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to the twenty-third special session of the General Assembly
entitled “Women 2000: gender equality, development and
peace for the twenty-first century”**

Statement submitted by Marie Stopes International, a non-governmental organization in consultative status with the Economic and Social Council*

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 36 and 37 of Economic and Social Council resolution 1996/31.

* The present statement is issued without formal editing.



Statement

Current Gaps and Recommendations for the Full Implementation of the Beijing Declaration and Platform for Action

Marie Stopes International is a global organization providing woman-centered contraception, safe abortion, and post-abortion care services to women and girls in 37 countries. Globally, the services that we provided in 2018 resulted in an estimated:

- 12.3 million unintended pregnancies prevented
- 6.4 million unsafe abortions averted
- 32,000 maternal deaths averted
- £451.8 million additional healthcare costs saved

By the end of 2018, there were 30.2 million women and girls using contraception provided by Marie Stopes International.

We would like to thank the Commission on the Status of Women for this opportunity to review the Beijing Declaration and Platform for Action. Given our mission, this submission will focus on sexual and reproductive health and rights and where progress is needed to fully implement the Beijing Declaration and Platform for Action.

Challenges and gaps

Unsafe abortion.

Globally, one in four women will access abortion care in their lifetime. Of the 56 million abortions that happen each year, 25 million are unsafe, with a resulting estimated 22,800 women and girls dying roughly 8 per cent of all global maternal deaths. An additional seven million more suffer serious, often permanent, injuries. The vast majority of these deaths and injuries are preventable and occur where laws are most restrictive. Evidence shows that restricting access to abortion does not reduce the number of women seeking abortion, it only makes it less safe, especially for the poorest and most vulnerable women and girls.

Unmet need for modern contraception.

There are still 214 million women in developing regions who want to avoid getting pregnant but are not using a modern method of contraception. Women with an unmet need for modern contraception accounted for 84 per cent of the estimated 89 million unintended pregnancies in 2017. Meeting the developing world's unmet need would reduce unintended pregnancies by about three-quarters and would result in an estimated 76,000 fewer maternal deaths each year.

Inequitable access to sexual and reproductive health and rights.

Access to sexual and reproductive health and rights for many communities and groups of women and girls is particularly off track. For example, women living with disabilities, rural women, women living in poverty, and women from minority groups face additional barriers to sexual and reproductive health and rights. Women in Sub-Saharan Africa are particularly at risk of death from unsafe abortion – accounting for only 29 per cent of all unsafe abortions, but 62 per cent of unsafe abortion-related deaths.

Adolescents.

23 million adolescents have an unmet need for contraception, and every year an estimated 3.2 million adolescent women in low- and middle-income countries resort to unsafe abortion. Complications from pregnancy are the leading cause of death among girls aged 15-19.

How can we make progress?

Unnecessary legal and regulatory restrictions on safe abortion and contraception, a lack of implementation, and insufficient international and domestic funding for sexual and reproductive health and rights services mean that the most marginalized women and girls continue to be left behind. The public sector, civil society, health providers, and donor governments need to address these issues collectively.

Decriminalization/removing legal restrictions:

The case for removing restrictions on safe abortions is clear. Guttmacher Institute studies demonstrate that restrictions on abortions do not reduce their numbers, but drastically impact their safety. Less than 1 per cent of abortions in the least-restrictive countries are classified as “least safe”, but up to 31 per cent of abortions in the most-restrictive countries fall under this category. Some countries have recognized the scale of the problem and have taken action to address it. In Nepal, for example, decriminalization of abortion led to a 50 per cent drop in maternal mortality rates over the following decade.

De-medicalization and removing unnecessary policy restrictions:

Doctors are not always available or best placed to support women in sexual and reproductive health and rights care. Other cadres of health workers, such as nurses, midwives, and community health workers can be trained to provide family planning and some methods of safe abortion. Training World Health Organization-approved cadres of health workers to provide sexual and reproductive health and rights services increases access points and improves affordability of sexual and reproductive health and rights services, helping to reduce geographic and economic barriers to access.

Increasing investment of resources to sexual and reproductive health and rights specifically:

Advancing reproductive rights is a pre-requisite for poverty reduction, economic empowerment of women and girls, sustainable economic growth and social stability. Increasing access to contraception is recognized globally as one of the most cost-effective approaches to improving maternal health and as a key driver of equitable economic development. International development assistance and humanitarian aid should prioritize and fund sexual and reproductive health and rights information, services, and commodities to ensure all women can benefit from and participate in the development of their communities and countries.

At the national level, universal health coverage and national health insurance schemes provide an opportunity to ensure equitable access and to reach the poorest, underserved, and most marginalised women and girls. Public health financing must include contraception and abortion services, without discrimination, and ensure that providers, products, the widest range of facilities, and methods are included and accessible to all.

Better co-ordination between donor and recipient governments of international aid is crucial to ensure reductions in donor funding for sexual and reproductive health

and rights are phased out in a way that supports national governments to fill these gaps. This is particularly relevant in middle income countries where donor support is decreasing but large numbers of women and girls continue to live in poverty and in remote areas, with limited local government capacity or political will to reach these groups.

Specific recommendations

Marie Stopes International calls on the Commission on the Status of Women and all Member States to fulfil their commitments under the Beijing Declaration and Platform for Action, and to:

Eliminate unsafe abortion:

- make abortion, including abortion self-care, safe, legal, available, accessible and affordable by eliminating all laws and policies that restrict or criminalize access.

Ensure equitable access to sexual and reproductive health and rights:

- recognize that access to sexual and reproductive health and rights services is a human right and remove social, legal and economic restrictions, for example related to age, marital status, parental consent, and cost.
- Prioritize the sexual and reproductive health and rights of adolescents through comprehensive sexuality education, which recognizes the evolving capacities of the individual and includes emotional development and sexuality, and timely and confidential access to good-quality information, counselling, technologies and services.
- Ensure that universal health coverage integrates – and makes accessible and affordable – an essential package of comprehensive sexual and reproductive health and rights information, and services, including abortion and contraception, into national strategies, budgets and programmes.

Ensure adequate funding for sexual and reproductive health and rights:

- Adequately fund sexual and reproductive health and rights information, services, and commodities in national budgets to achieve universal access.
- Prioritize sexual and reproductive health and rights within international development assistance and humanitarian aid.
