



U.S. Agency for International Development

Bureau for Global Health

ISSUE BRIEF

Population and Reproductive Health

October 2003

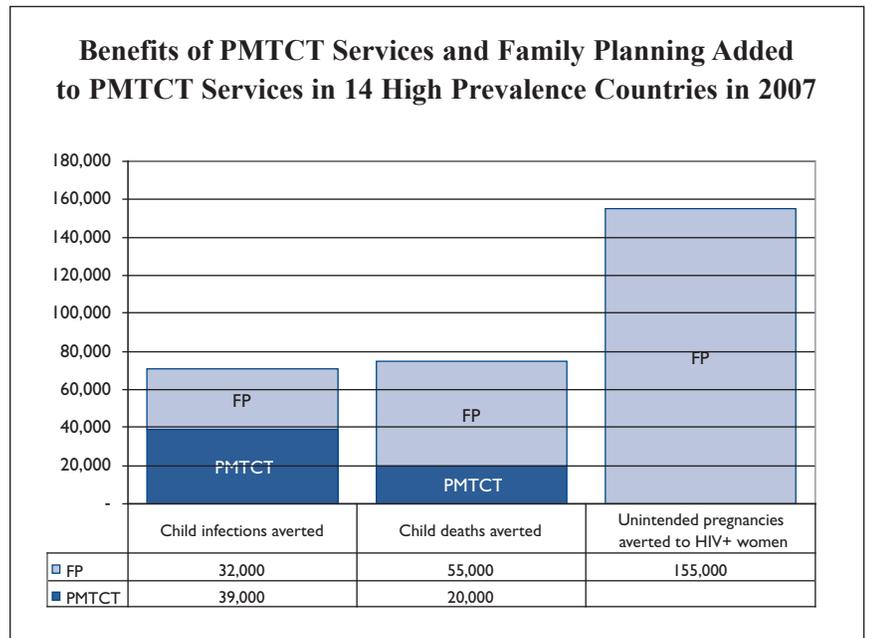
Adding Family Planning to PMTCT Sites Increases the Benefits of PMTCT

A recent USAID-funded analysis examined the costs and benefits of adding family planning services to programs for the prevention of mother to child transmission of HIV (PMTCT). The findings suggest that adding of family planning to PMTCT can save the lives of thousands of women and children and significantly reduce the number of orphans.

High levels of HIV prevalence among women of childbearing age in many parts of the world carry a triple tragedy. Not only do these women face the

prospect of discrimination, illness and early death, but they may also pass the HIV infection to their children or leave their children behind as orphans when they die. USAID and other donors are rapidly expanding programs to prevent adult HIV infections (through behavior change communication, voluntary counseling and testing, etc.) and to improve treatment for those already infected. USAID is also expanding PMTCT programs globally through our field missions and within the 14 countries in the President Bush's new International Mother and Child HIV Prevention Initiative.

Family planning can help HIV/AIDS efforts by providing HIV+ couples with an opportunity to prevent unintended pregnancies and to prevent future children from becoming HIV-infected or orphaned. Family planning has many other benefits as well for both HIV+ and HIV- mothers. For example, birth spacing can significantly reduce child and maternal mortality rates, saving many lives.



Additional Cost-Effectiveness Estimates of Adding Family Planning to PMTCT services

	PMTCT	FP added to PMTCT
Cost per infection averted	\$1300	\$660
Cost per child death averted	\$2600	\$360
Cost per pregnancy averted to HIV+ mother		\$130

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For details see full report, by J. Stover, N. Fuchs, D. Halperin, A. Gibbons, D. Gillespie (j.stover@tfgi.com).