Safe Motherhood to MDG5 to Women Deliver to UHC…?

Presented by Ann Starrs, President

Adding It Up Analysis by Jacqueline E. Darroch, Elizabeth Sully and Ann Biddlecom

December 2017
Preventing the Tragedy of Maternal Deaths

A report on the International Safe Motherhood Conference

Nairobi, Kenya
January 1997

Prepared by
Ann Starrs

Co-sponsored by
World Bank
World Health Organization
UNFPA
United Nations Fund for Population Activities

The Safe Motherhood Action Agenda:
Priorities for the Next Decade

12-23 October 1997
Colombo, Sri Lanka

Women Deliver for Development
EXECUTIVE SUMMARY

"Since the human race began, women have delivered for society. It is time now for the world to deliver for women."

The Lancet

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Adding It Up 2017

- Estimates the need among women in developing regions for:
  - Contraception to prevent unintended pregnancies
  - Maternal and newborn care

- Estimates the impact of meeting their needs for contraceptive and maternal and newborn care

- Estimates the cost of fully meeting women’s needs for contraceptive and maternal and newborn care
Key findings:

INVESTING IN CONTRACEPTION AND MATERNAL/NEWBORN HEALTH SAVES LIVES

- 214 million women in developing regions have an unmet need for modern contraception.
- Meeting this unmet need would result in a 75% decline in unintended pregnancies, unplanned births and induced abortions.
- Only 1 in 3 women experiencing complications during pregnancy or delivery receive the care they or their newborns need.
- Providing full contraceptive and maternal and newborn care would reduce annual maternal deaths from 308,000 to 84,000 and newborn deaths from 2.7 million to 538,000.
Key findings:

INVESTING IN SEXUAL AND REPRODUCTIVE HEALTH SAVES MONEY

- Providing contraception and maternal and newborn care to all in need would cost $8.56 per person per year in developing regions.

- Every additional $1 spent on contraceptive care saves $2.20 on maternal and newborn care due to declines in unintended pregnancies.
In developing regions, more than half of women of reproductive age want to avoid a pregnancy.

1,600 million women of reproductive age, 2017
But one-fourth of women wanting to avoid a pregnancy are not using modern contraceptives

214 million have an unmet need for modern contraception

1,600 million women of reproductive age, 2017
Women with unmet need for modern contraceptives account for 84% of unintended pregnancies

89 MILLION UNINTENDED PREGNANCIES, 2017

<table>
<thead>
<tr>
<th>No method</th>
<th>Traditional method</th>
<th>Modern method use</th>
</tr>
</thead>
<tbody>
<tr>
<td>74%</td>
<td>16%</td>
<td>10%</td>
</tr>
</tbody>
</table>

UNMET NEED = 84%

METHODS WOMEN USED WHEN THEY BECAME PREGNANT
Gaps persist across regions and country income levels in the proportion of contraceptive need met

% of women wanting to avoid a pregnancy who are using a modern contraceptive method

- All developing countries: 76%
- Africa: 53%
- Asia: 80%
- Latin America and Caribbean: 79%
- Low-income: 49%
- Lower-middle-income: 69%
- Upper-middle-income: 86%
Large gaps persist across regions in the receipt of essential maternal health services

% among women giving birth

- **Receive ≥4 antenatal care visits**
  - All developing countries: 63%
  - Africa: 51%
  - Asia: 67%
  - Latin America and Caribbean: 88%

- **Give birth in a health facility**
  - All developing countries: 72%
  - Africa: 56%
  - Asia: 79%
  - Latin America and Caribbean: 91%
Fulfilling unmet need for modern contraceptive services would reduce unintended pregnancies, births and abortions substantially

<table>
<thead>
<tr>
<th>Category</th>
<th>Current levels of contraceptive care</th>
<th>100% coverage of contraceptive care</th>
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</thead>
<tbody>
<tr>
<td>Unintended pregnancies</td>
<td>89</td>
<td>22</td>
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<tr>
<td>Unplanned births</td>
<td>30</td>
<td>7</td>
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<tr>
<td>Induced abortions</td>
<td>48</td>
<td>12</td>
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</tbody>
</table>

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Fulfilling unmet need for modern contraceptive services and maternal health care would save women’s lives

No. of maternal deaths

- **308,000**
  - Current levels of contraceptive and maternal care

- **231,000**
  - 100% coverage of contraceptive care, current level of maternal care

- **112,000**
  - 100% coverage of maternal care, current level of contraceptive care

- **84,000**
  - 100% coverage of contraceptive and maternal care
Expanding modern contraceptive services would help to offset the cost of improved maternal and newborn care in developing regions

2017 U.S. dollars (in billions)

<table>
<thead>
<tr>
<th>Current levels of contraceptive and MNH care</th>
<th>100% coverage of MNH care and current level of contraceptive care</th>
<th>100% coverage of contraceptive and MNH care</th>
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</thead>
<tbody>
<tr>
<td>$32.0</td>
<td>$60.4</td>
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<td>$6.3</td>
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<tr>
<td>$8.3</td>
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<tr>
<td>$17.4</td>
<td>$37.3</td>
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</tbody>
</table>

- Cost of modern contraceptive care
- Cost of MNH care for unintended pregnancies
- Cost of MNH care for intended pregnancies
Investing in both contraceptive and maternal and newborn health services saves money

**WHY INVEST IN FAMILY PLANNING?**

$1 = $2.20

Every $1 spent on contraceptive services in developing regions saves $2.20 in maternal and newborn health care due to declines in unintended pregnancies.
Need for greater investment

- Governments, donors, NGOs, households and individuals all need to contribute to close the resource gaps

- Critical investments are needed in both contraceptive and maternal and newborn care

- Return on investment goes beyond impacts on health to broad social and economic benefits for women, their families and their societies
Acknowledgements

Findings and conclusions do not necessarily reflect the positions and policies of the donors
More information

Fact sheet and supplemental tables available at:
www.guttmacher.org/fact-sheet/adding-it-up-contraception-mnh-2017