

Investing in Sexual and Reproductive Health in Asia

- Sexual and reproductive health services enable women and couples to have the number of children they want, when they want them; to deliver their babies safely and have healthy newborns; and to have healthy sexual lives, free from HIV and other sexually transmitted infections (STIs).

- The immediate health benefits of these services include fewer unintended pregnancies, lower rates of death and disability among women and newborns, and lower incidence of HIV and other STIs. Long-term benefits range from greater family savings to stronger national economies.

- Disparities in Asia* are pronounced, with the need for these services heavily concentrated in Southern and Southeastern Asia. These two regions are home to 57% of Asian women of reproductive age (15–49), but account for 88% of maternal deaths and 83% of newborn deaths in Asia as a whole.

MILLIONS OF WOMEN LACK ESSENTIAL SERVICES

- In Asia, more than half of all women of reproductive age want to avoid a pregnancy.

- However, 22% of these women—141 million in 2014—are either using no method or using a less effective, traditional method. These women, who are defined as having an unmet need for modern contraception, account for 77% of all unintended pregnancies in the region.

- Of the 74 million women who give birth each year in Asia, many do not receive the minimum of four antenatal check-ups (42%) or deliver in a health facility (30%)—two strategies recommended by the World Health Organization (WHO) for ensuring the well-being of women and their babies.

- About two-thirds (67%) of women who need care each year for complications of pregnancy and delivery, such as hypertension or obstructed labor, do not receive it. Likewise, 68% of newborns do not receive needed care for major health complications during or soon after birth.

- Unmet need for sexual and reproductive health services is heavily concentrated among the poor. Outside of Eastern Asia and Oceania, just 32% of women from the poorest households deliver their babies in a health facility, compared with 92% of women from the wealthiest households.

- Southern and Southeastern Asia account for 76% of all women in Asia with an unmet need for modern contraception and 93% of women who do not deliver in health facilities.

BENEFITS OF MEETING THE NEED FOR REPRODUCTIVE HEALTH SERVICES

- Providing all women and their newborns with the services they need at the standards recommended by WHO would result in large health gains in Asia.

- If all unmet need for modern contraception were satisfied,
 - unintended pregnancies would drop

- by 67%, from 44 million to 15 million per year; and

- unsafe abortion would drop by 73%, from 9.7 million to 2.6 million.

- If full provision of modern contraception were combined with adequate care for all pregnant women and newborns including HIV-related care,

- maternal deaths would drop by 64%, from 95,000 to 35,000 per year;

- newborn deaths would drop by 74%, from 1.6 million to 0.4 million; and

- HIV infections among newborns would decline by 95%, from 13,000 to 1,000 per year.

- Other long-term benefits from meeting women's sexual and reproductive health needs include improving women's ability to complete their education, participate more fully in the labor force, increase their productivity and earnings, and enjoy higher household savings and assets.

GREATER INVESTMENT IS NEEDED

- Meeting all women's needs for modern contraception in Asia would cost \$4.2 billion annually, up from \$2.5 billion in 2014. This includes improved quality of care for current users, as well as coverage for new contraceptive users.

- If all need for modern contraception were met, the annual cost of improved pregnancy-related care for women and their newborns would be \$10.9 billion.

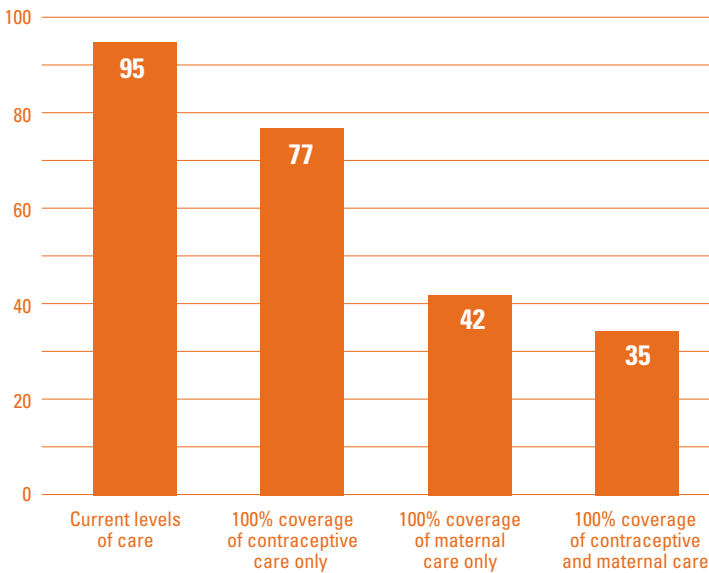
- This includes care for women having live births, miscarriages, stillbirths and abortions. It also includes \$0.9 billion to provide HIV testing for all pregnant

*Includes Central Asia, Eastern Asia (except Japan), Oceania (except Australia and New Zealand), Southeastern Asia, Southern Asia and Western Asia.

Investing in Women's Health

Fulfilling unmet need for modern contraception and maternal health care saves lives.

Maternal deaths in Asia (000s)



women and their newborns and antiretroviral treatment for up to six weeks after delivery for those living with HIV.

- The cost of treating all women of reproductive age for four major curable STIs—chlamydia, gonorrhea, syphilis and trichomoniasis—would be \$0.5 billion annually.

- Together, these investments would bring total expenditures for sexual and reproductive health care to \$15.6 billion, a 50% increase over current expenditures.

THESE INVESTMENTS ARE COST-EFFECTIVE

- By reducing unintended pregnancies, fully satisfying women's need for modern contraception makes other health care investments more affordable.

- Each additional dollar spent on providing contraceptive services in Asia reduces the cost of pregnancy-related care by \$1.26.

- Meeting the need for maternal and newborn care would cost \$13.1 billion annually at current levels of contraceptive use. However, fully satisfying the need for modern contraception would lower this cost to \$10.9 billion because with fewer unintended pregnancies, fewer women and newborns will require care.

- Annually, it would cost only \$14 per woman of reproductive age, or \$3.70 per person, to provide all women in the region with a total package of care that would include

- modern contraceptive services;
- maternal and newborn health care;
- HIV testing, counseling and antiretroviral treatment for women during pregnancy and after delivery;
- HIV testing and treatment for newborns; and
- treatment for the four major curable STIs.

GOVERNMENTS AND DONOR AGENCIES MUST ACT

- The additional funds required to fully meet the need for sexual and reproductive health services would come from national governments and individuals who receive the services—which together account for the bulk of current spending—and from international donors and NGOs.

- Along with increases in spending, programs should adopt a human rights approach to health care delivery, which takes into account the particular needs of poor and marginalized groups, ensures quality of care, protects privacy, promotes informed and voluntary choice, and is free from discrimination.

- As governments and international agencies consider development goals for 2015 and beyond, they should address the need for greater investments in sexual and reproductive health services. These investments are cost-effective; have enormous benefits for women, families and society; and are cornerstones of sustainable development.

CREDITS

The information reported in this fact sheet is drawn from further analyses based on data presented in the following report, which contains information on data sources and estimation methodology: Singh S, Darroch JE and Ashford LS, Adding It Up: The Costs and Benefits of Investing in Sexual and Reproductive Health—2014, New York: Guttmacher Institute, 2014.

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