Family Planning In Nigeria: The Human Costs Of Discontinuing
USAID'S Family Planning Program

Human conditions in Nigeria were fragile even before the recent political and economic crises. This West African country -- roughly 3% of Africa's land mass -- is home to an estimated 100 million people (20% of all Africans). There are more than 250 ethnic groups speaking 3 major and 17 minor languages. Nigeria's people have been devastated by the economic declines of the last decade and today more than 90% of Nigeria's people live in abject poverty with steadily declining economic prospects. The USAID-Nigeria Integrated Health Delivery Program, through Nigerian NGOs seeks to ameliorate this suffering.

- **Nigeria's health and demographic indicators rank among the worlds worst.** Of the 174 countries evaluated for in the Human Development Index of the World Bank's 1995 Human Development Report, Nigeria ranked near the bottom at 141. The life prospects of Nigerians for years of life, education and income is less than half that of citizens in many other developing countries receiving USAID support.

- **An Integrated Program.** USAID-Nigeria's commitment to integrating family planning, child survival and HIV/AIDS prevention reflects the expressed needs of Nigerians and their communities. The synergies and cost-effectiveness of maximized unified care delivery are well known. Child survival means that the pressure to have large families is diminished; Family Planning increases the chance that each child will survive; Birthspacing means more mothers survive; And provide better nutrition for their children and infants by delaying the period of weaning beyond the second year; Less competition for food and a healthier mother means millions of preventable child deaths averted. HIV/AIDS threatens this all. In Nigeria, our programs work together.

- **Without Family Planning, Nigeria's population will double in 21 years** -- outstripping the country's ability to provide housing, education, health services, food and jobs for its citizens. Nigerians will seek economic opportunities and the prospects for a better life elsewhere. Given the enormity of its population, potential out-migration may destabilize the entire region. Recurrent border skirmishes and expulsions of Nigerians in other countries illustrate the fragile nature regional relationships.

- **In 1995, USAID estimates that 16 per 1000 livebirths resulted in a maternal death; and approximate 15 times as many women experienced serious illness or complications in childbirth** -- a burden of death and disability of staggering proportions. This is one of the highest rates of Maternal Mortality and Morbidity in the world. The Nigerian woman will have, on average, 6 children. More than 30% of these women begin childbearing before age 15 years.

- **Discontinuing USAID support for family planning would dramatically limit the availability of contraceptive commodities.** Currently USAID provides more than 85% of all family planning commodities entering the country. This would leave families who have accepted family planning (often with USAID support) -- in most cases replacing traditional methods with modern methods -- unable to obtain essential commodities and services. Especially hard hit will be those who are the most vulnerable who depend on subsidized commodities. We estimate that within one year this could result in 342,480 excess births, escalating to 470,340 excess births in year two. By the year 2000, more than 4 million unwanted pregnancies will have occurred.
* Infant mortality in Nigeria is 87 per 1,000 livebirths—and up to 110 per 1,000 in Northern Nigeria.

* Under 5 mortality has not declined in the past decade. 20% of Nigerian children die before the age of 5 years -- figures that may worsen in the short-term if declines in EPI coverage are not reversed.

* Malnutrition is increasing. In Nigeria, 52.3% of children under the age of 5 are now chronically malnourished.

- Without inflow and distribution of condoms through the USAID Family Planning program, *Nigeria's war to stop the epidemic of HIV/AIDS will falter*. No responsible program should create demand for life saving commodities without the ability to provide them.

- **Of the 116 countries evaluated for Gender Empowerment in the World Bank's 1995 Human Development Report, Nigeria ranked eighth from last at 108.** Nigeria is a traditional African society where the women not only bear the children but are then expected to provide for themselves and their children -- often without assistance from their men. Nigerian women, who bear disproportionately the burden of supporting their families, are handicapped and systematically excluded from participation in economic and political decision-making because of their sex. The people of Nigeria are gradually losing their fight to claim the promise of health, development and equity in this century -- but none as fast as Nigerian women.

- The USAID-Nigeria program's foundation is its effective partnerships with Nigerian Non-Governmental Organizations (NGOs). These organizations match USAID investments with their own voluntary effort. Their desire to enhance the life prospects for the people in their communities and USAID's support have offered hope for people across the Nation. In 1994, when USAID funding was temporarily interrupted, many of these organizations suffered serious setbacks and found their programs compromised. *At this vital juncture of a challenged civil society, it is essential that the US Government, through its USAID program, keep faith with the citizens of Nigeria and its grassroot's leaders so that they may influence its social, economic and political future.*