



# The United Nations Population Fund

## KEY POINTS

The United Nations Population Fund (UNFPA) has done some good work in antenatal and postnatal care, reducing maternal morbidity and mortality, and provision of gynaecological services; but there have also been serious allegations about its complicity in coercive population control, secret abortion promotion, and financial and programme mismanagement leading to the USA and Spain withdrawing funding. This article documents specific abuses in programmes in China, Vietnam and Peru and gives examples of botched projects and misuse of funds. In the face of this it has to be asked why the EU and UK are still providing funding to this international agency.

Isaiah tells us that God ‘tends his flock like a shepherd: he gathers the lambs in his arms...he gently leads those that have young’.<sup>1</sup> Sadly, humankind does not always follow God’s example.

The United Nations Population Fund (UNFPA) is one of the world’s most controversial international organisations. Serious allegations have been made by donor nations and human rights groups: complicity in coercive population control, secret abortion promotion, financial and programme mismanagement. The USA and Spain have withdrawn their funding and there is disagreement in Europe over the agency’s future role.

The International Organizations Research Group investigated UNFPA’s activities.<sup>2</sup> Their findings were presented to the European and British Parliaments this January and are summarised here.

### Coercive population control

UNFPA was set up in 1969 to slow population growth. It is the largest international sponsor of population programmes.<sup>3</sup> Some of these are invaluable: antenatal and postnatal care, efforts to reduce maternal morbidity and mortality, and provision of gynaecological services.<sup>4</sup> Other projects are causing worldwide concern. By funding and assisting in coercive population control, UNFPA has been complicit in human rights violations.

### China

In 1979 UNFPA gave China a grant of \$50 million and assisted in the implementation of the One Child Policy. A demographic institute collected data, conducted research and disseminated information on population and family planning.<sup>5</sup> So, the Chinese State Family Planning Commission

were able to tell where women were evading family planning regulations and so set regional contraceptive and abortive quotas. In 1985, the US Agency for International Development (USAID) stated, ‘The kind and quality of assistance provided by UNFPA contributed significantly to China’s ability to manage and implement a population program in which coercion was pervasive’.<sup>6</sup>

UNFPA is still active in 32 Chinese counties on the understanding that quotas and birth restrictions have ceased.<sup>7</sup> In October 2001, a human rights group alleged continuing coercion. They described secret interviews by the US-based Population Research Institute (PRI) with women in Sihui county. The women testified to forced abortions and sterilisations, arrests and detention. One woman, pregnant with her second child, told PRI that officials ‘wanted me to report to the hospital for an abortion but I refused to go. I went into hiding in my mother’s village. They arrested six people in my mother-in-law’s family and destroyed three homes’.<sup>8</sup>

UNFPA’s own investigators didn’t find any evidence of coercion. Still, none of the team met with women without the knowledge or presence of Chinese officials; there weren’t any private, unmonitored or confidential meetings. In May 2002 the United States government sent its own investigative team. They found that UNFPA works in one county where women with more than one child must pay a ‘social compensation fee’, up to three years’ income. Based on these findings, the Bush administration ended all UNFPA support. Secretary of State, Colin Powell, wrote, ‘UNFPA’s support of, and involvement in, China’s population-planning activities allows the Chinese government to implement more effectively its program of

coercive abortion'.<sup>9</sup> He also criticised their supplying of computers and medical equipment to family planning offices engaged in coercive practices.

## Vietnam

Vietnam's population programme calls for coercive measures in a third pregnancy: a 'two child policy'. Parents may have to pay health and education costs of a third child, land may be confiscated and Communist party members are expelled.<sup>10</sup> A 1989 report stated that women had been forced into abortions and IUCD use.<sup>11</sup> By 2001 Vietnam had one of the world's highest abortion rates.<sup>12</sup> According to a UN document, 'Vietnam is undergoing the demographic transition which is usually necessary for a sustainable reduction of poverty. Although government policy bears the main responsibility for this achievement, UNFPA's assistance in preparing for and supporting the policy reform provided necessary capacity and support for implementing it'.<sup>13</sup> UNFPA gives financial and public relations support for this programme.

## Peru

In 1995 Peru embarked on a massive sterilisation programme but reports of human rights abuses quickly arose.<sup>14</sup> USAID voiced concerns over coercive practices - promises of food for sterilised women and bonuses for health workers who brought women for sterilisation - and withdrew its family planning funding in Peru.<sup>15,16</sup> UNFPA neither publicly acknowledged coercive practice nor stopped funding. In June 2002 a Peruvian congressional commission noted that 90 percent of the 200,000 sterilised women had been pressured or tricked. 'UNFPA, known for its support of population control in developing countries, took charge. For that end, UNFPA acted as Technical Secretary.'<sup>17</sup>

## Abortion

UNFPA's policy is not to provide assistance for abortions or abortion services.<sup>18</sup> Yet it conducts abortion research and advises abortion providers on specific procedures.<sup>19</sup> Their refugee camp 'emergency reproduction health kits' have included emergency contraceptives, IUCDs and manual vacuum aspirators (MVAs) alongside useful obstetric equipment.<sup>20</sup> These three items used to be distributed in sub-

kits called 'pregnancy termination kits'.<sup>21</sup>

## Programme mismanagement

In 1999 the UN Board of Auditors uncovered evidence of programme mismanagement. UNFPA have purchased contraceptives without checking quality, delivery or supply.<sup>22</sup> In 2002 Tanzania rejected an \$800,000 shipment of ten million faulty condoms after they failed Tanzanian permeability tests.<sup>23</sup>

## Financial mismanagement

UNFPA couldn't account for 50 percent of money given to nations and non-governmental organisations in 1998-99.<sup>24</sup> This amounts to tens of millions of dollars that could have been used effectively. One audit criticised UNFPA's project formulation and 'poor project design [which] hampered the effective measurement of the impact of projects'; 75 percent 'failed to deliver all their planned outputs'.<sup>25</sup> UN financial regulations were frequently breached.<sup>26</sup> Now UNFPA claims to have 'greatly strengthened its internal audit capacity'.<sup>27</sup>

## Conclusion

When the USA withdrew its \$34 million funding, the EU pledged to replace the lost funds.<sup>28</sup> However, UNFPA's core resources last year fell from \$269 million to \$256 million; future fundraising is likely to be a major challenge.<sup>29</sup> The UK government has been challenged to reconsider its funding: letters to MPs and MEPs should keep this issue in mind. It would be an improvement if money were given for specific projects; better still, funding could be switched to alternative development programmes. The USA transferred its funding to USAID; they concluded that good economic policies reduce poverty better than family planning programmes.<sup>30</sup>

Christians know a Father who gently leads those with young and this should be reflected in healthcare planning. In view of UNFPA's failure to care for people as individuals or speak out for justice, a new international medical agency should be established to provide care for parents and their children, treating them with respect and dignity.

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