

Family Planning & Reproductive Health

COMMUNITY REQUEST FY 2020

\$1.66 B

FY 2020 President's Request: \$237 Million
FY 2019 Enacted: \$575 Million

DESCRIPTION

Funding for Family Planning and Reproductive Health (FP/RH) improves maternal and child health, reduces unintended pregnancies, prevents unsafe abortions, lowers rates of HIV and other sexually transmitted infections (STIs), and promotes gender equality and the rights of women and girls.

WHAT DOES THIS BUY?

Funds support programming that provides modern contraception services and supplies.

JUSTIFICATION FOR THE REQUEST

- An estimated 214 million women in developing regions who want to avoid pregnancy for at least two years have an unmet need for modern contraceptives.¹ Meeting this need would reduce unintended pregnancies and decrease abortions, many of which are unsafe.
- In FY 2018, the U.S. invested a total of \$607.5 million in international FP/RH. This funding achieved:
 - Contraceptive services and supplies distributed to 25 million women and couples,
 - 7.5 million unintended pregnancies averted, and
 - 14,600 maternal deaths averted.²
- **In 2017, 308,000 women died from pregnancy and childbirth**, including from unsafe abortion, which continues to be a major cause of high maternal mortality rates. Most of these deaths were preventable and 99% occurred in developing countries.³
- International FP/RH programs are cost effective; every additional dollar spent on contraceptive services saves \$2.22 in pregnancy-related care.⁴
- **Spacing pregnancies by at least three years with family planning could prevent an estimated 26% of under-5 child deaths.**⁵
- Investments in bilateral and multilateral FP/RH programs are essential to achieving U.S. global health goals, advancing gender equality, supporting more sustainable development, and raising standards of living.
- Addressing the demand for FP/RH services will help to decrease HIV and other STI rates and is critical to improving maternal, newborn, and child health. It also promotes women's rights and empowerment, including enabling women and girls to pursue educational and economic opportunities and enhancing programs that prevent and address child, early, and forced marriage, as well as gender-based violence.

U.S. INTEREST

Funding for family planning and reproductive health reduces maternal mortality and promotes the development of healthier, more prosperous, and stable societies.



Looking to the Future

Family Planning and Reproductive Health – TITLE III & V

BOLD VISION

- Additional investment could enable FP/RH programs to reach more people, including those who have been left behind because of inadequate funding levels. It could tackle persistent inequalities among populations who face multiple barriers to accessing FP/RH information and services and exercising their human rights.
- Young women ages 15 to 24 have higher unmet needs for family planning than older women. Additional investment could ensure that girls and young women can determine their health and futures and better contribute economically, socially, and politically to their communities.⁶
- Demonstrating U.S. leadership on international FP/RH by providing additional levels of funding would send a powerful message to the world and have the potential to unlock additional government and private sector support.

IMPACT OF CUTS

Every cut of \$10 million in U.S. international FP/RH assistance would result in:

- 416,000 fewer women and couples receiving contraceptive services and supplies,
- 124,000 more unintended pregnancies, and
- 240 more maternal deaths.⁷

1 “Adding It Up: The Costs and Benefits of Investing in Sexual and Reproductive Health, 2017,” Guttmacher Institute. <http://gu.tt/AddingItUp2017>.

2 “Just the Numbers: The Impact of U.S. International Family Planning Assistance, 2018,” Guttmacher Institute. <http://gu.tt/JustTheNumbers>.

3 “Adding It Up: The Costs and Benefits of Investing in Sexual and Reproductive Health, 2017,” Guttmacher Institute. <http://gu.tt/AddingItUp2017>.

4 Ibid.

5 “The Effects of Fertility Behavior on Child Survival and Child Nutritional Status: Evidence from the Demographic and Health Surveys, 2006 to 2012,” USAID. <https://dhsprogram.com/pubs/pdf/AS37/AS37.pdf>.

6 “Family Planning Equity Among Youth: Where Are We Now,” Population Reference Bureau. <https://www.prb.org/wp-content/uploads/2018/05/PopulationBulletin73-1-YouthEquity.pdf>.

7 “Just the Numbers: The Impact of U.S. International Family Planning Assistance, 2018,” Guttmacher Institute. <http://gu.tt/JustTheNumbers>.

5 YEAR FUNDING HISTORY

■ House ■ Senate

Funding levels may not accurately reflect those in the appropriations bills and/or reports due to rounding.

