

# family planning



## the facts

- Approximately 200 million women worldwide have an unmet need for effective contraception.<sup>1</sup>
- One in three deaths related to pregnancy and childbirth could be avoided if women who wanted effective contraception had access to it.
- Studies show that each dollar spent on family planning can save governments up to US\$31 in health care, water, education, housing and waste disposal.
- Family planning programs can prevent sexually transmitted infections by promoting condom use. By preventing unplanned pregnancies among HIV-positive women, mother-to-child transmission is averted.



### CARE's Response

Despite great progress in family planning over the last several decades, millions of women worldwide and their partners are not using family planning methods to help plan their families, space births and prevent unplanned pregnancies. **Access to quality family planning information and services can help whole communities escape poverty and injustice.** When a woman can choose how many children she has, and how closely her children are spaced in birth, she is more likely to have a smaller, healthier, better educated family. She is more likely to have greater educational and employment opportunities

and share her voice in her community. With access to family planning services and information, women face less risk of death or disability from pregnancy or childbirth.

CARE understands it takes more than offering access to quality family planning services and information to lift a woman out of poverty – we also must address the complex social and cultural barriers that impact her world. For example, a woman's fear of social disapproval or her partner's opposition to family planning may prevent her from seeking out contraceptives. Her worries of a contraceptive's side effects and health concerns may hold her back, or she may lack knowledge and understanding about family planning options.

CARE is committed to increasing access to and use of high-quality family planning information and services by women, men, families and communities through an integrated approach that includes understanding – and addressing – underlying causes of poor reproductive health. And while CARE is best known for empowering individuals and families at the community level, we also help strengthen health systems and collaborate with governments and a host of partners to ensure that the world's most vulnerable women can better plan their lives, be more productive and participate more fully and equally in society.

### Family Planning Highlights

**In Madagascar,** CARE's Extra Mile Initiative (EMI) has extended family planning education and services to six rural communes in eastern Madagascar. The program's strategies have been integrated into local health systems, communities and local government. When EMI began, contraceptive prevalence rate was about 11 percent, with traditional and modern methods combined—well below the national average of 27 percent. A mere 12 months later, 24 percent of women of reproductive age in the project area were using a modern method to plan their families.

**In rural Ethiopia,** CARE's Health Improvement and Women-Owned Transformation project is empowering entire communities to improve reproductive health service quality and accessibility for women and families. In nearly 300 remote, poor communities, CARE offers guidance, training and support to the government's health workers and health facilities, as well as to community volunteers. At existing public forums, women and families are now encouraged to openly discuss formerly taboo family planning topics such as birth spacing and contraceptive use. The use of family planning services in the program area has doubled, the contraception prevalence rate jumped to nearly double the national average reported in 2005, and more than 50 percent of women and men are discussing family planning at home, compared to just 20 percent when the project began.

*"Behavior change in terms of family planning is really palpable here. As village president, I feel responsible for development here, and a priority for development is the good health of the community. Family planning isn't only a health issue but a social issue in the development of a village"*

-- Clovis Raphandra, Village President, Befotaka, Madagascar



### Social Change for Family Planning Results Initiative

In 2008, CARE launched a four-country, four-year program with the goal of **increased and sustained use of family planning.**

The Social Change for Family Planning Results Initiative will integrate family planning into ongoing village savings and HIV-prevention programs in **Ethiopia, Kenya, Tanzania and Rwanda.**

This initiative addresses social issues, such as gender inequity, in conjunction with improvements in health services and information.

CARE seeks to improve the availability of quality family planning, and understand and address social norms that prevent women and couples from postponing, spacing and limiting births.



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