A Faith-Filled Commitment to Development Includes a Commitment to Women’s Rights and Reproductive Health

Religious Reflections on the Millennium Development Goals

Prepared for the 2005 World Summit
14-16 September 2005
As religious scholars, clergy and advocates deeply committed to a preferential option for the world’s poor and marginalized people, most of whom are women and children, we applaud the world’s leaders and the United Nations for providing through the Millennium Development Goals (MDGs) a blueprint for how we can participate in the co-creation of a world that is founded on principles of justice, freedom, equality and respect—shared principles of our faiths and traditions that also underlie the MDGs. As the world works toward the achievement of these goals, the lives of all the world’s people will be improved.

We recognize that no single governmental document, however far-reaching and fair it may be, will ever be able to address all the key issues that face us in working for a just world. In this regard, we believe the MDGs need to be seen as a vital and lively blueprint, open to change as we deepen our understanding and gain consensus on how to “make poverty history.” In particular need of attention is the role that peace and anti-militarism play in the struggle against poverty. Too much of the world’s resources are consumed fighting unjust wars. It is also important to consider limits of the MDGs and question whether the goals of halving poverty and achieving universal primary education are really enough.

In this statement, we want to express our commitment to the inclusion in the MDG mindset of universal access to freely chosen reproductive health services, and the human right noted so eloquently at the 1968 International Conference on Human Rights in Tehran and echoed at the 1994 International Conference on Population and Development (ICPD) in Cairo: the right to determine freely and responsibly the number and the spacing of children.

The MDGs are silent on family planning and reproductive health and rights, issues of enormous importance for poverty reduction and which are of special concern to traditional and faith communities. As people of faith, we understand that women and men must have access to information and services so they can act morally and responsibly in their sexual behavior. Most faith communities accept modern forms of contraception and family planning, and even in faith groups that limit or prohibit such services, couples have chosen to use them as part of their plan for creating responsible families. We understand that when family planning services are not available to women and men, women’s health and livelihoods suffer and so do that of whole communities. Therefore, reproductive health services should be available to all.

Speaking with religious voices, we recognize that religions and traditions are not monolithic, and although they have developed in different cultural and historical contexts, they do share common moral sensibilities about the most vulnerable in societies. And while religion can be a positive force to promote peace, justice and human rights, we recognize religious extremism can be used as a force to crush peace, justice and human rights.

Some members of our diverse religious family take an extreme position in opposition to the ICPD and claim that promoting reproductive health and rights is a violation of freedom of religion. However, we believe that promoting reproductive health and rights upholds freedom of thought, conscience and religion for all members of the human family. As progressive religious leaders, we want to uphold the shared principles and values of our religious and faith traditions that promote justice, freedom, equality and respect, especially when it comes to policy making around reproductive health matters.
Therefore, we want to demonstrate how the shared values and gifts of the world’s religions and traditions converge and are embedded in the MDGs. Indeed, we feel there is a need to express how faith traditions and contemporary movements around reproductive health and rights share the values and principles set forth at the ICPD.

**Goal 1: Eradicate extreme poverty and hunger.** The world’s faiths and traditions share an awareness of the need to practice generous behavior and service to others. Societies lack generosity when there is poverty and great disparities of wealth. It is the role of community leaders and policy makers to ensure that women and men have access to food and shelter, education and health care. Individuals should also have access to information and services to voluntarily, without coercion, choose the size of their families and timing of their births, not only for the economic stability of families and individuals, but also for the health, well-being and spiritual development of their family members.

**Goal 2: Achieve universal primary education.** The world’s faiths and traditions share an appreciation for diversity and tolerance. Profound value is placed on sharing and non-violence. Children and youth are the hope for our future and primary education programs should include lessons in peace-building, tolerance and living healthy lives. It is in the context of primary education that individuals and communities should learn non-violent approaches to conflict resolution, acceptance of the diversity of family structures and compositions and age-appropriate and comprehensive sexuality education. Early marriage and childbearing can impede girls’ access to education, and community leaders should ensure that every girl has full access to primary education outside the home.

**Goal 3: Promote gender equality and empower women.** The world’s faiths and traditions have a respect and devotion to justice and equality. Women and men, whatever their differences, are equal in dignity and rights, and education and comprehensive physical and mental health services are fundamental to full participation in human societies. For women, it is critical that they have the information and services necessary to plan the timing and number of births so that they have greater opportunities for employment, education, social and political participation in society and spiritual participation and leadership within their religious traditions. All members of society should work to eliminate all forms of violence and discrimination against women and girls.

**Goal 4: Reduce child mortality.** The world’s faiths and traditions express a profound regard for the sanctity of life. The health of children often depends on the health and well-being of their mothers. Prenatal care, especially assistance in high-risk pregnancy helps prevent infant and child deaths. Access to adequate nutrition, medicines, education and clean water for both mother and child is essential to reduce both maternal and child mortality. Measures should be taken to eliminate attitudes and practices that are harmful to girls, in particular son preference, which can lead to prenatal sex selection, female infanticide and the neglect of girls.

**Goal 5: Improve maternal health.** The world’s faiths and traditions value physical well-being and affirm that human health flourishes when there is balance and harmony. The world lacks balance and harmony when some 500,000 women die each year from complications of pregnancy, and 99% of these deaths occur in developing countries. Approximately 70,000 women die from complications from unsafe abortion each year, almost all in developing countries. Women must have access to comprehensive reproductive health services and information to prevent unplanned and high-risk pregnancies, which often lead women to abortion, even where abortion is unsafe and illegal. Unsafe abortion is a public health concern and where abortion is illegal governments and health systems should work together to change their country’s abortion laws and make safe abortion legal and accessible to those women who voluntarily choose to have one.

**Goal 6. Combat HIV/AIDS, malaria, and other diseases.** The world’s faiths and traditions maintain a deep understanding of suffering and compassion. Approximately 40 million people are living with HIV/AIDS, almost half of which are women and girls. In addition to suffering from ill health and death,
HIV/AIDS brings stigma and discrimination, multiplying the suffering that individuals, families and communities endure from the pandemic. HIV, malaria and other diseases increase the risk of complications during pregnancy and childbirth. Sexual and reproductive health care and services contribute to the prevention of HIV/AIDS and other sexually transmitted infections.\textsuperscript{vii}

\textbf{Goal 7. Ensure environmental sustainability.} The world’s faiths and traditions share an understanding of the need for balancing the health of society and the environment. There are significant links between ill health—including reproductive ill health—and environmental degradation.\textsuperscript{viii} Environmental toxins such as industrial chemicals, air pollution and pesticides are linked to numerous health problems, including infertility, reproductive cancers and birth defects. Policy makers and members of civil society should promote greater understanding of the linkages between the environment and reproductive health, and encourage integrated actions to address both these areas.\textsuperscript{x} We stand compassionately and for justice for those couples whose fertility has been compromised by environmental abuses and call for equal concern for their right to create a family as we do for those couples whose emphasis is at times on fertility control.

\textbf{Goal 8. Develop a global partnership for development.} The world’s faiths and traditions call for hope and seek to build a more just and peaceful world. An unjust global trade system has resulted in unjust wages and environmental degradation. The world community must demand accountability and livable wages for all. Wealthier countries and economic institutions should cancel debts to poor countries so that developing countries can put money and resources into the people and the services they need. Through global partnerships, high quality commodities such as contraceptives, male and female condoms and antiretroviral drugs can be affordable and made available to those who need them, especially to those in developing countries.\textsuperscript{x}

Addressing the MDGs through the lens of women’s rights and reproductive health and rights will lead the global community toward building a world that promotes justice, freedom, equality and respect.

Considering that values and ideologies influence political willingness to affirm and implement full reproductive rights for all, we think that reproductive health and rights should be discussed in the context of everyday life to bring a human face to the impact of poverty, hunger, illiteracy, gender inequality, child and maternal mortality, HIV/AIDS, environmental degradation and globalization. Recognizing there is a human face behind each of the MDGs will build public demand and political support for reproductive rights for all.

As progressive religious leaders, we call on other religious leaders and policy makers to overcome the fears, taboos and stigmas associated with sexuality and reproduction, to accept that these matters are part of the legitimate scope of human rights and public policy and include these important human rights more explicitly in the struggle to end poverty. We call on the world’s leaders—religious, governmental, nongovernmental and those in multilateral and UN agencies—to incorporate the ICPD agenda and goals to ensure that all the world’s people have available to them the reproductive health services that will enable them to live healthy, dignified and financially secure lives.

\textsuperscript{1} Analysis and action points for MDGs in this statement are drawn from the MDG briefing cards prepared by Family Care International in consultation with selected nongovernmental organizations, individual experts and multilateral and UN agencies, and endorsed by 43 international nongovernmental organizations: “Millennium Development Goals and Sexual and Reproductive Health,” Family Care International, Inc., 2005.


\textsuperscript{iii} Ibid., “Reduce Child Mortality.”

\textsuperscript{iv} Family Care International, “Improve Maternal Health.”

\textsuperscript{v} Ibid.

\textsuperscript{vi} Ibid., “Combat HIV/AIDS, Malaria and Other Diseases.”

\textsuperscript{vii} Ibid.

\textsuperscript{viii} Ibid., “Ensure Environmental Sustainability.”

\textsuperscript{x} Ibid.

\textsuperscript{x} Ibid., “Combat HIV/AIDS, Malaria and Other Diseases.”
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Roman Catholic  
Member of MIAMSI (Catholic Action)  
Belgium

Rabbi Arthur Waskow  
Jewish  
Director, The Shalom Center  
USA
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<tr>
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<td>Spiritual Care Coordinator, Westchester Jewish Community Services</td>
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