

Adding It Up: Investing in Sexual and Reproductive Health

- Sexual and reproductive health services enable women and couples to have the number of children they want, when they want them; to deliver their babies safely and have healthy newborns; and to have healthy sexual lives, free from HIV and other sexually transmitted infections (STIs).
- The immediate benefits of these services include fewer unintended pregnancies, lower rates of death and disability among women and newborns, and lower incidence of HIV and other STIs. Long-term benefits range from greater family savings to stronger national economies.
- In the last decade, developing regions as a whole have made progress in lowering maternal and infant mortality and HIV incidence. However, huge disparities remain between poorer and better-off women and between poorer and wealthier developing countries.

DEATHS AND DISABILITIES ARE FAR TOO HIGH

- An estimated 290,000 women die each year in developing countries from pregnancy-related causes, and 2.9 million newborns die in the first month of life. Nearly all of these deaths could be prevented with adequate medical care.
- About 1.5 million women living with HIV become pregnant each year. Treatment to prevent mother-to-child transmission of HIV has increased over the last decade, but about 273,000 infants still become infected each year during pregnancy and delivery (130,000) or breast-feeding (143,000).

- Annually, about 200 million women are infected with one of four major curable STIs: chlamydia, gonorrhea, syphilis or trichomoniasis. Most do not know they are infected and do not receive treatment.

MILLIONS OF WOMEN LACK ESSENTIAL SERVICES

- As of 2014, more than half of all women of reproductive age in developing regions want to avoid pregnancy. However, one-fourth of these women—225 million—are not using an effective contraceptive method.
- These women, who are defined as having an unmet need for modern contraception, account for 81% of all unintended pregnancies in developing regions.
- Of the 125 million women who give birth each year in developing regions, many do not make the minimum of four antenatal visits (43%) or deliver in a health facility (34%)—two strategies recommended by the World Health Organization (WHO) for ensuring the well-being of mothers and their babies.

- Each year, more than two-thirds of women (69%) who experience medical complications during pregnancy or delivery do not receive the care they need. Likewise, 69% of newborns who need care for complications during or immediately after birth do not receive it.

- Only 26% of the 1.5 million pregnant women living with HIV receive antiretroviral therapy to protect their health and prevent the transmission of HIV to their newborns.

BENEFITS OF MEETING THE NEED FOR REPRODUCTIVE HEALTH SERVICES

- Providing all women and their newborns with the services they need at standards recommended by WHO would result in large health gains in developing regions.
- If all unmet need for modern contraception were satisfied,
 - unintended pregnancies would drop by 70%, from 74 million to 22 million per year; and
 - unsafe abortions would decline by 74%, from 20 million to 5.1 million.
- If full provision of modern contraception were combined with adequate care for all pregnant women and newborns, including HIV related care,
 - maternal deaths would drop from 290,000 to 96,000 per year;
 - newborn deaths would drop from 2.9 million to 660,000; and
 - HIV infections among newborns would decline from 130,000 to 9,000.
- Other long-term benefits include improving women's ability to complete their education, participate more fully in the labor force, increase their productivity and earnings, and enjoy higher household savings and assets.

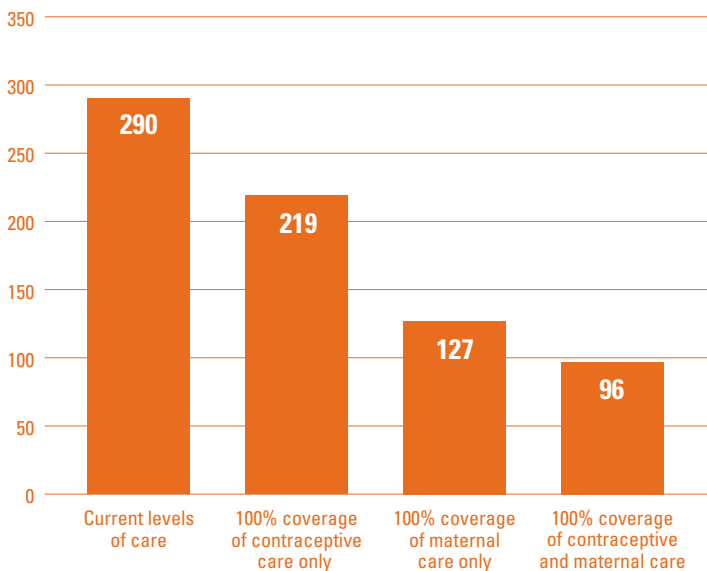
GREATER INVESTMENT IS NEEDED

- Meeting all women's needs for modern contraception in the developing world would cost \$9.4 billion annually, an increase of \$5.3 billion.
- If all need for modern contraception were met, the annual cost of pregnancy-

Investing in Women's Health

Fulfilling unmet need for modern contraception and maternal health care saves lives.

Maternal deaths (000s)



related care for women and their newborns would be \$28.0 billion, an increase of \$13.8 billion. The total includes \$4.2 billion (a \$3.0 billion increase) to provide HIV testing and counseling for all pregnant women, testing for their newborns and antiretroviral therapy for those who need it.

- The cost of treating all women of reproductive age for the major curable STIs—chlamydia, gonorrhea, syphilis and trichomoniasis—would be \$1.7 billion annually, an increase of \$1.4 billion over current spending.
- Fully meeting the need for modern contraception, maternal and newborn health care, antiretroviral care for pregnant women living with HIV and their newborns, and treatment for four major curable STIs would cost \$39.2 billion annually, more than a doubling of current spending in 2014.

THESE INVESTMENTS ARE COST-EFFECTIVE

- Fully satisfying women's modern contraceptive needs would make health care investments more affordable overall. For every additional dollar invested in contraception, the cost of pregnancy-related care (including HIV care for women and newborns) is reduced by \$1.47.
- Meeting the need for maternal and newborn care would cost \$35.8 billion annually at current levels of contraceptive use. However, fully satisfying the need for modern contraception would lower this cost to \$28.0 billion because with fewer unintended pregnancies fewer women and newborns will require care.
- Annually, it would cost only \$25 per woman of reproductive age, or \$7 per person in the developing world, to provide all

women with the total package of sexual and reproductive health care.

GOVERNMENTS AND DONOR AGENCIES MUST ACT

- The additional funds required to fully meet the need for sexual and reproductive health services would come from national governments and individuals who receive the services—which together now cover the bulk of expenditures—and from international donors and NGOs.
- Along with increases in spending, programs must take into account the particular needs of poor and marginalized groups, ensure quality of care, protect privacy, promote informed choice and be free from discrimination.

- As governments and international agencies consider development goals for 2015 and beyond, they should address the need for greater investments in sexual and reproductive health services. These investments are cost-effective; have enormous benefits for women, families and society; and are cornerstones of sustainable development.

CREDITS

The information reported in this fact sheet is based on data presented in the following report, which contains information on data sources and estimation methodology: Singh S, Darroch JE and Ashford LS, Adding It Up: The Costs and Benefits of Investing in Sexual and Reproductive Health—2014, New York: Guttmacher Institute, 2014.

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