



# Christian Connections for International Health

## Opportunities for Faith-Based Organizations to Integrate Family Planning with HIV/AIDS Services

*This document was developed by the Family Planning/Reproductive Health Working Group of Christian Connections for International Health (CCIH), in collaboration with colleagues at Family Health International (FHI), an affiliate organization of CCIH.*

### Family planning includes a variety of methods

Primarily, family planning methods work before fertilization, by preventing the contact of the sperm with the egg.

Faith-based organizations (FBOs) provide various family planning methods consistent with their beliefs and values. Examples of methods that may be provided are fertility-awareness methods (such as the standard days method), postpartum breastfeeding to prevent pregnancy (lactational amenorrhea method), condoms, oral contraceptive pills, implants, intrauterine contraceptive devices (IUCDs), and injectables.

For more information on how each method works, please see *Family Planning: A Global Handbook for Providers*, published by the World Health Organization (2007).

### Benefits of family planning

Christian Connections for International Health (CCIH) supports family planning, because it helps women and men have the number of children they want and can care for, at the intervals they choose. Family planning prevents unintended pregnancies and abortion. It contributes to the goal of faith-based organizations (FBOs) to improve health and well-being worldwide, by offering benefits in the following areas.

- **Maternal and child health:** Family planning prevents many deaths, by allowing women to delay, space, limit, or avoid pregnancies. Women older than 35 and younger than 18 face greater risk during pregnancy than women between these ages, and thus have a special need for family planning. Women regardless of age who wait at least two years between pregnancies are significantly less likely to bear children who die at birth, in infancy, or during childhood.<sup>1</sup>
- **HIV/AIDS:** Family planning reduces the number of HIV infections, by enabling women with HIV to avoid unwanted pregnancies and prevent mother-to-child transmission (MTCT) of the virus.<sup>1</sup> Family planning in the form of consistent and correct condom use can also prevent sexual transmission of HIV.
- **Abortions:** Family planning reduces the number of abortions and the number of deaths from unsafe abortions, by preventing unwanted pregnancies.<sup>1</sup>
- **Communities:** Within communities, family planning can improve productivity, lighten the social burden of caring for neglected children, decrease the need for public expenditures on education, health care, and social services, and increase savings and investments.<sup>1</sup>

### Unmet need for family planning remains high, especially among HIV-positive women

Despite the benefits individuals and communities experience from voluntary family planning practices, unmet need for family planning remains high. An estimated 137 million women worldwide currently want to avoid pregnancy but are not using any family planning method.<sup>1</sup>

Unmet need is often greatest in countries with high HIV prevalence.<sup>2</sup> Additionally, several studies have found that unmet need for family planning is higher among women living with HIV than among women in the general population.<sup>2</sup> Preventing unintended pregnancies among HIV-positive women will not only improve their reproductive health but also prevent MTCT of HIV. Research indicates that the annual number of unintended HIV-positive births currently averted by family planning use in the 15 countries supported by the United States President's Emergency Plan for AIDS Relief (PEPFAR) ranges from 178 in Guyana to more than 120,000 in South Africa.<sup>3</sup> More families can be spared having infected children if the number of unintended pregnancies declines.<sup>3</sup>

### FBOs are willing and able to provide family planning services

FBOs play an integral role in public health in the developing world. According to a 2007 World Health Organization study, FBOs provide between 30 and 70 percent of health care services in Africa.<sup>4</sup> CCIH surveyed its members recently and learned that more than half of the 57 that responded want to do more in family planning. From 70 to 85 percent of the respondents that provide health services favor integrating family planning into their work.<sup>5</sup>

## Examples of FBOs providing family planning around the world

In Burkina Faso and the Democratic Republic of Congo, an affiliate of Catholic Relief Services introduced the standard days method (SDM) into its clinics, as well as other natural methods. The affiliate trained more than 50 lay-leader couples to provide support and guidance to community members on this simple method.<sup>6</sup>

The Adventist Development and Relief Agency (ADRA) is providing a wide range of family planning methods to nearly 500,000 women and men in eastern Nepal. The agency's objective is to improve maternal and child health by reducing the number of mistimed, unwanted, and high-risk pregnancies while improving child health and welfare through birth spacing.

Lutheran and evangelical organizations in Madagascar provide family planning counseling and products such as condoms in their clinics.<sup>7</sup>

## Family planning integration with HIV services

To increase access to family planning and reduce the number of unintended pregnancies among clients of HIV services, family planning services are being integrated into a range of HIV programs. Most FBOs providing health care in poor countries offer HIV/AIDS services, including HIV counseling and testing, the prevention of MTCT, care and treatment, and home-based care. Incorporating family planning services into their HIV programs is both a feasible<sup>8</sup> and cost-effective<sup>9</sup> way for FBOs to become involved in family planning.

Some FBOs are better positioned to become involved than others. Fortunately, FBOs can choose from a variety of strategies and levels of engagement. Here are some examples of ways FBOs can integrate family planning into HIV programs:

- Integrate family planning services, including method provision, into existing HIV clinics as a part of comprehensive health services.
- Include family planning counseling and/or referrals into HIV education provided by church-based community health workers, home-based care workers, and religious leaders.
- Engage church leaders and their spouses, women's and men's groups, and leaders of other faiths to provide family planning education.

## References

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- 9 Askew I, Berer M. The contribution of sexual and reproductive health services to the fight against HIV/AIDS: a review. *Reprod Health Matters* 2003;11(22):51-73.

## Resources

- *Christian Organizations Favor International Family Planning: New Findings*  
Christian Connections for International Health, 2009  
<http://www.ccih.org>
- *Increasing Access to Contraception for Clients with HIV: A Toolkit*  
Family Health International, 2008  
<http://www.fhi.org/en/RH/Training/trainmat/ARVmodule.htm>
- *Standard Days Method: Implementation Guidelines for Program Personnel*  
Georgetown University Institute for Reproductive Health, 2006  
[http://www.irh.org/SDM\\_Implementation/](http://www.irh.org/SDM_Implementation/)
- *Family Planning Saves Lives*  
Population Reference Bureau, 2009  
<http://www.prb.org/Reports/2009/fpsl.aspx>
- *Family Planning: A Global Handbook for Providers*  
World Health Organization, 2007  
[http://www.who.int/reproductive-health/publications/fp\\_globalhandbook/index.htm](http://www.who.int/reproductive-health/publications/fp_globalhandbook/index.htm)



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