



ADDING IT UP

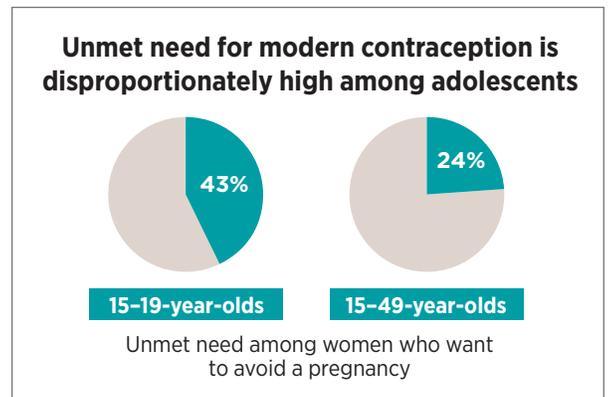
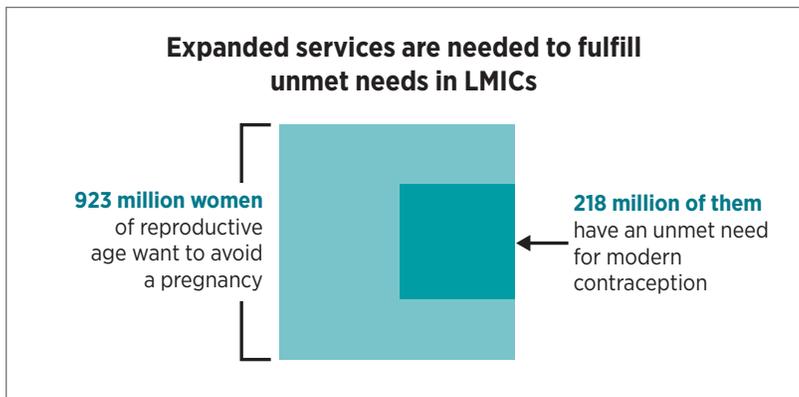
Investing in Sexual and Reproductive Health in Low- and Middle-Income Countries

The Adding It Up study examines the need for, impact of and cost of fully investing in sexual and reproductive health care—services that together ensure people can decide whether and when to have children, experience safe pregnancy and delivery, have healthy newborns, and have a safe and satisfying sexual life.

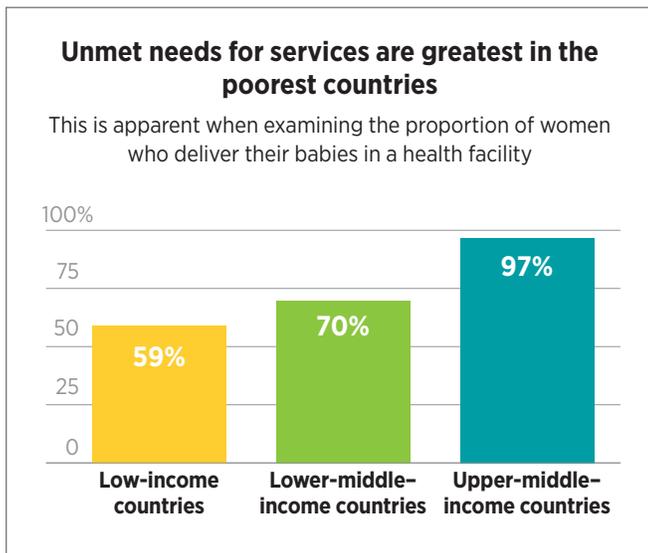
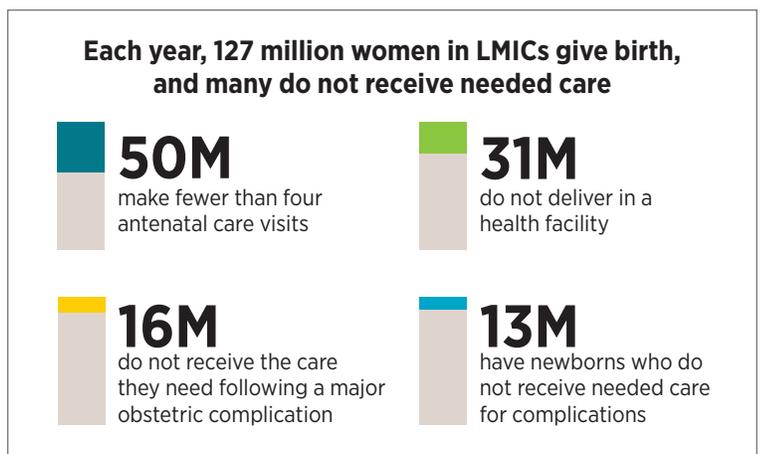
WHO: Women of reproductive age (15–49) in 132 low- and middle-income countries (LMICs; see map) in 2019

WHAT: Contraceptive services, maternal care, newborn care, abortion services and treatment for the major curable STIs

Unmet needs for services in LMICs



111 million unintended pregnancies occur in LMICs each year, accounting for 49% of all pregnancies in those countries



Lack of high-quality sexual and reproductive health care puts women at risk

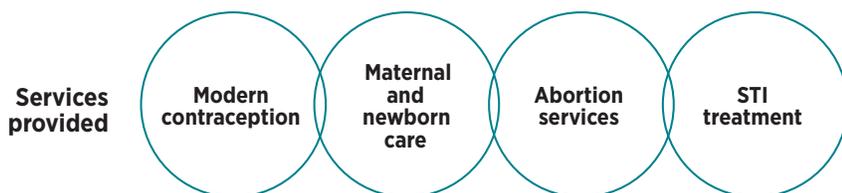
- 35 million have abortions in unsafe conditions
- 299,000 die from causes related to pregnancy and childbirth
- 133 million do not receive the treatment they need for chlamydia, gonorrhea, syphilis and trichomoniasis

Cost of meeting all service needs

An additional \$4.80 per capita annually in LMICs would meet all women's needs for essential sexual and reproductive health services



Annual total cost: $\$38$ billion current + $\$31$ billion add'l = $\$69$ billion

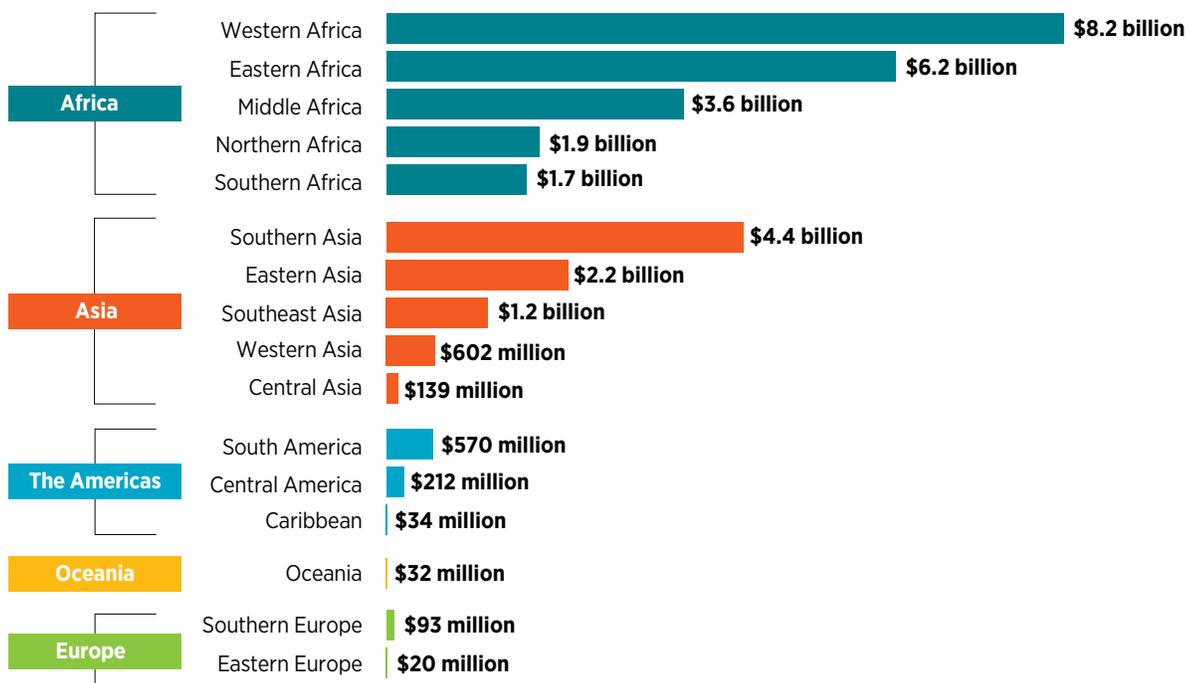


Contraceptive services yield cost savings



Every \$1 spent on contraceptive services beyond the current level would save \$3 in the cost of maternal, newborn and abortion care because contraception reduces unintended pregnancies

The additional investment needed annually for sexual and reproductive health care totals \$31 billion in LMICs and varies widely across subregions



Full investment would improve the quality of sexual and reproductive health care for women who currently receive services and would expand services to reach all women in need

Impacts of expanding and improving services

Investing in sexual and reproductive health care in LMICs would reduce risks for women and newborns

	Annual no. at current levels of care	–	Annual no. if all needs are met	=	No. averted if all needs are met	% change if all needs are met
Unintended pregnancies	111 million		35 million		76 million	-68%
Unplanned births	30 million		9 million		21 million	-71%
Unsafe abortions	35 million		10 million		26 million	-72%
Maternal deaths	299,000		113,000		186,000	-62%
Newborn deaths	2.5 million		0.8 million		1.7 million	-69%
HIV infections in babies ≤6 weeks	110,000		14,000		96,000	-88%
Cases of infertility caused by untreated STIs	3.5 million		0		3.5 million	-100%

Notes: Based on 2019 data. Numbers are rounded.

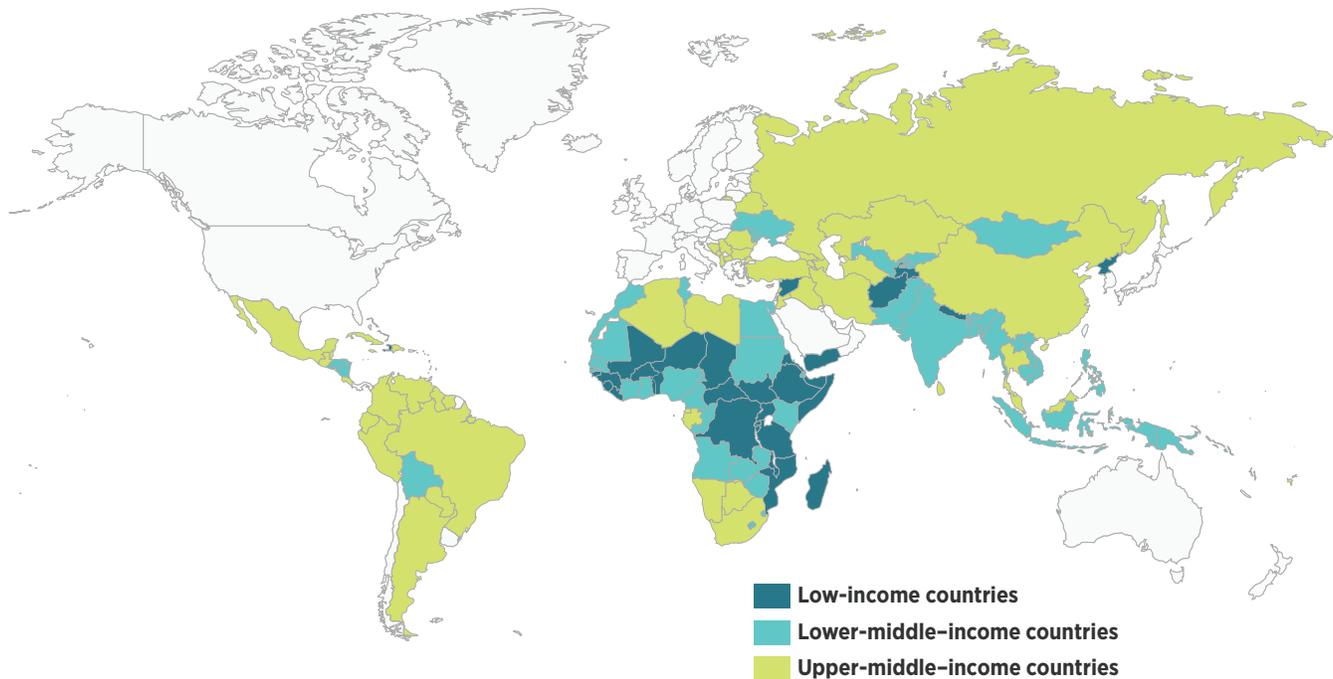
For additional detail, see appendix to the full report at <https://www.guttmacher.org/report/adding-it-up-investing-in-sexual-reproductive-health-2019>.

- **Unintended pregnancies, unsafe abortions and maternal deaths would drop by about two-thirds** if all women in LMICs wanting to avoid a pregnancy were to use modern contraceptives and all pregnant women were to receive care that meets international standards.
- **Newborn deaths would drop by two-thirds, and new HIV infections among babies six weeks and younger would drop by almost nine-tenths**, if all mothers and newborns received the recommended care.
- **Cases of pelvic inflammatory disease and infertility caused by chlamydia or gonorrhea would be eliminated** if all women infected with these STIs were given effective and timely treatment.

Investing for the future

- The interventions that make up the recommended care have proven feasible to implement in diverse settings around the world.
- Investing in them provides national and local governments, the private sector and international development partners with good value for money.
- By saving lives and improving women's health and well-being, sexual and reproductive health care benefits individuals and families and contributes to countries' social and economic development. Such care would also enable people to exercise their sexual and reproductive rights.

Adding It Up 2019 presents estimates for low- and middle-income countries



Per World Bank classifications, “low-income” corresponds to a 2018 gross national income per capita of \$1,025 or less, “lower-middle-income” to \$1,026–3,995, and “upper-middle-income” to \$3,996–12,375.

Source

The information in this fact sheet can be found in Sully EA et al., *Adding It Up: Investing in Sexual and Reproductive Health 2019*, New York: Guttmacher Institute, 2020.

Acknowledgments

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Good reproductive health policy starts with credible research

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Find the full report and appendix tables at <https://www.guttmacher.org/report/adding-it-up-investing-in-sexual-reproductive-health-2019>.