Remarks at Closing Plenary
Friday December 2, 2011
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Dean
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The Honorable Prime Minister of Senegal
The Honorable Minister of Health
All other protocols observed

Ladies and Gentlemen

• Before I begin, I would like to introduce Lydia Wilbard. Lydia is a nurse by profession and is now the Head of Impact with the Campaign for Female Education in Tanzania. She received her Masters of Public Health, with a concentration in reproductive health, from the Johns Hopkins Bloomberg School of Public Health in 2011. Lydia will make a short presentation. (Lydia gives a short speech of gratitude to Professor Tsui and presents her with a bouquet of flowers)

• Thank you, Lydia

• It has been a remarkable conference. The sense of excitement and community has been palpable. Family planning is as fundamental and common a health service as child immunization, with equal coverage of the unprotected everywhere except in sub-Saharan Africa. In recognition of this unmet need, major new commitments to support family planning programs were made by the Honorable Stephen O’Brien on behalf of DFID and President Wade.

• In the high level ministerial conference, ministers from across Africa met with their counterparts from Indonesia, the UK and other countries to discuss the demographic dividend, i.e., the positive economic impact that comes from noncoercive family planning programs. It was wonderful to see the networking and sharing of resources that went on between these leaders.
When I gave welcoming comments at the official opening of the Conference on Tuesday, I spoke of the promise of science and how the knowledge that we gain from research has the potential to better the human condition.

In this regard, my colleagues at the Johns Hopkins Bloomberg School of Public Health have been actively engaged in demonstrating the impact of contraception on maternal and child mortality.

- Dr. Saifuddin Ahmed and his colleagues estimate that contraceptive use today prevents 272,000 maternal deaths or 43% of all maternal deaths. Work by Drs. Alain Koffi, Stan Becker, and their Gates Institute collaborator, Dr. Frank Taulo, found that children from high parity families have a 1.51 greater odds of dropping out of school by age 16 than children in low parity families. Researchers in the Family Health and Wealth Study demonstrated that young Ethiopian children with a high birth order, 3 or more, are twice as likely to be underweight and wasted compared to first or second borns. Dr. Anne Burke has systematically reviewed clinical trial studies and showed that post-abortion IUCD insertion is safe and increases use of the method at 6 months after the procedure.

- I am pleased that student researchers from my School have also been contributing to building the science base regarding contraceptive use and barriers to use. It is particularly gratifying to hear the work of our doctoral alumni, such as Dr. Chelsea Polis, who has helped to clarify any possible links between hormonal contraceptive use and acquisition of HIV, and Dr. Esther Kaggwa who is studying the sexual and reproductive behaviors of HIV positive youth in Uganda.

Thus, at Johns Hopkins Bloomberg School of Public Health, we are committed to building a strong evidence base through rigorous research.

I believe, however, that achieving the goal of universal access to family planning requires not only science, but also advocacy.
Researchers must work closely with policymakers to inform them of research findings and advocate until policy reflects the latest science.

- Effective policy is the tip of the spear by which evidence becomes practice. In the case of family planning, advocacy that promotes effective policy enhances human development and saves lives.

- No matter your background, whether you are a researcher, a manager, a practitioner or a minister, please join me in advocating for rational, science-based policy to promote family planning.

- Thank you for your attention.