



# Emergency Contraception in Peru: Shifting Government and Donor Policies and Influences

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**Abstract:** *Inclusion of emergency contraception in national family planning programmes is consistent with international agreements that countries should strive to ensure access to a wide range of contraceptive methods and promote voluntary, informed choice. Yet in 2005, USAID/Peru requested that its NGO grantees in Peru take a "neutral" position on emergency contraception in activities or materials that involve its funds. For many decades, donor countries have viewed conservative religious forces in low-income countries as an obstacle to expanding family planning programmes. Today, however, far-right organisations in the United States are having an unprecedented influence on US public policy, including in countries such as Peru. This article analyses shifts in USAID/Peru's policy on emergency contraception in Peru since 1992. In Peru today, there is widespread official and public support for making emergency contraception available. Given USAID's long support for family planning internationally and in Peru, the current policy appears to be the result of attacks by US far-right organisations carried out in synergy with sympathetic US public officials and anti-choice Peruvian allies. ©2007 Reproductive Health Matters. All rights reserved.*

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EMERGENCY contraception is on the WHO Model List of Essential Medicines and the Interagency List of Essential Medicines for Reproductive Health.\* Moreover, its inclusion in national family planning programmes is consistent with international agreements such as the 1994 ICPD Programme of Action, which mandates that countries strive to ensure access to a wide range of contraceptive methods and promote voluntary, informed choice.

Emergency contraception is considered a contraceptive by the US Agency for International Development (USAID),<sup>1</sup> and USAID has long

played a critical role in improving access to all contraceptive methods, including emergency contraception, in low-income countries. For example, it has lent technical and legal support to the International Consortium for Emergency Contraception, a collaborative effort of major US international health organisations to increase availability of and access to the method in low-income countries (Personal communication, Elizabeth Westley, Coordinator, International Consortium for Emergency Contraception, 23 January 2007).

Emergency contraception has been approved by the government in Peru since 2001.<sup>2</sup> Yet in November 2005, the Peruvian mission of USAID sent a letter to all its NGO grantees requesting that they “maintain a neutral position” regarding emergency contraception, “not giving preference to any position in any circumstances that

\*At: <[http://whqlibdoc.who.int/hq/2005/a87017\\_eng.pdf](http://whqlibdoc.who.int/hq/2005/a87017_eng.pdf)> and <[www.who.int/medicines/publications/essentialmedicines/WHO-PSM-PAR-2006.1.pdf](http://www.who.int/medicines/publications/essentialmedicines/WHO-PSM-PAR-2006.1.pdf)>, respectively.

*involves USAID financing, for example, information materials or planned events, among others.”*<sup>3</sup>

The aim of this article is to analyse the reasons for several shifts in USAID/Peru's policy on emergency contraception within the context of changes in government policy on family planning in Peru and the United States and the increasing influence of ultra-conservative forces on US foreign assistance abroad where they can gain a foothold.<sup>4,5</sup> For many decades, donor countries have viewed conservative religious forces in low-income countries as an obstacle to expanding family planning programmes. Today, however, far-right organisations in the US are having an unprecedented influence on US public policy, including in developing countries such as Peru. The information is drawn from on-going monitoring conducted by the authors of reproductive health and rights policies in Peru over a number of years.

### **USAID and family planning policy in Peru 1970s–1990s**

For 30 years, USAID has been the main foreign donor to family planning in Peru.<sup>6</sup> Until the 1990s, the Peruvian government had a weak commitment to providing family planning services.<sup>7</sup> USAID/Peru\* gave contraceptive supplies and technical assistance to private non-governmental organizations (NGOs) to deliver family planning services, primarily through clinic-based programmes. The amount of funding was based on the number of contraceptive years of protection achieved, which encouraged an emphasis on long-term methods, such as the IUD.<sup>6</sup>

Around the time of the International Conference on Population and Development (ICPD) in 1994, although it continued to focus on family planning, USAID/Peru funding policy began to reflect a more comprehensive and user-centred approach to reproductive health, including preventing unwanted pregnancy, improving women's health and ensuring informed choice in contraceptive use.<sup>8–10</sup>

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\*USAID in Washington DC sets the overarching goals of the agency, but country-level missions have a high degree of autonomy to fund programmes that they consider appropriate in the national context (Personal communication, several USAID officials).

At the same time, the Peruvian government began to improve access to contraceptive services among groups that had been marginalised from these services in rural and peri-urban areas in the Andean Highlands and Amazon Basin. Contraception was offered free of charge, and tubal ligation and vasectomy were legalised.<sup>11</sup> Emergency contraception had been included within Peru's national family planning norms in 1992,<sup>12</sup> but policy prioritised increasing the availability of contraceptives for ongoing rather than emergency use, and no institutionalised efforts were made to provide emergency contraception.<sup>8</sup> In the mid-1990s, USAID transferred a large portion of its family planning assistance to Peru's public health sector, in recognition of the fact that it had become the main provider of health services, including for contraception.<sup>9</sup>

The Fujimori government shifted the expanding national family planning programme towards fulfilling demographic objectives by 1996. This led to now well-known abuses, particularly in relation to sterilisation, which was sometimes delivered without adequate quality of care or voluntary and informed choice. Peruvian women's rights organisations and the Public Ombudsman's Office on Women's Rights led efforts to expose the problems and propose reforms.<sup>13–15</sup>

The problems resulting from Fujimori's sterilisation policy prompted Catholic church officials, lay groups and far-right policymakers in Peru to demand that the national family planning programme be shut down immediately and sterilisation removed from the list of approved methods.<sup>16,17</sup> In January 1998, David Morrison of the US-based NGO Population Research Institute (PRI) travelled to Peru to collect information on abuses, taking testimony from far-right politicians in Peru who were opposed to family planning in Peru, among others, and to find out if USAID was involved in funding these abuses.<sup>18–21</sup>

Morrison did not even meet with officials at USAID/Peru,<sup>8</sup> yet upon returning to the US, PRI sent its evidence to right-wing US Congressman Chris Smith, urging that USAID's family planning efforts in Peru be suspended.<sup>22</sup> Smith sent a member of his own staff to Peru to investigate.<sup>23</sup> In February 1998, another US far-right group, the Latin American Alliance for the Family, sent its director to Peru to investigate, again without meeting USAID/Peru.<sup>24</sup> On 25 February, a sub-committee of the Committee on International

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