

Contribution from UNFPA, the United Nations Population Fund, to the International Development Committee's inquiry into the FCDO's approach to sexual and reproductive health.

Written evidence of 18 April 2023 submitted by Matt Jackson, Chief, London Representation Office, UNFPA.

UNFPA is the UN's sexual and reproductive health agency with a mission to ensure that every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled. We support women, girls and young people in more than 150 countries, encompassing over 80% of the world's population. Our programmes aim to achieve the "three zeros" by 2030 – zero unmet need for family planning, zero preventable maternal deaths, and zero gender-based violence (GBV) and harmful practices.

UNFPA values our long-standing collaboration with the Foreign, Commonwealth and Development Office (FCDO), the UK's global leadership on sexual and reproductive health and rights (SRHR) and its commitment to achieving the Sustainable Development Goals. This response follows on from UNFPA's reply of 6 March 2023, following your request for information about the impact of the FCDO's funding cuts to UNFPA programmes. In that letter, UNFPA provided an overview of UNFPA's mandate and its funding instruments, outlined the UK's contributions to UNFPA as a leading donor including headline results achieved, provided a broad assessment of the impact of recent Official Development Assistance (ODA) cuts, and outlined mitigating action taken.

UNFPA's key message to this inquiry is that investment in sexual and reproductive health and rights (SRHR) is one of the most powerful accelerators of human progress, delivering strong returns to economies and societies through lasting benefits for individuals and families. For this reason, SRHR is known as a 'best buy' in global health and for delivering the UN Sustainable Development Goals (SDGs). Every \$1 invested in contraception delivers returns of over \$8 by averting unintended pregnancies and reducing the demand for, and the cost of, maternal and other health services. Investment in maternal health leads to lower morbidity and health complications associated with childbirth. In turn, the reduction of unintended pregnancies can ensure that girls continue their education and develop their professional skills, thus increasing women's participation in the economy and society. Yet underfunding in SRHR is common. From 2022 to 2023 it is estimated that low- and middle-income countries will need to spend an additional \$79 billion to end unmet need for family planning and end preventable maternal deaths.

1. The FCDO's approach to SRH programming and responding to the needs of communities in lower-income countries

UK contributions to UNFPA core funds directly target where needs are greatest in lower-income countries. UNFPA uses a combination of indicators to identify those furthest behind and where

needs are greatest such as the proportion of births attended by skilled health personnel for the population's poorest quintile, the maternal mortality ratio, adolescent birth rate, the proportion of demand for modern contraception satisfied, HIV prevalence among 15 to 24 year olds, and ranking on the gender inequality index. This allows UNFPA to ensure that core contributions reach the most vulnerable and marginalised. The UK has consistently been among the top ten donors to UNFPA core, only slipping to eleventh position since the 2021 aid budget cuts. However, the UK has since maintained this revised funding level to core.

The UK's commitment to SRHR and its political and financial support is aligned with UNFPA's mandate to tackle GBV and harmful practices, provide contraceptives and ensure safe birth. In 2022, the UK was the third largest donor to earmarked contributions, including support to the UNFPA Supplies Partnership. This partnership programme, considered a global public good, is estimated to have prevented 89 million unintended pregnancies, 254,000 maternal deaths and 1.6 million child deaths between 2008 and 2020. In addition, as the lead UN agency to end gender-based violence in emergency and humanitarian settings, UNFPA values the UK's focus on putting women and girls at the centre of humanitarian action.

Contributions from the UK have helped UNFPA to reach people in many of the world's lowest-income countries, where maternal death rates are high, modern contraceptive use is low and economic indicators demonstrate a pressing need. Between 2018-2021, key results¹ achieved with UK funding include:

- 7.1 million unintended pregnancies averted
- 2.1 million unsafe abortions averted
- nearly 20,000 maternal deaths averted
- providing contraceptives that generated 25.5 million couple years protection
- 1.9 million sexually transmitted infections and 45,000 HIV infections prevented by providing female and male condoms
- 91,800 girls saved from female genital mutilation (FGM) and 329,200 girls and women reached with prevention and/or protection services related to FGM
- prevention and protection services for 909,300 girls related to child, early and forced marriage
- 1.1 million marginalised girls reached with life skills programmes
- access to essential services for 468,000 women and girls subjected to violence
- 3,528 communities that made public declarations to eliminate harmful practices

2. Results of FCDO's work on SRH in support for the provision and delivery of a range of contraceptive supplies, family planning and maternity services as well as ending harmful practices such as FGM and child marriage

¹ Results are estimated based on the proportion of total resources provided by the donor during the 2018-2021 strategic plan period.

In February 2023, UNFPA with WHO, UNICEF, World Bank Group and the UN Population Division released new data on global maternal mortality rates. The data for 2020 show that every day, approximately 800 women die from preventable causes during pregnancy and childbirth - equivalent to one death every two minutes. The report reveals setbacks in women's health as maternal deaths have stagnated or even increased in nearly all regions of the world, with about 70% of all maternal deaths occurring in sub-Saharan Africa, and nine countries that are facing severe humanitarian crises showing maternal mortality rates that are more than double the global average.

Through the FCDO, the UK financially supports, either directly or in pooled funds or partnerships with other donors, a range of programmes that deliver maternal healthcare and SRHR services to women, girls and young people in lower income countries and humanitarian settings. Recent examples of UK support include:

- In Nampula Province, Mozambique, over half of girls give birth before they reach 18 years old. UK support of nearly £6.8 million (GBP) (for December 2021 to March 2025) is helping to reduce early and unintended pregnancy by ensuring that family planning services are available and accessible. UK funding is targeted to create an enabling environment to increase and sustain financing for family planning and to strengthen supply chain and logistics management of contraceptives in order to ensure availability and choice of commodities. The programme, which runs in Nampula and Zambézia Provinces, trains health professionals on the use of self-injectable contraceptives and intrauterine devices (IUDs), maps availability of contraceptives and health medicines, provides youth-friendly sexual and reproductive health services in secondary schools, and holds community dialogues on teenage pregnancy and ending child marriage. In addition, the project works to integrate family planning services in all health care entry points, a critical goal given that Mozambique has one of the top 20 maternal mortality rates worldwide.
- In Iraq, with FCDO support, UNFPA conducted two 5-day training sessions on the Adolescent Girls Toolkit to 40 adolescent girls, to equip them with resources and guidance on reproductive health and GBV including family planning and ending child marriage. Also in Iraq, the UK is investing £13.8 million (GBP) in a multi-year UNFPA programme (November 2021 to October 2026) to improve national policies and regulations on access to rights-based family planning with a focus on young people and vulnerable groups. The programme increases awareness of decisions-makers, community leaders and influencers about family planning, reproductive rights and the harms of child marriage. Support from the UK is enabling women, young people and people with disabilities to access quality family planning services, age-appropriate information, life skills and education on reproductive health.
- UK support in Tanzania is helping to provide commodities that will prevent nearly 1 million maternal deaths, avert 2 million unsafe abortions and avoid 9 million unintended

pregnancies. The UK contribution of £300,000 (GBP) has the potential to save \$756 million USD in direct healthcare costs.

- In Ukraine, UK support helped to evacuate over 600 people from Mariupol in just one week in May 2022, and to provide on-the-ground psychosocial support and referrals to specialised medical and psychological services for evacuees in Zaporizhzhia. Support also included distribution of essential dignity and menstrual kits to women and girls.
- UK funding in Sudan supports UNFPA's work with local community protection networks to end female genital mutilation (FGM) and work with UNICEF and the World Health Organisation (WHO) under the Sudan Free of Female Genital Mutilation joint programme to end harmful practices. Through this, UNFPA is able to support, as of 2022, 89 communities in Sudan to publicly declare abandonment of FGM with a further 547 communities receiving support to make similar decisions.

3. Further targeting of funding for effective delivery of SRH programmes

UK cuts to existing programmes and core funds have had a significant impact as set out in UNFPA's response of 6 March 2023 to the International Development Committee. During 2021-2022 UNFPA calculates the net revenue reduction to UNFPA from the aid budget cuts as nearly £150 million. The promised funding had the potential to avert an estimated 47 million unintended pregnancies, 813,000 maternal and child deaths, and 14.4 million unsafe abortions.

UNFPA advocates to all donors, including the UK, the benefits of multi-year contributions as this provides stability and sustainability in programming, especially where longer-term solutions are needed such as family planning programmes or providing psychosocial support for survivors of gender-based violence. UNFPA recognises the challenges of multi-year commitments given political and spending review cycles, yet underlines the huge benefits that predictable and flexible multi-year commitments have in terms of shock-proofing life-saving SRHR programmes and responding to emergencies. UNFPA also advocates the use of pooled funds as this provides greater opportunities for efficiencies and/or enables increased purchasing power for e.g. commodities. Furthermore, multi-year instruments that are designed to pool contributions from multiple sources help to facilitate scale and forward-looking planning and delivery. They also help to leverage additional funding and improve efficiency and cost effectiveness, thereby exceeding the results and impact of one-off or individual contributions.

We also recognise that donors such as the UK have strategic priorities that are both thematic and/or geographic, including those based on historical ties, and therefore favour a combination of pooled and bilateral funds to UN programmes. Therefore, in response to donors' interests, UNFPA runs four thematic funds: the UNFPA Supplies Partnership, the Maternal Health Thematic Fund, the Humanitarian Thematic Fund and the Population Data Thematic Fund in addition to the Global Programmes to End Female Genital Mutilation (FGM) and End Child Marriage in partnership with UNICEF. In particular, the UK is a long-term supporter of the Supplies

Partnership, which works with partners and government to ensure access to a reliable source of contraceptives, condoms, medicines and equipment for family planning, STI prevention and maternal health services as well as integrating family planning services into primary healthcare. From 2013 to 2020 the UK was the biggest donor to this programme. The UK has also supported the Global Programmes to End FGM and Child Marriage over a number of years. UNFPA encourages the UK to consider regular funding for these life-saving programmes.

As example, FCDO support in 2022 provided reproductive health kits, clean delivery kits and maternal medicines saving lives in some of the most challenging fragile and conflict settings including in Afghanistan, Somalia, Syria and Ukraine. The UK was UNFPA's second largest donor to the humanitarian fund, ensuring that the needs of women, girls and young people are not overlooked in crisis settings. In addition, the UK, along with Italy, Japan, USA and the European Union contributes to funds in Afghanistan that provide some 117 UNFPA-supported mobile health teams to reach an estimated 1.5 million people across 25 provinces in Afghanistan to deliver safe birth, psychosocial support and maternal, child and adolescent healthcare in remote communities. UNFPA estimates that 24,000 women give birth in these remote areas each month.

Furthermore, the UK is one of fourteen donors to UNFPA's work in Moldova supporting the "Break the Silence, We Stand by You" campaign reaching out to local populations and refugees with information on rights, GBV support services and amplifying the voices of survivors. UK funding helps UNFPA to support 28 Safe Spaces across Moldova including eight mobile safe spaces dedicated to women, young people and older persons (reaching 2,788 new individuals in March 2023), that target refugees and host communities with GBV and SRH packages including referrals, psychosocial support and dignity kits. This support also helped to train health professionals in clinical management of rape, distribute 900 maternity bags for refugees and provide gynaecological offices with examination chairs adjustable to the needs of women with disabilities.

UNFPA also encourages further consideration by the UK of innovative financing tools. For example, the FCDO and the Children's Investment Fund Foundation (CIFF) financed UNFPA Kenya's Joint Programme funding proposal to the Joint SDG Fund to support the scale-up of the world's first Adolescent Sexual and Reproductive Health (ASRH) Development Impact Bond (DIB) in Kenya. This DIB, to improve the business model of In Their Hands (ITH), an innovative adolescent-centred digital-based SRH solution, was selected in January 2022 by the Joint SDG Fund and awarded US \$7,000,900 to scale-up ITH and help embed it in Kenya's public health response. UK support was critical to initiating this Development Impact Bond.

4. Does the FCDO's new global Women and Girls strategy sufficiently address sexual and reproductive health?

UNFPA welcomes the UK's International strategy on women and girls and its aims to tackle the increasing threats to gender equality from climate change, humanitarian crises and the recent attempts to roll back human rights. UNFPA is pleased that the strategy recognises the importance

of empowering women, including through access to quality sexual and reproductive health services, in order to achieve the SDGs. The strategy recognises current challenges at country level as well as global level disruptions such as the push back on human rights. The strategy positions itself within the SDGs and recognises intersectional forms of minoritisation that affect persons with disabilities, LGBTQIA+ and ethnic minorities. The strategy also champions comprehensive sexuality education (CSE), the need to tackle the impacts of climate change on women and girls and efforts to end harmful practices, conflict-related sexual violence and technology-facilitated GBV.

The strategy's new 'gender marker' commits the FCDO to ensuring that 80% of its bilateral aid programmes contribute to achieving gender equality, by 2030. UNFPA looks forward to seeing further detail on this and on how the FCDO's diplomatic network will work to "address those complicit in anti-rights movements". Although the strategy is not designed to be a comprehensive list, UNFPA hopes that a life-cycle approach that includes tackling the stigma of menstruation and HIV/AIDS, championing the importance of bodily autonomy and recognising issues related to menopause and ageing, will also be included in the FCDO's approach.

Conclusion

UNFPA recognizes the challenges faced by donor governments from the COVID-19 pandemic, the ensuing economic uncertainty and the turmoil caused by the war in Ukraine. But the needs of women, girls and young people have only intensified from these crises. The UK is a longstanding partner of UNFPA and remains a key political ally in both promoting SRHR globally and in supporting UNFPA's work to meet the "three zeros" by 2030. Investing in and prioritising the rights of women, girls and young people to health, safety and dignity is essential to achieve the SDGs.

UNFPA hopes that the UK will continue to politically and financially support SRHR programmes and, when possible, return to previous levels of funding in this area. UNFPA continues to work hard to deliver the promises made to women and girls in the International Conference on Population and Development (ICPD) Programme of Action, including through a new "ICPD30" campaign celebrating 30 years of ICPD (in 2024) aiming to reduce polarisation and the push-back on issues such as SRHR, human rights, bodily autonomy and comprehensive sexual education. UNFPA values our partnership with the UK, and believes that the UK's leadership working across the humanitarian–development–peace continuum is needed now more than ever.