ALL PARTY PARLIAMENTARY GROUP ON POPULATION, DEVELOPMENT AND REPRODUCTIVE HEALTH

ANNUAL REVIEW OF ACTIVITIES
2010/2011
# All Party Parliamentary Group on Population, Development and Reproductive Health

## Annual Review 2010/2011

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FOREWORD

As the new chair of the UK All-Party Parliamentary Group on Population, Development and Reproductive Health (the Group) and vice-president of the European Parliamentary Forum on Population and Development, I am pleased to report that the Group has had an active and successful 2010 - 2011, with increased UK political and financial support to family planning and maternal health.

Soon after the General Election in May 2010, the Group re-constituted itself and a meeting was set up with Andrew Mitchell MP, the new Secretary of State for International Development and his team to discuss his vision and ambition for family planning and sexual and reproductive health and rights.

The Coalition has promised to spend 0.7% of Gross National Income on Official Development Assistance from 2013, and to enshrine this commitment in law with an additional average £740 million to be spent on maternal, newborn and child health from 2010 to 2015.

In December 2010 the Department for International Development (DFID) published its new framework for result for improving reproductive, maternal and newborn health and a policy position paper on safe and unsafe abortion. Promises were by 2015 to: save 50,000 pregnancy women's lives; save 250,000 newborn babies; enable at least 10 million more women to use modern family planning – contributing to a wider global goal of 100 million users; prevent 5 million unintended pregnancies; and support at least 2 million safe deliveries.

The 2011 bilateral and multilateral aid reviews were also welcome. UNFPA received a satisfactory score and maternal, reproductive health and family planning were listed as top priorities in nearly all bilateral recipient countries.

In the lead up to the G8/G20 and Millennium Development Goal Review Summits in 2010, members called on the UK Government, through parliamentary questions and debates, for family planning and reproductive health services to be made available and affordable to all. DFID played an active role in negotiating the outcome documents, which stressed the need to focus on maternal health.

The Group has recruited 15 new parliamentarians this year from all parties via letter writing, meetings, receptions, conferences, articles in political magazines and study tours.

We will continue to recruit new members this year and hold our Government to account for its promises through parliamentary questions, debates, meetings, articles, conferences and study tours in the lead up to the Rio+20 conference in 2012.

Baroness Jenny Tonge
Chair APPG on PD&RH
COMMITTEE MEMBERS AND STAFF
The All Party Parliamentary Group on Population, Development and Reproductive Health’s (the Group or APPG on PD&RH) committee is active in planning and running the Group's business.

Chair
Baroness Jenny Tonge (LD)

Vice Chairmen
Geoffrey Clifton-Brown MP (C) Richard Ottaway MP (C)

Secretary
Baroness Flather (XB) Jenny Willott MP (LD)

Treasurer
Lyn Brown MP (L)
Officers
Baroness Gould (L)    Lord Rea (L)
Baroness Massey (L)   Baroness Thomas (LD)

Parliamentary and Policy Advisor
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NEW GROUP MEMBERS APRIL 2010 - MARCH 2011

Soon after the UK General Election (GE) on 6th May 2010 the Group re-constituted itself and various events, receptions and study tours were organised to engage new MPs in family planning and sexual and reproductive health and rights (SRHR) and international development.

Introductory letters to the Group were drafted and disseminated to new MPs with the 2010 world population day reception invitations and individual briefing meetings were set up with targeted MPs (enrolment activities can be found under the headings: APPG on PD&RH Parliamentary Briefing meetings and study tours).

A long standing supporter, member and former Chair of the Group, Geoffrey Clifton-Brown MP became an active committee member this year.

Please find enclosed introductory letters sent as appendix 1

New Group Members

Jon Ashworth MP (L) Elected in 2011 as MP for Leicester South, Jon Ashworth is currently an opposition whip. Previous to his election to Parliament, Jon Ashworth worked in the Treasury and 10 Downing Street for Gordon Brown. He most recently worked for Ed Miliband.

Bob Blackman MP (C) Elected in 2010 as MP for Harrow East, Bob Blackman previously worked in a variety of roles for British Telecom. He was a member of the Greater London Assembly from 2004-08 and has been a Brent councillor for twenty years. He is currently a member of the Communities and Local Government Select Committee.

Peter Bottomley MP (C) Elected in a 1975 by-election, Peter Bottomley is currently MP for Worthing West, having previously represented West Woolwich and Greenwich and Eltham until 1997. He has been described as “an engagingly eccentric veteran left-leaning Tory” and worked as an industrial economist before entering Parliament.

Steve Brine MP (C) Newly elected as MP for Winchester in 2010, Steve Brine takes a particular interest in the National Health Service, media, planning and development. He is a former radio journalist having spent time with the BBC where he was one of the organisation’s youngest reporters and producers, at the age of 18.

Annette Brooke MP (LD) Elected in 2001 for Mid-Dorset and Poole, Annette Brooke has held a variety of spokesperson posts, including home affairs, education and children. She chairs a number of APPGs, including one on microfinance. Prior to entering Parliament she was a teacher and college lecturer and a Poole councillor.

Harriet Harman MP (L) Harriet Harman was elected as MP for Peckham in 1982 and is now MP for Camberwell and Peckham (revised boundary) since May 2010 General Elections. She has a political interest in women, social services, domestic violence and has held
numerous Ministerial positions over the years including Minister for Women and Equality 2007 – 2010 and was the acting leader of the opposition/Shadow Secretary of State for International Development 2010 – 2011 and is currently Chair, of the Labour Party and Shadow Secretary of State for Culture, Media and Sport.

Diana Johnson MP (L)  Diana Johnson was elected as MP for Hull North in May 2005 and retained her seat at the 2010 General Election. Prior to entering Parliament, Diana Johnson was a barrister and specialised in welfare and employment law. She was also a National Officer for a civil service trade union and a councillor from 1994 until she became a Greater London Assembly member in 2003. In Parliament she became Parliamentary Under Secretary of State for Schools at the Department for Children, School and Families before joining the Shadow Health team after the 2010 election. She is currently on the Shadow Home Office team. Her key interests include employment, health and women’s empowerment.

Pauline Latham MP (C)  Elected in 2010 as MP for Mid Derbyshire, Pauline Latham was one to refer to international development in her maiden speech and lists it as a key interest. She has been a Derbyshire councillor since 1987 as well as a school governor for over 12 years. She has led two Social Action Projects to Uganda involving students from two schools who spent many months fund raising to help schools in a rural part of Uganda to build new classrooms, and took out hand sewing machines for an aids project. She is currently a member of the International Development Select Committee.

Alison McGovern MP (L)  Elected in 2010 as MP for Wirral South, Alison McGovern was previously a parliamentary researcher, before working for Network Rail, The Art Fund and Creativity, Culture and Education. She was also a Southwark Councillor from 2006-2010.

David Morris MP (C)  Elected in 2010 as MP for Morecambe and Lunesdale, David Morris was previously a hairdresser, guitarist, music producer and property investor. He is currently a member of the Science and Technology Select Committee.

Dr Daniel Poulter MP (C)  Elected in 2010 as MP for Central Suffolk and North Ipswich, Dr Daniel Poulter was previously an obstetrician and gynaecologist. He is currently a member of the Health Select Committee and Chair of the All Party Parliamentary Group on Maternity. He has a special interest in health and the voluntary sector.

Virendra Sharma MP (L)  Elected in a by-election in July 2007 for Ealing Southall, Virendra Sharma briefly served as Parliamentary Private Secretary to Immigration Minister Phil Woolas, before resigning in opposition to a third runway at Heathrow. A local councillor for 25 years, he is a Hindu from India and worked as a day services manager for people with learning disabilities for
neighbouring Hillingdon council. In Parliament he has served on the Joint-Committee on Human Rights, the Justice Select Committee and the International Development Select Committee.

Heather Wheeler MP (C)  Elected in 2010 as MP for South Derbyshire, Heather Wheeler is a qualified Associate of the Charted Insurance Institute and worked for Lloyds Insurance Brokers for 10. She was a local councillor since the age of 22 and has been at the forefront of schemes to limit anti-social behaviour, especially amongst young people and instrumental in the opening of a Domestic Abuse Refuge for the East Midlands in South Derbyshire.

John Woodcock MP (L)  John Woodcock was elected as MP for Barrow-in-Furness in the 2010 General Election and was appointed to the Shadow Transport team in September 2010. He was previously a journalist on the Scotsman and a civil servant working on safeguarding vulnerable people in the Home Office, before becoming a special advisor to John Hutton MP and then the former Prime Minister, Gordon Brown MP. He has expressed a keen interest in sexual and reproductive health and rights and maternal health issues.

Lord Roper (non-affiliated) Lord Roper was a Labour MP from 1970 for Farnworth who then defected to the Social Democratic Party in 1981. He was raised to the peerage in 2000. Currently non-affiliated as he is a Deputy Speaker, he was a Lib Dem Whip from 2001-05. He was also an original member of the APPG upon its formation in 1979. He attended the World Population Day reception in 2010 saying “it’s good to be back”!

Baroness Verma (C)  Raised to the peerage in 2006, Baroness Verma was until recently the Government Spokesperson on International Development in the House of Lords and so cannot formally join the Group. However, she pledged her support to the Group’s aims at the 2010 World Population Day event and has attended a number of Group briefing meetings. Prior to entering the Lords, Baroness Verma was a businesswoman. She also stood for Parliament in the 2001 and 2005 General Elections, but was unsuccessful.
APPG PD&RH AIM AND OBJECTIVES

Aim
Ensure the full implementation of the International Conference on Population and Development (ICPD) Programme of Action (PoA) with specific reference to stabilising the world’s population through choice and ensuring sustainable development

Objectives
Raise the profile of population, and sexual and reproductive health and rights including family planning in Parliament and internationally;

Provide parliamentary backing to the Secretary of State for International Development (SS for ID) in his negotiations with the Treasury with a view to increasing the United Kingdom Official Development Assistance (ODA) to 0.7% of Gross National Income (GNI) – 10% to the ICPD PoA;

Keep under review population trends and sexual and reproductive health and rights programmes/policies/legislation nationally and internationally;

In consultation with Government departments, international agencies and Non Governmental Organisations (NGOs), assess how this country might respond to requests from outside for support and to press for action by Parliament and the Government;

Study the results of research into the causes and consequences of population changes and the effect that access to comprehensive sexual and reproductive health services has on population and draw these to the attention of both Houses of Parliament;

Increase awareness of the interdependence between countries, with reference to poverty reduction, women’s equality, access to sexual and reproductive health and rights services, environment, consumption and pollution and the impact of legislation, policies and practices of one country upon others.
PARLIAMENTARY ACTIVITIES

APPG on PD&RH Committee Meetings
The Group held 5 committee meetings between April 2010 and March 2011.

29th June 2010 (AGM)
12th October 2010
7th December 2010
1st February 2011
29th March 2011

Please find enclosed agendas and committee meeting minutes as appendix 2

APPG on PD&RH Parliamentary Briefing Meetings
12 Parliamentary meetings/receptions were co-organised by the Group this year, where members were briefed on topical population, family planning, reproductive and maternal health and international development issues in support of parliamentary advocacy.

MSI China delegation dinner, 18th May 2010, House of Lords (HoL), London
Marie Stopes International (MSI) hosted the Chinese Minister for Health on 18th and 19th May, who had expressed an encouraging interest in coming to the UK to observe more client focussed reproductive health services. The Group in collaboration with MSI hosted the Chinese family planning delegation to a luncheon in the HoL to discuss Group activities followed by a guided tour around Parliament by Viscount Craigavon.

Invited guests were:
Mme. Li Bin, Minister, National Population and Family Planning Commission (NPFPC)
Mr Chen Li, Director-General, General Office, NPFPC
Dr Ru Xiaomei, Counsel, Department of International Cooperation, NPFPC
Mr Fu Wei, Director, Science and Technology Research Institute of NPFPC
Ms Chen Bingshu, Deputy Division Director, Department of International Cooperation, NPFPC
Dana Hovig, Chief Executive, MSI
Louise Lee Jones, Programme Manager, MSI
Peter Smitham, MSI
Baroness Jenny Tonge and Viscount Craigavon, APPG on PD&RH

Richard Manning presented an overview of the Global Fund on AIDS, TB and Malaria (the Global Fund) and replenishments. A wide ranging question and answer session followed, touching on the remit of the Global Fund, financing and projects supported.

Richard Manning said at the meeting that the expansion of the Global Fund’s remit to include maternal health was under discussion however no decision had been made as yet.

Baroness Jenny Tonge and Lyn Brown MP attended the meeting. After the meeting discussions were held with Annette Brooke MP on the possible expansion of the Global Fund to include maternal health and family planning. Annette Brooke MP soon joined the APPG on PD&RH.

Prior to the meeting all members received a briefing on the Global Fund with reference to the possibility of it expanding its remit to include maternal health.

Please find enclosed invitation with briefing sent and Richard Manning’s presentation as appendix 3
World Population Day reception, 12th July 2010, HoL, London
The Group, as usual, co-hosted the World Population Day reception with the International Planned Parenthood Federation (IPPF) and its SRHR co-sponsors. The theme of this year’s World Population Day was “Everyone Counts” – focusing on how data drives good decision making in the year which saw the 2010 round of population and housing census.

Baroness Jenny Tonge introduced guests to the Group’s new committee and activities and Stephen O’Brien MP the new Parliamentary Under-Secretary of State for International Development (PUSS for ID) was the keynote speaker at the annual reception. He outlined the Government’s support for family planning and maternal health.

An Early Day Motion (EDM) was tabled by Paul Flynn MP in connection with the World Population Day to raise awareness in Parliament of this special day.

**EDM 443 - WORLD POPULATION DAY**

*Flynn, Paul*

That this House calls attention to World Population Day on 11 July 2010; commends the United Nations Population Fund for designating this date in 1989 to focus attention on the importance of world population and sexual and reproductive health and rights; notes with concern that between 343,000-500,000 women still die every year during pregnancy and childbirth and an estimated 32 per cent. of maternal deaths can be averted through family planning alone; and calls on the Government to increase population assistance to 10 per cent. of official development assistance, with particular attention to family planning, which has seen its relative share shrink from 55 per cent to only five per cent of global population assistance since 2000.

Please find enclosed event invitation and speeches as appendix 4

Joint APPGs on International Development ‘fresher’s event’ with Bill Gates, 20th July 2010, House of Commons (HoC), London
Prior to the General Election, over twenty UK All Party Parliamentary Groups (APPGs) covering international development issues met to discuss and plan collaborative events to engage especially new MPs in international development. These meetings culminated in a ‘fresher’s event’ with Bill Gates as the keynote speaker on 20th July 2010.

Other speakers included:
Aaron Oxley, Executive Director of RESULTS-UK
Alan Duncan MP, the new Minister of State for International Development
Douglas Alexander MP, the then Shadow Secretary of State for International Development
Harriet Lamb, Executive Director of the Fairtrade Foundation
Malcolm Bruce MP, the Chair of the International Development Select Committee.

Over 100 parliamentarians attended the recruitment event. A booklet was circulated to all attending MPs and Peers with a one page summary of each APPG involved in international development issues.

Please find enclosed invitation to event with booklet as appendix 5


Please find enclosed list of MPs who RSVP’d to the event as appendix 6
Meetings for secretariats of the APPGs on international development issues continue and further collaborative events are planned for 2011 to sensitise new MPs to the role of APPGs.

Members were briefed by Ms Jemilah Mahmood, Chief of Humanitarian Response Branch, UNFPA, ahead of the UNFPA State of the World Population (SWOP) report. The round table meeting touched on family planning, SRHR and humanitarian responses. Christian Delsol, media specialist, UNFPA and Leslie Thomas, creative director, Arts work project (women in the Congo) were also present.

A question and answer session followed the presentation with a lively discussion.

*Please find enclosed invitation and communications as appendix 7*

**Yemen and SRHR briefing, 4th November 2010, HoC, London**
The Group in collaboration with MSI hosted a dinner for Dr Jamela Saleh Alraiby, Deputy Health Minister, Yemen to discuss Group activities and women’s empowerment in Yemen. Yemen is the only low-income country in the Middle East with high unemployment, rapid population growth, water scarcity, declining oil revenues, conflict at a local level and regional instability.

The dinner helped inform Baroness Jenny Tonge in her HoL debate on the Strategic Defence and Security Review.

**Euromapping 2009 report launch, 10th November 2010, HoC, London**
Euromapping 2009 was launched in the UK Parliament on 10th November with Peter Colenso, Director Human Development, DFID as the key note speaker. Neil Datta, Secretariat, European Parliamentary Forum on Population and Development (EPF) and Karen Hoehn, Advocacy Manager, German Foundation for World Population (DSW) jointly presented EuroMapping.

EuroMapping is a joint study by EPF and DSW that scrutinises European Union (EU) countries' ODA for population assistance and reproductive health, both in terms of their pledged commitments and actual disbursements. It “names and shames” good and bad performers, and includes specific recommendations on how to improve reproductive health and reduce poverty.

Question and answers followed presentations.

*Please find enclosed invitation, front page and contents pages of Euromapping 2009 with press release, RSVP list and briefing as appendix 9*
EU ODA policies and 2011 Commission on Population and Development briefing meeting, 7th December 2010, HoC, London

A briefing meeting on the new EU ODA policies and the forthcoming Commission on Population and Development 2011 was organised with Dr Gill Greer, Director General, IPPF.

Discussions followed on: what will happen in 2014 when the ICPD PoA expires? and collaborative activities between the Group and other European APPGs on Population and Development.

Please find enclosed invitation and minutes of meeting as appendix 10

Emergency contraception and misopostal meeting, 13th December 2010, HoL, London

Martha Campbell, University of California, Berkeley and President, Venture Strategies for Health and Development, Berkeley met with Baroness Jenny Tonge and advisor to discuss latest research findings on medical abortions and emergency contraception with a view to organising a Group briefing meeting on the topics.

A meeting was subsequently organised on 22nd March 2011 with the UK APPG Pro-choice and sexual health.


The Group co-organised the ‘Mum’s Café’ stall in the Portcullis House Atrium again this year with the White Ribbon Alliance (WRA), raising awareness of International Women’s Day (IWD) and global maternal health.

The Café provided an opportunity for MPs to drop-in for a ‘cuppa’, talk with staff about the WRA and Group activities to save women’s lives and have a photograph taken with The Mum newspaper and the Group’s 2009 Maternal Morbidity Hearing Report: Better Off Dead?

The following MPs dropped-in for a chat and photo opportunity:
Greg Hands MP, Chelsea and Fulham
Fiona Mactaggart MP, Slough
Geriint Davies MP, Swansea West
Damian Hinds MP, East Hampshire
Linda Riordan MP, Halifax
Chi Onwurah MP, Newcastle-Upon-Tyne Central
Baroness Jenny Tonge
Lord Rea

David Miliband MP, South Shields also stopped by for a copy of the Mum, as did Barry Sheerman MP, Huddersfield.

All visiting MPs were sent a draft press release with their photo and some members requested follow up information on specific maternal health issues, which were also sent.

Please find enclosed press release sent with photos as appendix 11
Joint Group and Pro-choice and Sexual Health APPG briefing meeting on contraception provision in the UK and abroad, 22nd March 2011, HoL, London
Mr Ali Kubba, Consultant Gynaecologist, Guy’s and St Thomas’ Hospital Trust and Martha Campbell, University of California, Berkeley briefed members on contraception provision in the UK and abroad.

A lively discussion with a question and answers session followed.

Please find enclosed invitation and presentations as appendix 12

Non APPG on PD&RH Briefing Meetings
Group members and staff attended 16 external FP/SRHR briefing meetings this year.

Optimum Population Trust (OPT) briefing meeting, 10th June 2010, London
Members attended a debate organised by OPT (now Population Matters) with the theme: Rising population is one of the most important issues facing our planet. The GENE MEME debate asks: What should be done about it?

Speakers included:
Prof. Aubrey Manning, University of Edinburgh
Prof. John Guillebaud, University College London
Roger Martin, OPT
Fred Pearce, The Guardian, New Scientist
Savina Geerinck, Street Child Africa

The discussion was chaired by Geoff Watts from Radio 4’s Leading Edge.

Please find invitation enclosed as appendix 13
Oxfam and Women’s Institute Maternal Mortality campaign launch, 21st June 2010, Pall Mall, London
Members attended Oxfam’s and the Women’s Institute’s Maternal Mortality campaign launch on 21st June 2010. At the launch there were talks from those involved in the issue, plus a video from a recent trip to see Oxfam’s work in Malawi.

The Group remains excited about the large number of general international development NGOs getting involved in maternal and SRHR campaign activities.

Please find enclosed invitation as appendix 14

Bill and Melinda Gates Foundation European Office opening, 24th June 2010, London
Members and advisor attended the Bill and Melinda Gates Foundation’s European opening day reception/meeting in London on 24th June 2010 with Neil Datta, EPF secretariat. Stephen O’Brien MP, the new PUSS for ID spoke at the opening.

Please find enclosed invitation and programme as appendix 15

Rape as a Weapon of War briefing meeting, 16th September 2010, HoC, London
A briefing meeting was co-organised with Tom Brake MP’s office on ‘Rape as a Weapon of War’. The Global Justice Center, an American international legal human rights organisation briefed members on the shocking fact that thousands of girls and women impregnated by rape in armed conflict are routinely denied access to abortions in humanitarian aid settings, despite hundreds of millions of dollars in humanitarian aid.

This denial constitutes cruel and inhumane treatment and is often deadly. The Global Justice Center argued that the omission of abortion from the care given to civilians injured in armed conflict is a grave breach of the rights of victims under Geneva Convention guarantees of non-discriminatory medical care. The major forces perpetuating the “no abortion policy” are US abortion restrictions placed on all US foreign aid, totalling approximately $49 billion in 2010.

As a follow up to the briefing meeting Baroness Jenny Tonge and Tom Brake MP wrote letters to the Foreign and Commonwealth Office and DFID asking the UK Government to bring this issue up at the forthcoming Universal Periodic Review.

Please find enclosed correspondence as appendix 16

Parliamentary Questions (PQs) were also tabled as follows:

Baroness Tonge
To ask Her Majesty’s Government what steps they are taking to ensure that women and girls raped in conflict are ensured full, non-discriminatory medical care, including abortions.

Baroness Verma: DFID directly supports the provision of non-discriminatory medical care to victims of rape in a range of countries, including those affected by conflict. In the Democratic Republic of Congo, for example, the UK has made contributions totalling around £1 million to the Panzi hospital in Bukavu, which has a specialist unit to provide care for the victims of acts of sexual violence. In Sierra Leone, DFID funds referral centres that support large numbers of women-including girls under 15-who have been victims of sexual assault.

The UK Government do not promote abortion as a method of family planning, but we are committed to reducing maternal mortality in the developing world and one of the leading causes of maternal death is unsafe abortion. The World Health Organization estimates that nearly 70,000 women die each year following unsafe abortion and we are committed to bringing this number down, including in situations of armed conflict.
UN Foundation and the Global Fund to Fight AIDS, TB and Malaria screening event on:
Members attended above event hosted by Andrew Mitchell MP, SS for ID, which included a
screening of a ground breaking documentary, “A New Picture of Health” which documented the
work done by the United Nations Foundation and the Global Fund in some of the poorest
countries in the world.

The screening was organised to highlight the Global Fund’s replenishment need of between $13
and $20 billion over the next three years.

A panel discussion followed the film featuring:
Michel Kazatchkine, Executive Director of the Global Fund
Andrew Mitchell MP, SS for ID
Justin Byworth, Chief Executive of World Vision
Gill Greer, Director-General of IPPF
Richard Manning, Vice-Chair of the Global Fund replenishment

Please find enclosed invitation as appendix 17

Advisor attended on behalf of the Group, the UNFPA’s SWOP report launch 2011 focussing on
women and conflict. The Report looked at the UN Security Council landmark resolution calling
on governments to protect women from rape during war time ten years on. The Report showed
what had been accomplished in places affected by war, military occupation or natural disasters.
It also showed the special challenges of countries that have endured both political instability and
natural disaster.

Stephen O’Brien MP, PUSS for ID spoke at the event with Ms Thorya Obaid, Executive Director,
UNFPA and Ms Jemilar Mahmood, Chief of Humanitarian Response Branch, UNFPA.

The Report received good press coverage and committee members received a copy of the
Report, the press release and Ms Obaid’s speech.

Please find attached invitation to the launch, front page of Report and contents page, together with press
release and Ms Thorya Obaid’s speech as appendix 18

Congo/Women Portraits of War Exhibition, London School of Economics, Crisis States
Research Center, 20th October 2010
The Group alongside the APPG on Great Lakes and UNFPA had been working on organising
and exhibiting the Arts work project (Women and Congo) in Parliament in connection with
UNFPA’s SWOP launch in London. The Exhibition was finally displayed at the London School of
Economics with Ms Thorya Obaid, Executive Director, UNFPA, as the key note speaker.

Members attended the exhibition.

Please find enclosed invitation as appendix 19

Voluntary Services Overseas briefing on Tackling ‘Brain Drain’ from Africa, 15th
November 2010, HoC, London
Members and advisor attended Voluntary Services Overseas (VSO) report launch and briefing
on ‘Brain Drain’ from Africa.

VSO’s new report ‘Brain Gain: making migration work for rich and poor countries’, looked at
solutions to turn this trend into a positive.

In some countries where VSO works, there are as few as two doctors for every 100,000 people.
Migration makes the situation worse: the World Health Organization (WHO) estimates that around 23% of doctors trained in sub-Saharan Africa are working in Organisation for Economic Co-operation and Development (OECD) countries, including the UK. The Report explored how changes to the UK’s immigration and citizenship framework could help stem the brain drain from Africa.

Speakers at the event were:
Dr Paul Williams VSO Volunteer, Bwindi Community Hospital
Laura Chappell, Senior Research Fellow, Institute for Public Policy Research (IPPR)
Kathy Peach, Head of External Affairs, VSO

Report policy recommendations included:

- Increasing flexibility in the citizenship journey to make it easier for health workers already in the UK to return home if they wish
- Improving opportunities for African health workers to train in the UK through temporary schemes such as the Medical Training initiative
- Continuing progress on tackling the underlying causes of migration by building up Africa’s health systems and workforce

Questions and answered followed the presentations.

Please find invitation and report cover and contents page enclosed as appendix 20

IPPF’s Governing Council’s Awards dinner, 27th November 2010, Hallam Conference Centre, London
In 2009 IPPF established the Governing Council Awards for outstanding contributions to SRHR. These distinctions honoured individuals or organisations in five different categories: individual award, youth award, Member Association award, staff award and an international award which this year was presented to Her Right Honourable Princess Basma bint Talal of Jordan.

Baroness Jenny Tonge presented the awards at this year’s ceremony.

Please find enclosed invitation letter to present the awards, briefing and bios of award winning people as appendix 21

The Commonwealth Parliamentary Association (CPA) hosted 5 Kenyan women parliamentarians’ visit to Westminster. As part of the visit the Group was contacted to provide an overview of the Group’s parliamentary advocacy activities. Members also attended the evening reception and the screening of a short WRA film on maternal health.

Please find enclosed programme and outline of presentation as appendix 22

Members and assistant attended above launch and reported back to members at the 1st February committee meeting. The report looked at the impact of a rapidly growing global population and said that the main areas where this will create increased pressure on current resources are food, water, urbanisation and energy. The Report recommended five engineering development goals for priority action in order to meet the projected challenges of a growing global population.
Members said in the question and answer session that prevention and the promotion of family planning was essential as a long terms solution to growing populations. The authors stated that there were ‘no insurmountable problems’. It was noted that Lord Alton’s researcher attended and was opposed to family planning solutions and made reference to Malthusian ideas.

Baroness Flather was sent a hard copy of the report subsequently upon her request.

*Please find enclosed invitation letter, report front cover and contents page as appendix 23*

**IPPF’s Girl Decide Film launch, 16th February 2011, Courthouse Doubletree, Great Marlborough Street, London**

Assistant attended above launch on behalf of the Group.

The Girls Decide films shared the stories of girls in Albania, Argentina, Bangladesh, Indonesia, Swaziland and Syria and their journeys to make decisions about sex, sexuality, pregnancy, HIV, abortion and relationships.

Stephen O’Brien MP, PUSS for ID was the key note speaker with Ms Claudia Hammond, Presenter, BBC World Service in the chair.

*Please find enclosed invitation as appendix 24*

**The Royal Commission on Environment Pollution ‘Demographic Change and the Environment’ report launch, 16th February 2011, London**


The Report explored the environmental challenges faced by the UK as a result of predicted demographic change (changes in the numbers and distribution of people) in the UK in the years up to 2050.

It concluded that it is not primarily the size of the population that should be taken into account when considering the environmental impact of demographic change in the UK. More important are factors such as household numbers and size, the age structure of the population, and where people live. Additionally, the UK population’s current patterns of consumption (e.g. the amount of energy and water used in homes) it said have a greater impact on the environment than all the above demographic factors. There is far greater scope to influence consumption patterns and their impact than demographic patterns. The Commission believe a step change is needed in efforts to increase resource use efficiency.

*Please find enclosed invitation to launch and copy of front cover a contents page as appendix 25*

**APPG on International Development and the Environment briefing meeting on the UN High Level Panel on Global Sustainability, 1st March 2011, HoC, London**

Assistant attended above meeting on behalf of the Group. Janos Pasztor, Executive Director of the UN High Level Panel on Global Sustainability spoke about the work of the Panel, which was established by the UN Secretary General to produce a ‘blueprint’ for global sustainability. The need for a focus on human wellbeing in the economic framework was key.

After the meeting the Assistant spoke to Georgios Kostakos, Senior Adviser to the High Level Panel, who requested further information on the Group and a copy of the Population Growth Hearing Report.

*Please find enclosed invitation and correspondence as appendix 26*
WRA and Royal College of Nursing’s (RCN) International Women’s Day event, 7th March 2011, RCN headquarters, Cavendish Sq., London

Assistant attended above evening reception on behalf of the Group. The event focussed on the role nursing and midwifery staff play in addressing maternal mortality. It provided an opportunity to consider how women can be empowered and transform ‘Pledges into Action’, thereby making safe motherhood a reality for all.

Sarah Brown, Global Patron of the WRA, was keynote speaker at the reception.

Please find enclosed invitation as appendix 27


Members attended above exhibition where Interact Worldwide exhibited with their partner organisation in Asia and Eastern Africa some of the approaches that have worked for remote rural communities, adolescents, and sexual minorities to get access to SRHR.

Members were invited to hear directly from their field partners and see for themselves some of Interact Worldwide’s work in Africa through a photography exhibition, and learn how their recent merger with Plan UK would strengthen their work with adolescents.

Please find enclosed invitation as appendix 28

European Meetings

European Parliamentary Forum on Population and Development

Collaboration between EPF, the Group and other EPF member organisations continue to be strong.

Parliamentary advocacy activities have been shared on-line, discussed over the phone and at meetings.

Selected Group members have received the EPF newsletters and copies of EPF activities for 2010.

Please find enclosed select communications as appendix 29

Baroness Jenny Tonge was elected Vice-President of the EPF at the EPF executive committee meeting on 4th October 2010, Brussels, Belgium and also attended the 18th March 2011, London, UK executive committee meeting.

EPF launched its new website this year as: http://www.epfweb.org/

EPF conference for European APPG Secretariats, 17th – 20th November 2010, Dubrovnik, Croatia

Advisor attended the annual parliamentary secretariat retreat organised by EPF to discuss advocacy on the ICPD PoA, the G8/G20 and Millennium Development Goals (MDG) and strategies for the future. The meeting was joined by UNFPA representatives, regional parliamentary networks, European civil society network representatives and other partners with a stake in parliamentary advocacy. SRHR advocacy co-operation in parliamentary advocacy, stakeholder mapping, communication and advocacy techniques were of particular interest.

Advisor presented the Group’s activities with a short presentation on how to organise and achieve best results from parliamentary hearings.
Cristina Dumitrescu MP from Romania was particularly interested in the Group’s parliamentary hearings, which lead to further discussions and support on the topic via e-mail communications.

Other EPF meetings, conferences, consultations and study tours that members and advisor have been involved with this year can be found under the headings: APPG on PD&RH parliamentary briefing meetings, conferences and study tours.

**European Non Governmental Organisations**
Collaboration between European SRHR NGOs and the Group remains strong and important. Events and campaigns continue to be co-organised with both national and international SRHR NGOs.

European Non Governmental Organisations’ (EuroNGOs) e-mail lists and websites ensure that advisor, assistant and Group members are updated on new and relevant family planning, SRHR campaigns and advocacy, in support of UK parliamentary advocacy activities.

Information of particular interest to members has been circulated via e-mail or standard mail throughout the year.

UK parliamentary questions (PQ) of importance and interest to other APPGs have likewise been disseminated on the EuroNGOs email list.

EuroNGO circulated a survey this year asking questions about future collaborative work and an evaluation of EuroNGO was undertaken by an external consultation. The Group collaborated with both the survey and the evaluation.

The Group this year received information from its sister Group in the European Parliament about the important European Parliament’s budget votes in September 2010 on ODA to the ICPD PoA. This lead to the Group sending campaign letters to UK MEPs: Marta Andreasen, Richard Ashworth, James Elles and Derek Vaughan. Other European APPGs did likewise.

The EU health budget line increased by 2 million Euros. This was the only budget line in the EU budget that could specifically be used for ICPD PoA purposes.

The EuroNGO Annual General Meeting, 8th – 9th November 2010, London, UK
Advisor and assistant attended the EuroNGO AGM. This annual meeting remains an excellent platform for sharing experiences, networking and obtaining information on new SRHR campaigns and advocacy activities in Europe and further afield.

This year saw 164 participants from all over the world gathered at the EuroNGOs 2010 International Conference entitled: ‘Gender and SRHR at the Heart of the MDGs’, hosted by MSI in London.

Speeches were delivered by insightful personalities and experts including:
*Ms Bience Gawanas, The African Union Commissioner for Social Affairs*
Ms Marge Berer, Editor of Reproductive Health Matters and Chair of the International Consortium for Medical Abortion
Dr Zafrullah Chowdhury, Founder and Program Coordinator, Gonoshasthaya Kendra (People’s Health Centre), Bangladesh
Ms Indu Capoor, Founder and Director, Centre for Health, Education, Training and Nutrition Awareness (CHETNA), India
Dr Mabel Bianco, President of the Foundation for Studies and Research on Women, Argentina

The event was an opportunity to consider the place of gender and SRHR in global development agendas, especially as the deadlines for achieving the MDGs and the ICPD PoA are approaching.

The Group co-organised the well-attended evening reception at the end of the AGM in the British Parliament.

All participants agreed on the importance for governments and NGOs from the so-called “Economic South” to take the lead and for donors and Western NGOs to listen to, follow and support their efforts to bring people, and specifically the poor, into the forefront of development efforts.

Peter Colenso, Deputy Director of Human Development, DFID confirmed the commitment of the UK to the new UN initiative on Maternal and Child Health at the evening reception.

On participant said in the evaluation form: “The conference brought together an extremely eclectic and interesting mix of people which brought the debate to a new level.”

Please find enclosed EuroNGO AGM programme as appendix 34

Presentations from the conference can be accessed on the following link: http://www.eurongos.org/Default.aspx?ID=1571

Council of Europe
Christine McCafferty MP retired this year at the General Election, but continued her work in the Council of Europe (CoE) until the end of the year. Her CoE, Social, Health and Family Affairs Reports relating to SRHR continue to be quoted and referenced in Europe including her ICPD+15 Report.

The ICPD+15 recommendations urged the Council of Ministers to agree on priority actions to achieve universal access to SRHR by 2015 and to start developing a European Convention on SRHR.

The Report also called for increased funding to SRHR as well as policies to respond to SRHR needs and health system strengthening to achieve the MDGs, and in particular, MDG 5, to improve maternal health.

Additionally, it stated that a full range of family planning (including emergency contraceptives, safe abortion, skilled birth attendants and obstetric emergency care) should be accessible, affordable, appropriate and acceptable to all, irrespective of age, community or country.

Please find enclosed final report as appendix 35

Christine McCafferty MP’s CoE Report on: Women’s access to lawful medical care: the problem of unregulated use of conscientious objection, was debated in June 2010 in Strasbourg but attracted numerous anti-choice amendments, which were adopted with 56 to 51 votes and 4 abstentions, the far more important ‘Recommendation’, was rejected, with 51 votes for, 56 against and 3 abstentions.
Christine McCafferty MP voted against her own Report in October 2010 due to the numerous anti-choice amendments incorporated into it.

The Group along with other European APPGs on Population and Development sent campaign letters to CoE delegates for the vote on 7th October 2010.

Please find enclosed campaign letters sent, Centre for Reproductive Rights response to opposition position and the final report as appendix 36

The EPF carried out an analysis of Resolution 1763 on Women’s access to lawful medical care:

While the ICPD supporters are still in the majority at the Parliamentary Assembly of the CoE, the adoption of the excessively altered Resolution can be seen as a tactical victory of the anti-choice camp rather than an example of increased conservatism on SRHR issues. The anti-choice campaign has been on high alert this year and exploited a wide range of tactics to achieve their goals at the CoE.

The UK now has a new CoE delegation consisting of the following MPs:

Mr Robert Walter MP (Leader)
Mr Brian Binley MP
Mr Christopher Chope MP
Mr James Clappison MP
Ann Coffey MP
Earl of Dundee
Baroness Eccles
Paul Flynn MP
Mr Sam Gyimah MP
Mr Mike Hancock MP
Mr Jim Hood MP
Sir Alan Meale MP
Baroness Nicholson
Sandra Osborne MP
Claire Perry MP
Lord Prescott
Jim Sheridan MP
Lord Tomlinson

Alternate members
Lord Anderson
Mr Joe Benton MP
Nicholas Boles MP
Lord Boswell
Michael Connarty MP
Geraint Davies MP
Jim Dobbin MP
Mr Jeffrey Donaldson MP
Mr Roger Gale MP
Lord Glentoran
Mr Oliver Heald MP
Lord Inglewood
Mr Charles Kennedy MP
Mr Edward Leigh MP
Mr Ian Liddell-Grainger MP
Yasmin Qureshi MP
Amber Rudd MP
Mr Virendra Sharma MP
Sandra Osborne MP, a long standing member of the Group is on the UK CoE Migration, Refugees and Population committee. She requested a briefing on population and fertility in Europe in support of her speech in the committee at the demographic hearing on 15th March 2011.

*Please find enclosed communications and briefing on population and fertility in Europe as appendix 37*

**Study Tours**

**Nepal, 19th – 26th February 2011**

The Group in collaboration with IPPF and MSI and their Nepal partners organised a study tour to Nepal on SRHR and international development, 19th – 26th February 2011. The study tour was funded by EPF.

The aim of the study tour was to introduce new UK MPs to SRHR and international development and subsequently become active members of the UK APPG on PD&RH.

Invitations were initially sent to targeted MPs in June 2010 following the UK General Election. In autumn 2010, invitations were disseminated more widely to new MPs. Members expressing an interest were then contacted and briefed on SRHR and the forthcoming Nepal study tour.

The final delegation was led by Baroness Jenny Tonge, accompanied by two new Conservative MPs, Heather Wheeler and David Morris.

*Please find enclosed programme as appendix 38*
Study tour summary highlights and comments were:

Meeting with Nepal MPs
Comment: “It was an excellent cross party Parliamentary meeting, where UK MPs were introduced to Nepal food, culture, political situation and an opportunity to discuss SRHR and Human Rights in Nepal”.

Briefings on Nepal’s Health System, SRHR/Maternal Health law and polices
Comment: “Health System Strengthening appears high on the political agenda in Nepal, which has and hopefully will continue to benefit women, their families and communities”.

Visits to Government hospitals and clinics in urban and urban settings
Comment: “Nepal’s long standing and extensive Primary Health Care system with a mixture of Government, NGO and private practice appear to be reaching communities. Government services appear varied including the quality of care and cleanliness, which affects the number of clients visiting facilities. Transport and logistics are important obstacles to accessing services”.

Visits to FPAN and MSI/Sunaol Parivar Nepal (SPN) clinics and outreach camp
Comment: “MSI/SPN is exemplary with regards to cleanliness and client centres SRHR services. FPAN must be commended for its SRHR advocacy and direct involvement in Health System Strengthening and Dr Navin’s secondment to the Department of Planning. Civil society organisations such as the Family Planning Association of Nepal (FPAN) and MSI/SPN are important SRHR stakeholders both for service delivery and advocacy”.

Family planning, antenatal and postnatal, delivery and abortion services observed at Government and NGO outlets including outreach clinics
Comment: “Nepal has progressed on maternal health in part due to family planning being accepted, accessible and affordable with safe abortion services, but also due to the maternity care provided at many hospitals and clinics both by the Government and NGOs including MSI/SPN and IPPF. MSI/SPN’s outreach activities are excellent and well attended”.

Trafficking and gender based violence
Comment: “Trafficking and gender based violence are human rights issue. Funding projects and involving youth in such projects are admirable but need careful monitoring, sensitive management and special expertise”.

Teaching Personal, Social, Health and Economic Education (PSHE) in schools
Comment: “As well as good SRHR education in schools, sanitation and lavatory facilities need to be prioritised to ensure girls attendance”.

Meetings with directors, managers and service providers
Comment: “Directors and Health Workers met appeared content and positive about recent legislative and policy changes in the area of SRHR. However SRHR statistics presented at various briefing meetings did not add up, supporting Nepal’s Management Information Systems is important”.

Heather Wheeler MP, David Morris MP and Baroness Jenny Tonge in youth outreach clinic
Meeting with young peer educators and community leaders
Comment: “Nepal youth and community leaders appear mobilised, involved and very supportive of SRHR services”.

Meeting with clients
Comment: “The clients met at facilities appeared content, however Government central hospitals appeared very crowded with many women labouring in the same room, where as district and semi-rural clinics appeared well staffed but very quiet”.

Teaching health workers
Comment: “Nepal’s decision to having medical doctors posted outside of the capital for 2 years is an innovative policy to ensure coverage and good practice”.

Commodity security and social marketing
Comment: “MSI/SPN’s social marketing and SRHR services are to be commended. Funding for services however appear to be an issue of concern. According to DFID officials, MSI/SPN should receive funding for abortion services from DFID via the Nepalese Government. This ensures that all MSI/SPN clients requesting an abortion receive this service free of charge. According to Kamala Thapa, MSI/SPN Country Director, MSI/SPN does not receive any funding from the Nepal Government apart from irregular and inadequate family planning commodities”. DFID has promised to follow up on this point.

On the study tour MPs learned about DFID’s priorities for ODA and international development and initiatives undertaken to reduce maternal mortality and morbidity in Nepal.

The political support for maternal health in Nepal with progressive SRHR laws and policies on family planning, safe motherhood, safe abortion and general health system strengthening had benefited women and girls and their communities in Nepal.

The trip was hailed by participants as an informative and educational study tour. Heather Wheeler MP and David Morris MP joined the APPG on PD&RH soon after the study tour.

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David Morris MP, Baroness Jenny Tonge and Heather Wheeler MP with UK Nepal Deputy Ambassador and Nepal MPs.

Please find enclosed full Nepal study tour report as appendix 39
**General Written Briefings**

Group members have received UNFPA’s Global Population Policy updates with 2 APPG on PD&RH newsletters this year.

*Please find enclosed Group’s newsletters as appendix 40*

**April 2010:** Christine McCafferty MP received a briefing for the HoC International Development debate on 8th April 2010.

*Please find enclosed briefing sent as appendix 41*

**May 2010:** Committee members were sent population/SRHR extracts from 26th May 2010 HoL’s Queen Speech debate.

*Please find enclosed extracts sent as appendix 42*

**June 2010:** Viscount Craigavon received, upon request, information in support of his oral HoL World Population Day PQ.

*Please find enclosed communications as appendix 43*

**June 2010:** All members received the G8 Muskoka Communique, with commitments made on maternal health, family planning and abortion including funding highlighted.

*Please find enclosed G8 Muskoka Communique as appendix 44*

**June 2010:** All members received the new Coalition Agreement on International Development.

*Please find Agreement attached as appendix 45*

**July 2010:** Selected members received a briefing for HoL debate on Women in Society on 21st July 2010.

*Please find enclosed briefing sent as appendix 46*

**July 2010:** Geoffrey Clifton-Brown MP received a briefing on MSI in support of his response to one of his constituents on MSI and advertising.

*Please find enclosed communications and briefing sent as appendix 47*

**September 2010:** All members received two briefings on population/demographics and climate change.

*Please find enclosed communications and briefings as appendix 48*

**September 2010:** All members received the front page of The Guardian with Nick Clegg MP, Deputy Prime Minister commenting on UK ODA and family planning.

*Please find enclosed article as appendix 49*

**September 2010:** All members received the WHO, UNFPA, United Nations Children Fund (UNICEF) and the World Bank press release on: ‘Maternal deaths worldwide drop by a third’.

*Please find enclosed press release sent as appendix 50*
**September 2010:** All members received Sarah Boseley’s Guardian Unlimited article: ‘Maternal death has dropped by a third – due to family planning, skilled birth attendants and emergency obstetric care and functioning health systems’.

*Please find enclosed article as appendix 51*

**September 2010:** Baroness Thomas received briefings on the UK budgetary procedure and DFID strategy in preparation for her meeting, with Sara Seims, Program Director, Population Programme, The William and Flora Hewlett Foundation.

*Please find enclosed briefing sent as appendix 52*

**September 2010:** Richard Ottaway MP and Baroness Jenny Tonge received a link to Malcolm Potts’ article on the Group’s 2007 Hearing Report on Population Growth - its impact upon the MDGs.

*Please find enclosed article as appendix 53*

**September 2010:** Members received summary briefings on the MDG Summit and its outcome document.

*Please find enclosed briefings sent as appendix 54*

**September 2010:** Baroness Jenny Tonge received, upon request, a briefing on population growth and progress towards the MDGs in support of her HoL’s speech on 7th October 2010 on the theme: ‘Progress towards the MDGs’.

*Please find enclosed briefing sent as appendix 55*

**September 2010:** Lord Patel received, upon request, briefings on maternal mortality in support of his HoL speech on 7th October 2010 on the theme: ‘Progress towards the MDGs’.

*Please find enclosed briefings sent as appendix 56*

**September 2010:** All members received WHO, UNICEF and UNFPA 28th September 2010 press release on global HIV/AIDS progress.

*Please find enclosed press release sent as appendix 57*

**September 2010:** All members received UNFPA’s press release on the conclusion of the three-day High-Level Summit on the MDGs, which took place 20th - 22nd September 2010 at the UN Headquarters in New York.

*Please find enclosed press release as appendix 58*

**October 2010:** Richard Ottaway MP received, upon request, briefings on UK ODA in preparation for his NGO side-event speech at the Conservative Party Conference.

*Please find enclosed briefings sent as appendix 59*

**October 2010:** Committee members receive a copy of UNFPA’s SWOP Report 2010 entitled: ‘From conflict and crisis to renewal: generations of change’.

*Please find enclosed cover letter as appendix 60*

**October 2010:** All members received Ipas’ new publication on ‘myths and facts’ about abortion.

*Please find enclosed communications as appendix 61*
November 2010: Lord Lea received, upon request, follow up information on a photograph he saw in Niger in February 2008 during an EPF study tour.

*Please find enclosed communications as appendix 62*

November 2010: Richard Ottaway MP received briefings on ‘myths and facts’ about population/family planning entitled: ‘What would Malthus say about AIDS in Africa?’ Other population briefings were also sent.

*Please find enclosed communications and briefings sent as appendix 63*

November 2010: Geoffrey Clifton-Brown MP received ‘The Glion Call to Action’ on prevention of Mother to Child Transmission of HIV/AIDS and also family planning information in support of a follow up oral PQ in the HoC.

*Please find enclosed communications as appendix 64*

November 2010: All members received a copy of Euromapping 2010, launched in the UK Parliament on 4th November 2010.

*Please find enclose cover letter as appendix 65*

November 2010: Baroness Jenny Tonge received briefings, upon request, in support of her speech in the HoL debate on the ‘Strategic Security and Defence Review’ on 12th November 2010.

*Please find enclosed briefings sent as appendix 66*

December 2010: Members received a link to DFID’s World AIDS Day 2010 website together with the EU Statement on World AIDS Day.

*Please find enclosed communications as appendix 67*

December 2010: Baroness Flather received information on DFID funding to family planning and SRHR in support of her speech in the HoL on 13th December 2010 debate on population growth.

December 2010: Members received 3 briefings on women, international migration, climate change, population growth and conflict in support of speeches for HoL dinner break business debate 13th December 2010 on population growth.

*Please find enclosed communications sent as appendix 68*

December 2010: Baroness Jenny Tonge received a briefing on health workforce and HIV/AIDS in Malawi in preparation for the HoL debate on ‘Global Health’.

*Please find enclosed briefing sent as appendix 69*

December 2010: Baroness Jenny Tonge received, upon request, information on the unmet need for family planning.

*Please find enclosed communications as appendix 70*

December 2010: Baroness Jenny Tonge received an IPPF briefing on sexual rights in support of her HoL debate.

*Please find enclosed communications as appendix 71*

December 2010: Viscount Craigavon received information on the European Commission’s public consultations on EU ODA.
January 2011: Katy Clark MP received, upon request, a supplementary oral PQ with background information in support of her HoC oral PQ on fertility and reproductive health.

Please find enclosed supplementary oral PQ and briefing sent as appendix 73

January 2011: Baroness Jenny Tonge received a briefing in support of her speech in the HoL on MDG 5 on 12th January 2011.

Please find enclosed briefing sent as appendix 74

January 2011: Baroness Jenny Tonge received a briefing on global accountability on maternal, neonatal and child health.

Please find enclosed briefing sent as appendix 75

January 2011: All members received information about DFID’s new Framework for Results for improving reproductive, maternal and newborn health in the developing world launched on 31st December 2010.

Please find enclosed communications as appendix 76

January 2011: All members received a summary briefing on DFID’s new Framework for Results for improving reproductive, maternal and newborn health in the developing world.

Please find enclosed communications as appendix 77

February 2011: All members received the press release on Dr Babatunde Osotimehin, the new Executive Director of UNFPA, and his vision for the organisation.

Please find enclosed information sent as appendix 78


Please find enclosed briefing sent as appendix 79

February 2011: Geoffrey Clifton-Brown MP and Baroness Jenny Tonge received clarification on DFID’s new Framework for Results on reproductive, maternal and newborn health and focus countries.

Please find enclosed clarifications sent as appendix 80

February 2011: All members received a copy of Ian Sample’s Guardian article: ‘UK’s shifting population placing environmental under intense strain’.

Please find enclosed article as appendix 81

February 2011: Baroness Gould received, upon request, briefings on the global economic crisis, women and DFID and commodity security supplies in support of her HoL speech on International Women’s Day.

Please find enclosed briefings sent as appendix 82

March 2011: Committee members received the press release on OPT name change to Population Matters.

Please find enclosed press release sent as appendix 83
March 2011: Sandra Osborne MP received, upon request, two briefings in support of her intervention at the demography hearing at CoE on 15th March 2011.

*Please find enclosed communications as appendix 84*

March 2011: All members received a summary of family planning/SRHR extracts from DFID’s Aid Reviews on how the UK’s aid will be delivered for the world’s poorest people over the next four years.

*Please find enclosed summary briefing sent as appendix 85*

March 2011: All members received UNFPA’s Statement on International Women’s Day 2011.

*Please find enclosed statement as appendix 86*

March 2011: Three written SRHR NGO briefings were sent to Members of the HoC in support of their speeches on International Women’s Day on 7th March.

*Please find enclosed cover letter and briefings sent as appendix 87*

April 2011: All members received EPF’s announcement that it has launched its new website at [www.epfweb.org](http://www.epfweb.org) and a new e-mail system for staff contact.

*Please find enclosed information sent as appendix 88*

**General Correspondence and Collaboration**

The Group continue to campaign and advocate for the full implementation of the ICPD PoA, with an increased focus on family planning and population this year.

*Please find enclosed communications to this effect as appendix 89*

Enquiries to and about the Group and its parliamentary activities, have been dealt with on a daily basis on the phone, via e-mails and many have found the Group’s website very informative and useful.

The Group has seen an increase this year in correspondence from individuals requesting members’ contact details to promote their personal stand on population limitation and immigration policies. The Group has also received letters and correspondence from external organisations requesting partnerships and funding.

The Group does not campaign for or support a UK population policy, nor does it support particular immigration policies. It does not fund external organisations and the full membership list remains confidential.

*Please find enclosed sample correspondence and template used as RSVP to letters as appendix 90*

Collaboration continues with a variety of national and international SRHR organisations via e-mail communications, telephone communications and meetings, including:

UNFPA; IPPF; MSI; WRA; Women and Children First UK, UK SRHR Network, UN SRHR NGOs, Oxfam, Health Poverty Action, Action for Global Health (AfGH), Interact Worldwide/Plan UK, UK professional associations and colleges, academic institutions, national-, regional- and international APPGs on Population and Development; US Trusts and Foundations.
Communications

**Hans Rosling, Karolinski Institute**
Advisor has corresponded with the Karolinski Institute this year making enquiries into the possibility of Hans Rosling making a population presentation in the UK Parliament. Unfortunately, he was not available for the EU conference in March 2011, but communications continue and the Group hopes to meet him, subject to his diary commitments and at a future population briefing event, to be organised in the UK Parliament.

**Malcolm Potts, University of Berkeley.**
Members and advisor have been in regular contact with Malcolm Potts this year and two presentations were organised. Malcolm Potts first presentation on population and family planning was at the 17th March 2011 EU conference held in the UK Parliament (further information can be found under the heading: conferences).

**Health Poverty Action**
Advisor communicated with Sarah Edwards, Head of Policy and Campaigns at Health Poverty Action in response to their newly published report, 'Mothers on the margins: improving indigenous women’s maternal health', which highlighted the wider problems of indigenous women’s maternal health, including the need for culturally appropriate maternal healthcare, issues of discrimination and access and the lack of participation of indigenous women in decisions about their reproductive health.

PQs were tabled following communications, as follows:

**Developing Countries: Maternity Services**

**Paul Flynn:** To ask the Secretary of State for International Development what disaggregated data his Department collects on the outcomes of maternal health programmes funded by his Department for (a) all populations and (b) indigenous and other cultural minority populations in each developing country so supported; and if he will make a statement.

**Mr O’Brien:** DFID uses an annual review process to measure results towards achieving programme objectives in each of its maternal and newborn health programmes. Where reaching a marginalised population is an integral part of the programme, the monitoring process will track this.

**Paul Flynn:** To ask the Secretary of State for International Development what steps his Department takes to ensure fair access to health systems through its aid programme frameworks in developing countries.

**Mr O’Brien:** DFID gives high priority to ensuring that the benefits of health services are distributed equitably when it invests in health systems in developing countries. In addition to increasing the quality and supply of services, DFID works closely with Governments and other partners to make sure that these services reach the poor and vulnerable. This requires giving special attention to removing the barriers that prevent those most in need from accessing the care they require.

The Secretary of State has recently commissioned a review of DFID’s aid programmes to determine how we can achieve better value for money for the taxpayer and accelerate progress towards the MDGs. This will include DFID support to the health sector.

**Paul Flynn:** To ask the Secretary of State for International Development in which (a) countries and (b) regions his Department’s maternal and newborn health programme aims to reach marginalised populations.

**Mr O’Brien:** Improving reproductive, maternal and newborn health programmes are major priorities for the Coalition Government and are central to the Bilateral and Multilateral Aid Reviews currently under way. These reviews are due to report in early 2011 and they will inform our decisions on all future health programmes at both country and regional level.

**Royal College of Midwives**
Advisor has been in contact with the Royal College of Midwives (RCM) this year in relation to both internal and external briefing events. Events attended can be found under the headings:
APPG on PD&RH parliamentary briefing meetings and non APPG on PD&RH parliamentary briefing meetings.

Communications have also related to David Amess MP who is a very active anti-choice parliamentarian and now a member of the RCM parliamentary panel.

**Jim Dobbin MP’s office**
Advisor has been contacted on several occasions this year by members of staff from Jim Dobbin MP’s office requesting information about the MP study tour to China in 2002. Information requested has been sent relating to UNFPA’s work in China and people met on the study tour as the Group was the main organiser.

**Interact Worldwide**
Since Interact Worldwide merged with Plan UK on 1st October 2009 the Group’s advisor has been in communications with advocacy staff from both organisations with particular reference to AfGH activities, which cumulated in Baroness Jenny Tonge attending their May 2011 AfGH Conference in Paris which will be reported on in next year’s annual report.

**Population Matters (previously Optimum Population Trust)**
Members and advisor have corresponded with Roger Martin, Chair, Population Matters on numerous occasions this year via e-mail, telephone and in person. Discussions focussed mainly on the issue of population growth and the unmet need for family planning.

**Dr Fiona Kisby Littleton, writer**
Dr Fiona Kisby Littleton sent published articles on personal relationship and sex education in schools. The articles emphasised the importance of personal relationship and sex education also incorporating the issue of pregnancy and infertility later in life, which is often not included in such education.

**Meetings**
**MSI**
Members, advisor and assistant have corresponded and met on several occasions with Leo Bryant, UK Advocacy Manager, MSI in connection with the General Election, the new parliament, SRHR supporters and the study tour to Nepal for new MPs, February 2011.

**UK SRHR Network**
Members, advisor and assistant have also met with Leo Bryant in his capacity as the chair of the UK SRHR Network and Stuart Halford, vice-chair to jointly analyse pre General Election SRHR survey and engage new MPs in SRHR and international development.

The SRHR Network survey received over 100 replies, however only 18 MPs replied with the majority being existing Group members. The Manifesto for Motherhood survey circulated pre General Election by Women and Children First UK and other NGOs received replies from 22 MPs.

All new, as well as returning MPs, received an introductory letter to the Group and its activities and members were encouraged to attend the Bill Gates ‘freshers’ event and become members of the Group (please see further details under APPG on PD&RH parliamentary briefing meetings).

**Joint UK SRHR Network and Gender and Development Network (GADN)**
The UK SRHR and GADN held a joint meeting to discuss how to bring together women’s rights and SRHR on 25th May 2010.

Speakers from the SRHR Network and the GADN Network lead a group discussion on the potential for joint advocacy messaging between the two networks. In particular, discussion focussed upon new political interest in climate change, population and maternal mortality and it explored the ‘threats and opportunities’ from both a gender and a SRHR perspective. Advisor gave a presentation on the new political landscape for SRHR and gender in the UK Parliament.
Maternal and Child Network
Advisor attended the Maternal and Child Network (MCN) meeting on 13th January 2011 on the UK’s Framework for Results of improving reproductive, maternal and newborn health in the developing world.

The network expressed support for the new DFID Framework. Minor concerns were feed back to APPG on PD&RH committee members and written PQs were subsequently tabled as follows:

Developing Countries: Maternity Services
Paul Flynn: To ask the Secretary of State for International Development if his Department will publish information on expenditure for reproductive, maternal and newborn health interventions in 2008-09 under the UK’s Framework for Results, Choices for Women: Planned Pregnancies, Safe Births and Healthy Newborns, similar to the information on expenditure on malaria in the UK’s Framework for Results for Malaria.

Mr Andrew Mitchell: DFID expenditure in 2008-09 are published in “Statistics on International Development” (SID), which is available in the Library of the House and on the DFID website at: http://www.DFID.gov.uk/Documents/publications1/sid2010/a3.xls?epslanguage=en Interventions on women’s and children’s health are captured across a number of the expenditure categories provided in SID and cannot be further disaggregated without disproportionate cost.

Paul Flynn: To ask the Secretary of State for International Development what plans his Department has to publish information on spending commitments for reproductive, maternal and newborn health interventions for 2010-11 under the UK’s Framework for Results, Choices for Women: Planned Pregnancies, Safe Births and Healthy Newborns.

Mr Andrew Mitchell: The internationally agreed methodology for monitoring the Government’s spending commitments on women’s and children’s health is provided in table A of the UK’s Framework for Results for improving reproductive, maternal and newborn health. The methodology will be used to track the Government’s expenditure annually and this will be published in the G8 accountability reports along with the expenditure of other donors.

Paul Flynn: To ask the Secretary of State for International Development (1) how his Department’s planned detailed evaluation framework under the UK’s Framework for Results, Choices for Women: Planned Pregnancies, Safe Births and Healthy Newborns will relate to the accountability framework to be produced by the Commission on Information and Accountability for Women’s and Children’s Health; (2) with reference to Annex A5 of the UK’s Framework for Results, Choices for Women: Planned Pregnancies, Safe Births and Healthy Newborns, what timetable he has set for the release of the detailed evaluation framework.

Mr Andrew Mitchell: Work is currently in progress to develop a monitoring and evaluation framework for the UK’s Framework for Results for improving reproductive, maternal and newborn health. This will be made available in mid 2011. The Government will work to achieve alignment between our framework and the Commission’s accountability framework.

Paul Flynn: To ask the Secretary of State for International Development what steps he plans to take as part of the G8 commitment to provide additional funding for maternal and child health up to 2015 to address the global shortage of skilled birth attendants and health workers.

Mr Andrew Mitchell: The Government’s ‘Choices for Women’ Framework for Results outlines how the UK will save the lives of at least 50,000 women during pregnancy and childbirth and 250,000 newborn babies by 2015. The framework has a focus on increasing access to skilled health workers and commits to supporting at least two million safe deliveries and ensuring long-lasting improvements in maternity services. FID country programmes are currently finalising their operational plans for the next four years which will contribute to the Framework for Results commitments. These plans are being released via the DFID website: http://www.DFID.gov.uk/Media-Room/Publications/?p=OP and it is anticipated that this exercise will be completed by the end of May.
**Action for Global Health**
Advisor met with and communicated regularly throughout the year with AfGH team members and other APPG secretariats involved in health. Discussions particularly revolved around health and the MDG Summit, including global health worker shortages.

After numerous meetings and communications between APPG advisors and MPs it was agreed that the APPGs on health; including the APPG on HIV and AIDS, APPG Malaria and Neglected Tropical Diseases, APPG on Global TB and APPG on PD&RH; would endorse a 4 page leaflet on ‘Health is Wealth’ which was sent to Ministers and civil servants attending the MDG Review Summit. The leaflet made recommendations to the UK Government on how to improve global health for MDG Summit negotiations and deliberations.

Please find enclosed leaflet endorsed by the APPGs on health as appendix 92

The following written PQs on the health workforce were also tabled:

**Health: Overseas Workers**

**Asked by Baroness Tonge:** To ask Her Majesty’s Government whether they will support the inclusion in the final statement of the UN high-level plenary meeting on the millennium development goals of a call for at least 3.5 million new health workers to be available for work by 2015 in countries that currently have an acute shortage.

**Baroness Verma:** Yes. The MDG summit outcome document, which welcomes the United Nations Secretary-General’s global strategy on women’s and children’s health, was developed with the full and active support of the UK Government. The global strategy highlights the critical need to build stronger health systems staffed with sufficient skilled health workers. It also calls for the additional domestic and international funding to enable the recruitment of between 2.5 to 3.5 million additional health workers.

**Asked by Baroness Tonge:** To ask Her Majesty’s Government what specific plans they have to support the implementation of the Code of Practice on the International Recruitment of Health Personnel, following its endorsement by the WHO World Health Assembly in May 2010.

**Baroness Verma:** The UK Government actively supported the adoption of the World Health Organisation’s voluntary Code of Practice. We are encouraged that our work leading up to the UN high-level plenary meeting on the millennium development goals secured further recognition of the Code of Practice in the outcome document. The document highlights the importance of national and international actions to increase the retention of skilled health personnel in developing countries. We are continuing the collaboration between the Department for International Development and the Department of Health on the implementation of the principles and recommendations in the Code of Practice for the recruitment of international health personnel, which cover both the future UK reporting to the WHO and our international activities with partner countries.

**The William and Flora Hewlett Foundation**
The Group was contacted by William and Hewlett Foundation consultants in August 2010 to assist them with mapping out the decision making process and the resources provided for family planning and reproductive health in the UK. Consultants were provided with the latest APPG on PD&RH summary of UK budgetary procedures along with the 2009 Euromapping booklet.

Interviews were subsequently held with Richard Ottaway MP, Baroness Jenny Tonge, Baroness Thomas and advisor in September 2010.

Please find enclosed communications on the consultation as appendix 93

**Oxfam and National Federation of Women’s Institute**
Advisor met with Oxfam representatives in July 2010 and again in March 2011 to discuss Oxfam’s maternal health campaign and future collaborative activities. User fees and health system strengthening were also discussed as well as the possibility of a Group member joining an Oxfam study tour to Ghana, looking in particular at user fees and health system strengthening.
Valerie DeFillipo, SRHR consultant
Advisor met with Valerie DeFillipo, SRHR consultant from the US and previous IPPF Advocacy Manager in November 2010 to discuss one of DFID’s flagship projects in Nigeria called, ‘Partnership for Transforming Health Services’ and the UK Government’s support to SRHR.

Please find enclosed communications as appendix 94

White Ribbon Alliance
Members and advisor met on several occasions with WRA staff to discuss collaborative activities including the Mum’s Café at Party Conferences and in the Atrium of Portcullis House to celebrate International Women’s Day. Discussions and support also revolved around a mass lobby in Parliament and Kenyan women parliamentarians visit to the UK Parliament (please see further details under: APPG on PD&RH parliamentary activities).

UNFPA
MPs and advisor have met, communicated and collaborated with UNFPA staff throughout the year in relation to meetings, conferences, reports, press launches and anti-choice activities. UNFPA has been updated on UK parliamentary activities and DFID’s family planning and SRHR policies.

Campaign letters
Campaign letters were sent to UK MEPs this year in response to a request from the sister APPG in Brussels to gain support from UK MEPs for EU ODA to the ICPD PoA.

The health budget line was increased by 2 million Euros – this was the only budget line in the EU Budget that could specifically be used for ICPD PoA purposes. Unfortunately, the pilot project on maternal health in Rwanda was not included in the list of adopted pilot projects.

Please find enclosed letters sent as appendix 95

Articles

House Magazine articles
Baroness Jenny Tonge had two articles published in the House Magazine this year. The first article was on international development and the Coalition Government published in September 2010 and the second article was on published in connection with International Women’s Day on 8th March 2011. In both articles the Group was mentioned to inform new MPs of the Group and its parliamentary advocacy activities.

Please find enclosed articles as appendix 96

OpEd on Valentines Day and World Aids Day
Baroness Jenny Tonge sent OpEds to the UK press on family planning in connection with Valentine’s Day and World Aids Day. Unfortunately neither made the press, but the new press contacts have been useful for the Group.

Please find enclosed OpEds sent as appendix 97

Consultations

Royal Society consultation on population 2010/11
In 2010 The Royal Society convened a working group of experts, chaired by Sir John Sulston, to revisit and analyse how population variables will effect and be affected by economies, environments, societies and cultures over the next forty years and beyond.

The aim of their study, to be published early 2012, is to provide policy guidance to decision makers and inform interested members of the public on the implications of population decreases, and increases that are observed and predicted in different parts of the world. It will consider how scientific and technological developments might alter the rate and impact of population changes and affect human well-being.
The Group submitted its 2007 Hearing Report on Population Growth and its Impact upon the MDGs, as written evidence to the study. This led to numerous meetings being held between Baroness Jenny Tonge, Richard Ottaway MP, Baroness Flather, advisor and John Sulston and his team to exchange information and expertise.

The Group has offered its support in launching the final study in Parliament and hopes to utilise the study in future parliamentary advocacy in the lead up to Rio +20 in 2012.

**The Royal Commission on Environmental Pollution**
The Royal Commission on Environmental Pollution invited interested parties to submit written evidence to their study: The Environmental impact of demographic change in the UK, February 2010.


The final report was launched on 16th February 2011 and concluded that it is not primarily the size of the population that should be taken into account when considering the environmental impact of demographic change in the UK (please see further information on the launch under the heading: Non APPG on PD&RH briefing meetings).

**Parliamentary Statements, Legislation, Debates, Early Day Motions and Questions**
The new UK Coalition Government has been explicit in its support for international family planning and SRHR. There have been several important statements, debates, EDMs and PQs relating to family planning and SRHR which are listed below and can also be found on the Group’s website.

**House of Commons (HoC)**

**Oral Ministerial Statements**

**G8 and G20 Summits, 28th June 2010**
The Prime Minister, David Cameron MP, made a statement on the G8 and G20 summits which took place in Canada. The Prime Minister stated the importance of the G8 in development and highlighted the need for the richest countries to meet the commitments they had set out. He reiterated the UK’s commitment to spend 0.7% of GNI on development aid and mentioned the Muskoka initiative on maternal and child health that was agreed at the G8. A short debate with interventions from front bench opposition spokespeople and backbenchers across the House followed.

*Please find enclosed full text as appendix 99*

**Pakistan Floods, 7th September 2010**
The SS for ID, Andrew Mitchell MP, made a statement on the UK humanitarian response floods that devastated a large area of Pakistan in August 2010, resulting in 12.5 million people in need of urgent assistance and 1.2 million homes damaged or destroyed. The assistance from the UK included help for 500,000 malnourished children and pregnant or breastfeeding women through the provision of high energy food supplements. A short debate with interventions from front bench opposition spokespeople and backbenchers across the House, including on maternal mortality rates in Pakistan, followed.

*Please find enclosed full text as appendix 100*
Strategic Defence and Security Review, 19th October 2010
The Prime Minister made a statement on the strategic defence and security review. He mentioned that by 2015 just under a third of the DFID budget will be spent on conflict prevention. A short debate with interventions from front bench opposition spokespeople and backbenchers across the House followed, including questions on DFID spending on women, children and the MDGs as well as conflict prevention.

Please find enclosed the Prime Minister’s statement and selected questions as appendix 101

Comprehensive Spending Review, 20th October 2010
The Chancellor of the Exchequer, George Osborne MP, made a statement on the comprehensive spending review. He stated that the UK would honour the UN target on international aid and would reach 0.7% of GNI by 2013, halving the number of deaths caused by malaria and saving the lives of 50,000 pregnant women and 250,000 newborn babies. A short debate with interventions from front bench opposition spokespeople and backbenchers across the House followed, including questions on DFID spending on conflict prevention and the MDGs.

Please find enclosed the Chancellor’s statement and selected questions as appendix 102

Public Health White Paper, 30th November 2010
The Secretary of State for Health, Andrew Lansley MP, made a statement on the Public Health White Paper which focused on a) protecting and improving the health of the nation and b) reducing health inequalities by improving the health of the poorest fastest. A short debate with interventions from front bench opposition spokespeople and backbenchers across the House followed, including questions on access to sexual health services including abortion counselling and HIV testing and diagnosis.

Please find enclosed full text as appendix 103

Aid Reviews, 1st March 2011
The SS for ID made a statement on the Government’s bilateral and multilateral aid reviews, which sought to make UK aid as focused and effective as possible. The review resulted in an increased focus on tackling ill health and killer diseases, with a particular emphasis on immunisation, malaria, maternal and newborn health, extending choice to girls and women over when and whether they have children and polio eradication. Bilateral programmes would close in 16 countries after a tighter focus on countries where Britain was well placed to have a significant long-term impact on poverty. A short debate with interventions from front bench opposition spokespeople and backbenchers across the House followed.

Please find enclosed full text as appendix 104

Written Ministerial Statements
Bilateral Aid Review, 16th June 2010
The SS for ID announced that he had commissioned a review of the DFID bilateral aid programme to ensure UK aid would be targeted where it was needed most and would make the most significant impact on poverty reduction.

Please find enclosed full text as appendix 105

UN Millennium Development Goals Summit, 12th October 2010
The SS for ID made a statement on the outcome of the UN Millennium Development Goals Summit, which took place in September 2010. The Deputy Prime Minister reiterated the UK’s commitment to the 0.7% of GNI target to aid by 2013. In addition, the UK focused its efforts on the most off-track MDGs, particularly women’s and children’s health. The Every Woman Every Child event, launched by the UN Secretary General, generated $40 billion in resources for maternal and child health. There were also commitments from Afghanistan and Yemen to
increase access to family planning and safe births and from Nigeria to spend a share of oil revenues on healthcare.

Please find enclosed full text as appendix 106

**Sudan Visit (8-11 November), 22nd November 2010**
The SS for ID reported on his visit to Sudan in November 2010 during which he met with a large number of high level officials. In addition, the UK has a development programme in south Sudan, an area where women and children are more likely to die in childbirth than complete primary education. The development programme has provided basic services for over 1.8 million people so far.

Please find enclosed full text as appendix 107

**Development Ministers Foreign Affairs Council, 8th December 2010**
The SS for ID reported on the forthcoming agenda for the EU Foreign Affairs Council (Development) meeting. The meeting would be discussing innovative forms of development financing, which the UK supported as long as they complemented rather than deflected from commitments made by member states to the target for 0.7% of GNI to ODA by 2015.

Please find enclosed full text as appendix 108

**International Development Association of the World Bank, 16th December 2010**
The SS for ID reported on the outcomes of international negotiations on the work and funding for the next three years of the International Development Association (IDA) of the World Bank. Thanks to UK pressure, for the first time the IDA set out some of the results it will deliver with its replenishment, including providing 30 million more people with health services, including 2 million pregnant women.

Please find enclosed full text as appendix 109

**Reproductive, Maternal and Newborn Health and Malaria Outcomes in the Developing World, 10th January 2011**
The SS for ID announced the publication of two frameworks for results on improving reproductive, maternal and newborn health outcomes, and improving malaria outcomes in the developing world.

Please find enclosed full text as appendix 110

**Legislation**

**Sex and Relationships Bill, 8th September 2010**
Chris Bryant MP introduced a ten minute rule bill to require schools to provide sex and relationships education to registered pupils. This would place sex and relationships education on a statutory footing. Dr Thérèse Coffey MP spoke against the motion, arguing that sex and relationships education was primarily a role for parents. The motion was not contested and the Second Reading was scheduled for 11th February 2011. On the date Bill was read but Members objected and the Bill will instead be read a Second time on 1st April 2011.

Please find enclosed full text as appendix 111

**Debates**

**Debate on the Address: Foreign Affairs and Defence, 26th May 2010**
A number of MPs, including Foreign Secretary William Hague and David Cairns, spoke about international development and the persecution of homosexuals in some developing countries during the wide-ranging Foreign Affairs and Defence debate on the Queen’s Speech.

Please find enclosed selected extracts from the debate as appendix 112
**Global Poverty, 1st July 2010**
The SS for ID introduced a debate in the HoC on global poverty, including changes within DFID and how UK ODA was going to be spent and reiterated the UK’s commitment to tackling maternal mortality. He also spoke at length about the need for women to have choice over whether and when they have children, access to modern contraception, rapid population growth and its impact on development and maternal and child mortality. A number of MPs, including Group Vice-Chair Richard Ottaway, Shadow SS for ID, Douglas Alexander, ID Select Committee Chair, Malcolm Bruce and others, spoke on population growth, maternal health, early child marriage and pregnancy, family planning, HIV and AIDS, the empowerment of women and unsafe abortion.

*Please find enclosed full text as appendix 113*

**Anti-Slavery Day, 14th October 2010**
Peter Bone MP introduced a Westminster Hall debate to mark anti-slavery day which concentrated on the trafficking of humans. References were made by many members to the trafficking of women and young children for sexual exploitation, as well as forced marriage and bonded labour. The Minister for Immigration, Damian Green MP, responding to the debate stated that the Government would be introducing a new strategy on trafficking, which would take a comprehensive approach by both combating the traffickers and looking after the victims.

*Please find enclosed full text as appendix 114*

**Maternity Services, 26th October 2010**
David Amess MP introduced an adjournment debate on maternity services in the UK and particularly how best to support the work of midwives. Reference was made to the recent baby boom in the UK, increased complexity in deliveries - mainly due to increased obesity, older mothers, multiple births and pre-existing medical conditions – and the national shortage of midwives. A number of MPs made short contributions on midwifery services in their constituencies. Anne Milton MP, responding for the Government, stated that the Government were committed to extending choice in maternity through maternity networks and welcomed the recent National Institute for Health and Clinical Excellence (NICE) guidelines on pregnancy and complex social factors.

*Please find enclosed full text as appendix 115*

**Termination of Pregnancy (Information Provided), 2nd November 2010**
Nadine Dorries MP introduced an adjournment debate on informed consent legislation for abortion and called for a statutory process of informed consent and a cooling-off period. Anne Milton MP, responding for the Government, stated that reducing the abortion rate was a priority and to do that women and men had to be given information and support to make responsible sexual health choices and access to contraception and sex education was important. She also said that independent sector abortion providers and those organisations that refer women for an abortion are hugely experienced, but are subject to Secretary of State approval and monitoring by the Care Quality Commission.

*Please find enclosed full text as appendix 116*

**Lesotho, 24th November 2010**
Ian Lucas MP initiated a debate on Lesotho, during which reference was made to the very high rates of HIV infection in Lesotho – the third highest in the world. Alan Duncan MP, responding for the Government, said that as part of DFID’s relatively modest bilateral aid programme in Lesotho, there had been a focus on preventing and treating HIV and AIDS amongst garment industry workers – predominantly women – and reduced HIV prevalence from 37% in 2007 to 29% in 2009.

*Please find enclosed full text as appendix 117*
HIV, 1st December 2010
David Cairns MP initiated a Westminster Hall debate on HIV in the UK to mark World AIDS Day. There was reference to the global AIDS epidemic, though the Department of Health was responding to the debate. Reference was made by various MPs to HIV testing (including during pregnancy), HIV prevention programmes and their cost effectiveness and treatment. Anne Milton MP, responding for the Government, said that internationally, progress had been made on infection rates and treatment but huge challenges remained. In the UK, challenges included identifying the 25% of people infected with HIV who were unaware of their status and the problems of late diagnosis. Pilot projects had been conducted in eight areas to provide a HIV test as part of routine services offered to newly registered adults, which picked up a significant number of previously undiagnosed people. Prevention programmes remained key and talking about sex and sexual health was essential to tackling HIV in the UK.

Please find enclosed full text as appendix 118

Zimbabwe, 8th December 2010
Malcolm Bruce MP, Chair of the ID Select Committee, introduced a debate on Zimbabwe and his Committee’s recent report on DFID’s assistance to Zimbabwe. The issue of funding for health was raised by several Members, alongside HIV infection, maternal and child mortality rates, health infrastructure, user fees for health care and obstetric services. Stephen O’Brien MP, Minister at DFID, responded on behalf of the Government and referred to the bilateral aid review and the recommendations from the Select Committee on maternal and child health.

Please find enclosed full text as appendix 119

Water Supplies (Developing World), 15th December 2010
Don Foster MP initiated a debate on water, sanitation and hygiene in the developing world which is essential to meeting many aid goals, including health and is vital for women in childbirth and post-natal care. The Minister, Alan Duncan MP, stated that DFID’s work on water, sanitation and hygiene would be linked especially closely with health. In addition, gender and disability would be a key focus as many women spent long hours collecting water and were also facing increasing indignity because of a lack of sanitation facilities.

Please find enclosed full text as appendix 120

Christmas Adjournment, 21st December 2010
During the Christmas Adjournment debate, at which MPs can raise any issue, Valerie Vaz MP spoke about human rights and made specific reference to FGM prevalence in northern Africa and, increasingly, the UK. Stephen Gilbert MP spoke about equality and diversity and referred to equality for lesbian, gay, bisexual and transgender people globally. David Heath MP, responding for the Government, stated that the UK had a good history of developing human rights and awareness of them, but should never be complacent, either at home or abroad.

Please find enclosed selected extracts from the debate as appendix 121

Maternity Services, 1st February 2011
Gisela Stuart MP initiated a debate on maternity services in the UK which she referred to the confidential inquiry into intrapartum-related death, the Prime Minister’s election pledge on increased midwife numbers and the Government’s health reforms. Reference was also made by other MPs to obstetric litigation costs, infant mortality rates, post-natal services and health visitors. Anne Milton MP, responding for the Government, said that maternity networks would extend choice for women by encouraging providers to work together and offer a broader range of maternity services. The size of networks would depend on local consortia decisions.

Please find enclosed full text as appendix 122
David Kato, 2nd March 2011
Eric Joyce MP initiated a debate on the murder in Uganda of David Kato, the human rights activist who was known for his campaigning on lesbian, gay, bisexual and transgender (LGBT) rights. The debate also referred to a Ugandan MP who had introduced a private member’s bill calling for homosexuals to face the death penalty and called for the UK and EU to take a strong lead on equality globally. Henry Bellingham MP, Minister in the Foreign Office, said that the Government was committed to combating violence and discrimination against LGBT people as an integral part of the UK’s international human rights work. As a ‘candid friend’ to Uganda, the UK would not resile in any way from speaking about concerns regarding their human rights record.

Please find enclosed full text as appendix 123

UN Women, 10th March 2011
Eleanor Laing MP introduced a debate on support for UN Women and the underlying gender inequality that still exists globally. A large number of MPs spoke on a variety of issues including sexual violence and violence against women; women’s health including post-natal care, reproductive health and maternal mortality; sex and relationships education; and FGM. In his summing up, Stephen O’Brien, responding for the Government, referred to the importance of concentrating on adolescent girls because they are the key to stopping poverty and inequality surviving from generation to generation. He also referred to FGM and his experiences of visiting the fistula hospital in Bo, Sierra Leone, a country where 82% of women have suffered genital mutilation. Women and girls die avoidable deaths in pregnancy and childbirth; own less than 10% of the world’s property, are often denied a basic education and in some countries sexual violence rates are at 60% of all women. On international women’s day, DFID had published a new strategic vision for women and girls that included saving the lives of at least 50,000 women in pregnancy and childbirth and 250,000 new born babies; and giving at least 10 million women access to modern family planning methods.

Please find enclosed full text as appendix 124

Early Day Motions

EDM 1238 – One Child Policy in China
David Amess MP
10 signatures
‘That this House notes recent reports that 21 foetuses and baby bodies were discarded in the Guangfu River, Jining City, China; further notes that the one child policy in China limits most couples to one child; further notes with concern increasing evidence, including from official sources, that Chinese authorities continue to employ compulsory abortion and sterilisation as an official policy; and calls on the government of China to cease coercive measures, including forced abortion and sterilisation.’

Please find enclosed list of MPs signing EDM as appendix 125

EDM 38 – One Child Policy in China
David Amess MP
11 signatures
‘That this House notes recent reports that 21 foetuses and baby bodies were discarded in the Guangfu River, Jining City, China; further notes that the one child policy in China limits most couples to one child; further notes with concern increasing evidence, including from official sources, that the Chinese authorities continue to employ compulsory abortion and sterilisation as an official policy; and calls on the government of China to cease coercive measures, including forced abortion and sterilisation.’

Please find enclosed list of MPs signing EDM as appendix 126

EDM 107 – Marie Stopes and China
Jim Dobbin MP
11 signatures
‘That this House notes that Marie Stopes International (MSI), the international abortion provider, listed as a charity, is held in such high regard by official bodies in the UK that it has been permitted to break the law and advertise abortion on national television; further notes it has received millions of pounds from the
Government to carry out abortion programmes in China, where the one-child policy has caused untold suffering and misery to millions, including forced abortions and sterilisation with imprisonment for those fighting against the law; further notes as an example a 20-day campaign in April in Puning County, where 9,559 adults were required for compulsory sterilisation with doctors working 20 hours a day to achieve the numbers; further notes that some 1,300 people were confined by force because their relatives refused to submit to the surgery; further notes that Marie Stopes claims to disapprove of force and seeks to discourage it, yet gave a red-carpet welcome in their London headquarters to Ms Lin Bin, Minister of China’s National Population and Family Planning Commission, which is responsible for the one-child policy and its implementation; further notes that although MSI sought and achieved enormous publicity for its television advertising it was strangely silent regarding the visit of their honoured guest; further notes this was exposed by Tibet Truth, a human rights organisation protesting about the barbarities inflicted on the people of China and Tibet; and calls on the Government to withdraw its funds from MSI and to take steps to require the cancellation of its television advertising.'

Please find enclosed list of MPs signing EDM as appendix 127

**EDM 109 – Marie Stopes and Abortion Advertisements**
Jim Dobbin MP
13 signatures
‘That this House notes the television abortion advertising campaign on Channel 4 by Marie Stopes International (MSI); is seriously concerned that it breaches the law banning advertisements on the availability of medical procedures and requires that advertising must not be harmful or offensive; asserts that it is reminiscent of international family-planning group tactics in poor countries where for decades workers have been advised that they must break the law to change the law; challenges the claims of the Advertising Standards Authority (ASA) that MSI is not advertising abortion, but offering only counselling and providing information; calls on the ASA to note that MSI is one of the two biggest providers of abortion in the world and has an income of tens of millions of pounds per annum derived entirely from abortion; further notes that the group charges £80 for counselling whether by telephone (which requires bankcard details) or face to face; further notes that MSI counselling always includes telling clients when they can attend a Marie Stopes clinic to have their abortions; recalls that for a number of years the Royal College of Psychiatrists has urged that women considering abortion should be given independent counselling because of possible psychiatric trauma; further notes that MSI depends for its income on clients having abortions and is therefore not independent; and calls on the Government to hold an advertising campaign to discover women who as a result of MSI counselling have had their babies or who are suffering from post-abortion trauma.’

Please find enclosed list of MPs signing EDM as appendix 128

**EDM 179 – Millennium Development Goals**
Tony Baldry MP
116 signatures
‘That this House recognises the important contribution and commitment the UK has made to the progress of the Millennium Development Goals (MDGs); welcomes the Government’s commitment to spend 0.7 per cent. of gross national income on overseas aid and to enshrine this commitment in law; further recognises that development benefits often remain out of reach of those who are poorest, most marginalised and affected by conflict; acknowledges that many of the MDGs are off track, especially those relating to maternal, infant and child health; further acknowledges the importance of the G8, G20 and MDG Review in mobilising the international community to achieve the MDG; and trusts that the Government will show strong international leadership in encouraging others in the international community to work towards an MDG rescue plan with clear political and financial commitments, and with every G8 country providing solid national commitments and timetables.’

Please find enclosed list of MPs signing EDM as appendix 129

**EDM 227 – G8 Summit and Child and Maternal Health**
Tony Baldry MP
32 signatures
‘That this House welcomes the Prime Minister’s announcement that the Government will prioritise maternal health at the forthcoming G8 summit, but wishes to ensure that attention to the survival of children under five years old goes hand-in-hand with initiatives on maternal health; and calls on donor governments like the UK to judge the success of their development policies by their impact in lowering maternal and child mortality rates and to promote strategies that do so.’
EDM 443 – World Population Day
Paul Flynn MP
13 signatures
‘That this House calls attention to World Population Day on 11 July 2010; commends the United Nations Population Fund for designating this date in 1989 to focus attention on the importance of world population and sexual and reproductive health and rights; notes with concern that between 343,000 and 500,000 women still die every year during pregnancy and childbirth and an estimated 32 per cent. of maternal deaths can be averted through family planning alone; and calls on the Government to increase population assistance to 10 per cent. of official development assistance, with particular attention to family planning, which has seen its relative share shrink from 55 per cent. to only five per cent. of global population assistance since 2000.’

EDM 574 – Chlamydia Screening in England
Simon Kirby MP
54 signatures
‘That this House recognises that one in 14 of those aged between 15 and 24 who test for chlamydia is infected; notes that chlamydia often has no obvious symptoms; further notes that, if left untreated, it can lead to conditions including infertility, ectopic pregnancy and pelvic inflammatory disease as well as onward transmission of the infection to sexual partners; further recognises that chlamydia screening in England is now cost-effective according to the Health Protection Agency’s modelling; welcomes the National Audit Office’s review of the National Chlamydia Screening Programme which demonstrates how further savings could be made whilst increasing diagnosis and treatment of the infection; and calls on the Secretary of State for Health to reform and maintain the delivery of opportunistic chlamydia screening for young people in England to reverse the epidemic and instil good attitudes towards sexual health in young people.’

EDM 661 – Sex and Relationship Education
Chris Bryant MP
39 signatures
‘That this House notes that, despite attempts by successive governments, the number of teenage pregnancies across the UK remains dramatically higher than in any other country in Europe; further notes that the number of sexually transmitted infections amongst young people continues to grow; believes that high quality sex and relationship education is vital in empowering young people to make responsible choices; and calls on the Government to make provision for such sex and relationship education for all children in all schools.’

EDM 691 – Still-Birth Certificates
Penny Mordaunt MP
24 signatures
‘That this House notes with approval that it has been possible for a full name to be recorded on a still-birth certificate since 1995; further notes that still-births before 24 weeks gestation do not have to be recorded, but that an informal certificate can be issued to the bereaved parents; and calls on hospitals to recognise the loss suffered by such parents by making them aware of these certificates as a matter of policy.’

EDM 834 – Informed Consent Abortion
Therese Coffey MP
27 signatures
‘That this House notes that in its 14 March 2008 statement the Royal College of Psychiatrists advised that healthcare professionals who assess or refer women who are requesting an abortion should assess for mental disorder and for risk factors that may be associated with its subsequent development; further notes that the Royal College also states that informed consent must be on the basis of adequate and appropriate
information on the potential risks to mental health associated with abortion; calls on the Government to give
its full backing to mental health assessments for women presenting for abortion as well as the provision of
professional counselling where mental health issues are identified; and further calls on the Government to
make available information on the possible mental health risks to women of an induced abortion.’

Please find enclosed list of MPs signing EDM as appendix 135

EDM 1105 – Child Marriage in Ethiopia
Mike Hancock MP
38 signatures
‘That this House welcomes the Government’s clear position against female genital mutilation and forced
marriage; notes that there is not much information in the UK about child marriage; congratulates Miss
Alemtsehay Gebrekidan, a former child wife in Ethiopia, for forming the Campaign Against Child Marriage in
Ethiopia, which works both to raise awareness of the lasting psychological and social impacts of child
marriage, and to support former child wives; further notes the latest UN population report which indicates
that the population of Ethiopia is currently 74 million of which 30 per cent. or 22 million are under 15 years;
believes that child marriage robs countless Ethiopian children of their childhood and opportunities for
education; applauds the Ethiopian government for its efforts in reducing poverty especially among women;
and now calls on the Government to work with the Ethiopian authorities and community support groups to
tackle child marriage if Ethiopia is to meet UN Millennium Development Goals.’

Please find enclosed list of MPs signing EDM as appendix 136

EDM 1136 – Award of Nobel Prize for Medicine and the Development of IVF
Gareth Johnson MP
18 signatures
‘That this House congratulates Professor Robert G. Edwards, ahead of the award ceremony on 10
December 2010, on receiving the Nobel Prize for Medicine for 2010 for the development of human in-vitro
fertilization (IVF) therapy, and for his achievements in making it possible to treat infertility, which affects
more than 10 per cent. of all couples; recognises that there are still many couples in the UK that are unable
to access this treatment on the NHS despite the publication of a NICE clinical guideline that recommends
that up to three full cycles of IVF be provided to those with a clinical need; and calls on those primary care
trusts that have suspended all funding for IVF services to reconsider so that couples with infertility have
equal access to treatment.’

Please find enclosed list of MPs signing EDM as appendix 137

EDM 1165 – Parent Choice and Sex and Relationship Education
Jim Dobbin MP
11 signatures
‘That this House notes that the Government has made a commitment to decentralisation, which in the
context of education means giving more responsibility to parents and governors, and that the sex and
relationships education curriculum is already determined on a decentralised basis which should involve
governors and parents; further notes the lack of a single source that details the diversity of approaches that
are available so parents and governors can make informed decisions on developing an approach most in
line with the ethos of their school; further notes the report of Ofsted in July 2010 which states that too few
schools are actually consulting with parents; calls on the Government to address both these issues so that
schools benefit from a functional decentralisation in sex and relationships education and work with the full
spectrum of expert service providers in the field; and rejects all calls to determine sex and relationships
education centrally through the national curriculum.’

Please find enclosed list of MPs signing EDM as appendix 138

EDM 1216 – Human Papilloma Virus Infection and Genital Warts
Peter Bottomley MP
25 signatures
‘That this House notes that diagnoses of genital warts in young people have continued to rise, with 66 per
cent. of all new genital warts diagnoses in women being in those under 25; supports the call by FPA, Brook,
Terrence Higgins Trust, the Royal Society for Public Health, Medical Foundation for AIDS and Sexual
Health and the British Association for Sexual Health and HIV for the introduction of a quadrivalent Human
Papilloma Virus (HPV) vaccine which protects against cervical cancer and against genital warts and will
contribute to improving public health; urges the Government to reduce the current inequalities which exist to ensure that it is not only those who have the knowledge and financial resources who are able to assess the quadrivalent HPV vaccine and benefit from the protection it offers; and further urges the Government to take the opportunity to prevent both cervical cancer and genital warts."

Please find enclosed list of MPs signing EDM as appendix 139

**EDM 1219 – Female Genital Mutilation**

Valerie Vaz MP
44 signatures

‘That this House is concerned about the continuing prevalence of female genital mutilation (FGM) in the UK, despite the Female Genital Mutilation Act 2003 that restated and amended the prohibition of such practices under UK law; understands that there have been no prosecutions in respect of offences relating to female genital mutilation in the last five years; notes the World Health Organisation’s (WHO) view that the procedure has no health benefits, and can cause severe acute and chronic problems for physical and mental health; further notes that the WHO recognises four distinct types of FGM; recognises that the procedure is nearly always carried out on minors and thus constitutes a violation of the rights of children; further recognises that the practice violates the human rights of girls and women, including a person’s rights to health, security and physical integrity, the right to be free from torture and cruel, inhuman or degrading treatment, and the right to life when the procedure results in death; acknowledges that the causes of FGM are complex and include a mix of cultural and social factors within families and communities; further acknowledges that no religious scripts prescribe the practice; and calls on the Government to ensure that protection is provided for young women at risk, whether they are UK nationals, permanent residents or newly arrived.’

Please find enclosed list of MPs signing EDM as appendix 140

**EDM 1290 – Future of the Human Fertilisation and Embryology Authority**

Kevin Barron MP
39 signatures

‘That this House considers the Human Fertilisation and Embryology Authority (HFEA) to be a vital and irreplaceable body of national and international importance and reputation; believes that its expertise, developed over many years of licensing and regulating assisted reproductive therapy clinics and ensuring treatment is safe, is a priceless resource which must be retained and sustained for the future; notes that its funding is derived mostly from fees and that costs would inevitably increase if its functions were to be split; further notes too that its contribution to public safety and its rigorous protection of confidentiality enjoy a high level of public confidence which could be put at risk if the HFEA is dismantled; applauds the passionate defence of the HFEA by its chair, Lisa Jardine, and recognises the widespread support for its work across the scientific and medical communities; and calls on the Government to abandon plans to abolish the HFEA.’

Please find enclosed list of MPs signing EDM as appendix 141

**EDM 1326 – Cervical Cancer Prevention Week**

Andrew Love MP
50 signatures

‘That this House notes that the UK is fortunate to have cervical screening and HPV vaccination programmes yet last year, despite cervical cancer being a preventable disease, 20 per cent. of invited women did not attend cervical screening whilst less than 40 per cent. of 16 to 18 year old girls offered the HPV vaccine in the catch-up programme elected to have this potentially life saving vaccination; congratulates the work of Jo’s Cervical Cancer Trust; and supports its call during Cervical Cancer Prevention Week 2011 that everything possible should be done to ensure that women attend for screening and vaccination when offered the opportunity to do so, including investment in targeted education and awareness campaigns, encouraging companies to allow employees to attend screening during working hours and for GP surgeries to provide flexible and innovative opportunities for women to be screened.’

Please find enclosed list of MPs signing EDM as appendix 142

**EDM 1559 – Ovarian Cancer Survival Rates**

Linda Riordan MP
26 signatures
‘That this House welcomes the news that ovarian cancer survival has doubled over the last 30 years; notes that the five-year survival for women with early stages of the disease has increased from 21 per cent. in the early 1970s to 41 per cent. today; recognises that these figures mean over 1,000 more women a year in England and Wales are now surviving this cancer for at least five years; praises the work of people in the health service who have helped bring about these improved figures; further recognises there is still a lot of work to do to tackle issues like late diagnosis; welcomes the fact that Cancer Research UK is helping to fund a trial of ovarian cancer screening; further praises the work of Cancer Research UK in their commitment to finding new ways to treat and detect the disease; calls for more investment to help treat and detect the disease; and further calls on a nationwide screening programme to be introduced as soon as possible to help spot potential tumours much earlier.’

Please find enclosed list of MPs signing EDM as appendix 143

**EDM 1622 – Consultation on the Care of Women Considering Induced Abortion**
Jim Dobbin MP
25 signatures

‘That this House notes that the Consultation Committee and Report of the Royal College of Obstetricians and Gynaecologists (RCOG) The Care of Women Requesting Induced Abortion fails in at least four criteria required by the Government Code of Practice; further notes that the Leader of the House has stated that the Government could not interfere because it was a RCOG Consultation Committee and not the responsibility of the Government (17 February 2011, Official Report, column 1145); further notes, however, that in the Answer to Lord Alton of Liverpool, Official Report, House of Lords, column WA425, the Government stated that the Department of Health commissioned and funded the review; further notes with grave concern, therefore, that the committee considering the review allowed only 21 days for consultation instead of at least 12 weeks as required by the Government's guidelines and that the membership consisted almost entirely of pro-abortion personnel including representatives from the UK's two main abortion providers, the British Pregnancy Advisory Service (BPAS) and Marie Stopes International; further notes it was not until a press release from BPAS quoted the guidelines and implied that they had been finalised that it became known to a majority of interested parties that the consultation existed, by which time there were only five days for interested parties to respond; further notes that the present guidelines include a number of claims which peer-reviewed medical literature suggest are inaccurate or misconstrued; and calls on the Government to establish a further consultation with a balanced membership under the National Institute for Health and Clinical Excellence which will be answerable to Parliament.’

Please find enclosed list of MPs signing EDM as appendix 144

**Oral Parliamentary Questions**

**Female Genital Mutilation, 2nd June 2010**
Jim Sheridan MP asked the Government what plans they had to ensure FGM prevention programmes had access to internet based funding programmes. The Minister stated that FGM was an extreme violation of women’s and girls' human rights and internet based funding was increasingly help fund civil society organisations. He also said that the Government would look carefully at funding to FGM within the ‘My Aid’ programme.

Please find enclosed Hansard extract as appendix 145

**Malaria, 2nd June 2010**
Andrew George MP, in a supplementary to questions on malaria, asked about the Government’s approach to the Global Fund replenishment talks in September 2010. The Minister stated that the issue was currently under consideration.

Please find enclosed Hansard extract as appendix 146

**Sudan, 2nd June 2010**
Gareth Thomas MP, in a supplementary to questions on Sudan, asked about momentum towards meeting the MDGs in the run up to the UN’s poverty summit and whether the Government would bring forward legislation to enshrine the 0.7% of GNI target in law before the September 2010 summit. The Minister stated that the Coalition document had committed the Government to enshrining the target in law and they would do it. In terms of the MDGs, the Prime Minister would
be discussing the issue with the Canadian Prime Minister on 3rd June 2010, with a specific boost to MDG 5, on maternal mortality.

*Please find enclosed Hansard extract as appendix 147*

**Business Questions: MDGs, 10th June 2010**  
Tony Baldry MP, former Chair of the International Development Select Committee, asked for a general debate at Business Questions on international development, ahead of the G8 in September in Canada. The Leader of the House said he would look into whether such a debate could be organised before the summer recess.

*Please find enclosed Hansard extract as appendix 148*

**PMQ: DFID, 30th June 2010**  
Tony Baldry MP asked the Prime Minister to ignore newspaper columnists and others who argued for the abolition of DFID and asked him to tell such critics that the UK’s national interest, security stability and sense of humanity very often begins overseas. The Prime Minister reiterated the Government’s commitment to overseas aid and stated that it was in the national interest.

*Please find enclosed Hansard extract as appendix 149*

**Millennium Development Goals Summit, 7th July 2010**  
Michael McCann MP asked about the UK’s objectives for the MDG summit. The Minister stated that the Government were aiming to reach international agreement on an action agenda to achieve the MDGs by 2015. This would require results-based policy and financial commitments, including on the most off-track MDGs such as maternal and child health. A number of supplementary questions on the UK’s plans for the summit were posed and answered.

*Please find enclosed Hansard extract as appendix 150*

**Poverty and Hunger Eradication, 7th July 2010**  
Richard Ottaway MP, Group Vice-Chair, asked about DFID’s effectiveness on extreme poverty and hunger and what focus DFID was giving to stabilising world population growth. The Minister stated that as part of all reviews and programmes, DFID was embedding choice for women to decide when and whether to have children which will underpin many of the MDGs.

*Please find enclosed Hansard extract as appendix 151*

**Female Genital Mutilation, 6th September 2010**  
Ann Clwyd MP asked the Home Office what resources were being allocated to enforcement of the law on FGM. The Minister stated that the Government was committed to developing a strategy to tackle violence against women and girls, including FGM, but that legislation alone could not eliminate the practise. Ann Clwyd expressed disappointment that there had been no prosecutions since the law was tightened in 2003 through her private members’ bill. The Minister said an increasing number of investigations were taking place, but there were barriers to prosecution.

*Please find enclosed Hansard extract as appendix 152*

**PMQ: MDGs, 15th September 2010**  
Claire Perry MP asked the Prime Minister what he would do to ensure the MDG promises were met. The Prime Minister stated that the Deputy Prime Minister would attend the conference on the MDGs the following week and that the UK would hit 0.7% of GNI taget and was playing our part, despite difficult spending decisions at home.

*Please find enclosed Hansard extract as appendix 153*
Millennium Development Goals, 13th October 2010
Claire Perry MP asked the Minister what assessment he had made of the outcomes of the UN MDG summit. The SS for ID, Andrew Mitchell MP, said that the summit had achieved real progress and resulted in global commitments on women and children’s health, malaria and hunger and under-nutrition. ECOSOC would assess annually the extent to which commitments had been met.

Please find enclosed Hansard extract as appendix 154

PMQ: International Aid, 20th October 2010
Sandra Osborne MP asked the Prime Minister to protect the aid budget and crackdown on tax dodging that costs poor countries more each year than they actually receive in aid. The Prime Minister reiterated the UK’s commitment to the UN 0.7% GNI target.

Please find enclosed Hansard extract as appendix 155

Health: Topical Questions, 2nd November 2010
In Health Topical Questions, Amber Rudd MP asked about supporting young mothers who have a record on negative health outcomes. The SS for Health, Andrew Lansley MP, highlighted the need for better community education strategies as well as ensuring the availability of long-acting reversible contraceptives. Russell Brown MP asked about HIV prevention in the new Public Health White Paper. The SS remarked that the White Paper had not been published; however, there would be a strategy for improving sexual health services. Annette Brooke MP asked for cervical screening to take place from 20 years; the Minister stated that cervical screening uptake rates must increase to ensure early diagnosis.

Please find enclosed Hansard extract as appendix 156

British Charities (Funding), 17th November 2010
Dr Daniel Poulter MP asked DFID about ODA funding and called for funding to make interventions on women’s health during delivery and childbirth, which account for over 50% deaths amongst women. The SS for ID stated that reproductive, maternal and newborn healthcare was the subject of a business plan being compiled, due to be published in January 2011. He reiterated that placing women’s choice over whether and when they have children is at the heart of all overseas programmes that DFID run.

Please find enclosed Hansard extract as appendix 157

HIV (Maternal Transmission), 17th November 2010
Bill Esterton MP and Katy Clark MP asked what steps DFID was taking to prevent mother-to-child transmission of HIV by 2015. The Minister stated the importance of family planning, combination drugs and funding and supporting the Global Fund.

Please find enclosed Hansard extract as appendix 158

PMQ: World AIDS Day, 1st December 2010
Stephen Williams MP asked the Prime Minister what the Government were doing to stem HIV infection rates at home and abroad. The Prime Minister reiterated the 0.7% of GNI commitment, and the funding from DFID for AIDS, as well as spreading the safe sex message at home.

Please find enclosed Hansard extract as appendix 159

HIV, 1st December 2010
David Cairns MP asked the Scotland Office what discussions they had had with colleagues to reduce the incidence of HIV in the UK, reiterating the fact that viruses do not respect national borders. The Minister stated he would add the issue to a forthcoming meeting with the Scottish Minister for Public Health.
Business Questions: FGM Act 2003, 16th December 2010
Valerie Vaz MP asked for an urgent debate on why there had been no prosecutions under the FGM Act 2003. The Leader of the House committed to raising the issue with the relevant Secretary of State and that the issue may also be raised in a forthcoming debate on women and human rights.

Education: Topical Questions, 20th December 2010
Fiona Bruce MP asked a topical education question on sex and relationships education and her concern that it could contribute to the early sexualisation of children. The SS for Education said there was a sensible balance to strike between protecting the innocence of young people and equipping them for the modern world. He believed sex education should be inclusive and rigorous and ultimately subject to parental veto.

Poverty Reduction (Africa), 12th January 2011
Richard Ottaway MP, Group Vice-Chair, asked about DFID’s policy on poverty reduction in Africa and the need for NGOs to address population growth as well as DFID programmes. The Minister reiterated the Government’s focus on the MDGs, the need for wealth creation, strengthening governance and security, improving the lives of women and girls and tackling climate change. He also referred to the recently published DFID framework for results for improving reproductive, maternal and newborn health. DFID was undertaking work with NGOs at an international, regional and national level to ensure women have reproductive health choices and to improve the quality and accessibility of services.

Fertility and Reproductive Health, 12th January 2011
Katy Clark MP, a Group Member, asked what discussions the Minister had had with international counterparts on the work of the Commission on Population and Development on fertility, reproductive health and development in 2011. She stressed the current largest ever number of people of reproductive age and the shortfall in funding for reproductive health and family planning. The Minister stated that he had regular meetings with international counterparts on the work of the Commission to ensure SRHR were included in international strategies. The recent framework for results on reproductive, maternal and newborn health emphasised increase access to family planning through the design of DFID programmes, following the bilateral aid reviews.

Business Questions: Medical Abortion, 13th January 2011
Jake Berry MP asked for a debate on any changes to the rules surrounding medical or two-pill abortions, particularly the role of medical professionals in these procedures. The Leader of the House referred to the case initiated by the British Pregnancy Advice Service (BPAS) that was due to go to the High Court. The Government’s view was that, under present legislation, what BPAS wants to do would be illegal, but the final decision would rest with the courts.

PMQ: Stillbirths, 2nd February 2011
Thomas Docherty MP raised the 4,000 stillbirths annually in the UK with the Prime Minister and asked for a guarantee that research into the causes of stillbirth would not be cut. The Prime Minister stated there would be no cut in NHS funding overall and that he would respond later on the specific issue raised.
Business Questions: DFID Budget, 10th February 2011
The Shadow Leader of the House, Hilary Benn MP, raised the issue of development funding at Business Questions, with specific reference to the part-payment of the Pope’s visit to the UK by DFID. The Leader of the House stated that the Catholic Church did a fantastic amount on aid to underdeveloped countries and it seemed right that was recognised in support given to the Pope’s visit.

India, 16th February 2011
Philip Davies MP asked about DFID’s policy on aid to India, stating that many people found such aid unacceptable when India spent huge sums on defence, a space programme and was developing its own overseas aid programme. The Minister said that focus in India was on three of the poorest states and half the programme would transition to pro-poor private sector investment. The Minister also made the point that there are more poor people in India than the whole of sub-Saharan Africa and focus would be particularly on the role of girls and women.

Sub-Saharan Africa (Midwives), 16th February 2011
Dr Daniel Poulter MP asked about DFID support for the training of midwives and maternal health specialists in sub-Saharan Africa and the disparity in services between rural and urban areas. The Minister stated that DFID supported training through bilateral programmes, NGOs and multilateral organisations such as the World Bank and the Global Fund. He also referred to a DFID supported scheme to train midwives in northern Nigeria.

Business Questions: RCOG and Department of Health, 17th February 2011
Nadine Dorries MP requested a debate on the relationship between the Royal College of Obstetricians and Gynaecologists (RCOG) and the Department of Health, given that two Department members were sitting on a working group into the care of women during abortion. The Leader of the House recognised Ms Dorries’ deep concern on the issue and stated he would pass her comments onto the SS for Health.

Public Health Duties, 8th March 2011
During a question on Public Health Duties, Nadine Dorries MP asked the Minister about the availability of accounts from Marie Stopes International, who provide some public health functions. The Minister stated that these were not directly matters for him as Marie Stopes was regulated by the Charity Commission. Annette Brooke MP asked about the protection of reproductive and sexual services in the new NHS framework. The Minister stated that responsibility for these services would be, respectively, the responsibility of the NHS commissioning boards and local authorities.

Health: Topical Questions, 8th March 2011
Simon Kirby MP asked at Topical Health Questions how the SS could ensure HIV and sexual health services receive sufficient local political attention. The SS for Health stated that local attention, through PCTs at present and in future through local authorities, was a means by which health could be improved. Pilot schemes were underway looking at opportunistic HIV screening to identify undiagnosed people.
**UN Women (Funding), 30th March 2011**
Lisa Nandy MP asked what criteria DFID would be using to assess the strategic plan for UN Women when determining its funding allocation and asked for the UK to provide adequate funding. The Minister stated that the multilateral aid review criteria would broadly be the assessment for UN Women’s strategic plan and stated that he believed the UK would be able to play a very full part in funding the new organisation. In answer to supplementary questions, the Minister reiterated the UK’s commitment to MDGs 4 and 5 on child and maternal health.

*Please find enclosed Hansard extract as appendix 173*

**Written Parliamentary Questions**
APPG on PD&RH members tabled a wide variety of SRHR/population written PQ’s throughout the year including PQs on:
- Family planning
- HIV/AIDS
- Infant and maternal mortality
- Maternity services
- Overseas aid
- UN organisations

Other MPs tabled written PQs on:
- Abortion
- Childbirth, maternity services and midwifery
- Chlamydia screening
- Contraceptives
- Family planning
- FGM
- Fertility treatment and In-Vitro Fertilisation (IVF)
- Overseas aid
- Population
- Sex education and sexuality
- SRHR NGOs
- Sexually Transmitted Infections (STI), human papillomavirus vaccine and cervical cancer
- Teenage pregnancy

**House of Lords (HoL)**

**Oral Ministerial Statements**
**G8 and G20 Summits, 28th June 2010**
Lord Strathclyde, Chancellor of the Duchy of Lancaster, repeated the Oral Ministerial Statement made earlier in the HoC on the G8 and G20 Summits in Canada. A short debate with interventions from front bench opposition spokespeople and backbenchers across the House followed with several references made to maternal health, overseas development aid spending and maternal morbidities.

*Please find enclosed HoL Hansard as appendix 174*

**International Aid Reviews: Conclusions, 1st March 2011**
Baroness Verma repeated the Oral Ministerial Statement made earlier in the HoC on the conclusion of DFID’s international aid reviews. A short debate followed, with contributions on funding to UN Women, the overseas aid pledge and maternal health.
Debates

**Debate on the Address (Second Day) Defence and Foreign Affairs, 26th May 2010**

Lord Howell of Guildford, the Minister for Foreign and Commonwealth Affairs, opened the second day of the debate on the Queen’s Speech, on the subject of defence and foreign affairs. During the wide ranging debate, reference was made to overseas aid, the importance of women and girls in development, aid effectiveness, HIV/AIDS, health workers and maternal mortality. Baroness Flather, Hon. Secretary of the Group, spoke about population, women's rights, family planning, the Catholic Church's teachings on contraception, abortion and HIV prevention in the developing world. In summing up, Lord Astor of Hever for the Government stated the centrality of women in DFID’s aid programmes and support for investment in family planning.

**China: EU Committee Report, 9th June 2010**

Lord Teverson introduced a debate on the broad relationship between Europe and China. During the debate, Lord Alton of Liverpool, spoke about the consequences of China’s one-child policy and the sex ratio in China and questioned MSI’s funding from DFID.

**Zimbabwe, 10th June 2010**

Lord St John of Bletso introduced a general debate on Zimbabwe, during which he touched on the rights of women and the small number of women in public life. During the wide ranging debate, reference was made by other speakers to homophobia in Zimbabwe, the impact of the HIV epidemic and the dearth of health workers.

**International Development: Universal Primary Education, 22nd June 2010**

Baroness Verma introduced a general debate on development and universal primary education. Speakers referred to the problem of gender disparity, the role of education in delaying early motherhood and choosing family size and maternal mortality.

**Women in Society, 21st July 2010**

Baroness Verma introduced a debate on the position of women in the UK and overseas, referring to the Muskoka initiative on maternal, newborn and under 5 child health and the need to focus on women’s rights. A wide ranging debate followed with a large number of contributions. Issues raised included FGM, sexual violence, population growth, sex and relationship education, family planning, female feticide and early marriage.

**Millennium Development Goals, 7th October 2010**

Lord Chidgey initiated a short debate on progress towards meeting the MDGs, stating that maternal mortality continues to be at the rate of one death in every 200 births. Baroness Jenny Tonge, Chair of the Group, spoke about the Group’s Hearing Report on population and the need for comprehensive family planning, available to all. Other contributions mentioned girls and women impregnated through rape, gender inequality, the role of women, sexual health and the Catholic Church, health workers, maternal morbidities and contraceptive availability. In summing up, the Minister reiterated the Government’s commitment to reproductive, maternal and newborn health and to ensuring 10 million more couples gain access to family planning.
**Human Trafficking, 14th October 2010**
Baroness Massey of Darwen, a Group Officer, introduced a debate on human trafficking to mark anti-slavery day on 18th October. A number of Peers contributed to the debate, touching on sexual violence and exploitation and the need for trafficking prevention measures.

*Please find enclosed HoL Hansard as appendix 182*

**Strategic Defence and Security Review, 12th November 2010**
A number of Peers spoke during the Strategic Defence and Security Review debate on the impact of conflict on development and the increase in the aid budget allocated to conflict-affected and fragile countries. Group Chair, Baroness Jenny Tonge, expressed concern that a proportion of ODA would be allocated to security and defence. The Minister stated in his summing up that by 2015 one third of the aid budget would be spent on conflict prevention. If the root causes of conflict were not tackled, far more would be spent in the future on dealing with the consequences. Every £1 spent on conflict prevention generates more than £4 in savings on conflict response.

*Please find enclosed HoL Hansard as appendix 183*

**Population Growth, 13th December 2010**
Lord Hodgson of Astley Abbotts introduced a debate on the implications for the UK of future world population growth. Lord Rea, an Officer of the Group, referred to the Group’s 2007 Population Growth report and the need for economic growth, female education and contraceptive supplies to combat rapid global population growth. Baroness Flather, Hon. Secretary of the Group, spoke about the need for family planning and the need for women to wield economic power. Baroness Jenny Tonge, the Group’s Chair addressed the impact of increasing population on natural resources, conflict and migration and emphasised the importance of reductions in consumption and of access to contraception. Other Group Members spoke about DFID’s need to refocus on family planning and the empowerment of women. Baroness Verma, responding for the Government made it clear that there was no UK support for coercive programmes, but the UK was proud to revitalise efforts to give women the choices they crave on whether, when and how many children they have. If renewed emphasis was not given to reproductive and maternal health outcomes and family planning investment, UN population projections would stand at around 11 billion for 2050. The UK currently procured 40% of Uganda’s national requirement for family planning and was planning a broader programme with UNFPA.

*Please find enclosed HoL Hansard as appendix 184*

**NHS: Global Health, 20th December 2010**
Lord Crisp introduced a short debate on including global health in the education of all health professionals. He argued that global health education creates better health professionals, who are better able to care for people in the UK. He requested more help for trainee doctors to spend some training time abroad and for more work to be done with education providers on global health. Lord Patel, a Group Member, spoke about the work of UK health practitioners overseas on obstetric fistula and the need for joint working between DFID and the Department for Health. Baroness Jenny Tonge, Group Chair, spoke about her experiences of visiting AIDS wards in Malawi and the moral imperative for the NHS, which has benefitted for many years from overseas workers, to pay back that benefit, by making it easier for junior doctors and trainee nurses to spend time working in the developing world.

*Please find enclosed HoL Hansard as appendix 185*

**Health: Maternal Health, 12th January 2011**
Lord Patel, a Group Member, initiated a debate asking how the Government proposed to meet MDG 5 on maternal health and morbidity. He referred to the fortuitous recent publication of the DFID framework on improving maternal health. He also cited the large number of women who die of treatable and preventable conditions and the lack of skilled attendance at birth and made
specific reference to obstetric fistula. A large number of Peers contributed to the debate; issues raised included the importance of a vibrant press for education, user fees for healthcare, future demographic patterns, the growing adolescent birth-rate, trained healthcare workers, unsafe abortion, education for men, gender inequity and family planning. Baroness Jenny Tonge, Chair of the Group, referred Peers to the Group’s Hearing Report ‘Better off Dead?’ and asked how DFID would be monitoring their new framework.

Please find enclosed HoL Hansard as appendix 186

**Violence Against Women, 13th January 2011**
Baroness Gould of Potternewton, a Group Officer, initiated a debate on Violence Against Women, referring to the scale of the problem and the need for prevention. Peers referred in the debate to forced marriage, FGM, rape, sexual violence in conflict areas, violence against widows, learned behaviour of children in violent situations and trafficking.

Please find enclosed HoL Hansard as appendix 187

**Human Fertilisation and Embryology Authority (HFEA)/Human Tissue Authority (HTA), 1st February 2011**
Baroness Thornton introduced a debate on the proposed abolition of the HFEA and HTA, arguing the essential need for the ethical responsibilities both organisations currently shoulder. A number of contributions were made arguing for and against the abolition and reform of these authorities. The Minister stated that he was not rushing the process through Parliament, however the Government were clear that a more joined-up system needed to be formed.

Please find enclosed HoL Hansard as appendix 188

**International Women’s Day, 3rd March 2011**
Baroness Gould of Potternewton, a Group Officer, initiated the annual International Women’s Day debate. As ever, a wide range of issues were covered including maternal health, family planning, UN Women, trafficking, the MDGs, sexual violence and rape as a weapon of war, cervical cancer and street children.

Please find enclosed HoL Hansard as appendix 189

**Oral Parliamentary Questions**

**China: Aid, 8th April 2010**
Baroness Morris of Bolton asked the Government how much had been spent on aid to China, questioning doing so when China is such a large economy. Lord Brett, answering for the Government, stated that the average aid to China was £34.5million per year over the past five years and that the International Development Select Committee in the HoC had stated that limited resources had been used to maximum effect. He also explained that 450 million Chinese citizens live on less than $2 a day and 200 million on $1.25 or less. Lord Alton of Liverpool questioned funding to UNFPA and IPPF in light of the one-child policy in China.

Please find enclosed HoL Hansard as appendix 190

**Human Fertilisation and Embryology: Regulation, 13th October 2010**
Baroness Deech asked the Government about their plans for the future regulation of human fertilisation and embryology. Earl Howe, the Parliamentary Under Secretary of State at the Department of Health, stated that the Government was looking to streamline healthcare regulation and the functions of the HFEA would transfer to other bodies by the end of the Parliament. A number of interventions followed both for and against the Government’s proposed plans.

Please find enclosed HoL Hansard as appendix 191
Violence Against Women, 25th November 2010
Lord Brooke of Alverthorpe asked the Government what action they had taken to reduce violence against women and whether funding for independent advisors on violence against women and girls would be extended. Baroness Verma, responding for the Government, stated that ending all forms of violence against women was a key priority and that £28 million had been provided for specialist services. Baroness Kinnock of Holyhead asked the Minister whether efforts could be coordinated without a Minister with specific responsibility for violence against women internationally and Baroness Rendell enquired about the action the Government was taking to end FGM in the UK. Baroness Verma stated that the Ministry of Defence (MoD), Foreign and Commonwealth Office (FCO) and DFID took seriously the issue of prioritising the role and position of women and that work was ongoing on FGM.

Please find enclosed HoL Hansard as appendix 192

International Aid, 29th November 2010
Lord Sheikh asked about the proportion of ODA spent through international bodies and plans for change. Baroness Verma, responding for the Government, stated that in 2009-10 62% of DFID’s aid budget was spent through multilateral organisations and that reviews of bilateral and multilateral spending were currently underway. Additional questions asked about ODA through the EU, the effectiveness of aid and reform of multilateral institutions, notably the World Bank and IMF.

Please find enclosed HoL Hansard as appendix 193

UN Women, 10th January 2011
Baroness Prosser asked the Government about proposed funding to UN Women and the effectiveness of aid spent on women and girls. Baroness Northover, responding for the Government stated that the UK welcomed the establishment of UN Women and a decision would be made on funding at the conclusion of the multilateral aid review. She agreed that supporting women and girls was central to development as 70% of those in dire poverty were women. Supplementary questions were asked regarding the structure of UN Women and tackling violence against women in conflict and humanitarian situations.

Please find enclosed HoL Hansard as appendix 194

International Development Aid, 7th February 2011
Lord Sheikh asked what action the Government were taking to focus aid on fragile and conflict affected areas and achieve the MDGs. Baroness Verma, for the Government, said that focussing aid on fragile and conflict affected states was central to development efforts and that was because no fragile state has yet achieved a single MDG. Supplementary questions were asked on the Pope’s visit, consultation on UK ODA spending, stabilisation response teams, health infrastructure in Sri Lanka and the education of girls.

Please find enclosed HoL Hansard as appendix 195

Pope Benedict XVI: State Visit Funding, 10th February 2011
Baroness Kinnock of Holyhead asked when the decision was taken to transfer £1.85 million from the DFID budget to the FCO to pay towards the cost of the state visit by Pope Benedict XVI and who took the decision. Lord Howell of Guildford, Minister at the FCO, stated that Ministers agreed in March 2010 the cost of the papal visit falling to government should be funded from the departmental budgets of the six interested departments involved in the planning process and the Treasury worked out the formula for the division of costs between departments. He further explained that funding came from the running costs budget of DFID. In answer to a question from the Countess of Mar, the Minister stated that no other head of state visit had been funded in such a manner, but this was a unique visit so had no basis of comparison.

Please find enclosed HoL Hansard as appendix 196
Afghanistan: Women’s Shelters, 30th March 2011
Baroness Hussein-Ece asked what representation the UK Government had made to the Government of Afghanistan about recent proposals to take control of women’s shelters. Lord Howell of Guildford, responding for the Government stated that the UK had expressed its concern to the Afghan Government and continued to monitor the issue closely. Concerns were raised because it appeared the Afghan Government were seeking to control women’s centres in rather draconian ways. Supplementary questions were on the situation of Afghan women, resources available at the British Embassy for contact with Afghan women and future monitoring of the status of women in Afghanistan.

Please find enclosed HoL Hansard as appendix 197

Written Parliamentary Questions
APPG on PD&RH members tabled a range of SRHR/population written PQ’s throughout the year including PQs on:

- Contraception
- Family planning
- Fertility and NICE
- Health workers overseas
- Infant and child nutrition
- Maternal mortality
- Overseas aid
- Rape in conflict
- Sex education

APPG ON PD&RH – DEPARTMENT FOR INTERNATIONAL DEVELOPMENT MEETINGS, CONSULTATIONS/PUBLICATIONS AND CORRESPONDENCE

Soon after the General Election in May 2010 the UK Coalition Government set out its programme for International Development.

For MDG 5, the most off-track MDG, the UK Government promised to slash the number of women who die in pregnancy and childbirth and increase access to family planning.

The Government committed to doubling the number of lives of women and babies saved through UK aid by 2015 and as a result at least 50,000 more women and 250,000 babies should survive and 10 million more couples should get access to family planning. The Government also promised to challenge other countries – both donors and developing nations – to do more in the area of family planning and SRHR.

Since the General Election, Group members and advisor have met and spoken both formally and informally at meetings, briefings and consultations with DFID’s new ministerial and civil servant teams.

The new DFID ministerial team is:

Andrew Mitchell MP, SS for ID
Alan Duncan MP, Minister for ID
Stephen O’Brien MP, PUSS for ID
Baroness Verma, HoL spokesperson on ID – Baroness Northover, HoL (since autumn 2011)

The Group sent congratulation letters to ministers on their new appointment with an introduction to the Group and its activities soon after the General Election.
DFID’s AIDS and Reproductive Health Team, Human Development Group continue to be the Group’s focal point within DFID with Julie Bunting as the team leader, Jerry Ash as deputy team leader, Sandra MacDonagh as technical advisor and Scott Hardie as the policy officer.

Meetings/Consultations/Publications

DFID's Framework for result for improving reproductive, maternal and newborn health in the developing world - choices for women: planned pregnancies, safe births and healthy babies.

DFID consulted on its new Business Plan for reproductive, maternal and newborn health this year. They called for development practitioners, health professionals and all those interested to share their views and advice on how the UK can help improve reproductive, maternal and newborn health in the developing world.


Please find enclosed communications as appendix 199

On 29th September 2010 DFID invited interested stakeholders to a consultation meeting co-hosted with RCOG and the UK Network for SRHR, to further assist them in the development of the new business plan.

Andrew Mitchell MP, SS for ID opened the meeting. A summary of discussions and recommendations at the meeting were sent to DFID by the UK SRHR Network.

Please fine enclosed invitation, agenda and UK SRHR Network summary response as appendix 200

The new business plan was finally published in December 2010 entitled: UK’s new Framework for Results for improving reproductive, maternal and newborn health in the developing world - choices for women: planned pregnancies, safe births and healthy babies.

A summary of the framework can be found below:

Promises by 2015:

- Save 50,000 pregnant women’s lives
- Save 250,000 newborn babies
- Enable at least 10 million more women to use modern Family Planning – contributing to a wider global 100 million users
- Prevent 5 million unintended pregnancies
- Support at least 2 million safe delivery....reaching the poorest 40 %
- DFID provide additional average £740 million for Maternal, Newborn and Child Health from 2010 to 2015

Overarching framework:

- Reach marginalisation populations including the poorest, adolescents, HIV or disabilities/Populations affected by conflict and crises....accelerate progress in regions, countries and areas with high burdens and with little or no progress
- Will address high impact, neglected issues that other donors will not or cannot address
- Prioritise family planning and abortion services
- Tackle barriers to health care
- Support for removal of user fees: ‘where appropriate we will help countries remove fees’ via cash transfers/cash incentives/vouchers or subsidised family planning and note that transport can be 50% of total cost and voucher scheme results still emerging
- General health systems strengthening including human resources for health
- Task shifting ok for essential coverage
• Support Health Workforce Code of Practice
• 24 hr services needed
• Girls education and empowerment with family planning...reduce unwanted fertility and slow population growth – environment- climate change, migration
• Link SRHR with MDGs i.e. poverty eradication
• Cost –benefit analysis important as cheaper to prevent than to treat
• Drugs/family planning low budget but will increase
• Long-term predictable financing for delivery of services – and a key pillar is the expansion of service delivery
• Embed UK support in national plans, programmes and budgets i.e. no vertical programmes
• Delivery of services through both public and private sector
• Tackle violence against girls, educate to lower secondary level to ensure later marriage of girls and subsequent later childbirth - Ethiopia good case study
• New Health Partnership Scheme launched by Prime Minister June 2010 to strengthen links between UK Health community and counterparts in the developing world...these funds: institution partnership whereby an NHS organisation links to a counterpart in developing countries, volunteering to help UK Health Professionals wanting to spend 6 months. or more sharing their skills and experience overseas etc.
• Cross Whitehall working strengthened ...DFID and Foreign Office
• Improve data which is essential for planning, management and reporting on progress

Results:
• Empowerment of women and girls
• Remove barriers to quality services and commodities including family planning
• Expand quality services family planning, abortion, antenatal, safe delivery, Emergency Obstetric Care (EOC), post natal care and newborn care – public and private
• Enhance accountability

Indicators:
• Maternal Mortality Rate
• Neonatal Mortality Rate
• Family planning users - of poorest 40% of population and young women 15-19 years of age
• Number of unintended pregnancies prevented
• Number of safe deliveries i.e. births with skilled personnel...poorest 40% especially.
• Disaggregated data that track changes in the lives of poor and marginalised groups are important
• Number of health workers per 10,000 population by rural/urban area
• Number of functioning health facilities with EOC...with 5 facilities per 500,000 population
• 14 selected essential medicines in public and private health facilities (plus some from WHO additional list for family planning methods and maternal health supplies)
• % live birth by Caesarean Section (5-15% WHO recommendation)
• Infants exclusively breastfed
• Anti retrovirals for pregnant women to prevent mother-to-child transmission
• % of births under 18 years of age
• % post natal checks
• % of satisfied clients
• % clean birth including functioning facilities with water and sanitation
• % receiving 2 doses of anti-malaria during antenatal visits
• % body mass outside normal range
• Empowerment indicators under development

DFID priority countries/likely to work with are:
• Significant support to bilateral programmes where need is greatest and UK considers it can add the most value, within the portfolio of UK focus countries to be determine in 2011 but likely to be: Nigeria, DRC, Ethiopia, Kenya, Somalia, S. Africa, Malawi, Zimbabwe, Ghana, Zambia, Sierra Leone, India, Pakistan, Bangladesh, Nepal, Burma and Cambodia.

Financing will be more predictable and long term with a greater focus on results and innovative approached to financing and delivery.

More efficient and effective delivery will be needed from UNFPA (commodity especially, data country policies...social justice etc), WHO, UNICEF, World Bank, EC (aid coordination and health policy coherence
and attention to reproductive maternal and neonatal health, gender equality, poorest countries to deliver MDGs (DFID channelled 1/5 of its budget in 2008 to EC) and the Global Fund will play a critical roles...review multilateral will be ready in early 2011.

NGOs will play an important role. Support via Programme Partnership arrangements, country programmes, Civil Society Challenge Fund and networks including SRHR network, manifesto for motherhood and WRA.

DFID will work closely with the Bill and Melinda Gates Foundation and the Australian Government.

Monitoring and Evaluation:

- Detailed evaluation framework will be developed mid 2011
- Mid-term review of Framework for Results will be published end 2013
- Full evaluation will be published end 2015

The new Framework was well received by Group members as well as the SRHR NGO community.

Please find enclosed front and contents page as appendix 201

**DFID Select Committee meeting with Andrew Mitchell MP, SS for ID, HoC, London**

DFID Select Committee took evidence from Andrew Mitchell MP, SS for ID on 21st October 2010. At the meeting the Andrew Mitchell MP, SS for ID reiterated DFID’s commitment to allocating 30% of ODA to support fragile and conflict-affected states and tackle the drivers of instability. He said the Government would follow the OECD rules on what counts as ODA.

Please see below OECD definitions and codes for conflict prevention and resolution, peace and security:

<table>
<thead>
<tr>
<th>DAC 5 CODE</th>
<th>CRS CODE</th>
<th>DESCRIPTION</th>
<th>Clarifications / Additional notes on coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>152</td>
<td></td>
<td>Conflict prevention and resolution, peace and security</td>
<td>N.B. Further notes on ODA eligibility (and exclusions) of conflict, peace and security related activities are given in paragraphs 41-46 of the DAC Statistical Reporting Directives.</td>
</tr>
<tr>
<td>15220</td>
<td></td>
<td>Civilian peace-building, conflict prevention and resolution</td>
<td>Support for civilian activities related to peace building, conflict prevention and resolution, including capacity building, monitoring, dialogue and information exchange. Bilateral participation in international civilian peace missions such as those conducted by the UN Department of Political Affairs (UNDPA) or the European Union (European Security and Defence Policy), and contributions to civilian peace funds or commissions (e.g. Peacebuilding Commission, Peacebuilding thematic window of the MDG achievement fund etc.). The contributions can take the form of financing or provision of equipment or civilian or military personnel (e.g. for training civilians). (Use code 15230 for bilateral participation in international peacekeeping operations).</td>
</tr>
<tr>
<td>15230</td>
<td></td>
<td>Participation in international peacekeeping operations</td>
<td>Bilateral participation in peacekeeping operations mandated or authorised by the United Nations (UN) through Security Council resolutions, and conducted by international organisations, e.g. UN, NATO, the European Union (Security and Defence Policy security-related operations), or regional groupings of developing countries. Direct contributions to the UN Department for Peacekeeping Operations (UNDPKO) budget are excluded from bilateral ODA (they are reportable in part as multilateral ODA, see Annex 2 of DAC Directives). The activities that can be reported as bilateral ODA under this code are limited to: human rights and election monitoring;</td>
</tr>
</tbody>
</table>
reintegration of demobilised soldiers; rehabilitation of basic national infrastructure; monitoring or retraining of civil administrators and police forces; security sector reform and other rule of law-related activities; training in customs and border control procedures; advice or training in fiscal or macroeconomic stabilisation policy; repatriation and demobilisation of armed factions, and disposal of their weapons; explosive mine removal. The enforcement aspects of international peacekeeping operations are not reportable as ODA.

**ODA-eligible bilateral participation in peacekeeping operations** can take the form of financing or provision of equipment or military or civilian personnel (e.g. police officers). The reportable cost is calculated as the excess over what the personnel and equipment would have cost to maintain had they not been assigned to take part in a peace operation.

International peacekeeping operations may include humanitarian-type activities (contributions to the form of equipment or personnel), as described in paragraphs 184 and 185 of DAC Directives. These should be included under code 15230 if they are an integrated part of the activities above, otherwise they should be reported as humanitarian aid.

NB: When using this code, indicate the name of the operation in the short description of the activity reported.

It is noteworthy that code 15220 and 15230 include funding military personnel.

Baroness Jenny Tonge raised her concerns about UK ODA being diverted to military personnel at the 12th November HoL debate and via written PQs in July 2011 available on the Group’s website.

Below is an extract of the 12th November 2010 HoL ‘Strategic Defence and Security Review’ debate:

*B Baroness Tonge: ...I welcome the emphasis to aid to fragile states and the announcement that it will be donated according to the OECD guidelines for aid drawn up in 2005. However, I note that under the previous Government DFID scaled up its aid to fragile states and more than doubled its support over the past five years, spending £1 billion, or 46 per cent, of its bilateral expenditure in 2007-08, and in 2009-10 spending 61 per cent, or £1.6 billion, of country-specific bilateral assistance in the fragile states. So excuse me for asking the Minister why it is now trumpeted that DFID will spend 30 per cent of ODA to support fragile states in conflict areas. We need some clarification; what is new here? What worries me is that DFID’s core mandate of development and poverty reduction will lose out and a large proportion of ODA will be diverted to security and defence…

**DFID and APPG on PD&RH Annual Meeting, HoC, London**
The Group met with Andrew Mitchell MP, SS for ID on 17th November 2010 with the following agenda:

- Secretary of State for International Development’s vision for family planning and SRHR
- Ambition for family planning and SRHR within DFID programme (and internationally) including policy papers
- UN Secretary General’s MDG Review Summit - particularly in relation to the joint effort on women and children’s health
- Resources - including the Global replenishment
- What can the Group do to support the SS for ID ambition both domestically but also internationally through various parliamentarians’ fora?
In attendance were:
Andrew Mitchell MP, SS for ID
Private Secretary to SS for ID
Jerry Ash, Deputy Team Leader
Jo Nicholls, Maternal Health adviser
Nel Druce, SRH adviser
Baroness Jenny Tonge
Geoffrey Clifton-Brown MP
Pauline Latham MP
Lord Joffe
Lord Rea
Baroness Flather
Lord Watson of Invergowrie
Kari Mawhood, Assistant to the APPG

Baroness Jenny Tonge opened the meeting, thanked the SS for ID for making time to see the Group and gave a brief history of the Group, its membership and aims. Discussions followed as per agenda with a question and answer session at the end.

Please find enclosed correspondence with SS for ID and minutes of meeting as appendix 202

**DFID’s Policy Position Paper on Safe and Unsafe Abortion**
DFID launched its updated Policy Position Paper on Safe and Unsafe Abortion on 20th December 2010. The paper highlighted what DFID was prepared to support and the rationale for doing so.

The Executive Summary reads:
Women and adolescent girls must have the right to make their own decisions about their sexual and reproductive health and well being, and be able to choose whether, when and how many children to have.

We do not support abortion as a method of family planning – indeed we are working to increase access to modern methods of family planning (which would ultimately reduce demand for abortion).

Safe abortion reduces recourse to unsafe abortion and saves maternal lives.
We do not enter the ring on the rights and wrongs of abortion, but in countries where abortion is permitted, we can support programmes that make safe abortion more accessible. In countries where it is highly restricted and maternal mortality and morbidity are high, we can help make the consequences of unsafe abortion more widely understood, and can consider supporting processes of legal and policy reform.

**Key Facts**
- 215 million women who want to delay or avoid a pregnancy are not using an effective method of family planning.
- Worldwide, there were an estimated 21.6 million unsafe abortions in 2008. Nearly all were in developing countries;
- Unsafe abortion accounts for 13% of all maternal deaths;
- Where effective contraception is available and widely used the rate of abortion declines, but nowhere has it reached zero;
- Unsafe abortion is most common in countries where abortion is prohibited or permitted only in highly restricted circumstances;
- Death from unsafe abortion is rare in countries where abortion is permitted and quality, affordable services are available.

All members received information about the re-launch with above summary.

Please find enclosed front and contents pages as appendix 203

**DFID’s Bilateral and Multilateral Aid Review 2010 - 2011**
DFID conducted bilateral and multilateral Aid Reviews in 2010 – 2011 that were published on 1st March 2011.
Multilateral agencies were judged on their organisational strengths and contribution to UK development objectives with these indices determining each multilaterals' score and 'value for money' to the UK. Key results include the high scores achieved by UNICEF, the GAVI Alliance, and the Global Fund.

UNFPA received an adequate score:
UNFPA has a critical role in advancing MDG 5 (maternal health), a priority for the coalition government, and works well with partners to advance this agenda. However, UNFPA urgently needs to:
- Improve its delivery at the country level, which is variable
- Strengthen results reporting, transparency and demonstrate the value for money of its interventions
- Improve financial management and address all outstanding audit issues

The bilateral Aid Review concluded with significant increases in Britain's aid commitments to several countries including Pakistan, Nigeria, Kenya, the Democratic Republic of Congo, Yemen and Ethiopia. As a result of these increases, Pakistan is set to become DFID's biggest aid programme, followed by Ethiopia. A freeze in aid to India means that the country, previously the largest recipient of UK aid, will fall to third place.

Overall the report signified a reduction in the amount of countries Britain supports bilaterally from 47 to 27. Iraq, Vietnam, China and Russia were among those countries that will see a withdrawal of DFID funding.

The Secretary of State hosted a "drop in session" for MPs/Peers on Tuesday 1st March to discuss the Reviews.

Baroness Jenny Tonge attended and again raised her concern in relation to the 30% of UK ODA being potentially directed to military personnel.

All Group members received family planning/SRHR extracts from the Aid Review entitled: Changing lives, delivering results as follows:

**Bilateral AID Review**

*The Future of UK Aid:*

To change lives and deliver results, DFID will:
- Save the lives of 50,000 women in pregnancy and childbirth
- Help 10 million more women get access to modern family planning

DFID will make UK aid work better by investing in girls and women – in every area of their work, from education to mother and child health.

Introduction:
- Every year, more than a million children lose their mothers, because not enough women get proper care during pregnancy and childbirth
- DFID will invest more in girls and women – who, in turn, will invest in their families and communities

Getting the rights results from their aid:
- DFID will help to deliver vitamins and minerals, and support mothers to breastfeeding
- DFID also know that getting girls into school begins a chain reaction of further benefits. Educated women have better maternal health, fewer and healthier children and increased economic opportunities also more likely to send their own children to school – creating a virtuous circle of opportunity and prosperity
- For example, in Ghana, DFID will provide 60,000 grants for girls’ education, support school-based counsellors to tackle sexual harassment and abuse of girls, and increase the number of female teachers
- Complications during pregnancy and childbirth claim the lives of a thousand girls and women every day in some of the poorest countries around the world – that's a woman dying every 90 seconds, roughly the time it takes to read this page. In the minutes and hours surrounding childbirth women and babies are at the greatest risk. Yet each year 50 million women give birth without skilled care or support
• Good health is a basic starting point for people who are trying to pull themselves out of poverty. Building healthcare systems is essential to saving lives and allows a little aid to make a long term difference

Create quality healthcare:
• DFID will help millions more people live longer and healthier lives by training more doctors and nurses and providing more and better medicines. DFID will support countries to develop the necessary institutions and resources, backed by the funding to ensure good quality healthcare is available to those people who need it most, when they need it. For example, in Mozambique DFID will support the government to double the number of doctors nationwide by 2015

Give choice to women:
• Globally, 215 million women who want to delay or avoid a pregnancy have no access to an effective method of family planning. DFID will help at least ten million more of these women get access to modern methods of family planning by 2015. In Ethiopia, we are helping to provide more than half a million sets of contraceptive implants. DFID are also supporting training for more than 600 health workers to deliver family planning services and counselling to hard to reach communities

Ensure safe pregnancies and births:
• Over the next four years DFID will double the number of maternal, newborn and children’s lives saved by UK aid and will support at least two million women to deliver their babies safely with skilled midwives, nurses and doctors. The maternal health services that pregnant girls and women need are often too expensive or too far away for them to access. DFID will work hard to break down these barriers and will ensure that vital interventions and healthcare are available to the women and newborns who need them most
• In Madhya Pradesh, one of the poorest states in India, a fleet of specially equipped vehicles is reaching women in the most remote areas. The specialised ambulance service, known as the Janani Express, takes pregnant women to hospital round the clock so they can give birth safely. Through simple and effective projects like this DFID will help half a million mothers give birth more safely in India
• In Bangladesh, DFID will support eight million women with legal help to resolve disputes over issues such as dowries, land and inheritance. And in Sierra Leone, DFID are supporting the development of legislation to protect women from violence; DFID have introduced the UK Aid Transparency Guarantee which.....will educate more children, improve healthcare and help the private sector to push forward development. To help DFID cut back on red tape, DFID will make more use of cash transfers – providing aid directly to those most in need so they can spend it on pressing priorities first. Studies have shown this leads to people paying for food, education and healthcare

Paper on Bilateral Aid Review results: Country summaries:
Bilateral programmes in the following countries will come to an end:
Angola, Bosnia and Herzegovina, Burundi, Cameroon, Cambodia, China, Gambia, Indonesia, Iraq, Kosovo, Lesotho, Moldova, Niger, Russia, Serbia and Vietnam.

Some will close immediately, others will close over the next five years as the countries graduate from UK aid. This will allow us to concentrate our resources and impact in 27 countries: Afghanistan, Bangladesh, Burma, Democratic Republic of Congo, Ethiopia, Ghana, India, Kenya, Kyrgyzstan, Liberia, Malawi, Mozambique, Nepal, Nigeria, Occupied Palestinian Territories, Pakistan, Rwanda, Sierra Leone, Somalia, South Africa, Sudan, Tajikistan, Tanzania, Uganda, Yemen, Zambia and Zimbabwe.

• Concentrate our efforts where the need is greatest: the 27 countries account for three quarters of global maternal mortality and nearly three quarters of global malaria deaths
• Focus on the most vulnerable people: especially girls and women who suffer disproportionately from the effects of poverty
• Increase our work in sectors that make a real difference to people’s lives: meeting basic needs like healthcare, immunisation, water, sanitation, hygiene and education is vital in the battle against poverty

Maternal, reproductive health and family planning are listed as top priorities in literally all country summaries.
Multilateral Aid Review:

All organisations below scored adequate in value for money except the Global Fund. Scoring adequate according to DFID means they are performing roles critical for UK objectives, but with important weaknesses in key performance areas. DFID will continue funding these organisations on the back of a commitment to undertake the necessary reforms.

EC:

The EC budget contribution is a treaty obligation. Negotiations on the next long term funding framework will start in 2011. DFID’s priorities will include: a more results-based approach to aid, more flexible procedures and decentralised financial decision-making, more transparent allocation criteria, an improved ability to recruit and maintain development expertise, and demonstrated progress on investing in girls and women.

UNAIDS:

UNAIDS fills critical gaps in advocacy, coordination and leadership on HIV/AIDS and Work’s well with partners. However, UNAIDS urgently needs to:-

• Improve its coordination role at the country level
• Scale up its technical leadership on HIV/AIDS and improve co-sponsors’ accountability for results
• Strengthen results reporting and cost control

WHO:

WHO provides global leadership and convening power on development and humanitarian health issues. It is critical to the delivery of the MDGs, including reproductive, maternal and newborn health and malaria. However, the review found that WHO must urgently:-

• Focus on its comparative advantage, including at the country level
• Improve reporting of results and impact of interventions
• Improve its cost effectiveness and better manage poorly performing projects.

UN Women:

The UK is a strong supporter of UN Women and played a leadership role in its establishment. UN Women has the potential to drive a much more effective response to gender inequality across the UN system. DFID will work with UN Women’s leadership to address the weaknesses the review identified in UNIFEM. While UNIFEM had an important role in meeting UK objectives it was not focused on results. UN Women needs to ensure it is results-orientated from the outset and develops a strong strategic and performance based management system, that demonstrates results at the country level. UN Women also needs to show strong leadership in the UN system, and must build on UNIFEM’s partnership work and good track record of working on women’s role in peace building.

Correspondence

G8/G20 and MDG Review Summits

In the lead up to the G8/G20 Summit in June 2010 and MDG Review Summit in September 2010 the Group wrote to the Prime Minister and SS for ID asking the UK Government to work to ensure that the Summit outcome documents called for family planning and reproductive health services to be made available and affordable to all and adequately funded.

Favourable replies were received, reiterating the new Government’s commitment to family planning and maternal health.

Please find enclosed correspondence as appendix 204

Written PQs were also tabled in the lead up to the MDG Review Summit as follows:

Richard Ottaway: To ask the Secretary of State for International Development whether his Department is taking steps to ensure that the composition of the advisory committee for Millennium Development Goal 5 on maternal health at the MDG+10 Summit is balanced in respect of (a) gender and (b) geographical representation.

Mr Andrew Mitchell: The UN Secretary General’s MDGs Advocates Group was established in June 2010 to galvanize support for the MDGs. The group consists of eminent personalities who have shown outstanding leadership in promoting the implementation of the goals. The UK pressed for the inclusion of women and Southern representatives. Currently there are no female advocates working exclusively on
MDG5, however a number of women, including southern representatives are working on MDG3 on gender equality and across the other MDGs.

Richard Ottaway: To ask the Secretary of State for International Development what steps his Department is taking to ensure that the MDG+10 summit outcome document upholds internationally-accepted human rights standards.

Mr Andrew Mitchell: DFID played an active role in negotiating the outcome document, which provides an action framework for the achievement of the Millennium Development Goals by 2015, focusing global efforts over the next five years towards the achievement of basic human rights, such as access to health care and primary education. During negotiations DFID pushed for a clear focus on results and accountability, which are essential to upholding human rights standards. This was included in the document and my Department will ensure the momentum generated at the summit is carried forward. DFID will play an active role in the annual review mechanism in the Economic and Social Council (ECOSOC) and in other international fora, such as the G20. The outcome document can be accessed on the DFID website at: http://www.DFID.gov.uk/Media-Room/News-Stories/2010/Outcomes-from-the-MDG-Summit/

Richard Ottaway: To ask the Secretary of State for International Development what steps his Department is taking to ensure that the MDG+10 Summit outcome document calls for reproductive health services to be made publicly available and affordable to all non-discriminatory, non-coercive, sensitive to age and lifestyle and adequately funded.

Mr Andrew Mitchell: The outcome document stresses the need to focus on the Millennium Development Goals that are most off-track, such as maternal health. During negotiations, the UK consistently pushed for the document to call for the fullest possible access to reproductive health services and commodities. We are committed to improving sexual and reproductive health and rights, including access to modern family planning as a way of empowering women and promoting women's choice in the developing world. The outcome document can be accessed on the Department for International Development (DFID) website at: http://www.DFID.gov.uk/Media-Room/News-Stories/2010/Outcomes-from-the-MDG-Summit/

Richard Ottaway: To ask the Secretary of State for International Development whether the UK delegation to the MDG+10 Summit includes (a) members of civil society groups and (b) hon. Members with expertise in sexual and reproductive health and rights.

Mr Andrew Mitchell: The UK delegation to the UN MDG Summit was led by the Deputy Prime Minister and myself. We were supported by senior officials from my Department with expertise in sexual and reproductive health and rights. Both the Deputy Prime Minister and I met with representatives of civil society groups ahead of and throughout the summit. I will also be meeting with representatives of civil society groups on 12 October to discuss the outcomes of the summit.

PQs were circulated on the Worldpop e-mail list to support other APPGs in their parliamentary advocacy activities in the lead up to the Summits.

INTERNATIONAL FUNDING TO FAMILY PLANNING/SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS AND HIV/AIDS

The UK Government has this year committed itself to reaching 0.7% of GNI by 2013 and enshrine this in law. Total planned expenditure for 2010/11 was £7.583 billion, in 2011/12 it will be £7.838 billion, £ 8.562 in 2012/13, £11.029 in 2013/14 and £11.147 in 2014/15. An additional average £740 million is to be spent on maternal, newborn and child health from 2010 to 2015.

DFID’s support to UNFPA is £20 million per year 2011 – 2014 and to IPPF £8.6 million per year 2011 – 2013. MSI is negotiating a Programme Partnership Agreement with DFID.
### Table 2 DFID bilateral expenditure directly targeting HIV and AIDS, 2006/07 – 2010/11, (GBP millions)

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<tbody>
<tr>
<td>HIV/AIDS including STI Prevention</td>
<td>147.9</td>
<td>122.0</td>
<td>119.0</td>
<td></td>
<td></td>
</tr>
<tr>
<td>HIV/AIDS including STI Treatment and Care</td>
<td>10.1</td>
<td>24.0</td>
<td>52.7</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>128.7</td>
<td>134.2</td>
<td>158.0</td>
<td>146.0</td>
<td>171.8</td>
</tr>
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### Table 3 DFID bilateral expenditure directly targeting reproductive health, 2004/05 – 2010/11, (GBP millions)

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<tr>
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<tbody>
<tr>
<td>13010 Population Policy and Administrative Management</td>
<td>1.4</td>
<td>3.0</td>
<td>4.5</td>
<td>2.8</td>
<td>2.6</td>
<td>2.9</td>
<td>7.1</td>
</tr>
<tr>
<td>13021 Reproductive Health Care</td>
<td>39.5</td>
<td>27.5</td>
<td>29.4</td>
<td>18.6</td>
<td>36.5</td>
<td>43.2</td>
<td>47.96</td>
</tr>
<tr>
<td>13022 Maternal and Neonatal Health</td>
<td>16.2</td>
<td>18.7</td>
<td>21.9</td>
<td>34.4</td>
<td>61.6</td>
<td>49.4</td>
<td>49.99</td>
</tr>
<tr>
<td>13030 Family Planning, Health</td>
<td>8.1</td>
<td>15.3</td>
<td>31.1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Grand Total</strong></td>
<td>57.1</td>
<td>49.2</td>
<td>55.8</td>
<td>55.9</td>
<td>108.8</td>
<td>110.8</td>
<td>136.12</td>
</tr>
</tbody>
</table>

### Table 4 DFID Core contributions to International Organisations, 2005/06 – 2010/11 (GBP thousand)

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<tbody>
<tr>
<td>UNFPA</td>
<td>20,000</td>
<td>22,060</td>
<td>20,038</td>
<td>20,000</td>
<td>20,000</td>
<td>20,000</td>
<td>DFID - Core Funding</td>
</tr>
<tr>
<td>WHO</td>
<td>28,723</td>
<td>26,967</td>
<td>23,824</td>
<td>15,299</td>
<td>25,409</td>
<td>25,641</td>
<td>DFID and Other Govt. Deps - Core Funding</td>
</tr>
<tr>
<td>UNICEF</td>
<td>23,600</td>
<td>21,000</td>
<td>16,151</td>
<td>26,000</td>
<td>22,042</td>
<td>23,813</td>
<td>DFID - Core Funding</td>
</tr>
<tr>
<td>UNAIDS</td>
<td>10,000</td>
<td>11,030</td>
<td>10,000</td>
<td>19,000</td>
<td>10,000</td>
<td>16,002</td>
<td>DFID - Core Funding</td>
</tr>
<tr>
<td>IPPF*</td>
<td>12,015</td>
<td>7,500</td>
<td>8,600</td>
<td>7,500</td>
<td>7,500</td>
<td>0</td>
<td>Core Funding - Bilateral Funding</td>
</tr>
<tr>
<td>MSI</td>
<td>1.063</td>
<td>0</td>
<td>770</td>
<td>885</td>
<td>1,032</td>
<td>717</td>
<td>CSCF - Non Core Bilateral Funding</td>
</tr>
<tr>
<td>Global Fund to Fight Aids, TB and Malaria</td>
<td>349,100</td>
<td>163,400</td>
<td>50,000</td>
<td>100,000</td>
<td>100,000</td>
<td>51,000</td>
<td>DFID Programme - Core Funding</td>
</tr>
</tbody>
</table>

* This includes funding from the Governance and Transparency Fund
Tables 2 and 3 provide details of DFID bilateral expenditure directly targeting reproductive health and HIV/AIDS activities. However, according to DFID, the UK’s direct spend on HIV should not be seen as the sum of their work. DFID is seeking to increasingly optimise linkages and integration with other sectors where greater impact and efficiency can be achieved. The UK also supports the prevention and treatment of HIV/AIDS projects and programmes at the country level, strengthening health systems in their partner countries to deliver HIV outcomes and funding research. DFID are unable to accurately disaggregate UK HIV expenditure from these wider interventions.
INTERNATIONAL CONFERENCES

Group members, advisor and assistant have been involved with and attended several national and international NGO, UN and parliamentary seminars, workshops and conferences this year as follows.

International Day of the Midwife, RCOG, London, UK
The RCM organised a seminar celebrating the International Day of the Midwife on 5th May 2010 on the theme: Maternal morbidity: obstetric fistula - The World needs midwives now more than ever.

Speakers at the event included:
Baroness Jenny Tonge
Dr Tony Falconer, RCOG
Dr Nick Banatvala, Department of Health
Frances Day-Stirk, International Confederation of Midwives
Dr David Taylor, Federation of International Gynaecologists and Obstetricians
Anne Gloag, Freedom from Fistula Foundation

The event was chaired by the RCM General Secretary Professor Cathy Warwick.


Please find enclosed invitation, programme and PowerPoint presentation as appendix 205

Countdown to 2015: Challenging Orthodoxies related to SRH and HIV, London
Members, advisor and assistant attended above meeting on 17th - 18th May 2010 at the London South Bank University, which was organised by four Research Programme Consortia (RPC) working on SRH and HIV and AIDS. The Consortia were:

- **ABBA – Addressing the balance of burden in HIV/AIDS**;
- **Evidence for Action on HIV treatment and care systems**;
- **Realising Rights – Improving sexual and reproductive health for poor and vulnerable populations**;
- **SRH & HIV – Programme for research and capacity building in SRH and HIV in Developing Countries**.

The conference brought together new research and communications work from the four RPCs that supported poverty reduction efforts and contributed to the attainment of MDGs on gender equality, reproductive health and HIV/AIDS in particular.

The conference was organised into five thematic areas which brought findings from different national and regional settings on some of the core questions that the consortia had been engaging with:

- **Building health systems for the future of HIV and SRH**
- **Contextualising and implementing SRH rights**
- **Bridging treatment and prevention in HIV**
- **Addressing social, structural and economic drivers of HIV and SRH**
- **Getting research into policy and practice and the use of evidence by policymakers**

The conference generated fresh perspectives on SRHR and HIV/AIDS and their links with broader poverty and development issues.

Please find enclosed programme and invitation as appendix 206
Women Deliver Conference, Washington DC, USA

Baroness Jenny Tonge attended The Women Deliver 2010 conference, 7th – 9th June 2010 with more than 3,000 participants. A Parliamentarians’ Forum was organised in alongside the conference by EPF in co-operation with the Asian Forum of Parliamentarians on Population and Development (AFPPD), the Forum of African and Arab Parliamentarians on Population and Development (FAAPPD) and the Inter-American Parliamentary Group (IAPG). This forum brought around 50 parliamentarians together.

Jill Sheffield, President of Women Deliver remarked during the opening plenary session: “The biggest enemy of women’s health and rights is political indifference”.

Mr. Bert Koenders, former minister for Development Co-operation of the Netherlands said: “The role of Parliamentarians is underestimated. Politicians need to break the silence that still surrounds MDG 5 and SRHR. Yes, we face economically difficult times and yet Parliamentarians need to ensure that family planning allocations are not cut since these are the most cost-effective and efficient investments to save women’s and children’s lives in developing countries”.

The Parliamentarians’ Forum culminated in a Parliamentarians’ Statement. Amongst others, parliamentarians called for additional US $12 billion a year to be invested in women and girls and to actively work towards the establishment of a global funding mechanism for family planning, mothers and children with other international donors.

The statement urged Ministers to establish realistic and verifiable annual action plans for reaching individual MDG targets with a special emphasis on MDG 5 (a and b) to be presented at the UN High Level Meeting on the MDGs and commit to take a leading role in communicating the societal, economic, political and cultural benefits of investing in women and girls to key stakeholders.

Please find enclosed conference invitation, programme, briefing and Statement as appendix 207

The statement was circulated to all members and sent to the UK MDG Summit delegation.

G8/G20 Parliamentary Conference, 10th – 11th June 2010, Ottawa, Canada

Two weeks prior to the G8 and G20 Meetings in Canada, the EPF in co-operation with the AFPPD, FAAPPD and the IAPG also brought over 40 parliamentarians to the sixth annual summit “Balancing the scales of women’s lives in the countdown to 2015”.

The event hosted by Raymonde Folco MP, Chair of the Canadian Association of Parliamentarians on Population and Development (CAPPD) in close cooperation with the Parliamentary Centre addressed MDG targets which have not yet been achieved and specifically examined the theme of Women and Development, based on goals 1, 5 and 6, which deal with the reduction of extreme poverty and hunger, with a specific focus on maternal health, and combating HIV/AIDS and other diseases such as malaria and tuberculosis.

Approximately 150 participants took part in the Summit including international and civil society organisations, indigenous organisations from Latin American and the Caribbean and representatives of Canada’s First Nations, Inuit and Métis Peoples.

Parliamentarians concluded with adopting the Parliamentary Appeal to G8/G20 Heads of State and Governments. Among others, Parliamentarians called on "pooling new funding in a total of 24 billion under an international funding mechanism, specifically for MDG 5, which will provide targeted assistance for sexual and reproductive health and rights, family planning and access to safe abortion, when and where its legal and therapeutic abortion”.

The Appeal was submitted to Canada’s Prime Minister, Stephen Harper, host of the 2010 Heads of State Summits and circulated to the UK G8/G20 Government delegation.

Please find enclosed the G8/G20 parliamentary appeal as appendix 208
London School of Hygiene and Tropical Medicine (LSHTM) Population Symposium, LSHTM, London, UK
The LSHTM held a Population Symposium on 12th July 2010 with the purpose of highlighting the importance of population growth and its complex implications for food security, water, environmental and climate-change issues, health, poverty and development.

Speakers included:
Sir Andy Haines, former Director of London School of Hygiene and Tropical Medicine (LSHTM)
John Cleland, Professor of Medical Demography, LSHTM
Robert Eastwood, Senior Lecturer in Economics, University of Sussex
Oona Campbell, Professor of Epidemiology and Reproductive Health, LSHTM
Dan Kaseje, Professor of Public Health and Vice Chancellor at Great Lakes University of Kisumu, Kenya
Doctor Zeba Sathar, Country Director, Population Council, Pakistan
Doctor Alex Ezeh, Executive Director, African Population and Health Research Centre, Nairobi, Kenya
Sir John Beddington, Professor of Applied Population Biology at Imperial College London, Government Chief Scientific Adviser and Head of the Government Office for Science
Malin Falkenmark, Professor Emerita of Applied and International Hydrology at the former Swedish Natural Sciences Research Council, Scientific Advisor at the Stockholm International Water Institute (SIWI), and Chair of the Scientific Program Committee for the Stockholm Water Symposium
Karen Newman, Network Co-ordinator, Population and Sustainability Network (PSN)
Malcolm Potts, Professor of Population and Family Planning, University of Berkeley
Doctor Gill Greer, Director-General, IPPF
Babatunde Osotimehin, Professor of Clinical Pathology, Nigeria’s ex-Minister of Health (in office December 2008 to May 2010)
Sir John Sulston, Chair of the Institute for Science, Ethics and Innovation (SEI) at the University of Manchester

Richard Ottaway MP, chaired the final session on: 'The way forward: population, poverty and environmental Issues'.

Panellists were all invited to the Group’s annual World Population Day reception in Parliament that evening where Stephen O’Brien MP the new PUSS for ID addressed the audience.

BOND MDG meeting, London
BOND held an MDG event on 15th September 2010 at Church House, London with 400 Bond members and supporters. Advisor attended the event on behalf of the Group. Nick Clegg MP, Deputy Prime Minister and Andrew Mitchell MP, SS for ID spoke on their international leadership for the forthcoming MDG Summit. This was Nick Clegg MP’s first public speech on international development and he explained how the UK Government would meet its commitments to the MDGs.
Nick Clegg MP said: “With the 2015 deadline looming we need to make sure the next five years are marked not by warm words and platitudes but firm, concrete action”.

Andrew Mitchell MP, SS for ID outlined the UK priorities for the MDGs and said: “We have made the most off-track of all the MDGs - to reduce the number of maternal deaths by 75% - the UK’s top priority for next week’s MDG Summit. International action on maternal health has the potential to save countless lives”.

A video was shown at the event, highlighting UK public support for development and Save the Children supporter Mariella Frostrup spoke alongside Juanita During from WaterAid in Nigeria.

Please find enclosed invitation as appendix 210

UK Party Conferences
As part of the Group’s recruitment drive and press work it supported the WRA, Amnesty UK, IPPF, MSI, Mums net, ONE Campaign, Oxfam, Save the Children, WaterAid and World Vision in hosting the Mum’s café at the Party Conferences.

MPs were sent invitations to visit the ‘Mum’s Café’ prior to the conferences for a ‘cuppa’ with a photo-shot and a ‘take away’ draft press release.

Please find enclosed invitation and draft press release as appendix 211

Liberal Democrat (LD) Party Conference, Liverpool, UK
Baroness Jenny Tonge visited the Mum’s Café at the LD conference on 18th – 22nd September in Liverpool and encouraged colleagues to do likewise with a good turnout.

Labour Party Conference, Manchester, UK
Assistant attended the Labour Party conference on 26th – 30th September in Manchester.

The following MPs visited the stall:
- Diana Johnson MP
- John Woodcock MP
- Dennis Skinner MP
- Russell Brown MP
- Mike Gapes MP
- Harriet Harman MP
- Ed Balls MP
- Alistair Darling MP
- Angela Eagle MP
- Jim Sheridan MP together with other Ministers.

Jeremy Paxman and Eddie Izzard also popped in for a ‘cuppa’.

Jeremy Paxman and Kari Mawhood as ‘tea lady’  Eddie Izzard with ‘The Mum’
Conservative Party Conference, Birmingham, UK
Advisor attended the Conservative Party conference on 3rd – 6th October 2010 in Birmingham.

The following MPs visited the stall:
- Pauline Latham MP
- Penny Mordaunt MP
- Mike Harper MP
- Jake Berry MP
- Stephen Mosley MP together with Ministers
As the Mum’s Café was next to the press offices journalists popped in regularly for a take away ‘cuppa’ which lead to press work with the WRA.

Jonathan Snow and Jeremy Paxman with ‘tea ladies’

The messages from Andrew Mitchell MP, SS for ID and Stephen O’Brien MP, PUSS for ID, were clear at the Conservative conference: ‘women are central to any debate on international development’.

Stephen O’Brien MP, PUSS for ID          Andrew Mitchell MP, SS for ID

Four new MPs joined the Group following the Party Conferences.

Confidential Enquiry into Maternal Death ‘Saving Mothers’ Lives, London

Advisor attended the launch of the Confidential Enquiry into Maternal Death in the UK: ‘Saving Mother’s Lives: Reviewing maternal deaths to make motherhood safer’ on 1st March 2011, London.

The conference marked the launch of the latest UK report describing the factors underlying maternal deaths in the UK between 2006 and 2008. The event gave providers of maternity care and services, both at a national and a local level, an understanding of the implications for them and the services they provide for women in their care.

Advisor gave a quick synopsis of the Report findings including its ‘top ten’ recommendations at the 29th March 2011 committee meeting as follows:

Between 2006 and 2008 the overall maternal mortality rate was 11.39 per 100,000 maternities. Direct deaths decreased from 6.24 per 100,000 maternities in 2003 – 2005 to 4.67 per 100,000 maternities in 2006 – 2008. There has been a decrease in thrombo-embolism however an increase in sepsis. The inequalities gap has decreased. Cardiac disease is the most common cause of indirect death. Many of the avoidable factors remain the same as those identified in previous enquiries.
The ‘top 10’ key recommendations for policy makers, service commissioners and providers and healthcare professionals included:

- **Pre-pregnancy counselling** – Women with pre-existing medical illness, including psychiatric conditions, whose conditions may require a change of medication should be informed of how this may relate to their pregnancy

- **Pre-existing medical conditions** – Women whose pregnancies are likely to be complicated by potentially serious underlying medical or mental health conditions, and women who develop these problems should be immediately referred to appropriate specialist centres where care can be optimised. Referrals should be made a priority

- **Specialist clinical care** – There remains an urgent need for the routine use of a national modified early obstetric warning score (MEOWS) chart in all pregnant or postpartum women who become unwell and require either obstetric or gynaecology services. This will help in the recognition, treatment and referral of women who have, or are developing, a critical illness during or after pregnancy

- **Genital tract infection/sepsis** – All pregnant and recently delivered women need to be informed of the risks and signs and symptoms of genital tract infection and how to prevent its transmission and all health care professionals should be aware of the signs and symptoms of sepsis

**Please find enclosed cover and contents page and invitation as appendix 212**


On 17th March the Group and EPF organised a conference on "The EU: The Future of Health in EU Development Aid?" at the House of Commons, Westminster. The focus of the meeting was global health - including family planning and SRHR - and how EU Member States will be able to fund the EU’s development agenda in times of austerity.

The conference gathered over 30 parliamentarians from across Europe and a range of expert speakers, including Professor Malcolm Potts, the eminent demographer from Berkeley University, USA, and Peter Colenso, Head of the Human Development Group in the Policy and Research Division, DFID.

At the meeting representatives of the European Commission, External Action Service and UK Parliament gave a brief insight into the major political and institutional changes in the EU's approach to global health that have recently taken place, along with their interpretation of the current debate about the future of EU development policy and funding, and the potential opportunities it may present to global health advocates. Participants agreed that the meeting proved a useful starting point for getting to grips with the sometimes baffling and impenetrable world that Brussels represents to those working in a national context, and hope that they will now be able to play an important role in helping to determine the approach that their government takes in negotiating the EU’s future development assistance.

The meeting was an activity in the framework of AfGH, a network of European NGOs based in Italy, France, Spain, Germany, the UK and Brussels advocating for Europe to step up its efforts and their effectiveness to achieve the health MDGs.
Viscount Craigavon made reference to the new EU International Development policies in the 13th December HoL debate as follows:

**Viscount Craigavon**: "We must start to close the unmet need for modern contraceptives-and DFID is ready to do more in this area-the coalition Government has made a positive start".

To add to the above, it is also the case that the European Commission has produced a Green Paper consulting on its overseas development aid and asking for responses next year. It is subtitled "The future of EU budget response to third countries". Again, for those of us who have been critical of how some of that aid is used, that could be a useful starting point for serious reform. It is also to be hoped that DFID could use its influence with our EU colleagues to raise the profile and effectiveness of reproductive health in helping to meet MDGs.

I shall come down to some of the detail that I have just outlined. I believe that our country has recently had a good record on reproductive health and related MDGs in terms of our contributions. However, because of the way that we define what we do, particularly bilaterally, we do not necessarily come out well in comparative statistics. I hope that as part of our re-emphasis on this field, we can be more transparent in accounting for and defining what we give.

For some time now, the considerable resources understandably devoted to HIV/AIDS prevention have tended to be at the expense of family planning. Sometimes that is the reason that the two endeavours overlap in their aims, but the importance of autonomous support for family planning must not be forgotten.

There is a tendency in the European Commission Green Paper on development aid, which is now out to consultation, to avoid using particular words, as was mentioned earlier. Reading that document, one begins to realise that there must be horse-trading among so many nations to get any agreement on priorities on such diverse subjects. In this case, focusing on MDGs provides some sort of common, binding aim, but there is reluctance seriously to consider or talk about one aspect of recorded MDGs. That is the contribution that reproductive health can make too many other related MDGs. I hope that we can all grasp the opportunities that will present themselves in the coming year.

**SUPPORT TO OTHER APPGs on PD&RH**

The Group continues to exchange information and support the establishment and activities of other APPGs on Population and Development, both in the UK and abroad.

Of particular interest this year has been the capacity building work with APPGs on Population and Development in Germany, Romania and Rwanda. Support has been via e-mails and telephone conversations, via face to face meetings, as well as luncheon meetings and workshops.

**German APPG on PD**
Christine McCafferty MP was invited to Berlin 22nd – 23rd April 2010 for a capacity building workshop with the German APPG on Population and Development. Discussions were led on UK parliamentary advocacy including how the Group conducts parliamentary hearings.

**Romania APPG on PD**
Advisor presented Group activities at the EPF retreat in Dubrovnik, Croatia 17th – 20th November 2010. Senator Cristina Dumitrescu from Romania attended the retreat and was particularly interested in the UK parliamentary hearings, which lead to follow up conversations and information sharing on the subject.
Rwandan APPG on PD
Since advisor’s capacity building mission to the Rwandan APPG on Population and Development secretariat in 2009 information sharing and collaboration continue. It is hoped that funding can be obtained for an exchange visit in the near future for MPs.

UK APPG on International Development
Advisor has been attending meetings and collaborated throughout the year with UK APPGs working on international development issues. A networking event for parliamentary staff interested in international development took place on 19th May 2011 in HoC. The event was organised to allow parliamentary staff to informally meet and network with APPG staff to find out how they can support MPs and become more involved in setting the agenda in areas that interest both MPs and them.

Sam Hardy of BOND said a few introductory words at the event and welcomed the 92 MP staff who had RSVP to the event.

The APPG booklets from the July 2010 Bill Gates ‘fresher’s event’ were available for staff to pick up at the event.

Pro-choice and Sexual Health UK
Members and advisor have communicated regularly throughout the year with the UK APPG Pro-choice and sexual health in response to anti-choice EDMs tabled and Nadine Dorries MP’s parliamentary anti-choice activities.

The Group supports the activities of the UK APPG Pro-choice and Sexual Health as and when it has been requested.

APPG ON PD&RH HEARINGS


On 5th May 2010, Baroness Jenny Tonge presented the Report and its findings at the RCM’s International Day of the Midwife reception at the RCOG in London (please see further information under the heading: conferences).

The Report was displayed at the 2010 party conferences at the WRA Mums Café Stall, which was visited by ministers and conference delegates (please see further information under the heading: conferences). It was also available for MPs to pick up at the International Women’s Day Mum’s Cafe in Portcullis House on 8th March 2011 (please see further information under the heading: APPG on PD&RH parliamentary briefing meetings).

DFID received copies of the Report as written evidence to their consultation on its Framework for Results for improving reproductive, maternal and newborn health in the developing world. The Report was also sent to DFID and its G8/G20 team in the lead up to the G8/G20 Summit and MDG Review Summit.
Below is an extract from the 12th January 2011 HoL debate on maternal health with reference to the Report:

**Baroness Tonge:** “My Lords, I congratulate the noble Lord, Lord Patel, on securing this debate, and the present Government on the leadership they showed early on by promoting women’s health and in particular in improving the provision of contraception and safe abortion in developing countries.

The previous Government were equally enthusiastic, but sadly an estimated 350,000 women still die in childbirth and millions suffer permanent damage to their health as a consequence. Imagine a jumbo jet full of passengers crashing every day of the year. The press would go mad. Rupert Murdoch might notice and take action. Yet the same number dying each year for lack of obstetric care raises not a whimper. What a pity men do not have the babies—action would have been taken decades ago.

The coalition published the framework for action before Christmas and I congratulate them. How much money will be allocated and how will the Department for International Development monitor the results? We need to ensure real progress this time because the success of developing countries depends on the health and welfare of its women. There is no question of that.

The rest of my speech can be read in the report produced by the All-Party Parliamentary Group on Population, Development and Reproductive Health, asking whether some women in developing countries might be Better off Dead? It is on our website, so please read it.”

Maternal health remains high on the national as well as international agenda and the Maternal Mortality Hearing Report and its recommendations remains a constant source of reference for members and SRHR stakeholders.


The Group continues to promote the January 2007 Hearing Report: ‘Return of the Population Growth Factor and its impact upon the MDGs’ and 2009 updated summary leaflet, in relevant parliamentary debates, national and international consultations and at conferences.

On 19th February 2011 Richard Ottaway MP presented the Report and its findings at a luncheon in Washington hosted by Ambassador Karl Hoffmann, the President of Population Services International with support from Martha Campbell and Malcolm Potts.

The Report and its 2009 updated summary leaflet were displayed at the 2010 Party Conferences at the WRA Mums Café Stall, which was visited by Ministers and conference delegates (please see further information under the heading: conferences).

The Report and 2009 updated summary leaflet were also sent as written evidence to the Royal Commission on Environmental Pollution’s study into Population ‘Demographic Change and the Environment’ inquiry; The Royal Society consultation on People and the Planet; and the Royal Commission on Environmental Pollution study: The Environmental impact of demographic change in the UK (please see further information on these consultations under the heading: Non APPG briefing meetings and consultations under general correspondence and collaboration).

Below is an extract from 7th October 2010 HoL debate on MDGs referring to the Report:

**Baroness Tonge:** My Lords, I add my congratulations to my noble friend on securing this debate so early in the Session. The statement after the meeting in New York in September included a call for, “a redoubling of efforts to reduce maternal and child mortality and improve the health of women and children” by providing contraception, safe abortion, maternity care and the prevention and treatment of sexually transmitted infections. As someone with a lifelong interest in women’s health, and as the newly elected chair of the All-Party Parliamentary Group on Population, Development and Reproductive Health, I particularly welcomed this because, as the noble Baroness who spoke before me mentioned, healthy women with small families can access education for themselves and their children; and eventually not only they, but their communities and countries, will benefit economically—and also sustainably, if we can slow down population growth.
Two years ago and following extensive hearings, the all-party parliamentary group, chaired energetically by Richard Ottaway, produced an excellent report, The Return of the Population Growth Factor. The conclusion was that it will be difficult or impossible to achieve the MDGs with current rates of population increase in the least developed countries and regions. World population is currently 6.5 billion. By 2050, if nothing else happens, it will be 8 billion to 10 billion, which will wipe out any advances we might have made towards the millennium development goals. Sadly, those who set them did not take account of this.

Why are we not making progress? I have always contended that family planning has long been the missing link. It has always been underfunded. Global funding for it has declined in absolute terms; it has been halved from its level a decade ago. We must get family-planning supplies to 215 million women who want them but cannot access them…

Below is another extract from the 13th December 2010 HoL debate on population growth with reference to the Report:

Lord Rea: …I am going to talk mainly about population and economic migration but, on the way, I should like to flag up briefly the way in which rapid population growth will affect not only this country but the rest of the world through its impact on the environment by accelerating resource depletion and climate change. We are already faced with a time bomb since, although the output of greenhouse gases per head in the developing world is low at present-about 1/20th of ours per head -this will inevitably increase with rising standards of living. China is already providing us with an example.

I should declare an interest in that I am a longstanding member of the All-Party Parliamentary Group on Population, Development and Reproductive Health. In January 2007, we published a report, Return of the Population Growth Factor, Its Impact upon the Millennium Development Goals. This was a distillation of a series of parliamentary hearings of experts in the fields of population and demography. Its conclusions, in brief, were that each of the first seven MDGs was adversely affected by population growth when it exceeded the rate of economic development. This applied particularly to sub-Saharan Africa, where population growth rates are the highest in the world and economic development the slowest. With regard to MDG 1, which is to, "eradicate extreme poverty and hunger", the report says on page 21 under the heading "Running to stand still": "In sub-Saharan Africa, GDP per capita has been falling at nearly one percent a year, and those living in poverty ... rose modestly from 44.6% to 46.4% between 1990 and 2001". Annual economic growth is expected to be 1.6 per cent between 2006 and 2015 but, "due to the countervailing effect of rapid population growth, the World Bank predicts that by 2015, 340 million people in Africa will be living in extreme poverty, compared with 318 million in 2001"- an increase of 22 million. The pressure to seek a better life in another country comes not so much from overcrowding and population growth per se but from lack of employment and poverty-in other words, "the economy, stupid". Initially, employment is sought in the rapidly increasing slum cities of the developing world, but when this is not forthcoming the most enterprising citizens seek it elsewhere-perhaps in the El Dorado of the prosperous north and west. As the noble Lord said, the populations of some of those countries are in decline with a shortage of young people, so inward migration may not always be a bad thing…

Family planning and population growth continue to rise on the national and international agenda. There has been increased press interest also on the subject in the lead up to the 7 billion’s birth this year with numerous articles published.

Please find enclosed some articles of interest as appendix 218


Since “The Missing Link” Report was published in 2004, the advantages of linking SRHR and HIV/AIDS, policies, services and programmes, have become commonly accepted. The Global Fund is an excellent example.

DFID also remain explicit about the importance of linking SRHR and HIV/AIDS to combat HIV/AIDS and improve SRHR.

**Female Genital Mutilation, 2000**

The Group continue to respond to FGM hearing inquiries and press for better UK prevention strategies and prosecutions.
Baroness Rendell remains very active in Parliament on the issue, as does Baroness Gould, Patron of Foundation for Women's Health Research and Development (FORWARD) and Baroness Massey – both Group committee members. At this year’s International Women’s Day debate in the HoL they both raised their concerns about the 24,000 girls in the UK who remain at risk of FGM every year.

Below is an extract from the HoL International Women’s Day debate:

**Baroness Verma:** “The Female Genital Mutilation Act 2003 provides a clear message that FGM is an unacceptable practice and illegal in England and Wales. The Act has also been a catalyst for outreach work and has helped to raise awareness of FGM. We will shortly launch new guidelines which will support front-line staff to tackle and prevent the practice, provide support to women and girls and encourage the referral of all suspected cases to the police for investigation.”

Baroness Jenny Tonge tabled numerous written PQs on FGM followed this HoL debate, which can be accessed on the Group’s website.
APPG PD&RH PUBLICATIONS

Activity Reports
Annual Activity Reports have been published every year since 1993/1994 to present year and can been found on the Group’s website.

Hearings/Surveys/Reports

The Well-Spent Pound - an assessment of AID Agency priorities for population activities, NGO Review 1993

Women’s Rights and Sexual Health, Report of Consultations held with agencies involved in women’s issues, 1995


Taking Young People Seriously: Improving Sexual and Reproductive Health for the Next Generation, Report of the Parliamentary Hearings held on 6 and 13 May 1998

Female Genital Mutilation, Report of Parliamentary Hearing and Survey on FGM, May 2000


Return of the Population Growth Factor - Its impact upon the Millennium Development Goals, January 2007 (Main Report and Executive Summary Report (translated into German and French)) and Updated Summary and Graphs/Tables, July 2009

ACCOUNTS

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<th>Description</th>
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<tr>
<td>AfGH -</td>
<td>Action for Global Health</td>
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<td>AFPPD -</td>
<td>Asian Forum on Parliamentarians on Population and Development</td>
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<td>AGM -</td>
<td>Annual General Meeting</td>
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<td>AIDS -</td>
<td>Auto-Immune Deficiency Syndrome</td>
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<td>APPG -</td>
<td>All Party Parliamentary Group</td>
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<td>All Party Parliamentary Group on Population, Development and</td>
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<td>BPAS -</td>
<td>British Pregnancy Advisory Service</td>
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<td>C -</td>
<td>Conservative</td>
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<td>Centre for Health, Education, Training and Nutrition Awareness</td>
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<td>Council of Europe</td>
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<td>Department for International Development</td>
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<td>German Foundation for World Population</td>
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<td>Gender and Development Network</td>
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<td>GE -</td>
<td>General Election</td>
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<td>GNI -</td>
<td>Gross National Income</td>
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<td>G8 -</td>
<td>Group of Eight - consists of Canada, France, Germany, Italy, Japan, Russia</td>
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<td></td>
<td>the UK and the US</td>
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<td>G20 -</td>
<td>Group of Twenty – consists of the finance ministers and central bank</td>
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<td>governors of 19 countries: the G8 countries, plus Argentina, Australia,</td>
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<td></td>
<td>Brazil, China, India, Indonesia, Mexico, Saudi Arabia, South Africa,</td>
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<td></td>
<td>Republic of Korea and Turkey. The twentieth member is the European Union,</td>
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<td>who is represented by the rotating Council</td>
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<td>HFEA -</td>
<td>Human Fertilisation and Embryology Authority</td>
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<td>HIV -</td>
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<td>Human Tissue Authority</td>
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<td>International Conference on Population and Development</td>
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<td>In Vitro Fertilisation</td>
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<td>Millennium Development Goals</td>
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<td>Ministry of Defence</td>
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<td>Member of Parliament</td>
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<td>MSI -</td>
<td>Marie Stopes International</td>
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Baroness Gould briefings on the global economic crisis, women and DFID and commodity security supplies in support of her HoL speech on International Women’s Day

Press release on OPT name change to Population Matters

Communications with Sandra Osborne MP on her intervention at the demography hearing at CoE on 15th March 2011

Summary briefing sent with family planning/SRHR extracts from DFID’s Aid Reviews on how the UK’s aid will be delivered for the world’s poorest people over the next four years

UNFPA’s Statement on International Women’s Day 2011

SRHR NGO briefings sent to Members of the HoC in support of their speeches on International Women’s Day on 7th March

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Communications on DFID’s flagship projects in Nigeria called, ‘Partnership for Transforming Health Services’ and UK Government’s support to SRHR

Campaign letters sent to MEPs on EU budget vote

Baroness Jenny Tonge House Magazine articles

APPG on PD&RH correspondence with The Royal Society on its study “People and the Planet”

HoC Oral Ministerial Statement on G8 and G20 Summits

HoC Oral Ministerial Statement on Pakistan Floods

HoC Oral Ministerial Statement on Strategic Defence and Security Review

HoC Oral Ministerial Statement on Comprehensive Spending Review

HoC Oral Ministerial Statement on Public Health White Paper

HoC Oral Ministerial Statement on Aid Reviews

HoC Written Ministerial Statement on Bilateral Aid Review

HoC Written Ministerial Statement on UN Millennium Development Goals Summit

HoC Written Ministerial Statement on Sudan Visit (8-11 November)

HoC Written Ministerial Statement on Development Ministers Foreign Affairs Council

HoC Written Ministerial Statement on International Development Association of the World Bank

HoC Written Ministerial Statement on Reproductive, Maternal and Newborn Health and Malaria Outcomes in the Developing World

HoC Ten Minute Rule Bill debate on Sex and Relationships Bill

HoC debate extracts on Debate on the Address (Queen’s Speech Foreign Affairs and Defence)

HoC debate on Global Poverty

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HoC debate on Zimbabwe

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