



## MEETING THE NEED ► REPRODUCTIVE HEALTH IN AFRICA

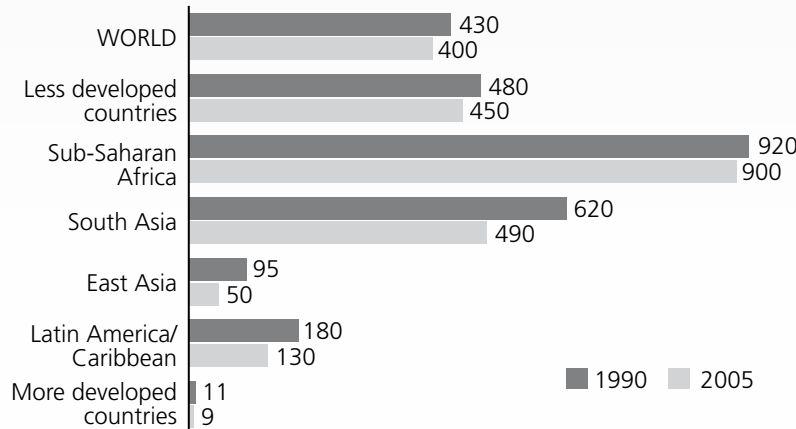
Rapid population growth, high fertility, and lack of access to contraception are major factors adversely affecting the health and well being of women and children in the developing world.

Maternal deaths related to pregnancy or childbirth are rare events in more developed countries with only 9 deaths for every 100,000 births, compared to 450 deaths in less developed countries, but much more common in the developing world, especially Africa. Levels of infant mortality are also much higher in the less developed world, particularly in sub-Saharan Africa.

A woman's lifetime chances of dying from complications of pregnancy and childbirth are 1 in 22 in sub-Saharan Africa, compared to 1 in 7,300 in the developed world.

### There Has Been Little Improvement in Maternal Mortality in Developing Countries.

Maternal deaths per 100,000 births



Source: World Health Organization, et. al, *Maternal Mortality in 2005*.

There are 88 infant deaths for every 1,000 births in sub-Saharan Africa compared to only 6 deaths for every 1,000 births in the developed world.<sup>1</sup>

According to the United Nations, the world loses \$15 billion in productivity annually as a result of maternal mortality.

Decades of research and experience demonstrate that family planning and reproductive health services can reduce maternal and infant mortality and improve women's and children's health and well being. However, there are an estimated 137 million women in the developing world who want to avoid a pregnancy but are not using a family planning method. There are an estimated 35 million women with an unmet need for family planning in sub-Saharan Africa, where fertility still averages over 5 births per woman.<sup>2</sup>

Only 18 percent of married women in Africa are using modern methods of contraception compared to 56 percent of married women in the rest of the developing world.<sup>3</sup> In some African countries, the number of women needing family planning exceeds the number already using contraceptives. If this need were satisfied, contraception use among women would increase to over 40 percent. By reducing unintended pregnancies, family planning also prevents abortions. The United Nations estimates approximately 22,000 African women die each year from unsafe abortion.

In addition to reducing maternal mortality and infant deaths, family planning also reduces the spread of AIDS, improves reproductive health, promotes gender equity, and helps governments achieve national and international development goals. Given their low socioeconomic status and high levels of fertility and maternal mortality, African women and their families would greatly

benefit from increased funding and technical assistance for reproductive health.

### **Costs and Funding Streams**

According to the United Nations Population Fund (UNFPA), achieving universal access to reproductive health by 2015, as defined by the 1994 International Conference on Population and Development, would cost roughly \$50 billion in 2009. The cost reaches approximately \$70 billion in 2015.

The United States is the largest contributor of international assistance in the world, and most of this funding is funneled through the United States Agency for International Development (USAID). USAID provides assistance in about 60 countries based on the strategic interests of the United States. UNFPA works in roughly 150 countries by invitation. The U.S. can provide assistance via both USAID and UNFPA.

Congress has generally supported higher funding levels for reproductive health and family planning programs than those proposed by the Administration.<sup>4</sup> Appropriations peaked in FY1995 at \$577 million. Between 1995 and 2005, U.S. international funding for family planning services, contraceptives, and related programs, which serve both women and men in more than 50 countries, fell by more than \$100 million—a 35 percent reduction when adjusted for inflation.<sup>5</sup>

### **Funding for HIV/AIDS and Reproductive Health**

With enactment of the President's Emergency Plan for AIDS Relief (PEPFAR) in 2004, U.S. foreign assistance to fight HIV/AIDS increased dramatically in the program's 15 focus countries throughout Africa, the Caribbean, and Asia.

However, people affected by HIV face many economic, social, and psychological needs that are not met directly through PEPFAR assistance. Family planning and reproductive health services provide opportunities to educate women about HIV prevention, including the correct use of male and female condoms—the only technologies currently available to prevent HIV.

Many women living with HIV want to limit or space their childbearing. Providing these women with contraceptive services could improve their health and lower the risk of mother-to-child HIV transmission.

A common misperception about HIV/AIDS funding is that as funding for PEPFAR grew, so too did funding for reproductive health and family planning programs. **The truth is this funding was stagnant from Fiscal Year 2003<sup>6</sup> until Fiscal Year 2009, when U.S.-supported family planning and reproductive health programs finally increased, receiving \$455 million.<sup>7</sup>** This funding will help improve the lives of millions of women worldwide. However, much work remains to address the unmet reproductive health needs of women in Africa.

### **Notes**

1. Population Reference Bureau, *2008 World Population Datasheet*, Washington, DC.
2. Population Reference Bureau Press Backgrounder: "Family Planning Saves Lives," March 16, 2009.
3. Speidel, Joseph J., Sinding, Steven, Gillespie, Duff, Maguire, Elizabeth, and Neuse, Margaret. *Making the Case for U.S. International Family Planning Assistance*, Population Reference Bureau, January 2009.
4. CRS Report For Congress, *International Population Assistance and Family Planning Programs: Issues for Congress*, June 6, 2006.
5. Cincotta, Richard and Sarah Haddock, Population Action International, *Family Planning in Sub-Saharan Africa: Reducing Risks in the Era of AIDS*, January 2006.
6. Population Action International, *U.S. HIV/AIDS and Family Planning/Reproductive Health Assistance: A Growing Disparity Within PEPFAR Focus Countries*, January, 2008.
7. Public Law 111-8, Fiscal Year 2009, Omnibus Appropriations Act, March 11, 2009.