Health care reform isn’t just a hot topic of debate here in the United States. Since the United Nations (U.N.) adopted the sustainable development goals in 2015, universal health coverage (UHC) has been an overarching health priority globally. Governments around the world have been fast-tracking sweeping national health reforms designed to ensure that people have access to high-quality care while minimizing the out-of-pocket costs that can push them into poverty.

Establishing insurance programs is a large part of UHC efforts. But in the past, benefits packages often haven’t included sexual and reproductive health care. So how can we ensure that those who need family planning services, particularly women and girls, aren’t overlooked in these emerging reforms?

That’s where PAI’s global partners and other community health advocates are stepping in. These civil society organizations (CSOs) are essential to guaranteeing that UHC policies and insurance programs will increase access to high-quality, affordable sexual and reproductive health care for citizens.

Last fall, PAI launched a multiyear initiative focused on seven countries where UHC reforms are advancing quickly and CSO involvement is urgently needed. Through a three-pronged approach, PAI is working with our grantees to (1) analyze policy to identify opportunities for engaging with decision-makers, (2) develop and execute advocacy strategies and (3) convene peer-to-peer exchanges where advocates across multiple countries can learn from one another’s experiences with UHC reforms.

We know that when sexual and reproductive rights advocates don’t have input in their governments’ UHC plans, women and girls pay the price. In 2003, Ghana passed a landmark health insurance initiative but failed to include family planning. For the next 16 years, the cost of contraceptives and other reproductive health services remained a significant barrier to those who needed them most. The national government finally began addressing this in 2019 as part of Ghana’s UHC goals.

The current global commitments to UHC are providing an unprecedented window of opportunity for local advocates to ensure that the health needs of women and girls are front and center in their country’s reforms. Thanks to generous supporters like you, PAI can equip our grantees with the resources and support they need for this vital work.

*Turn the page to read how PAI partner CRHE is working with the Zambian government to include sexual and reproductive health care in the country’s ambitious UHC plans.*
2020 kicked off a decade of action on the sustainable development goals adopted by all 193 member states at the U.N. Reaching these goals by the 2030 deadline requires achieving UHC so that all people have access to quality, affordable care, including sexual and reproductive health services.

Ultimately, UHC plans will be designed, developed and delivered at the country level. Governments will have to tailor programs to fit their country’s needs and financial resources. It is the responsibility of the international community to support the development of UHC plans that further the right to health for all. This global support is especially important for women and girls, whose sexual and reproductive health care needs and rights are often disregarded and denied.

That’s why it’s alarming — although hardly surprising — that the Trump-Pence administration is intent on obstructing these efforts. In a statement on UHC at the U.N. last fall, U.S. officials objected to using the very term “sexual and reproductive health and rights” in U.N. documents, claiming this language is code for “pro-abortion” and “anti-family.” (It’s worth noting that co-signers of the letter included Bahrain, Russia and Saudi Arabia — nations not exactly known for stellar records on women’s rights.) Such disdain in the U.S. government’s own rhetoric isn’t new, but the attempt to compel the U.N. into dropping the term is yet another example of the administration’s escalating hostility to sexual and reproductive health and rights.

Through actions like this, Trump has abdicated the United States’ long-standing role as a global leader on human rights. No longer is the U.S. government using its power and means to significantly advance the health and rights of women and girls, but it has instead joined forces with those who consistently undermine sexual and reproductive health and rights in their countries.

PAI works with local advocates in Africa, Asia and Latin America and the Caribbean to advance policies that are in the best interest of their citizens. These champions are increasing support for sexual and reproductive rights and standing up to draconian positions from the U.S. government as well as other opposition groups. The Trump administration may be giving a megaphone to the opposition, but we’re making sure that our voices are even stronger. This is how we create sustainable, systemic change that will secure comprehensive sexual and reproductive health care for generations to come.

In partnership,

Elisha Dunn-Georgiou
Interim co-CEO
The Center for Reproductive Health and Education (CRHE) has been advocating for sexual and reproductive health and rights in Zambia for more than 15 years. So, in 2017 when the government announced its ambitious plan to reach full UHC by 2021, CRHE was there to make sure that the needs of women and girls didn’t get lost in the shuffle.

In 2018, the Zambian government passed a law to introduce a nationwide health insurance program as part of its UHC plans. Up until that point, the government had not proactively consulted CSOs, including sexual and reproductive health and rights advocates. Without these groups being directly involved in the discussions, women’s and girls’ health needs were at risk of being neglected or overlooked altogether, especially in the new benefits package.

Seeing an opportunity to influence Zambia’s UHC reforms and advocate for the inclusion of family planning, CRHE reached out to PAI, which mobilized quickly to support advocates and other stakeholders to convene. CRHE, together with PAI, designed and hosted a two-day advocacy workshop around the inclusion of family planning in UHC with a representative from the Ministry of Health. PAI provided guidance on the policy implications of the new insurance program on sexual and reproductive health and supported the coalition’s development of a robust advocacy agenda.

“The value of our partnership with PAI cannot be overstated,” says Amos Mwale, executive director of CRHE. “PAI recognizes that advocacy requires a long-term investment and its support of CRHE has helped us achieve many wins for women and girls over the years.”

Building on the momentum from the workshop, and with ongoing support from PAI, CRHE continues to lead the advocacy network in pursuing its agenda items and further collaboration with government decision-makers. And its efforts are paying off: The government recently announced that family planning services and commodities — including a full range of contraceptive options — would be included in the benefits package.

While this marks a significant win for advocates, their work is far from over. Once the policy is finalized and the insurance plan implementation begins, CRHE and other members of the network will shift focus to accountability, making sure the Zambian government follows through on its commitments to the health of women and girls.

The policies being developed now around Zambia’s UHC program will impact its citizens for many years to come. That’s why it’s important that CRHE and other local advocates are engaged in the development of these policies and that PAI can support them with the tools and resources they need to succeed.
Why are reproductive rights important to you?
I have spent my career as an environmental lawyer, so environmental causes are very important to me. I’m also a strong proponent of women’s empowerment and believe that reproductive choices are at the root of a woman’s ability to make decisions about her life.

I can probably trace the origins of both passions to my days as a Girl Scout. Scouting builds confidence in young women and also gives them an appreciation for nature. I guess that’s how I wound up being a feminist and an environmentalist!

Why is PAI’s work necessary?
At the heart of this work is the inherent right of every woman to make her own decisions about when and if to have children.

Going beyond that, reproductive choices are critical to women’s access to education, opportunities in the workforce and leadership roles in their communities. Women also have an essential role to play in environmental issues such as land and water resource allocation, and their active participation in making decisions about these systems is dependent on having control over the size of their families.

What stands out to you about PAI’s role in the reproductive rights ecosystem?
I give to other nonprofits working in this space domestically but wanted to support an organization doing it on a global level. It’s essential that grassroots organizations have the information and resources they need to advance their agenda and the technical and financial support PAI provides enables its global partners to work more effectively with their governments on expanding women’s access to care.

PAI has also been a strong voice of opposition to the Global Gag Rule, and I am impressed with its thorough job tracking its harmful impact around the world.

How did you become interested in PAI’s work?
I first learned of it from the late Vicki Sant, a longtime PAI supporter and former member of the board. I liked PAI’s approach of partnering with local advocates within a country to help expand services for the women there. It is similar to the capacity-building method used at the Environmental Law Institute, where I served as president for eight years and am currently a visiting scholar. I knew firsthand how effective this model could be and wanted to support an organization utilizing it to promote reproductive rights and access.