

Overpopulation and voluntary family planning: setting a new political agenda

The Congress of the Alliance of Liberals and Democrats for Europe (ALDE) Party convening in Madrid, Spain, on 8-10 of November 2018:

Is convinced that:

- voluntary family planning allows people to attain their desired number of children and determine the spacing of pregnancies. It is achieved through use of all available contraceptive methods. Treatment of infertility as well, on the other hand, is implicit in the idea of family planning;
- international and regional human rights treaties and national constitutions and laws provide legally binding obligations for States to ensure timely and affordable access to quality family planning information, services and contraceptive commodities for men and women; [1]
- human rights principles as the foundation of all family planning activities, including those focused on generating demand, meeting unmet needs, and improving quality of care, reinforce people's rights to determine the number and spacing of their children. This is stated in several publications such 'Human Rights and Empowerment Principles for Family Planning' [2] and the World Health Organisation 'Ensuring human rights in the provision of contraceptive information and services: guidance and recommendations'. [3]
- family planning is key to slowing unsustainable population growth and the resulting negative impacts on the economy, environment, and national and regional development efforts. [4]
- investments in family planning are a long-term crucial answer to contributing to tackling overpopulation, with an impact on the environment, economic development and public structures available.

Notes that:

- contraceptive use has increased in many parts of the world, especially in Asia and Latin America, but continues to be low in sub-Saharan Africa. Globally, use of modern contraception has risen slightly, from 54% in 1990 to 57.4% in 2015. Regionally, the proportion of women aged 15–49 reporting use of a modern contraceptive method has risen minimally or plateaued between 2008 and 2015. In Africa it went from 23.6% to 28.5%, in Asia it has risen slightly from 60.9% to 61.8%, and in Latin America and the Caribbean it has remained stable at 66.7%; [5]

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- the USAID publication 'Three Successful Sub-Saharan Africa Family Planning Programs' [6] show how African best practises of Ethiopia, Rwanda and Malawi share a common strategy: these countries are moving more rapidly toward this goal than any others in sub-Saharan Africa. Contraceptive prevalence has risen steadily from a low starting point and moved upward sharply in most years in all three countries: from 2000 to 2011 in Ethiopia from 6.3% to 27.3%, in Rwanda from 5.7% to 45% and Malawi from 26.1% to 42.2%. Such progress is helping these countries move closer to what the development community calls "the demographic dividend," a concept highlighted in the 2011 International Conference on Family Planning (ICFP) in Dakar that links progress in family planning with larger development goals;
- in particular these achievements have been possible due two main strategies: 1) countries dramatically reduced financial barriers to access modern contraceptives including all modern contraceptives in mutuelles, community-based insurance scheme, or using other financial exemption schemes; 2) huge task shifting, reducing physical distances from the poorest to the provision of services have been done with training schemes: provision of long-acting family planning methods shifted from doctors (therefore from hospitals) to nurses at the health centre level while provision of condom and pills shifted from nurses (health centre level) to trained community health workers, present in every single village.

Keeps in mind that:

- the opening article of the second Lancet Neonatal survival series 'Who has been caring for the baby?' [7] highlights (among many other publications) an analysis of factors associated with changes in maternal and neonatal mortality rates, (MMR and NMR): countries with high total fertility rates had slower declines in MMR and NMR, emphasising the importance of linking new-born health and family planning programs; [8]
- evidence suggests that women who have more than four children are at increased risk of maternal mortality; [9]
- most recent WHO published data [10] estimate that 214 million women of reproductive age in developing regions who want to avoid pregnancy are not using a modern contraceptive method. This huge unmet need is especially high among groups such as: adolescents, migrants, urban slum dwellers, refugees and women in the postpartum period;
- the Sustainable Development Goals (SDGs) make specific references to family planning in regard to health and well-being, gender, equality and women's empowerment. Ensuring that all women and adolescent girls have access to high-quality, rights-based voluntary family planning services contributes towards achieving these goals, slowing rapid

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population growth, contributing towards the SDGs related to the economy, environment and development; [11]

- providing access to these women would prevent 67 million unintended pregnancies and would reduce induced abortions from 48 million to 13 million. It would also reduce maternal deaths by 76,000 per year, newborn deaths from 2.9 million to 660,000 per year and HIV infections in new-borns from 130,000 to 9,000; [12]
- UN Secretary General Global Strategy for Women's and Children's health, at least since 2010: highlight partners must ensure that women and children have access to a universal package of guaranteed benefits, including family-planning information and services;
- according to FP2020 the recent trends in donor government funding for family planning has been largely driven by the two largest donors, the US

and the UK, which have accounted for approximately two-thirds of total funding over the last decade. Other main Family Planning donors include:

Australia, Denmark, France, Germany, the Netherlands, Norway, and Sweden; [13]

- at European Union level, even if EU and its 28 Member States are in general terms the biggest donor worldwide, it is not possible to track transparently the specific EU contribution on family planning.

Calls on all member parties of ALDE, to promote and support in their respective countries norms and policies on:

- supporting programs on cooperation and development for sexual and reproductive health (SRHR), including family planning, in countries that are lagging behind in achieving the SDGs with reference to family planning;
- taking action in the next budgets, that local and National Governments include earmarked funding for sexual and reproductive health (SRHR), including family planning, either through an explicit SRHR budget line or as a cross-cutting objective under various budget lines (health, education, youth empowerment, human rights, gender);
- organising a national political delegation taking part in the fifth International Conference on Family Planning (ICFP) to be held in Kigali, Rwanda, 12-15 November 2018 organised by the thematic foundation of Bill & Melinda Gates as well as the next most prestigious international conferences;
- ensuring that everyone, and in particular young people have access to information, supplies and services to make their free and informed choices with regards to sexual and reproductive health.

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Calls on all member parties of ALDE:

- to recognise this as a political issue and not only as a humanitarian matter;
- in accordance with the 2017 European Consensus on Development, to take action in the next Multiannual Financial Framework (MFF), that EU include earmarked funding for sexual and reproductive health (SRHR), including family planning, either through an explicit SRHR budget line or as a cross-cutting objective under various budget lines (health, education, youth empowerment, human rights, gender);
- to launch the battle for the right to access to reproductive health, for the elimination of the unmet need for family planning, "from 214 million to zero unmet need for contraception" within the political agenda of these coming EU election;
- to organise an ALDE political delegation to take part in the fifth International Conference on Family Planning (ICFP) to be held in Kigali, Rwanda, 12-15 November 2018 organised by the thematic foundation of Bill & Melinda Gates as well as the next most prestigious international conferences.

Sources:

[1] [who.int/iris/bitstream/handle/10665/255859/WHO-RHR-17.07-eng](http://www.who.int/iris/bitstream/handle/10665/255859/WHO-RHR-17.07-eng)

[2] www.familyplanning2020.org/rightsprinciples

[3] Ensuring human rights in the provision of contraceptive information and services: guidance and recommendations 11. World Health Organization. ISBN 978 92 4 150674 8 (NLM classification: WP 630)

[4] www.who.int/en/news-room/fact-sheets/detail/family-planning-contraception

[5] www.who.int/en/news-room/fact-sheets/detail/family-planning-contraception

[6] www.fhi360.org/sites/default/files/media/documents/africa-bureau-case-study-report.pdf

[7] www.thelancet.com Published online May 20, 2014 [http://dx.doi.org/10.1016/S0140-6736\(14\)60458-X](http://dx.doi.org/10.1016/S0140-6736(14)60458-X)

[8] Lawn JE, Kinney MV, Black RE, et al. Newborn survival: a multi-country analysis of a decade of change. *Health Policy Plan* 2012; 27 (suppl 3): iii6–28.

[9] www.who.int/en/news-room/fact-sheets/detail/family-planning-contraception

[10] www.who.int/reproductivehealth/topics/family_planning/contraceptive-access-women-and-girls/en/. 8 February 2018

[11] Investing in family planning: Key to achieving the Sustainable Development Goals. *Glob Health Sci Pract.* 2016; 4(2): 191–210. Starbird E, Norton M and Marcus R.

[12] Adding it up: investing in contraception and maternal and newborn health, 2017. 2017 Guttmacher Institute: New York, USA.

[13] 2015 Kaiser Family Foundation's annual analysis of donor government funding for family planning.

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