

ISSUE BRIEF

Family Planning Saves Lives



An estimated 515,000 maternal deaths are recorded every year, 99 percent of these are women living in the developing world.(1) Additionally, more than 11 million children under age 5 die every year in the developing world.(2)

Births that are too close together, too early, or too late in a woman's life decrease both the mother's and the infant's chances for survival. Children born close together are at increased risk of contracting and dying from infectious diseases and have higher rates of malnutrition, which alone accounts for half of all child deaths in developing countries. By helping women space births at least three years apart, bear children during their healthiest years, and avoid unplanned pregnancies, family

planning could prevent 25 percent of maternal and child deaths. USAID, through its family planning and reproductive health programs, has been instrumental in preventing death and illness from pregnancy-related problems.

When a mother dies, her children are less likely to survive. An estimated 90 percent of infants whose mothers die after childbirth will die by their first birthday. Often the orphan receives inadequate care and is more vulnerable to exploitation. Mother's age is also a factor in child survival – babies born to teenagers are more likely to die before their first birthday and children born to women over 40 and to women with three or more previous births are more likely to die before age 5.

Family planning can keep mothers healthy and free of HIV/AIDS and stop transmission of HIV to children. Integrating HIV/AIDS prevention information and counseling with family planning services, particularly in high-prevalence areas, can help stem the spread of the epidemic. Family planning providers can educate couples on safer sexual practices and correct and consistent use of condoms, and provide contraceptives to prevent both unintended pregnancy and sexually transmitted infections (STIs). Family planning programs also can help HIV-positive women prevent an unplanned pregnancy and transmission of the virus to a baby; programs for prevention of mother-to-child HIV transmission can counsel women on use of contraception after birth to ensure healthy spacing and unplanned pregnancies.

Family planning reduces abortion rates. Abortion is one of the most preventable causes of maternal injury and death. In countries in the former Soviet Union, abortion had been used as birth control because women had little access to family planning counseling and contraceptives. With help from USAID, modern family planning methods are now much more widely available and the abortion rate has fallen by more than one-third. In Hungary, the introduction of modern contraceptive methods coincided with a 60 percent reduction in abortions. In Egypt, USAID supported a study in which health care workers were trained to broaden their treatment for the complications resulting from unsafe abortion to include a discussion of contraception and provide a referral for family planning services. The proportion of patients who decided to use a contraceptive method increased from 37 percent to 62 percent.(3) Similar programs and results can be found in Mexico, Bangladesh, and other countries. The evidence is clear – women want to have access to family planning, and when they receive the counseling and services they need, they avoid repeat abortion.

How USAID's Family Planning Programs Help

USAID-supported family planning programs offer a mix of information, counseling, and services including a broad range of contraceptive choices. Often these programs are integrated with other community health programs to improve maternal and child health and include counseling about nutrition and obstetric care. In Bangladesh, the country's highly successful family planning program has grown to become a nationwide initiative that integrates family planning services with maternal and child health, antenatal care, STI diagnosis and treatment, and referrals for other family health needs. Care is provided through a farreaching system involving small community clinics; informal, temporary clinics where health care workers set up operations on a porch or in someone's living room; and community workers who maintain stocks of contraceptives and other health products in their homes for easy access for community members.

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⁽¹⁾ World Health Organization (WHO). (2003). Maternal Mortality in 2000. Geneva: WHO. (2) United Nations Children's Fund (UNICEF). (2003). UNICEF Annual Report 2003. New York: UNICEF. (3) The Egyptian Fertility Care Society (EFCS) and the Population Council. (1995). Improving the Counseling and Medical Care of Postabortion Patients in Egypt, Final Report. Cairo: EFCS.