



United States Failure to Adequately Address International Reproductive Health Needs

In 1994, at the International Conference on Population and Development (ICPD) in Cairo, 179 countries, including the U.S., agreed to commit by the year 2005 \$18.5 billion annually to meet worldwide reproductive health needs. But every year since 1994, donor countries have fallen far short of the ICPD goals.

U.S. Retreats From Its Promises

"Since Cairo, the U.S. government has made a massive shift away from its former position as a leader in the global drive for [sexual and reproductive health and rights]. Responding to pressure from the religious right and other social conservatives, the Bush administration has instead joined the Vatican and a few conservative governments to oppose a rights-based approach to human sexuality and reproduction."

--"Countdown to 2015," Population Action International, Family Care International, Int.'l Planned Parenthood Federation, 2004.

Despite the fact that millions of women worldwide are without access to safe and effective family planning and reproductive health services, the U.S. only contributes 1/3 or less of its share of the \$7.5 billion from donor nations promised yearly. *The US is not doing its share to help close the gap between the need for international family planning assistance and funding from donor nations.*

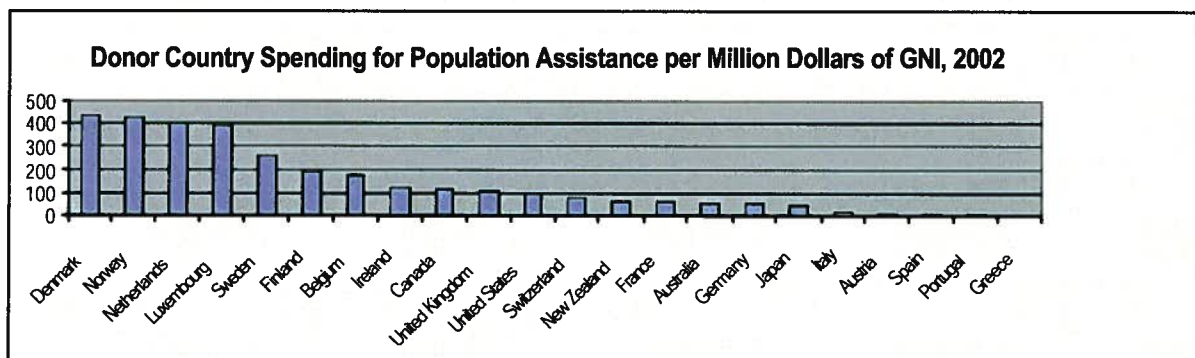
To meet its "fair share," the United States would need to increase its population assistance (which includes HIV/AIDS spending) from \$963 million (2002) to \$3.2 billion yearly. Only 40% of the \$963 million went to family planning and reproductive health services. And increasingly, U.S. funding goes to abstinence-only programs.

The United States Falls Far Behind Donor Nations in Spending on Population Assistance Relative to Income

While the U.S. remains one of the largest donors to international family planning programs, the U.S. contribution to population assistance relative to gross national income (GNI) is still far behind countries such as Denmark, Norway, the Netherlands, and Belgium (see chart).

The U.S. contribution for foreign aid (only .14% of GNI in 2002) falls far short of the .7% of GNI encouraged by the international community. The U.S. only spends two-tenths of one percent of its budget on foreign assistance (some \$16 billion), and only about 2% of U.S. foreign aid is spent on family planning assistance. In comparison, the cost of just 2 F/A-22 fighter planes (of which the U.S. is requesting 25 in its FY2006 budget) is more than the entire international family planning budget.

Every \$1 million shortfall in contraceptives is likely to result in about 360,000 unwanted pregnancies, 150,000 abortions, and more than 800 maternal and 11,000 infant deaths.



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The United States is the only major donor that does not provide funding for the United Nations Population Fund (UNFPA)

For the last three years, the Administration has refused to release tens of millions of dollars that Congress appropriated to the United Nations Population Fund based on false allegations that its program in China supports coercive abortion.

The blocked U.S. contribution to the UNFPA would make up 13 percent of the total funding for its international family planning programs every year - enabling UNFPA to prevent two million unwanted pregnancies, 4,700 maternal deaths, nearly 60,000 cases of maternal illnesses and over 77,000 cases of infant and child death annually.

Constraints on Developing Nations

Current U.S. international family planning policies, such as the Global Gag Rule, are compromising the effectiveness of U.S. assistance. On January 22, 2001, his first official day in office and the anniversary of *Roe v. Wade*, U.S. President George W. Bush issued an executive order reinstating the “global gag rule,” a Reagan/Bush Sr. policy that bars family planning programs outside the U.S. that receive federal aid from using separate monies for abortion counseling, advocacy, and referrals. Under this policy, international family planning programs that provide a wide range of resources, including gynecological exams, AIDS prevention and treatment, and contraception, are forced to lose a large percentage of their operating costs, or to discontinue services formerly paid for by separate dollars.

“USAID only provided 233 million condoms to developing nations in 2002, from a high of 800 million condoms in 1991. This means from all sources of aid worldwide, there are only 5 condoms per man per year in sub-Saharan Africa—the region that has been the hardest hit by the AIDS pandemic.”

Sources:

Financial Resource Flows for Population Activities Report (FRFPAR), United Nations Population Fund, 2002; Progress and Promises: Trends in International Assistance for Reproductive Health and Population, Population Action International 2004; Countdown to 2015, Population Action International, Family Care International, Int.'l Planned Parenthood Federation, 2004; “Meeting the Need for Contraceptives” fact sheet, Family Care International & Communications Consortium Media Center, 2001; “Sharing Responsibility: Women, Society, and Abortion Worldwide,” Alan Guttmacher Institute, 1999.

“The real impact of this ‘global gag rule’ is to limit access to a range of sexual and reproductive health services—including contraception—worldwide. The real intention is to leave people with only one choice—abstinence. This lack of choice condemns millions of women and men to STIs, including HIV, unwanted pregnancies and, in many cases, to the unsafe and illegal abortions the policy purports to prevent.”

--“Countdown to 2015,” Population Action International, Family Care International, Int.'l Planned Parenthood Federation, 2004.

How do current U.S. International Family Planning Policies Affect Young People?

The costs to young women are enormous. According to the World Health Organization, an estimated 80,000 women and girls die every year due to complications from illegal and unsafe abortions worldwide, and experts estimate another 6-7 million are injured. The actual numbers of deaths and injuries are believed to be more than twice this number, due to under-reporting. Every minute of every day, somewhere in the world, most often in the developing nations, a woman dies from complications of pregnancy or childbirth—**529,000 deaths per year. Some 16 to 26 million more women suffer from mostly preventable, childbirth- or pregnancy-related injuries every year.**

International family planning programs provide women and girls with the necessary means to improve their reproductive health including ways to postpone pregnancy, to space the births of children, to prevent women and girls from dying from preventable complications from pregnancy and childbirth, and to avoid unplanned pregnancies.