

## **Haiti: between rhetoric and reality**

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In spite of the fact that the demographic explosion continues to be widely discussed in Haitian society, the current process of demographic transition is characterized by a decline in fertility subsequent to the decline in mortality. The total fertility rate has dropped by a third, falling from 6.3 children per woman to 4 between 1987 and 2005; a belated transition in the context of the countries of Latin America and the Caribbean, but a transition which is accelerating. Estimate of fertility rate for the five-year period between 2005 and 2010 is 3.5 children per woman.

As a product of this transition it has been observed an increased relative proportion of young people between 15 and 24 years of age, which has reached around 22% (2005) of the total population. Accordingly, a demographic dividend has been generated which provides a unique opportunity for the public authorities to contribute to economic growth, based on the social and economic investment directed towards the young. Rapid processes of urbanization as well as an improvement in access to education for the younger generation are modifying society's reproductive behavior.

The prevalence of modern contraceptive methods was a mere 13% in the middle of the 1990s and had climbed to 22% by the start of this century for all women in reproductive ages, and just one in four women in union (24.8%) by 2005-2006 was using contraception. The unmet needs of family planning have fallen slightly, moving from around 40% in 2000 to around 37% by 2005-06. In the latest DHS survey, 60% of women in union who were currently not using modern contraceptive method have indicated their inclination to use one. One half of these women wish to use hormonal injections.

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It is important to point out that the reasons for not using contraception are mainly due to the method itself with 55% due to fear of side effects and health problems. Other reasons are: 27% are fertility-related reasons, or not being fertile, 1% for being sterilized or not wanting more children or not having sexual relations, among other reasons, and 17% are against the use either due to religious convictions or some other type of cultural barrier.

According to the latest DHS (EMMUS IV, 2005-2006) female sterilization was 1.5% and 0.2% men were also sterilized. For people in union these figures were 2.1% and 0.2% respectively for women and for men. The hormonal methods were the most commonly used (14.3%) in 2005-06. The modern contraceptive methods are distributed by the Government in hospitals and health centers as well as on specialized NGOs. However, many centers do not have available the full range of modern methods to offer, and according to the latest DHS only 21% of the methods are provided by the public sector.

Abortion is prohibited in the country. In the DHS II (1994/1995) was included a question to try to identify the practice of abortion. Among women sexually active, 78.6% reported never having had an abortion, 2.9% have had an abortion at least once, 15% had a false pregnancy and 5.9% had a stillbirth. According to DHS III (EMMUS III, 2000) figures, abortion increase to 7%. In both surveys, these figures are assumed to be underestimated since the practice of abortion is illegal in the country. Unfortunately, no questions were included in the latest DHS (2005-06) regarding this subject. Efforts are being made to include again abortion in the next DHS, which will be carried out in 2010.

What really attracts attention is that, faced with a discussion on the “demographic explosion”, its corollary would be the development of massive, authoritarian family planning programs. The reality is somewhat different and evidences a discussion that is not pertinent since there is no demographic explosion. Currently, the rate of growth is 1.6%, with availability and access to modern methods, within the framework of a perspective of rights, being exceptionally slow.

The influence on the country of President George Bush’s 8 years in power, which is very important in all aspects of life in Haiti but particularly on modern methods and the promotion of abstinence, has meant that the use and availability of modern methods has been degraded. Changes in the international context have had their impact in the case of Haiti; the repositioning of family planning (2006) has been thrown into the discussion but has not been followed up in practice given that it continued with the traditional view of the hallmark of the Bush era. It is not by chance that, within this framework, one half of all women have not heard about the family planning message through the media, particularly the radio which is the main medium for the Haitian people.

It should be pointed out that, following on from the change of president in the USA, USAID and UNFPA have managed to reach an agreement and, starting in 2008, have started to work together in acquiring birth control products and making them generally available.

Everything pointed so far may lead one to believe that the *objective of universal access to reproductive health is going to be very difficult to achieve by 2015*. Data from the next DHS survey (2010) will tell us if availability, access and use of modern family planning methods have or have not significantly improved.

Discussion about establishing new norms caused the Ministry of Public Health and Population to draft for discussion a new document, in which civil society did not take any part, which had been discussed at the beginning of September 2009. Even if advances are being seen in respect of what was already known some years before, the document concerning family planning norms, which has been in discussion, still bears the stamp of the pre- Cairo vision. In other words, the program's philosophy makes no reference to the International Conference of Population and Development (1994) or to its Program of Action, instruments signed and ratified by Haitian Government. The rights perspective is missing from the document. The Program should claim back its relationship with and contribution to the welfare of the population and especially show it can contribute to Haitian families having the number of children that they wish for.

The Haitian experience shows the mismatch between the discussion of reality and availability, access and use of modern contraceptive methods of family planning. There is still much to accomplish for both Haitian women and men, and also by the domestic and international players who are working in this area.

