

CONTRACEPTIVES SAVE LIVES

Updated with technical feedback December 2012

Introduction

In the developing world, particularly in Sub-Saharan Africa and South Asia, progress in reducing maternal and newborn deaths has been slow. One reason for the persistently high maternal and newborn mortality rates is the lack of access to family planning for those women who want to delay or prevent pregnancy. Family planning through eliminating unintended pregnancies reduces maternal and newborn mortality rates and improves the health and well-being of women and their existing children.



Access to voluntary family planning is also a critical part of fulfilling the fundamental human right of couples and individuals to choose when and how many children to have. From a national perspective, universal access to family planning is a critical component for development.

The benefits of having contraceptive information and services readily available to those women and couples who want it are widely recognized. Despite this, donor assistance dedicated to family planning has dropped dramatically in absolute dollars since the mid-1990s, and many countries are not making the needed investment for family planning.

The Current Situation

There are an estimated 222 million women in the developing world who want to delay or avoid pregnancy,¹ but who are not using family planning, largely because they don't have access to it, they fear side effects, or their families object. This need for spacing or limiting births can and should be transferred into informed decisions and actual usage of contraceptives. UNFPA is working on many different aspects from services to working with communities to improve access to and uptake of contraceptives, by those women and couples who want to avoid pregnancies. UNFPA estimates that meeting the current unmet need and keeping pace with population growth will lead to an increase of over 30 per cent in the number of contraceptive users during the next 15 years.

Low income countries are disproportionately affected by the lack of access to modern family planning methods. Sub-Saharan Africa and South Central Asia together account for 59 per cent of women with an unmet need.² In 69 of the poorest countries, 39 per cent of women who want to avoid pregnancy don't have access to contraceptives,³ compared with 20 per cent in better-off developing countries.

In 2012, about 53 per cent of women (58 million) in Sub-Saharan Africa who wanted to avoid a pregnancy were not using family planning or were using a traditional method.⁴ These women accounted for 91 per cent of unintended pregnancies.



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Investing in family planning compares favorably with other cost-effective health investments such as antiretroviral therapy, childhood vaccinations and oral rehydration therapy. Fulfilling the unmet need for modern family planning would cost an additional \$4.1 billion annually, coming from a combination of international and domestic sources.⁵

Unsafe abortion continues to be a problem which plays a significant role in maternal deaths. The proportion of maternal deaths unsafe abortion causes (13 per cent) and the annual unsafe abortion rate (14 per 1,000 women aged 15-49) have remained unchanged from 1990 to 2008.⁶ **Every year, an estimated 47,000 women die as a result of unsafe abortions.** Of the 22 million women⁷ who have unsafe abortions each year, approximately 8.5 million will experience complications, and three million of these will not receive the follow-up care they need, leaving them vulnerable to long-term and often debilitating health problems.⁸

Fulfilling the unmet need for family planning would reduce unsafe abortions by almost three-quarters and deaths from unsafe abortions by more than four-fifths.

What Must Be Done?

Family planning needs to be recognized by international donors and national governments alike as a top development priority and reflected in an increase in funding and commitment for implementing family planning programmes.

Most governments in poor countries have adopted appropriate population and family planning policies, but many are not implementing them because of a lack of political will and adequate funding.

Fulfilling the unmet need for family planning would cost an additional \$4.1 billion globally, every year, totaling 8.1 billion annually.⁹ A reasonable sum, considering the breadth of potential benefits, which range from improved maternal and child health to the empowerment of women, to more financially secure families, and ultimately the economic growth of nations.

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Benefits of Action

Access to family planning saves lives. If the gap between demand and supply for family planning were met, the number of women dying in pregnancy or childbirth would be cut by approximately one third.

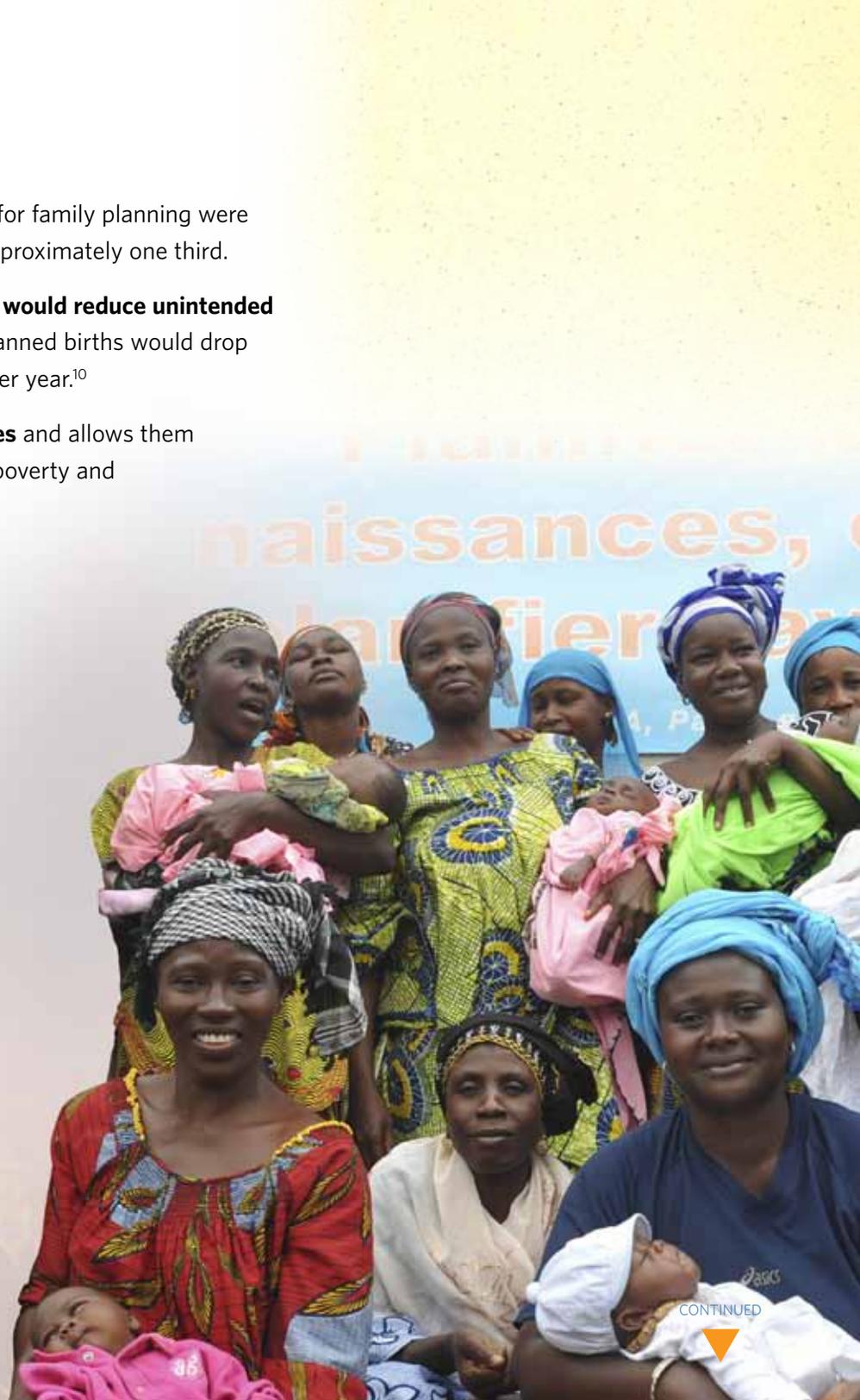
Fulfilling the unmet need for modern family planning in the developing world would reduce unintended pregnancies from 80 to 26 million, a reduction of about 68 per cent, and unplanned births would drop from 30 to 9 million. This would result in 26 million fewer induced abortions ever year.¹⁰

Having fewer, healthier children reduces the economic burden on poor families and allows them to invest more in each child's care and schooling, helping to break the cycle of poverty and improving the prosperity of families, communities and nations.

When fertility rates fall, more women join the labour force. The healthy years of life lost due to disability and premature death of women and their newborns would be reduced by more than 60 per cent if the need for maternal and newborn health services and family planning were met.

Universal access to primary education and educating boys and girls equally is more likely to occur where there is lower fertility, slower population growth and later childbearing.

Investing in family planning enables faster economic growth in nations by reducing fertility and changing the age structure and dependency ratio of a given population. As well, depending on what services are offered, each dollar spent on family planning can save governments four dollars in spending on health, housing, water, sewage and other public services.¹¹



What is UNFPA Doing?

UNFPA, the United Nations Population Fund, works to ensure universal access to reproductive health, including voluntary family planning and sexual health for all. Advocacy and provision of high quality family planning services is essential to this work. The complex logistics of providing the right quantities of the right health supplies in the right conditions in the right place at the right time for the right price involves many actors, including both the public and private sectors.

UNFPA works with governments, civil society and sister United Nations agencies across sectors ensuring that family planning programs receive the attention and funding they need, so health systems are strengthened and family planning services are provided as close to the communities as possible. UNFPA also works through the Global Programme to Enhance Reproductive Health Commodity Security to provide and coordinate the distribution of reproductive health commodities, forecasting needs, mobilizing support and building logistical capacity at the country level. UNFPA advocates the right of all people to decide the number and timing of their children. The Fund works with communities to enable their use of this right in conjunction with health systems to make sure that needed services are available and accessible.



For more information on UNFPA's work, please visit www.unfpa.org.

NOTES

- 1 Susheela Singh and Jacqueline E. Darroch, "Adding It Up: Costs and Benefits of Contraceptive Services," Guttmacher Institute and UNFPA, June 2012.
- 2 UNFPA and Guttmacher Institute, "Adding it Up: The Costs and Benefits of Investing in Family Planning and Maternal and Newborn Health," 2009.
- 3 Susheela Singh and Jacqueline E. Darroch, "Adding It Up: Costs and Benefits of Contraceptive Services," Guttmacher Institute and UNFPA, June 2012.
- 4 Susheela Singh and Jacqueline E. Darroch, "Adding It Up: Costs and Benefits of Contraceptive Services," Guttmacher Institute and UNFPA, June 2012.
- 5 Susheela Singh and Jacqueline E. Darroch, "Adding It Up: Costs and Benefits of Contraceptive Services," Guttmacher Institute and UNFPA, June 2012.
- 6 World Health Organization, "Unsafe Abortion: Global and Regional Estimates of Incidence of Unsafe Abortion and Associated Mortality in 2008," 2011.
- 7 World Health Organization and UNICEF, "Building a Future for Women and Children: The 2012 Report."
- 8 Guttmacher Institute, "Abortion Worldwide: A Decade of Uneven Progress," 2009.
- 9 Susheela Singh and Jacqueline E. Darroch, "Adding It Up: Costs and Benefits of Contraceptive Services," Guttmacher Institute and UNFPA, June 2012.
- 10 Susheela Singh and Jacqueline E. Darroch, "Adding It Up: Costs and Benefits of Contraceptive Services," Guttmacher Institute and UNFPA, June 2012.
- 11 USAID, "Achieving the Millennium Development Goals: The contribution of fulfilling the unmet need for family planning," May 2006.

