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 seven low- and middle-income countries (LMICs) in the Caribbean in 2019

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

### Unmet needs for services in LMICs in the Caribbean

**Expanded services are needed to fulfill unmet needs in the Caribbean**

5.8 million women of reproductive age want to avoid a pregnancy

1.4 million of them have an unmet need for modern contraception

Among women who want to avoid a pregnancy, unmet need is higher for adolescents aged 15–19 than for all women aged 15–49 (31% versus 24%).

Each year, 641,000 women in the Caribbean give birth, and many do not receive needed care

- 111,000 make fewer than four antenatal care visits
- 168,000 do not deliver in a health facility
- 72,000 do not receive the care they need following a major obstetric complication
- 66,000 have newborns who do not receive needed care for complications

### Cost of meeting all service needs in LMICs in the Caribbean

$7.90 per capita annually—$0.93 more per capita than current costs—would provide all women in need with:

- Modern contraception
- Maternal and newborn care
- Abortion services
- STI treatment

Every $1 spent on contraceptive services beyond the current level would save $4.68 in maternal, newborn and abortion care because contraception reduces the number of unintended pregnancies.

* Countries classified by the World Bank as having a 2018 gross national income per capita of $12,375 or less. LMICs in this subregion are Cuba, Dominican Republic, Grenada, Haiti, Jamaica, Saint Lucia, and Saint Vincent and the Grenadines.
### Impacts of expanding and improving services

**Investing in sexual and reproductive health care in LMICs in the Caribbean would greatly reduce risks for women and newborns**

<table>
<thead>
<tr>
<th></th>
<th>Annual no. at current levels of care</th>
<th>Annual no. if all needs are met</th>
<th>No. averted if all needs are met</th>
<th>% change if all needs are met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unintended pregnancies</td>
<td>791,000</td>
<td>248,000</td>
<td>543,000</td>
<td>–69%</td>
</tr>
<tr>
<td>Unplanned births</td>
<td>307,000</td>
<td>85,000</td>
<td>223,000</td>
<td>–72%</td>
</tr>
<tr>
<td>Unsafe abortions</td>
<td>287,000</td>
<td>99,000</td>
<td>187,000</td>
<td>–65%</td>
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<tr>
<td>Maternal deaths</td>
<td>1,600</td>
<td>300</td>
<td>1,300</td>
<td>–81%</td>
</tr>
<tr>
<td>Newborn deaths</td>
<td>12,000</td>
<td>4,000</td>
<td>8,000</td>
<td>–67%</td>
</tr>
<tr>
<td>HIV infections in babies ≤6 weeks</td>
<td>650</td>
<td>80</td>
<td>570</td>
<td>–88%</td>
</tr>
<tr>
<td>Cases of infertility caused by untreated STIs</td>
<td>26,000</td>
<td>0</td>
<td>26,000</td>
<td>–100%</td>
</tr>
</tbody>
</table>

Notes: Based on 2019 data. Numbers are rounded. Percentage change was calculated from unrounded data.