



Contraception and lack of reproductive health

Global perspective

Worldwide, 225 million women have an ‘unmet need’ for modern contraception. Having an unmet need is defined as wanting to stop or delay childbearing but not using any method of contraception.¹

In 2014, there were 74 million unintended pregnancies² globally. This figure has not declined significantly since 2008 as, despite an increase in modern contraceptive use over this period, global population has also risen.

Lack of access to reproductive health services contributes to unplanned births and abortions, in addition to high levels of maternal and child mortality, pregnancy-related illness, the spread of HIV (both between sexual partners and from mothers to their infants) and sexually-transmitted infections.

The UN’s Millennium Development Goals (MDG) programme,³ which ran from 2000 to 2015, prompted some significant improvements in global reproductive health. However, levels of unmet need remain significant for many the world’s poorest women.

The successor to the MDG, the 2030 Agenda for Sustainable Development (ASD),⁴ has set out goals with the aim of continuing the progress made by the MDG and acknowledges that there are areas, especially in the developing world, where significant progress still needs to be made (see Table 1).

TABLE 1: Reproductive health aspects of the UN’s new 2030 Agenda for Sustainable Development, summarised from UN website.⁵

- Maternal mortality has fallen by almost 50 per cent since 1990; in many regions it has declined by around two-thirds.
- Maternal mortality in developing regions is still 14 times that in the developed regions.
- In developing regions, antenatal care increased from 65 per cent in 1990 to 83 per cent in 2012.
- Only half the women in developing regions receive the health care they need.
- Fewer teenagers are having children in most developing regions, but the rate of reduction has slowed. The increase in contraceptive use in the 1990s was not matched in the 2000s.

The need for family planning is slowly being met for more women, but demand is increasing at a rapid pace.

Raising the standards of reproductive health services worldwide would have a hugely beneficial effect for women and children (see Table 2, overleaf).

TABLE 2: Benefits of improved reproductive health and contraception

In 2014 the Guttmacher Institute summarised the benefits that would result if all women who want to avoid a pregnancy used modern contraceptives *and* all pregnant women and their newborns received care at the standards recommended by WHO. Compared with the current situation:⁶

- Unintended pregnancies would drop by 70 per cent, from 74 million to 22 million per year
- Maternal deaths would drop by 67 per cent, from 290,000 to 96,000
- Newborn deaths would drop by 77 per cent, from 2.9 million to 660,000
- The burden of disability related to pregnancy and delivery experienced by women and newborns would drop by two-thirds
- Transmission of HIV from mothers to newborns would be nearly eliminated — achieving a 93 per cent reduction to 9,000 cases annually

In addition to the above, increased confidence in their survival reduces the perceived need to have many children in order to support parents and provide labour for their communities.

The United Nations Population Fund (UNFPA) aspires to deliver a world where every pregnancy is wanted, every childbirth is safe and every young person's potential fulfilled.⁷ However, there are many barriers to be overcome in order for this to become a reality (*see Table 3*).

Leading charities in this sector — for example, the International Planned Parenthood Federation (IPPF),⁸ which provides family planning services across the world — call for comprehensive sex education.

TABLE 3: Principal barriers to contraceptive access in developing countries

- Inadequate and/or unreliable funding
- Lack of education
- Ideological opposition
- Policies and cultures that deny women's rights
- Lack of political commitment
- Lack of support from partners
- Shortage of skilled and sensitive service-providers to meet the needs of poor women and girls
- Family planning not integrated into primary health services
- Poor local availability of contraceptives
- High cost of long-acting reversible contraceptive methods
- Inadequate development of suitable contraceptive methods to meet ongoing needs of users

See also London Summit on Family Planning — July 11, 2012 overview.⁹

International funding for family planning

Significant amounts of funding for family planning in developing countries is provided in the form of both bilateral aid (government to government) and other donations.

Donor government assistance for family planning in 2014 has been tracked by the Henry J. Kaiser Family Foundation.¹⁰ Total 2014 bilateral donor government support for family planning in low-income and middle-income countries amounted to US\$ 1.4 billion, of which the largest contributions (in US\$ millions) were: USA 363.6, UK 327.6, Netherlands 163.6, Sweden 70.2 and France 69.8.

The OECD DAC is the Development Assistance Committee of the Organisation for Economic Co-operation and Development.¹¹ This is an international

forum of large aid funders, including 29 governments, with a mandate that includes promoting sustainable development and **poverty reduction** in developing countries. Approximately 99 per cent of bilateral family planning funding in 2014 came from the top ten DAC donors.

Other major funding sources include the UNFPA,¹² which received a total of US\$ 472 million from donor government contributions and in 2014 spent an estimated US\$ 334 million on family planning activities. The World Bank spent US\$ 251 million on population and reproductive health activities. Various private sector organizations also provided support, a notable example being US\$ 156 million provided for family planning by the Bill & Melinda Gates Foundation.

The 2012 London Summit on Family Planning¹³ involved the UK Government and the Gates Foundation, in partnership with UNFPA, national governments and others from across the world. This summit supported the right of women and girls to decide, freely and for themselves, whether, when and how many children they have, calling for unprecedented global political commitments and resources that will enable 120 million more women and girls to use contraceptives by 2020. Family Planning 2020¹⁴ is an outcome of the summit, and continues to pursue its goal.

Unplanned pregnancies in the UK

Unplanned pregnancies are also a significant problem in the UK (as many as one in six pregnancies amongst British women is unplanned¹⁵) and other developed countries, albeit at a lower level than in developing countries.

In an increasingly crowded country such as the UK, every birth increases population pressure. Moreover, because of higher per capita consumption levels in wealthy countries, every extra person contributes to a correspondingly greater environmental impact and demand on resources. Therefore, it is extremely important that every child born is wanted, and that

everybody has access to the means to avoid unwanted pregnancies.

Although under-18 conception rates have fallen in recent years, England still has one of the highest teenage pregnancy rates in Europe. Nearly half of all pregnancies among 15–19 year olds in England end in abortion.¹⁶

There are myriad reasons why women have unplanned pregnancies, including lack of choice, lack of access, and failure to use available contraceptives correctly. Further work is needed to increase knowledge of, and access to, emergency contraception, as well as improving reproductive health education through the school curriculum and the media.¹⁷

The National Institute for Health and Care Excellence (NICE) has issued guidelines that aim to improve the quality and availability of contraceptive services, in particular for young people, ensuring that they receive necessary support and reducing the number of unwanted pregnancies.¹⁸

Funding for reproductive health remains a serious problem in the UK. The Family Planning Association (FPA), which closed its helpline and online enquiry service in March 2014 due to lack of funding,¹⁹ forecast in 2015 that cuts to public health spending would have a seriously detrimental impact on reproductive health and contraceptive services.²⁰

In 2013, the UK Department of Health published a framework for reproductive health improvement in England,²¹ but there are concerns that there is no national monitoring of progress against the ambitions it sets out.²²

Summary

The availability of reproductive health services and contraception is one of the key factors that many developing countries need to address in order to become sustainable and prosperous. For developed countries, with high levels of per capita consumption, the need is still vital because of the higher environmental impact of every 'extra' child.

References

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² Adding it Up, 2014 Guttmacher Institute https://www.guttmacher.org/sites/default/files/report_pdf/addingitup2014.pdf

³ MDG Report 2015 Overview [http://www.un.org/millenniumgoals/2015_MDG_Report/pdf/MDG%202015%20rev%20\(July%201\).pdf](http://www.un.org/millenniumgoals/2015_MDG_Report/pdf/MDG%202015%20rev%20(July%201).pdf)

⁴ UN Sustainable Development Goals <http://www.un.org/sustainabledevelopment/development-agenda/>

⁵ <http://www.un.org/sustainabledevelopment/health/>

⁶ Adding it up: The costs and benefits of investing in Sexual and Reproductive Health 2014

https://www.guttmacher.org/sites/default/files/report_pdf/addingitup2014.pdf

⁷ <http://www.unfpa.org/about-us>

⁸ International Planned Parenthood Federation (IPPF), Everyone’s right to know: delivering comprehensive sexuality education for all young people http://www.ippf.org/sites/default/files/ippf_cse_report_eng_web.pdf

⁹ http://ec2-54-210-230-186.compute-1.amazonaws.com/wp-content/uploads/2013/09/London-Summit-Family-PlanningOverview_V1-14June.pdf

¹⁰ <http://kff.org/global-health-policy/report/donor-government-assistance-for-family-planning-in-2014/>

¹¹ <http://www.oecd.org/dac/thedevelopmentassistancecommitteesmandate.htm>

¹² <http://www.unfpa.org/about-us>

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¹⁴ <http://www.familyplanning2020.org/about>

¹⁵ 2013 National Survey of Sexual Attitudes and Lifestyles (Natsal) [http://www.thelancet.com/journals/lancet/article/PIIS0140-6736\(13\)62071-1/fulltext](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736(13)62071-1/fulltext)

¹⁶ The National Institute for Health and Care Excellence (NICE) <https://www.nice.org.uk/news/press-and-media/new-nice-public-health-guidance-to-reduce-unwanted-pregnancies>

¹⁷ L Bury, T Ngo, “The condom broke!” Why do women in the UK have unintended pregnancies? Marie Stopes International <https://mariestopes.org/sites/default/files/The%20condom%20broke%20low%20res%20FINAL%2004%2009.pdf>

¹⁸ *ibid*

¹⁹ Family Planning Association <http://www.fpa.org.uk/support-us/urgent-appeal-keep-fpa-talking-sense-about-sex>

²⁰ Family Planning Association <http://www.fpa.org.uk/news/unprotected-nation-2015-cutting-sexual-reproductive-health-budget-will-cost-billions#18pB41gzFBHp7Cbb.99>

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²² All-Party Parliamentary Group on Sexual and Reproductive Health in the UK, Breaking Down the Barriers,

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