



The United Nations Population Fund

Assault on the World's Peoples

By Douglas A. Sylva, Ph.D.

IORG
INTERNATIONAL
ORGANIZATIONS
RESEARCH GROUP

A Program of Catholic Family & Human Rights Institute

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FOREWORD

Dr. Douglas A. Sylva and the International Organizations Research Group have done the public policy world a remarkable favor with this authoritative White Paper on the United Nations Population Fund (UNFPA).

Dr. Sylva has looked closely at all aspects of UNFPA and has compared UNFPA rhetoric with reality. As of this writing the US government has determined that UNFPA is complicit in coercive population control programs in China. While this is the worst of the charges against UNFPA, this paper shows it is certainly not the only problem at this now beleaguered agency. Using non-ideological sources, many of them friendly to UNFPA, Sylva illustrates that UNFPA has a tendency to stretch the truth, even in minor things.

To date this is the most thorough analysis of UNFPA. It is intended for three audiences, those in public policy and government, journalists, and human rights advocates. This White Paper should provide a blueprint for all those seeking to discover the truth about the UN Population Fund.

This is the second White Paper published by the International Organizations Research Group. In the next few months three more papers will be produced; United Nations Children's Fund (UNICEF), the Ford Foundation, and the United Religions Initiative.

Austin Ruse
President
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PREFACE

Today we have across the world a clash of two camps: On the one side those civilizations and cultures seeking — albeit with ever continuing great failings — to live in accord with a transcendent order, and on the other side those seeking to build a world according to constantly changing fashions of the elite intellectuals of the day, who generally look askance at putting providence at the center of anything.

Nowhere is this clash more pronounced or pointed than in population policies — or policies of ‘the sexual act.’ For one side in this clash the sexual/marital act is a most intimate issue, leading to the most prized of all human conditions — the new family, center of love and affection, focus of deepest desires and most strenuous of efforts. For the other side the sexual/marital act is the most promising battleground on which to overturn this old world order, the old universal family order that stands in the way of their dreams of scientific socialist controlled utopia of just the right number of people, of health, efficiency, and plenty. In this clash simplicity clarifies: We could simply name the clash as ‘the traditional sex’ vs. ‘the new sex.’ The United Nations Population Fund (UNFPA) is at the front of one side only.

The ‘new sex’ alliance has many in its ranks but one must give activist — feminists’ pride of place. Their conceptions of the way the world ought to be lines up nicely with the agendas of all of the other players.

For the radical feminist movement the right to abortion is central to its view of the political world, for if one gives in to the demands of — and the obligations to — the newly conceived, then their new world order cannot be constructed. Closely tied (they always go together like chicken and egg) is a public policy of “family planning,” which immediately becomes contraception for all — most especially for the unmarried and very fertile young.

In the Johnson-Nixon era this camp triumphed in the US domestic social policy debate and quickly exported this same view to international relations and international foreign aid policy, and imbedded itself deep in the culture of the UN Secretariat (the UN civil service).

Let us start with the high thought of the feminist movement within the heart of that bureaucracy. Consider three quotations; the first from Radhika

Coomaraswamy, a lady little known to the public but a very reasonable, articulate, and highly educated (Harvard Ph.D.) radical feminist who has a job in the UN system that places her at the center of the feminist agenda: she tracks and critiques nations in their enforcement of policies to reduce violence against women. The second two quotations are from someone more publicly known, Nafis Sadik, for a long time the head of UNFPA.

Radhika Coomaraswamy argues “While international human rights law moves forward to meet the demands of the international women’s movement, the reality in many societies is that women’s rights [as interpreted by the feminist movement] are under challenge from alternative cultural expressions...The [feminist] movement is not only generating new interpretations of existing human rights doctrine...but it is also generating new rights. The most controversial is the issue of sexual rights.... The right to self-determination [of nations] is pitted against the CEDAW¹ articles that oblige the state to correct any inconsistency between international human rights laws² and the religious and customary laws operating within its territory.”³

Nafis Sadik in 1998 argued similarly: “We need to be constantly chipping away at long-held cultural prejudices against gender equality, human rights and reproductive choice, especially for women in developing countries.”⁴ And in 1995 summed it up neatly: “If culture and tradition are invoked to hold back change, and we hear this all the time, then culture and tradition must give way.”⁵

This last quotation goes to the heart of Doug Sylva’s critique of UNFPA. And now in August of 2002, how timely this study is: The Bush Administration has just recently announced its intention to withhold funding (for the coming year at least) from UNFPA. This study, though drafted before President Bush announced his intention, gives him and his staff the rationale and reasons for his action.

UNFPA has been engaged for decades in a most radical strategy: under the guise of ‘population control’ to change the course of human sexuality

1 The Convention on the Elimination of All Forms of Discrimination Against Women

2 In this case, the family, moral, and religious issues discussed in this paper.

3 Radhika Coomaraswamy, “Reinventing International Law: Women’s Rights as Human Rights in the International Community” (Cambridge, Mass.: Harvard Human Rights Program, 1997).

4 UNFPA Press Release, POP/655, January 20, 1998.

5 Dispatches – News from UNFPA, No. 2, October 1995.

by all means possible: abortion, overturning of parental rights, riding roughshod over sovereignty rights of nations, trampling on the religious tenets of most faiths, strongarming nations into acceptance. In pursuing all of this UNFPA hides behind the skirts of the new radical woman and spins criticism of these practices as oppression of women and their rights. For instance rather than dealing seriously with serious charges from a serious source UNFPA used the Vatican's criticism of its policies as an occasion to attack the Vatican, rather than respond to its critique. Sylva exposes and documents carefully this ideological agenda, which has such strong support from the elite of Western nations, including strong support from major foundations, and institutes in academia. Furthermore the World Bank acts as an enforcer of UNFPA's ideology. None of these entities or groups is at all concerned with the violation of national sovereignty, rule of law, culture and the beliefs of families. When these stand in the way they must be shoved aside — as Nafis Sadik made clear in the quotation above.

However the tide is beginning to turn, and the impact of these policies is increasingly clear and abundantly ironic: the controllers are pushing their own nations out of existence first. Europe will disappear within the century to be replaced by African-Asian peoples, most likely dominantly Moslem. Little did Henry Kissinger think his now-famous (or infamous) National Security brief would lead to such a transformation in the Transatlantic Alliance. On the other side of the world China faces a shortage of young women for its young men. Where will the wives of these surplus Chinese men come from? An inflow of foreigners or an outflow of Chinese men? For the big players in population control: Europe, China and the United States⁶ their own houses are in increasing sexual-demographic disarray. It is time for them to reassess their domestic population control policies, and similar foreign policies that grossly interfere in the intimate social order of other nations and civilizations. Nothing could be farther from the intentions of the original framers of the UN or the language of their founding documents. Few policies could be so insidiously hostile to other nations than ones that interfere with their intimate family lives. UNFPA is at the forefront of this distortion, this grand experiment of the 'new sex' camp to create a new world order.

6 In the United States for every 100 children conceived today only 18 will reach age 18 in family life with their mother and father. All the rest will experience the rejection of abortion or family breakup.

This document is not only a severe critique of UNFPA but also a clear challenge and a ringing call for reform of a UN that initiated and continues to support UNFPA. An old high school teacher of mine frequently quoted “The wheels of God grind slowly but they grind exceeding small.” Years before him my farmer grandfather, using Irish colloquialisms that need no translation, oft used to say, “Those educated blaggards are the worst blaggards.” Combined these sayings sum up UNFPA’s policy and impact.

This is a harsh critique no doubt but one that history will also likely yield on this experiment in playing god — against the natural order, which will not change, no matter what advances man makes. Man (and the UN) has the choice to work with nature or against nature. Therein lies the heart of the clash at the UN. UNFPA has long ago decided where it stands, as Doug Sylva makes clear in the following pages. I am sure we will hear more from this very promising new voice in the international debate on the future of the family and the world.

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August 3, 2002



Introduction

In 1969, at the very height of the “population bomb”⁷ hysteria, when large families of seals and elephants and lions were celebrated, and large families of humans deplored, when rich nations saw the teeming masses of the developing world as a threat to their own security,⁸ the United Nations Fund for Population Activities (UNFPA).⁹ The United Nations, too, had been filled with dread by the prospects of population explosion. The United Nations, too, had grown convinced that population growth must be slowed, then stopped, and it established UNFPA to coordinate its myriad efforts to achieve this end. The UN gave UNFPA a unique mandate: to save the earth from a seemingly intractable problem, the further spread of humanity.

Since its founding, UNFPA has spent about \$5 billion in the pursuit of population control, funding programs in 150 countries around the globe.¹⁰ It is the largest international sponsor of population programs.¹¹ But what has the United Nations achieved with this substantial investment? Could this money have been spent more efficiently, or more ethically? And should this investment continue, even expand? Almost immediately, a number of concerns began to emerge about United Nations involvement in population-control. First, it was now clear that the United Nations would need to

UNFPA chiefly exists to reduce population growth in the developing world, and it pursues this objective with fervor and zeal.

7 Paul Ehrlich, *The Population Bomb* (New York: Buccaneer Books, 1968).

8 See, for example, “Implications of Worldwide Population Growth for US Security and Overseas Interests,” *National Security Study Memorandum* 200, December 10, 1974.

9 Now called the UN Population Fund, although it retains the original acronym, UNFPA.

10 US Committee for UNFPA, www.uscommittee.org/overview.html (accessed August 13, 2002).

11 US Department of State International Information Programs, October 25, 2000.

engage in controversial debates, with the most private aspects of family life and sexuality becoming the topics of international activity. This expansion of the United Nations agenda deeply concerned both those interested in national sovereignty and those interested in protecting the traditional

Some observers worried that population control programs would result in a dangerous transformation in thinking about humanity, from the view of humanity as a precious gift to be preserved to the belief that each additional human is a further burden on an already over-burdened earth.

family. Second, it was recognized that the funding necessary for this effort would compete with other forms of international aid, such as the provision of food, clean water and basic medical care. Since such aid is finite, population control would come at the expense of other worthy programs and projects. Third, some observers worried that population control programs would result in a dangerous transformation in thinking about humanity, from the view of humanity as a

precious gift to be preserved to the belief that each additional human is a further burden on an already over-burdened earth. This new conception of man, it was surmised, could threaten the recognition of each individual's inherent dignity and worth.

For all of these reasons, the activities of UNFPA require investigation. Such an investigation will reveal that UNFPA does support some valuable initiatives, such as pre-natal and post-natal care, efforts to curb maternal mortality and morbidity, and care for illnesses associated with reproductive functioning.¹² But these mostly benevolent programs occupy only a fraction of the UNFPA budget.¹³ UNFPA chiefly exists to reduce population growth in the developing world, and it pursues this objective with fervor and zeal. UNFPA supports abortion and covertly promotes abortion. UNFPA distributes abortion equipment and abortion drugs throughout

12 www.unfpa.org (accessed August 13, 2002).

13 "Financial report and audited financial statements for the biennium ended 31 December 1999 and report of the Board of Auditors," UNFPA, September 21, 2000, A/55/5/Add.7. According to this UNFPA report, "In the biennium 1998-1999, UNFPA spent \$326 million, or 72 percent of its programme expenditure, on providing agencies with funds to implement country programmes and associated subprogrammes and projects related to *population management*." Emphasis added.

the developing world. UNFPA funnels money to Non-governmental Organizations (NGOs) that actually perform abortions. Finally, UNFPA funds, assists and protects coercive population control programs carried out by government regimes in China, Vietnam, Kosovo and Peru. UNFPA is therefore complicit in the human rights violations carried out by these regimes, violations that include forced abortions, forced sterilizations, and even infanticide.

Everywhere, there is evasion and dishonesty. UNFPA provides a disturbing lesson: once people are seen as a problem to be solved, ethical and moral concerns appear to drop away. UNFPA officials are fully committed to the cause of fertility reduction, and are willing to employ almost any means to achieve their end.



Part I

UNFPA

To begin this investigation, it is essential to establish the policies, programs and regulations of UNFPA — the claims it makes about itself.¹⁴ According to its mission statement, UNFPA exists to promote three broad categories of programs: reproductive health, population and development strategies, and advocacy.¹⁵ UNFPA promotes reproductive health mainly through the worldwide provision of artificial contraception, but UNFPA also undertakes some other projects, including “safe motherhood” initiatives.¹⁶

UNFPA advances population and development by helping “...countries formulate, implement and evaluate comprehensive population policies as a central part of sustainable development strategies. This includes support for data collection and analysis, and research.”¹⁷ UNFPA advocates on behalf of reproductive health and rights, what it considers the international consensus on reproductive rights that emerged from the International Conference on Population and Development (ICPD), held in Cairo, Egypt, in 1994.¹⁸

UNFPA claims that it does not fund abortion, involuntary sterilization, or coercive practices of any kind.

UNFPA advances these three major goals through a number of smaller initiatives. For instance, UNFPA helps to ensure an adequate worldwide supply

14 This task is complicated by the fact that UNFPA altered the language it uses to describe its activities during the International Conference on Population and Development, held in Cairo, Egypt in 1994. Because of criticism of population control, UNFPA also began to justify its programs by stating that they promoted reproductive rights and family planning goals.

15 UNFPA mission statement, www.unfpa.org/about/mission/english.htm (Accessed August 13, 2002).

16 www.unfpa.org/about/brochure/main.htm. (accessed August 13, 2002).

17 Ibid.

18 Ibid.

of contraceptives by coordinating the transfer of contraceptives between the developed and developing world, and by assisting the developing world in producing its own contraceptives.¹⁹ UNFPA supplies “comprehensive reproductive health care services” in times of emergency, including natural disasters and refugee situations. UNFPA also extends reproductive services to adolescents, and helps to promote what it considers to be adolescent sexual and reproductive rights.²⁰ According to UNFPA, the agency follows strict regulations in the pursuit of its agenda. UNFPA “is guided by, and promotes” the principles of the Programme of Action of the ICPD, which established the “rights” that must be respected within all population programs.²¹ Most importantly, “All couples and individuals have the right to decide freely and responsibly the number and spacing of their children.”²² UNFPA also claims that it does not fund abortion, involuntary sterilization or coercive practices of any kind.²³

UNFPA is governed by an executive board that includes 36 United Nations member states; the board must approve all programs carried out by UNFPA. According to UNFPA, the agency has a staff of 1020 people; 778 people in country offices and 242 people at UNFPA headquarters in New York City.²⁴ Depending on the actions of donor nations, the UNFPA annual budget now varies between about \$250 to \$300 million.²⁵ The United States, the United Kingdom, Germany, the Netherlands, and Japan have been the primary donors to UNFPA.²⁶ In 1998, for example, these five countries accounted for 70 percent of UNFPA’s donations.²⁷ Much of this money is spent on the direct purchase of contraceptives; in 1998-1999, UNFPA spent \$92 million on contraceptives, compared to only \$15 million for all other medical equipment and pharmaceutical supplies, combined.²⁸

19 UNFPA, “Global Programs and Initiatives,” www.unfpa.org/program/programain.htm (accessed August 13, 2002).

20 Ibid.

21 www.unfpa.org/about/mission/english.htm (accessed August 13, 2002).

22 www.unfpa.org/icpd/icpd-programme.cfm#ch2 This is Principle 8 of the ICPD Programme of Action (accessed October 20, 2009).

23 www.unfpa.org (accessed August 13, 2002).

24 “UNFPA, Estimates for the Biennial Support Budget for 2002-2003,” September 2001, DP/FPA/2001/10. The average staff salary at headquarters is \$103,000.

25 Ibid.

26 The US defunded UNFPA between 1985 and 1992, and again in 1998-1999.

27 “Financial Resource Flows for Population Activities in 1998,” UNFPA, E/1500/2000. Other countries that donate to UNFPA include Australia, Austria, Belgium, Canada, Denmark, Finland, France, Ireland, Italy, Luxembourg, New Zealand, Norway, Portugal, Spain, Sweden and Switzerland.

28 “Financial report and audited financial statements for the biennium ended 31 December

UNFPA and Abortion

UNFPA denies all involvement in abortion. In 1985, the Governing Council of UNFPA established that "...it is the policy of the Fund, in accordance with its own family planning guidelines...not to provide assistance for abortions, abortion services or abortion-related equipment and supplies as a method of family planning."²⁹ A similar policy-statement was repeated nine years later, in the Programme of Action of the ICPD, which declares that "...in no case should abortion be promoted as a method of family planning."³⁰ In both statements, there is an attempt to draw a distinction between family planning and abortion. There can be effective family planning without abortion, and it is UNFPA's unique responsibility to provide this abortion-free family planning to the developing world.

According to UNFPA and its allies, the agency has never violated this mandate to provide abortion-free family planning; on this point, there is an emphatic and insistent chorus of voices. The US Committee for UNFPA, a Washington, DC-based lobbying group for UNFPA, asserts that it is UNFPA's "strict policy...not [to] provide support for abortions or abortion-related activities anywhere in the world."³¹ In a 2001 press release, UNFPA stated that it "has not and does not support, in words or substance... abortion, in any country."³²

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It is, of course, pertinent to ask how this "strict policy" would affect UNFPA programs in the field. What would it mean, for instance, to provide "support, in words or substance," for abortion? Obviously, to follow this policy, UNFPA would be prohibited

1999 and report of the Board of Auditors," UNFPA, September 21, 2000, A/55/5/Add.7.

29 UNFPA Governing Council decision 85/19, June 1985.

30 ICPD Programme of Action, paragraph 7.24.

31 US Committee for UNFPA website, www.uscommittee.org/issue1_4_1.html. According to its website, the US Committee for UNFPA exists "to raise moral, financial and political support in the United States for the work of the UN Population Fund" (accessed August 13, 2002).

32 www.unfpa.org/news/features/cfam.htm (accessed August 13, 2002).

from performing abortions. But UNFPA would also be prohibited from other, more diverse, more indirect, activities. For example, UNFPA would be barred from legal advocacy, from promoting the legalization of abortion. Indeed, the ICPD Programme of Action explicitly recognizes the sole authority of governments to alter abortion laws: “Any measures or changes related to abortion within the health system can only be determined at the national or local level according to the national legislative process.”³³

Under such a “strict policy,” UNFPA would not provide other parties, NGOs or national health-care systems, with abortion-related equipment. This prohibition would appear straightforward, but the very nature of medical equipment complicates the matter, for some obstetric equipment can also be used to perform abortions. So to ensure that such multi-purpose medical equipment is not “abortion-related,” UNFPA would need to promulgate guidelines for its proper use, and monitor the equipment’s use to ensure that the guidelines were followed.

UNFPA cannot provide money for abortions; such funding would constitute support, in substance, for abortion. But here, too, the situation is unclear. Is UNFPA “strictly” adhering to the non-abortion policy if it provides money to NGOs that perform abortions, or to NGOs that advocate the legalization of abortion? Or is UNFPA somehow insulated from abortion — and from charges that it subsidizes abortion — if its grants to abortion-providers are used for other services? UNFPA is a fund; it distributes money to NGOs and governments for specific programs. How should this most fundamental project of UNFPA — the transfer of money — reflect the non-abortion policy? These are difficult questions, with uncertain answers. But it is at least plausible to contend that the funding of abortion-providers, for any purpose, violates the spirit of the policy; after all, funding abortion-providers for one thing frees money for other things (including, presumably, more abortions).

The difficulty in assessing the actions of UNFPA is already evident: UNFPA produces a “strict” policy, but neglects to explain what it would mean to adhere to it. Throughout this report, it will be charged that this fundamental lack of clarity is endemic to UNFPA, and it constitutes a deliberate attempt to disguise the true intent of the agency. For instance, even UNFPA’s policy statements on abortion — statements that appear so categorical — are not as transparent as they seem. Neither

33 ICPD Programme of Action, paragraph 8.25.

the Governing Council pronouncement from 1985 nor the ICPD Programme of Action, the most authoritative UNFPA declarations on abortion, asserts that UNFPA should not promote abortion. Rather, both make sure to qualify the phrase: UNFPA should not promote abortion “as a method of family planning.”

UNFPA repeatedly shifts between three distinct vocabularies to explain and justify its activities: population control, reproductive rights, and family planning. But only family planning is excluded as a valid reason for abortion. No policy states: ‘UNFPA should not promote abortion as a method of family planning, as a method of population control, or as a method of exercising reproductive rights.’ Considering how elastic rights-based language is within the UN system, and that rights-claims are now the most powerful arguments in UN deliberations, we should be wary of the fact that rights have not been excluded as a potential justification for UNFPA involvement in abortion. Could abortion be promoted as a fundamental right, but not as a method of family planning? Quite simply, if UNFPA wanted to avoid any confusion on this matter, the Governing Council decision — or some other policy guideline — would have stated: ‘UNFPA should not promote abortion for any reason.’

The sincerity of UNFPA’s commitment to the “strict” policy is further undermined by its frequent calls to end “unsafe abortions.” At first glance, this position does not appear at odds with the non-abortion policy. In the ICPD document, the issue of abortion’s safety is introduced within the context of national sovereignty.³⁴ After acknowledging that nations possess the sole authority to pass legislation on abortion, the ICPD Programme goes on to declare that, “In circumstances where abortion is not against the law, such abortion should be safe.”³⁵

But the issue is more complicated than this. In fact, the concept of safe abortion may constitute an effort to trump national sovereignty. To understand this threat to sovereignty, we must establish what UNFPA defines as “unsafe abortion.” According to UNFPA, unsafe abortion is simply illegal abortion; abortion is a dangerous, life-threatening procedure when it is driven underground through restrictive legislation.³⁶ In one US Committee for UNFPA document, it is argued that “More than 1 in 4 pregnancies worldwide each year ends in abortion, many of

34 ICPD Programme of Action, paragraph 8.25.

35 Ibid.

36 This argument is similar to the “back alley” argument familiar in US abortion debates.

which are performed under clandestine and unsafe conditions.”³⁷ Here, the implication is that abortions, which need to be hidden from view — because they are illegal — will be unsafe. In a 1996 article in the UNFPA magazine *Populi* this view is even more explicit: “Laws banning abortion are ineffective at preventing abortions, most of which — by virtue of being illegal — are performed under unsafe conditions...”³⁸ So if unsafe abortions are illegal abortions, calling for safe abortions means calling for the legalization of abortion. The US Committee for UNFPA makes this very point: “Women who want to become pregnant or are already pregnant also need tending to, and those who seek abortions need to be ensured that the operation is safe and legal.”³⁹ According to the US Committee, “UNFPA does urge that unsafe abortions be made safe as a matter of public health.”⁴⁰ Is UNFPA urging countries to make illegal abortion legal?

Already, it is clear that things are not what they seem. And how could it be otherwise? Many of UNFPA leaders are ardent supporters of abortion as a fundamental human right. It is therefore important to ask: would these people be willing to employ the world’s most influential reproductive health agency to promote what must be, in their minds, an incomplete and inadequate version of reproductive rights? The beliefs and potential motivations of UNFPA leaders — their personal commitment to abortion-rights — help to explain the growing suspicion that UNFPA’s “strict” policy is a mere bow to political expediency, not an accurate reflection of UNFPA programs and activities.

For example, in an interview granted after her term as UNFPA Executive Director, Nafis Sadik argued that abortion should be considered a topic of public health rather than a moral, political, or legal issue: “I’m still a bit sorry that abortion remains such a controversial issue. Instead of looking at all abortions as something that a woman endures because she doesn’t have an alternative, there is still this view that it should be condemned. And the woman should also be condemned.”⁴¹ Sadik goes on to say: “It’s an issue that’s been there from the beginning of time and it will continue. I think we have to find some way to be more pragmatic

37 www.uscommittee.org (accessed August 13, 2002).

38 *Populi*, Vol.23, No.1, March 1996.

39 www.uscommittee.org/issue1_1_1.html. Emphasis added. (accessed August 13, 2002).

40 *Ibid.*

41 The Centre for Population and Development Activities (CEDPA), www.cedpa.org/newsletter/dec2000/sadik.htm (accessed August 13, 2002).

about it.”⁴² Being “pragmatic” about abortion, accepting the fact that it has always taken place, that “it will continue” to take place, and that women should not be “condemned” for procuring one, strongly implies accepting the legality of the procedure. Sadik also states that she was attempting to introduce this “pragmatic” view of abortion at the ICPD conference in Cairo: “If we could somehow get our mindset from condemnation to a problem that needs to be addressed and solved, I think we would be able to do a lot more on it. It’s become so sensitive and politicized and a moral issue, instead of a public health issue, which I was trying [to do] at ICPD, but it became the hottest issue of the discussion.”⁴³ If this was Sadik’s goal at Cairo, then the final policy, (that “In no case should abortion be promoted as a method of family planning”) must be considered either a grievous and monumental defeat for UNFPA, a capitulation to the anti-abortion forces, or a clandestine effort to at least retain the possibility of the justification of abortion on other grounds, perhaps as a fundamental human right.

Since leaving UNFPA, Sadik has become a member of the board of directors of the Center for Reproductive Law and Policy (CRLP). Perhaps refreshingly, there is no ambiguity at CRLP: the stated goals of this US NGO include the recognition of abortion as a fundamental human right and the full legalization of abortion-on-demand in every nation in the world.⁴⁴ There is also no uncertainty as to how CRLP carries out this mission: legal advocacy within individual countries, with the creation of pro-abortion customary international law as the final safeguard of abortion rights.⁴⁵ In her current role at CRLP, Sadik can enthusiastically promote things that, as UNFPA Executive Director, she was forced to cloak in euphemisms. Of course, since she now seeks to overthrow all restrictions upon abortion (including, therefore, UNFPA’s own stated abortion policy), it is fair to question the level of commitment Sadik possessed for this same policy, when she was Executive Director.

The evidence of high-level UNFPA support for abortion is not isolated to Sadik. In fact, this commitment to abortion can be found throughout the constellation of UNFPA offices. In 1999, the US Committee for UNFPA was formed to counter the mounting — and

42 Ibid.

43 Ibid.

44 The Center for Reproductive Law and Policy (CRLP), www.crlp.org/pri_abortion.html (accessed August 13, 2002).

45 See United States District Court Southern District of New York, *The Center for Reproductive Law & Policy vs. George W. Bush, Colin Powell and Andrew Natsios*.

politically damaging — evidence that UNFPA was funding coercive programs in the developing world, programs that not only included abortions, but forced abortions, as well. The most prominent figure involved with the US Committee has been Robin Chandler Duke. At the UNFPA press conference to announce the Committee's founding, it was Duke who shared the dais with Nafis Sadik, and it was Duke who spoke on behalf of the Committee.⁴⁶ But if the Committee was established to keep the money flowing (money from governments through UNFPA to NGOs), despite the allegations concerning abortion, Duke is a strange, even startling, choice as its standard-bearer.⁴⁷ For decades, Duke has been one of the most vocal proponents of abortion within the United States. Duke is the former president of the National Abortion and Reproductive Rights Action League (NARAL). In its press release, UNFPA mentions Duke's association with another, relatively unknown NGO, but ignores the position that brought Duke to national prominence, the position from which Duke successfully advocated for abortion-on-demand in the United States.⁴⁸

What does Dukes' involvement imply about UNFPA? Would a pioneer in the fight for abortion-rights represent a worldwide agency that provides every reproductive health service except abortion? If UNFPA's stated policy guided UNFPA's actual practices, it is conceivable that Duke would consider UNFPA in need of reformation, rather than unqualified support. It is even conceivable that she would deem UNFPA an enemy, an agency willing to compromise a most-cherished and fundamental human right. Duke's support for UNFPA raises the suspicion that UNFPA must somehow promote abortion in its programs; otherwise, it is difficult to explain why Duke would act on its behalf.

Duke is not the only prominent US Committee member to be involved in abortion. For instance, Dr. Henry Foster has served on the US Committee's board of directors since its inception. In 1995, Foster was nominated by President Clinton for the position of Surgeon General, the US government's chief medical advisor. But the nomination was defeated partly because Foster, a doctor of obstetrics and gynecology, could not provide a consistent and credible answer to the question of how many abortions he had performed. He initially admitted to performing a single abortion, but was forced to repeatedly increase this number as more details

46 UNFPA Dispatches, June 1999, www.unfpa.org/modules/dispatch/issues99/june99/committee.htm

47 Ibid.

48 Duke was also named Ambassador to Norway by President Clinton.

of his medical career surfaced.

The current US Committee for UNFPA board of directors has twenty-four members. Of those twenty-four members, eleven of them have been or continue to be associated with International Planned Parenthood (IPPF) or its US affiliate, Planned Parenthood Federation of America (PPFA).⁴⁹ IPPF provides abortions all over the world; indeed, IPPF and its national affiliates are the worlds largest abortion providers. Also, ten of the board members have been or continue to be associated with other groups that advocate for abortions or directly perform abortions.⁵⁰

The US Committee was established to answer questions about UNFPA, to quell the concerns of pro-life politicians and citizens. But this Committee only serves to raise further questions. What are we to think of abortion denials made by individuals who have agitated for abortion, and who have even performed abortions? What are to think of the agency — UNFPA — that lets them speak in its name? It is becoming clear that UNFPA does not provide unequivocal answers about abortion. The sheer number of ambiguous statements must imply that UNFPA does not intend to enlighten on this issue, but to obfuscate. Perhaps this language is meant to convey two separate messages: plausible denials where denials are necessary, along with well-veiled assurances to friends, communicated either through code words like “safe” abortion, or through the pro-abortion credentials of its messengers, that UNFPA is not opposed to abortion, and that UNFPA will not stand in the way of the worldwide spread of the abortion movement. After all, if UNFPA meant to send a simple and credible denial, it would have selected someone other than Robin Duke to deliver it.

So far, much of the evidence presented linking UNFPA with abortion has been circumstantial evidence, evidence that requires inference and interpretation. Some of it, to be sure, is guilt — or at least suspicion — by association. There is, however, more substantial evidence. For example, in 1998, UNFPA collaborated with an NGO named PATH⁵¹ on a study entitled “New Approaches to Early Abortion.”⁵²

The problem with a paper describing new methods of early abortion — that it would contradict the strict non-abortion policy — was apparent to those involved in the project; the study therefore begins with two

49 www.uscommittee.org/about_us.html (accessed August 13, 2002).

50 Ibid.

51 Program for Appropriate Technology in Health.

52 “New Approaches to Early Abortion,” *Outlook*, Volume 16, Number 2, October 1998. PATH and UNFPA. www.path.org/publications/details.php?i=357 (accessed October 20, 2009).

statements meant to insulate UNFPA from criticism. First, there is this editors' note: "The 1994 ICPD Programme of Action stated that abortion should not be promoted as a method of family planning. UNFPA fully subscribes to this, works to prevent abortion through family planning, and does not provide support for the provision of abortion services."⁵³ Of course, saying something does not make it so. Claiming that UNFPA does not promote or support abortion, at the beginning of a study meant to provide information necessary to increase worldwide access to abortion, appears incredible, even ridiculous. Perhaps sensing the weakness of the editor's note, the writers begin the study with a second defense: if they are, indeed, promoting abortion, they are doing so only where it is legal, and they are doing so only in an effort to make these legal abortions safer abortions: "A number of newer approaches and/or technologies for uterine evacuation promise to make legal induced abortion and treatment of incomplete abortion safer and more widely accessible. These include manual vacuum aspiration and several nonsurgical abortion (also called medical abortion) methods. This article will describe these options and their implications for women and service providers in low-resource settings."⁵⁴ But, according to the "strict" non-abortion policy, UNFPA is not supposed to participate in any efforts to make abortion "more widely accessible." UNFPA is not supposed to provide the medical or technical expertise necessary to increase access to abortion, even if that abortion would be legal. UNFPA claims not to support abortion "in any country," in countries where abortion is legal as well as in countries where abortion is illegal.

In fact, the authors exhibit a complete disregard for national abortion laws. For instance, when discussing the chemical abortifacient misoprostal, the authors rely upon two studies of illegal abortions carried out in Brazil (the title of one of the sources is "Misoprostal and Illegal Abortion in Fortaleza, Brazil").⁵⁵ But this elicits no comment from the authors. There is no disclaimer stating that this information was acquired through illegal medical procedures, and that misoprostal should only be used where national legislatures have deemed abortion to be legal. Legality simply seems not to matter.

What is more, the information within "New Approaches to Early Abortion" could be used to skirt abortion laws. A sense of this strategy

53 Ibid.

54 Ibid. Emphasis added.

55 Ibid. Footnotes.

emerges in the discussion of a type of medical equipment called manual vacuum aspirators (MVAs). According to the report, “MVA involves using a hand-held syringe attached to a cannula to suction the contents of the uterus. It can be used to induce abortion in women up to 12 weeks gestation (some experienced providers use it for pregnancies up to 16 weeks).”⁵⁶ The authors base their claims on the knowledge of MVAs acquired in Bangladesh: “In Bangladesh, for example, female paramedics perform MVA for menstrual regulation (early uterine evacuation in the absence of pregnancy confirmation) as safely and effectively as physicians.”⁵⁷

But abortion is illegal in Bangladesh. So, providing abortions up to the sixteenth week of gestation under the guise of “menstrual regulation” is a means of providing women with *illegal* abortions. In fact, one of UNFPA’s NGO partners, the International Women’s Health Coalition (IWHC), even worries that a debate over the legality of abortion could alert authorities in Bangladesh to the fact that menstrual regulation is a form of abortion, and therefore an illegal practice: “Where safe services are fairly readily available despite restrictive laws, efforts to liberalize laws could lead to more, not fewer, restrictions, and to stricter implementation of existing laws. For example, in Bangladesh, where menstrual-regulation services are widely provided throughout the government health system and in the private sector, it is widely believed that a public debate on the abortion law could jeopardize these services.”⁵⁸

Thus the UNFPA/PATH authors of this study are quite consciously evaluating the potential benefits of extending illegal abortions to women. The lesson they take from Bangladesh is simple: if this form of illegal abortion is safe, widely accessible and politically secure there, it could be a valuable addition to the reproductive services offered to women in other poor and developing countries. Based upon the UNFPA/PATH report, it is now clear that UNFPA performs research on abortion, promulgates information on abortion, and advises abortion-providers about the qualities and characteristics of specific abortion procedures. But, if its policy statements about abortion are truthful, UNFPA should possess no competency to produce such a document, no expertise to report, and no motivation to provide recommendations. In light of its strict policy, UNFPA should not seek to increase access to abortion in any country,

56 Ibid, page 2.

57 Ibid, page 2.

58 Adrienne Germain and Theresa Kim, “Expanding Access to Safe Abortion: Strategies for Action,” International Women’s Health Coalition, 1998, p.15. www.iwhc.org/index.php?option=com_content&task=view&id=2437&Itemid=824 (accessed October 20, 2009).

regardless of the legality of abortion within that country. The report also underscores UNFPA's troubling and ambiguous position with regard to national sovereignty and national abortion laws.

UNFPA's efforts to conceal its promotion of abortion are also evident. UNFPA seeks other people's participation (what it calls in the report "midlevel providers") to perform techniques shrouded in uncertainty (menstrual regulation) using multi-purpose equipment (MVAs). In this way, UNFPA can successfully counter any criticisms that may arise: we did not perform the procedure in question, no one can be sure what the procedure actually was, and if the procedure was an abortion, we did not intend for the equipment to be used in that manner.

As we shall see throughout this report, manual vacuum aspirators and menstrual regulation play an essential role in UNFPA's advocacy of abortion. MVAs are an example of multi-purpose medical equipment, since they are also helpful in the treatment of miscarriages. Such multi-purpose equipment provides political protection for UNFPA: if it is discovered that the equipment has been used for abortions, UNFPA can claim that it has been misused. MVAs are also important since they can be employed shortly after conception — when pregnancy is suspected but not actually detected. And if pregnancy has not yet been detected, the procedure need not be labeled a "pregnancy termination." Thus, its adherents speak of "menstrual regulation" instead of pregnancy termination or abortion. For obvious political reasons, this is an important euphemism, and it is used to describe the procedure even when it is carried out much later in the pregnancy, when pregnancy could easily be confirmed. MVAs and menstrual regulation make it possible to perform abortions without using the word abortion, therefore tricking uneducated or uninspired national authorities.

Emergency Reproductive Health Kits

UNFPA does more than provide information for the expansion of access to abortion; UNFPA provides the equipment for abortion. For instance, UNFPA distributes "Emergency Reproductive Health Kits" in refugee camps around the world. These kits include useful items, like equipment for safe deliveries, but they have also included emergency contraceptives, intrauterine devices (IUDs), and manual vacuum aspirators.⁵⁹

The distribution of MVAs is routinely justified on the grounds that

59 Joseph Meaney, "Refugees' Rights vs. Reproductive Rights," Population Research Institute, April/May 1999.

these instruments are useful in treating women with complications from miscarriages. And MVAs can certainly be used for this purpose. But, early in the refugee program, the MVAs, emergency contraceptives and IUDs were distributed in sub kits called “pregnancy termination kits.”⁶⁰ With such a name, the intended purpose of these devices — abortion — is impossible to deny. So, according to a UN document, the name was quickly changed to “reduce the risk of offending sensitivities and possibly make the sub kit more acceptable.”⁶¹ The nature of this response must be emphasized. UNFPA did not apologize to its funders for this explicit breach of policy. As far as can be told, UNFPA conducted no internal investigations; UNFPA fired no one, disciplined no one. UNFPA did not alter its program. UNFPA did not begin a monitoring program, to ensure that those MVAs already distributed would not be used for abortions. Most importantly, UNFPA did not stop sending MVAs into emergency situations. What did UNFPA do? It simply changed the name of the kits, and began repeating as often as possible that MVAs were intended to treat miscarriages, not for “pregnancy terminations.” UNFPA changed nothing but the appearance. Therefore, we must conclude that the reality — the reality of abortions performed with UNFPA equipment — simply continued.

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Emergency contraceptives⁶² are also included in the reproductive health kits; in fact, UNFPA routinely distributes emergency contraceptives to countries throughout the world. As the US Committee for UNFPA explains, “effective family planning includes...emergency contraception.”⁶³ An emergency contraceptive pill is a larger-than-normal dose of a birth control pill, usually taken within 72 hours of sexual intercourse. It was originally argued that emergency contraception prevented ovulation, which would

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60 Ibid.

61 United Nations High Commissioner for Refugees (UNHCR) and United Nations Population Fund (UNFPA), Proceedings for the Second Preparatory Meeting on Reproductive Health in Refugee Situations. Geneva: April 5-6. As quoted by Joseph Meaney, “Refugees’ Rights vs. Reproductive Rights,” Population Research Institute, April/May 1999.

62 Also known as “morning after pills.”

63 www.uscommittee.org/issue1_1_1.html (accessed August 13, 2002).

therefore prevent conception. After all, any form of contraception is meant to be a barrier to conception.

But it has since become apparent that emergency contraception does more than block conception. The authors of a recent article in the *Annals of Pharmacotherapy*, for instance, contend that emergency contraception often fails to stop conception from taking place. In such cases, emergency contraception is effective because it produces another result: it causes the destruction of an already-fertilized egg — a human embryo. According to the authors, “morning-after pill drug regimens may cause the death of a living embryo by blocking its attempts to attach inside the uterus.”⁶⁴ The authors argue that the blocking of embryo implantation may account for “13-38% of the estimated effectiveness” of emergency contraceptives.⁶⁵ UNFPA has acknowledged this as well; a UNFPA report from 1998 concludes that emergency contraceptives alter “the endometrium, making it unsuitable for a fertilized ovum to implant.”⁶⁶

So it is clear, at least, that emergency contraception is not mere contraception. In fact, when it prevents implantation, emergency contraception is an abortion, since it results in “the death of a living embryo.” As one professor of medicine, Doctor Ralph Miech, bluntly states, “This type of pill causes an abortion. From a pharmacological perspective, this type of pill should be called an ‘abortion-after pill [instead of a morning-after pill].”⁶⁷ But UNFPA refuses to accept this basic medical fact; UNFPA refuses to stop calling these pills contraceptives. UNFPA refuses to acknowledge that it must have made a mistake, that what it thought were contraceptives were really abortifacients, and that new research confirms this. And UNFPA has refused to stop distributing these abortifacients.

Instead, in conjunction with the World Health Organization (WHO), UNFPA has simply redefined the terms of early pregnancy, redefined the terms of abortion, and redefined the terms of human life, itself. Most importantly, UNFPA has redefined abortion from the destruction of an unborn child (at any stage of development) to the termination of a pregnancy.⁶⁸ This may appear

64 Chris Kahlenborn, M.D., Joseph B. Stanford, M.D., MSPH, and Walter L. Larimore, M.D., “Postfertilization Effect of Hormonal Emergency Contraception,” *The Annals of Pharmacotherapy*, March 2002. As quoted in “The Abortion-After Pill, Why ‘Emergency Contraceptives are Misnamed,’” *Zenit* news agency, February 9, 2002.

65 Kahlenborn, et. al., as quoted in *Zenit*.

66 Ali Kubba, MD, and Chris Wilkinson, M.D., “Recommendations for Clinical Practice: Emergency Contraception,” UNFPA, 1998. As quoted in “The Abortion-After Pill, Why ‘Emergency Contraceptives are Misnamed,’” *Zenit* news agency, February 9, 2002.

67 Professor Ralph Miech, M.D., as quoted in *The Providence Journal*, August 3, 1999.

68 www.unfpa.org/about/faq.htm (accessed August 13, 2002).

to be a minor distinction, but it allows UNFPA to transform the debate. For, if abortion is the termination of pregnancy, all UNFPA must do is to argue that *pregnancy* begins at *implantation*. If pregnancy begins at implantation, and emergency contraceptives stop implantation, then emergency contraceptives stop pregnancy from occurring. They are, therefore, contraceptive in nature rather than abortive in nature. This argument is apparent in a 1999 UNFPA press release, which explains that “Emergency contraception — also known as the ‘morning-after pill’ — is an elevated dose of birth control pills that prevents pregnancy when taken within 72 hours of intercourse. Emergency contraception prevents pregnancy beginning but cannot interrupt an established pregnancy. Emergency contraception is not the drug mifepristone, or RU-486, which induces abortion. RU-486 is not distributed by UNFPA. UNFPA does not provide support for abortion services anywhere in the world.”⁶⁹ So UNFPA can now provide abortion without calling it abortion.

What is more, because UNFPA calls this contraception, and the *right* to contraceptives has been accepted by the world community, UNFPA has created a *de facto* right to abortion. For example: “emergency contraceptives do not interrupt pregnancy but rather prevent it, and thus their use is not a form of abortion. Women have the *right* to information and services on emergency contraception just as with all other safe and effective methods of family planning.”⁷⁰

This line of reasoning shifts the focus away from the embryo. In fact, it seems to create a short span of time — between conception and implantation — in which the embryo deserves no protection, since it has not yet had the good fortune of implantation. It is implantation — what UNFPA considers the start of pregnancy — that now counts. And if there is any lingering concern for this un-implanted or pre-implanted creature, UNFPA seeks to undermine it even further: in UNFPA parlance, such a creature is no longer called an embryo, but a pre-embryo.⁷¹

It should be emphasized that none of these changes has been made in response to advances in biological research; they have been made to fit the political needs of the moment. Through the shift to implantation, UNFPA can continue to call the pills contraceptives, and that is all that seems to matter. In fact, by protecting these pills through such linguistic slight-of-hand, UNFPA threatens the informed consent of the women to whom it provides them. As

69 UNFPA Press Release, April 15, 1999. Also note the repetition of the non-abortion mantra in the final sentence.

70 www.unfpa.org/about/faqs.htm. Emphasis added. (accessed August 13, 2002).

71 Dr. Richard Walley, as quoted in “Pro-life OB-GYNs Left Out in the Cold, MaterCare Founder Robert Walley Hopes to Change That,” *Zenit* news agency, May 1, 2001.

the authors of the article in the *Annals of Pharmacotherapy* make clear, women should possess unbiased medical information about medical procedures.⁷² Quite simply, some women would not take emergency contraceptives if they really knew what they do, that they often destroy living embryos.

UNFPA vigorously attacks the motives of those who criticize its distribution of emergency contraceptives, as if the situation is without a hint of ambiguity, as if UNFPA never had to advance new terms and new arguments to bolster the legitimacy of the pills. For instance, after the Vatican criticized UNFPA distribution of emergency contraceptives to refugee women in Kosovo, UNFPA Executive Director Sadik declared that “I am surprised and disappointed by the Vatican’s statement condemning the provision of emergency contraception to the Kosovo refugees. It shows an insensitivity to the suffering of women. . . . UNFPA, working through the Albanian ministry of health and Non-governmental Organizations, can provide rape victims with emergency contraception to prevent them becoming pregnant. . . . The women of Kosovo need our support and care, not condemnation.”⁷³ But the Vatican never criticized — let alone condemned — the women of Kosovo. In fact, there was little indication that the women of Kosovo even wanted emergency contraceptives.⁷⁴ The Vatican criticized UNFPA for its actions, actions that it believes further traumatized these women. Sadik sought to deflect this criticism by stating that the Vatican was condemning women, that the Vatican was insensitive to their plight. In the following quotation, Sadik finds an even more interesting flaw in the character of critics of emergency contraceptives:

[Some people] try to equate abortion with family planning. They are trying to demonize family planning and modern methods of contraceptives. Some governments somehow start to think the two are linked, which is not true. The same thing happened at ICPD with emergency contraception — that it was abortion and therefore should not be allowed. WHO declared it is prevention of pregnancy/conception, not an abortion. So many countries provide emergency contraception it’s part of the normal program, but still it’s such a hot item. It’s linked to sexuality and sexual activity, so if someone has had a sexual relation they must somehow pay a penalty for it. That’s the mindset. It’s only the woman who gets pregnant, so the woman must pay for it.⁷⁵

72 Kahlenborn, et al.

73 UNFPA Press Release, April 15, 1999.

74 Austin Ruse, “Potemkin Villages in Kosovo,” *Catholic World Report*, August 1999.

75 Nafis Sadik, as quoted in December 2000 interview, Centre for Development and Popu-

Since UNFPA continues to call these pills contraceptives, it feels no qualms in distributing them all over the world; emergency contraceptives have become a normal component of UNFPA programs.⁷⁶ Wherever one looks, one seems to find this expansion of UNFPA services. In Mongolia, for example, UNFPA matter-of-factly reports that “...it has continued to provide a wide range of contraceptives and medical supplies to the country. UNFPA is considering widening the choice further by introducing emergency contraceptives...”⁷⁷ Here, there seems to be no need to justify emergency contraceptives; there is no refugee crisis, no reports of widespread rapes, certainly no population explosion.⁷⁸ For UNFPA, emergency contraceptives have entered the panoply of acceptable reproductive health services; it is a service that the women of Mongolia deserve just as much as any women, in any country, deserve. It is a right that should be respected and promoted. And if UNFPA’s reach extends all the way to Mongolia, it is simply impossible to estimate just how many abortions UNFPA is directly responsible for with the distribution of emergency contraceptives.

The number of UNFPA abortions grows even larger because of UNFPA’s involvement with intrauterine devices. IUDs, metal or plastic devices inserted into the woman’s uterus, are designed to cause inflammation, thereby making it inhospitable to the embryo. Indeed, IUDs often stop living embryos from implanting in the uterus; a UNFPA report acknowledges this fact, stating that IUDs have the same effect on embryos as emergency contraceptives.⁷⁹ But, not surprisingly, nowhere does UNFPA call this an abortion, nowhere does UNFPA acknowledge that the destruction of an embryo has always been considered an abortion, until UNFPA decided to transform the terminology to implantation and “pre-embryos.” Thus, women all over the world are destroying already-conceived human beings — they are having abortions — while thinking that they are stopping conception. This would seem to violate women’s most basic human rights to knowledge and informed consent, rights to which UNFPA continually swears allegiance.

This chapter began with a suspicion, a suspicion that UNFPA’s

lation Activities, www.cedpa.org/newsletter/dec2000/sadik.htm (accessed August 13, 2002).

76 www.uscommittee.org/issue1_1_1.html (accessed August 13, 2002).

77 UNFPA background information on Mongolia, www.unfpa.org/regions/apd/countries/mongolia.htm (accessed August 13, 2002).

78 Mongolia is one of the most sparsely populated countries on earth.

79 Kubba and Wilkinson.

denials were not sincere, that what the US Committee for UNFPA labeled the “strict” non-abortion policy was not what it seemed. Throughout

It is now clear that UNFPA wants women to have abortions, even if it must misinform women, even if it must transform established medical and biological facts, and even if it must violate national laws in the process.

the chapter, we have moved from evidence of indirect involvement in abortion to evidence of direct involvement; we have moved from belief in abortion as a fundamental human right, to advocacy for abortion and dissemination of abortion information, to the distribution of abortion drugs and abortion devices. Throughout, the techniques and practices of UNFPA have

become apparent: deny, and continue to deny; sow confusion; change the debate, and the vocabulary of the debate. If “pregnancy termination kit” is too explicit, change the name. If “embryo” is too powerful a term, use “pre-embryo.” If something causes an abortion, call it a contraceptive anyway. It is now clear that UNFPA wants women to have abortions, even if it must misinform women, even if it must transform established medical and biological facts, and even if it must violate national laws in the process. This is the worldwide promotion of abortion, protected by a thin veneer of sophistry. Perhaps most importantly, we have seen how UNFPA seeks to establish a right to abortion by calling abortion contraception.

In the next chapter, we will investigate UNFPA’s NGO partners. We will see that UNFPA involvement with NGOs constitutes its most effective sophistic sleight-of-hand. UNFPA simply provides others with money to do the things it should not do (and says it does not do): to perform abortions and to advocate for abortions.

NGO’s and the Dispersal of Responsibility

During 1998-1999, UNFPA gave \$69.4 million to NGOs, which amounted to 17.2 percent of the total UNFPA spending for that period.⁸⁰ Throughout UNFPA’s history, contributions to NGOs have always comprised a large part of the UNFPA budget. As UNFPA states, “The Fund

80 “Financial report and audited financial statements for the biennium ended 31 December 1999 and report of the Board of Auditors,” UNFPA, September 21, 2000, A/55/5/Add. 7.

places great importance on building partnerships with NGOs.”⁸¹ Why this emphasis on NGOs? To carry out programs, certainly, but NGO funding also allows for a dispersal of responsibility. Giving money to local NGOs counters potential charges that UNFPA is engaging in a kind of cultural imperialism, that it is imposing its values on others.⁸² Giving money to NGOs, and thereby spreading population programs among many different organizations, makes it more difficult for critics to monitor those programs. Giving money to NGOs, who operate autonomously from UNFPA, allows UNFPA to distance itself from the most controversial actions of the NGOs.

In 2000 Sadik stated that “NGOs are a key part of our work. That’s why... we have to increase the partnerships with as many groups as possible. I think some countries see NGOs as a threat, but I think that’s not true. For issues that are difficult and emerging, NGOs are the best partners we can have. They are willing to take risks that governments certainly won’t, even UN organizations won’t, but [governments and UN organizations] can finance it.”⁸³ Sadik clearly considered it UNFPA’s role to finance NGOs in the pursuit of “difficult and emerging” issues.

Thus, any study of UNFPA must include a study of its NGO partners, and the “difficult and emerging” issues they decide to champion. Three points become apparent through such a study. First, UNFPA funds groups that engage in practices UNFPA is restricted from doing, itself. Second, these NGOs often employ the same vocabulary as UNFPA — “safe abortions,” “menstrual regulation,” “pregnancy termination” — but they explain what the vocabulary means, and what they hope to achieve through the use of this vocabulary; NGOs can explicitly state what UNFPA must only imply.⁸⁴ Third, UNFPA actions performed by the NGOs it funds. But this argument loses credibility when it is discovered just how many of UNFPA’s NGO partners promote or perform abortions. After all, one is judged by the company one keeps.

UNFPA’s closest collaborator is the International Planned Parenthood Federation. When UNFPA would like to signal its special affinity for another organization, it signs what it calls a “memorandum of understanding” with that organization. UNFPA has signed at least two such documents with

81 “UNFPA, Estimates for the Biennial Support Budget for 2002-2003,” September 2001, DP/FPA/2001/10, page 49.

82 This also allows the countries funding UNFPA to avoid the charges of cultural imperialism. They are then two steps removed from actual programs.

83 www.cedpa.org/newsletter/dec2000/sadik.htm (accessed August 13, 2002).

84 And the very fact that the NGOs’ strategies and goals match those that we have inferred from UNFPA’s more obscure statements, must bolster our confidence that these inferences were correct.

IPPF, one of which calls “for the convening of joint meetings between UNFPA and IPPF...; collaborating more at the field level...; and exploring the possibility of developing collaborative regional, interregional and global activities.”⁸⁵ A UNFPA press release recording one of the signings highlights UNFPA and IPPF’s “common goals,” and UNFPA’s Executive Director and IPPF’s Secretary General have proclaimed in a joint statement that “...cooperation is now particularly crucial since the objectives of our two organizations in the area of reproductive health, including family planning and sexual health, are converging now more than ever before.”⁸⁶ From all of this, it appears as if IPPF’s goals are identical to UNFPA’s goals. These

UNFPA denies responsibility for the abortions performed by the NGOs it funds. But this argument loses credibility when it is discovered just how many of UNFPA’s NGOs promote or perform abortions.

memoranda of understanding are documents of unqualified support.

IPPF was founded in Bombay, India, in 1952. IPPF is a federation of worldwide family planning associations (FPAs), with 139 family planning associations operating in over 180 countries.⁸⁷ According to IPPF, its “main strength is that it is a unique federation of

voluntary and autonomous FPAs, who, while operating within their own cultural, social and legal setting, are linked to Federation through common standards and objectives. Each FPA is run by local staff and volunteers...”⁸⁸ Note, here, the further dispersal of responsibility: UNFPA provides money to IPPF,⁸⁹ a distinct and autonomous NGO; IPPF then divides this money among “voluntary and autonomous” FPAs, who use the money for their own specific programs. Within this framework, UNFPA is now two steps removed from responsibility over how its money is spent.

IPPF promotes the legalization of abortion-on-demand in every country in which it operates. A constant theme from IPPF conferences is the need to liberalize “restrictive” abortion laws. For example, at a 1994

85 “UNFPA and IPPF Sign Memorandum of Understanding,” Dispatches – News from UNFPA, No. 9, September 1996.

86 Ibid.

87 www.ippf.org/about/what.htm (accessed August 13, 2002).

88 www.ippf.org/about/what.htm (accessed August 13, 2002).

89 UNFPA gives IPPF about \$1 million a year. “Notes to the Financial Statements for the Year Ended 31 December 2000,” IPPF.

conference held in Mauritius, IPPF examined the legislation of every country in Africa, highlighting those countries with “restrictive” or “very restrictive” laws on abortion. Specific strategies were then developed for each country, in order to “decriminalize abortion through revision of existing laws.”⁹⁰

UNFPA does not provide itemized accounts of its donations to IPPF; we do not know how its money is used once it arrives at IPPF. But to the extent that UNFPA funds are spent on this cause — abortion advocacy — UNFPA is in violation of its own policy. This policy, as stated in the ICPD Programme of Action, holds that “Any measures or changes related to abortion within the health system can only be determined at the national or local level according to the national legislative process.”⁹¹ UNFPA has never distanced itself from this aspect of IPPF activities, never criticized this advocacy, and never set up separate accounts to ensure that its donations to IPPF are not used for this purpose.

IPPF trains people to perform abortions, provides equipment for abortions, and establishes its own clinics to carry out abortions. In fact, IPPF has often been called the world’s largest abortion provider. UNFPA does not explain how it “strictly” adheres to its non-abortion policy despite its partnership with a worldwide abortion provider. The money keeps flowing, unregulated and uncontrolled, and the collaboration between IPPF and UNFPA keeps growing. What does it say about one’s own organization if its objectives “are converging now more than ever before” with a global federation of abortion clinics?

As we have seen, UNFPA publicly claims that family planning and abortion can be kept distinct; a wall can be constructed between family planning services and abortion services. IPPF, however, vehemently rejects this notion of separation. When US law⁹² stipulated that IPPF had to abandon its provision of abortion, on pains of losing its US funding for other reproductive services, IPPF decided to sacrifice the funding. In 1985, Daniel Weintraub, Vice-President for international programs for the Planned Parenthood Federation of America, an affiliate of the IPPF, explained the federation’s reasoning:

I know that there are some people in our own country ... who

90 IPPF Mauritius Conference, 1994. As quoted in “Abortion for All: How the International Planned Parenthood Federation promotes abortion around the world,” Population Research Institute, www.pop.org/reports/abortall.html (accessed August 13, 2002).

91 ICPD Programme of Action, paragraph 8.25.

92 The US Mexico City Policy.

sincerely believe that we should compromise, we should accept the Administration's [Mexico City] policy. And the argument goes that 'after all abortion in our international programs is only a small percentage of our entire program. Strategically we would be better off to try to save family planning by giving up abortion. 'Well, I tell you that these people are wrong ... One of the principles of the Planned Parenthood Federation of America is that reproductive freedom is indivisible. You either have it or you don't.⁹³

PPFA and IPPF could not abandon abortion, because they hold abortion to be a fundamental human right, indivisible from other human rights. Without the right to abortion, it would be impossible to claim that women fully possessed reproductive rights.

Thus, if UNFPA followed its own policy, if it demanded that its NGOs abstain from abortions, or, at the very least, not spend UNFPA funds on abortions, we could expect IPPF to react in a similar way: with outrage and defiance. We could expect IPPF to angrily reject UNFPA money, on the grounds that accepting this money would force IPPF to compromise its core beliefs. But IPPF never rejected UNFPA funding. We must conclude, therefore, that UNFPA makes no such demands on IPPF, that UNFPA simply does not enforce its non-abortion policy when funding NGOs.

In the last chapter, it was suspected that one reason UNFPA discussed early abortion was because early abortion is the least controversial form of abortion; in this way, a society can slowly become acclimated to the idea of abortion. In 1994, Dr. Richard Turkson, legal counsel for IPPF's Africa Region, described this very strategy: "Legal reforms will have to take the form of a gradual expansion in the scope of permissible abortions until the exceptions become the general rule and vice versa."⁹⁴

In the last chapter, we questioned UNFPA's true commitment to national sovereignty. We were especially concerned about UNFPA's discussion of menstrual regulation within societies with restrictive abortion laws. UNFPA's association with IPPF seems to confirm these suspicions, for IPPF routinely and deliberately disregards national sovereignty and national abortion laws. According to IPPF, "[Family Planning] Associations should operate right up to the edge of what is legal and sometimes even beyond where the law is uncertain or out of tune with public opinion. While a government gains short term respect by being respectable, a voluntary

93 Daniel Weintraub, Planned Parenthood legislative conference, Madison, Wisconsin, March 12, 1985. As quoted in "Abortion for All..."

94 Dr. Richard Turkson. As quoted in "Abortion for All..."

body may gain long term respect by being responsibly disreputable.”⁹⁵ IPPF also believes that “Family Planning Associations ... should not use the absence of law or the existence of an unfavorable law as an excuse for inaction: Action outside the law, and even in violation of it, is part of the process of stimulating change.”⁹⁶ And, finally, one IPPF official has claimed that “There are some laws that can and should be broken ... restrictive abortion laws ... are as obsolete and irrelevant to the contemporary world as the New York State statute which makes it a crime to have a deck of cards in an apartment within a one-mile radius of an armory.”⁹⁷

IPPF does not merely advocate law-breaking; it engages in law-breaking, as well. The key, as we have already suspected, is menstrual regulation and the use of manual vacuum aspirators. As early as 1970, IPPF director Malcolm Potts acknowledged the great usefulness of menstrual regulation in circumventing national abortion laws:

Using the name “menstrual regulation” alters the name of the game...It is not practical to write about abortion in a Bangladesh newspaper in a straightforward way, but it has proved acceptable to hold a much-publicized conference on menstrual regulation in Dacca...It is not prudent to have even a whispered discussion of the role of abortion in family planning in the Philippines; but it generates immediate and widespread interest to discuss menstrual regulation...Menstrual regulation is probably safer than any other pregnancy termination procedure...there will be no proof of pregnancy unless the tissue removed from the uterus is subjected to microscopic examination. The point is of crucial importance in countries where abortion is illegal.⁹⁸

Quite simply, it’s hard to prove a homicide without a body: that is the great advantage of menstrual regulation “where abortion is illegal.”

IPPF has brought manual vacuum aspirators into a number of

95 IPPF, “The Voluntary Sector in Population and Development,” London, 1979. As quoted in “Abortion for All...”

96 IPPF, *The Human Right to Family Planning*. As quoted in “Abortion for All...”

97 Malcolm Potts, M.D., director of IPPF, “Population Growth and Abortion,” in Gerald I. Zatuchni, John J. Sciarra, and J. Joseph Speidel (editors), *Pregnancy Termination: Procedures, Safety and New Developments*, (New York: Harper & Row Publishers, 1979), page 424. As quoted in “Abortion for All...”

98 Malcolm Potts, Peter Diggory and John Peel, *Abortion*, (London: Cambridge University Press, 1970), pages 230-232. As quoted in “Abortion for All...”

countries where abortion is against the law, including the Philippines, Kenya and Bangladesh.⁹⁹ In these countries, IPPF clinics perform thousands of abortions using these devices, even though IPPF knows its activities are against the law. As one IPPF publication puts it, “Let us not wait for the [abortion] law to change [in Kenya], let us do what we can even before the law changes.”¹⁰⁰

Thus, abortions are performed by an organization that receives money from UNFPA, and by an organization that works in close conjunction with UNFPA. These abortions are, at least some of the time, illegal, and IPPF knows that they are illegal. In fact, IPPF makes no secret of this illegality, even highlights this illegality as a testament to its unwavering commitment to reproductive rights. There is no record that UNFPA disapproves of such law-breaking, or that UNFPA has asked IPPF not to employ UNFPA funds for such law-breaking. Thus, we must conclude that, since UNFPA chooses not to condemn these actions, UNFPA must condone them.

UNFPA chooses other abortion advocates and abortion providers as its NGO allies. One such NGO is the IWHC, which UNFPA labels one of its “major civil society partners.”¹⁰¹ According to its website, IWHC works in close conjunction with UNFPA: “During the past ten years, IWHC has mobilized large, informal coalitions of progressive nongovernmental organizations for international negotiations, most recently in 2000 for the five-year review of the Fourth World Conference on Women. UN agencies, notably the United Nations Population Fund...have come to rely on us to provide gender-sensitive technical and policy assistance.” Just what is IWHC whispering in the ears of UNFPA executives? Of what does this technical and policy assistance consist? Quite literally, IWHC illustrates how to use the language of United Nations documents to establish abortion as an internationally recognized human right.

In a report entitled “Expanding Access to Safe Abortion: Strategies for Action,” IWHC admits that no United Nations documents “explicitly assert a woman’s *right* to abortion, nor do they *legally* require safe abortion

99 Donald Page Warwick, “Foreign Aid for Abortion” The Hastings Center Report, Volume 10, Number 2, April 1980, page 33. As quoted in “Abortion for All...”

100 Khama Rogo, IPPF, as quoted in “Abortion for All...”

101 www.unfpa.org/adolescents/partners.htm (accessed August 13, 2002). After providing a list of these NGO partners, UNFPA includes this disclaimer: “These links are for information purposes only and do not imply UNFPA endorsement of any material on other organization’s sites.” Of course, if UNFPA did not approve of the beliefs, statements or agenda of these organizations, it is doubtful it would highlight them as especially significant collaborators, as “major partners.” This disclaimer appears to be another example of UNFPA’s dispersal of responsibility strategy.

services.”¹⁰² But, according to IWHC, “Despite these qualifications... the conference documents and human rights instruments — if broadly interpreted and skillfully argued — can be very useful tools in efforts to expand access to safe abortion.”¹⁰³ In other words, even though UN documents do not recognize abortion as a right, and even though UN documents do recognize the sovereignty of national governments to set abortion laws, these very same documents can be used to establish the international right to legal abortion. According to IWHC, the key to this seeming alchemy is to expand the definitions of already-accepted human rights norms. For example, the right to life, the first right enumerated in the Universal Declaration of Human Rights, can be expanded to include a right to legal abortion: since *illegal* abortion poses a threat to women’s lives, a right to life must include a right to *legal* abortion.¹⁰⁴ Similarly, “the right to security of person can be interpreted to mean that women must not be coerced...to carry a pregnancy to term.”¹⁰⁵

Of course, member states did not agree to the interpretations of these rights when they negotiated, signed and ratified the documents in which they are found. Thus, what IWHC recommends is a deliberate *misreading* of the texts. And this misreading matters for a very simple reason: if abortion comes to be recognized as an international right, governments may feel obliged to honor this right. IWHC understands the connection between rights and governmental obligations: “The right to life would imply that abortion services must be provided for women whose lives are endangered by pregnancy. A country could be in violation of this right if it refuses to protect women from risk of death or disability resulting from unsafe abortion.”¹⁰⁶ In fact, IWHC believes that this strategy “provides a strong basis for action to expand access to services, to liberalize laws and regulations, and to ensure the accountability of governments and international agencies.”¹⁰⁷ It should now be clear that our initial concern about national sovereignty was justified; the strategy described by IWHC is not diplomacy; it is trickery. And since UNFPA relies upon IWHC for policy advice, it is certainly within the realm of possibility that this describes the strategy of UNFPA, as well.¹⁰⁸

102 Adrienne Germain and Theresa Kim, “Expanding Access to Safe Abortion: Strategies for Action,” International Women’s Health Coalition, 1999, page 5.

103 Ibid.

104 Ibid.

105 Ibid.

106 Ibid.

107 Ibid.

108 States should therefore possess little confidence that they understand the ramifications

IWHC also provides more direct guidance on the assault on national sovereignty — guidance on how to circumvent restrictive national abortion laws already in place. One way to do this involves expanding what counts as legal abortion, even if this expansion was not intended by legislators. For instance, if abortion is legal in the rare instances in which it is necessary to save the life of the mother, “providers can adopt a broader definition of what constitutes a threat to a woman’s life by considering the risk of death if she seeks a clandestine procedure or tries to abort herself.”¹⁰⁹ In other words, the normal understanding of the risk of maternal death — what would occur if a pregnancy continued — should be replaced with a new understanding of the risk of death — what would occur if a pregnancy were terminated improperly. In this way, a law meant to address an extremely small number of cases could be used to justify all abortions, at all times.

IWHC also advocates for menstrual regulation.¹¹⁰ According to IWHC, menstrual regulation is one of the “loopholes under which safe abortion can be provided even in settings where laws are restrictive.”¹¹¹ Menstrual regulation appears to be a loophole because nations do not seem to know that menstrual regulation is abortion, because it can be performed before pregnancy has been definitively established, and because the destroyed embryos are usually too small to distinguish from other uterine material. And as we have already seen, IWHC cherishes *illegal* menstrual regulation so much that it would rather stifle debate on the legalization of abortion, if such a debate would alert authorities that these menstrual regulation abortions are already taking place within their societies.¹¹²

Another “civil society partner” of UNFPA is the Center for Reproductive Law and Policy (CRLP), former UNFPA Executive Director Sadik’s new group.¹¹³ CRLP is a legal-advocacy NGO; its ultimate goal is to ensure that abortion is legal in every country in the world. In a recently-filed lawsuit against the Bush Administration, CRLP explained its attempts to achieve this goal; like IWHC, it employs United Nations documents. According to CRLP, if phrases such as “reproductive rights” are mentioned enough times in UN conference and convention documents, they become part of the “customary international law.” And, once reproductive rights like abortion

of the documents created during UN conferences. By signing these documents, countries may be pledging themselves to much more than they know.

109 Germain and Kim, pp. 7-8.

110 Ibid.

111 Ibid.

112 Ibid.

113 www.unfpa.org/adolescents/partners.htm (accessed August 13, 2002).

are deemed customary international law, the recognition of reproductive rights could become binding on all countries, regardless of whether those countries signed or ratified the individual UN documents in which the phrases are found.¹¹⁴ In the US lawsuit, CRLP asserts that "...generally recognized international legal norms may, if endorsed and accepted by the vast majority of nations, become part of customary international law and thus binding on the US even if it does not ratify or endorse those norms."¹¹⁵ This particular strategy constitutes a two-step assault on sovereignty. First, some countries may not know that language such as reproductive rights and reproductive services includes abortion, or could be expanded to include abortion. Second, the simple aggregation of such language could be used to supercede the legitimate, and legitimately-derived, laws of individual nations.¹¹⁶

According to UNFPA, an NGO named Pathfinder International is one of its "major partners in supporting adolescent well-being."¹¹⁷ In fact, UNFPA endorses Pathfinder's activities so highly that it gave Pathfinder the 1996 UN Population Award, its highest honor.¹¹⁸ Pathfinder has been deeply involved in the introduction of menstrual regulation in countries around the world. According to Pathfinder, for instance, "In the late 1970s... in Bangladesh, Pathfinder supported clinical training for physicians and midwives in menstrual regulation (MR) techniques..."¹¹⁹ Today, Pathfinder continues to focus on menstrual regulation, providing widespread training in the use of manual vacuum aspirators.¹²⁰

UNFPA also works with Marie Stopes International (MSI). UNFPA is providing MSI with funds to carry out UNFPA's current program in China.¹²¹ MSI operates abortion clinics worldwide; it has opened abortion clinics close to airports in England, so that Irish women can fly in, have abortions, and fly out, all in a single day.¹²² MSI also provides menstrual

114 This strategy becomes even more significant as enforcement bodies like the International Criminal Court come into existence.

115 United States District Court Southern District of New York, *The Center for Reproductive Law & Policy vs. George W. Bush, Colin Powell and Andrew Natsios*.

116 CRLP has engaged in this pursuit as a kind of insurance policy, in case *Roe vs. Wade* were overturned. The suit was dismissed for lack of standing.

117 www.unfpa.org/adolescents/partners.htm (accessed August 13, 2002).

118 Populi, the UNFPA magazine, Vol. 23, No. 1, March 1996.

119 Sheila Webb, "Addressing the Consequences of Unsafe Abortion," *Insights from Pathfinder Program Experience*, 2000. Pathfinder International webpage.

120 *Ibid.*

121 www.mariestopes.org.au/china.html (accessed August 13, 2002).

122 www.mariestopes.org (accessed August 13, 2002).

regulation in developing countries, including (again) Bangladesh and Kenya.¹²³

UNFPA has a symbiotic relationship with NGOs. NGOs provide UNFPA with two essential things: first, NGOs possess in-country capabilities, such as offices, clinics and personnel. It is NGOs (along with national governments) that possess the infrastructure necessary for a worldwide family planning/population control revolution, not UNFPA. Second, NGOs possess the political freedom for explicit and determined advocacy. UNFPA must promote abortion with a wink. UNFPA can mention all of the reasons for legal abortion — safety of the woman, reproductive freedom, etc. — but it must avoid the obvious conclusion: that abortion should be legal. NGOs, on the other hand, can state outright that safe abortion is legal abortion, that abortion is a fundamental human right, and that the international community should finance abortions throughout the developing world. In short, what is deliberately ambiguous, and therefore necessarily muted, in UNFPA statements can be clear in NGO statements, can be, in fact, veritable clarion calls.

UNFPA, in turn, provides two things essential to NGOs: money and a world-wide stage. The money is important for obvious reasons; more money means more clinics, more contraceptives and more abortions. But the world stage is also fundamental. UNFPA tailors its conferences to provide the optimum amount of exposure to its NGO allies; if UNFPA cannot say what it would like to say, it can, at least, focus the attention of the world's media on those who can. Without UNFPA, these NGOs would be forced to toil and labor in much greater anonymity, the impact of their message blunted.

Multiple NGO partners call for the reinterpretation of UN documents; multiple NGO partners call for the circumvention, if not outright breaking, of national abortion laws; multiple NGO partners advocate and perform menstrual regulation, thereby breaking national abortion laws themselves; multiple NGO partners operate abortion clinics, and perform abortions on a massive scale. These are the groups that UNFPA funds, collaborates with, even celebrates. These are the groups upon which UNFPA bestows awards, the groups it calls its “major civil society partners.”

123 Mindy Belz, “It takes more than a village to depopulate one,” *World on the Web*, www.worldmag.com/world/issue/02-20-99/international_1.asp (accessed August 13, 2002).



Part II

China's One-Child Policy

The question is not whether the Chinese One-Child Policy has constituted an enormous assault upon the women, children and families of China. On this point there is, now, virtually no disagreement. Nor is the question whether UNFPA has been active in China: it has worked in China for over twenty years, since the planning stages of the One-Child Policy.¹²⁴ The important question, instead, concerns UNFPA's responsibility for the One-Child Policy. Why did UNFPA become involved in China? What has it done in China? When did UNFPA learn of coercion within the Chinese population control program? Did UNFPA denounce this coercion? Did UNFPA demand changes from the Chinese government? In short, what were UNFPA's responsibilities in the face of credible and persistent evidence of human rights abuses, and did UNFPA act upon these responsibilities? To answer these questions will be to establish the complicity of UNFPA in the Chinese human rights crimes.

Article 49 of the Constitution of the People's Republic of China stipulates that "Each married couple is obliged to practice family planning."¹²⁵ Couples have no choice in this matter; family-planning is a responsibility, a duty enshrined in the state's most important document. And the desired outcome of family-planning is also determined by the state: couples are supposed to have one child, and one child only; the intention of the Chinese government has been to make brothers and sisters illegal, and therefore nonexistent.¹²⁶

The One-Child Policy was adopted in 1979, and, according to the goals of the Chinese government, it has proven to be enormously successful. Since 1979, the fertility rate — the average number of children per woman —

124 Chinese State Family Planning Commission, www.spfc.gov.cn/en/basicview.htm (accessed August 13, 2002).

125 Ibid.

126 At the time of its inception, Chinese officials justified this program by citing China's expanding population. According to the government, population growth was simply incompatible with continued economic growth.

has declined from 4.8 to 2.0,¹²⁷ and the annual population growth rate has fallen to less than one percent. The population in 2000 was approximately 1.27 billion, and there is evidence that it will stabilize, perhaps even decline, within the next few decades.¹²⁸

The Chinese government has achieved these results by a massive investment in reproductive services, in abortions, sterilizations, and

Once a woman has delivered her state-approved child, she is required by law to have an intrauterine device inserted. If a woman has somehow managed to have two children, either she or her husband is required by law to be sterilized.

contraceptives. The heart of the system is the requirement that women must acquire state permission for their pregnancies, and permission is granted only for a first child.¹²⁹ Other reproductive laws include: If a woman is deemed mentally or physically deficient by the state, either she or her husband is required by law to be sterilized.¹³⁰ If a woman is found to be pregnant without governmental approval, she is

required by law to have an abortion.¹³¹ Once a woman has delivered her v, she is required by law to have an intrauterine device inserted. If a woman has somehow managed to have two children, either she or her husband is required by law to be sterilized.¹³²

These regulations constitute violations of internationally recognized

127 “Replacement rate” fertility is usually considered to be 2.1 children per woman.

128 “United Nations Population Fund Proposed Projects and Programmes,” Executive Board of the United Nations Development Programme and of the United Nations Population Fund, DP/FPA/CP/196.

129 For instance, above the door of the planned birth office in Fujian hangs a sign that reads: “No permit, no marriage; no permit, no pregnancy; no permit, no baby.” At different times, there have been exceptions to this rule, especially for families on farms. Corruption is also endemic; women can sometimes bribe officials to allow a second pregnancy to continue.

130 *New Scientist*, October 24, 1998. For instance, Article 22 of the 1990 birth-control regulations for Henan Province states that “Couples who have suffered from serious hereditary diseases, including mental disease, hereditary mental incapability, hereditary deformity, and so on are strictly prohibited from having children.”

131 Michael Weisskopf, “Abortion Policy Tears at China’s Society,” *The Washington Post*, January 7, 1985.

132 “China’s Coercive Birth Control Programs,” www.tibettruth.com/indextibet.html (accessed August 13, 2002).

human rights. And it must be emphasized that these are *laws*, not recommendations; as such, the Chinese government has established sanctions for their violation. If women are reluctant to follow these laws — if they are reluctant to be sterilized or to abort their unborn children — the Chinese government punishes them with monetary fines, imprisonment, and mental and physical abuse.¹³³ The government may also imprison other members of women’s families.¹³⁴ These sanctions are intended to exert pressure on women to comply with the family planning regulations, and to accept the procedures. If women surreptitiously manage to have more than one child, the government continues to levy heavy fines, and it also refuses to grant identification to the unauthorized children, thereby making them ineligible for health care, schooling, and employment.¹³⁵ These children and their families are therefore forced to live in the shadows of Chinese society, paying for the crime of an illicit childbirth for decades.¹³⁶ The Chinese government tears down the houses of families with more than one child, thereby illustrating to the rest of the community just how severely it enforces its family planning laws.¹³⁷ Also, there have been numerous reports that Chinese officials have killed unauthorized babies shortly after birth, or have confiscated these babies and placed them in orphanages, where, in large numbers, they die of disease or starvation.¹³⁸

Chinese officials have made no attempts to hide the coercive nature of the population control program from the Chinese people; in fact, the government has attempted to promulgate knowledge of these punishments as a form of deterrence. In 1987, Communist Party Chairman Deng Xiaoping issued a public decree to government family planning officials: “In order to reduce the population, use whatever means you must, but do it!”¹³⁹ Coming from the most powerful man in China — the very heir to Mao Tse-Tung — this statement must be considered an emphatic endorsement of coercion, and a message to the people of China that coercion is sanctioned

133 US Department of State, Country Reports on Human Rights Practices for 1996, www.state.gov/www/global/human_rights/1996_hrp_report/china.html (accessed October 20, 2009)

134 Ibid.

135 Ibid.

136 The denial of official recognition or identification is an especially severe punishment in authoritarian regimes, where the state is involved in so many aspects of individuals’ lives. Policy.

137 Ibid.

138 “Death by Default, a Policy of Fatal Neglect in China’s State Orphanages,” Human Rights Watch, 1996.

139 Comments of Deng Xiaoping reported in *China Spring Digest*, 1987. As cited in “China’s Coercive Birth Control Programs.”

by the highest levels of the Chinese government. In 1989, another Chinese official stated that “Only coercive measures can be effective in alleviating the problems caused by [the] population explosion...”¹⁴⁰ In 1992, Chen Bangzhu, Deputy Governor of Hunan Province, told a radio audience that “All localities must exercise effective control...urban and rural areas must closely cooperate with one another and comb every household for unwanted pregnancies for which remedial action must be taken...”¹⁴¹ In 1993, a government publication stated that “It is necessary to forcibly sterilize those couples who have failed to use contraceptives.”¹⁴² Why would the government promulgate this information to its people? Chinese officials must have known that, to make millions of women abandon thousands of years of tradition concerning family structure and family size, and to accomplish all of this within a decade or two, punishment, and the threat of punishment, would be a necessary component of the One-Child Policy.

Nor has the Chinese government hidden the eugenic aspects of the family planning program: its desire to use family planning as a way to thin the ranks of undesirable minorities and people with physical and mental handicaps. In 1990, Chinese Premier Li Peng bluntly stated one of the justifications for eugenics: “Mentally retarded people will give birth to idiotic children.”¹⁴³ In 1991, a Chinese official described the policy based upon this belief: “The general rule is that idiots cannot marry unless they are sterilized.”¹⁴⁴ Some government officials exhibit pride in the state’s role in breeding a better generation of Chinese citizens; in 1992, Song Ping, the President of the Chinese Family Planning Association, proclaimed that China will “Raise the level of eugenics to a new height.”¹⁴⁵ In 1994, Peng Peiyun, Minister of the State Family Planning Commission, “called for forceful measures...to provide for better births and...improve the quality of the nation.”¹⁴⁶

140 Reported in *Economic Daily*, Beijing, January 24, 1989. As cited in “China’s Coercive Birth Control Programs.”

141 Comments of Chen Bangshu, Deputy Governor, Hunan Province, made on a PRC Radio broadcast, September 14, 1992. As cited in “China’s Coercive Birth Control Programs.”

142 *Politics and Law Tribune*, Beijing, April, 1992, pp. 89-93. As cited in “China’s Coercive Birth Control Programs.”

143 Comments of Li Peng, Chinese Premier, *China News Service*, April 1990. As cited in “China’s Coercive Birth Control Programs.”

144 *The New York Times*, August 15, 1991.

145 *Xinhua* news agency, November 20, 1992. As cited in “China’s Coercive Birth Control Programs.”

146 *Xinhua* news agency, November 20, 1994. As cited in “China’s Coercive Birth Control Programs.”

Thus, neither the means of the one-child policy — severe coercion, forced abortions and forced sterilizations, the killing of babies — nor the ends of the one-child policy — reduced population growth rate, improvements in the ‘quality’ of the population — have been hidden from the Chinese people.¹⁴⁷

The Western media first began to publish reports on the abuses of the One-Child Policy in the mid 1980s, about five years after the inception of the program. In 1985, the *Washington Post* published a three-part series on the population control program. According to the *Post* reporter, Michael Weisskopf, “China to be sure, is curbing its population growth, but its success is rooted in widespread coercion, mass abortion and intrusion by the state into the most intimate of human affairs....What emerges from more than 200 interviews spaced over three years with officials, doctors, peasants and workers...is the story of an all-out government siege against ancient family traditions and the reproductive habits of a billion people.”¹⁴⁸ Weisskopf registers shock at both the coercive tactics and the staggering scale of the program: “Any mother who becomes pregnant again without receiving official authorization after having one child is required to have an abortion, and the incidence of such operations is stunning — 53 million from 1979 to 1984, according to the ministry of Public health — a five-year abortion count approximately equal to the population of France.”¹⁴⁹ In 1993, the *New York Times* described some of the punishments meted out by family planning officials: “Villagers say that if they cannot pay the fine, the family planning officials confiscate a cow, a pig, an important farm tool or household belongings like furniture or television. Sometimes they simply smash the items, and often they knock down the house as well.”¹⁵⁰ Also in 1993, the *Washington Post* reported that “260,000 residents of Gansu province were sterilized because they were deemed to be ‘mentally retarded’ by the authorities.”¹⁵¹

Since the early 1980s, the US State Department’s annual report on China

147 It must be considered an indication of the Chinese state’s utter monopoly on power that the state would consider it helpful to disseminate this information, rather than to hide it. The Chinese government wants its people to believe that any struggle against this policy would be hopeless.

148 Weisskopf, 1985.

149 Ibid.

150 Shirley WuDunn, “Births Punished by Fine, Beating or Ruined Home,” *The New York Times*, April 25, 1993.

151 Steven Mufson, *The Washington Post*, December 22, 1993.

has chronicled these abuses.¹⁵² International human rights groups have interviewed many Chinese women, and have widely disseminated these women's allegations of human rights violations.¹⁵³ Some demographers have even attempted to calculate rough estimates of the number of forced abortions and forced sterilizations that have taken place in China — the macro-scale of this tragedy. According to Dr. John Aird, former research specialist on China at the US Census Bureau, between 1971 and 1985, there were approximately 100 million forced abortions and sterilizations.¹⁵⁴

The description of a single incident, however, may capture the barbarity of the policy better than mere numbers could. In 1998, Gao Xiao Duan, the former administrator of the planned birth office in Fujian Province, testified before the US House of Representatives, where she related this experience: "Once I found a woman who was nine months pregnant, but did not have a birth-allowed certificate. According to the policy, she was forced to undergo an induced abortion. In the operating room, I saw the child's lips were moving and how its arms and legs were also moving. The doctor injected poison into its skull and the child died and it was thrown into the trashcan. Afterwards the husband was holding his wife and crying loudly and saying, 'What kind of man am I? What kind of husband and I? I can't even protect my wife and child. Do you have any sort of humanity?'"¹⁵⁵ This is the nature of the Chinese One-Child Policy, multiplied millions of times.

UNFPA and China

China and UNFPA signed a Memorandum of Understanding in May, 1978.¹⁵⁶ As we have seen, a Memorandum of Understanding signals UNFPA's eagerness to cooperate with another party; a Memorandum of Understanding is a proclamation of common cause. But why would UNFPA endorse the goals of the One-Child Policy by issuing such a Memorandum? After all, UNFPA claims as a guiding principle that each woman should have fundamental control over the number and spacing of her children. So how could UNFPA participate in a program established for the very purpose of wresting such control away from individual women?

152 US Department of State, Country Reports on Human Rights Practices in China.

153 See, for instance, Human Rights Watch and the Population Research Institute.

154 As cited in "China's Coercive Birth Control Programs."

155 As cited in www.eugenics-watch.com/roots/chap15.html (accessed August 13, 2002).

156 Ministry of Foreign Affairs of the People's Republic of China, www.fmprc.gov.cn/eng/4465.html (accessed August 13, 2002).

There are two potential explanations for UNFPA involvement. First, it is possible that the Chinese government lied to UNFPA, and UNFPA chose to believe the assurances from this authoritarian regime, that it would implement history's most ambitious population-control program through voluntary measures, alone. Second, it is possible that UNFPA simply agreed with the Chinese government, that the population crisis was so severe that reducing fertility was an end that justified any means.

The second option appears more likely. Recent events like the Cultural Revolution had established the regime's taste for social engineering on a massive scale; it is difficult to imagine that UNFPA was blind to the amount of coercion the Chinese government was willing to employ. Indeed, UNFPA's initial involvement in China appears to have been aimed at providing China with the expertise it would need to implement the One-Child Policy as rigorously as possible. The government had to learn how to collect a massive amount of data, how to analyze this data, and how to adjust national policies according to this analysis. For instance, China began recording the menstrual cycles of hundreds of millions of women. UNFPA set out to teach China what to do with such information.

UNFPA's initial involvement in China appears to have been aimed at providing China with the expertise it would need to implement the One-Child Policy as rigorously as possible.

UNFPA's first \$50 million grant to China was in 1979, and it was used to establish this information-gathering system. Thus, according to a report prepared by a research institute that collaborates with UNFPA, "The China Population Information and Research Centre was established in 1980 with assistance of UNFPA, with the main objective to collect data, conduct research and disseminate information on population and family planning. The centre is affiliated with the State Family Planning Commission."¹⁵⁷ UNFPA taught the Chinese government how to collect and analyze data, and then provided the funds necessary for the Chinese government to establish demographic research facilities. In essence, UNFPA taught the Chinese government how to make the One-Child Policy work; with this demographic information, the State Family Planning Commission¹⁵⁸ could

157 "Financial Resource Flows for Population Activities, Report of a Case Study in China," the Netherlands Interdisciplinary Demographic Institute (NIDI), 2000, page 23.

158 The State Family Planning Commission (SFPC) is the main government agency respon-

tell where fertility needed to decline more quickly, what contraceptive and abortive quotas to set for different regions, and where women were regularly evading family planning regulations. With this data, the Chinese government was able to extend the implementation of the One-Child Policy across the vast expanse of China.

The report cited above, a report written by *advocates* of UNFPA, concludes that UNFPA's "very important role" in China "lies in pioneering, pilot and advocacy activities."¹⁵⁹ If UNFPA has "piloted" the Chinese government towards the One-Child Policy, or towards the effective implementation of the One-Child Policy, then UNFPA can be held at least partially responsible for the policy. Noting what has occurred in China since 1979, it is clear that UNFPA did not pilot China in another direction, a direction in which human rights were respected. In fact, in 1985, the US Agency for International Development (USAID) declared that "the kind and quality of assistance provided by UNFPA contributed significantly to China's ability to manage and implement a population program in which coercion was pervasive."¹⁶⁰

What is more, throughout the span of the One-Child Policy, UNFPA has operated as the chief international apologist for the One-Child Policy; in fact, UNFPA has become an informal propaganda ministry for the One-Child Policy. UNFPA has employed a variety of arguments in an attempt to deflect criticism from the Chinese government. One of UNFPA's most persistent strategies is also the most simple: deny everything. China is a closed society; China does not possess a free press; China does not allow unfettered investigations by foreigners. Thus, UNFPA must have known that, in proportion to the vast scale of the suffering within China, the number of reports reaching the outside world would be relatively small. The initial strategy of UNFPA, therefore, was to respond to these reports with vocal and repetitive denials, to smother the small number of stories with denials. As we shall see, UNFPA denials have been carefully timed to respond to the most serious and credible charges.

For instance, according to the demographer John Aird, "In February 1985, in a 'briefing note' submitted to the U. S. Agency for International Development, the UNFPA claimed that the Chinese government advocates but does not require compliance with the one-child limit, that acceptance of the limit 'can only be on a voluntary basis,' and that the government

sible for implementing the One-Child Policy.

159 "Financial Resource Flows..."

160 John S. Aird, "Slaughter of the Innocent: Coercive Birth Control in China," American Enterprise Institute, 1990.

had repeatedly indicated to the people of China that ‘coercion is under no circumstances permitted.’”¹⁶¹ Not coincidentally, this statement came only a month after the groundbreaking reports of Chinese coercion appeared in the *Washington Post*. This is very telling: instead of expressing shock at the revelations within these articles, instead of ordering an immediate cessation of all UNFPA activities in China until these charges could be investigated, instead of performing any investigation at all, UNFPA simply defended China.

In 1989, another potentially damaging series of charges was leveled against the One-Child Policy, and the UNFPA public-relations machine lurched into gear once again. According to the official Chinese news service, a UNFPA official in Beijing stated that “US charges of coercion within the Chinese programme were ‘groundless.’”¹⁶² The Executive Director of UNFPA, Dr. Nafis Sadik, issued a number of denials. Speaking on American television, Sadik claimed that the One-Child Policy was “totally voluntary,” and that “there is no such thing, as you know, [as] a license to have a birth and so on.”¹⁶³ And in a speech delivered to US officials, Sadik stated that “UNFPA firmly believes, and so does the government of the People’s Republic of China, that their program is a totally voluntary program.”¹⁶⁴

The UNFPA country representative in China, Stirling Scruggs, announced in June, 1991, that “The issue of coercion is exaggerated.”¹⁶⁵ This denial, too, coincided with a potentially embarrassing occurrence in China – the statement was made less than a month after the central government ordered a new, more draconian application of the One-Child Policy.¹⁶⁶ On May 12, 1991, the central government issued the “Decision of the Party Central Committee, State Council on Stepping Up Family Planning Work, Strictly Controlling Population Growth.” This document announced that “At present it is necessary to resolutely implement existing policies without any wavering, loosening, or changes in order to preserve the stability and continuity of the policies... It is necessary resolutely to correct laxity in family planning work in certain regions and to strictly prohibit the indiscriminate granting of permissions for more childbirths

161 Ibid.

162 *Xinhua* news agency, April 14, 1989.

163 CBS Television, November 21, 1989. Sadik denied that Chinese women needed a birth license, even though UNFPA’s own magazine, *Populi*, reported on China’s “One-Child Certificate Plan” as far back as 1981.

164 Aird, “Slaughter of the Innocent...”

165 Ibid.

166 Ibid.

and [changing] of family planning targets.”¹⁶⁷ Again, UNFPA chose not to investigate this order, chose not to denounce this order. Instead, UNFPA braced for Western news accounts of the crack-down, and issued a kind of pre-emptive denial of whatever reports were to surface.

UNFPA also seeks to deflect criticism from the One-Child Policy by citing national sovereignty: individual governments are free to establish their own programs, and those governments reflect diverse cultures, with diverse conceptions of human rights standards. Therefore, neither UNFPA nor Western critics happens to be competent to judge the Chinese.¹⁶⁸ In a 1985 article of *Populi*, the UNFPA magazine, Executive Director Rafael Salas stated that “Sovereignty meant that countries are and must remain free to decide on their own attitudes and responses to questions of population. The United Nations system is not equipped, either by law or by practice, to go behind this principle and judge the moral acceptability of programmes....The United Nations system is bound to accept the good faith of Governments.”¹⁶⁹ Thus, national sovereignty trumps all other considerations. In 1986, Salas established that this national sovereignty reflected cultural diversity, and was therefore unassailable by those outside the culture: “I am very sure that the Chinese themselves will say that, within their cultural norms, they are not at all coercive. Maybe from certain Western standards, these might not be totally acceptable. But then, each country must determine that for themselves.”¹⁷⁰ Nafis Sadik echoed this argument in another article in *Populi*, stating that “Judgments about what constitutes free and informed choice must be made within the context of a particular culture and the context of the overall government programme for social and economic development.”¹⁷¹

167 Ibid.

168 Perhaps the definitive statement of this cultural relativism was made by the Chinese State Family Planning Commission: “China has always fully recognized the role and cherishes the positive effects of international exchanges and cooperation in China’s population and family planning activities. It firmly believes that the objectives, policies and methods of the country based on its national conditions should be respected in the process of international exchanges and cooperation. The diversity and differences in economic development levels, cultural backgrounds, histories and traditions make the reality that the solutions and programs for each country to deal with its own affairs cannot be restricted and intervened by any given ethic[al] standards or model.” www.sfpcc.gov.cn/en/ecooper.htm (accessed August 13, 2002).

169 *Populi* Magazine, April 1985. As cited by Aird.

170 Address of Rafael Salas to a Forum on Capitol Hill, April 8, 1996. As cited by Aird, “Slaughter of the Innocent...”

171 Dr. Nafis Sadik, *Populi* Magazine, Volume 13, 1996. As cited in “China’s Coercive Birth Control Programs.”

But these arguments are disingenuous; they misrepresent the activities of the United Nations. According to proponents of the United Nations, the UN system exists for the very purpose of forging international consensus on human rights standards, for creating standards through which the actions of all nations — towards foreigners *as well as towards citizens* — can be evaluated. That is why the UN speaks so frequently in “rights-based language” — to underscore the international applicability of the norms it endorses. What is more, UNFPA has little difficulty in condemning other cultural practices. For instance, UNFPA quite correctly decries female genital mutilation.¹⁷² Thus, UNFPA only applies cultural relativism selectively: the policies it favors should be protected by the notion of cultural relativism, while the policies it does not favor should be condemned for violating international human rights standards.¹⁷³

Another UNFPA strategy, employed after the evidence of Chinese coercion became impossible to deny, was to claim that UNFPA financial involvement, UNFPA influence, UNFPA expertise were all exerting a moderating influence on the Chinese family planning program.¹⁷⁴ Thus, the argument goes, UNFPA must remain a presence in China — things would be much worse without it. But this argument concedes a great deal. For, if moderation is needed, then the One-Child Policy must currently be immoderate. This, in turn, would seem to be an admission that earlier UNFPA statements were false, and that UNFPA was active in China while coercion was occurring.¹⁷⁵

172 “Future Generations Ready for the World, UNFPA’s Contribution to the Goals of the World Summit For Children,” UNFPA, 2001.

173 UNFPA may resort to this argument because of its current power: it reflects popular post-modernist beliefs, and can even be considered a testament to cultural toleration (while the imposition of Western notions of human rights can be seen as a form of cultural imperialism). What is more, this is a potent argument: it defends Chinese coercion and UNFPA inaction in the face of this coercion, simultaneously.

174 According to the US Committee for UNFPA: “The Population Fund’s efforts in China between 1980 and 1995 have advanced the availability of quality, voluntary family planning, improved maternal health, reduced infant mortality and improved human rights. UN Population Fund officials have maintained a constant dialogue with Chinese officials about abuses of human rights, especially those attributable to rigid enforcement of China’s one-child policy. The Population Fund has purposefully designed projects to demonstrate the practical advantages of voluntary efforts, and remains diligent in requesting that China review and moderate provincial and local regulations that are not in conformity with international human rights standards.” www.uscommittee.org/article.cgi?id=9938312006332 (accessed August 13, 2002).

175 This argument is disingenuous for another reason: as is the case with other authoritarian regimes, levels of coercion within China cycle according to the whims and concerns of those in power. There is no steady, irreversible improvement in such circumstances, only ups and

Perhaps most damning of all, UNFPA has defended the Chinese One-Child Policy by lavishing it with praise. In 1981, UNFPA Executive Director Salas called the One-Child Policy “a superb example of integrating population programs with the goals of national development.”¹⁷⁶ In 1983, UNFPA established a new honor called the United Nations Population Award, a sort of Nobel Prize for population control programs. It decided to select Qian Xinzong, the Minister of the Chinese State Family Planning Commission, as one of its inaugural recipients.¹⁷⁷ Thus, UNFPA chose to honor the agency responsible for imposing the One-Child Policy upon the Chinese people, during the very period when the violence and coercion perpetrated by this agency were at their worst levels, during what has been labeled “the 1983 crash surgery drive.”¹⁷⁸

In 1985, the *People’s Daily*, the Communist Party’s official newspaper, reported that UNFPA Executive Director Salas told Premier Zhao Ziyang that “China’s family planning policy is established on the basis of voluntary acceptance by the people and is therefore accepted by the people....My colleagues and I come to visit at this time to reaffirm our support of China in the field of population activities. China should feel proud of the achievements made in her family planning program.”¹⁷⁹ With this statement, Salas sought to reassure the Chinese government that UNFPA would not abandon it, even as the first articles chronicling the horrors of the policy began to appear in the West.

In 1987, the UNFPA country representative in China said that the One-Child Policy “has been internationally acknowledged as one of the most successful efforts in the world today.”¹⁸⁰ In 1989, the UNFPA deputy representative in China stated that “In the past ten years China has succeeded more than any other country in the world in limiting fertility

downs that may reflect many other things, such as power struggles within the top ranks of the government, corruption, or inefficiency. With regard to the implementation of the One-Child Policy, there have been periods, such as 1983 and 1991–2, in which the policy has been enforced more harshly and more systematically than in other periods. If UNFPA has any presence in China, it must have seen these upsurges in coercion. Thus, there is no evidence — and UNFPA presents no evidence — that China has witnessed a gradual, incremental improvement in human rights. There is also no evidence that any improvements (if they do exist) will not be rescinded tomorrow. In authoritarian regimes, everything is contingent, everything temporary.

176 Aird, “Slaughter of the Innocent...”

177 Ibid.

178 Ibid.

179 Ibid.

180 Ibid.

and rapid population growth.”¹⁸¹ In 1990, the deputy representative told *Xinhua*, the official Chinese news agency, that “China’s family planning programme is the most successful such effort in the world.”¹⁸² In 1991, UNFPA Executive Director Sadik told *Xinhua* that “China has every reason to feel proud of and pleased with its remarkable achievements made in its family planning policy and control of its population growth.”¹⁸³

As we shall see, such statements of praise continue to this day. They signal a dual strategy on the part of UNFPA: UNFPA’s v appear mainly in the Western media, while UNFPA’s praise of the One-Child Policy appears mainly in the Chinese media. Why? This praise serves an essential internal function: it

UNFPA’S denials of coercion appear mainly in the Western media, while UNFPA’s praise of the One-Child Policy appears mainly in the Chinese media.

communicates to the people of China that the whole world approves of the One-Child Policy, and, perhaps, that it is therefore useless to resist it.

Bowing to political pressure from the United States, UNFPA stopped funding China in 1994. However, UNFPA resumed funding in 1998, with a new program and new promises. UNFPA now explicitly condemns coercion in China. In a letter to Representative Henry Hyde, Chairman of the US House Foreign Affairs Committee, UNFPA claims it “has not, does not and will not ever condone coercive activities in China or anywhere else.”¹⁸⁴ And the US Committee for UNFPA is now willing to state that “The UN Population Fund does not support China’s one-child policy, and is unequivocally opposed to targets and quotas.”¹⁸⁵ This is an interesting shift of strategy, since UNFPA denied that coercion existed in China, even denied that there were birth restrictions in China, for over a decade. It must have been considered so important to distance UNFPA from China, that it was worth the risk of this tacit admission that all previous denials were lies.

UNFPA’s new program was designed for implementation within 32 Chinese counties “to demonstrate that voluntarism and informed choice

181 Ibid.

182 *Xinhua* news agency, September 12, 1990.

183 *Xinhua* news agency, April 11, 1991.

184 UNFPA letter to Representative Henry Hyde, October, 2001.

185 www.uscommittee.org/article.cgi?id=9938312006332 (accessed August 13, 2002).

are key to successful family planning programs.”¹⁸⁶ According to UNFPA and its allies, UNFPA only resumed operations in China after Chinese officials agreed to end all quotas and birth restrictions within the 32 counties. For instance, IPPF states that “Negotiated over the course of seven years, the UNFPA-China agreement stipulates that all targets, quotas, and other coercive policies must be abandoned, and all programs must operate with respect to human rights and voluntarism in all counties with which UNFPA programs are associated.”¹⁸⁷ IPPF makes two further promises regarding the new program: it will be closely watched, and UNFPA will leave China if the Chinese do not respect their commitments: “Under the UNFPA-China agreement, all programs are independently monitored to ensure compliance, and UNFPA will terminate any county family planning project that engages in coercive practices.”¹⁸⁸

Not surprisingly, UNFPA claims that it should be involved in China because it provides Chinese officials with an important example of voluntary family planning. This is the ‘moderation’ argument all over again; this time, UNFPA claims that it operates as a “catalyst” for change in China, that the lessons the Chinese have learned about rights are already being expanded far beyond the 32 counties in which UNFPA operates.¹⁸⁹

But there is reason to doubt all of these assertions. First of all, the Chinese government has made multiple statements during this period declaring that the One-Child Policy will continue to be imposed upon the Chinese people. In July, 1998, *Reuters* news agency reported that “China, the world’s most populous nation, will maintain its stringent family planning laws to stabilize its population at 1.6 billion in the middle of the next century, the head of the planning program said in a statement...”¹⁹⁰ In March, 1999, Chinese President and Party Chairman Jiang Zemin said that “Family planning and population control constitute arduous work involving many aspects. Instead of putting a break on the work, we must strengthen it.”¹⁹¹ The *London Daily Telegraph*, *Agence France-Presse*, and the *Washington Times* have all reported that China intends to maintain the One-Child Policy.¹⁹²

186 www3.plannedparenthood.org/library/FAMILYPLANNINGISSUES/UNFPA.html (accessed August 13, 2002).

187 *Ibid.*

188 *Ibid.*

189 “Report of the International Review Team on the UNFPA China Country Programme,” UNFPA, October 22-27, 2001.

190 “China Eyes Mid-Century Population of 1.6 Billion.” *Reuters*, July 14, 1998.

191 Aird, “Slaughter of the Innocent...”

192 *Agence France-Presse*; *The Washington Times*, October 13, 2001; David Rennie, “Chinese

What is more, news agencies continue to report that coercion is being carried out within China. For instance, in 2001, the *Daily Telegraph* reported that:

A Chinese county has been ordered to conduct 20,000 abortions and sterilisations before the end of the year after communist family planning chiefs found that the official one-child policy was being routinely flouted....Many of the terminations will have to be conducted forcibly on peasant women to meet the quota. As part of the campaign, county officials are buying expensive ultrasound equipment that can be carried to remote villages by car. By detecting which women are pregnant, the machines will allow Government doctors to order terminations on the spot.¹⁹³

Other news articles report that China has extended its One-Child Policy to segments of the population initially ignored by family planning officials; thus, it is even possible that the policy is being more widely enforced than before.¹⁹⁴ From all of this, it is highly unlikely that moderation is taking place. The commitment to enforcement remains intact.

Perhaps most troubling, a human rights group has recently alleged that coercion continues even within the 32 counties in which UNFPA operates, the counties in which all quotas, all birth restrictions, all coercion were to have been eliminated. During October, 2001 hearings of the US House International Relations Committee, human rights activists described a series of secret interviews carried out by the US-based Population Research Institute (PRI) with women in Sihui county, one of 32 Chinese counties in which UNFPA operates. The women provided first-hand testimony of forced abortions, forced sterilizations, arrests and detention. A woman who was pregnant with her second child told PRI that officials “wanted me to report to the hospital for an abortion but I refused to go. I went into hiding in my mother’s village. They arrested six people in my mother-in-law’s family and destroyed three homes.” One woman was led in for an abortion in front of the investigators. The woman’s friends told the investigators that she wanted to keep the baby, “But the law forbids it.”¹⁹⁵

told One-Child is rule to 2003, *The Daily Telegraph*, December 20, 2000.

193 Damien McElroy, “Chinese region ‘must’ conduct 20,000 abortions,” *The Daily Telegraph*, August 5, 2001.

194 *Agence France-Presse*, September 20, 1998.

195 Congressional record of US House of Representatives International Relations Committee, October 16, 2001.

In response, UNFPA sent a team of what its report called “independent,” “impartial” investigators to China. According to the UNFPA report of the investigation, the team found no evidence of coercion: “The members of the team took every opportunity to talk to people — on the street, in family planning and mother and child care (MCH) clinics, in villages.... No one expressed any grievances or complaints of any kind, or knew of any abuses in recent years....None seemed to know of any forced abortions.”¹⁹⁶ In meetings with the team, numerous Chinese officials pledged their commitment to international human rights standards, and said that UNFPA provided an essential example of coercion-free family planning. The report concluded, “the UNFPA programme is the key to smoothing the way to a truly client-oriented, quality-of-care approach throughout China.”¹⁹⁷

However, the UNFPA investigation was deeply flawed. For instance, the UNFPA investigative team included no independent investigative journalists and no independent human rights investigators. The team was comprised largely of past and present UNFPA officials and diplomats sympathetic to UNFPA.¹⁹⁸ The truly independent — and thus unbiased — status of the investigation is therefore in doubt. The UNFPA investigative team spent a total of five days in China. Fourteen hours were spent in briefings with Chinese officials and UNFPA personnel. The team spent only about four hours visiting actual family planning facilities. During these visits, the team was never out of the presence of Chinese family planning officials. The UNFPA investigative team also spent about thirty minutes of the trip on “in-home” visits. These interviews were also conducted in front of Chinese officials. The UNFPA team did not meet with any Chinese women without the knowledge or presence of Chinese officials. It did not conduct any private, unmonitored, and confidential meetings with Chinese women.¹⁹⁹

The absurdity of an investigation of charges of coercion carried out in front of the alleged perpetrators, who would be free to persecute the witnesses after the UNFPA team departs, is difficult to overstate. When asked to explain the presence of Chinese officials during all interviews, the head of the investigative team told a recent US Senate hearing that some members of the team would attempt to distract the Chinese officials, so that the Chinese women would feel comfortable to speak freely. This

196 “Report of the International Review Team...”

197 Ibid.

198 Ibid.

199 Ibid.

statement evoked considerable laughter from the Senate gallery.²⁰⁰ When this very limited and untrustworthy information is deleted from the UNFPA report, the remaining data absolving China consists largely of the assertions made by the Chinese family planning officials and the UNFPA personnel, themselves.

What is more, for all of its talk in the West about the need for moderation, UNFPA still continues to praise the Chinese One-Child Policy. In 2000, Sven Burmester, UNFPA country representative in China, stated “In strictly quantitative terms, it was the most successful family planning policy ever developed...My own view is that there is a generation of Chinese who sacrificed themselves for the benefit of society and they should be recognized for that.”²⁰¹ In July 2001, Burmester told *Time Asia* that “For all the bad press, China has achieved the impossible...The country has solved its population problem.”²⁰² In March, 2002, the Chinese *People’s Daily* reported that new UNFPA Executive Director Thoraya Obaid “praised that over the past 20 years, China has seen notable achievements made in population control by implementing the family planning policy. It has thereupon played an active role in curbing the population growth across the world. During an interview in January when taking up her post of the UNFPA executive director, Ms. Obaid told the journalist that China, having adopted practical measures in accordance with her current situation, has scored remarkable achievements in population control.”²⁰³

On account of the PRI allegations, the United States government decided to send its own investigative team to China in May, 2002. Based upon the findings of this investigation, the Bush administration decided to end all US support for UNFPA. In a letter to Senator Patrick Leahy (D-VT), Secretary of State Colin Powell explained the Administration’s decision, declaring that “UNFPA’s support of, and involvement in, China’s population-planning activities allows the Chinese government to implement more effectively its program of coercive abortion.”²⁰⁴ This point must be emphasized: it is now the official position of the United States government that UNFPA aids and supports the forced abortion campaign still continuing in China.

For instance, the US investigative team sent to China in May found

200 Population Research Institute, Weekly Briefing, 5 March 2002, Vol. 4/ No. 7.

201 *UN Wire*, May 3, 2000.

202 Hannah Beech, “China’s Baby Bust,” *Time Asia*, July 30, 2001, Vol.158 No. 4.

203 Du Minghua, “UNFPA Praises China’s Family Planning Policy,” *The People’s Daily*, March 15, 2001.

204 Letter from US Secretary of State Colin Powell to Senator Patrick Leahy, July 21, 2002.

that UNFPA works in one county in which women who have more than one child must pay a “social compensation fee,” a penalty sometimes as high as three years worth of income. Such “crushing fines” constitute a “program of coercive abortion” since they “have the purpose or effect of forcing mothers to have abortions.”²⁰⁵ According to Powell, “UNFPA is helping improve the administration of the local family planning offices that are administering the very social compensation fee and other penalties that are effectively coercing women to have abortions.”²⁰⁶

Powell also criticizes the fact that UNFPA supplies computers and medical equipment to family planning offices engaged in coercive practices. Powell claims that “Not only has UNFPA failed to ensure that its support does not facilitate these practices; it has also failed to deploy the resources necessary to even monitor this issue. In the context of the PRC [People’s Republic of China], supplying equipment to the very agencies that employ coercive practices amounts to support or participation in the management of the program.”²⁰⁷ Powell specifically states that UNFPA-donated computers allow Chinese family planning officers “to establish a database record of all women of child-bearing age in an area and to trigger the issuance of ‘birth-not-allowed’ notices.”²⁰⁸

According to Powell, UNFPA helps to “propagate the government’s distinction between legal births and out-of-plan births.”²⁰⁹ The US investigative team learned that UNFPA “takes credit for posted documents that note that it is forbidden ‘to prevent legal births’ — thus bearing partial responsibility for disseminating the message that it is not forbidden for government employees to prevent out-of-plan births.”²¹⁰

For these reasons, Powell concludes that US funding for UNFPA would violate what is known as the “Kemp-Kasten amendment,” a 1985 US law that stipulates that no US international aid may be given to an organization that “supports or participates in the management of a program of coercive abortion or involuntary sterilization.”

What should we conclude about UNFPA involvement in China? There can be no doubt that UNFPA continued to fund this program long after it became clear that it was replete with abortion on a massive scale, and long after it became clear that the very foundation of the program

205 Ibid.

206 Ibid.

207 Ibid.

208 Ibid.

209 Ibid.

210 Ibid.

was coercive in nature — including imprisonment, forced sterilizations and forced abortions, even infanticide. There can be no doubt that the program violated essential tenets of the International Conference on Population and Development’s Programme of Action, as well as many other internationally recognized human rights standards. Nor is there any doubt that UNFPA was instrumental in the establishment of the policy, setting up demographic institutions so that the Chinese could implement it effectively throughout the nation. And there can be no doubt that UNFPA has exhibited a special affinity for the One-Child Policy, even a fondness for the Policy, by signing a Memorandum of Understanding with the Chinese government and by granting China its most prestigious award. Nor can it be denied that UNFPA has lied for the Chinese by denying coercion, explaining away coercion, claiming progress when there was no progress, and, perhaps most egregiously, by heaping praise on the very perpetrators of the coercion. There can be no excuse for this involvement and for these actions; this is a permanent stain upon UNFPA.

Vietnam

Perhaps another indication of UNFPA’s fondness for the One-Child Policy is its willingness to export the policy to other countries, to spread the lessons of Chinese coercive population-control to other poor and developing countries. In April 1991, Nafis Sadik told *Xinhua* that “UNFPA is going to employ some of [China’s demographers] to work in other countries and popularize China’s experiences in population growth control and family planning.”²¹¹ UNFPA says it would like to spread the Chinese policy, and it seems to have done so; a case in point is Vietnam.

UNFPA says it would like to spread the Chinese policy, and it seems to have done so; a case in point is Vietnam.

Vietnam’s population program seeks to reduce the Vietnamese birth rate by restricting family size to two children per woman. It has therefore been called the “two-child” policy.²¹² Like China, Vietnam enforces its birth restrictions through coercion. According to the *British Broadcasting*

211 John S. Aird, “Human Rights and Foreign Aid for Population Control in China,” Submission to the Joint Committee on Foreign Affairs, Defense and Trade, Parliament of Australia.

212 Owen Bennett-Jones, “Vietnam’s Two-Child Policy,” *BBC*, November 8, 2000.

Company, “Communist Party members who have more than two [children] face automatic expulsion and parents are often asked to pay the health and education costs of a third child. More serious sanctions include having land confiscated.”²¹³ And, according to a report in the *Population and Development Review*, “To comply with the two-child policy, women have been forced to use IUDs and have been forced to have abortions.”²¹⁴ The *Reuters* news agency has reported that Vietnam has “one of the world’s highest rates of abortion.”²¹⁵

UNFPA has actively assisted the Vietnamese policy; UNFPA operates at least seven programs in Vietnam, and has spent tens of millions of dollars to support the Vietnamese two-child policy. UNFPA also praises the policy. Omar Ertur, UNFPA country representative in Hanoi, stated “They [the Vietnamese family planning officials] have been very successful....They have achieved a tremendous reduction in a very short period of time.”²¹⁶ In fact, UNFPA honored Vietnam’s National Committee for Population and Family Planning with its 1999 “United Nations Population Award.”

What is more, it appears as if UNFPA has provided the same sort of expertise to the Vietnamese that it has provided to the Chinese. According to one UN document, “...Vietnam is undergoing the ‘demographic transition’ which is usually necessary for a sustainable reduction of poverty. Although government policy bears the main responsibility for this achievement, UNFPA’s assistance in preparing for and supporting the policy reform provided necessary capacity and support for implementing it.”²¹⁷ So here we see a repetition of the Chinese policy, and UNFPA’s involvement in such a policy, on a smaller scale. Many of the same elements exist: a strict quantitative policy with established quotas and disincentives; credible accounts of coercion, including forced abortion; and uninterrupted UNFPA funding, praise and policy guidance.

213 Ibid.

214 Daniel Goodkind, “Vietnam’s New Fertility Policy,” *Population and Development Review* 15(1), March, 1989.

215 “Vietnam Plans Law to Ban Tests on Sex of Fetus,” *Reuters*, November 16, 2001.

216 Bennett-Jones, “Vietnam’s Two-Child Policy.”

217 “Capacity Building for Eradicating Poverty, an Impact Evaluation of UN System Activities in Vietnam 1985–1997,” President Alberto.

Peru

UNFPA support for coercive population programs is not restricted to Asia. In 1995, the President of Peru, Alberto Fujimori, announced that Peru would embark on a massive sterilization program in order to combat poverty. A year later, government health workers began to conduct sterilization drives, often called “[Tubal] ligation fairs,”²¹⁸ and the numbers of sterilizations began to climb. In 1997, 110,000 women were sterilized.²¹⁹ By 2001, the president of the Health Commission of the Peruvian Congress reported that a total of 300,000 women had been sterilized.²²⁰ At the height of this campaign, UNFPA committed \$11 million to Peru, including \$6.5 million for “reproductive health care,” \$3 million to develop additional population control strategies in conjunction with the government, and \$1 million for “advocacy.”²²¹

Almost from the start of the sterilization campaign, there were credible reports of human rights abuses. Dr. Hector Hugo Chávez Chuchon, the president of the regional medical federation of Ayacucho, Andahuaylas, and Huancavelica, testified at a US Congressional hearing that doctors were being forced to meet government quotas for sterilizations. Any such quotas would be in explicit violation of the terms of the 1994 International Conference on Population and Development.²²² Giulia Tamayo Leon, a lawyer with the Flora Tristan Center for Peruvian Women, told the *Miami Herald* that “health workers get bonuses of \$4 to \$6 for every rural woman brought in for sterilization,” which would also be in violation of ICPD.²²³

Leon concluded that the existence of quotas and cash incentives for health workers “encourages coercive practices,”²²⁴ and there is a great deal of evidence that coercion has occurred. In 1998, the *Miami Herald* reported that some health workers were “strong-arming impoverished rural women into sterilizations — sometimes literally dragging them to clinics or performing tubal ligations without their authorization — to fulfill

218 Statement of Representative Chris Smith, Chairman, Subcommittee on International Operations and Human Rights, US House of Representatives, February 25, 1998.

219 Calvin Sims, “Using Gifts as Bait, Peru Sterilizes Women,” *The New York Times*, February 15, 1998.

220 *Liberacion* newspaper, Peru, as quoted in *Zenit* news agency, September 7, 2001.

221 *Friday Fax*, Catholic Family and Human Rights Institute, February 27, 1998, Volume 1, Number 20.

222 *Ibid.*

223 Tim Johnson, “Sterilization Debate in Peru: Are Some Women Coerced?” *The Miami Herald*, 1998.

224 *Ibid.*

Fujimori's ambitious family planning goals.²²⁵ The *Herald* told of a woman who went to a clinic for the flu, and was placed in an operating room, anesthetized, and sterilized, without her knowledge or consent. Also in 1998, the *New York Times* reported that poor women were being bribed into

Quotas, incentives, coercion, lack of informed consent, complications, and deaths: the litany of complaints against UNFPA-funded programs is now dreadfully familiar, sadly predicatable.

accepting sterilizations with promises of food. In one case, a "Mrs. Morales, 34, died of complications 10 days after the surgery, leaving three young children and a husband behind. She was never well enough to pick up the promised gifts..."²²⁶ A neighbor of the woman told the *New York Times* that "When you don't have anything and they

offer you clothes and food for your kids, then finally you agree to do it."²²⁷ Also, an investigative report prepared for the US Congress decried "that operations were sometimes performed in substandard conditions, resulting in medical complications at rates far higher than the norm; and that these abuses resulted from the imposition of national goals with respect to the number of women who were to be sterilized."²²⁸ Quotas, incentives, coercion, lack of informed consent, complications, and deaths: the litany of complaints against UNFPA-funded programs is now dreadfully familiar, sadly predictable.

It is instructive to establish the actions taken by the US Agency for International Development — the US agency that funded family planning programs in Peru — when evidence of the Peruvian violations surfaced. USAID voiced clear and unequivocal concerns to the Peruvian government and withdrew funding from the program. On January 6, 1998, the director of the USAID office in Lima wrote a letter to the Peruvian Minister of Health stating that "our desire to collaborate in the area of family planning is based on the free, voluntary and informed choice of contraceptives.... not in the pursuit of quantitative targets by method for a particular service

225 Ibid.

226 Calvin Sims, "Using Gifts as Bait, Peru Sterilizes Women," *The New York Times*, February 15, 1998.

227 Ibid.

228 Grover Joseph Rees, Staff Director and Chief Counsel, Subcommittee on International Operations and Human Rights, "Report on Staff Delegation to Peru," 1998.

provider or group of service providers, especially where tubal ligation and vasectomy are concerned.”²²⁹

It is important to note the actions of USAID, because they illustrate what UNFPA could have done in the face of coercive practices, but chose not to do. UNFPA did not condemn Peru, or publicly acknowledge the coercive practices. Most importantly, UNFPA did not stop funding the Peruvian government. Instead, there were rumors that UNFPA sponsored an investigation into the charges of coercion, and that a document was written to report the findings of the investigation to UNFPA. But, when a copy of the document was leaked to a US newspaper, UNFPA denied it. UNFPA denied its existence, even as a journalist held the report in his hand.²³⁰

According to an article in the US-based *National Catholic Register*, a copy of the document, entitled “Study on the Quality of Reproductive Health and Family Planning offered by Agencies of the Ministry of Health” and dated August 2000, was anonymously given to the newspaper by a Ministry of Health employee.²³¹ The document, itself, declares that UNFPA funded the project, that the Peruvian government planned and designed the investigation, and that the investigation was a comprehensive study of the Peruvian sterilization program.

The report should have been hailed as the most definitive account of the Peruvian program. But the report was not released. What is more, according to the *National Catholic Register*, “When contacted Dec. 6, Stirling Scuggs, the UNFPA’s director of information, and Marisela Padron Quesa, director of UNFPA’s Latin America and Caribbean division, both denied any UNFPA knowledge of the report.”²³² The veracity of these denials was undermined when “UNFPA’s representative in Peru, Mirtha Carrera-Halim, admitted that UNFPA had funded a report with the same title and conducted by the same individuals....Pressed repeatedly on the matter, Carrera-Halim eventually said, ‘I suspect that it might be the same [report].’²³³

UNFPA may have wanted to pretend that the report did not exist, and that the investigation never took place, because the investigation found

229 As quoted in a statement of Representative Chris Smith, Chairman, Subcommittee on International Operations and Human Rights, US House of Representatives, February 25, 1998.

230 Alejandro Bermudez, “UN Secret: Population Plan Still Abuses Women in Peru,” *National Catholic Register*, December 16, 2001.

231 Ibid.

232 Ibid.

233 Ibid.

widespread and systematic coercive practices. First, the report stated that the program sought to stop reproduction, while ignoring women's total reproductive health: "There is a good motivation to perform FP [family planning] activities, nevertheless, health services are mostly focused on contraception...there is a high rate of missed opportunities to detect the two main gynecologic cancers [uterine and breast cancers] in the country."²³⁴

The report also states that sterilization decisions were made by health workers and imposed on women: "The concept of 'reproductive rights' is frequently reduced to the decision among different contraceptive methods....[T]here were several cases in which the RH/FP [reproductive health/family planning] providers believed there were situations in which the decision could be 'external' to the person."²³⁵ That is, they felt justified in making this decision for women, women who might not have understood the health risks of sterilization, or who might not have understood the permanence of sterilization. According to the report, "There are notorious deficiencies among RH/FP providers regarding the respect of personal and reproductive rights; in this particular field, there is a clear contradiction both in the discourse and the practice, between a formal acknowledgement of the person's rights and its practical denial." Thus, UNFPA, which claims to protect women's rights, and "advocates" for those rights around the world, continues to fund a program that tramples on women's rights. And it continues to fund the program, even after the very government that runs the program has told UNFPA that it tramples on women's rights.

The document also reports that health workers routinely discount women's concerns, and exhibit an alarming disregard for women's complaints of complications. As an example, one worker stated that "Some of those people [peasant patients] have a ... wrong way of thinking about family planning, you know? [They are] wrong about the different methods ... they give excuses, they say, as an example, that [contraceptive] pills make them fat, or give them headaches, or other problems. ...After a tubal ligation [sterilization procedure], some of them come and say it is harmful, that they are turning crazy, that they have a pain here or there."²³⁶

234 Ibid. When UNFPA lists program activities, contraception is included among a number of beneficial services, such as the promotion of reproductive and maternal health. Critics have long contended that contraception is the primary service provided by UNFPA, even at the expense of the other, beneficial things mentioned in UNFPA literature. Here, allies of UNFPA admit that in this program, at least, these allegations are correct.

235 Ibid.

236 Ibid.

Some critics contend that it was UNFPA, not the Peruvian government, that sought to keep the report secret. Dr Raul Cantella, the President of the Peruvian Foundation for the Prevention of Aids, told the *National Catholic Register* that “I would not be surprised if UNFPA, in fact, had demanded the report not to become public. When even USAID was distancing itself from [President] Fujimori’s obviously brutal population control campaign, UNFPA was sticking close, providing funds and even praising Fujimori for his resolve.”²³⁷ Why would UNFPA do such a thing? To avoid embarrassing itself? To avoid embarrassing Peru? To keep the project alive as long as possible, in the hopes of a few more thousand sterilizations?

Since the *National Catholic Register* article, another Peruvian government report was released which corroborates both the enormous human rights violations and UNFPA complicity in these crimes, even establishing that UNFPA oversaw the entire forced-sterilization campaign. According to the report of the Peruvian congressional commission called the *Anticoncepcion Quirurgica Voluntaria* (AQV) commission, more than 200,000 women were sterilized during the program, and 90 percent of the women were pressured or tricked into having this operation.²³⁸ The report also makes it clear that UNFPA provided millions of dollars of funding and essential technical expertise for this program: “the United Nations Population Fund (UNFPA), known for its support of population control in developing countries, took charge. For that end, the United Nations Population Fund act[ed] as Technical Secretary.”²³⁹

As we have seen, UNFPA claims that it “does not fund...involuntary sterilization or coercive practices of any kind.” UNFPA also claims to be the international guardian of women’s rights. So how does UNFPA explain its actions in Peru? The UNFPA representative in Peru, Carrea-Halim, told the *National Catholic Register* that “The United Nations does not run governments,” and that “it is ultimately up to the Peruvian government, not UNFPA, to make a final judgment whether human-rights abuses have taken place.”²⁴⁰ What this seems to mean is that UNFPA renounces all responsibility for the programs it funds. And it even denies responsibility for determining if human rights violations have occurred within those programs. As long as the government, itself, does not think coercion has taken place, then coercion has not taken place. In essence, as long as the

237 Ibid.

238 *Subcomision Investigadora de Personas e Instituciones Involucradas en las Acciones de Anticoncepcion Quirurgica Voluntaria* (AQV), Peruvian Congress, June 2002.

239 Ibid.

240 Bermudez, “UN Secret: Population Plan Still Abuses Women in Peru.”

perpetrators of coercion do not call it coercion, UNFPA approves. This is similar to UNFPA's recent investigation of China, in which it placed such great importance on the statements of the Chinese family planning officials, as *proof* that the charges of coercion were false. But, here, UNFPA's justification is even more duplicitous, for the Peruvian government *does* admit that coercion has taken place, and has taken place on a massive scale, and still UNFPA does not end funding. There have been three Peruvian governments during this sterilization campaign; coercion has continued through all three of them. The one constant has been UNFPA, the "Technical Secretary" for the entire program.



Part III

UNFPA and Emergency Situations

For the past few years, UNFPA has adopted a new program to provide what it calls “comprehensive reproductive health care services” to women in emergency situations.²⁴¹ For instance, UNFPA is now operating in Afghan refugee camps. UNFPA has also sent supplies to Kosovo; to India after cyclones and earthquakes; to the Democratic Republic of Congo after a volcanic eruption; to the Central African Republic after a *coup d’etat*; to El Salvador after an earthquake; to Mozambique after a flood; to Turkey after earthquakes; to Venezuela after a flood; to Zimbabwe after a cyclone, etc.²⁴² UNFPA has established itself as a global rapid-response team for reproductive services, and will respond to any political or military crisis, or any natural disaster.

But what does UNFPA send? What services does it provide? According to UNFPA,

The safe motherhood and reproductive health kits provide basic supplies needed to perform clean, safe deliveries. They include clean home delivery basic supplies, such as plastic sheeting, razor blades for cutting umbilical cords, sterile gloves and plastic aprons. Also included are health centre delivery sub kits used to stabilize precarious situations, such as convulsions and bleeding; and referral-level instruments used to perform caesarian sections, resuscitate babies and mothers, as well as to handle childbirth complications. The overall package also includes tools for HIV testing and blood transfusion.²⁴³

If this were the complete contents of the reproductive health kits, UNFPA efforts would be highly praiseworthy. But UNFPA rarely describes

241 www.unfpa.org/tpd/emergencies/index.htm (accessed August 13, 2002).

242 Ibid.

243 www.unfpa.org/news/pressroom/2000/zimbabwe.htm (accessed August 13, 2002).

the entire inventory of its reproductive health kits. Even in the quotation above, it states that the kits “include” these laudatory things, which means that they also include other things, things that UNFPA does not see fit to mention.

It has become clear from investigations in the field that these kits include IUDs, emergency contraceptives, and, at least some of the time, manual vacuum aspirators.²⁴⁴ As we have already seen, the original sub kits

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for these items were labeled “pregnancy termination kits.” Charges have been raised that the ultimate goal of UNFPA emergency response efforts is to introduce contraceptives and abortion to women who would normally not accept them. Why emergency situations? The women are vulnerable, often displaced from their homes,

communities, husbands and families. Under such circumstances, it may be easier to convince otherwise reluctant women, women from traditional cultures with traditional beliefs, to become acceptors of contraceptives and abortions.²⁴⁵

Also, emergency situations are often situations in which national sovereignty, government authority, and legal jurisdiction are all in doubt. Thus, emergencies may provide a good opportunity for UNFPA to introduce services that would normally be against the law. For instance, *Vatican Radio* has reported that UNFPA is currently introducing abortion within the Afghan refugee camps. According to a spokesman for the camps in the Peshawar region, the refugees saw this as a “bad surprise,” since “abortion is an offensive act under Islamic law.”²⁴⁶ What is more, it should be remembered that UNFPA must be asked by governments to operate within their countries; UNFPA possesses no authority to impose itself on the citizens of a sovereign nation.²⁴⁷ Thus, UNFPA may relish situations in which sovereignty is in question.

For instance, UNFPA accepted the invitation of the Yugoslav

244 Austin Ruse, “Potemkin Villages in Kosovo.”

245 Ibid.

246 *Zenit* news agency, January 8, 2002. The type of abortion employed by UNFPA is not mentioned in the article.

247 www.untuk.org/unfpa/rh (accessed August 13, 2002).

government of Slobodan Milosevic to provide its emergency kits to the women of Kosovo.²⁴⁸ Of course, Milosevic's legitimate authority to establish such policy for the people he had recently defeated in battle must be open to question. But UNFPA did not question this authority. UNFPA did not question the legality of the invitation. Nor did UNFPA question the morality of its involvement with an alleged war-criminal. Nor did UNFPA wonder if its abortion and contraception services would become an essential component of the "ethnic cleansing" taking place against the Kosovars, even though Milosevic did not invite UNFPA into any other regions of Yugoslavia — any regions in which his people resided — and even though it was common knowledge that Milosevic sought to reduce the birthrate and population of his Muslim enemies.²⁴⁹ UNFPA saw an opening for its services, and it took it. In fact, evidence exists that the women of Kosovo did not want UNFPA assistance; Kosovars called UNFPA's incursion into their country the "white plague."²⁵⁰

Attacks on Family, Religion

As we have seen, one of UNFPA's three major functions is advocacy. We have also seen what UNFPA advocates for: international recognition for what it considers to be reproductive rights, and for the worldwide provision of reproductive services. But who does it advocate against? Who does it consider to be the impediments to its project? UNFPA sees parents as some of its chief adversaries. In fact, UNFPA seems to think that one of its primary roles is to protect the children of the world from the influence of their parents. For example, the US Committee for UNFPA writes that:

Adults are one of the greatest resources that young people have. To a child, grown-ups are sources of information, role models, and guides. Often however, parents are uneasy about discussing

248 UNFPA spokesman Stirling Scruggs told Austin Ruse that "the [Milosevic] government asked us to do what we could and we were able to find funds to help out..." www.pop.org/kosovo/spokesman.htm (accessed August 13, 2002).

249 Before the refugee crisis, Milosevic's Minister of Family Concerns stated that "the State must find a way to stimulate the birthrate of the populations in central and northern Serbia and to limit or forbid the enormous increase of the birthrate in Kosovo." www.pop.org/kosovo/spokesman.htm (accessed August 13, 2002).

250 Austin Ruse, "UN Pro-life Lobbying," *The Human Life Review*, Winter 2002.

sex, reproduction and related health concerns and some cling to the prevailing misconception that sex education teaches adolescents how to have sex, thereby preventing teens from getting the information they need...Young people, however, need to be able to count on adults for support. By providing access to counseling, information, education and health services, adults can prove to adolescents that the latter's trust will not be betrayed. As Nafis Sadik, the former Executive Director of UN Population Fund once said "more adults need to act on their responsibility to young people...the responsibility of the leaders of the older people to the youth should be stressed. We are always hearing of parents' rights, without emphasis on youth rights. It is time that political leaders, the older generation and others lived up to their responsibility to the youth..."²⁵¹

According to the US Committee for UNFPA, there seems to be only one correct way to view sexual education programs; anyone who disagrees with UNFPA is guilty of "clinging" to "misconceptions." Children need adults to teach them UNFPA-endorsed sexual education, and, if their parents are unwilling to fulfill this role, UNFPA will find others who are not. In Sadik's telling quotation, it appears that adolescent rights and parental rights are mutually exclusive, that adolescent rights

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But why would UNFPA think that these rights conflict? The answer to this question rests with what UNFPA considers to be the sexual and reproductive rights of adolescents. According to UNFPA, adolescents have

the right to reproductive health services that are easily accessible and completely confidential.²⁵² In other words, adolescents' sexual and

251 www.uscommittee.org/issue4_3_1.html (accessed August 13, 2002).

252 According to the US Committee for UNFPA, adolescents "...need comprehensive information and access to services, and have the right to privacy, confidentiality, respect and informed consent." www.uscommittee.org/issue4_0html (accessed August 13, 2002).

reproductive rights can only be established if adolescents possess freedom from all interference, including parental interference. Adolescents have a right to make choices about contraception and sexual activity without parents knowing about those decisions, and without parents overriding those decisions. It is this reproductive rights agenda for which UNFPA advocates worldwide, regardless of parents' views and cultural norms. According to UNFPA, adolescence begins at ten years of age;²⁵³ thus, UNFPA asserts that ten-year-olds possess sexual and reproductive rights, and that those rights are unassailable by parents.²⁵⁴

What is more, UNFPA helps children — including, presumably, ten-year olds — to exercise those rights. One way UNFPA seeks to assist adolescents is through graphic sexual education. UNFPA teaches and promotes the use of condoms to prevent pregnancies, sexually transmitted diseases and HIV/ AIDS. In none of the available literature is it emphasized that condoms are not completely effective against HIV/ AIDS, or that they do not protect people from many deadly sexually transmitted diseases, including the STD that results in cervical cancer. Nor is there any record of UNFPA promoting abstinence as an effective way of avoiding pregnancy and disease.²⁵⁵ This is an insistent “safe sex” message, one largely unburdened by the reality of contraceptive failure or by the unglamorous promotion of abstinence, fidelity and delayed sexual initiation.

It is not completely clear what reproductive services UNFPA actually offers to adolescents. We do know that UNFPA provides condoms: “In the face of the HIV/AIDS pandemic...condoms and information on how to use them are made available in public places where youth gather, such as cafes, nightclubs, street vending machines and vendors.”²⁵⁶ But it is not known if UNFPA provides teens with IUDs or emergency contraceptives. However, since UNFPA has deemed these things to be contraceptive in nature, rather than abortifacient, UNFPA would possess no reason not

253 www.unfpa.org/adolescents/faq.htm (accessed August 13, 2002).

254 www.uscommittee.org/issue4_0html (accessed August 13, 2002).

255 In one UNFPA document, “Future Generations Ready For the World,” UNFPA makes the claim that it provides “information and services on promoting safe sexual behaviour including abstinence, delayed age of onset of sexual intercourse, preventing unwanted and early pregnancies, and preventing STDs, including HIV/AIDS.” But it does not say how much it spends on abstinence training, how long it has promoted abstinence, or where its abstinence programs are in effect. It should be noted that, whenever abstinence is mentioned at United Nations conferences by Muslim countries, the Holy See, or the United States, it is treated with ridicule by UNFPA’s NGO allies, the groups that actually implement UNFPA programs.

256 www.unfpa.org/adolescents/page02.htm (accessed August 13, 2002).

to provide them. If this is the case, UNFPA would be providing what many parents would consider to be abortions for their children, without feeling the responsibility to inform those parents what their children are doing. Also, in almost every country in which UNFPA operates, it trains what it calls “peer counsellors” and “peer educators” — adolescents — who, in turn, teach other children about sexuality and refer them for reproductive services.²⁵⁷ Through this procedure, UNFPA drives a further wedge between children and parents.

Again, we can learn about UNFPA from the company it keeps. One of its “Major Civil Society Partners” is the International Women’s Health Coalition.²⁵⁸ IWHC acts to “counter the conservative positions taken by certain government delegations, including the United States and the Holy See, which seek to limit the access of adolescents to sexual health information and services through parental consent restrictions.”²⁵⁹ The Center for Reproductive Law and Policy, seeks to legalize abortion for adolescents, also without parental notification or consent: “Adolescents are also less likely to have the social contacts, access to transportation, and financial means to obtain a safe abortion. To address unsafe abortion, governments should consider enacting laws that permit abortion without restriction as to reason, such as the age of the mother or parental consent...”²⁶⁰

Still another “Major Civil Society Partner,” Advocates for Youth, creates lesson plans that inform both children and parents about sexuality and choice, and who possesses the ultimate power over sexual decision-making. For instance, it teaches parents that “it is important to share your values. However, remember that as your teen moves into young adulthood, he/she will make private decisions about sexuality. You will have no control over those decisions.” Alternately, it teaches children that “it is important to listen to your parents and consider their opinions carefully, even as you express your own opinions....but, in the end, the decision is yours to make.”²⁶¹ Advocates for Youth also seems concerned about the harmful effects of abstinence training, so it provides information to address this issue. According to this group, “Sexual abstinence means different things to different people....What is right for me may not be right for you.”²⁶² Finally, Advocates for Youth tells prospective teachers

257 www.unfpa.org/adolescents/casestudies/case004.htm (accessed August 13, 2002).

258 www.unfpa.org/adolescents/partners.htm (accessed August 13, 2002).

259 www.iwhc.org/index.cfm?fuseaction=page&pageDevID=390 (accessed August 13, 2002).

260 www.crlp.org/pub_fac_adoleicpd.html (accessed August 13, 2002).

261 www.advocatesforyouth.org/lessonplans/talking2.htm (accessed August 13, 2002).

262 Ibid.

that, when it comes to sexual ethics, “Emphasize that individual values differ and that there are no right or wrong answers.”²⁶³

Sexual education and rights advocacy constitute only a portion of UNFPA’s assault on traditional beliefs about family and sexuality. UNFPA seeks to undermine all remnants of tradition it finds objectionable. In 1995, Nafis Sadik said that “If culture and tradition are invoked to hold back change, and we hear this all the time, then culture and tradition must give way.”²⁶⁴ In 1998, she stated that “We need to be constantly chipping away at long-held cultural prejudices against gender equality, human rights and reproductive choice, especially for women in developing countries.”²⁶⁵ In this effort, UNFPA has targeted the representatives of traditional culture, including the world’s religious leaders. *Populi*, the UNFPA magazine, singles out Muslim and Catholic leaders as impediments to the world’s reproductive rights revolution:

In every region of the world, conservative forces have become key obstacles to the advancement of Cairo’s goals. Some of the hardest battles for reproductive rights are being waged by women in Latin America. In Mexico, for example, right-wing groups oppose all forms of contraception and adolescent sex education. In the Philippines, Catholic alliances have pushed for laws against family planning and abortion and campaigned to replace population education with ‘prolife sexuality modules’. In parts of West Africa, women report that Islamic conservatism is countering women’s agitation for sexual and reproductive choice. For example, in Mali, conservative women’s Islamic associations have sprung up with some Arab funding to discourage contraception.²⁶⁶

One of the ways UNFPA seeks to disarm “conservative” Catholic and Muslim leaders is to drive a wedge between the institutions and the faithful. UNFPA, for example, has asserted that lay people do not follow Church teachings when it comes to contraception, and that, by inference, the Holy See should lose its influence on this issue on the world stage.

263 www.advocatesforyouth.org/lessonplans/facilitatortips.htm (accessed August 13, 2002).

264 Dispatches – News from UNFPA, No. 2, October 1995.

265 UNFPA Press Release, POP/655, January 20, 1998.

266 Bharati Sadasivam, “Cairo Launched Progress on Several Fronts, But Obstacles Remain,” *Populi*, Vol. 26, No. 2, June 1999.

Mismanagement

A review of internal United Nations audits reveals serious and persistent shortcomings in UNFPA program performance. For example, the United Nations Board of Auditors has found that many UNFPA programs fail to achieve the outcomes UNFPA promises to its donors. According to the Board, “In 9 of the 12 completed projects examined, the executing agencies had failed to deliver all their planned outputs. Four projects, on which UNFPA had spent \$24.9 million by the end of 1999, fell significantly short.”²⁶⁷ In other words, 75 percent of the programs studied were not successful, while 25 percent were distinct failures. The audit “...also found problems in construction projects executed...on behalf of UNFPA. In one country, an evaluation concluded that construction quality was generally below standard...and in one area, nearly 25 percent of the [health] centres were either not usable or were not used. A significant number of buildings, including 55 sub-centres, were of such poor quality that the health authorities refused to accept them.”²⁶⁸

In other cases, the Board of Auditors found that it was impossible to gauge the success of UNFPA programs, because UNFPA simply does not monitor its programs. The Board’s 1999 audit concludes that “The Board is concerned at the worsening of the position regarding audit reports on programme expenditure, which has meant that UNFPA has no direct evidence to support half of the nationally and Non-governmental Organization-executed expenditure for the biennium 1998-1999.”²⁶⁹ This point must be underscored: 50 percent of the money UNFPA distributed in these two years could not be adequately accounted for, because UNFPA did not keep track of it. This would amount to tens of millions of dollars lost, its actual use uncertain.

Also, UNFPA does not design its programs so that they can be evaluated. The audit cites UNFPA’s “weakness in project formulation,”²⁷⁰ and concludes that UNFPA’s “poor project design hampered the effective measurement of the impact of projects.”²⁷¹ The report goes on to say that, “If projects do not define qualitative and quantitative outputs, or do not provide the baseline data needed to measure the outputs, UNFPA is prevented from properly

267 “Financial Report and Audited Financial Statements For the Biennium Ended 31 December 1999 and Report of the Board of Auditors,” UNFPA, A/55/5/Add. 7, page 10.

268 *Ibid*, page 30.

269 *Ibid*, page 16.

270 *Ibid*, page 22.

271 *Ibid*, page 10.

evaluating the actual progress and achievements of the projects. Further, without such information, it is difficult for UNFPA to demonstrate the success of its projects or the added value which they have provided.”²⁷² Taking these criticisms as a whole, it can be concluded that, for the great majority of UNFPA programs, either there is no information available, or what information does exist points to failure, not success. The Board of Auditors report should therefore undermine the claims repeatedly made by UNFPA and its supporters, who provide specific numbers of women saved by UNFPA, and abortions avoided by UNFPA.²⁷³ There is simply no way to know.

Audit reports point to the frequent breaching of United Nations and UNFPA financial regulations, both at individual UNFPA country offices and at UNFPA headquarters. For instance, “The OOM (UNFPA Office of Oversight and Management) studies indicated that compliance with rules and regulations had generally declined in 1999....A statistical analysis of the seriousness of audit observations revealed that 26 percent of the country offices had major weaknesses in the area of general administration and 22 percent had weaknesses in the area of programme matters. In 2000, less than half of the audited offices were found to have a satisfactory level of internal control, and 55 percent of the audited offices were rated less than satisfactory.”²⁷⁴ There have also been instances of “fraud or presumptive fraud”²⁷⁵ and “significant non-compliance with UNFPA’s rules and procedures.”²⁷⁶

It is certainly a shame that international aid money, money that could be used for other pressing matters, is wasted by UNFPA. But it is also likely that serious consequences result because of UNFPA incompetence and malfeasance. Because UNFPA is involved in healthcare, its failings could gravely affect the health and well-being of the

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272 Ibid, page 22.

273 See, for example, Nicholas D. Kristof, “Devastated Women,” *The New York Times*, April 26, 2002, page A29.

274 “UNFPA Internal Audit and Oversight Activities in 2000,” Report of the Executive Director, May 7, 2001, DP/FPA/2001/8, page 9.

275 “Financial Report...” page 31.

276 Ibid, page 10.

people it purportedly serves. For example, the Board of Auditors includes a strong indictment of the way in which UNFPA purchases condoms. According to the Board,

In the biennium 1998-1999, UNFPA spent \$91 million, or 58 percent of its procurement expenditure, on goods purchased through long-term pricing agreements. This mainly related to the purchase of contraceptives where it was not always possible to find a sufficient number of suppliers who could deliver products in the quantity and quality required....The Board noted that UNFPA only systematically monitored deliveries when it had undertaken procurement for another agency using external funds. For its own procurement actions, UNFPA failed to: routinely monitor deliveries; follow up with suppliers who had not delivered; monitor the receipt of receipt and inspection reports. Furthermore, UNFPA did not systematically evaluate other aspects of the quality of service provided by suppliers, such as compliance with contract conditions, timeliness of delivery, accuracy and reliability of deliveries or number of complaints.²⁷⁷

It appears as if UNFPA is unconcerned with the actual quality of the condoms it provides to the developing world. According to this United Nations document, UNFPA does not bother to monitor the quality or reliability of these contraceptives, which they distribute on a massive scale around the world,²⁷⁸ and which they claim to be the most effective means of stopping the spread of HIV/AIDS. In April, 2002, the *Africa News Service* reported that Tanzania had rejected ten million UNFPA condoms — \$800,000 worth — because they leaked.²⁷⁹ Tanzania was fortunate to discover that the UNFPA condoms failed permeability tests, before they were distributed. But it is certainly worth asking, as critics have, “If ten million UNFPA condoms were found by the Tanzanian government to be defective, how many tens of millions of leaky UNFPA condoms have been distributed around the world, to other countries in Africa, or to Tanzania in the past? Is UNFPA, by failing to ensure that its condoms don’t

277 Ibid, page 27.

278 UNFPA calls itself “the largest international supplier of condoms to developing countries for the past 30 years.” UNFPA Press Release, “UNFPA to Replace Condoms Shipped to Tanzania,” May 11, 2002.

279 “Shipment of 10 Million Condoms Blocked,” *Africa News Service*, April 23, 2002, as cited in Population Research Institute Weekly Briefing, April 25, 2002.

leak, actually contributing to the spread of HIV/AIDS?”²⁸⁰ It is not overly dramatic to state that lives are at stake, million of lives, and that UNFPA has not shown the proper respect for life that an agency with its mission and responsibilities should possess.

280 Population Research Institute Weekly Briefing, April 25, 2002.



Conclusion

The purpose of this paper is to suggest that UNFPA should be thoroughly and objectively investigated by the nations that support it. And this message is beginning to gain resonance, thanks to the work of human rights groups like Population Research Institute in the United States and dedicated individuals like House of Lords member David Alton in the United Kingdom. As we have seen, the Bush Administration has eliminated \$34 million in US aid for UNFPA — 13 percent of its budget — because the US government has determined that UNFPA abets forced abortion in China. Even in the European Union (EU) where support for UNFPA has been extremely strong, there are signs of some dissension. At the United Nations Commission on Population and Development held in April, 2002, six EU nations felt it necessary to address the criticisms of UNFPA explicitly, and to reiterate their support to the beleaguered agency. But, significantly, none of the other EU nations joined them in this statement, perhaps pointing to a disagreement about UNFPA's legitimacy.

UNFPA has claimed that its family planning programs can be kept distinct from the coercion that has made population control notorious around the world, and can be kept distinct from abortion. Both claims have been shown to be false. UNFPA has aided in the most violent, most coercive population control programs the world has ever known. UNFPA has shown a special affinity for these programs, and has never permanently abandoned one of them, because of its crimes against humanity. Instead, it justifies, defends, dissembles and advocates in the name of these programs. What is more, UNFPA provides abortion around the world, and will not tell the women who undergo these abortions what they actually happen to be.

According to the Nobel Prize-winning Harvard economist and philosopher Amartya Sen, population programs in the developing world have shown a tendency to “treat the people involved not as reasonable beings, allies facing a common problem, but as impulsive and uncontrolled sources of great social harm, in need of strong discipline.”²⁸¹ This “strong

281 Amartya Sen, “Population: Delusion and Reality,” *The New York Review of Books*, September 22, 1994.

discipline” is apparent in so many of UNFPA’s activities, even though UNFPA couches its programs in soft language, feminist rhetoric, and clever arguments. It is apparent to the women of Peru, who learned that they had been sterilized without their consent, to the women of Kosovo, who learned that UNFPA colluded with their oppressor, and it is apparent to the women of China, in all their countless millions, who were forced to abort their unborn children while UNFPA supported and praised the Chinese program.

Until UNFPA complicity in these crimes has been fully investigated, and until new guidelines have been established, all funding, from all countries, should be suspended. We recommend that UNFPA donor countries make further honest investigations into UNFPA support for coercive population programs, not just in China but in every authoritarian regime that operates population-control programs. Moreover, donor countries should have the courage to withdraw their funding for UNFPA when they conclude that UNFPA supports coercion. Finally, donor countries should consider establishing a new international medical agency to assist women, children and families as individual patients, rather than as demographic statistics. Until the pall of population control has been lifted from UNFPA, the world community should have little faith that the actions of UNFPA will respect the inherent dignity of all human beings.

LIST OF ACRONYMS

AIDS	Acquired Immune Deficiency Syndrome
AQV	Anticonception Quirurgica Voluntaria
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CRLP	Center for Reproductive Law and Policy
EU	European Union
FP	Family planning
FPA s	Family Planning Associations
HIV	Human immunodeficiency virus
ICPD	International Conference on Population and Development
IPPF	International Planned Parenthood Federation
IUD s	Intrauterine devices
IWHC	International Women’s Health Coalition
MR	Menstrual regulation
MSI	Marie Stopes International
MVA s	Manual vacuum aspirators
NARAL	National Abortion and Reproductive Rights Action League
NGOs	Non-governmental Organizations
OOM	UN Office of Oversight and Management
PATH	Program for Appropriate Technology in Health
PPFA	Planned Parenthood Federation of America
RH	Reproductive health
STD	Sexually transmitted disease
UN	United Nations
UNICEF	United Nations Children’s Fund
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
WHO	World Health Organization

BIOGRAPHIES

Douglas A. Sylva, Ph.D. is a senior fellow at the Catholic Family and Human Rights Institute (C-FAM). Sylva researches topics related to international social policy, law, and sovereignty; his writings on these subjects are published widely, including by the *New York Times*, the *Washington Times*, *National Review*, *First Things*, and the *Weekly Standard*. He advises UN delegates and civil society on matters relating to international organizations, documents and law. He has addressed the British House of Lords, the German Bundestag, and the US Congress. In 2008, he was an expert witness at a European Parliament debate on the status of reproductive rights in international law. Sylva was a member of the Holy See delegation to the United Nations Ad Hoc Committee on the Rights and Dignity of Persons with Disabilities (2005-2007), and served on Holy See delegations to various Organization of American States meetings, including the 19th Pan-American Children's Congress in Mexico City. Sylva has written comprehensive studies on international bodies and their agendas. His White Paper on the United Nations Population Fund (UNFPA) was highly influential within the Bush administration. His White Paper on the United Nations Children's Fund (UNICEF) has been widely seen as blueprint for reform of that agency. Sylva is a graduate of Dartmouth College and earned Ph.D. in political science from Columbia University in 2001. He and his wife, Susan, are the parents of five children and reside in Summit, New Jersey.

Susan Yoshihara, Ph.D. is vice president for research at Catholic Family & Human Rights Institute (C-FAM) and director of the International Organizations Research Group (IORG). In that capacity she manages C-FAM's day to day research efforts and is the editor in chief of the IORG White Papers Series, IORG Briefing Papers, the Law Group Papers, and Legal Briefs series. Since 2006 she has participated in major international social policy negotiations as a leader in civil society coalitions, including the negotiations for the UN Convention on the Rights of Persons with Disabilities and the annual Commission on the Status of Women. Before joining C-FAM, Susan was on the faculty at the Naval War College, where she taught national security decision making and international relations. A retired US Navy helicopter pilot, Susan flew combat logistics and humanitarian operations in the Pacific and Persian Gulf and is a Gulf War veteran. She worked on international trade issues as a White House Fellow, is a graduate of the US Naval Academy, earned her M.A. in national security affairs at the Naval Postgraduate School in Mon-

terey, California, and her Ph.D. in international relations from the Fletcher School of Law and Diplomacy at Tufts University. In addition to her research on international social policy, her research areas include human rights, humanitarianism, and intervention. She is currently editing a book project on demographic decline and great power politics with Doug Sylva. Susan is the author of *Waging War to Make Peace: US Intervention in Global Conflicts* (New York: Praeger, 2010) forthcoming.

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