

Access By Any Other Name

How the SDG “need satisfied” indicator serves the interests of family planning advocates rather than women themselves

Family Planning in the Sustainable Development Goals:

SDG 3.7: “By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education...”

SDG 5.6: “Ensure universal access to sexual and reproductive health and reproductive rights...”

International agreements call for women and couples to have access to the knowledge and means to determine the number and spacing of pregnancies.

Family Planning Indicator:

“Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods”

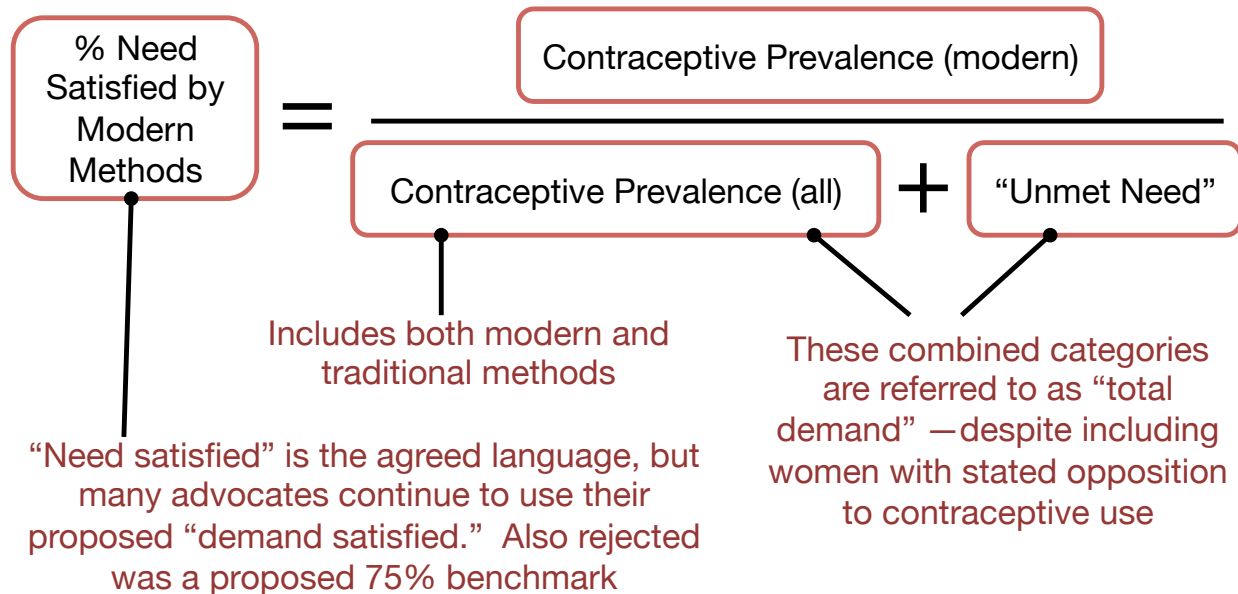
But attempts to set targets and quotas for family planning use have led to human rights abuses. Do the standards set by the SDG targets and indicators reflect the priorities and wishes of individual families?

The key is the difference between “access” and “use.”

What We Know:

- 214 million women in developing regions are described as having an “unmet need” for family planning.
- Only 5% of those women cite lack of access as the reason they aren’t using family planning. Most cite concerns about health, personal opposition, infrequent sex, or other reasons.
- International survey questions about pregnancy intentions do not ask about ambivalence, despite evidence that it exists in many cases. Therefore, measurements of “need” conceal a wide range in the level of motivation to avoid pregnancy.
- The SDG indicator focuses on “modern methods” of family planning. But the metadata classifies all “natural” or “fertility awareness-based” methods as “traditional,” not modern. Despite the fact that many of these methods have been rigorously tested for feasibility, acceptability, and efficacy, they are classified alongside folk methods unsupported by scholarly evidence. Meanwhile, condoms are classified as “modern” despite being an ancient method.

Does the SDG family planning indicator actually measure access?



Since this indicator is structured as a fraction, a country’s performance is tied to decreasing two things: “unmet need” and the use of family planning methods classified as “traditional” or non-modern.

Family planning advocates claim that increased use of modern contraceptive methods will reduce fertility and lead to the empowerment of women. Yet many of the women classified as having a “need” have indicated their non-use of contraceptives is a matter of personal choice.

For many of those women, their choice is tied to devout religious belief. While these women might be ideal candidates for fertility awareness-based methods —and many are already using them—for the purposes of the SDG indicator, these women count against their country’s performance.

The Way Forward:

- **Knowledge of family planning is near-universal.**
- **Stated lack of access to family planning is increasingly negligible.**
- **The concept of “unmet need,” which is an integral part of the SDG indicator, is misleading and frequently misused as a measure of lack of access.**
- **Classifications of family planning methods should be updated to include modern, fertility awareness-based methods.**