To supporters of the campaign regarding funding of Marie Stopes International

October 2019

Thank you for your recent correspondence about signing an Early Day Motion calling on DFID to stop funding Marie Stopes International (MSI). I am responding as the Minister responsible for this policy area.

The UK is a global leader in supporting sexual and reproductive health and rights, maternal, new-born, and child health in developing countries. At the Conservative Party Conference, the Secretary of State made a new commitment to prioritise ending preventable deaths of mothers, new-born babies and children in the developing world by 2030. To achieve this, UK aid will invest in more vaccines for deadly diseases, prioritise access to healthcare for women and girls around the world and invest in research to diagnose and treat diseases more quickly and effectively.

In our comprehensive sexual and reproductive health and rights work, we work closely with MSI as a valued partner. The main aim and vast majority of DFID’s investment in reproductive health is to increase the use of contraception, which is proven to reduce demand for abortion. We are clear that the most effective way to prevent abortion is by providing the information and access to contraception that women need to help them decide whether, when and how often to have children.

Research shows that restricting access to abortion services does not make abortions less common, it only serves to make them less safe. Unsafe abortions account for up to 8% of all maternal deaths worldwide – an estimated 25 million per year – and millions more women who do not die during such procedures are left with injuries and disabilities as a result. In July 2017 DFID committed to spend an average of £225 million every year up to March 2022. By improving access to modern contraception in some of the world’s poorest countries, our investments will prevent an estimated six million unintended pregnancies and three million abortions each year.

Voluntary family planning reduces dangerous backstreet abortions but does not eliminate them. Therefore, the UK supports access to safe abortion through some of its programming, where this is legal. I would like to reassure you that DFID funds cannot be used to fund any illegal activities. We treat allegations of any improper use of funds extremely seriously. You can find the process for reporting allegations on our website: www.gov.uk/dfid.
Finally, I would like to assure you that DFID has robust monitoring and evaluation procedures to ensure UK taxpayers’ money is achieving the results we expect of it across all policy areas. All of our reviews demonstrate confidence in the quality of MSI’s services in developing countries.

RT HON DR ANDREW MURRISON