

REDUCING INEQUITIES: ENSURING UNIVERSAL ACCESS TO FAMILY PLANNING

Fifteen years after 179 nations committed to improving the reproductive health of women and couples, UNFPA reflects on the ongoing challenges to achieving the goals set forth at the International Conference on Population and Development in 1994. A group of 30 technical experts and programme managers including representatives from Bangladesh, Egypt, Guatemala, Kenya, India, Senegal, Tanzania, and Uganda, will meet in New York from June 30 to July 2, 2009 to examine inequities in access to and use of family planning and identify approaches to ensure universal access for all.

Background:

Family planning has been one of the development and public health successes of 20th century. It has saved many lives, changed the face of the world, and transformed the lives of women. Since [ICPD](#), freedom to decide about the number and timing of children is recognized as a vital component of reproductive health and as a human right.

Family planning saves lives. Family planning allows women to delay motherhood, space births, avoid unintended pregnancies and abortions, stop childbearing when they have reached their desired family size, and prevent the spread of infectious disease. Current levels of contraceptive use are estimated to prevent 215,000 pregnancy-related deaths, and this number could multiply if the unmet need for family planning can be met. UNFPA considers family planning one of the three pillars for decreasing maternal mortality and morbidity, together with skilled birth attendance and emergency obstetric care. Each year modern contraceptives help prevent, 2.7 million infant deaths and the loss of 60 million years of healthy life.

Family planning is an investment in future prosperity. Contraceptive use promotes economic development. Investment in contraceptive services can significantly reduce public spending on health and other services. In the context of the financial crisis, when resources are limited, investing in family planning is even more attractive -- because it is a cost-effective intervention with both short term and long term impact. Family planning is instrumental for eliminating poverty, achieving universal primary education, and for environmental stability. Recognizing the role family planning plays in meeting the Millennium Development Goals, World Summit 2005, reaffirmed the need to keep gender equality, HIV/AIDS and reproductive health at the top of the development agenda. Subsequently, additional targets, including universal access to reproductive health by 2015, and related indicators were added to the Millennium Development Goals.

Inequities in family planning use

While the last two decades have seen improvements in access to and utilization of family planning services, progress in many countries has been slow and – after decades of investments – disappointing. One in ten women -137 million- in today's world has an unmet need for family planning. That means they do not use contraception despite the fact that they want to avoid pregnancy. In the least developed countries in sub-Saharan Africa, one in four women want to avoid pregnancy but do not use contraception.

Women of all social and economic status express a desire to limit or space their children. Yet, women with greater access to financial and social resources are adopting family planning practices faster than their more vulnerable counterparts. The existence of these inequities in use of family planning are of interest to public health programmes, political leaders, and civil society because these disparities are markers of injustice in society as well as indicators of the capacity of the public health system to meet the needs of the most vulnerable individuals in society. Health inequity is defined as "inequalities in health deemed to be unfair or to stem from some form of injustice. The dimensions of being avoidable or unnecessary have often been added to this concept."

Recent efforts to identify and address the inequities in family planning challenge the notion that disparities in service utilization and health outcomes are unavoidable and insurmountable. Some countries have made progress in reducing the gap in contraceptive use. If public-health programmes endeavour to provide equitable access to services, then decreasing disparities in service utilization represent an important indicator of programme achievement.

The planned meeting is intended to bring together experts in the field of family planning to review key evidence of inequities in access to family planning and identify programmes which have been successful in reducing the underlying barriers to access. Specifically the meeting intends to:

- Identify underserved populations and describe the current gap in access to and utilization of family planning services,
- Describe successful programmes that have addressed vulnerabilities and improved utilization of family planning among underserved groups, and
- Define actions to be taken by development partners and governments to achieve universal access to family planning, specifically to improve access among vulnerable and hard to reach populations.

It is expected that the meeting will result in a document which outlines specific and practical actions to improve access. These Recommendations for Action this be developed and endorsed by the meeting participants and disseminated widely by UNFPA.