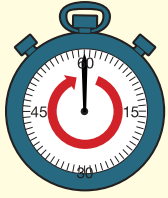


Global warnings

Worldwide sexual and reproductive health from contraceptive supplies to maternal deaths

Every minute in the world



650 people are infected with a curable STI

380 women become pregnant

190 of these women did not plan or do not wish the pregnancy

Source: World Bank

10 people are infected with HIV

1 woman dies from a pregnancy-related cause

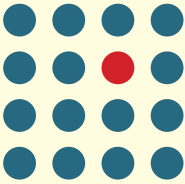
110 women experience a pregnancy-related complication

40 women have an unsafe abortion

Women at risk

1 in 16

1 in 2,800

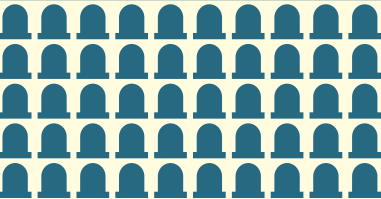


The risk of a sub-Saharan African woman dying from a complication related to pregnancy or childbirth

The risk of a woman from a developed country dying from a complication related to pregnancy or childbirth

Source: WHO, UNICEF, UNFPA

Every year



529,000 women

die from pregnancy-related causes Source: UNFPA

That is almost as many deaths as if the Titanic, filled with pregnant women, sank every day of the year (1,500 people died in the Titanic)

201 million

women would like to use contraception but are unable to access it



This is about one in seven women of reproductive age in the developing world

Without contraception



6 out of 10 women in sub-Saharan Africa (63%)



3 out of 10 women in Latin America and the Caribbean (29%)



Nearly 3 out of 10 women in Asia (24%) are at risk of unintended pregnancy

It would cost about **US\$3.9bn**

a year to provide the missing services

US\$7.1bn

is the cost of providing modern contraceptive services to current users in the developing world. Each year this spending prevents:

187m unintended pregnancies

60m unplanned births

105m induced abortions

22m spontaneous abortions

2.7m infant deaths

79,000 deaths from unsafe abortion

136,000 other pregnancy-related deaths

685,000 children losing their mothers as a result of pregnancy-related deaths

Source: All figures in this column from The Alan Guttmacher Institute and UNFPA 2004

Funding shortfalls

At the 1994 International Conference on Population and Development, 179 nation states signed up to a 20-year programme of action that aimed to deliver sexual and reproductive health and rights for all by 2015. Participants agreed that the developing countries would fund two-thirds of the cost of achieving the programme and developed countries would pay the rest. Below are listed the sums they should have paid, and what they had actually given by 2001.

What they should be giving

All donor countries, US\$, 1996-2001

Key	Owed	Paid	Japan	
	480.8m	180.6m	5.7bn	634.1m
	300.2m		5.1bn	
Australia	480.8m	180.6m	Luxembourg	22.8m
	300.2m			26.9m
				Commitments met
Austria	242.7m	12.8m	Netherlands	480.3m
	229.9m			807.8m
				Commitments met
Belgium	302.0m	78.6m	New Zealand	64.3m
	223.4m			12.1m
				52.2
Canada	850.1m	196.9m	Norway	208.0m
	653.2m			336.4m
				Commitments met
Denmark	203.7m	323.8m	Portugal	136.4m
				7.0m
				129.4m
Finland	154.9m	127.8m	Spain	734.5m
	27.1m			68.4m
				666.1m
France	1.7bn	123.4m	Sweden	296.7m
	1.6bn			388.1m
				Commitments met
Germany	2.4bn	731.1m	Switzerland	331.8m
	1.7bn			108.1m
				223.7m
Ireland	110.6m	16.8m	United Kingdom	1.9bn
	93.8m			1.1bn
				744.5m
Italy	1.4bn	108.7m	USA	12.3bn
	1.3bn			4.1bn
				8.2bn

Source: Population Action International

US\$1m

Every \$1m shortfall in funding for reproductive health – including contraceptives, condoms, medical equipment and supplies – results in:

360,000 unwanted pregnancies

150,000 induced abortions

800 maternal deaths

11,000 infant deaths

14,000 additional deaths of children under five

Source: UN Population Fund, Reproductive Health Essentials: Securing the Supply, UNFPA, 2002