JUST THE NUMBERS

The Impact of U.S. International Family Planning Assistance, 2019

Investments in sexual and reproductive health and rights have profound and measurable benefits. Addressing the full range of sexual and reproductive health needs and rights of all people at all stages of their lives is essential for maternal, newborn, child and adolescent health; gender equality and women's well-being; and economic development and environmental sustainability.¹

Family planning is a fundamental component of comprehensive sexual and reproductive health. The United States—through the U.S. Agency for International Development (USAID) Office of Population and Reproductive Health—plays a critical role in improving access to voluntary family planning information, services and supplies in more than 30 countries where the need is greatest. USAID’s reproductive health efforts include integrating family planning with maternal and child health and HIV programming, and addressing cross-cutting factors—such as child marriage and gender-based violence—that shape individual, family and community sexual and reproductive health and rights.

The U.S. Congress has also designated a contribution to the United Nations Population Fund (UNFPA), an organization that supports the delivery of family planning services and maternal and child health care in more than 150 countries and whose activities complement the work of USAID. The Trump administration, however, decided to withhold this contribution to UNFPA; instead, those funds have been transferred to USAID for bilateral family planning, maternal and reproductive health activities, as required when designated funding to UNFPA has been blocked.²

The Benefits of U.S. International Family Planning Assistance

In federal fiscal year 2019, Congress appropriated $607.5 million in U.S. assistance for family planning and reproductive health programs overseas, including $32.5 million for UNFPA. This $607.5 million makes it possible to achieve the following:

- WITH FUNDING OF $607.5 MILLION
  - 24.3 million women and couples receive contraceptive services and supplies
  - 7.2 million unintended pregnancies are averted, leading to
    - 3.2 million fewer unplanned births
    - 3.1 million fewer induced abortions, including
      2.0 million fewer provided in unsafe conditions
  - 14,700 maternal deaths are prevented

Additional Benefits from Greater Investment

An increase in investment would amplify these benefits. Each additional $10 million in U.S. funding for family planning and reproductive health programs overseas would result in the following:

- WITH EACH ADDITIONAL $10 MILLION
  - 400,000 more women and couples receive contraceptive services and supplies
  - 119,000 fewer unintended pregnancies would occur, and this would lead to
    - 53,000 fewer unplanned births
    - 51,000 fewer abortions, including 34,000 fewer provided in unsafe conditions
  - 240 fewer maternal deaths would occur

Funding increases or reductions have proportional effects. For example, allocating an additional $192.5 million (for a total of $800 million in 2019) would result in the following:

- WITH AN ADDITIONAL $192.5 MILLION
  - 7.7 million more women and couples receive contraceptive services and supplies
  - 2.3 million fewer unintended pregnancies would occur, and this would lead to
    - 1.0 million fewer unplanned births
    - 980,000 fewer abortions, including 650,000 fewer provided in unsafe conditions
  - 4,700 fewer maternal deaths would occur
Methodology and Sources

These estimates are calculated by dividing U.S. family planning funding to countries and regional offices for fiscal year 2019 by estimated 2019 country-level costs per user taken from the most recent comprehensive analysis of costs and benefits of family planning in developing countries. The analysis accounts for inflation and for USAID’s Congressional Notification, which advised how USAID’s Bureau for Global Health intended to obligate the $32.5 million appropriated for UNFPA. The estimates do not reflect the impact of the global gag rule, which threatens to undermine the effectiveness of critical family planning programs by excluding some of the most capable health care organizations. It will be some time before the population-level impact of the global gag rule can be documented.

References


