

Summary Update – Call to Action on Maternal/Child Health for G8 Summit

Dear friends and colleagues,

As you know, the Canadian government is expressing a weak and ambivalent position on the inclusion of sexual and reproductive health and rights, including family planning and contraception, in its G8 maternal and child health initiative. We are writing to urge each one of you to **renew your advocacy efforts** with G8 and G20 governments.

Urge your government officials to send letters to the Canadian Minister for International Cooperation and to the Prime Minister.

We also urge you to continue writing letters to Canadian Missions, PM and Ministers of International Development, and Foreign Affairs.

Yesterday, a motion focused on Canada's G8 maternal and child health initiative was defeated in the House of Commons. The motion was introduced by the official opposition party - the Liberal Party of Canada - and read as follows:

That, in the opinion of the House, the government's G8 maternal and child health initiative for the world's poorest regions, must include the full range of family planning, sexual and reproductive health options, including contraception, consistent with the policy of previous Liberal and Conservative governments and all other G8 governments last year in L'Aquila, Italy; that the approach of the Government of Canada must be based on scientific evidence which proves that education and family planning can prevent as many as one in every three maternal deaths; and that the Canadian government should refrain from advancing the failed right-wing ideologies previously imposed by the George W. Bush administration in the United States which made humanitarian assistance conditional upon a "global gag rule" that required all non-governmental organizations receiving federal funding to refrain from promoting medically-sound family planning.

The vote was 144-138. **Every single member of the governing party of Canada - the Conservatives - voted against the motion.** As well, three staunchly anti-choice Liberal MPs voted against the motion. All members of the 2 other opposition parties - the Bloc Quebecois and the New Democratic Party (NDP) - voted in favor of it. A number of MPs were absent, while some abstained.

Conservatives called the motion "a transparent attempt to reopen the abortion debate," while steadfastly refusing to clarify the government's position on the matter. They voted en masse against ensuring that G8 leaders consider a "full range of family planning, sexual and reproductive health options, including contraception" when considering the issue of maternal and child health.

Government members claimed the motion included "rash, extreme anti-American rhetoric" because it specifically slammed the policy of former Republican president

George W. Bush, whose administration refused for ideological reasons to fund non-governmental organizations that provided for safe abortion services or referrals to such services, advocated for abortion law reform, or even just provided information or counselling with respect to safe abortion.

Had the motion being adopted, what difference if any, would it have made? Motions are non-binding and as such the opposition parties couldn't force the government to adopt it. However, it would have been useful as opposition parties and advocates could have referred to the motion to try and urge the government to give full effect to it.

The Conservatives **may** use the defeat of this motion to justify an initiative that is void of the full range of family planning, sexual and reproductive health options. Indeed, to date, the government has only said that it will not "close the door" to family planning and contraception. Family planning and contraception ***have not been specifically included or prioritized within the initiative***. Furthermore, the defeat of the motion yesterday, makes it even more uncertain as to whether the Canadian government will specifically include or prioritize family planning - including contraception - in the G8 maternal and child health initiative.

Opposition members agree with us that pressure from other G8 and G20 members is essential.

Here is the complete official (Hansard) records of the entire debate and vote: <http://www.arcc-cdac.ca/action/Hansard-records-Liberal-motion.pdf> This is a valuable document that could be used as source for your letter writing campaigns, presentations, fact sheets etc.

We have also updated our original Call to Action to reflect yesterday's events *[starting next page]*. The requested actions remain the same and we urge all of you to renew and increase your advocacy efforts.

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CALL TO ACTION: MATERNAL AND CHILD HEALTH AT THE G8 SUMMIT

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BACKGROUND

On June 25-26, 2010, leaders from some of the world's most powerful countries¹ will gather in Huntsville, Canada, for their 36th annual G8 Summit. The G8 meeting will be followed by a meeting of G20 leaders² in Toronto, Canada (June 26-27, 2010).

Earlier this year, on January 26th, 2010, the Canadian Prime Minister, Mr. Stephen Harper, announced his intention to make maternal and child health a development priority for the upcoming G8 Summit. He said that “Canada will champion a major initiative to improve the health of women and children in the world's poorest regions.”

The details of the initiative have yet to be spelled out. **At this point, we know that:**

- In Prime Minister Harper's announcement on January 26, 2010, he said that the solutions to making a difference in maternal and child health include: “clean water, inoculations and better nutrition, as well as the training of health workers to care for women and deliver babies.”³ Other potential priorities of the initiative have not been mentioned to date.
- On February 10, 2010, it was reported that Canada's Minister of International Cooperation, Ms. Bev Oda, said that Canada's focus on maternal and child health “will not address unsafe abortions in developing countries or support access to family planning and contraception.”⁴ It has also been reported that a spokesperson in Ms. Oda's office said that the Prime Minister has set out several specific areas that will be the focus of funding, “but that family planning measures were never part of that group.”⁵
- On March 16, 2010, Canada's Minister of Foreign Affairs, Mr. Lawrence Cannon, said that family planning programs will not be included in the G8 maternal and child health initiative. He said that, “[i]t does not deal in any way, shape or form with family planning. Indeed, the purpose of this is to be able to save lives...”⁶

¹The G8 countries are: France, United States, United Kingdom, Russia, Germany, Japan, Italy and Canada.

²The G-20 is made up of the finance ministers and central bank governors of 19 countries: Argentina, Australia, Brazil, Canada, China, France, Germany, India, Indonesia, Italy, Japan, Mexico, Russia, Saudi Arabia, South Africa, Republic of Korea, Turkey, United Kingdom, and United States of America. The European Union, who is represented by the rotating Council presidency and the European Central Bank, is the 20th member of the G-20.

³<http://www.thestar.com/opinion/article/755721--g8-agenda-focus-on-human-welfare>

⁴<http://embassymag.ca/page/view/oda-02-10-2010>

⁵<http://www.theglobeandmail.com/news/politics/abortion-not-part-of-maternal-health-plan-development-minister-says/article1472837/>

⁶<http://www.theglobeandmail.com/news/national/birth-control-wont-be-in-g8-plan-to-protect-mothers-tories-say/article1502796/>

- On March 18, 2010, after “a squall of condemnation from aid groups and opposition politicians”,⁷ Prime Minister Stephen Harper said that “[t]he government is looking to work with G8 countries to save lives, to save mothers and children throughout the world. **We are not closing the door on any option, including contraception. However, we do not wish to debate abortion in this place or elsewhere.**”⁸ This statement flatly contradicted previous statements from the Foreign Minister, Mr. Lawrence Cannon, and the International Co-operation Minister, Ms. Bev Oda.
- Canada’s official opposition party has called on Prime Minister Harper “to assure Canadians that he won’t change Canada’s long-standing tradition of recognizing women’s reproductive rights and access to contraception as part of his maternal health initiative.”⁹
- On Tuesday March 23, 2010, the following motion was tabled in the House of Commons by Canada’s official opposition party:

That, in the opinion of the House, the government’s G8 maternal and child health initiative for the world’s poorest regions, must include the full range of family planning, sexual and reproductive health options, including contraception, consistent with the policy of previous Liberal and Conservative governments and all other G8 governments last year in L’Aquila, Italy;

That the approach of the Government of Canada must be based on scientific evidence which proves that education and family planning can prevent as many as one in every three maternal deaths; and

That the Canadian government should refrain from advancing the failed right-wing ideologies previously imposed by the George W. Bush administration in the United States which made humanitarian assistance conditional upon a 'global gag rule' that required all non-governmental organizations receiving federal funding to refrain from promoting medically-sound family planning.

After a full day of debate, **the motion was defeated.** The vote was 144-138. **Every Member of the Conservative Party (the governing party in Canada) voted against the motion.**¹⁰

We are calling on you, to work with your governments, to help ensure that sexual and reproductive health and rights, particularly access to family planning – including contraception - will be a central component of the G8 maternal and child health initiative.

⁷ John Ibbitson, *Contraception a part of maternal-health plan, Harper says*, THE GLOBE AND MAIL, Thursday, March 18, 2010, page 1. See: <http://www.theglobeandmail.com/news/politics/contraception-a-part-of-maternal-health-plan-harper-says/article1505160/>

⁸ See House of Commons Debates, Official Report (Hansard), Thursday March 18, 2010 <http://www2.parl.gc.ca/HousePublications/Publication.aspx?Language=E&Mode=1&Parl=40&Ses=3&DocId=4359770>

⁹ <http://www.liberal.ca/en/newsroom/media-releases/17427-liberals-ask-harper-to-keep-ideology-out-of-maternal-health-initiative>

¹⁰ Three members of the official opposition party – the Liberals - also voted against the motion. All members of the 2 other opposition parties – the Bloc Quebecois and the New Democratic Party - voted in favor of the motion. A number of MPs were absent, and some abstained.

Although family planning and contraception are no longer specifically excluded from the initiative (as representatives of the Canadian government had indicated in the past), they have not been specifically included or prioritized within the initiative.

Furthermore, the defeat of the motion on March 23rd, 2010, makes it even more uncertain as to whether the Canadian government will specifically include or prioritize family planning - including contraception - in the G8 maternal and child health initiative.

Efforts are needed to ensure that the initiative includes a commitment to sexual and reproductive health care and services and family planning, as agreed to by G8 leaders in 2009 in Italy (further details below).

THE IMPORTANCE OF THE G8

The G8 Summit provides an opportunity for some of the world's most powerful economies to address fundamental international development issues and marshal the resources necessary to tackle some of humanity's most pressing challenges.

The G8 Summit will come at a critical time. In addition to the G8 and G20 gatherings happening in Canada this June, world leaders will gather at the United Nations in September 2010, to take stock of progress on the Millennium Development Goals (MDGs). MDG 5, for instance, is a global commitment to reduce maternal mortality by three quarters by 2015. This is the Goal toward which the least progress has been made by governments. The maternal and child health initiative must be situated within the broader strategy toward achievement of the eight MDGs by 2015.¹¹

THE NEED TO BUILD ON LAST YEAR'S G8 IN ITALY

In July 2009, at the meeting of the G8 in Italy, the G8 heads of government agreed that maternal and child health was one of the world's most pressing global health problems. They committed to **“accelerat[ing] progress...on maternal health, including through sexual and reproductive health care and services and voluntary family planning.”** They also announced support for “building a global consensus on maternal, newborn and child health as a way to accelerate progress on the Millennium Development Goals for both maternal and child health...”¹²

¹¹ <http://www.un.org/millenniumgoals/>

¹² Paragraph 122 of the conclusions from the 2009 G8 reads: “We promote a comprehensive and integrated approach to the achievement of the health-related MDGs, also maximizing synergies between global health initiatives and health systems. We will accelerate progress on combating child mortality, including through intensifying support for immunization and micronutrient supplementation, and on maternal health, including through sexual and reproductive health care and services and voluntary family planning. We warmly support building a global consensus on maternal, newborn and child health as a way to accelerate progress on the Millennium Development Goals for both maternal and child health, through (i) political and community leadership and engagement; (ii) a quality package of evidence-based interventions through effective health systems; (iii) the removal of barriers to access for all women and children, free at the point of use where countries chose to provide it; (iv) skilled health workers; (v) accountability for results. We encourage the work of the WHO, WB, UNICEF and UNFPA are doing to renew international efforts on maternal and child health. We will implement further efforts towards universal access to HIV/AIDS prevention, treatment, care and support by 2010, with particular focus on prevention and integration of services for HIV/TB....” See: http://www.g8italia2009.it/static/G8_Allegato/G8_Declaration_08_07_09_final.0.pdf

At the upcoming G8 in Canada, we are calling on G8 leaders to **build on – not backtrack on -** previous commitments. **Sexual and reproductive health and rights, especially access to family planning, including contraception, must be a central component of the initiative.**

THE NEED FOR A MAJOR FINANCIAL COMMITMENT

This year, G8 leaders will be expected to go one step further and support their commitment from last year with new funds and resources to accelerate progress on maternal and child health. The Partnership for Maternal, Newborn and Child Health estimates that it will take a doubling of current funding to maternal, newborn and child health initiatives to meet the targets set by the MDGs.¹³ As written in a Lancet editorial on March 6, 2010:

“A tremendous increase in the rhetoric about MDG 5 and the health of women in recent years has not been accompanied by major donor commitments specifically to this goal. **Although funding for maternal health is increasing gradually, a doubling of donor aid for maternal health is needed, as well as for reproductive health, especially family planning.**”¹⁴

THE IMPORTANCE OF SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS, PARTICULARLY ACCESS TO FAMILY PLANNING, INCLUDING CONTRACEPTION

There are a number of important interventions, along the continuum of care, that are needed to improve maternal and child health.¹⁵

It is widely recognized that greater international support for sexual and reproductive health and rights, especially family planning information and access to contraception and reproductive health supplies, is essential to the success of the G8 initiative on maternal and child health. Recent research by the Guttmacher Institute and the United Nations Population Fund (UNFPA) shows that maternal deaths in developing countries could be slashed by 70 percent, and newborn deaths cut nearly in half, if the world doubled its investment in family planning and maternal and newborn health care.¹⁶

Women around the world need access to family planning - and that includes counseling, services and supplies. Research shows that 215 million women who would like to delay or avoid childbearing do not have access to modern contraception. A dramatic improvement in access to family planning, including contraception, would sharply reduce the number of unintended and unplanned pregnancies, which in itself means fewer pregnancy-related deaths and complications.

Evidence shows that access to family planning alone could prevent as many as one in every three maternal deaths by allowing women to delay motherhood, space births, avoid unsafe abortions, and stop childbearing when they have reached their desired family size. After giving birth, family

¹³To learn more about the *Consensus for Maternal, Newborn and Child Health* that was adopted by The Partnership for Maternal, Newborn and Child Health (PMNCH) in September 2009, see: http://www.who.int/pmnch/topics/maternal/consensus_12_09.pdf

¹⁴ www.thelancet.com INTERNATIONAL WOMEN'S DAY 2010, volume 375, March 6, 2010, page 777.

¹⁵ For details on the key interventions required, please see The Consensus for Maternal, Newborn and Child Health (see link at footnote 9). For more details on maternal health specifically, please see:

http://www.womendeliver.org/assets/MDG_CARDS.PF2.pdf

¹⁶ <http://www.guttmacher.org/pubs/addingitup.pdf>

planning can help women wait a healthy period of time (at least two years) before trying to become pregnant again, thereby reducing newborn, infant and child deaths significantly.

There is also evidence showing that investments in family planning boost the overall effectiveness of the dollars spent on pregnancy-related and newborn health care. For example, the Guttmacher/UNFPA report argues that combined investments in family planning and maternal and newborn services can achieve the same outcomes for \$1.5 billion less than investing in maternal and newborn health services alone.

REQUESTED ACTION:

We are calling on you to work with your government to ensure that **sexual and reproductive health and rights - particularly access to family planning, including contraception - will be a central component of the G8 maternal and child health initiative.**

Advocacy with **all governments** is important – even if they are not members of the G8.

Immediate action is needed. Two key meetings are planned for March and April:

- March 29-30, 2010 - G8 Foreign Ministers, as well as representatives from the European Union, will meet in Gatineau, Quebec.
- April 26-28, 2010 - G8 Ministers responsible for International Development, as well as representatives from the European Union, will meet in Halifax, Nova Scotia. A major focus of this meeting will be the maternal and child health initiative.

We call on you to contact your government's foreign ministry and arrange a meeting with the person responsible for the G8 and/or G20 summits. We encourage you to ask them to write a letter to the Canadian government expressing support for a comprehensive approach to addressing maternal and child health, with explicit reference to the importance of sexual and reproductive health and rights, particularly access to family planning, including contraception. If you have difficulty locating the name of your government official, please write to Katherine@acpd.ca as we may be able to help. We also encourage you/your organization to write personal letters to G8/G20 leaders. We would appreciate it if you could keep us informed of any actions that you take and the response of your government.

In addition to the points raised above, key elements of a letter could include:

- The importance of situating the G8 maternal and child health initiative within the broader strategy toward achievement of the MDGs. MDG 5 is a global commitment to reduce maternal mortality by three quarters, and MDG 5.B is a commitment to achieve universal access to reproductive health by 2015.¹⁷ A comprehensive health systems approach to maternal and child health includes recognizing the importance of sexual and reproductive health and rights, particularly access to family planning, including contraception. Such an approach will contribute to the achievement of *several* MDGs. For instance, not only will it reduce maternal and child mortality, it will also improve the educational prospects for

¹⁷ Indicators include: the maternal mortality ratio, the proportion of births attended by skilled health personnel, contraceptive prevalence rate, adolescent birth rate, antenatal care coverage and unmet need for family planning.

children (especially girls), help stem HIV transmission, and contribute dramatically to gender equality and poverty reduction goals.¹⁸

- The need to build on – not backtrack on – last year’s G8 commitments in Italy, and the importance of marshalling the resources needed to accelerate progress on maternal, newborn and child health.
- The importance of advancing a human rights approach to addressing maternal mortality and morbidity. In June 2009, Canada co-sponsored a landmark resolution at the U.N. Human Rights Council recognizing maternal mortality and morbidity as a pressing human rights concern.¹⁹ As well, U.N. human rights treaty-monitoring bodies have recognized that all States have human rights obligations to ensure access to contraception and reproductive health services, including comprehensive family planning programs and policies.²⁰
- The fact that just last year, all G8 leaders endorsed the Consensus for Maternal, Newborn and Child Health, which stipulates that “comprehensive family planning advice, services and supplies” are critical to improving maternal, newborn and child health.
- The fact that many people in developing countries do not have access to basic reproductive health supplies and commodities, essential for preventing unintended pregnancies, ensuring healthy pregnancies and safe deliveries, and preventing and treating sexually transmitted infections, including HIV/AIDS.²¹
- The fact that an international consensus was adopted at the 1994 International Conference on Population and Development (ICPD) in which 179 governments - including Canada - committed to provide by 2015 universal access to a full range of safe and reliable family planning methods and to related reproductive health services which are not against the law.
- The fact that this year is the 15th anniversary of the Beijing Platform for Action where governments from around the world – including Canada – reaffirmed that “reproductive rights rest on the recognition of the basic right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information and means to do so, and the right to attain the highest standard of sexual and reproductive health...”²²

¹⁸ <http://www.unfpa.org/icpd/mdgs-icpd.cfm>

¹⁹ http://ap.ohchr.org/documents/dpage_e.aspx?si=A/HRC/11/L.16/Rev.1. UN Human Rights Council Resolution 11/8 entitled, “Preventable mortality and morbidity and human rights” recognizes “that preventable maternal mortality and morbidity is a health, development and human rights challenge that also requires the effective promotion and protection of the human rights of women and girls, in particular their rights to life, to be equal in dignity, to education, to be free to seek, receive and impart information, to enjoy the benefits of scientific progress, to freedom from discrimination, and to enjoy the highest attainable standard of physical and mental health, including sexual and reproductive health” [emphasis added].

²⁰ For a thorough overview of the international human rights obligations of governments with respect to maternal mortality and reproductive health, see: Center for Reproductive Rights, *Bringing Rights to Bear: Preventing Maternal Mortality and Ensuing Safe Pregnancy*, 2009 at http://reproductiverights.org/sites/crr.civicactions.net/files/documents/BRB_Maternal%20Mortality_10.08.pdf

²¹ See: <http://www.rhsupplies.org/about-rh-supplies.html>

²² Paragraph 223 of the Beijing Platform for Action adopted at the 1995 Fourth World Conference on Women.

- And finally, the fact that Prime Minister Harper has repeatedly stressed that **accountability** will be a focus of the Canadian G8.²³ Given this priority, we hope that **accountability will indeed apply to Canada’s past promises and commitments** (e.g., at last year’s G8, at the United Nations Human Rights Council, at the ICPD, at the Fourth World Conference on Women, etc.)

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²³At the World Economic Forum in Davos, Switzerland (Jan. 2010), speaking about the Canadian G8, Prime Minister Harper said, for instance, “we must be pragmatic, focused, and **above all, encourage accountability....The Group of Eight must live up to their promises.**” See: <http://pm.gc.ca/eng/media.asp?id=3096>

APPENDIX – SELECTED MEDIA

Tabatha Southey, Mr. Harper, 'maternal health' isn't very healthy without choice, The Globe and Mail, February 19, 2010. <http://www.theglobeandmail.com/news/politics/mr-harper-maternal-health-isnt-very-healthy-without-a-choice/article1474941/>

Elizabeth Payne, Don't Ignore Reproductive Rights, Ottawa Citizen, February 11, 2010. <http://www2.canada.com/ottawacitizen/views/bios/story.html?id=513e01a2-a01b-4928-a9bf-798e4e267d2d>

Katherine McDonald, Use What Works, The Mark, February 10, 2010. <http://www.themarknews.com/articles/934-use-what-works> Allison Auld, Abortion not part of maternal-health initiative, development minister says. <http://www.theglobeandmail.com/news/politics/abortion-not-part-maternal-health-plan-development-minister-says/article1472837>

Susan Delacourt, Bruce Campion-Smith, Michael Ignatieff challenges PM to back aid for abortion, The Toronto Star, February 3, 2010. <http://www.thestar.com/news/canada/article/759753--michael-ignatieff-challenges-pm-to-back-aid-for-abortion>

Juliet O'Neill, PM's G8 initiative must include abortion: Ignatieff, The Montreal Gazette, February 3rd, 2010. <http://www.montrealgazette.com/news/canada/initiatives+must+include+abortion+Ignatieff/2516996/story.html>

Susan Riley, A Motherhood Issue, The Ottawa Citizen, January 29, 2010. <http://www.ottawacitizen.com/technology/personal-tech/motherhood+issue/2497247/story.html>

Making the World Safe for Childbirth (Editorial), The Globe and Mail, January 27, 2010. <http://www.theglobeandmail.com/news/opinions/editorials/making-the-world-safe-for-childbirth/article1446879/>

Geoffrey York, Maternal Mortality: Why It's a Crisis, The Globe and Mail, January 29, 2010. <http://www.theglobeandmail.com/news/world/maternal-mortality-brwhy-its-a-crisis/article1449826/>

Prime Minister Stephen Harper, G8 Agenda: Focus on Human Welfare, The Toronto Star, January 26, 2010. <http://www.thestar.com/opinion/article/755721>

Partnership for Maternal, Newborn and Child Health. <http://www.who.int/pmnch/en/>