

# FACTSheet

## A Measure of Survival

Pregnancy and childbirth are deadly to more than half a million women worldwide every year—a fact that is unacceptable, but not unavoidable. Despite twenty years of campaigning to improve their sexual and reproductive health, the risk of dying in pregnancy or childbirth continues to show the largest gap between the rich and poor of all development statistics. That so little progress has been made in helping the world's poorest women survive pregnancy and childbirth should serve as a wake-up call to all of us.



### What is A Measure of Survival?

- **A Measure of Survival: Calculating Women's Sexual and Reproductive Risk** classifies 130 developing and developed countries (comprising 96 percent of the world population) into five categories from highest to lowest sexual and reproductive risk for women based on indicators of access to reproductive health service and outcomes.

### What Does This Study Tell Us?

- **Niger, Chad, Mali, Yemen and Ethiopia are among the countries where women are at the highest sexual and reproductive health risk**, while the Netherlands, Switzerland, Singapore, Germany and Belgium are among the safest countries for women's health. In general, women's sexual and reproductive health is riskiest in sub-Saharan Africa and South Asia, and the need for reproductive health services is greatest among the poorest women and men residing in the world's lowest-income countries.
- **Among common causes of disease and death of people in low-income countries, unprotected sex is the second greatest risk factor for health loss and the fifth greatest risk factor for death.** Consequences of unprotected sex include transmission of HIV and other sexually transmitted infections (STIs), complications from pregnancy, childbirth and unsafe abortion.
- **Unprotected sex is the primary mode of HIV transmission for women.** Worldwide, almost half of the people living with HIV or AIDS are women, and in sub-Saharan Africa—where heterosexual transmission is highest—60 percent of those living with HIV or AIDS are

women. Although marriage is often seen as a protective factor, it is not. Even in countries that have seen declines in HIV prevalence, the majority of new infections are now among monogamous married women.

- **Pregnancy is the leading cause of death for young women aged 15 to 19 worldwide** with complications of childbirth and unsafe abortion being the major risk factors.<sup>1</sup> Teenage girls who are not physically mature are at greater risk of obstructed labor, pregnancy-induced hypertension and obstetric fistula.
- **Death and injury rates are higher among infants born to young mothers.** Young mothers are less likely to get prenatal care, and babies born to very young mothers are more likely to be premature or underweight.
- **In the next ten years, 100 million young women will marry before they turn 18.**<sup>2</sup> In most developing countries (excluding China),<sup>3</sup> one in seven girls marries before she is 15. Early marriage can mark the end of investments in the education and development of girls, contributing to persistent poverty among women,<sup>4</sup> and young married girls are more likely to experience domestic violence and sexual abuse.<sup>5</sup>
- **The global increase in antenatal care coverage saves newborns' lives.** Antenatal care is care for and during pregnancy, provided by a skilled health professional. Across regions, the use of antenatal care is significantly influenced by wealth, and there are vast disparities in access to antenatal care between rural and urban areas.

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- **It is estimated that up to 100,000 maternal deaths could be avoided each year if unintended pregnancies were prevented.**<sup>6</sup> Women and men are entitled to determine the number, timing and spacing of their children, with access to voluntary family planning education, services and supplies—including condoms. Still, more than 120 million women say they would prefer to avoid a pregnancy, but are not using any form of contraception.<sup>7</sup>
- **The safety of births is largely dependent upon the presence of skilled attendants.** In the early 1990s, it was estimated that one in four women in developing countries gave birth without skilled care. Today—fifteen years later—this figure is still the same.<sup>8</sup>
- **Unsafe abortion is preventable when women’s family planning needs are met and when abortion is legal and accessible.** Yet, it is estimated that 68,000 women die from unsafe abortion every year, and millions more suffer complications. Of the estimated 210 million pregnancies that occur every year, about 46 million end in induced abortion; more than 18 million of these abortions are performed under unsafe circumstances, primarily in developing countries.<sup>9</sup>

## How Do We Save Women’s Lives?

- **Voluntary family planning can reduce the number of maternal deaths by reducing unwanted pregnancies and preventing recourse to often-unsafe abortion.** In developing countries, 41 percent of all pregnancies are unintended.<sup>10</sup> In these countries, 35 percent of maternal deaths result from unintended pregnancies, and 13 percent of maternal deaths are attributed to unsafe abortion.
- **Some countries, including low-income countries, have successfully reduced maternal mortality.** Some of these countries are Romania, Thailand, Malaysia, Sri Lanka, Egypt and Honduras. Their successes stem from a number of factors, including increasing access to hospital and midwifery care, improving quality of care, and controlling infectious diseases.<sup>11</sup> They also invested in making health care widely available by building on and improving already existing service delivery models and health care infrastructure, as well as investing in health care personnel.

## What Can Be Done to Lower Women’s Sexual and Reproductive Risk Worldwide?

- 1 Reach youth with comprehensive sexual and reproductive health education
- 2 Scale-up sexually transmitted infection (STI) interventions
- 3 End harmful practices like very early marriage, intimate partner violence and female genital mutilation
- 4 Recommit to voluntary family planning
- 5 Make childbirth safer by increasing access to reproductive health care
- 6 Make abortion safe, legal and accessible
- 7 Focus on the distribution of services
- 8 Involve communities in building networks of health workers
- 9 Coordinate sexual and reproductive health with HIV/AIDS efforts
- 10 Finance reproductive health supplies
- 11 Make country ownership a reality by including local officials and civil society in decision-making
- 12 Improve research of sexual and reproductive health

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