



Reflections on indicators to measure the demand side of rights-based FP

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IUSSP Webinar: Why do we measure what we do? For the IUSSP Panel on Rethinking Family Planning Measurement with a Reproductive Rights and Justice Lens

2012: Inflection point in measuring rights-based FP

- What is rights-based FP?
- How do we measure it? Isn't QOC enough?



London Summit on
FAMILY PLANNING

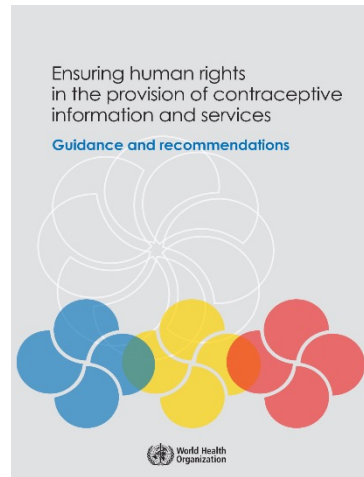


The London Summit on Family Planning will mobilize commitments to support the rights of an additional 120 million women and girls in the poorest countries to use contraceptive information, services and supplies, without coercion or discrimination, by 2020.

FP2020, 2012a



Human Right Principles for FP - WHO and FP2020 (2014-2015)



- The fundamental right of individuals to decide freely and for themselves, whether, when, and how many children to have is central to the vision and goals of Family Planning 2020 (FP2020). The international community has agreed that the right to health includes the right to control one's health and body, including sexual and reproductive freedom. However, more remains to be done to ensure that human rights are in fact treated as the cornerstone of any family planning effort: from global initiatives to national programs to community-based projects.
- In order to ensure that FP2020 and its mechanisms endorse and reinforce the ideals grounded in existing rights agreements and frameworks, the Rights and Empowerment Working Group (REW) has developed a common understanding of rights principles as they relate to ten dimensions of family planning:
- Agency and autonomy
 - Availability
 - Accessibility
 - Acceptability
 - Quality
 - Empowerment
 - Equity and non-discrimination
 - Informed choice
 - Transparency and accountability
 - Voice and participation

The rights principles outlined in this document must be reached in order to reach and sustain goals for meeting contraceptive needs. These rights principles are informed by and build upon existing human rights principles and resources that seek to promote rights-based approaches specifically for family planning and programming. Ensuring that human rights or equity are at the center of family planning policies, programs, measurement and contraceptive markets represents some of our most challenging work. However, as a global initiative, FP2020 recognizes that treating human rights as critical to growing sustainable, equitable and effective programs with lasting impact.

By securing and fulfilling the rights of an additional 120 million women and girls to access family planning information and services by the year 2020, FP2020 efforts will result in fewer unintended pregnancies, fewer women and girls dying in pregnancy and childbirth including from unsafe abortions, and fewer infant deaths. Moving this agenda forward will rely on fostering meaningful partnerships among governments, civil society, the private sector and beneficiaries. Rights violations must be brought to light and addressed when they occur. The equal attention needs to be paid to empowering and informing citizens so they know, understand, claim their rights, and can become positive partners in ensuring the realization of rights in future family planning and health development initiatives.

Human Rights Conventions

Right to reproductive self determination

Right to bodily integrity and security of person and rights of couples and individuals to decide freely and responsibly the number and spacing of children.

- Agency and autonomy
- Empowerment
- Informed decision-making

Right to SRH services, information, and education

Including the right to the highest attainable standard of health.

- Availability
- Accessibility
- Acceptability
 - Quality
- Privacy and confidentiality
- Informed choice

Right to equality and nondiscrimination

Right to make decisions concerning reproduction free of discrimination, coercion and violence.

- Non-discrimination
- Equity

Accountability and Participation

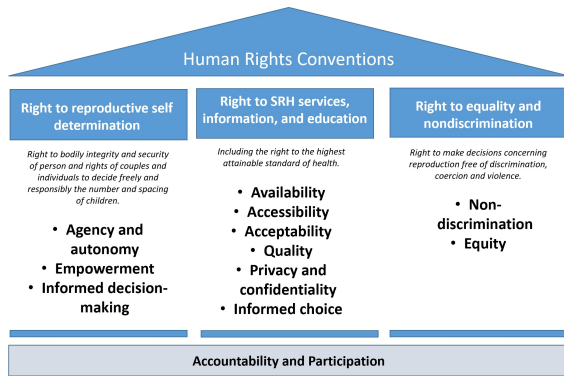
Other sources: WHO, 2014, Rights-based Contraceptive Services; FP2020 Rights and Empowerment Principles; Erdman and Cook, 2008, Reproductive Rights.

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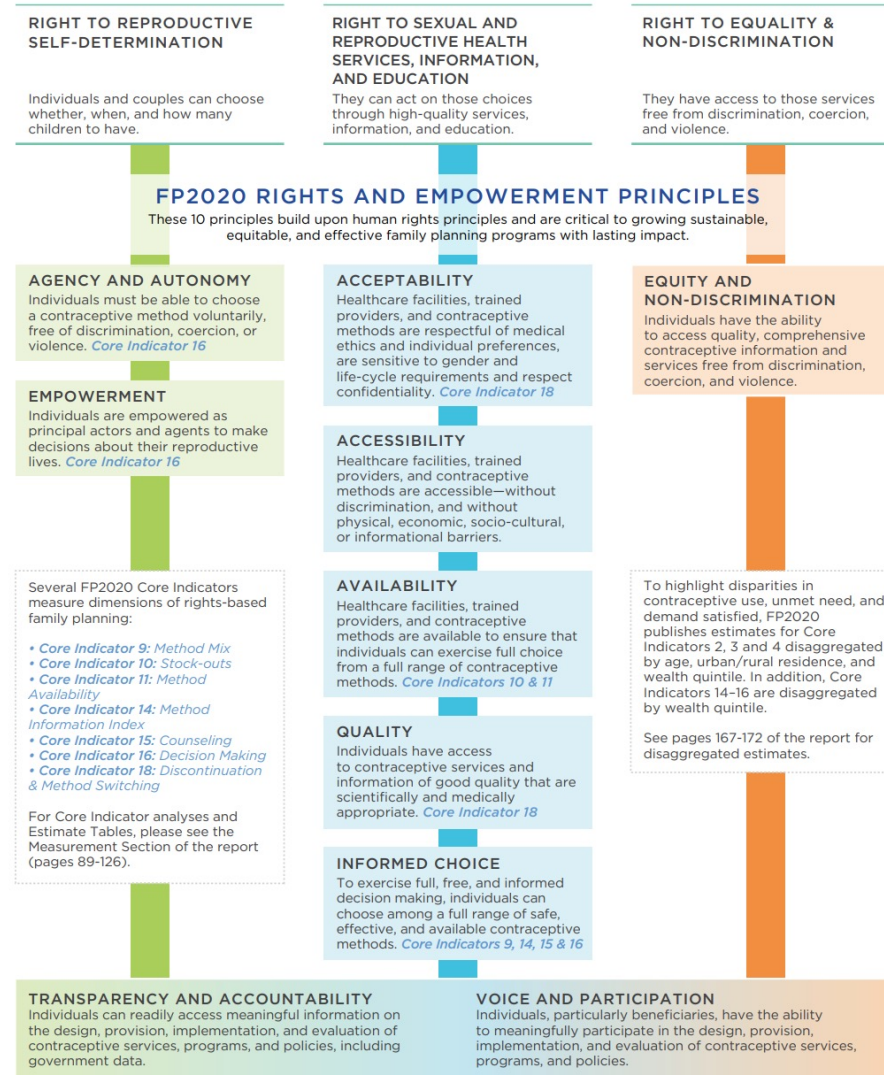
Human rights and related principles that apply to family planning have been affirmed by international consensus in treaties, conference documents, and declarations.



The three pillars of reproductive rights are grounded in these international conventions.



Other sources: WHO, 2014, Rights-based Contraceptive Services; FP2020 Rights and Empowerment Principles; Erdman and Cook, 2008, Reproductive Rights.



- Review of measures around FP2020 in 2012 – what do we have that is good and what are the gaps?
 - Voluntarism
 - QOC
 - Informed choice
- FP2020 measurement included
 - RBFP core indicators (e.g., equity; full, free and informed choice)
 - National Composite Index of Family Planning (NCIFP) - quality, equity and accountability

Lessons:

- Human rights are complex – no one measure – or simple index of “rights-based FP”
- Focus on rights has sharpened our measures

Much more attention to person-focus rather than program-focused measures

- ❑ QOC (Bruce) FW has been revised to incorporate human rights:
 - treating clients with dignity and respect (dignity is at the heart of human rights)
 - information exchange rather than information giving
 - privacy/confidentiality
 - Follow up for side effects and switching



COMMENTARY | [Free Access](#)

Revising the FP Quality of Care Framework in the Context of Rights-based Family Planning

- ❑ Selected advances in measuring:
 - QOC including aspects of it like quality counseling
 - Person-centered care
 - Reproductive autonomy, reproductive empowerment, reproductive coercion
 - Psychosocial and sociological influences on contraceptive use
 - More examples in the Special Issue of Studies in FP, March 2023

THE HOLISTIC HUMAN RIGHTS-BASED, VOLUNTARY FAMILY PLANNING PROGRAMME FRAMEWORK

- ✓ Women, men, adolescents and young people know and demand their human rights
- ✓ Sociocultural and gender norms support reproductive self-determination for all, including adolescents and youth
- ✓ There is widespread community awareness and knowledge of family planning
- ✓ Community-based systems help individuals get the contraceptive information and services they want
- ✓ Community members engage in developing, monitoring and holding programs accountable

- ✓ The State is meeting its obligations under human rights law to guarantee that reproductive rights are respected, protected and fulfilled for all without discrimination of any kind
- ✓ Legal, policy and programmatic frameworks are aligned with international human rights and service delivery standards
- ✓ Adequate infrastructure and resources for family planning information and services are allocated and rationally distributed

- ✓ A wide range of contraceptive options is offered
- ✓ Effective monitoring and accountability mechanisms and linkages are in place at all levels
- ✓ Systems and structures engage with national human rights institutions (NHRIs) and international human rights mechanisms to strengthen accountability for SRHR

- ✓ Quality contraceptive information and services, including a wide range of methods, are provided equitably to all individuals without discrimination through a range of service models
- ✓ Services are provided with neither pressure nor access barriers
- ✓ Clients are counseled to make their own informed, voluntary decisions
- ✓ Mechanisms are in place to elicit client input and feedback about service delivery and to redress human rights violations
- ✓ Program managers and healthcare workers comply with service delivery standards, and understand and meet their responsibilities as rights duty-bearers

- ✓ Every individual is treated equally without discrimination
- ✓ All individuals exercise agency in making and acting on their own FP decisions through informed choice from among a wide range of contraceptive methods
- ✓ Clients are satisfied with services, finding them respectful, culturally acceptable, convenient, affordable and available when needed
- ✓ Their privacy and confidentiality are protected
- ✓ Individuals can give input and feedback on how FP services are provided
- ✓ Rights-holders know and demand their rights and how to seek redress if needed

“ All couples and individuals can decide freely and responsibly the number, spacing and timing of their children, and have the information and means they need to do so, free from discrimination or coercion. ”

ICPD, 1994

<https://fp2030.org/sites/default/files/Our-Work/RBFP/HRBA-FP-Framework-Brief-11-15-22.pdf>

<http://www.whatworksassociation.org/human-rights-based-programming.html#framework>

Framework linking the rights & empowerment principles to 4 levels: individual, service, enabling environment, and community.

UNFPA, FP2030, and WWA. 2022.

Helps identifying what to measure.



Considerations

Is contraceptive use (or modern contraceptive use) the only acceptable outcome?

Do our measures focus too heavily on women? Are men and boys well served by our measures?

Do we need to think of various audiences for indicators?

How much of rights-based FP can be measured across countries vs. need for special studies or facility-level data collection?

Human rights are indivisible – do we need to measure all aspects of rights-based FP?

What more do we need to measure reproductive justice beyond human rights?

Coordination of indicators? Who decides which get adopted?

