Access to Reproductive Health among Least Developed Countries

Pre-Conference Event: Promoting Universal Access to Essential Services in LDCs

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Reproductive Health (RH) in the MDGs

Review of evidence for the RH indicators
  – Globally
  – LDCs
    • Review of trends for RH indicators in LDCs
    • Review of disparity issues inside LDCs

Conclusions
Millennium Development Goal 5

**MDG5**: Improve maternal health

- **Target 5.A**: Reduce by three quarters, between 1990 and 2015, the maternal mortality ratio.
  - 5.1 Maternal mortality ratio
  - Proportion of births attended by skilled health personnel

- **Target 5.B**: Achieve, by 2015, universal access to reproductive health.
  - 5.3 Contraceptive prevalence rate
  - 5.4 Adolescent birth rate
  - 5.5 Antenatal care coverage (at least one visit and at least 4 visits)
  - 5.6 Unmet need for family planning
Target 5.B: Achieve, by 2015, universal access to reproductive health.

- Adolescent birth rate (ABR)
- Contraceptive prevalence rate (CPR)
- Unmet need for family planning (UNR)
Reproductive Health (RH) in MDG5

- Review of evidence for the RH indicators
  - Globally
  - LDCs
    - Review of trends for RH indicators in LDCs
LDCs: Trend in adolescent birth rate

- 1990: 133
- 2000: 117
- Around 2007: 121
LDCs: Trend in contraceptive prevalence rate

- 1990: 17
- 2000: 28
- Around 2007: 31
Trend in contraceptive prevalence rate

- **LDCs**
- **WORLD**

<table>
<thead>
<tr>
<th>Year</th>
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<th>WORLD</th>
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<tr>
<td>1990</td>
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<td>55</td>
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<td>2000</td>
<td>28</td>
<td>61</td>
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<tr>
<td>Around 2007</td>
<td>31</td>
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LDCs: Trend in Unmet need rate for contraception

- 1990: 26
- 2000: 24
- Around 2007: 24
Trend in Unmet need rate for contraception

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<td>2000</td>
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<td>Around 2007</td>
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</table>
Summary for LDCs at Around 2007

- ABR = 121 per 1,000 girls 15-19
- CPR = 31% of married/union women 15-49
- UNR = 24% of women (15-49) wanting no more children or wanting to delay the next birth
- Proportion of demand satisfied = 56%
LDCs: Trends in the percentage of satisfied demand for contraception
Trends in the percentage of satisfied demand for contraception

WORLD

Least developed countries (LDCs)
Looking at 17 countries in Sub-Saharan Africa
With 2 Demographic and Health Surveys (DHS) since 2000
For the same indicators: ABR, CPR and UNR according to place of residence (urban/rural), level of education, and household wealth (quintiles)

Question: What is the extent of inequalities/disparities among LDCs on the issue of reproductive health?
Adolescent birth rate for 17 LDCs in Sub-Saharan Africa by background characteristics

- Rural: 157
- Urban: 84
- No education: 192
- Primary: 127
- Secondary+: 179
- Poorest 20%: 167
- Second: 158
- Third: 135
- Fourth: 76
- Richest 20%: 100
Trend in adolescent birth rate for 17 LDCs in Sub-Saharan Africa with two consecutive DHS by background characteristics

Contraceptive prevalence rate for 17 LDCs in Sub-Saharan Africa by background characteristics (2003-2008)
Trend in contraceptive prevalence rate for 17 LDCs in Sub-Saharan Africa with two consecutive DHS by background characteristics

- Rural
- Urban
- No education
- Primary
- Secondary+ Poorest 20%
- Second
- Third
- Fourth
- Richest 20%

First survey 1988-2003
Second survey 2003-2008
Demand satisfied (%) for 17 LDCs in Sub-Saharan Africa by background characteristics (2003-2008)
Trend in demand satisfied (%) for 17 LDCs in Sub-Saharan Africa with two consecutive DHS by background characteristics

- First survey, 1988-2003
- Second survey 2003-2008

<table>
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<tr>
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Conclusions

- Progress in increasing access to RH is possible
- The 1990s witnessed significant gains in RH
- Since 2000, RH has been at a virtual standstill
- The stalled progress has not affected everyone in the same way: progress in the most advantaged
- Access to RH correlates with the S-E status of women
- Significant disparities still exist among LDCs
- Efforts to focus on overcoming disparities in both access and utilization of RH services
- Finally, the importance of having high-quality data
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