



ICEC Worldwide Case Studies: Latin America

Building Regional Alliances to Promote Emergency Contraception

While many projects that introduce emergency contraception take a traditional family planning approach, the International Consortium implemented a grassroots campaign that empowers women to understand and act on their rights concerning sexual and reproductive health.

In the late 1990s, International Consortium members and numerous local partners began working to raise awareness of emergency contraception in Mexico. At this time, women's groups throughout Latin America began to request assistance in increasing access to EC.

In this region, a range of EC activities were taking place. Some groups designed strategies to inform providers and policy makers about the availability of EC, while others concentrated on getting information out to women in need. A number of groups focused on registering and promoting dedicated products. Unfortunately, no formal mechanism for integrating all of these efforts existed, nor was there an overarching organizational body to generate strategically important materials for policy makers and other influential decision makers.

In response to the clear need for coordination and sharing of information and resources, the Pacific Institute, which was already working with women's organizations in Mexico and elsewhere in the region to facilitate work on EC, brought together partners capable of expanding access to EC in Latin America, forming a regional network. This network serves as a regional consortium for EC in Latin America called the Latin America Consortium for Emergency Contraception (CLAE is the Spanish acronym). CLAE brought together a network of governmental and non-governmental and public and private organizations and institutions that work to increase access to EC. The Pacific Institute served as Coordinator.

Members agreed that CLAE's primary mission is to collaborate to improve women's health and reduce unintended pregnancy, maternal mortality and unsafe abortion in Latin America by advocating, promoting and disseminating information and access to EC in the context of sexual and reproductive rights.

By mid-2003, CLAE's structure was formalized. The organization's membership was increasing and new alliances were created to advance health policies that integrate EC in the official technical norms and promote registration of dedicated products. Through a pre-decided democratic process, after three years, the Pacific Institute transferred the coordination of the network to a Latin American organization elected to act as coordinator. The *Instituto Chileno de Medicina Reproductiva* (ICMER) coordinated CLAE from December 2003 to December 2005, and CISTAC, Bolivia, was elected to act as the next coordinator as of January 2006. CLAE's membership now includes 69 member organizations representing 19 countries.

EC in Latin America



International Consortium for Emergency Contraception

As of 2006, 17 Latin American and Caribbean countries have incorporated EC into Family Planning or Reproductive Health Norms: Argentina, Bolivia, Brazil, Colombia, Cuba, Dominican Republic,

Ecuador, Guatemala, El Salvador, Haiti, Honduras, Jamaica, Mexico, Nicaragua, Paraguay, Peru and Venezuela. Six countries include EC in the Sexual Violence Norms: Brazil, Colombia, Chile, Ecuador, Peru, and Venezuela. Eighteen countries have registered at least one dedicated product of EC: Argentina, Bolivia, Brazil, Colombia, Chile, Cuba, Dominican Republic, Ecuador, El Salvador, Honduras, Jamaica, Mexico, Nicaragua, Paraguay, Peru, Trinidad and Tobago, Uruguay, and Venezuela.

CLAE held a regional youth meeting in Mexico in October 2004, where they evaluated and followed up on action plans that had been developed in three previous sub-regional youth meetings in 2003.

Several countries in the Latin American region are experiencing lawsuits against the availability of EC: Argentina, Brazil, Colombia, Chile and Ecuador. In Argentina and Chile, there are legal initiatives against all contraceptive methods. All of these legal procedures are based on the assumption that EC is an abortifacient. To help fight these lawsuits CLAE created and distributed advocacy tools, which indicate that ECPs prevent pregnancy by preventing fertilization of the ovum and if fertilization does occur, the pill cannot prevent implantation of the fertilized egg.

Use of ECPs appears to be increasing throughout the region despite legal challenges. In Venezuela, sales of Postinor-2 in 2005 reached 550,000, a 68% increase over the previous year. In Peru, sales reached 300,000, a 57% increase over the previous year.

International Consortium for Emergency Contraception

Advocates for Youth • American Medical Women's Association (AMWA) • Arab World Regional Network • Asia Pacific Network on Emergency Contraception • Association of Reproductive Health Professionals • British Pregnancy Advisory Service • Catholics for a Free Choice • Center for Reproductive Rights • Center for Research on Women and Gender, University of Illinois • Concept Foundation • Consorcio Latinoamericano de Anticoncepcion de Emergencia (CLAE) • CONRAD • DKT International • East Europe, NIS and Balkan Region • ECAfrique • EngenderHealth • Family Care International • Family Health International • Guttmacher Institute • Gynuity Health Projects • Ibis Reproductive Health • Institute for Reproductive Health • International Planned Parenthood Federation • International Planned Parenthood Federation/Western Hemisphere Region • International Women's Health Coalition • Ipas • JSI Research & Training Center for Women's Health • Management Sciences for Health • Margaret Sanger Institute • Marie Stopes International • Medical Women's International Association • Meridian Development Foundation • Pacific Institute for Women's Health • Partnership for Appropriate Technology in Health (PATH) • Pathfinder International • Planned Parenthood Federation of America • International • Population Action International • Population Council • Population Services International • PROSALUD INTER-AMERICANA • WHO, Special Programme of Research, Development and Research Training in Human Reproduction • Women's Commission for Refugee Women and Children

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