

International Development Committee

Oral evidence: FCDO's approach to sexual and reproductive health, HC 1216

Tuesday 12 September 2023

Ordered by the House of Commons to be published on 12 September 2023.

[Watch the meeting](#)

Members present: Sarah Champion (Chair); Mr Richard Bacon; Theo Clarke; Mrs Pauline Latham; Nigel Mills; and David Mundell.

Questions 92 to 151

Witness

I: Rt Hon Andrew Mitchell MP, Minister of State (Development and Africa), Foreign, Commonwealth & Development Office.



Examination of witness

Witness: Rt Hon Andrew Mitchell MP.

Q92 **Chair:** We conclude our sessions on sexual and reproductive health and the FCDO's approach to it by having the Minister in front of us. Minister, I know this is a topic that you have always taken a very keen interest in, so thank you for making the time for us today.

I start by sharing this Committee's—and, I am sure, your—support for the people of Morocco, Libya and others around the world who seem to be having unprecedented humanitarian crises, often due to climate change. It is an awful situation and I am very glad that the British Government are putting so much attention into humanitarian aid to those countries. Thank you for that. Minister, I think that you want to say a few words at the beginning and then we will get into questions.

Mr Andrew Mitchell: Thank you very much for giving me this opportunity to come and speak to the Committee. The one thing I wanted to say in advance was that you will know the importance we attach to the White Paper, which will, we hope, be launched by the Prime Minister on 20 November at the food summit that is being held in London.

This is by the nature of it a White Paper that goes to 2030 and it addresses two things: how to get the SDGs back on track—at this halfway point they are miles off track—and, secondly, what we do to ensure that the promises that have been made about climate finance are delivered. The White Paper is consulting all around the world and it is an all-party White Paper because, by definition, it goes through the next election. In order to engage the best minds in the sector and in the Government and across Whitehall, we needed to be clear that it does not come to a halt depending on the result of the next general election.

We are very keen to consult the Select Committee. My officials have been trying to find a time that might be convenient. They have not yet been able to do so, but I understand that officials are meeting your Clerks on Thursday this week to brief them on the White Paper. Some of us have had meetings already on it, but it would be very helpful if we were able to take the mind of the Select Committee on the themes that we are hoping to ventilate in the White Paper.

Chair: To that end, we are going to make a submission and you have agreed to extend the submission date. We will be making a very full submission to that because, of course, it is something that we are very keen on. Can I also say that we are very grateful for the reports that we have been having under your tenure? They have been getting the attention that we would hope them to. We have put a lot of work into these and into scrutinising the work that you do, so it is appreciated that you do engage with this Committee.



HOUSE OF COMMONS

Mr Andrew Mitchell: As I have always said, Chair, I regard the Committee as not the enemy, as it were; I regard the Committee as an incredibly helpful source of advice, wisdom and experience.

Q93 **Chair:** That is appreciated and I hope that you maintain that view by the end of this session.

I will start with the first question, Minister. You stated at Chatham House that, “we place the position of girls and women at the forefront of everything we do”. I wonder if you could tell us how the FCDO’s aid programme on sexual and reproductive health forms part of your work to empower women and girls.

Mr Andrew Mitchell: You are right: I do not believe that you can understand international development unless you see it through the eyes of girls and women. At the moment, we are seeing a rollback of the rights of women in many parts of the world. I am not just talking about Afghanistan, which the Committee will understand very well, but in America the decision of the Supreme Court. There is an attack on the rights of women and, of course, also LGBT, the change of the tide in Africa—or not necessarily a change of a tide, but the movement against those rights there.

I have to say that I have been genuinely impressed since I returned to Government, to the Foreign Office, by the fact that inside the Foreign Office at every level they have internalised the critical nature of girls and women in development and in everything we do. It really is embedded in all our programmes. You see it in education. You see it in the importance of ensuring that girls and women are able to decide for themselves whether and when they have children. You see it in the attack on sexual violence against women and, in particular, my colleague Lord Ahmad’s conference at the end of last year.

We do try to ensure that in all our programmes we are building in inclusion, resilience and sustainability. We try to support the domestic policy agenda of countries where they are moving in the right direction. We make the most of the UK’s leading academic research, science, medicine and institutions in strengthening all the different work we do, particularly in those three areas I set out. We focus on places where the UK is best placed to act, accepting that in some cases there are other organisations and, indeed, other countries that are better placed than we are.

Q94 **Chair:** How do you go about changing minds of Government and policymakers? Is that something that you take on?

Mr Andrew Mitchell: When I was in Ghana I met the Foreign Affairs Select Committee and sought to engage with them on the extension of human rights and LGBT rights, which they were in the process of thinking about. I do think it is possible to have a dialogue on these things. That is probably at the more difficult end of these conversations, but in terms of



HOUSE OF COMMONS

the role of girls and women we have some very good examples on the continent.

If you look at what Rwanda has done, for example, I think that now 60% of its Parliament are women, 60% of its MPs are women. There are good examples, and often by trading other people's experience, by doing it not in a didactic way or in a lecturing, hectoring way but by talking about our experience, by talking about the journey we have been on, you are able to make those changes.

Q95 Chair: One of the things that concerns me is that the specific money that goes to women and girls as a proportion of the pot is quite small. How do you get assurance that at least 50% of money going on any scheme that FCDO is doing is getting to women and girls rather than just being told that they have equal access to it, for example?

Mr Andrew Mitchell: It is a priority. It is built into the business cases that Ministers approve and it is something I always look for. As I say, it is very heavily embedded now in the Foreign Office and among officials and it is almost always there. I always look to check that it is.

Q96 Theo Clarke: Minister, welcome. The Committee has heard extensive evidence of the impact of UK aid cuts on sexual and reproductive health programming, particularly in the FCDO's equality impact assessment for the 2023-24 ODA allocations. Even considering those uplifts, what will the impact be of further reductions to the UK's aid programming on sexual and reproductive health in 2023-24 financial year?

Mr Andrew Mitchell: As Ms Clarke says, I published the evaluations and they made difficult reading. We work to mitigate the effect of the cuts, with some success. We look for multipliers. With a number of countries now we are pursuing a joint approach. We put some of our money alongside some of theirs to pursue common objectives, both thematically and geographically. That is a way of multiplying the money. In a sense, it is a "two for one" for British taxpayers.

Of course, we have done our very best to provide significant funding, for example, to the Global Financing Facility, the GFF, and the Global Fund. On the UNFPA, which was very heavily cut back some time ago, this year we are providing £8 million in core funding but £60 million for the UNFPA. That has a significant effect. It will avert 814,000 unsafe abortions. It will avoid nearly 3 million unintended pregnancies.

One of the great things about these funds is that we can also help to influence others to come on board. We managed to find a billion pounds of British taxpayers' money for the Global Fund and the Prime Minister has just announced \$2 billion for the Green Climate Fund, which is a very significant British intervention on climate. It is one that we will be talking about at UNGA next week in New York and in Marrakesh and all the way to the COP in the UAE at the end of the year.



HOUSE OF COMMONS

In a whole series of ways, we try to make sure that through the multilateral system and the bilateral system we stretch everything in these creative multipliers that we can, but as you will understand, if you cut back the money it makes it more challenging to achieve our objectives.

Q97 Chair: Minister, I do not think that you answered my colleague's question. You gave some great examples of where money is going, but my colleague was asking about the cuts and the equality impact assessment. You got that in February, I think, and it very clearly detailed the consequences, particularly to women and girls, the most marginalised, the people with disabilities. How did you feel when you got that?

Mr Andrew Mitchell: I have been trying to answer the question by saying that the glass is half full rather than the glass is half empty.

Chair: Yes, but how did you feel because I know that this is an area that you care about?

Mr Andrew Mitchell: How did I feel? I was in Rwanda a couple of weeks ago looking at a cash support programme that Britain supplies. When you meet people who are desperately poor and who face incredible challenges in their lives and you see what British support can help them do and has helped them do and you see that support being withdrawn, then anyone who looked at that would feel incredibly upset.

Q98 Mr Richard Bacon: You mentioned the COP. There are some members of this Committee—not me—who are very keen to go to the COP. Do you think you could cause a letter to be written, either by yourself or by your friend the Foreign Secretary, to the Chair of our Committee inviting this Committee to nominate three members of it to attend the COP?

Mr Andrew Mitchell: I will do everything I can to facilitate Mr Bacon's excellent suggestion, and officials who may be sitting behind me will make a note of your request and my agreement to act on it.

Mr Richard Bacon: I say three because I know of two already and there is probably a third.

Chair: Theo, back to you.

Q99 Theo Clarke: If I could just return to my line of questioning, I welcome your personal commitment to the rights of women and girls. I am very pleased that the Government do have the women and girls strategy but, as our Chair has just mentioned, how does that line up with the further reductions to the sexual and reproductive budget? You are saying it is a priority, but then the spending commitments show otherwise.

Mr Andrew Mitchell: It is really what I said: it is the attempt to get a quart out of a pint pot. We work through the multilateral system as well as bilaterally. Next year, as you will have seen, we anticipate that the



bilateral budget in Africa will nearly double. That will have an impact. When I was in Niger in February, I announced that we would set up a fund to operate in the Sahel specifically to address these issues and put £38 million into it. Of course, the Committee will understand that that will be hugely successful if we are able to corral others to join us in those endeavours.

One of the things we have learnt from the Sahel is that you have to address the social indices if you are to be successful. Otherwise, the only thing people see in terms of government is something they do not rely upon or something that is hostile to them or does not advance their causes. What people want to see in the Sahel is the ability to send their children to school, the ability to get basic healthcare, the ability when in childbirth to be safe, to get access to the ability to decide for themselves whether and when they have children. Those are the things that this fund will support and I hope that we will be able to persuade others to join with us in that.

Q100 Theo Clarke: According to available statistics, the FCDO spent no less than 4% of bilateral ODA on sexual and reproductive health programmes. That was between 2009 and 2019. In 2021 this dropped to 2.8%. This shows a disproportionate reduction in ODA spending on those programmes. When will the FCDO return to spending at least 4% of ODA on sexual and reproductive health programming?

Mr Andrew Mitchell: There never was a commitment to 4%. I have seen this figure. There never was a commitment to 4% and it is worth noting that 80% of the bilateral programmes will focus on gender equality by 2030. That is the commitment that we have made, which will very much help towards the point you are making behind the 4%. However, we never actually committed to 4% and I would like to see us doing more in this area as well as money becomes available.

It is important to recognise that there has been quite a big change in recent months. We have greater confidence from the Treasury that we know what we are doing with the budget. We have been able to assert much greater control over the budget. This is incredibly important because it means you can plan. As you will appreciate, Chair, international development is a very long-term business. If you cannot plan through to 2025, 2026 and beyond this spending round, then you are curtailing our ability to get good value for money and move the dial on international development.

Q101 Chair: Minister, I thought that DFID was always recognised, both across our Government and internationally, as one of the best value for money and most accountable and most transparent. Does that mean that Treasury has seen a big shift since the merger has happened in the Department's accountability when it comes to finances?

Mr Andrew Mitchell: I remember being told that the view in Whitehall was that DFID did money and the Foreign Office did prose. I think that



HOUSE OF COMMONS

when the budget went to the Foreign Office the Treasury quite rightly wanted evidence that the Foreign Office could run this budget and deliver real value for money to British taxpayers. I hope that in the last year we have been able to win its support that we can do that now.

Q102 **Chair:** I am quite surprised by that—that there was that concern and the merger still went ahead on that basis.

Mr Andrew Mitchell: I was not in Government when the merger went ahead and I think, Chair, you know my views on all that at the time. I would say that Treasury is quite right to exert very strong control over public expenditure in order to ensure that there is real value for money. The degree of Treasury control over the ODA budget is much greater now than it was when I was at DFID, probably for the reasons you suggest. The culture in the development community is also very much one of openness and transparency and putting all the information into the public domain. I hope that the Committee will feel that we were honouring that when we published in full the equalities assessment.

Q103 **Chair:** We are grateful for that and I am also assuming that having the second permanent under-secretary is another level of reassurance and hopefully means that more of that money can be going to development rather than being siphoned off by other Departments and within the FC part of your Department.

Mr Andrew Mitchell: It all has to be spent in accordance with the OECD DAC rules, of course, but there is no doubt at all that having a second permanent secretary, particularly one of the experience and quality of Nick Dyer, is a huge strength to the Foreign Office. I set out in my speech in Chatham House on 25 April that the changes we were making and were going to make, one of which was to have a second permanent secretary, I think have been widely welcomed. Of course, between then and now Nick Dyer has come into post.

Q104 **Chair:** I was told that there were only two people in the Home Office who actually understood the OECD DAC rules, which is probably why they got themselves into such a mess over the Illegal Migration Bill, then Act. Does that make sense to you?

Mr Andrew Mitchell: I am afraid I simply cannot comment on how many people in the Home Office might understand the OECD DAC rules, but it is very important to understand them so that the expenditure can be made according to the rules and to the best possible advantage and value of those we are seeking to serve and the British taxpayer.

Chair: I agree 100%, Minister.

Q105 **Mr Richard Bacon:** May I ask whether you agree with the *Financial Times* when it wrote that if the Home Office were a horse it would have been shot long ago?



HOUSE OF COMMONS

Mr Andrew Mitchell: The *FT* might say that; I couldn't possibly comment.

Chair: I am sorry; I have led the Committee down a road that, while entertaining, is probably not appropriate for this session.

Q106 **Mrs Pauline Latham:** Between 2010 and 2020, after we committed to 0.7% and we had an increase in the economy, we were spending a lot of money on sexual and reproductive health. Because of the cuts from 2020 onwards on sexual and reproductive health, how do you think the UK is repairing the relationship with our partners and regaining the trust of local organisations on the ground?

Mr Andrew Mitchell: Mrs Latham is entirely right. The reductions were incredibly testing for officials. Some of the officials were asked to make these reductions on three separate occasions. You have a relationship with all the partners on the ground. You know that you are doing a brilliant job in terms of moving the dial on the extremes of poverty, and to have to renegotiate these things once is bad enough but to do it two or three times is very hard indeed. It was very hard, I think, for the officials, quite apart from those who we are seeking to help and to serve.

We are working hard to rebuild our relationships. I think the announcement for the GCF and the original announcement on the Global Fund help. The increase in the bilateral budgets, I hope doubling into next year, will be significant and, of course, it will enable us to do some of the things that I hope we will be setting out in the White Paper.

We have a very close relationship with national organisations, multilateral organisations, and civil society. That is why it has been so hard, I think, to negotiate these cuts, but at least we are in a different position now where, because of the multipliers, because of the better governing of the budget—I hope that there will be a diminution in the amount going to pay for the first year of refugees' costs in the UK—because of all that I hope that we have now started to move up.

Q107 **Mrs Pauline Latham:** But how are we repairing those relationships?

Mr Andrew Mitchell: The White Paper will be quite helpful in that respect. Because the budget is in a better place, because we are able to plan expenditure next year increasing, because of the relationship with the multilateral system, because of the way we are driving change not just in the World Bank but through our very close relationship with the African Development Bank and the other multilaterals, because of all that we are, I hope, exerting ourselves as Britain in a way perhaps we have not done too much of in the last few years.

Q108 **Mrs Pauline Latham:** How will we know? How will we be able to measure that we have successfully restored our reputation?

Mr Andrew Mitchell: That is a very interesting question. I think the Committee might take a view on that after the White Paper. That is an



art, not a science, I think, and your judgment as a Committee will be as good as anyone else's.

Q109 **Mrs Pauline Latham:** What factors do you consider when deciding whether it is most effective to fund multilateral organisations or bilateral programmes that work on sexual and reproductive health and rights?

Mr Andrew Mitchell: I have a very simple yardstick: how do we get the best possible value for money for our taxpayers? If you look at the different funds that are available, you make a judgment on which of them will deliver most in terms of the objectives that Britain has and that is the pathway you follow. It is why it is very important that we rebuild the results agenda that you and I will remember very well from before, which has been a bit neglected in the last few years, so that there is openness and transparency in what the British taxpayers' pound is buying. There is a greater emphasis on that and I think you will see that in the White Paper as well.

Q110 **Chair:** Can I build on my colleague's question? Your predecessor cut UNFPA by 85% and it was, surprisingly for a UN organisation, very front-footed on the criticism and the consequences of that cut. How do you get back to being a credible partner when you have had that damaging response from one of the multilaterals?

Mr Andrew Mitchell: The UNFPA is a very strong partner of ours and a brilliant organisation. As you say, it was cut back substantially in 2021. It provides 40% of the world's subsidised contraception and we are an enormously strong partner. We give it £8 million in core funding.

Q111 **Chair:** We were one of their main partners, weren't we?

Mr Andrew Mitchell: We were.

Q112 **Chair:** So the 85% cut was quite devastating.

Mr Andrew Mitchell: Yes, but cumulatively we are still one of its biggest funders. This year we are also giving them £60 million to spend, which will have a significant effect.

I think that I set out earlier on what we would expect from that. For example, that money this year will avert 63,000 mother and child deaths. It is highly effective and over the last two years we have helped to procure new donors for UNFPA Supplies totalling \$26 million. We have done what I described for this year, but looking ahead to 2025-26 we hope to help in the next spending round restore the position we held before, but we are one of the three largest donors to UNFPA at this time.

Q113 **Chair:** I think that what it does is fantastic and I am very grateful for it, but the issue is more about credibility. It is good to know that you are able to get other people to cover our shortfall, but how do we go back to being a trusted partner on things like this? I am thinking not only of UNFPA but about the WISH programme, the Women's Integrated Sexual Health programme, which was cut 50% from the planned extension that



HOUSE OF COMMONS

was meant to be happening from 2023 to 2024. We say things and then we take the money away. How do you, Minister, prove credibility when it comes to women's sexual health?

Mr Andrew Mitchell: In one sense, I was lucky that I came back into Government at the nadir of this because since then the money has got slightly easier and we are able to prioritise more carefully and we are able to govern the budget definitely. Re-engaging with partners following these very substantial cutbacks and being able to point to a brighter future, that is very important in gaining both credibility and a hearing.

Q114 **Nigel Mills:** The FCDO's equality impact assessment did state that reductions in aid spending would result in "a significant reduction in the number and size of targeted programme activities aimed at reaching those furthest behind - including women, girls and people with disabilities." Do you agree with that conclusion that that was the risk of what the Department did and that has effectively been what has happened from that budget reduction?

Mr Andrew Mitchell: We try at all points to mitigate that, but yes, the evaluation is a blunt but open document. It is important to be transparent on these things.

In terms of disability inclusion and rights, we do now have a policy of embedding disability all the way across all our programmes. All programmes must consider and provide evidence on how they address issues of gender equality and disability. There is the programme Leave No One Behind, which as an agenda means we focus specifically on marginalised groups, young people and the disabled. The forthcoming WISH Dividend programme will continue this work.

In respect of adolescents, and here I am talking particularly about young women but not only young women, the WISH programme will exceed the target that was set earlier on providing SRHL services to adolescents. We are looking at what more we can do on this, but it is important to use digital campaigns, radio, school programmes and so on to make sure that it is properly embedded.

Q115 **Chair:** Minister, you said that you were embedding it now. When was the "now" started from?

Mr Andrew Mitchell: From when I came back we have made sure that these things are properly embedded.

Q116 **Chair:** In the last year?

Mr Andrew Mitchell: I think that they were to some extent embedded before, but we are very clear now that the flagship WISH programme is critical to delivering particularly for adolescents. As I said earlier in response to Mr Mills's question, in terms of disability inclusion and other equality considerations we are making sure that they are well embedded.

Q117 **Nigel Mills:** How do you strike the balance, especially on these cuts,



between how you protect the very most marginalised? Do you try to help the most people or do you try to help the most marginalised? How do you draw the balance between them?

Mr Andrew Mitchell: Britain has always been the G7 country in all the multilateral fora that focuses on the poorest people. We are very proud of it and we have always done it. We have sharpened it up in terms of the World Bank because, of course, a lot of the mitigation finance goes to middle-income countries and it is incredibly important that we ensure that adaptation goes to the poorest.

The British focus has always traditionally been on making sure that—it is easy to neglect the smallest and poorest countries because you can do much bigger and greater intervention in the middle-income countries. It is very important that we focus on the poorest and within that programme we focus on the most marginalised as well.

Q118 **Nigel Mills:** It is intriguing because CBM UK told us that it feels that it is being pushed into providing proposals that reach a bigger number of people rather than engaging with the ones most difficult to reach. It is obviously more expensive to engage—

Mr Andrew Mitchell: Being pushed by whom?

Nigel Mills: Presumably, by the Department. I cannot think who else it would be being pushed by.

Mr Andrew Mitchell: Not by other multilateral funds?

Q119 **Nigel Mills:** They are an FCDO partner, aren't they? I agree with your focus on the results, but how do you ensure that having those performance targets does not push people into looking for the most amount of people rather than the smallest number—

Chair: FCDO performance targets.

Mr Andrew Mitchell: If you are looking at results and the cost, for example, of getting children into school, girls into school, you may pay a lot more in one country than in another but actually the country in which you are paying more may be better value for money in terms of the programme because it is much more intrinsically difficult.

We do focus. The disability work that we are doing, the fact that it is included across all Foreign Office programmes, that pays tribute to the fact that we do try to focus on the most marginalised. Of course, if the Committee thinks that we are missing anything on that, we look forward to hearing it. There is genuinely a very strong focus on that, just as I set out earlier there is in respect of girls and women.

Q120 **Nigel Mills:** You would not recognise criticism, then, that we have made the easy to make savings and just accidentally hurt the most marginalised more than we should have done?



Mr Andrew Mitchell: No, I wouldn't accept that. I think that the officials were incredibly careful to cut the cake in the best possible way they could to do the least amount of damage to these programmes. As we said earlier, development is very long term and at least now with the prospect of substantial increases in the bilateral budget next year they are able to plan now and make sure that they get the programmes absolutely right and in accordance with the things we have been talking about.

Q121 **Nigel Mills:** Moving slightly on, we have heard that there has been a global rollback of women's rights. How is the UK working bilaterally and multilaterally to protect and advocate for sexual and reproductive health and rights in lower-income countries, particularly for women and girls?

Mr Andrew Mitchell: Yes, it is a very important point. In 2022 at UNGA, the UN General Assembly, the UK co-led a joint statement on the UN Human Rights Committee that had 71 signatories to protect and promote women's rights. In May 2023 the UK within the G7 led a movement to reassert the critical role of comprehensive SRHR, explicitly recognising the need for access to safe and legal abortion and to aftercare. We have had a recent conference at Wilton Park on women and girls to build partnerships to promote SRHR. In that respect, we are trying very hard to use British diplomacy and to push forward on rights.

We seek at all times on women and girls to combat the rollback on rights. The Committee will appreciate that crises and shocks hit girls disproportionately. Technological change brings opportunities and when we announced the women and girls strategy we put £200 million more into women's integrated sexual health. We are using our funds to the best possible advantage and using our position in multilateral fora and at these meetings—whether it is UNGA or the SDG meeting or the World Bank meeting, which we hope will still take place in Marrakesh, or the Prime Minister at the G20—to drive forward our diplomacy on women's rights. We need to because they are under very substantial attack, as you set out I think in your first question.

Q122 **Nigel Mills:** Do you find that when we are at all these conferences making this case the response is, "Yes, those are nice words but you took the money away" or have we been forgiven for that now and people are moving on constructively?

Mr Andrew Mitchell: In terms of Britain's support across the system the last few years where the money has shrunk is a blip. If you look at our position in the World Bank or in the other banks, the Global Fund, the Green Climate Fund, although not in the last one but in the others there has been a dip, we are cumulatively in a very strong position.

I should emphasise to the Committee the intellectual leadership. I spent quite a bit of time with the team in the World Bank that Britain has there. These are incredibly able young officials, who are driving forward the British priority within the World Bank but in other multilateral organisations as well and securing real change; for example, the



Bridgetown agenda, which we have talked about before at this Committee and which Mia Mottley is specifically driving forward and which Britain is very supportive of. You do not have to agree with every single word, but it is a very good direction.

Britain has around the world in different fora been driving change to multiply the amount of funding that can come from the balance sheets of multilateral banks, trying to make a difference. The intellectual input of the British team at the World Bank and in other international fora is very strong indeed.

Q123 Nigel Mills: Finally, what do you say to charities or others winning projects around the world—I have certainly heard of a few—who say, “If we have options for who funds us, we might prefer not to have the UK now because we are just not sure whether by the end of the project it will still be there”? Are we past that now? Can they safely rely that if we commit to something—

Mr Andrew Mitchell: We do understand that you have to be predictable and you cannot yo-yo around. That is one of the key areas for why I say the budget is better curated now because we address that. Mr Mills is quite right about unpredictability.

If you are trying to do development work, which by definition as I have said needs certainty on funding going forward, then if you do not have that predictability it makes life a lot more difficult. We have tremendously good relationships with many of the organisations we have funded for many years and we have tried to be honest and open about the difficulties we have faced in that funding. I think that very few of those relationships have been irretrievably fractured.

Q124 Chair: I hope that you are right, Minister. Around the world we see LGBT+ rights being eroded and worse, persecution, death penalties, legislation following that path of persecution, too. How does the FCDO ensure that LGBT people are included within its sexual and reproductive health strategy, even if that means running up against some Governments and very adverse policies?

Mr Andrew Mitchell: We tackle it openly and honestly. We do not shy away from difficult conversations and we ensure that LGBT+ inclusion is, like disability, central to our programmes. We use our diplomatic clout to advance legal protection and decriminalisation and, in particular for us, to ensure inclusive access to HIV/AIDS prevention and treatment. We are using every tool at our disposal to try to make progress to reduce discrimination, to use our technical assistance and support for partnerships in countries where there are people who are trying to move civil society in the right direction.

I know that all my ministerial colleagues when they have these difficult conversations are buoyed up by the support that Britain and the British Government so strongly give around the world and do so in a sensitive



HOUSE OF COMMONS

way. Many of these laws that are used in parts of Africa were inherited from the British colonial period, a point President Museveni once made to me when I was discussing this with him some 10 years ago.

The agenda is going backwards at the moment and we have to do everything we can to try to use the lessons in Britain. It is not so many years ago that we imprisoned gay men in Britain. We need to put our journey at the disposal of other countries. When I saw the Ghanaian Select Committee it was very interesting that they said to me, "We recognise that we are on a journey. You may be ahead of us but you started before us". There was an understanding of that.

We have to use all our powers of persuasion, all our abilities in national and international fora, to try to make sure that this is seen as a human right and make clear we believe that you should be able to love who you want to in this life.

Q125 Chair: I completely agree, but the concern that I have is that in this country, announced this week, the education sector is holding back the relationship and sexual health documents to go to schoolchildren. You mentioned civil society.

How do you make sure that not just at a policy level but the people who are actually delivering it on the ground are delivering inclusive programmes when they are using FCDO money and that they are not looking to us and saying, "You are not doing it in schools so why should we be doing it?"

Mr Andrew Mitchell: I cannot comment on the UK dimension. That is simply because I have not seen it.

Chair: That is the problem—no one has.

Mr Andrew Mitchell: We work with civil society to advance this in any way. I was looking at some of the figures earlier today while preparing for this session. It is worth noticing that since 2018 we have spent £13 million on relevant programmes for this within the Commonwealth and over the last decade 12 Commonwealth countries have decriminalised same-sex relationships. Although this is a very challenged area, it is not all gloom and doom.

Q126 Chair: No, I agree and I have seen around the world that our embassies do a fantastic job on this. Do you make it conditional on funding? Would you withdraw funding? I know that you recently did for one scheme that was very anti-LGBT.

Mr Andrew Mitchell: It is a very tricky equation. If you withdraw grant support, if you withdraw aid from a country that is doing something of which you strongly disapprove, then you will not normally affect the elite who are making those decisions but you will affect the people we are trying to help. For example, you may take girls out of school as a result of doing that.



HOUSE OF COMMONS

It is a very tricky equation, which we have always been deeply conscious of. Often when I am talking about these things in Africa and elsewhere, I am able to use what the British Parliament has said. It is a very powerful tool for engaging because it then does not look as though it is a late middle-aged Minister saying it—it is the opinion of our parliamentary democracy. That can be quite helpful.

Q127 David Mundell: Minister, can I ask you how the UK is integrating HIV/AIDS care into its sexual and reproductive health programming?

Mr Andrew Mitchell: Thank you very much, Mr Mundell. This is a cause close to both our hearts, which we have discussed many times in the last 20 years.

The most vivid example I can give to you is the Global Fund, to which, as you know, we were able to find a replenishment of £1,000 million. That will help save a million lives over the next three years. It will provide lifesaving antiretrovirals for 1.8 million people and provide both counselling and testing for 48 million. I think that is a very vivid example of British taxpayers' money being put behind something that many people in this country hold very dear and are determined to support.

You will know that we also fund the Robert Carr Fund and UNAIDS. We help to support, through our work in country, legal and policy reform and we also help to improve access to services. We are very conscious of the importance of the topic you have raised and I hope that we are delivering that in a way of which you approve and can take pride in.

Q128 David Mundell: I was very positive about the fact that we did make a significant contribution to the Global Fund, having campaigned for that. I believe that the Global Fund is an example of multilateral activity working positively.

Touching on the previous question in relation to specific HIV/AIDS funding, how do the Government ensure that they are reaching the most marginalised groups that are impacted? Often if behaviours are criminalised, for example, either LGBT or sex workers, they find it much more difficult to access support.

Mr Andrew Mitchell: We work through all sorts of different organisations with, as I indicated earlier, a determination that we buy good results for our taxpayers here so that they can see for themselves that we are having an effect on the ground. We do it in every way we can within the law in any country. We work through organisations like Marie Stopes, which is highly effective, and we do it through a mixture of support for organisations delivering a service on the ground and support for organisations that are able to lobby effectively to drive forward these objectives.

Q129 David Mundell: What else are the Government doing to be able to help make HIV/AIDS treatment accessible and affordable for low-income countries?



Mr Andrew Mitchell: The Global Fund is a good example of the way to achieve that. Because of the comprehensive nature of its coverage and because of the size of what it is doing, it is able to procure very good rates of funding. The Global Fund is a good example of how we deliver what you are rightly saying we should be delivering.

Q130 **Chair:** Sorry, could I just come in there? Minister, I think that you had only been in post weeks when the Global Fund replenishment happened and I think it was a cut of 30% by 2019. I have to say that I did not know if we would give anything to it, so I am grateful that you did fight. I also know that Mr Mundell was incredibly active trying to get support so that we did make that donation, even with the 30% cut.

Of course, the US multiplies, it match funds, the money that other countries give. We in Parliament did not know if you were planning on supporting the Global Fund or not, so what happened with conversations for the US? It would, of course, have a direct impact on their budget and how much they were giving. Were they equally surprised or were you having conversations with them?

Mr Andrew Mitchell: It would be fair to say that the Global Fund board and Peter Sands, who is the Chief Executive, were very pleased with what we managed to procure. You are quite right: it was the first thing I looked at. There was an expectation that we would not be able to find £1,000 million from our taxpayers, but both the Prime Minister and the Chancellor of the Exchequer were extremely supportive of what we wanted to do.

It was a big announcement and I like to think it was the start of a change of emphasis, moving away from the cutting. Although as you say it was not as big as the previous replenishment, it was, nevertheless, a very substantial amount. I think that privately many organisations and, indeed, the board of the Global Fund were both surprised and delighted that we managed to find so much funding for the replenishment.

There were certainly discussions with the US. I cannot off the top of my head remember whether a proportion of our money triggered that doubling effect, but we were certainly very conscious of that when we were putting together the package.

Q131 **David Mundell:** I will move on to female genital schistosomiasis, which is an easily treatable but neglected tropical disease that can increase the likelihood of HIV transmission and cervical cancer. The misdiagnosis of FGS as sexually transmitted can put women and girls at risk of violence because of their perceived sexual activity. Is the FCDO planning to integrate FGS healthcare into its sexual health programming?

Mr Andrew Mitchell: Yes, thank you for the question. I can tell the Committee that we are supporting research and development through the funding for the DNDi, the Drugs for Neglected Diseases initiative. We are also supporting new drugs to counter the risk of resistance, which I am advised is a most important aspect of this. We also help through UNAIDS



HOUSE OF COMMONS

and support for its global AIDS strategy. The current programme is between 2021 and 2026.

In respect of that very specific disease, Mr Mundell is quite right to flag it up and those are the steps that we are taking. I hope that the Committee will feel it is right to give it that priority and support those particular interventions.

Q132 **David Mundell:** Some initiatives give girls medication for FGS in school. Is that something that FCDO would incorporate within its educational programming?

Mr Andrew Mitchell: We would certainly look at it to see whether and how to deliver that. There might be other ways of delivering the same benefit, possibly not through an education programme. If you are asking me whether we would be considering all aspects of this to get the most effective results, the answer is yes.

Q133 **Chair:** How does FCDO ensure that sexual and reproductive health programming is integrated in other programming across its portfolios rather than a bolt-on?

Mr Andrew Mitchell: We have a comprehensive approach to tackling SRHR barriers that push girls out of school. The Committee will easily think of what things that might be. For example, we seek to dismantle barriers that stop people keeping pregnant girls in schools. Recently, we have been successful in doing that in Sierra Leone and the Cameroons. Other funds, too, like Education Cannot Wait, which we gave a substantial fillip to earlier this year, are involved in trying to stop those barriers to girls staying in school.

We do everything we can. One of the most successful programmes, which unfortunately was stopped, was labelled by the press the “Spice Girls in Ethiopia”. As a mechanism for persuading boys to respect girls and to stop early marriage and so forth, it was a brilliant programme. In fact, I looked at the results for it when I was in Government before from the experimental period, the early efforts and the pilot schemes. I could not believe that they were as good as was suggested and sent them back, and then they were confirmed. There is a whole series of ways. That was a singing girl band to get across messages, but there are all sorts of ways in which you—

Chair: I wondered what the link was.

Mr Andrew Mitchell: I am sure you can see, Chair, how it would work, but it was incredibly successful, particularly in Asmara in Ethiopia, some time ago now. We do it in every way we can. Of course, we champion adolescents’ rights to comprehensive sexuality education. That is very important, too.

Q134 **Chair:** Menstruation is often an obstacle to girls attending school around the world—in this country as well, sadly. How does UK aid help to tackle



HOUSE OF COMMONS

this challenge in its education programme and encourage Governments to do the same?

Mr Andrew Mitchell: It is very important in any girls education programme. Incidentally, I was able to announce this morning that in terms of the results for getting girls into school, the figure previously that we had I think was 8.1 million but it is now 10 million girls since 2015, which I am sure the Committee will feel as I do how very good that is.

There is a whole series of things. A lot of it is to do with hygiene and clean water and having lavatories and so forth available for girls. When I was in Niger, I went to see a school that was particularly for those who have been displaced and who had been refugees or had been moved from where they lived. One of the things I noticed when I was there was that there were not adequate lavatories for anyone but particularly for girls. I was very pleased to hear a couple of months later that Education Cannot Wait had specifically put funding into that school in Niger and had specifically provided the lavatories and hygiene. That is a very good way of tackling precisely the problem you identified.

Q135 **Chair:** In a humanitarian situation, it becomes incredibly difficult to deliver education full stop. How do you manage to make sure that sexual and reproductive healthcare is able to get through in some of these acute situations?

Mr Andrew Mitchell: In some ways, of course, if people are fleeing either a natural event or violence and they are in a camp, they are then quite literally a captive audience and you are able to provide education. Members of the Committee will have seen this all around the world; where camps are set up and where there are a lot of children you can then provide education for them. In less ordered environments, Education Cannot Wait has been very successful in operating in those circumstances.

Q136 **Chair:** Sorry, it was more me giving a bad question. In a humanitarian situation, so looking at what has happened in Marrakesh—and I am very grateful that the British Government are giving some support there and it is getting through—with food parcels and support would you have sanitary products for girls, for example?

Mr Andrew Mitchell: Yes. Typically, they would be included. Thank you for your comments. Lord Tariq Ahmad, my colleague, is masterminding our efforts and was very pleased that two planes full of ISAR professionals are now on the ground and operating in Morocco.

Q137 **Chair:** The UK is again very good at cash transfers. When the Committee went to Jordan, we went into one of the supermarkets that is available for refugees. It is great that they have choice to be able to get the products. Do you have any influence to make sure that menstruation products are there at an affordable rate or able to be given out free to women and girls?



HOUSE OF COMMONS

Mr Andrew Mitchell: I have also visited supermarkets in Jordan that are specifically adjacent to camps. It may well be the same one.

Chair: I would imagine it would be.

Mr Andrew Mitchell: It was in Za'atari, I think, yes. They are a tremendous source of goods that have to be bought, either by tokens or by cash, but they are also often to be found adjacent to health facilities. I cannot remember for sure, but I am pretty certain that those important products were available in possibly the same supermarket that we both visited. It is a very important point. Would you like me to check up on that and perhaps drop you a line?

Q138 **Chair:** I just know particularly women when resources are scarce will go without essential products themselves to make sure that their family is taken care of, so if there is any way—I know too much about this because I campaigned to try to get VAT taken off products here. They are not a luxury and they are crucial to enable girls particularly to be able to go to school. If you could follow up I would be very grateful.

Mr Andrew Mitchell: I will definitely follow up. My memory is that in terms of these products they are provided in the humanitarian support that we give out.

Chair: Excellent. Thank you very much.

Q139 **Theo Clarke:** We know that women in developing countries often give birth in very difficult circumstances, including lack of access to proper drugs, trained healthcare professionals or even having hygienic conditions. I am interested to know if the UK Government will invest more in training healthcare personnel in low-income countries, particularly on things like birth trauma where they could suffer from psychological or physical injuries after birth. Is that something we will be spending ODA budget on?

Mr Andrew Mitchell: I am not sure whether this is a direct answer to your question. We consider SRHR in all settings. We are doing a lot of work with training health providers. I hope that the White Paper will say more about Britain directly supporting organisations and institutions that are training health workers in the developing world and give an opportunity for those from here who are trained to take that training and support overseas, and for those who come here to work in our health service to augment their training and return to their own countries as a result of that additional training. It seems to me that that is a very important aspect of this.

Q140 **Theo Clarke:** The FCDO has approach papers on ending preventable deaths of mothers, babies and children by 2030 and another paper on health system strengthening, but we have noticed that it has not published any updates on its work in either of those areas. Could you tell us what the key achievements have been as a result of those approach papers to date?



HOUSE OF COMMONS

Mr Andrew Mitchell: I am the FCDO champion on ending preventable deaths, so I have a particular remit in that way. Our commitment is to supporting efforts to end the preventable deaths of mothers, babies and children by 2030. It features in all our documents and, indeed, if my memory serves me right it was in our manifesto.

It is extremely important. We do it by strengthening health systems and wider efforts to promote comprehensive SRHR on gender equality, improved nutrition, water, sanitation, hygiene, and climate resilience. Our programmes for maternal and newborn health, which are extremely important to us, include the GFF, the Global Financing Facility, the Partnership for Maternal, Newborn and Child Health, and Reproductive Health Supplies. We are very conscious of the need to stand by the commitments we have made and the manifesto commitment, and the Committee will want to hold me to account on that as the ending preventable deaths champion.

Q141 **Theo Clarke:** I am very pleased to hear it is such a commitment for you personally and the Government. Can I ask then if the FCDO will publish these measurable targets and achievements per year for these strategies?

Mr Andrew Mitchell: If we are not currently publishing them, I will see what I can do to make sure that we do.

Q142 **Theo Clarke:** Thank you. Finally, does the FCDO plan on integrating gynaecological healthcare into the UK sexual and reproductive health programming?

Mr Andrew Mitchell: Off the top of my head I cannot give you an answer to where we have got to on that, but it is an entirely logical approach that one would expect to be integrated.

Q143 **Chair:** Minister, over the pandemic we heard a lot of evidence about healthcare workers dying internationally, healthcare systems crumbling, if not collapsing. I wonder if FCDO is focusing on prioritising rebuilding those systems. One of the things that we hear a lot is concern that our own healthcare system needs staff so is actively recruiting around the world. How do you balance building a low-income country's own healthcare system and then not poaching the staff that you have had a hand in training up?

Mr Andrew Mitchell: It is a very good point. It is a point that was raised this morning in the session we had with the All-Party Parliamentary Group's consultation on the White Paper, co-chaired by Baroness Sugg and Lord Jack McConnell. It is a dilemma. I explained this morning that when I was on the Back Benches I produced a ten-minute rule Bill that said if ever you pinch a trained health worker from a developing country you have to use the development budget to provide them with the wherewithal to train up two replacements. Otherwise, it is a form of reverse aid.



HOUSE OF COMMONS

We have had discussions with the Health Department about this. There is a red list, which is countries from which you are not allowed to take staff. There is, of course, an aspect of free movement in all this, that if you are trained you should be allowed to build up your capabilities and your training and your skillset.

I think that we are moving towards a reasonable place on this. It is very important that where people come here to help us from overseas and bring their skills as a health worker, they should have an opportunity here to increase their training and skills so that if they choose to go back to their own country they take those skills, which they have learnt and augmented here, back to that country.

Q144 **Chair:** In the other direction, I can also see quite a lot of our staff might want to have a sabbatical and help a low-income country. They would no doubt learn a huge amount and be able to share some of their skills and experience. It is good to hear that you are on board with that because the world is a small place now and finally we are recognising the importance of medical staff. Thank you for your comments.

Mr Andrew Mitchell: You may remember that in 2010-11 we introduced the health partnership scheme, which THET, I think based at Liverpool, was very instrumental in setting up. We have been talking to them again and I hope that we may be able to say something about that in the White Paper.

Q145 **Chair:** We are putting a lot of expectations on the White Paper. It is clear that you are as well.

Mr Andrew Mitchell: Rightly so. If we get it right, it will have an enormously powerful effect, I believe, on not only our focus but the focus of others. Quite a lot of people are hoping that the White Paper will deliver on those expectations.

Q146 **Chair:** Are other Government Departments feeding in as well?

Mr Andrew Mitchell: Yes. The great thing about it being a White Paper that goes to 2030 and, therefore, is a through train through the next election, whatever the result of that may be, is that talented people across Whitehall, across the British Government, will give their time and effort and thinking into making sure it is a real success.

As I said at the beginning, that might not have been the case if they thought it was a document that was just for the period up until the next general election. The fact that it is a through train gives it huge opportunities but it also engages some very brilliant people in thinking about what should be in it.

Chair: Absolutely. If only all policies had a similar foresight. David, can I pass to you?

Q147 **David Mundell:** Minister, does the FCDO co-ordinate with other donor



HOUSE OF COMMONS

partners to ensure that its aid programming for sexual and reproductive health is complementary to other aid programming and vice versa, such as abortion services?

Mr Andrew Mitchell: The answer to Mr Mundell's question is yes. We work very closely with other donors on policy and programmes and I have described how we try to ensure within the international system, the multilateral system, that we are able to help drive common objectives with other partners. We co-ordinate joint programmes with donors—for example, the FP2030 partnership of donors, Governments and civil society to support global family planning. We work with donors and partners, including USAID, Germany, the Gates Foundation, the Packard Foundation, and the Children's Investment Fund Foundation, CIFF.

In terms of the GFF, the Global Financing Facility, we work very closely with Canada, Japan, Norway, the Gates Foundation, Germany, the Netherlands and the Buffett Foundation. Finally, on UNFPA Supplies we work very closely with the Netherlands, the Gates Foundation and Canada. We certainly do co-ordinate and that way we make sure that we are using our taxpayers' money to the best possible effect.

Q148 **David Mundell:** This is specific to sexual and reproductive health programming. Have the merits of using telemedicine been considered?

Mr Andrew Mitchell: Certainly. All modern advances. There is quite an interesting programme to do with birthing mothers, which USAID is piloting and which we are helping with. All innovations we look at very carefully, and these days with a sense of excitement because the frontiers are being pushed out to our great advantage in delivering these programmes.

Q149 **Chair:** Minister, I have done a lot of work campaigning to try to prevent FGM, female genital mutilation, here in the UK. I always used to cite the amazing work that DFID was doing overseas to prevent it. I am not hearing very much about what we are doing internationally now. Is it still a priority?

Mr Andrew Mitchell: It certainly is. I wear this, "Together we end FGM", which I was given when I was in Somalia with a civil society group that we were supporting.

We are a major donor and a global champion. We have helped 10,000 communities. We calculate that 27 million people abandon FGM. We have supported Africa-led movements to end FGM since 2013 and we have a programme of £35 million running between 2019 and 2027. We fund the UN joint programme to end FGM. In addition to all that, we have a raft of consular and diplomatic activity.

We regard ending FGM as a human rights issue. We take a human rights approach. We accept that it is long term. It is led by civil society and affected communities and countries. We have to break silence and taboos and we welcome partners wherever we can in achieving that. I will never



HOUSE OF COMMONS

forget being told in Somalia by the woman who ran this charity that she had just come around from the birth of her second child and had heard her granny say to the doctor, "Will you cut her?" She heard it and she said, "I know my rights, you certainly won't and you cannot do that". It is a story that tells you a great deal about culture, relationships and the difficulties of delivering on an end to this disgusting and awful practice.

Q150 **Chair:** I know that in France, because I have met some survivors, their state health system pays for reconstructive surgery to return the dignity and hopefully take away some of the pain that is lifelong that women have because of FGM. Is that something that you have spoken to the Health Minister about? Is that something that would be on the radar here? I know that a lot of women in the UK do suffer daily because of this.

Mr Andrew Mitchell: As far as the UK is concerned, you would have to talk to the Health Minister about that. As far as our work overseas is concerned, we are trying to drive change. That is our top priority. As part of that, of course, we would always look at any suggestions like that.

Q151 **Chair:** Is that something that you might have a conversation with the Health Minister on because I know that you are a passionate advocate?

Mr Andrew Mitchell: If the Chairman of the Committee would like me to do so, I certainly will.

Chair: I would be very grateful. Thank you, Minister. From my and the Committee's questions it is very clear that embedding the rights and the health of women and girls within all FCDO's programming is vitally important. I am glad that you share that and we look forward to receiving the White Paper, when hopefully we can see your plans in full. Thank you very much for your time today. Thank you, Committee. This session is now closed.