

THE UNFINISHED BUSINESS OF MDG5 AND THE SDGs

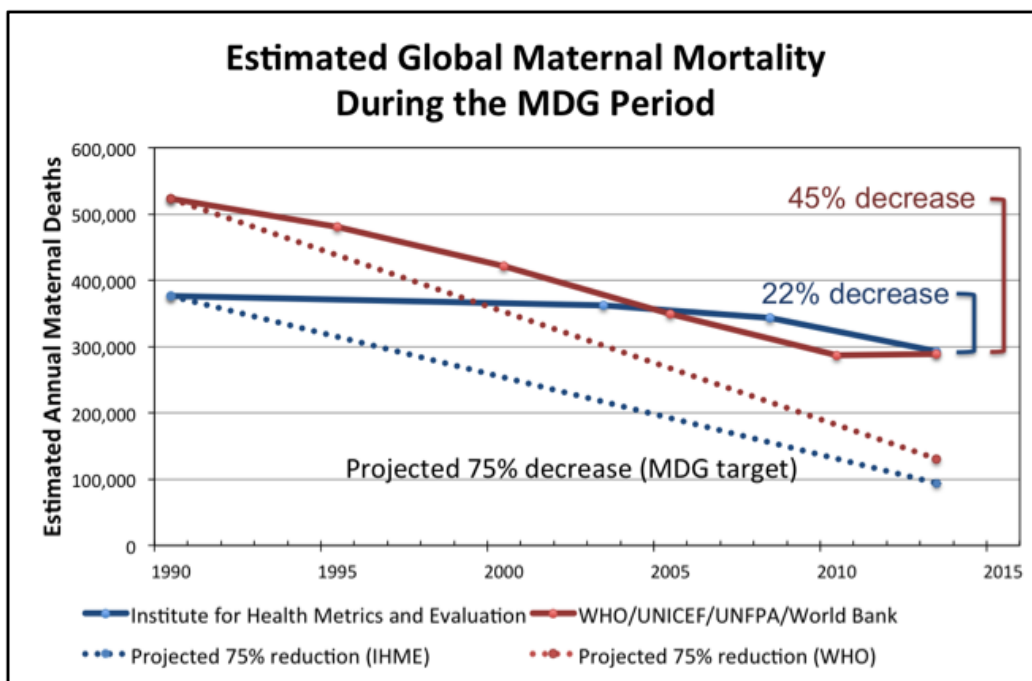
Every year mothers lose their lives because resources that could improve maternal health are spent elsewhere. ICPD policies have only reduced maternal deaths 22% since 1990. Only a fraction of resources for population activities is devoted to maternal health. They focus instead on power inequalities, fertility reduction, sexual autonomy, abortion, and reproductive rights.

We know better than ever before what policies will save the lives of mothers. A landmark study from Chile shows the country's maternal mortality rate decreased 93.8% to one of the lowest in the world since 1950 thanks to improvements in women's education and in maternal health care.¹

The implementation framework for ICPD policies is already sufficient, and does not need reinforcement in the SDGs. Countries are already committed to the ICPD beyond 2014 and presently spend over \$60 billion on ICPD policies. UNFPA, which oversees the implementation of ICPD, saw its contributions and income more than triple from \$309.3 million in 1998 to \$976.8 million in 2013.

ICPD polices have already achieved remarkable success in garnering political attention and funding on their own terms. Even in Africa 98% of married women say they have access to contraception, according to the Guttmacher Institute.

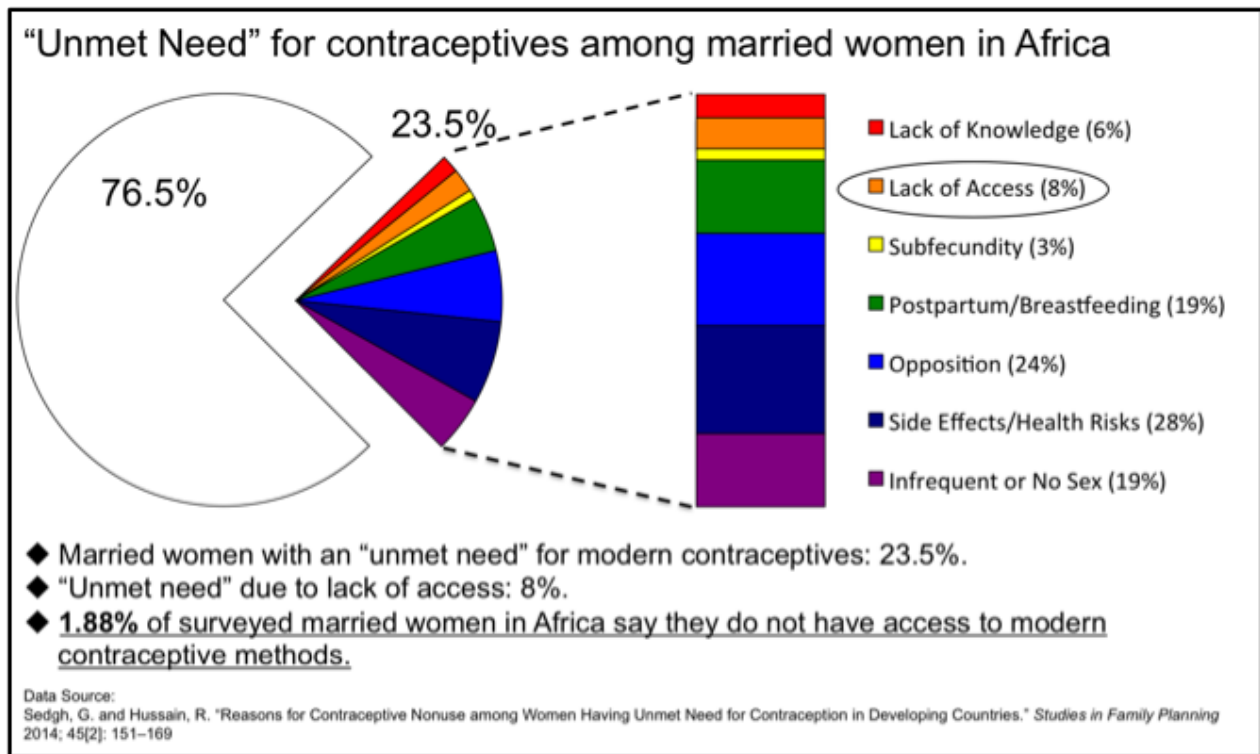
Disproportionate emphasis on fertility reduction rather than maternal health has not only diverted funds from genuine maternal health initiatives, but has sometimes led to the propagation of harmful hormonal contraceptives in the name of family planning.



Globally over \$7 billion dollars is directed annually to family planning in developing countries. Significant research has been dedicated to analyzing the scaling up, promotion, and distribution of progesterone injectables and implants. This research has found that these widely-distributed injectables double the risk of breast cancer and increase HIV transmission despite knowledge of these and other harmful health side effects.

¹ Koch E, Thorp J, Bravo M, Gatica S, Romero CX, et al., "Women's Education Level, Maternal Health Facilities, Abortion Legislation and Maternal Deaths: A Natural Experiment in Chile from 1957 to 2007," (2012) PLoS ONE 7(5): e36613

The term “reproductive rights” refers to changing norms, not concrete measurable outcomes or results. Reproductive rights diverts attention from concrete conditions of women and men to debates about normative change best left to sovereign states. Indicators for such a target would result in intrusive scrutiny of national laws on abortion, assistive reproductive technologies, regulations on the safety of contraceptives and their delivery, to name a few.



The post-2015 development agenda will determine how billions of dollars in aid are spent.

Countries must ensure that essential development priorities are a focus of aid, and not redundant programs. For example, USAID funding for family planning stands at an all time high \$644.3 million in 2014, outpacing contributions to water supply and sanitation at \$171.2 million, and nutrition at \$197.2 million. U.S. funding of family planning has gone up 47% since 2006 despite slashes across the board to U.S. foreign assistance. By comparison funding for education has gone down 43% since 2010.

“Comprehensive sex education” is a term fraught with difficulties. Recent proposals from some groups in civil society are of concern. This term is not representative of all parents, educators, and researchers with regards what constitutes healthy behavior, and could end up supporting initiatives that will be harmful to the health of children and youth. Safe-sex instructions often do not convey the risks associated with sexual activity. The sexual education establishment in particular, which includes WHO, UNICEF, UNESCO, UNFPA, IPPF, USAID, CARE and others, does not do enough to protect children from messages that encourage early sexual activity. Nor do their guidelines encourage risk avoidance through abstinence and fidelity. Instead, they promote risk reduction by using condoms, without adequate warnings of the remaining risks.



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