



CEE Bulletin on Sexual and Reproductive Health and Rights

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BURNING ISSUE

The first ASTRA Network meeting since the COVID-19 pandemic outbreak was held in Warsaw

On 5-7 October, members of the ASTRA family reunited in Warsaw for the first time after the global lockdown caused by the COVID-19 pandemic. With representatives coming from 16 countries and a guest appearance by Galyna Maistruk, our dear colleague and friend from Kyiv who joined us remotely, the meeting once again brought together Central and Eastern European women's rights defenders.

The main topic of our meeting was the Russian invasion of Ukraine. Every person present gave an update on how does their organisation react to the crisis and what lessons can they share with other ASTRA Members. We discussed international support networks, fundraising strategies,

Beside the war in Ukraine, the meeting focused on the challenges human rights defenders face in Central and Eastern Europe and Central Asia. The main identified difficulties include lack of long-term funding, intensive fundamentalist and anti-abortion activity, an extensive workload that leads to activist burnout, and political instability in the region.

The three intensive days of our discussions were summed up in a separate statement:

ASTRA Network's Warsaw Statement 2022

The war in Ukraine has brought the attention of the world to Central and Eastern Europe. The biggest and most brutal armed conflict on the continent in three decades, the war remains a major threat to global peace.

Given the scale of the conflict, it is only natural to see political leaders from around the world engage in the situation. We see efforts made to adjust national policies and introduce systemic solutions to improve the lives of war refugees. These efforts are undoubtedly essential in long-term management strategies.

However, the first response to the humanitarian crisis remains one of the crucial points in any war-related emergency reaction plan. In the case of the unjustified and cruel aggression of Russia on Ukraine, the essential needs of those who fled Ukraine have been mostly addressed by non-governmental organisations of the region. In most countries, it was us who became responsible for providing shelter, clothing, food, and essential utilities. Thanks to the international support the region received so far, we managed to get through the first period of the crisis. The war, however, is still ravaging through Ukraine, and our work is far from done.

What also seems to be overlooked is the fact that while the biggest, the war in Ukraine is not the first armed conflict started in our region in recent years. Our colleagues from Georgia were fighting Russian invasion back in 2008. In 2020, Nagorno-Karabakh war took lives of thousands on the sides of both Armenia and Azerbaijan. Russia and Russian influences have always been a threat to the region – despite that previous conflicts were largely overlooked by the global community.

We call for international stakeholders to identify volunteers, social workers, and NGO-employed experts as key players in facilitating the crisis response. For Russian aggression to be stopped, Central and Eastern European NGOs need to be supported and protected.

REGIONAL UPDATES

Alcohol consumption by women cause of Poland's low birth rate, says ruling party leader Kaczyński

The fact that so few children are being born in Poland is due in part to alcohol consumption by women, says Jarosław Kaczyński, chairman of the ruling national-conservative Law and Justice (PiS) party. He claims that women are more at risk from alcoholism than men.

The comments sparked criticism from opposition politicians, who accused the 73-year-old Kaczyński – who has never been married or had children – of being out of touch. They also argued that his government has overseen policies – such as a [near-total ban on abortion](#) – that have discouraged women from having children.

However, Kaczyński – who holds no formal role in government but is Poland's de facto leader – defended his remarks in a further speech, arguing it was his duty to be “honest” about problems affecting society. (...)

Kaczyński discussed the fact that people in Poland are “having far too few children”. He noted that his party has tried to address this by introducing a number of social [programmes designed to financially support families](#).

Yet despite this, the number of births in Poland has [continued to decline](#) during PiS's seven years in power, reaching historic lows. The country has one of the [EU's lowest fertility rates](#) and last year recorded the bloc's [second-largest population decline](#).

During his speech in Ełk, Kaczyński argued that this is because there is “cultural resistance” to having children among some sections of society. (...)

The PiS chairman continued by saying that it is “necessary to say openly some bitter truths: if it continues to be the case that, by the age of 25, girls, young women, drink as much as their male peers, there won't be children”.

“Remember that to develop alcoholism, a man must drink excessively on average for 20 years...but a woman only two,” continued Kaczyński, causing laughter and applause in the audience.

He explained that he knew one of Poland's leading specialists in alcoholism. The doctor managed to cure "one third of men but no women" he treated for alcoholism, claimed Kaczyński. "So I advise you, including young women, to be careful about it."

The PiS chairman added, however, that he is "not a supporter of very early motherhood, because a woman must also mature to be a good mother. Until she's about 25 years old she gets drunk". That prompted further laughter from the audience and Kaczyński himself.

"I'm kidding a bit, but ladies and gentlemen, this is not a good sign. In these matters, you have to fight certain phenomena" he continued, adding that he is a "sincere supporter of equal rights for women".

Kaczyński's remarks quickly drew criticism from opposition politicians.

"With this blithering about 'getting drunk', Kaczyński showed how he knows nothing about women, our plans, our dreams and our lives," tweeted Barbara Nowacka, one of the leaders of Civic Coalition (KO), the main centrist opposition.

"Yet he gave himself the right to decide about our lives, our dreams and our bodies," she continued. "That is the source of misfortune for young Polish women."

The latter is a reference to the near-total ban on abortion introduced under the PiS government. Since it [went into force](#) at the start of last year, the birth rate has fallen further. A recent survey found that [most Poles believe the ban discourages people from having children](#). (...)

Source: Daniel Tilles/[Notes from Poland](#)

Hungary decrees tighter abortion rules

Hungary's government has tightened its abortion rules, which will make the process of pursuing a termination more bureaucratic for pregnant women.

From [15 September] onwards, pregnant women will have to listen to the fetus's heartbeat before having an abortion.

Doctors will have to submit a report confirming that this has been done.

Hungary's nationalist government recently blamed increased rates of women in higher education for lower birth rates and a shrinking economy.

In a decree (...), Hungary's interior ministry urges gynaecologists, obstetricians, and other pre-natal healthcare providers to present pregnant women with a fetus's vital functions in a "clearly identifiable way" from 15 September onwards.

According to medical practice, the sign of a fetus's vital functions can be a heartbeat. Far-right politician Dora Duro welcomed the decree, calling it a step towards "protecting all fetuses from conception".

Amnesty International Hungary said the amended decree would make it "harder to access legal and safe abortion".

Abortion has been legal in Hungary since 1953. The charity's spokesman, Aron Demeter, told AFP the announcement was "definitely a worrying step back, a bad sign".

Hungarian Prime Minister Viktor Orban has long sought to boost Hungary's flagging birth rate and his right-wing government prides itself in standing for traditional family values.

In 2019, Mr Orban announced that women with four children would be exempt from paying income tax for life.

Hungary has faced criticism for its gender inequality for some time. After a visit in 2019, Council of Europe Commissioner for Human Rights Dunja Mijatovic [accused the country of backsliding in gender equality and women's rights](#).

Source: [Malu Cursino/BBC](#)

FROM ASTRA MEMBERS

FEDERA – two years after the abortion ban

Two years have passed since the illegitimate Constitutional Court's ruling on abortion. On 22 October 2020, Polish Constitutional Tribunal ruled that terminating a pregnancy in the case of severe fetal abnormalities is unconstitutional.

The latest [Onet poll shows that 70% of Polish women and men do not support these shameful changes](#). Only 9% view the ruling well. In the poll, respondents named the culprits of women's hell: Kaczyński and the Church. A Radio Zet poll, on the other hand, shows that 66% of Polish women and men support abortion without restrictions up to the 12th week of pregnancy.

The effect of the ruling is that many doctors do not want to provide abortion care, even if the woman's health or life is at risk. In many cases it led to death of women as in the case of Izabela from Pszczyna.

FEDERA is the only organization that helps women to get access to legal abortion in Polish hospitals. The second year after the antiabortion ruling was a time of full speed work for FEDERA given the additional challenges brought by the humanitarian crisis.

Over the last year, we have received 20,042 phone calls – during office hours, in the evenings and at weekends. We answered questions about, among other things, abortion, contraception and the pregnancy register. We answered 12,000 messages and emails. This is more than twice as many as in the first year after the ruling (there were 8 142 phone calls and 5 000 emails) and almost 4 times as many as before the ruling.

We intervene in hospitals for abortions in situations where it is no longer possible to go abroad. In the last year we have carried out 28 interventions in hospitals.

“We are contacted by women in similar situation to that of Izabela from Pszczyna. They are already in hospital and are asking us for help. They fear for their lives. These are difficult but effective interventions. We do not leave any woman without providing help and we never give up.” comments Krystyna Kacpura, president of the Foundation for Women and Family Planning.

In two years, FEDERA’s lawyers have also filed 30 complaints to the European Court of Human Rights in cases where hospitals have violated patients’ rights.

“The Polish anti-abortion law not only remains incompatible with fundamental human rights, but is just so humanly unfair and wrong. It goes against the dignity of women, inflicts suffering on them and their loved ones and constitutes danger to their life. We call this institutional violence that has been going on for almost 30 years and has been exacerbated since 2020. This is what we are proving before the European Court of Human Rights. We are expecting ECHR’s judgments granting Polish women financial compensation from the Polish state” says attorney Kamila Ferenc, lawyer and vice-president of the Foundation for Women and Family Planning.

The demand for help from women was so great that we set up an additional telephone advice line with a gynecologist on duty and a legal helpline in Polish and Ukrainian. We have created a database of friendly gynecologists and gynecologists throughout Poland and are constantly [expanding it](#).

We have made a second [appeal to psychiatrists](#), who have the right to issue a certificate if they consider that the continuation of the pregnancy threatens the health or life of the woman. Such a certificate must be respected by doctors of other specialties, including gynecologists who decide on legal grounds for abortion. We are constantly expanding our network of friendly psychiatrists.

We carry out advocacy activities in Poland and abroad. We provide information on how the pregnancy register or the conscience clause work. We report to the European Union and the UN on how women's rights in Poland are violated, providing evidence and links with the rule of law and democracy crisis. We build international solidarity together with our partner organisations abroad.

We support all women in Poland. We created a [leaflet about reproductive rights in Poland for Ukrainian women](#) who have come here since Russia's aggression against Ukraine (including in the Ukrainian language). We prepared another [leaflet for migrant and refugee women](#) from other countries.

The past two years have been a time full of pain and suffering, but also a time of mobilisation by the Polish feminist movement. Women are taking matters into their own hands and creating amazing grassroots support groups. And we are constantly supporting them in this.

At the same time, we are working towards the liberalization of the law, because there is no democracy without full rights for women. We are fighting for access to safe abortion in Poland without justifications. We do not want thousands of Polish women to be forced to travel to foreign clinics. They should enjoy in full bodily autonomy in their home country and be able to decide about their health, life and future. Access to safe abortion should be accessible in Poland, like in other European countries.

Source: [Foundation for Women and Family Planning FEDERA](#)

I. "Attack on women, abortion service and democracy" - the Premiere of the documentary film

The backlash on abortion as a women's right has been prevalent for recent years in Georgia in line with raising ultraconservative influence in the policy making process. Association HERA XXI investigated causes of said stigma and backlash, and summed up their findings in a recently released documentary "Attack on women, abortion service and democracy".

The film aims to investigate what causes the barriers and stigma to legal abortion - the realization of women's right to health in Georgia. It also analyses how the issue of abortion becomes a tool of political manipulation to attack democracy and women's rights.

After the first screening, audience consisting of CSOs, Medical Service providers and experts, representatives of gender equality council of Parliament were engaged in Q&A about the worrying surge in ultra-conservative movements across the country, the potential consequences this could have on our human rights and, overall, the crucial necessity for a woman's right to reproductive autonomy when it comes to gender equality and social progress.

The documentary is available [online for free](#). English subtitles are provided.

II. Abortion Service Availability and Readiness Assessment – the Comparative Analysis from Georgia

Association HERA XXI has been applying WHO SARA (Service availability and readiness assessment) methodology - a combination of quantitative and qualitative for assessing safe abortion service availability and readiness in Georgia. The study aimed to assess the quality of family planning and abortion services provided to clients by healthcare facilities operating in Georgia, and to analyse availability of these services to beneficiaries, both in terms of geography and economic status.

With this approach, two consecutive studies were conducted (in 2016 and 2022). The study aims to accomplish three main objectives:

- Perform assessment of availability of safe abortion methods and protection of women's reproductive health in Georgia;
- Perform assessment of the quality of safe abortion services and family planning services and practices in Georgia, and description and analysis of the challenges the country faces in this area. While analysing abortion services, the study focuses on abortion services as one of the family planning instruments. It is a well-established fact that self-induced and improperly performed abortions lead to infertility and maternal mortality.
- Highlight time-dependent trends and compare some quantitative indicators drawn from the results of two surveys conducted with the help of the SARA instrument.

The study revealed that number of clinics providing abortion services have decreased twice. Study also indicates biased counselling, improper implementation of existing protocol, violation of existing regulations and the need to update outdated protocol. Indeed, the study also outlined due to stigma many cases of abortion go underground resulting in illegal and unsafe abortions.

Source for two previous entries: [HERA XXI](#)

I. GCC Program - Safe Abortion Awareness month

September was the Safe Abortion Awareness month. In this regard Reproductive Health Training Center in Moldova (RHTC) team organized two webinars on the topic of safe abortion and the WHO recommendations from 2022. Invited to participate were participants from five countries of Eastern

Europe and Central Asia: Armenia, Kazakhstan, Kyrgyzstan, Uzbekistan, and Azerbaijan. Most of the guests were abortion providers, policymakers, and representatives of women's rights organizations, with whom we have been collaborating over the years. The most recent collaboration was during the revision of the National Safe Abortion Protocols and developing Safe Abortion training modules for current and future healthcare workers.

During the webinar, participants learned about the latest WHO recommendations and evidence-based data on safe abortion, recommendations for Medical Abortion (MA) through Telemedicine, including the 2+ years' experience of Moldova.

II. Establishment and training of regional group teams

Meanwhile, another programme was launched: OPTions Initiative - Setting the stage for regional scaling up of Medical Abortion via Telemedicine in Eastern Europe and Central Asia, which aim is to conduct a formative research in the 5 EECA countries - Armenia, Kazakhstan, Kyrgyzstan, Uzbekistan and Azerbaijan.

In this regard, 5 regional coordinators together with working group teams (consisting of abortion providers and representatives of women's rights organizations) were recruited, to identify and collect data from relevant stakeholders (women's groups, distributors of abortion medications, pharmacists, policymakers, abortion providers, potential beneficiaries of medical abortion) related to MA service, the barriers and the potential for MA via Telemedicine provision. Final goal is to organize a pilot program in one of the countries in order to promote and provide MA via Telemedicine.

As a next step, after setting up the working groups for these activities, we organized a training for their members where we consolidated their skills and empowered them to subsequently act as self-care advocates.

Expected result: the development of 5 action plans for narrowing access gaps and improving MA uptake via telemedicine in participating countries developed.

III. The start of the project "Inclusion of telemedicine MA into the current public healthcare system in Transnistria"

In early September, RHTC team carried out a round table meeting with local public health authorities from Transnistria, a breakaway state in Moldova and other relevant stakeholders (Ministry of Health, health care providers) to discuss feasibility and potential steps for implementing WHO recommendations on self-care and integrating MA via telemedicine into official standards of care. On

30 September we organized the Project launch Conference with key stakeholders. Alongside local public health authorities from Transnistria, the Reproductive Health and Family Planning Centre in Tiraspol, providers and staff from the 7 model reproductive health centers in Transnistria, pharmacists, academic professionals from the University of Medicine in Tiraspol, and civil society representatives from women's and disability rights organizations, totally around 100 people, participated and discussed the potential next steps of project implementation.

In order to increase access to information regarding medical abortion (MA) and related services among women and girls in Transnistria (especially those with disabilities, living in rural areas, or economically disadvantaged) RHTC produced and distributed informational materials about MA via telemedicine which will be disseminated to NGOs, women's groups, healthcare institutions, and pharmacies in Transnistria for potential beneficiaries of the MA via telemedicine service.

The project has the mission to convey the importance, safety, acceptability and effectiveness of self-care abortion to local public health authorities from Transnistria, to identify mechanisms for best integrating the service into the standards of care and to promote the self-managing medical abortion with the remote guidance of a qualified provider, as outlined in recently published international recommendations, including the new 2022 WHO abortion care guideline.

IV. Promoting sexual and reproductive health and rights for people with disabilities

Information sessions to train social workers on the rights and sexual and reproductive health of women and girls with disabilities

It is important for people with disabilities to know their sexual and reproductive rights so that they can have more confidence in their ability to exercise them in everyday life.

The Reproductive Health Training Centre sees the need to provide support through education and capacity building not only to people with disabilities, but also to a wider range of professionals who provide their services in the field of reproductive rights.

Almost 500 social workers from the majority of regions of Moldova took part in a training on the sexual and reproductive health and rights of people with disabilities. The training was part of online information sessions held in June, organized by the RHTC with the Ministry of Labor and Social Protection of the Republic of Moldova, the National Agency for Social Assistance, State University of Medicine and Pharmacy and MOTIVATIE Association of Moldova.

Social workers have enhanced their knowledge of reproductive health and its components from the perspective of disability (safe motherhood, contraception, cervical cancer prevention, etc.), sexual and reproductive rights of people with disabilities, abuse prevention, services and facilities in terms of SRHR available to their beneficiaries with disabilities. Social workers have also strengthened their capacity to provide appropriate guidance to girls and women with disabilities so they can get the relevant care and support they need.

Information sessions for obstetrician-gynaecologists and family doctors on the rights and sexual and reproductive health of women and girls with disabilities

Following the same idea, RHTC in partnership with the Ministry of Health and State University of Medicine and Pharmacy organised large-scale information sessions for obstetrician-gynaecologists from reproductive health cabinets and family doctors from all over Moldova.

Medical professionals received information focused on the provision of adapted SRH services for people with disabilities with special emphasis on communication skills, non-discrimination, and recognition of the sexual and reproductive rights and needs of women and girls with special needs.

V. Training on sexual and reproductive health and rights organized for women and girls with disabilities in Moldova

Continuity matters to us, which is why RHTC supported the initiative of a participant in the training of trainers course for girls/women with disabilities in March this year, allowing her to be a trainer herself for other people with disabilities in her community and to apply the skills she had learned.

Thus, in August, 17 girls and women with special needs, mostly from rural areas, were trained in sexual and reproductive health and rights.

These activities took place in the framework of the project “Inclusive and Accessible for All: A Multi-Component Approach to Advancing the Sexual and Reproductive Health and Rights of Women and Girls with Disabilities” supported by the Embassy of Finland in Bucharest within the Fund for Local Cooperation.

Source: [Reproductive Health Training Center](#)

I. ASTRA Network members to work together with Romanian Ministry of Health

ASTRA Advisory Board member Daniela Draghici and SEX vs The STORK President Adriana Radu have been invited to join specialized working groups set up by the Romanian Ministry of Health regarding the reorganization of the reproductive health/family planning system. The working groups' mandate is to 1) finalize the national reproductive health strategy and work on other related policies, especially on those securing contraceptives in the existing family planning clinics; 2) discuss and agree on standardized clinical guidelines for Sexual and Reproductive Health; 3) Family Planning clinic staffing and training, contraceptive supplies, management information and logistics system; and 4) information, education, behaviour change communication, awareness and advocacy campaigns. Adriana and Daniela attended the first meeting approved and planned by the Ministry of Health General Medical Assistance and Strategic Planning Division, with the hands-on organization by the Mother and Child Healthcare Department. The meeting was attended by governmental, non-governmental, and international experts in the field, all highly experienced specialists. The plan is for the working groups to continue meeting regularly, to contribute to concrete steps for the implementation of the objectives set.

II. Romanian activists meet with US officials

ASTRA Advisory Board member Daniela Draghici was invited to a meeting at the US Embassy in Bucharest with Ms. Katrina Fotovat, head of the Bureau of Global Women's Issues at the U.S. Department of State and a delegation of U.S. officials, along with several colleagues from the Coalition for Gender Equality. Daniela presented an overview and the latest projects of the two ASTRA Network members NGOs she represents, the Society for Feminist Analyses AnA and the SEX vs The STORK Association. Discussions focused on gender-based violence, feminist activities, social entrepreneurship, lack of sexuality education in schools, and an update on the status of investment in the national family planning clinic network via the National Recovery and Resilience Plan funding from the EU that Adriana Radu contributed to securing. We entrusted the U.S. officials to advocate on our behalf with the Romanian relevant authorities they were meeting during their visit.

Source: Daniela Draghici, [AnA Society for Feminist Analysis](#) & [Sex vs The Stork](#) representative, ASTRA Network board member

Updates from the Union Women's Center (Tbilisi, Georgia)

I. First insights into the work of the first Perpetrators Rehabilitation Center

ASTRA's board member and the executive director of Union Women's Center, Iatamze Verulashvili, works on the protection of women's reproductive health and rights through working with perpetrators. She is also creating a strategy to stop child marriage in Georgia.

In March 2022, Union Women's Center (with the support of UK – COBERM and under the supervision of WWP – EU) implemented an innovative step for reducing domestic violence by introducing the Perpetrator Intervention Program and opening the first perpetrators' rehabilitation center in Tbilisi. The center provides psychological services and consultations to the perpetrators, as well as runs non-formal education at Georgian universities.

As a member organization of WWP-EN (European Network Working with Perpetrators), Union Women's Center participated in the Annual Conference on 17-19 August in Dublin, Ireland where Iatamze Verulashvili had presented first results of said Behaviour Correction Center activities in Tbilisi.

II. An innovative anti-violence programme for kindergarteners

Union Women's Center pilots the implementation a programme aimed at identifying of hidden forms of violence. The programme starts as early as at the kindergarten level to protect the next generation from violence (art-therapy is used during the work done with children). To minimize the chances of stressing a child with forced interactions with strangers, it is kindergarten teachers that carry out the programme.

III. Ending child marriage in upper Adjara

Union Women's Center has also been in upper Adjara on the project "Regional Strategy for Elimination Child Marriage in Upper Adjara". The project is realised through nonformal education at schools, training volunteers through door-to-door visits to raise awareness about the impact of early marriage on health, complications during pregnancy, domestic violence, and legislation.

IV. Ukrainian refugees in Georgia

In most cases that the Center is aware of, Ukrainian refugees fled their country and came to Georgia to stay with members of their families who have been living in the country for some time now. Union Women's Center organized Facebook campaigns, mobilisation actions malls, collected food and other necessary supplies for women/children, and handed them over to refugees. We also sell branded cloth (which is donated by Georgians and foreign women) in the Radison hotel and donate the received money to refugees.

In Union Women Center, there is a hotline where we provide online consultation and, if necessary, psychological and legal assistance.

Source: Iatamaze Verulashvili, Union Women Center's representative and ASTRA Network Board Member

RESOURCES

"Rights-based knowledge creation in sexual and reproductive health. An introductory guide" by B. Subha Sr

From the introduction: Human rights-based approaches to the creation of knowledge involve application of human rights principles to both the content and process of knowledge creation. Human rights-based approaches have special significance for the sexual and reproductive health and rights (SRHR) of all people, in particular, for women and girls, people living with disability, lesbian, gay, bisexual, trans, queer, or Intersex (LGBTQI) populations, refugees, migrants, and other marginalised populations. Violation of human rights is pervasive at different levels in matters related to sexuality and reproduction – from state policies that are blind to human rights to social norms and practices that violate the human rights of marginalised communities. Applying a human rights lens to knowledge creation enables all, and especially marginalised populations, with capacities and resources to claim their SRHR in a way that empowers them, while simultaneously providing the opportunity to hold duty-bearers accountable to fulfill their human rights obligations. A human rights-based approach to sexual and reproductive health (SRH) is based on the principles laid out in various international and regional human rights treaties and consensus documents, as well as in national constitutions and laws.

Read the report [online](#).

EPF's "Human rights and democracy in the world and the European Union's policy on the matter - annual report 2022"

On 25 October 2022, the FEMM Committee voted on the draft opinion on "Human rights and democracy in the world and the European Union's policy on the matter - annual report 2022".

The opinion received 148 amendments and 21 alternative compromise amendments had been prepared. The final opinion asks the AFET Committee, as the committee responsible, to incorporate its suggestions into its motion for a resolution that stresses the importance of advancing gender equality and women's rights worldwide, as they are crucial to the realization of human rights; emphasising on aspects such as LGBTIQ+ rights, gender-based violence, gender stereotypes, structural and institutional inequalities, gender equality and SRHR, sexual and reproductive health, and rights. The opinion was adopted with 28 votes in favour, 2 against, and 2 abstentions.

The rapporteur, Christine Anderson (ID), has withdrawn her name from the opinion. Her name has been replaced by the name of Robert Biedroń (S&D), Chair of the FEMM Committee.

Read the full annual report [here](#).

Source: [European Parliament](#)

UPCOMING EVENTS

14-17 November 2022, Thailand: International Conference on Family Planning

From the welcome message of the organisers: *The International Conference on Family Planning (ICFP) is more than a conference. It's also a platform, a movement, and a community of FP advocates, researchers, community leaders, and young people – all united by the belief that everyone deserves access to family planning services and products, no matter what*

The 2022 ICFP brings the family planning and reproductive health community together to strengthen our collective movement to achieve universal access to family planning by 2030 as an essential element of Universal Health Coverage. ICFP partners and community members have contributed to the evidence, research and lessons learned about the power of family planning, and how important it is that access to these products and services are considered essential to the achievement of universal health coverage.

The 2022 ICFP provides a unique opportunity to reconvene our collective community more than two years after COVID-19 was declared a pandemic and global emergency, providing us a unique look into our challenges and triumphs, weaknesses and resilience. Pandemic mitigation measures forced health systems and individuals in need of contraception to adapt, with innovations like telehealth services and community-based distribution of FP. These novel adaptations underscore the value of strong health systems and provide a robust foundation for future innovations that address emerging reproductive health needs.

Source: [ICPF](#)

ASTRA Network Members: Albania - Albanian Center for Population Development; Armenia - Society Without Violence; Armenia - Women's Resource Center; Armenia - Women's Rights Center; Azerbaijan - Center "Women and Modern World"; Belarus - Women's Independent Democratic Movement of Belarus; Bulgaria - Bulgarian Family Planning and Sexual Health Association; Bulgaria - Bulgarian Gender Research Foundation; Bulgaria - Gender Education, Research and Technologies; Bulgaria - Demetra Association; Bulgaria - Gender Alternatives Foundation; Bosnia and Herzegovina – Sarajevo Open Center; Croatia - B.a.b.e.; Croatia – CESI; Croatia – PaRiter; Croatia - Women's Room; Georgia – HERA XXI; Georgia – Real People, Real Vision; Georgia - Women's Center; Hungary – PATENT; BOCS Foundation; Kazakhstan - The Legal Center for Women's Initiatives "Sana Sezim"; Latvia - Association for Family Planning And Sexual Health "Papardes Zieds"; Lithuania - Family Planning and Sexual Health Association; Moldova – Family Planning Association; Moldova - Reproductive Health Training Center; North Macedonia - Association for emancipation, solidarity and equality of women; North Macedonia – H.E.R.A.; North Macedonia – Shelter Center; Poland - Federation for Women and Family Planning; Ponton Group of Sex Educators; Romania - A.L.E.G.; Romania – AnA – Society for Feminist Analyses; Romania - Euroregional Center for Public Initiatives; Romania - The East European Institute of Reproductive Health; Romania – SEXUL vs BARZA/SEX vs THE STORK; Russia - Novogorod Gender Center; Russia – Russian Association for Population and Development; Slovakia – Moznost Volby; Tajikistan – Gender and Development; Ukraine - Women Health and Family Planning; Ukraine - SALUS Charitable Foundation; Uzbekistan - Future Generation

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