Empty Handed: Responding to the Demand for Contraceptives

Empty Handed tells the story of women's lack of access to reproductive health supplies in sub-Saharan Africa, and its impact on their lives. The film documents the challenges at each level of the supply chain and identifies key areas for improvement. Empty Handed aims to provoke discussion and mobilize support for reproductive health supplies.

Background
Around the world, more than 200 million women lack access to basic contraception. Often, these women must travel far from their communities to reach a health facility, only to return home empty handed due to shortages and stock-outs.

When women seeking family planning services are turned away, they are unable to protect themselves from unintended pregnancies and sexually-transmitted infections, including HIV/AIDS. In developing countries, a woman's lifetime risk of dying due to pregnancy and childbirth is 1 in 75. In sub-Saharan Africa, where fertility rates are some of the highest in the world, the risk of dying is 1 in 22.

Family planning is an effective strategy to reduce maternal mortality. This film shows that ongoing challenges in obtaining reproductive health supplies can have devastating consequences:

Family Size
Unintended pregnancies lead women to have larger families than they can provide for, deepening existing poverty in many communities in sub-Saharan Africa.

Abortion
Ninety-eight percent of the 4.7 million abortions in sub-Saharan Africa each year are unsafe. Unsafe abortions can cause severe bleeding and infection and lead to an increased risk of infertility, ectopic pregnancy, premature delivery and spontaneous abortion in future pregnancies.

Spacing & Delaying Pregnancy
Frequent pregnancies strain a woman's body, and newborns are 2.5 times more likely to die in the first month of life if the mother becomes pregnant less than...
6 months after a previous birth. Delaying motherhood also has benefits, as girls between 15 and 19 are twice as likely to die from childbirth as women over the age of 20.

**HIV/AIDS & other STIs**

In 2008, 68 percent of all new HIV infections were in sub-Saharan Africa, and women made up 60 percent of the newly infected. STIs are among the top five issues adults seek health care for in developing countries.

**Uganda Facts:**
- 69 percent of women need contraceptives, but do not have access. Meeting this demand would avert 85 percent unintended pregnancies, 85 percent of unplanned births, 84 percent of abortions, 40 percent of maternal deaths and 40 percent of infant deaths.
- 1.2 million unintended pregnancies occur every year.
- A woman will have an average of 6.7 children during her lifetime.
- 8,100 women die annually during or after childbirth.
- Forty two percent of women have given birth by age 18.
- Among the highest population growth rates in the world at 3.2 percent per year.

**The Contraceptives Supply Chain**

Many challenges along the supply chain contribute to women’s lack of access to contraceptives. Too often, donor support is not used effectively. African governments are spending an average of 4.7 percent on health and less than $2 per person on maternal health, despite promises by health ministers to spend 15 percent of gross domestic product (GDP) on health.

Gaps in funding due to decentralization also hurt the availability of supplies on the district and local levels. Frequently, money for supplies comes from general health care funding, is not an official budget line item, and lacks comprehensive estimates for all costs associated with distribution. Even in countries where governments allocate a budget line item for contraceptives, the amount is often not fully disbursed. Limited human resource capacity, weak transportation and outdated inventory systems all lead to major delays in supply delivery to local facilities, sometimes causing supplies to sit in storage while clinics experience severe shortages.

**The Benefits of Investing in Family Planning**

Meeting women’s demand for contraceptives increases the health and stability of their families, and results in major savings over time. Every dollar invested in family planning globally saves $1.30 in maternal and newborn health costs and $25 in HIV/AIDS-related costs. Making contraceptives available to every woman that wants them would prevent approximately 4 million unintended pregnancies, 90,000 maternal deaths and 670,000 newborn deaths. Currently, $290 million is spent on family planning in sub-Saharan Africa, while an estimated $2.4 billion is needed.

**Call to Action**

Everyone has a role to play in improving access to reproductive health supplies:

**Donors**
- Focus on capacity-building and provide technical support to national governments.

**National Government**
- Create a national strategy and budget for the distribution of reproductive health supplies.
- Include district officials, local facilities and civil society in decision-making, and work closely with them to implement supply delivery systems.
- Meet the agreed-upon funding targets for family planning.

**District**
- Incorporate supply distribution costs into budgets and disburse funds effectively.
- Work closely with national government to ensure timely delivery of supplies to local health facilities.

**Local/Health Facility**
- Communicate with the district regarding local needs.
- Educate community members about reproductive health services.

**Civil Society Organizations & General Public**
- Build relationships with decision-makers and advocate for local needs.
- Follow-up and hold governments accountable for implementing policies.

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Empty Handed is dedicated to the memory of Terri L. Bartlett, our indefatigable colleague whose advocacy for women’s reproductive health and rights was her life’s work and passion. Terri spearheaded global efforts to increase political and financial support for contraceptives, always keeping women at the center of our collective advocacy.