



Contraceptive Security Indicators Survey

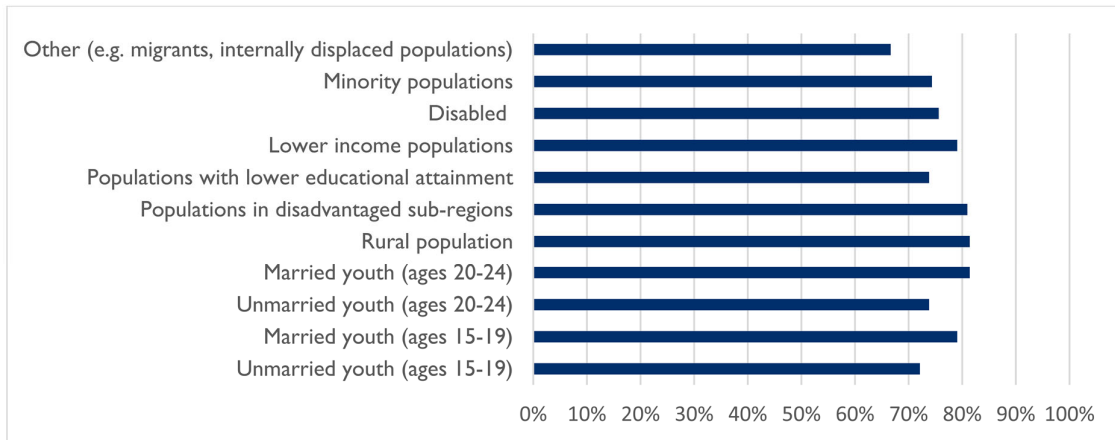
Policy

Policies that Increase Access to Contraceptives

Policies indicate the level of government commitment to contraceptive security (CS) and influence national practices that can promote or hinder CS. Supportive family planning/reproductive health (FP/RH) policies are integral to the existence of successful health systems and strong FP programs. The policy section of the survey recognizes that how FP/RH policies are made, who makes them, and the level of contention on the issues being addressed, all have implications for policy implementation. The indicators in this section aim to address key policies affecting CS and their implementation to help determine whether a country has an enabling environment for and is committed to CS.

Laws, Regulations, and Policies that Increase Access to FP

The CSI survey prompts respondents to report any official laws, regulations, or policies that are designed to increase access to FP services among specific underserved, marginalized, or other vulnerable sub-populations who may not have been reached effectively with FP services. Laws and policies that are specifically targeted to benefit underreached groups are an indication that the government and its advocates are taking significant, tangible steps to improve FP access to those in need. This is an important, clear measure of political will and leadership working to improve access to FP. The percentage of countries that reported national measures to increase access is broken down by specific sub-populations and visualized within an interactive graphic in the “Policy” section of the [CSI Dashboard](#).



Percentage of countries reporting the existence of laws/regulations/policies that increase or decrease access to FP services among sub-populations

The specific sub-populations targeted by each country differed almost as much as the various strategies employed to build a conducive regulatory environment for equitable access; however, they each shared common objectives. The enabling regulations can be generalized as having these shared goals:

- Improve availability and access to FP information, care, and services for all individuals
- Safeguard rights to access sexual and reproductive health services
- Increase contraceptive prevalence
- *In some countries only* - raise awareness of the benefits of FP

Common Themes

Before a nation can begin to address gaps in access due to inequitable social structures, it must first recognize the importance of FP and contraceptive needs at large. One of the initial steps toward creating an inclusive environment for sub-populations is the determination to provide access to the general population; as such, many of the respondents highlighted national policies establishing RH and FP services as a right, and the provision of universal or affordable health care for all was often listed as a key determinant in a country's ability to guarantee this right.

“Informed choice ensures that individuals not only control their own decisions, but also are sufficiently empowered by the information and service delivery environment to freely exercise their decision-making rights.”

Liberia
2019 CSI Survey Response

Beyond that essential criterion, certain countries explicitly denounce discrimination or inequity in access to FP services by specifying the inclusion of under-privileged groups. For example, the government of Madagascar reported a new family planning law adopted in 2018 that specifies RH and FP as a fundamental human right, and directly stated that “everyone has the right to comprehensive services...without discrimination based on age, sex, fortune, skin color, religion, ethnicity, marital state, or any other situation.”

Many countries also directly addressed the rights of children and adolescents, and some reported policies directed toward those who are differently abled. In stark contrast, Afghanistan, Bangladesh, and South Sudan reported that government policies enable access to FP services for married youth only. While those countries' national policies are in the minority, the actual lived experience of underserved, marginalized, or other vulnerable sub-populations may be more inequitable than the reported policies of most countries reflect. Some respondents noted gaps between policy and reality due to several factors, including service providers' biases or lack of training, insufficient awareness of personal rights, local political mismanagement, and missing documentation for migrants.

Although it is evident that each nation's laws, regulations, and policies reflect a spectrum of national measures to increase access to FP services, the general findings can be generalized as follows:

- National strategic plans, laws, and guidelines specific to FP services and needs for youth (in many countries)
- Common sentiment that reproductive rights are linked to basic human rights
- Prevalent access to information on FP
- Strategies focused on reduction of unintended teenage pregnancies (in some countries)
- Increased access to FP services for rural populations, including low cost or free services (in some countries)
- Concerted effort to provide FP services to populations with special needs and those who are differently abled

“Ministerial Resolution No. 503-2012/ MINSa . . . Technical Health Standard: ‘Criteria and standards for the evaluation of differentiated comprehensive health care services for adolescents’ . . .there are a number of approaches that should be respected, and services, including providers, should be prepared to do so, but this does not happen. Only in a small minority can the application of the standards be appreciated.”

Peru
2019 CSI Survey Response