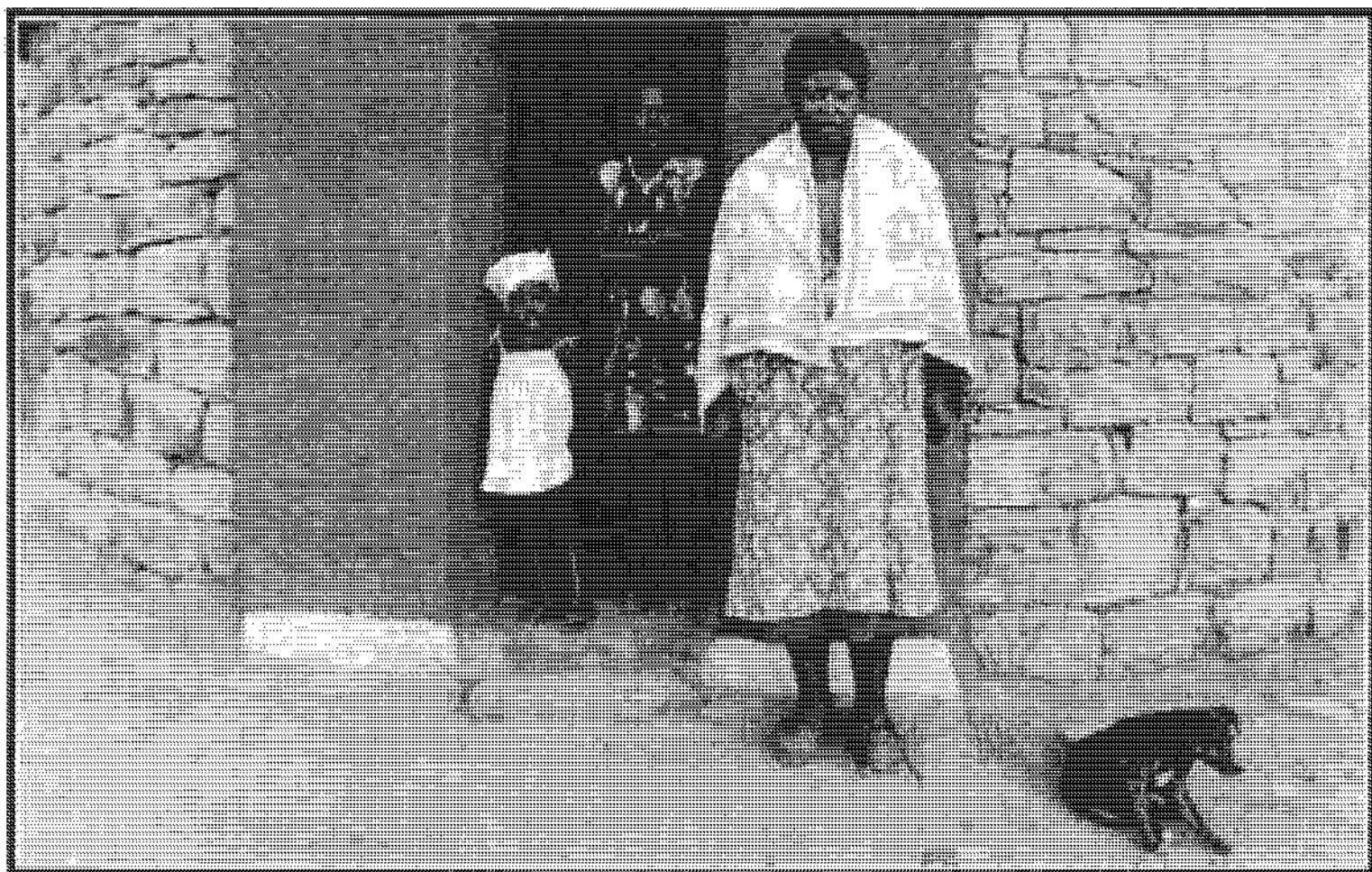


Family planning as a human right in South Africa

by Beverley Oskowitz and Stephanie Moore

The authors of this article argue that future family planning needs to be distanced from the old policy which is negatively associated with population control. Family planning policy in the future has to be linked to programmes of comprehensive health and development strategies for communities. Moreover, the authors assert that family planning should be regarded as a human right which recognizes the need for women to control their reproductive capacity and health.



Family planning and health

Family planning is often considered an extremely sensitive topic throughout the world, South Africa being no exception. However, family planning programmes and services have contributed to what Dr. Halfdan Mahler, former Director-General of the World Health Organisation, termed "striking improvements in the health of mothers, children and indeed whole families." (1) This has been documented by research worldwide.

With regard to its emphasis on child spacing, family planning is accepted as an essential component of primary health care. The United Nations sponsored World Summit for Children Conference, held in September 1990, featured family planning programmes and services as key elements in its primary health care, and international community development strategies.

While initially these programmes were funded by the United States and other Western governments, at a later stage, developing country governments and international development organizations also began to contribute.

Suspicion of family planning

Past public suspicion of family planning, whether for cultural, religious, or political reasons, has often served to negate the positive role that family planning can play in enhancing community development. For the most part, this suspicion relates to the association of family planning with population "control", a reflection of the orientation of many early large scale family planning programmes.

In the 1960's and 1970's in particular, policies placed a heavy emphasis on the control of population growth rates, especially in the developing regions of sub-Saharan Africa, Latin America and Southeast Asia. Although many of these early programmes promoted the health and welfare of citizens, a primary consideration remained the slowing of high fertility levels.

Experience gathered from these initial family planning operations has demonstrated the fact that programmes which concentrate on the "population problem", and address the issue through the mass distribution of modern contraceptives, are inappropriate. The human factors - cultural, religious, economic and socio-political - are too often ignored in the process.

The demand for children

What are some of these factors which need to be taken into consideration? In traditional societies in sub-Saharan Africa, the demand for children has developed from the

interaction of cultural, economic and other factors which have been important in ensuring the survival of rural societies. Children in these communities have long served in important supportive capacities as:

- * a vital source of labour in assisting with both food production and household chores;
- * a "store of value" for parents for the provision of additional income during a child's productive years. It is hoped that income can be secured through employment in an urban area;
- * a source of economic and social security for parents in old age; and
- * a source of status in those societies where women "attain" status and recognition through the production of children.

Family planning policy must take account of these factors as well as the fact that most women have little control over their own fertility. Male opposition to the practice of family planning is well documented. This opposition is largely based upon fears that family planning will threaten male authority within the household, encourage marital infidelity, and conflict with accepted religious dogma.

Human sexuality and human reproduction are highly intimate areas of human existence and involve extremely sensitive aspects of human relations. Any programmes, which are designed to alter existing social practices, must be planned and implemented with the utmost regard for both personal and social welfare. Concern for the health of individuals and couples, particularly women, and the quality of patient education and clinical care are all important as the potential for human rights abuse is high.

Right to reproductive self determination

The fundamental human right to reproductive self determination, the right of an individual to freely decide on the size of one's family, and the benefits of access to information, education and the means with which to exercise this right was first internationally recognized at the International Conference on Human Rights in Teheran in May 1968. (2) The right to reproductive self determination was acknowledged later that year by the member states of the United Nations.

Fertility based population policies and related family planning programmes, on both national and international levels, must take full cognizance of such rights. Such action is essential if all individuals are to enjoy access to quality family planning and reproductive health care services and to make informed decisions regarding their reproductive health and well being.

Given this country's political history, family planning in South Africa faces unique difficulties if it is to be accepted and utilized. Those who view family planning as a population control measure need to be challenged. A new orientation for family planning, based upon identifiable human needs, and rights, is clearly needed.

Fostering public awareness

Public health policy makers, government officials, health care professionals and community workers must commit themselves to the development of programmes which will foster public awareness and understanding of the benefits of family planning. Such an orientation must be incorporated into comprehensive health and development strategies and programmes.

Population control cannot continue to be considered as the primary factor on which to base future family planning policies. What is required is a commitment to recognizing the human rights which underlie human sexuality and reproductive health issues.



The right to control one's fertility and to do so in a safe and accessible way should be the emphasis of family planning



Family planning should enable individuals and couples to choose the number and spacing of their children.

Future strategies

Future strategies which could be undertaken to promote such a commitment include the provision, throughout South Africa, of:

- high quality and comprehensive family planning programmes and services which will enable individuals and couples to regulate their fertility safely and effectively;
- complementary reproductive health care services which include counseling, guidance and referral services for areas relating to human sexuality, infertility, and sexually transmitted infections and diseases;
- comprehensive antenatal, child delivery and postnatal care services to promote healthy pregnancies, safe births and healthy children;
- school and community based family life information and education programmes for adolescents and young people;

- public policy and health professional support for the practice of beneficial traditional beliefs and customs which enhance the health of women and children; and
- information, education and support services for redressing related individual and family societal problems of sexual violence and abuse.

Public trust and support

A commitment, from professional bodies and policy makers, to human rights based family planning programmes, would assist in engendering public trust and support of family planning. This would also encourage communities to participate in programmes and activities. This is crucial as community preventive education is going to be urgently required to slow HIV transmission.

Human rights based family planning

It is essential that public policy makers commit themselves to human rights based family planning if we are to ensure future individual and family health for all citizens of South Africa. Such an approach will be fundamental if individuals and couples are to be empowered to:

- choose freely and responsibly the number and spacing of their children and to have access to the information, education and means with which to make these choices;
- advocate for the universal access to quality and comprehensive reproductive health education and clinical services from appropriate public and private health service providers; and
- comprehend more fully the importance family planning and related reproductive health programmes play in improving the health of themselves, their partners, children and families.

References:

- (1) Mahler, Dr. H., Director-General of the World Health Organisation; Address at the World Conference on Population, Mexico City, August 1984.
- (2) United Nations, The Symposium on Law and Population: Proceedings, Background Papers and Recommendations, Tunis, 21-24 June 1974, (New York: United Nations Fund for Population Activities), 1975, pg. 5.

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