicable for company employees in all regions where the company has facilities and offices.
INDICATOR

Our company is committed to promoting awareness of the company’s health and well-being resources, which encompasses a diverse range of topics across antenatal, childbirth and postnatal care for our employees and their families.

QUALITATIVE METRICS

We are leveraging multiple channels including:

- **Onboarding sessions**: during onboarding of new employees, we communicate about the existing policies and available services and facilities related to family benefits for prenatal, childbirth and postnatal care for both women and men.

- **Awareness workshops and webinars**: these sessions cover healthy pregnancy practices at the workplace (e.g., meditation and yoga classes for pregnant women at the workplace, revitalizing walks in the nearby park, fostering connection with nature and colleagues, etc.), special nutrition options provided at the canteen/coffee points and preparing for childbirth (e.g., what to do in case it happens at the workplace), workshops and mentorship programmes to help employees smoothly transition back to work after parental leave, as well as available facilities for postnatal care (e.g., breastfeeding rooms, refrigerators and comfortable spaces for nursing mothers).

- **Information brochures and booklets**: we provide easily accessible materials on choosing health care providers and understanding parental leave policies in our company.

- **Partnerships with health care providers**: we collaborate with local hospitals and clinics to offer on-site consultations and information sessions (quarterly/once in six months) with health care professionals.

- **Newsletters**: every month we send out newsletters to all employees inviting people to participate in online and in-person support groups where employees can connect with colleagues and share experiences related to childbirth and early parenthood.

- **Employee feedback surveys**: we regularly solicit feedback from employees to understand their family-related needs and tailor our initiatives accordingly.

All awareness initiatives mentioned above are applicable to all employees in all regions of operation, regardless of their sexual orientation, gender identity, gender expression, sex characteristics or marital status.
Our company recognizes the importance of supporting employees on their journey ‘from bump to baby, and beyond’. We offer a comprehensive range of counselling and services encompassing antenatal, childbirth and postnatal care, provided both directly and via our external providers (health care insurance companies and business partners).

QUALITATIVE METRICS

We empower our employees with a comprehensive range of counselling and services in the areas of antenatal, childbirth and postnatal care, including:

- Emotional and physical well-being services: the company provides free access to a platform of licensed psychologists for confidential counselling and guidance [name of the platform] (with up to four one-hour sessions per month free of charge), upgraded access to meditation and pregnancy-related mobile applications [name of the applications], as well as specialized trainings for pregnant women and new mothers via a dedicated sports app [name of the application]
- On-site fitness and yoga classes: we empower pregnancy wellness at select locations [names of the locations], offering on-site yoga classes for pregnant women and new mothers free of charge
- Nutrition options: at most of our locations [names of the locations] there are healthy snack stations with fresh fruits, nuts and other nourishing options available throughout the day; some of our cafeterias also offer special menus featuring pregnancy-friendly dishes rich in essential nutrients
- Discounts: our employees can save on essentials for their growing family by using exclusive discounts on maternity clothing, baby essentials and health care services with our partner network

QUALITATIVE METRICS

We offer a comprehensive suite of facilities for antenatal, childbirth and postnatal care throughout this significant life stage, including:

- Ergonomic workstations: most of our offices are equipped with adjustable chairs and standing desks, promoting healthy posture and minimizing discomfort from prolonged sitting or repetitive tasks, particularly beneficial for pregnant women
- Postnatal facilities: convenient access to refrigerators for storing breast milk is available in all our offices; several offices [names of the offices/locations] feature dedicated lactation rooms, providing a private and comfortable space with features such as lockable doors, comfortable seating, sinks for cleaning pumps, and power outlets to support nursing mothers
- On-site childcare: as of February 2023, some of our regional offices in Europe, the Middle East and Africa [names of the offices/locations] offer on-site crèches with professional staff, providing a safe and nurturing environment for those who choose not to leave their children at home

QUALITATIVE METRIC

Personal protection equipment: as outlined in our Occupational Health and Safety Policy, we provide radiation protective aprons to pregnant women with job duties involving potential radiation exposure, prioritizing their safety and well-being.
References

14. Simplyhealth (2023). 3.5 million women have considered quitting job due to menopause and menstrual health symptoms, 9 November. Available at https://newsroom.simplyhealth.co.uk/35-million-women-have-considered-quitting-job-due-to-menopause-and-menstrual-health-symptoms/.

Endnotes

2. In this paper, we use the term ‘women’ to describe all people who can become pregnant. We recognize that this focus area and the corresponding indicators and metrics will be relevant to some people beyond this category (e.g. people born female who identify as other genders) and encourage companies to be inclusive of the divergent needs of their workforce.