

Calling a Spade a Spoon: Are Non-American Donors Likely to Need the Same “Reshaping” of Terms for International Family Planning?



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Abstract

Dyer et al., in their article “International Family Planning: How Political and Religious Conservatives Respond and How to Shape Messaging for Successful Advocacy” (2016), have found that American religious and political conservatives respond favorably to the concepts underlying Family Planning, yet unfavorably to the term itself. We cite Canadian and Australian perspectives to argue that the Dyer finding that the term “Family Planning” is synonymous with abortion (or so nearly so to make it “unfundable” without a term change) is not a consideration in at least two countries, and may not be relevant outside the American context. Irrespective of

the language that may be necessary for fundraising among American donors to elicit support for international Family Planning initiatives, there exists a clear need to establish common understanding on reproductive health issues. Now more than ever, we must identify effective terminology and disseminate facts that support women and their families to achieve their reproductive goals, and thus contribute to improved health, education and economic prosperity throughout our global village.

Introduction

Dyer, Heuser and Franklin present a remarkable paper in this issue, exploring how to elicit support for Family Planning initiatives among political and religious conservatives in the USA (Dyer et al. 2016). It turns out that Americans self-identifying in these groups equate the broad term Family Planning with abortion, whereas they do not do so for the concepts underpinning Family Planning, i.e., the value to society, families and to women's and children's health when able to time and space pregnancies (Dyer et al. 2016). Their findings have implications for funding these important initiatives globally. Thus, it is crucial to understand:

Is the phenomenon equating “International Family Planning” services with provision of abortion specific to American social and political conservatives, or do similar conservative populations within other countries have the same sensitivities?

We present our perspective from within the Canadian and Australian contexts, and draw some parallels from international studies, to explore this question.

Reflections on use and implied meaning of family planning in Canada

Dyer et al. (2016) do not speculate on the etiology of the phenomenon they describe, i.e., why do American conservatives equate “International Family Planning” with abortion. However, one cannot but wonder

if the context is influenced by the name of one of the top and most widespread providers of abortion services in the US: “Planned Parenthood Federation of America” (PPFA 2017). Could the name of this well-known organization be similar enough to “Family Planning”, that the equation of the general term with the abortion service provider is complete among American conservatives?

In Canada, Planned Parenthood services have existed across the country for more than 50 years. Planned Parenthood's Family Planning services have been provided under a variety of names, including over most of this period “Planned Parenthood Federation of Canada,” and, more recently, “The Canadian Federation for Sexual Health” (PPO 2009; Mind Your Mind 2016). However, with distinction from the services provided in the USA, Canadian service branches offer variably “information-only” or “information, contraception and sexual health clinical services.” No Canadian Planned Parenthood groups have directly provided abortion services. There are many reasons for this difference from the sister organization south of the border. The most important may be that provision of abortion service in Canada is part of normal reproductive healthcare. Abortion service is provided largely by, and, in many regions, exclusively by, government-funded health services (Lesson 2004). In fact, the national law governing the provision of healthcare in Canada, the *Canada Health Act*, specifies that all provincial government health services must provide accessible abortion service (Justice Canada 1985).

So, with this distinction, do Canadian political and religious conservatives equate the term “International Family Planning” with abortion services? There are no Canadian studies mirroring the Dyer et al.’s techniques. However, the most recent prior Canadian Government, in office from 2006 to 2015, was politically conservative. In Canada, no political party has eroded or withdrawn domestic abortion service. Nonetheless, conservative governments tend not to promote or extend existing abortion services, and in one instance, refused to include abortion as part of a new international initiative. In 2010, Canada hosted a G8 summit on International Maternal and Child Health (Mackrael 2014). Although the government articulated the importance of international Family Planning to maternal and child health, and ardently defended including “Family Planning” as a core part of their priority international initiative of 2010, they did not include support for abortion services in this program.

“Prime Minister Stephen Harper says family planning is an essential part of Canada’s efforts to improve maternal and child health, but abortion remains too divisive to be included in that package ... Mr. Harper said there is a ‘myth’ that Canada doesn’t fund any family planning or reproductive health services in developing countries. ‘That’s not true. We do. We, specifically as a consequence of a vote in Parliament, do not fund [International] abortion services but we fund other forms,’ he said” (Mackrael 2014).

Thus, Canada has political conservatives who, like their American counterparts, are not abortion advocates. Yet, Canada’s political conservatives consider “International Family Planning” supportable and do not appear to assume this necessarily includes abortion services.

The majority of Canadians have consistently supported the provision of abortion services. Most polls are similar to a 2016 national survey reporting 86% of Canadians as supportive of a woman’s right to access abortion services (57% for any reason, and the others for specific reasons such as in cases of rape or danger to a woman’s health), with only 3% supporting a position that abortion should never be allowed under any circumstance (Russell 2016). In contrast, nearly one in five Americans typically supports the position that abortion should never be allowed, with a majority reporting that abortion is morally wrong compared with those who deem it morally acceptable (Gallup Inc 2016).

Thus, in partial answer to our question, it appears that similar conservative populations within Canada may not have the same assumptions found by Dyer et al. (2016) to be prevalent in parts of the USA.

Reflections on use and implied meaning of family planning in Australia

Similarly to Canada, up until very recently, government-funded Family Planning services in Australia have not offered abortion services but have focused solely on contraceptive service provision and other sexual health services. Abortions in Australia are largely provided privately with only a small availability of publicly funded abortion services. Despite this and a confusing array of legal arrangements for the provision of abortion across Australia’s states and territories (de Costa et al. 2015), Australians generally hold positive views towards abortion, with 87% supporting lawful termination in the first trimester, 69% in the second trimester and 48% for the third (de Crespigny et al. 2013). These views are reflected in official government policy, which, in 2009, saw the overturning of a 13-year ban on international aid for Family Planning services, which had been put in place by political religious conservatives (Karvelas 2009).

The Guiding Principles issued by the Australian Department of Foreign Affairs and Trade regarding Family Planning and The Australian Aid Program do not reflect any of the dilemmas highlighted by Dyer et al. Indeed, the guidelines explicitly state that the Australian Government aid should be:

“providing the same range of family planning services for women in developing countries as are supported for women in Australia, subject to the national laws of the relevant nation concerned” and that “family planning and reproductive health services in Australia include safe and professional abortion services (both medical and surgical)” (Department of Foreign Affairs and Trade 2009).

The language used in the official government documents reflects a “reproductive rights based approach” differing substantially from the approach that Dyer et al. (2016) recommend, which is faith-based, referring to religious beliefs and separating out contraception and abortion. Dyer et al.’s definition of international Family Planning as “enabling women and couples in developing nations to determine the timing and spacing of pregnancies in a manner that includes voluntary methods of preventing pregnancy – not including abortion – that are harmonious with their religious beliefs and values” clearly does not appear relevant to the current Australian context where the government aid goals are to “actively work towards improving the quality of care in Family Planning and reproductive health programs by (but not limited to): ... involving communities in planning programs appropriate to their needs; increasing the choice of Family Planning methods available; improving the skills and competence of Family Planning service providers; providing accurate information and confidential counselling for clients;

providing follow-up advice and services to clients; ensuring affordable, acceptable and accessible services; and making the prevention of unwanted pregnancies the highest priority, with every attempt being made to minimize the need for abortion”

(Department of Foreign Affairs and Trade 2009).

Reflections on use and implied meaning of family planning in the international context

It is worth reflecting on the findings of one study that sought to undertake a comparative analysis of the knowledge and attitudes of women towards contraception and abortion in the US, Canada, France and Australia (Wiebe 2015). The researchers found that women who favored restrictions to abortion access, in all five countries, were more likely to incorrectly overestimate the risks of both abortion and contraception and to provide incorrect answers to all the knowledge questions about abortion and contraception ($p < 0.001$). Better education about the relative risks of abortion and contraception *vis-à-vis* a continuing pregnancy may therefore be a necessary step to changing women’s views and increasing positivity towards “International Family Planning.”

Thus, we have shown for Canada and Australia, and perhaps for many other countries, that the term “Family Planning” is considered appropriate to indicate services with and without abortion provision. Family Planning has garnered support among both conservative and liberal factions as the ruling political parties change over time in Canada and in Australia.

Whether terms such as “International Family Planning” will evoke negative reactions among non-American political and religious conservatives who in fact can align with the principles and aims, or not, Dyer et al. have underscored the need to take time to assess the terms we use, and to establish a common understanding for their meaning.

The need to understand the benefits internationally for women and society through access to the full spectrum of reproductive healthcare services may never be more important than now. Our global society faces increasing threats to basic women's health rights, highlighted recently by the Zika virus epidemic and anti-abortion political ascendancy in key settings. Now more than ever we will need appropriate common language, which could perhaps be augmented by dissemination of reproductive health facts. Armed with the common ground established through education and common language, alliances will be better able to assure funding for initiatives supporting women internationally to achieve their reproductive goals, and thus, contribute to improved health, education and prosperity throughout our global village.

References

- De Costa, C., H. Douglas, J. Hamblin, P. Ramsay and M. Shircore. 2015. "Abortion Law Across Australia-A Review of Nine Jurisdictions." *Australian and New Zealand Journal of Obstetrics and Gynaecology* 55(2): 105–11.
- de Crespigny, L.J., J.D. Wilkinson, T. Douglas, M. Textor and J. Savulescu. "Australian Attitudes to Early and Late Abortion." *Medical Journal of Australia* 193(1): 9–12.
- Department of Foreign Affairs and Trade 2009. *Family Planning and the Aid Program: Guiding Principles*. Canberra, AU: Government of Australia. Retrieved December 6, 2016. <<http://dfat.gov.au/about-us/publications/Documents/fam-plan-principles.pdf>>.
- Dyer, J.E., B.L. Heuser and S. Franklin. 2016. "International Family Planning: How Political and Religious Conservatives Respond and How to Shape Messaging for Successful Advocacy." *World Health & Population* 17(1): 5–15. doi:10.12927/whp.2016.25042.
- Gallup Inc. 2016. *Gallup Poll Abortion trends 1975–2016. Poll results 2016 May 2*. Retrieved December 8, 2016. <www.gallup.com/poll/1576/abortion.aspx>
- Justice Canada. 1985. *Canada Health Act*. R.S.C. 1985, c. C-6 Government of Canada. Retrieved December 8, 2016. <<http://laws-lois.justice.gc.ca/eng/acts/c-6/fulltext.html>>
- Karvelas, P. 2009. "Foreign Aid Ban on Abortion Scrapped." *The Weekend Australian*, March 11. Retrieved December 6, 2016. <www.theaustralian.com.au/news/nation/foreign-aid-ban-on-abortion-scrapped/news-story/551dbcd8a2287b3f17fca9d9d85a0d76>.
- Lesson, H. 2004. "Constitutional Jurisdiction Over Health and Health Care Services in Canada." In T. McIntosh, P.-G. Forest and G.P. Marchildon, eds., *The Governance of Health Care in Canada: The Romanow Papers* (pp. 50–82). Vol. 3. Toronto, ON: University of Toronto Press.
- Mackrael, K. 2014. "Harper Excludes Abortion from Maternal Health Plan." *The Globe and Mail*, May 29. Retrieved December 8, 2016. <www.theglobeandmail.com/news/politics/harper-urges-united-nations-to-keep-aim-on-improving-maternal-child-health/article18917048/>.
- Mind Your Mind. 2016. *The Canadian Federation for Sexual Health. Mind Your Mind*. Retrieved December 8, 2016. <<https://mindyourmind.ca/help/weblinks/canadian-federation-sexual-health>>.
- Planned Parenthood Federation of America (PPFA). 2017. *About Us: Who we are*. Washington, DC: Author. Retrieved February 9, 2017. <<https://www.plannedparenthood.org/about-us/who-we-are>>.
- Planned Parenthood of Ottawa (PPO). 2009. *Planned Parenthood of Ottawa History*. Ottawa, ON: Author. Retrieved December 8, 2016. <www.ppottawa.ca/aboutus.aspx>.
- Russell, A. 2016. "Six in Ten Canadians Support Abortion Under Any Circumstance: Ipsos Poll." *Global TV News*, February 23. Retrieved December 8, 2016. <<http://globalnews.ca/news/2535846/6-in-10-canadians-support-abortion-under-any-circumstances-ipsos-poll/>>.
- Wiebe, E.R., L. Littman and J. Kaczorowski. 2015. "Knowledge and Attitudes about Contraception and Abortion in Canada, US, UK, France and Australia." *Gynecol Obstet (Sunnyvale)* 5: 322. doi:10.4172/2161-0932.1000322.

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