

GENEVA POLICY DIALOGUE SERIES ON REPRODUCTIVE HEALTH

Delivering on the Promise of Universal Access to Reproductive Health: Countries Leading the Way

Summary: Inaugural Event

Wednesday, 18 May 2011

U.S. Mission to Geneva, Switzerland

On May 18, Aspen Global Health and Development (GHD)'s IDEA initiative, in partnership with the World Health Organization Reproductive Health Division (WHO) launched the Geneva Policy Dialogue Series on Reproductive Health, an annual series to be hosted at the World Health Assembly (WHA) each year from 2011-2014.

Currently there are 215 million women in the world who want to delay or avoid their next pregnancy but do not have access to family planning. Women with unmet need account for 82% of the 75 million unintended pregnancies that occur in the developing world. We know that every year more than half a million women die unnecessarily during childbirth or from pregnancy complications. The lives of these women and of their children could be saved by access to comprehensive reproductive health care, empowering women and their partners to plan sustainable families that will strengthen their communities and support the economic growth and security of their countries. This May 2011, the World Health Organization (WHO) convened the 64th World Health Assembly, the annual meeting of the WHO's 193 Member States and supreme decision-making body which sets the policy for the Organization regarding urgent public health measures.

By providing a forum for discussing and supporting progress on implementation of commitments such as the Maputo Plan of Action, the Ougadougou Declaration, the U.N. Secretary-General's Global Strategy for Women's and Children's Health and WHO Global Reproductive Health Strategy, this Dialogue Series will broaden the debate about the centrality of reproductive health within global development. As the inaugural event's moderator, GHD Senior Strategic Advisor Dr. Lyndon Haviland, commented, 'Talking about family planning and reproductive health is hard. It is both an intimate conversation and it must become a national and international priority.' The series will also allow countries to share best practices and policy options and inspire leaders to serve as champions for reproductive health.

The inaugural event in the Dialogue Series was hosted by **Ambassador Betty E. King**, U.S. Permanent Representative to the United Nations in Geneva, and featured the following speakers:

- **Vice Admiral Regina Benjamin**, U.S. Surgeon General
- **Dr. Flavia Bustreo**, Assistant Director-General of Family and Community Health, World Health Organization
- **Ms. Peggy Clark**, Executive Director of Aspen Global Health and Development
- **Honorable Nils Daulaire**, Director, Office of Global Health Affairs, U.S. Department of Health and Human Services
- **Honorable Tedros Adhanom Ghebreyesus**, Minister of Health, Ethiopia
- **Dr. Gill Greer**, Director-General, International Planned Parenthood Federation
- **Ms. Nyaradzayi Gumbonzvanda**, General Secretary, World YWCA

- **Dr. Mike Mbizvo**, Director of the Department of Reproductive Health and Research, World Health Organization
- **Dr. Fidele Ngabo**, Director of the of the Maternal and Child Health Unit, Ministry of Health, Rwanda
- **Dr. Babatunde Osotimehin**, Executive Director, United Nations Population Fund
- **Dr. Sudha Sharma**, Secretary of Health and Population, Nepal

More than 80 people representing over 15 countries came to engage in discussions regarding innovations in policy, financing, and service delivery that leaders have used to move the needle on achieving access to reproductive health. Among the attendees were Ambassador M.A. Getahun, Permanent Mission of Ethiopia and the Honorable SE Jean Michel Mandaba, Minister of Health, Central African Republic.

The evening opened with remarks from Ambassador King, who cited her own commitment to reproductive health in her welcome to the participants who filled the U.S. Mission. Ambassador King also highlighted the United States' commitment to "scaling up [our] work in family planning and maternal and child health," noting that "family planning represents one of the most cost-effective public health interventions in the world today." GHD Executive Director Peggy Clark welcomed the audience to "deliver on the promise of universal access of reproductive health, and to hear from and honor countries leading the way in that struggle." Dr. Flavia Bustreo and Dr. Babatunde Osotimehin provided remarks on the global status of reproductive health at a moment of heightened commitments made by country leaders to progress on this issue but also a historic year of reaching a worldwide population of seven billion.

Explaining the Aspen Institute style of intimate dialogue on issues that matter, event moderator Dr. Lyndon Haviland remarked, "We can't talk about policies without remembering people: how do we expand to meet the needs of the 214 million women and families who want family planning and have no access, ensuring people can reach services, information, and commodities, where and when they need them." She then guided the dialogue through three targeted panels addressing innovative policy and financing approaches and expanding service delivery.

In the first panel on policy innovations, Dr. Sudha Sharma discussed how Nepal—in the midst of reform—made universal access to family planning a constitutionally protected right and took control of negotiations with donors and development partners. She related how approaches like Nepal's Sector-Wide Approach (SWAp) and female health volunteers have broadened access to reproductive health, resulting in dramatic health indicator improvements like the drop in fertility rate from 6.3 births per woman in 1976 to 2.9 in 2009. The Honorable Nils Daulaire, with his wide-ranging experience as health program implementer and U.S. policy negotiator, discussed the role of U.S. policy in "the health and well-being of women and children around the world," and how he has worked to ensure that this influence is a positive one, most recently with President Obama's Global Health Initiative (GHI), which emphasizes country ownership and a systems-wide approach.

The second panel focused on government and civil society working together to expand reproductive health access. Nyaradzayi Gumbonzvanda introduced the role of community, especially in rural areas, by discussing the village where she was her mother's 12th pregnancy and last child before her father died. Women, she explained, form a social protection network in the place of infrastructure, and the loss of this community contribution in addition to the economic implications for the family and the workforce when a mother dies translates to a severe financial loss – a cost that countries can prevent by investing in reproductive health. Ms. Gumbonzvanda spoke to the role of civil society in ensuring these hard-to-

reach populations have access to services in three areas: ensuring policy is “comprehensive, adequate, relevant, and accessible,” offering a safe space for intimate dialogue about women’s needs, and playing a role in the network of service provision.

Honorable Tedros Ghebreyesus explained that the model for Ethiopia’s celebrated Health Extension Worker program, which has put two female high school graduates into each village and is credited with raising the country’s modern contraceptive prevalence increased 40% from barely 7%, was an agriculture extension program placing three experts in each village to train the small holder farmers who drive Ethiopia’s economy to double production. Dr. Tedros explained that this inter-sectoral cooperation flows from Ethiopia’s government-wide campaign to end poverty, where the common focus on the ultimate end goal helps Parliament calculate how to invest between the sectors, and advised other health ministries to be “team players” when it comes to finance discussions.

These recommendations segued into the third panel on reproductive health financing, featuring Dr. Gill Greer and Dr. Fidele Ngabo. Dr. Ngabo spoke to the strategies his ministry had used to get reproductive health on Rwanda’s financing agenda, emphasizing the cost-effectiveness of meeting the existing demand for family planning. When families have the tools to space births and make decisions about how many children they want, the country saves money that would have otherwise been needed to open additional schools and health centers, and train and pay new teachers and health workers. He recommended presentations that focus on the numbers to show how effective investments in family planning are in the long-run. Dr. Greer discussed the role of IPPF in ensuring country commitments are realized, and echoed Dr. Ngabo’s emphasis of the cost-effectiveness of reproductive health: “The money must be spent. It is not a cost, it’s an investment.”

Having heard the models for leaders and policymakers to accelerate the rate of progress of universal access to reproductive health, Vice Admiral Regina Benjamin came forward on behalf of her fellow members of the Global Leaders Council for Reproductive Health. She commended the countries leading the way in this arena and spoke to her personal commitment to this issue and the ways she hopes to rectify the inequalities present in the U.S., particularly those faced by citizens of color, of low socio-economic status, and of rural communities. In this vein, she announced the creation of the [Resolve Award](#), to be awarded at future Geneva Policy Dialogue Series for Reproductive Health Events on behalf of The Global Leaders Council. In order to shine a light on the powerful demand for family planning services and celebrate countries that address this demand, she explained, the Resolve Award will honor innovative approaches by governments as they accelerate progress toward universal access to reproductive health through innovative policy development, financing or service provision methods.

Dr. Mike Mbizvo closed by commending progress made thus far and encouraging the renewed impetus and sense of urgency around the issue of universal access to reproductive health, both for its own sake and for its integral role in development overall. He urged continued commitment and cooperation to live up to the promises which have been made and “to make [access to reproductive health] a reality for that woman in the village.” He reminded the group that it is possible to achieve universal access to reproductive health through innovative leadership, and asked leaders to return next year “when we meet again as a core group and reflect on the progress that has been made. Together we can move from commitments and resolutions to reality and contribute to the delivery of tangible, positive outcomes for all in need.”

Countries may apply for the Resolve Award beginning in September 2011 at www.globalleaderscouncil.org/resolveaward. The award will be presented each year at the Geneva

Policy Dialogue Series for Reproductive Health events in 2012-2014. Please contact GHD.info@aspennst.org with any questions about the award.