

SEGAL

Family Foundation

# ADDING IT UP

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The Guttmacher Institute:

The Costs and Benefits of Investing in Family  
Planning and Maternal and Newborn Health

Summary by Segal Family Foundation Staff

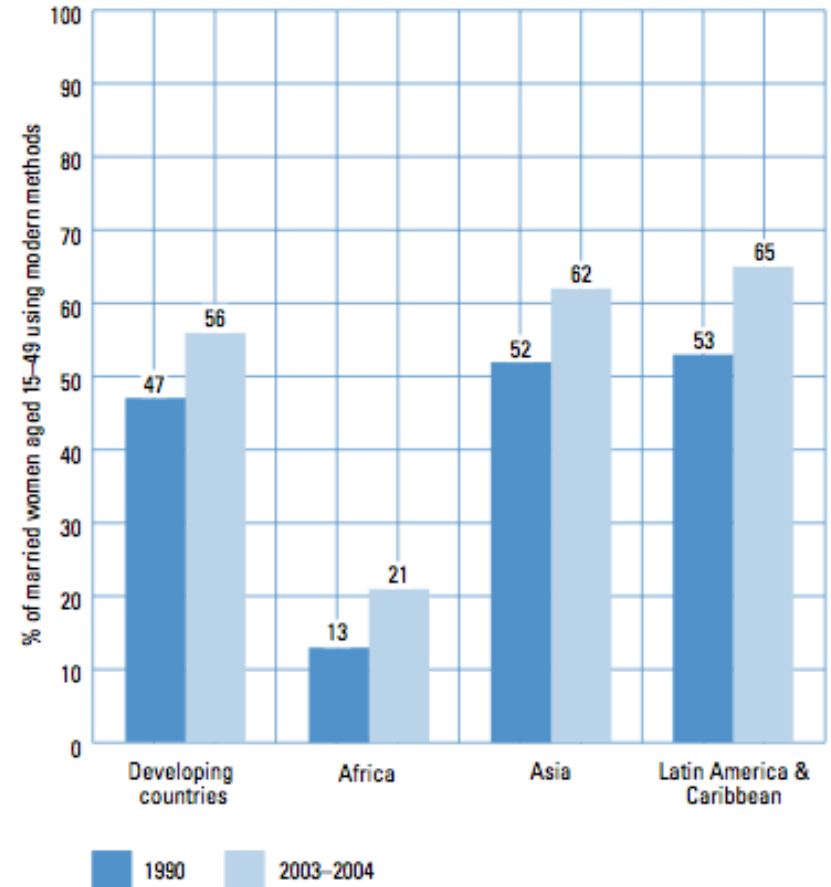
Original Publication: <http://www.guttmacher.org/pubs/AddingItUp2009.pdf>

# Unmet Need

## Family Planning

- Why does unmet need persist?
  - Some women have misperceptions about their risk of becoming pregnant
  - Concerns about health consequences and side effects of modern contraceptive methods
  - Opposition from husbands or family members
  - Lack of access
  - Cultural stigmas

Use of modern family planning methods has risen throughout the developing world, but is still very low in Africa.



**Note** Modern family planning methods include all hormonal methods (i.e., the pill, injectables and implants), IUDs, male and female sterilization, condoms and modern vaginal methods.

**Sources** 1990—reference 22. 2003—reference 23.

# Challenges

## Family Planning and Maternal and Newborn Care

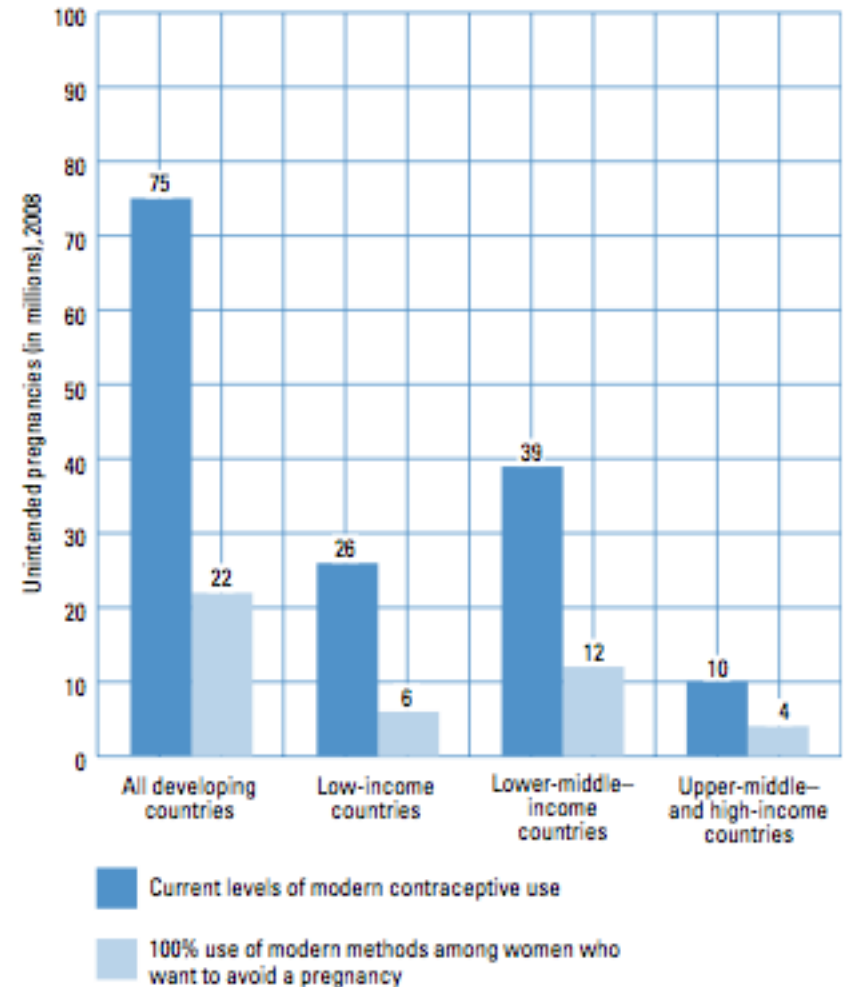
- In 2008, annual rates of unintended pregnancies were highest in Africa, at 86 per 1,000 women aged 15–44. The rate varied from 56 in Northern Africa to 72 in Southern Africa and **118 in Eastern Africa**. Different levels of modern contraceptive use largely explain the different rates.
- **One in 22** women in Sub-Saharan Africa die during pregnancy or childbirth over the course of their lifetimes, compared with one in 110 in Asia, one in 280 in Latin America and the Caribbean, and one in 5,900 in more developed regions.
- A lack of health infrastructure and trained personnel, along with low awareness among families about where and when to seek care, underlie the high levels of maternal deaths.

# Meeting the Need

## Family Planning

- The total cost of meeting current need and unmet need would amount to \$6.7 billion annually (in 2008 dollars)—\$3.1 billion for current services and \$3.6 billion for extending those services to all women with unmet need for effective contraceptives.
- With increased use of contraceptives, this would decrease current spending on treatment for complications of childbirth and unsafe abortions.

If all women wanting to avoid a pregnancy used modern family planning methods, unintended pregnancies would decline sharply.



**Note** Estimates are for 2008 for all developing countries. See footnote on page 17 for definitions of country income levels.

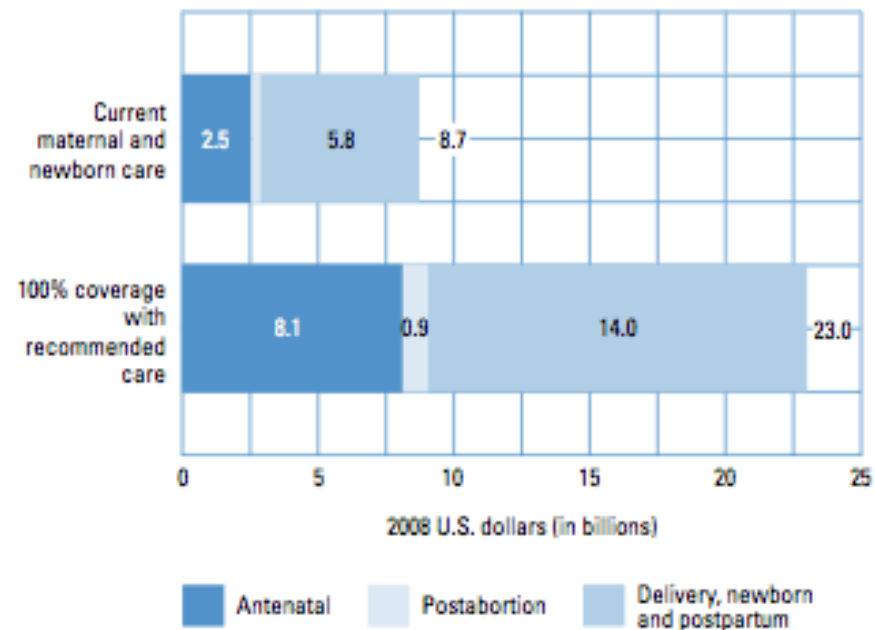
**Source** Reference 49.

# Meeting the Need

## Maternal and Newborn Health Services

- The current cost of providing maternal and newborn care is \$8.7 billion for the developing world as a whole. This cost reflects the fact that many women receive inadequate care or no care.
- Expanding maternal and newborn services so that all pregnant women receive the recommended standard of care would increase costs by \$14.3 billion for a total of \$23.0 billion—more than double the current cost.

### Increased funding is needed to improve maternal and newborn health care.



**Notes** Estimates are for 2008 for all developing countries. Costs include direct costs and the program and systems costs of supporting the services.

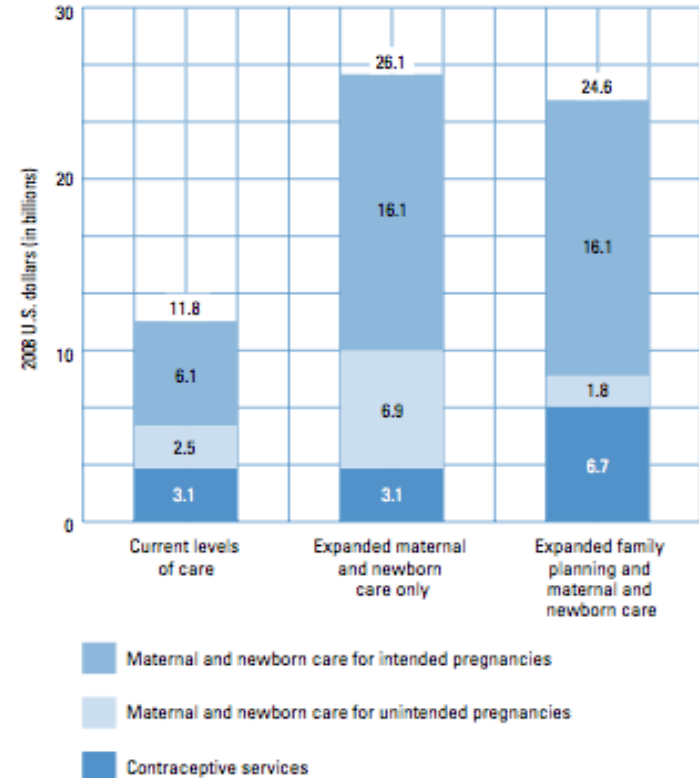
**Source** Reference 49.

# Investing in FP *and* M&N Care

## Cost Benefits

- Providing both services simultaneously would reduce costs from \$26.1 billion to \$24.6 billion—a net saving of \$1.5 billion, compared with investing in maternal and newborn care alone.

**Investments in family planning would help offset the cost of improved maternal and newborn health care.**



**Notes** Estimates are for 2008 for all developing countries. A small proportion of the cost of care for unintended pregnancies is for postabortion care. Components may not add up to totals because of rounding. "Current levels of care" reflects no change in contraceptive use or maternal and newborn care. "Expanded maternal and newborn care only" reflects 100% coverage with recommended care and no change in contraceptive use. "Expanded family planning and maternal and newborn care" reflects 100% use of modern methods and 100% coverage with recommended maternal and newborn care.

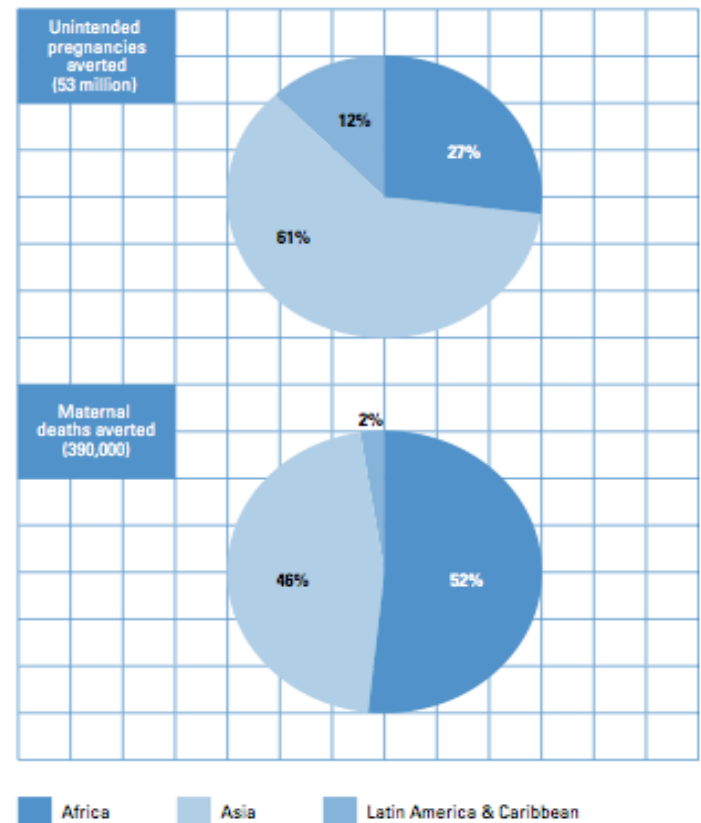
**Source** Reference 49.

# Investing in FP *and* M&N Care

## Synergistic Benefits

- Providing women with both sets of services brings synergistic benefits: better timing and spacing of pregnancies, reduced risks of pregnancy complications, and improvements in the health of women and newborns.
- Family planning services and antenatal care can connect women with the health system, sometimes for the first time, making it more likely they will use health services to address pregnancy related and other health complications when they arise. This may create linkages to other forms of care—HIV and other STIs, preventive urologic and gynecologic care, care for reproductive cancers, infertility services and services to prevent gender-based violence.

**One in four unintended pregnancies and one in two maternal deaths averted by full use of modern family planning and maternal health care would be in Africa.**



**Notes** Estimates are for 2008 for all developing countries. Unintended pregnancies and maternal deaths averted are the numbers that would be prevented with full modern family planning and maternal and newborn care compared with current 2008 levels.

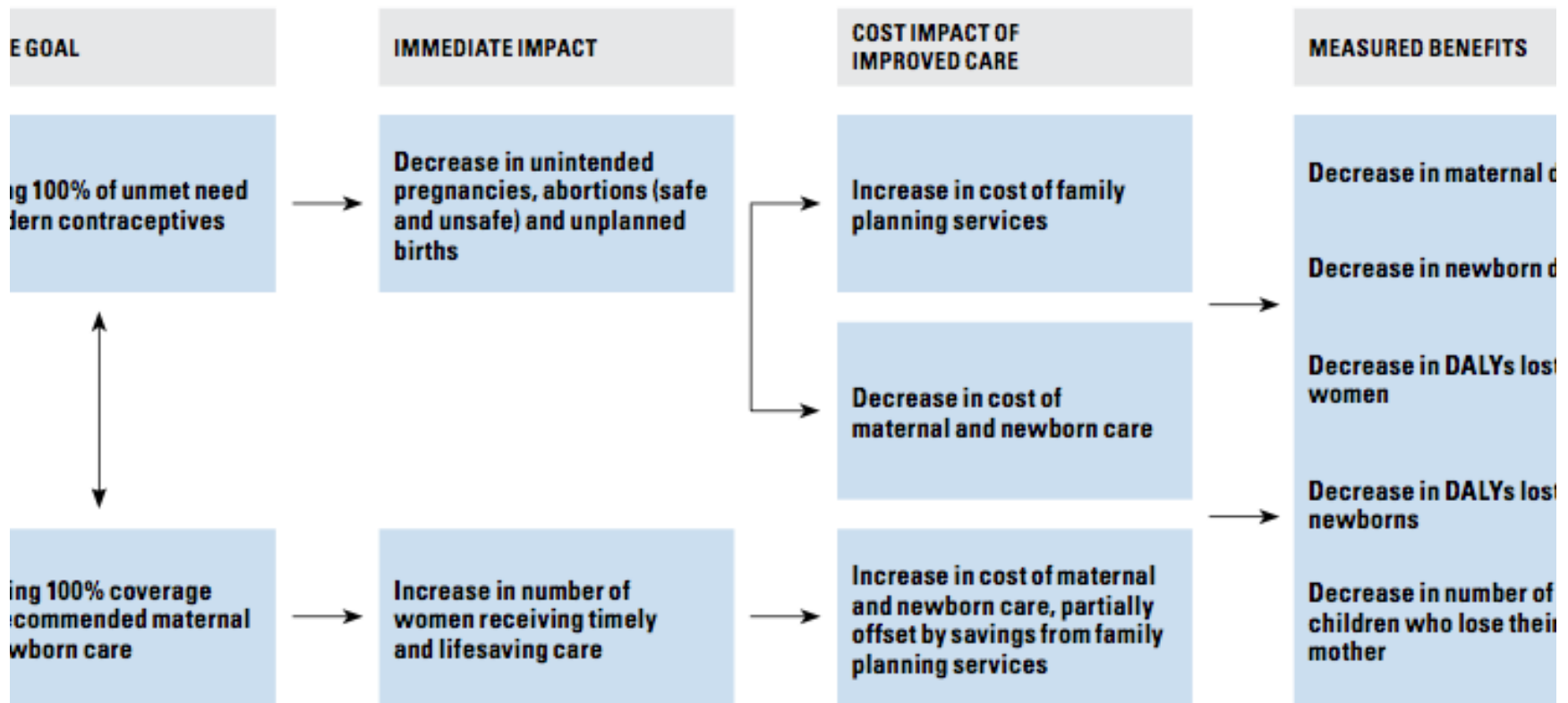
**Source** Reference 49.

# Funding Shortfalls

- Between 2002 and 2006, 53% of all health aid provided directly to developing countries was committed to initiatives to control and treat HIV/AIDS, malaria, tuberculosis and other diseases—and these initiatives are still short of achieving their goals. The remaining assistance left only \$2.25 per capita\* per year for all the other health services, including family planning and maternal and child health.
- Furthermore, donor assistance dedicated to family planning has decreased substantially in absolute dollar amounts in recent years, from \$653 million in 1997 to \$394 million in 2006.
- For developing countries, international funding will be required as well as governmental support.

# Appendix: Measurable Benefits of FP and M&N Care

**A** Family planning and maternal and newborn services result in measurable benefits.



DALY=disability-adjusted life year.

# Appendix: Unmeasured Benefits of FP and M&N Care

FIGURE B

These services have wide-ranging benefits, beyond what is measured in this report.

## EXAMPLES OF UNMEASURED BENEFITS FOR WOMEN AND FAMILIES

- Healthy birthspacing and smaller families, which improve women's health<sup>15-21</sup>
- Improved education and status for women<sup>23,24</sup>
- Improved well-being of families because of mothers' survival<sup>22,27,28</sup>
- Better nutrition and education for children, especially girls<sup>16,25,27,31-33</sup>
- Prevention of high-risk pregnancies (i.e., those among teenagers, women older than 35 and women with many children)<sup>18,34</sup>
- Longer time to breast-feed, which improves infant health and survival<sup>17,35-37</sup>
- Fewer women suffering from anemia, which is disabling and poses a risk for future births<sup>40-42</sup>
- Reduced suffering and stigma due to fistula, infertility and other reproductive health problems<sup>22,27,41,47,48</sup>
- More of parents' time and income allocated to each child<sup>27</sup>

## EXAMPLES OF UNMEASURED BENEFITS FOR SOCIETY

- Reduced public-sector spending on health services for long-term consequences of mothers' and newborns' ill health<sup>22</sup>
- Reduced public-sector spending on education, childhood vaccinations, malaria prevention, water and sanitation<sup>25,26</sup>
- Reduced transmission of HIV/AIDS from use of male and female condoms<sup>29,30</sup>
- Reduced mother-to-child transmission of HIV/AIDS from family planning use among, and recommended care for, women with HIV<sup>29</sup>
- Improved productivity and higher income; greater savings and investment<sup>27</sup>
- Potential for faster economic growth when the working population has fewer children to support<sup>38,39</sup>
- Reduced population pressure on scarce natural resources (e.g., water, forests, arable farmland)<sup>43-46</sup>
- Greater equality between men and women<sup>27,49</sup>
- Less discrimination against girls<sup>9,11,27</sup>