IMPROVING NUTRITION AND FOOD SECURITY THROUGH FAMILY PLANNING

PRESENTATION GUIDE
ACKNOWLEDGMENTS

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Introduction

This presentation guide provides an overview of how to effectively use and give this ENGAGE presentation. In addition to information about how to use the presentation and a list of technology requirements, it also includes unique supplemental materials, such as the full presentation script; references; key messages with screenshots; FAQs; and a discussion guide that can be used to prompt interaction and dialogue among viewers.

This ENGAGE presentation differs from traditional presentations in the following ways. It:

1. Has a storyline that weaves throughout the presentation. The ENGAGE presentation shares more of a “story” than a typical PowerPoint presentation.
2. Gives people a different perspective on the same data or messages.
3. Mixes different media formats to help tell the story: Flash animation, Google Earth, videos, photos, etc., so there are fewer words on the slides in some cases.
4. Focuses on positives, as well as challenges, in an attempt to engage policymakers with some good news and inspire them to greater commitment.

The guide draws on the experiences of the Population Reference Bureau (PRB) and our in-country partners in developing and making ENGAGE presentations in different settings as well as input from technical and communications experts in the family planning, gender, reproductive health, nutrition, and food security fields.

Presentation Goals

The goal of Improving Nutrition and Food Security Through Family Planning is to raise awareness and understanding among decisionmakers about how family planning can help improve key measures of nutrition for mothers, infants, and children, as well as how it can help improve food security at a broader scale. Ultimately, the aim is to start a critical policy dialogue to encourage integration of family planning into nutrition and food security policies, strategies, action plans, and programs throughout the world, particularly in Asia and Africa. As such this presentation can be used as a tool to not only raise awareness but also to mobilize political commitment and resources. Target audiences include government policymakers, civic and religious leaders, health sector leaders, program officials, nutrition and family planning advocates, agriculture and food security leaders, journalists, and others.

Specific objectives of the presentation are to:

- Explain how using family planning to optimally space births and delay pregnancy until after adolescence can improve key nutrition outcomes for women, infants, and children.
- Illustrate how smaller family sizes can ease pressure on agricultural resources within a country, and in turn help ensure food security.
- Highlight how the ability to choose when and whether to become pregnant allows women to ensure better nutrition for families and also contribute to agricultural production.
- Foster discussion among audience members about how increased investment in family planning within nutrition and food security policies, strategies, action plans, and programs can help achieve global and national nutrition goals.
- Spur policymakers and other decisionmakers to take action toward the integration of family planning within nutrition and food security frameworks.
Opportunities to Give the Presentation

This ENGAGE presentation and supporting materials are tools for professionals involved in family planning, nutrition, and food security at all levels—in academic, policy, and community settings. The target audiences for this presentation are:

- **Primary:** Government policymakers at all levels, including parliamentarians, who are in a position to allocate resources and advance family planning on the policy agenda.
- **Secondary:** All of those who influence high-level policymakers—news media, civic and religious leaders, program officials, and other community leaders.

Using the Presentation with Different Audiences

The ENGAGE presentation is designed to be used in a variety of settings or environments. Some ideas to reach different audiences with the presentation are listed below.

**POLICYMAKERS**
- Educating policymakers about the importance of investing in family planning to improve food security and nutrition, especially at the national level.
- Demonstrating the simple and effective strategies of delaying first pregnancies until after adolescence, encouraging families to space births, and reaching women with an unmet need for family planning to improve food security and nutrition outcomes.

**NUTRITION AND/OR FAMILY PLANNING ADVOCATES**
- Educating advocates about the relationship between family planning, nutrition, and food security and the role of each in achieving development goals so they can better inform high-level policymakers.
- Reaching individuals who attend community health days, conferences, or stakeholder meetings with information about family planning and nutrition.
- Highlighting strategies that work to use family planning to help improve nutrition and food security.

**CIVIC AND RELIGIOUS LEADERS**
- Educating civic and religious leaders about the importance of family planning as an investment to improve the health and food security of families and communities.
- Communicating better with civic and religious leaders, especially those who may not typically be supportive of family planning.
- Sustaining policy dialogue with local leaders, including civic and religious leaders at local seminars and events.

**THE MEDIA**
- Educating the news media on issues of unmet need, birth spacing, and population growth around the world and the links between family planning, food security, and nutrition, using the ENGAGE presentation as a teaching tool.
- Providing a basis for television and radio talk shows, accompanied by local exposure to discussions and questions about family planning and nutrition.
Available Versions of the Presentations

This ENGAGE presentation is available in three formats:

1. A Flash presentation without a voiceover, accompanied by a presentation script so it can be given live by a presenter. The presentation without the voiceover will require you to manually click through the presentation (see section “To Move Through the Presentation”). It is supported with a script to guide the audience through the presentation and requires a Windows PC and Adobe Flash software version 10+.

2. An HTML5 presentation without a voiceover, which is identical to the Flash presentation, but can be opened on both PC and Apple computers. The presentation runs in any internet browser, but you do not need internet access to run the presentation.

3. An .mp4 video presentation with a voiceover. The presentation with a voiceover does NOT require you to click through the presentation. This format requires a movie player such as Windows Media Player or QuickTime Player.

If you would like to run the presentation from a tablet, please contact Melina Kolb at mkolb@prb.org.

We recommend that all potential presenters practice with the script to determine their level of comfort with the presentation. One’s level of comfort should guide the decision about which format is best at a particular event.

Recommended Set-Up Components

- Projector with connecting cables to your computer. The projector should display a 1024 x 768 resolution.
- Projection screen (or white wall).
- Speakers for your laptop or computer.
- Light source to read the script if giving a live presentation.
- Microphone (if presenting for a large audience).
- Podium.

We recommend that you practice giving the presentation with the equipment (computer, projector, screen) you intend to use for the event, so that you are comfortable with the equipment and can make sure that it works correctly.

TECHNOLOGY REQUIREMENTS (FLASH)

A Windows PC laptop or computer with:

- At least 2.4 Ghz.
- At least 3 GB of RAM.
- An Intel Core 2 Duo or faster processor.
- Adobe Flash Player 10.1+. If your laptop or computer does not have Flash, you can download a free version of the program at www.adobe.com/products/flashplayer/.
TECHNOLOGY REQUIREMENTS (HTML5)
A Windows PC or Apple OS X laptop or computer with:

- At least 2.4 Ghz.
- At least 3 GB of RAM.
- An Intel Core 2 Duo or faster processor.
- Mozilla Firefox 12+, Google Chrome 18+, Safari 5+, or Internet Explorer 9+. For best performance, use Google Chrome.

TECHNOLOGY REQUIREMENTS (.MP4)
A Windows PC or Apple OS X laptop or computer with:

- At least 2.4 Ghz.
- At least 3 GB of RAM.
- An Intel Core 2 Duo or faster processor.
- A movie player such as Windows Media Player or QuickTime Player.

Presentation Instructions (Without Voiceover)

TO OPEN THE PRESENTATION

For the Flash format, double-click on the red square ‘f’ icon (‘f’ stands for Flash). The end of the file name will be “.exe”. If a security warning appears, choose to proceed opening the file. This file will not harm your computer. The presentation will open in full-screen automatically and start on the title slide.

For the HTML5 format, open the ENGAGE-FP-Nutrition-Food Security-HTML5 folder and double-click the presentation.html file. (If you downloaded the presentation from our website, you will first need to double-click the .zip file to unzip it). The presentation will open in your default browser. If you would like to use a different browser, you can right click the presentation.html file, select Open With, and choose a different browser. Choose to display the browser in full screen. For best performance, use Google Chrome. You must have the entire FP-Nutrition-Food Security-HTML5 folder with all of the files inside as provided in order for the presentation to run correctly. When moving or copying the presentation, make sure to keep the entire folder and its contents inside.

TO MOVE THROUGH THE PRESENTATION

- You can click forward and backward through the presentation in two ways: using the forward and backward arrows on your keyboard; or, pointing your mouse to the forward and backward arrows in the bottom bar of the presentation. You might find it easier to move through the presentation using the keyboard arrows because you won’t have to worry about pointing your mouse to the correct location on screen.
  - The **forward arrow** advances the presentation. This advancement will be the next slide, the next bullet point, or the next piece of animation.
  - The **back arrow** moves you backward to the previous action.
- The **Home** button on your keyboard will take you to the title slide.
- Click on the **OUTLINE** button in the bottom bar of the presentation window to see a list of all slides. You can click on a slide in this list to skip to that specific slide.
- Additional controls are included in the bottom bar of the presentation: **play/pause**, the **playback bar**, and the **volume control**. All videos will play automatically, but the play/pause button can be
used during the video playback if needed. The playback bar shows your progress on that slide’s video or animations.

- If you click twice by accident, you will skip to the next piece in the sequence. If this happens, the slide will not match what you are saying. Be careful!
- Text in italics and in brackets indicate a section of video that will play while you read that line.
- For slides with videos, it is recommended you watch the playback bar to time your lines so that you finish talking before the video ends. You can then click after the video finishes to move to the next slide. If you click forward while a video is still playing, it will skip to the end of the video and you will need to click again to proceed to the next slide.
- Every screen in the presentation is numbered, starting on slide 2. These numbers correspond to the script.

TO DISPLAY THE PRESENTATION CORRECTLY

- The presentation will look best when it is in full screen. This will happen automatically when you open the Flash file. For HTML5, you will need to find the full screen option for your particular browser.
- To exit the full screen, you can press the Escape button (Flash) or choose your browser’s option to exit full screen (HTML5).

USING THE PRESENTATION AND SCRIPT TOGETHER

- The presentation script contains all the necessary narration for the presentation, along with instructions every time you need to click.
- Every time the script says (Click), click the forward arrow of your keyboard to advance the presentation. Each click will bring about a change on screen. This could mean advancing to the next slide, the next bullet point, or the next piece of animation. You should practice to ensure that you are familiar with what will happen with each click in the presentation.

Presentation Instructions (With Voiceover)

STREAMING AND/OR DOWNLOADING FROM THE PRB WEBSITE

- Go to the PRB website page for ENGAGE presentations: www.prb.org/About/ProgramsProjects/ENGAGE-Multimedia.aspx.
- Click the link to the presentation with the narration. The presentation will start to stream on your computer/laptop from the PRB website. It will play as a video. Performance will vary depending on your internet connection speed.
- For best performance, download the .mp4 file to your computer by right-clicking on the link with your mouse and select Save Target As… to save the file where you want it on your local machine.
- Open the file and play the video full screen with the video controls hidden during playback.

DVD-ROM

- Browse to the DVD-ROM on your computer or laptop. Double-click on the video file. The end of the file name will be “.mp4”. The video may start playing automatically depending on your movie player. You can pause the video and queue the playback at the beginning until you are ready to press play.
- Play the video full screen with the video controls hidden during playback.
Presentation Tips – Delivering a Live Presentation

If you are making the presentation in-person, there are some important tips to remember:

• **Start with the script.** It helps to start with the script and work through the presentation using the script. As you become more familiar with key points and transitions, you may be able to present without the script, and/or adapt the script to give it your own personal stamp. If possible, review some of the materials listed in the References section.

• **Bring your own style.** Each person brings his or her own style to the presentation. You are encouraged to adapt the script and state key messages in ways that you feel comfortable, using your natural voice (meaning both tone and intonation as well as word choices and phrasing).

• **Engage the audience.** You are encouraged to use personal stories to make this presentation more compelling. One or two personal stories to illustrate a point can add a lot to the presentation and your delivery.

• **This guide cites all data used in the presentation, as well as suggests additional resources for more information.** Ensure that you understand all of the content in the presentation before you use it. Supplemental materials for each presentation cite all data used in the presentation, as well as suggest Additional Resources for more information. A FAQ (Frequently Asked Questions) provides answers to common questions. You can visit PRB’s online Glossary to learn more about different terms used in all of our presentations [www.prb.org/Publications/Lesson-Plans/Glossary.aspx](http://www.prb.org/Publications/Lesson-Plans/Glossary.aspx).

• **Practice.** Practicing in front of a live audience (such as your colleagues) and receiving feedback will help you become more comfortable with the presentation and improve your delivery. If possible, rehearse the presentation using the same room and equipment that you plan to use during your presentation.

These tips may be helpful even if you choose to share the narrated version of the presentation with your audience. You will still need to introduce the presentation and foster discussion afterward, and these tips can help you prepare to facilitate the event.

Additional Considerations

You can make this presentation more interesting to your audience by adding information about local experiences and practices, especially those that apply to your audience. Some areas to consider when analyzing your audience:

• **Size of the Audience.** With smaller groups, you can provide more in-depth analysis based on real-life stories or experiences because you usually know more about the individuals in the group. In larger groups, you may have to take more time during the scripted presentation to define general concepts and ensure the presentation is relevant to all viewers.

• **Knowledge Level.** It is always safest to assume that the audience does not understand any technical terms you might use in the presentation. If you are giving a live presentation, we advise following the script and providing definitions for terms that may be unfamiliar to some audience members.
Using Handouts

Using handouts will help your audience retain the information you share during the presentation, and are also a good source for sharing additional information with the audience. On page 18, you’ll find a Key Messages Handout that includes visual “snapshots” along with some of the key messages from the ENGAGE presentation. The handout is intended to be succinct, serving as a good visual aid for the presentation as well as a readable document. We encourage you to print this out separately and give it to your audience after the presentation.

The following two policy briefs produced by the Health Policy Project can also be used as handouts: Family Planning Improves Nutrition and Family Planning Improves Food Security. These can be found at www.healthpolicyproject.com/index.cfm?id=%20publications&get=pubID&pubId=691 and www.healthpolicyproject.com/index.cfm?id=publications&get=pubID&pubId=692.

You might also want to share additional handouts with data relevant to your country context. One way to create such a handout is to use PRB’s database called DataFinder.

CREATING A CUSTOMIZED DATAFINDER HANDOUT

DataFinder is a database managed by the Population Reference Bureau that provides data for hundreds of variables around the world, located at www.prb.org/DataFinder.aspx. DataFinder allows you to:

- Search hundreds of indicators for hundreds of countries around the world.
- Create custom reports, charts, and maps.
- Download, print, and share.
- Create custom tables in three easy steps, for countries and world regions.
- Compare a wide array of places for one indicator, and display the results as a customizable map, ranking table, or bar chart.

Using DataFinder, you will be able to create a customized handout to use with this presentation, focusing on key indicators in your own country. Having this data available will help foster discussion about strategies to promote positive change after sharing the presentation with an audience.

To create a country profile:

- From www.prb.org, click on DataFinder.
- Under Profiles, select Countries, and then choose the country for your profile.
- From the Highlights page on your selected country, select Change Locations/Indicators in order to choose your own indicators.
- In the box that opens, uncheck Highlights, and then select available topics/indicators from the list that you want the profile to display.
- You can print this country profile as a handout for your presentation event, or use the data to create your own customized handout.
A nation’s success depends on the health of its people. With strong, healthy citizens, communities prosper and nations thrive. One of the best ways to ensure good health is with proper nutrition and food security. However, in many places, this is still a challenge.

Today, an estimated eight hundred million people across the world are chronically undernourished. This means that one in nine people do not have enough to eat. And in sub-Saharan Africa, it’s one in four.

Globally, malnutrition contributes to the deaths of more than three million children each year…

…that’s about half of all childhood deaths. Malnutrition also contributes to both infectious and chronic diseases… chronic diseases like…

…diabetes, high blood pressure, and heart disease, which are all very costly to treat.
And for nations, malnutrition can inflict severe economic consequences. In India alone, one study estimates that the effects of malnutrition can result... (Click) ...in up to two point three billion dollars in lost wages annually. (Click)

But making the right investments to boost nutrition can help individuals, families, and communities in countless ways. (Click)

Good nutrition can improve physical growth and intellectual development, which means better academic performance during childhood and adolescence. (Click)

This can lead to greater productivity in the labor force during adulthood, increasing household wages, and lifting families out of poverty. (Click)

Smart investments in nutrition could ultimately lead to a rise in GDP by as much as eleven percent each year in Asia and Africa. (Click)

There are many different ways to improve nutrition. While we usually think of interventions like vitamin supplementation or growing crops with higher nutritional content, there are other ways. One often overlooked approach is... (Click)

...voluntary family planning, which is typically known for its benefits to reproductive health. But it is also vital for good nutrition. Family planning improves nutrition on two levels: (Click)

- For the household; (Click)
- And on a larger scale, for entire communities—even nations. (Click)
Slide 15

For families, it lets women avoid unintended pregnancies and better prepare for motherhood, giving babies a chance for a healthier life. *(Click)*

For communities and nations, voluntary family planning can improve food security by slowing population growth—which in turn helps ensure that people have stable access to enough nutritious food. *(Click)*

Together, these benefits to nutrition can accelerate economic development for nations and make lives better. *(Click)*

Slide 16

*[Busy city]* As we look around our twenty-first century world, we can see that many things are different from how they were in the past.

*[Two men talking]* We communicate in different ways.

*[Nurses at computers]* We work in different ways.

*[City scene in India]* And we live in communities that look quite different from what our ancestors knew. *(Click)*

Slide 17

One important change is our new preference when it comes to family size. *(Click)*

Today, most couples around the world want fewer children than their parents or grandparents did. *(Click)*

But in reality, these desires are often not met. *(Click)*

Slide 18

In Malawi, for example, couples on average would like to have four children, but they actually have *(Click)* six.⁵

Globally, as many as four out of ten pregnancies are unplanned.⁶ *(Click)*

Slide 19

This is largely due to “unmet need” for family planning—meaning when women would like to either avoid or delay a pregnancy, but are not using a modern method of contraception.⁷ *(Click)*

Slide 20

Today, about two hundred and twenty-five million women worldwide have an unmet need for family planning.⁸ *(Click)*
Slide 21
In several countries, especially in sub-Saharan Africa and South Asia, more than one-quarter of women in their reproductive years have unmet need. (Click)

Slide 22
And it is also still a problem in other parts of the world like Latin America and the Caribbean.

Women with unmet need tend to be the most marginalized—they are more likely to be poor, live in remote areas, lack education, and suffer from food insecurity. (Click)

Slide 23
When countries reduce unmet need, they help women and couples have the number of children they want, at the right time for them. (Click)

Slide 24
Let’s now look at a home and see how family planning improves… (Click)

…nutrition, from infancy through adulthood. (Click)

Slide 25
A baby’s nutritional health is influenced by many factors.

An important one is how soon the baby was conceived after the mother’s last pregnancy. (Click)

The latest international guidelines recommend waiting at least two years after having a child before trying to become pregnant again. (Click)

Slide 26
Research shows that babies conceived within six months of a previous birth are much more likely to be… (Click)

…low birth weight than those conceived within a three-to-four year interval. (Click)

This puts closely spaced babies at risk of illness and death. (Click)

Slide 27
And even if they do survive, infants who were conceived too soon after another pregnancy are much more likely to be… (Click)

…stunted, or too short for their age when they get older. (Click)

These stunted children do not grow as well physically or intellectually, preventing them from living up to their full potential. (Click)
Slide 28
With well-spaced births, a mother’s body can rest and replenish essential vitamins and minerals that were used during pregnancy and breastfeeding. This can help ensure they are as healthy as possible when raising their families. (Click)

Slide 29
Good spacing also gives mothers more time, energy, and resources for recommended feeding practices, like exclusive breastfeeding during the first six months of life... (Click)

Slide 30
...and gradually switching to nutritious solid foods starting after six months. (Click)

Slide 31
For adolescent girls, family planning delays pregnancy beyond this crucial time of growth, when they gain much of their adult body height and weight. (Click)

Slides 32
Because they are growing faster than at any time besides their first year of life, adolescents need more protein, iron, and other micronutrients. (Click)

Slide 33
This puts them at risk for malnutrition, which is quite common among adolescent girls in many countries where mothers tend to give birth at a young age. (Click)

Slide 34
In Niger and Mali, parts of the Sahel region of Africa where malnutrition persists, about half of women have had a child by age eighteen. (Click)

Slide 35
When young girls are already malnourished, pregnancy can have an even more severe effect on their growth and nutritional status. (Click)

Pregnancy can create competition for nutrients between the growing girl and her baby. (Click)

Slide 36
As a result, pregnant girls can stop growing and may also suffer from conditions like anemia. (Click)
Slide 37
Children born to adolescent mothers also suffer.

One study from over fifty low-and middle-income countries compared babies of adolescent mothers to those of mothers in their late twenties. (Click)

It showed that children of adolescent mothers face a significantly higher risk of being stunted, underweight, or anemic. (Click)

Slide 38
By delaying pregnancy to an age when they are both physically and emotionally prepared for motherhood, adolescents can create better health outcomes for their children in the future. (Click)

Slide 39
And once they’re ready, couples can use family planning to have the number of children they want and better invest limited resources in ensuring good nutrition for their families. (Click)

Slide 40
With smaller families, women also have the opportunity to pursue more education and work outside the home. This leads to increased income and decisionmaking power. (Click)

Slide 41
Research shows that when women are more educated and have greater control of household resources, they are better able to feed their children the right amounts and types of healthy food. (Click)

Slide 42
Now let’s look at a community to see how family planning helps increase… (Click)

…food security.

Improving food security means ensuring that people have stable access to enough nutritious food. (Click)

Slide 43
This remains a great challenge for many reasons, including:

- Quickly rising populations that increase food demand; (Click)
- Shifting diets that include more meat; (Click)
- Inefficiencies in food storage and distribution; (Click)
- And climate change, which is expected to worsen agricultural yields and pose new problems to farmers. (Click)
When it comes to quickly rising populations, one of the key drivers is the high number of unplanned pregnancies that result from unmet need for family planning.

Based on current birth rates… 

…the world’s population is projected to increase by two point five billion people by twenty fifty, and will likely continue growing. 

Global food production would have to increase by seventy percent in order to feed everyone.

Many agricultural interventions and investments will be needed to improve food security.

Voluntary family planning can also play an important role.

Helping women have the number of children they want slows population growth, and in turn, reduces strains on agricultural resources.

In many places, good farmland is already limited.

And quickly rising populations can add more strains due to urbanization and development.

Food security is also affected by…

…shrinking plot sizes on farms as land is…

…further and further divided among successive generations.

This reduces the amount of food or cash crops that can be produced to sustain households and communities.

[Google Earth] In Nigeria, the amount of agricultural land available per person has been declining dramatically. It is projected that by twenty twenty-five, people will have one-fifth of the land they did in nineteen sixty.
When agricultural land is limited, this can also lead to farming practices such as planting too many crops or having animals graze too much in one place.

These practices can degrade the quality of soil. And with limited land available, farmers may be forced to use plots that are not very suitable for growing food.

This limits food productivity as well as quality. (Click)

Slide 51

Slowing population growth can ease pressure on our land and make existing farms more fruitful. (Click)

Slide 52

[Market scene] It can also influence access to and consumption of nutritious food.

[Market scene] When there is not enough food to meet the needs of a rapidly growing population, it causes food prices to rise. (Click)

Slide 53

This poses a challenge for poor urban families, who may already spend… (Click)

…sixty percent or more of their income on food. (Click)

Slide 54

It also makes it difficult for poor rural families, who generally have the smallest farms with low crop yields and little other income to buy nutritious food. (Click)

Slide 55

By slowing down population growth, a country can help ensure there will be food available for everyone at an affordable price. (Click)

Slide 56

Women in developing countries… (Click)

…perform on average forty three percent of agricultural labor. (Click)

This is a significant contribution.

Unplanned pregnancies limit their agricultural productivity due to time and energy spent in pregnancy, breastfeeding, and childcare. (Click)

Slide 57

When women farmers use family planning to have the number of children they want, they
can spend more time providing farm labor and supervision, learning new techniques, and contributing to food production.  

Slide 58
And on a larger scale, voluntary family planning and its effect on population growth can help build resilience and offset some of the negative impacts of climate change on food security.  

Slide 59
A simulation model for Ethiopia predicts that by twenty fifty, increased temperatures and changing rainfall patterns as a result of climate change…  

Slide 60
...will have cut the amount of food available per person by about three hundred and fifty calories per day…  

Slide 61
...or half an average plate of rice, fish, and vegetables. 

Slide 62
But if Ethiopians continue increasing their use of voluntary family planning, the resulting slowdown in population growth would mean that they could have... 

Slide 63
Looking back at our household and communities, the evidence is clear. When it comes to improving nutrition and food security... 

...family planning is critical for success. 

Slide 63
In the household, family planning improves nutrition in many ways. By helping women have the number of children they want at the right time for them, it can: 

• Ensure that infants and children have good nutrition from the start; 
• Give young girls the chance to fully develop; 
• Allow mothers to optimize their own health and nutrition; 
• And empower parents to feed their families in the best possible ways.
Slide 64

For communities, voluntary family planning results in smaller families, slowing population growth.

This in turn can improve food security by helping to: (Click)

- Reduce strains on agriculture; (Click)
- Improve access to affordable, quality food; (Click)
- Allow women to contribute more to food production; (Click)
- And offset some of the effects of climate change on food supplies. (Click)

Slide 65

To reach these goals, we need to do more.

With supportive voices like yours, we can improve political commitment and investments to develop new programs that would benefit health, nutrition, and food security. (Click)

So what can you do to make these changes a reality? (Click)

Slide 66

You can raise awareness about how family planning can improve food security and nutrition. (Click)

Slide 67

You can work together with colleagues across sectors, such as health, nutrition, and agriculture, to integrate family planning within strategies to improve nutrition and food security. (Click)

Slide 68

And you can advocate for more funding for family planning within a range of nutrition and food security policies and programs. (Click)

Slides 69-72

[Market food] With a foundation in good nutrition and food security, citizens everywhere can enjoy a healthier life…

[Children eating]…from infancy to adulthood…

[Children running]…and help nations build a brighter and more prosperous future.

[Credits]
Script References


5. National Statistical Office (NSO) and ICF Macro, Malawi Demographic and Health Survey 2010 (Zomba, Malawi, and Calverton, MD: NSO and ICF Macro, 2011).


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Improving Nutrition and Food Security Through Family Planning

Key Messages

A nation’s success depends on the health of its people. With strong, healthy citizens, communities prosper and nations thrive. One of the best ways to ensure good health is to establish a foundation of proper nutrition and food security. However, in many places, this is still a challenge.

An estimated 800 million people across the world are chronically undernourished. That’s one in nine people. And in Africa, one in four people are undernourished.

Malnutrition also contributes to the deaths of 3 million children worldwide—that’s about half of all childhood deaths.

Malnutrition threatens economies by reducing school performance and work productivity. It also contributes to both infectious and chronic diseases, which are costly to treat.

But making the right investments to boost nutrition can make a big difference, leading to a rise in GDP by as much as 11 percent in the regions of Asia and Africa.

One often overlooked approach to improve nutrition and food security is voluntary family planning, which is typically known for its benefits to reproductive health. But it is also vital for good nutrition; family planning can also help promote food security for families, communities, and nations.
For families, voluntary family planning lets women avoid unintended pregnancies and better prepare for motherhood, giving babies a chance for a healthier life.

Family planning can help women and couples have the number of children they want, at the right time for them. But about 225 million women worldwide have an unmet need for family planning, meaning that they would like to either avoid or delay a pregnancy but are not using a modern method of contraception. As a result, as many as four in 10 pregnancies are unplanned. Family planning helps women meet their needs and can also provide a lifetime of nutritional benefits.

Starting with infants, an important factor in nutritional health is how soon a baby is conceived after the mother’s last pregnancy. Guidelines recommend waiting at least two years after giving birth before conceiving again, as children born too soon after a previous birth are more likely to have low birth weight and experience stunting later in life. Using family planning to space pregnancies helps establish a firm foundation for good nutrition later in life.

Good spacing also gives mothers more time, energy, and resources for good feeding practices during the first few years of a child’s life, starting from conception. This includes good nutrition during pregnancy, exclusive breastfeeding during the first six months of life, and gradually switching to nutritious solid foods beginning at six months of age.
For adolescent girls, family planning delays pregnancy beyond this crucial time of growth when they need more nutrients and are especially vulnerable to malnutrition. Pregnancy poses additional risks, as it can result in competition for nutrients between growing girls and fetuses. Girls can stop growing and suffer from conditions like anemia, and their babies are more likely to be low birth weight and stunted later in life.

For communities and nations, voluntary family planning results in smaller families, slowing the pace of population growth. This slower growth can improve food security by ensuring that people have stable access to enough nutritious food.

Based on current birth rates, the world’s population is projected to increase by 2.5 billion people by 2050, and will likely continue growing. Global food production would have to increase by seventy percent by 2050 to be able to feed everyone.

As countries urbanize and develop, population growth can further strain agricultural systems. Using voluntary family planning can help alleviate some of these pressures on food security at the community and national levels.
Population growth can also lead to shrinking plot sizes, as farms are divided into smaller and smaller sizes among successive generations. In this example, a plot which once supported one household, now supports eight after just two generations.

Climate change also puts pressure on agricultural systems, especially in developing countries. Climate change modeling predicts that changing weather patterns will reduce agricultural output in Ethiopia by about 350 calories per person per day—about half an average plate of rice, fish, and vegetables. The model also demonstrates how family planning can help address this food security gap.

Family planning can help promote improved nutrition and food security for families, communities, and nations, even in the face of increased challenges to agricultural systems.

Thanks to voluntary family planning, citizens everywhere can enjoy better access to quality food and stay well nourished, helping nations build a brighter and more prosperous future.
Key Messages Handout References

1. Food and Agriculture Organization of the UN (FAO), International Fund for Agricultural Development (IFAD), and World Food Programme (WFP), The State of Food Insecurity in the World 2015. Meeting the 2015 International Hunger Targets: Taking Stock of Uneven Progress (Rome: FAO, IFAD, and WFP, 2015).


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Discussion Guide

After giving the ENGAGE presentation, you may have the opportunity to foster discussion among the audience members. We encourage you to share data specific to family planning, nutrition, and food security in your country, and make the discussion specific to addressing these issues within your country context. Sample discussion questions are listed below:

DISCUSSION ABOUT THE PRESENTATION

1. Were you aware of the links between family planning, nutrition, and food security? What did you learn today about these relationships?
2. How can an increased focus on family planning lead to improved nutrition and food security for your country?
3. Who do you think might benefit from seeing this presentation? What are some upcoming events or other opportunities where you could show and discuss this presentation to spur dialogue and action on this topic?

DISCUSSION ABOUT FAMILY PLANNING

4. Many people have diverse views about family planning. Has this presentation affected the way that you think about the issue? Did you learn anything that makes you think differently about family planning and its contribution to nutrition and food security?
5. Family planning use has increased around the world, but many women still have an unmet need for family planning. Why do you think there such a high unmet need for family planning? What are the rates of unmet need in your country? What are some causes of unmet need that are specific to your country or context?
6. What are some strategies that can increase access to family planning for women and couples in your country? How can these strategies improve nutrition and food security? Consider both short-term and long-term strategies.

DISCUSSION ABOUT NUTRITION AND FOOD SECURITY

7. The World Health Organization guidelines state that women should wait at least two years after giving birth before attempting to become pregnant again. Do you think many people in your country follow these guidelines? What is needed to encourage women to optimally space their pregnancies?
8. What are the common breastfeeding trends in your country? Is it common for women to exclusively breastfeed until their child is six months old? How does family planning play a role in breastfeeding?
9. Early pregnancy can cause malnutrition in both girls and their babies. Is pregnancy before age 18 common in your country? What are some strategies to reduce adolescent pregnancy?
10. Population growth can seriously impact the food security of a community or country. What are the population growth trends in your country? How is population growth affecting food security in your country? Does this vary by region?
11. Do nutrition policies and programs in your country currently include family planning? If so, how is this being done and what improvements could be made? If not, how might family planning be successfully put on the nutrition agenda and given requisite resources?
12. Do food security policies and programs in your country currently include family planning? If so, how is this being done and what improvements could be made? If not, how might family planning be successfully put on the food security agenda and given requisite resources?
DISCUSSION ABOUT RECOMMENDATIONS

13. What are some ways to increase awareness of the connections between family planning and food security?

14. At the end, the presentation called for collaboration between individuals and organizations working in family planning, nutrition, and food security. Who are these stakeholders? What are some specific ways they could work together to achieve their goals?

15. How might those involved in family planning, nutrition, and/or food security advocate for the resources necessary to better integrate their efforts?

FAQs

Often, audience members have questions about the presentation. Some of these questions may be specific to the actual presentation (data, pictures, figures, sources of information), while other questions may be related to the topics mentioned in the presentation.

Below are some frequently asked questions and scripted answers:

QUESTIONS ABOUT THE PRESENTATION

Q. How accurate are your data?

A. The data that we have shared in this presentation are the most accurate and up-to-date (as at the time the presentation was developed) about family planning, nutrition, and food security. The data comes from the most recent Demographic and Health surveys, Multiple Indicator Cluster Surveys (MICS), and other recent peer-reviewed research studies.

Q. Have the people in the photographs and videos in your presentation given their consent?

A. We have adhered to a strict photo use policy and can ensure that we have the legal right to use every photograph and video that was included in this presentation.

Q. Why do you focus so much on family planning, when there are so many other, more important, issues that affect nutrition and food security? Why do you focus on family planning when the real problem relates more to things like lack of education and poverty?

A. Yes, it is true that there are many important issues that face developing nations. Malnutrition and lack of food security are two key issues that also underlie some of the most difficult economic and development challenges. While there are many different ways to positively impact nutrition and food security, few of these approaches address prevention. Family planning is an often overlooked intervention that can help support and strengthen existing efforts. It is a cost-effective, proven strategy to help women meet their fertility desires. And as shown in the presentation, at the same time, it can also help improve nutrition and food security. So it is a real win-win, and is just one more tool that can help us meet our goals.

QUESTIONS ABOUT FAMILY PLANNING

Q. You discussed family planning a lot in this presentation, but you didn't describe anything about family planning. What are the choices for family planning or contraception and do they have any negative side effects?

A. There is a wide range of contraceptive methods available for both men and women depending on the reproductive needs of each individual. Some methods are more effective than others.

This presentation focused on modern methods of family planning. These include long acting or permanent methods such as implants, IUDs, female sterilization, and vasectomy, which are among the most effective
forms of family planning. Some methods only work one time—male condoms, or female condoms, for example—while others may last longer but are not permanent, such as injectables, oral contraceptive pills, hormonal patches, and the vaginal ring. There is also the Lactational Amenorrhea Method, a method based on exclusive breastfeeding, which provides pregnancy protection for the mother and nutrition for the baby during the first six months after childbirth.

Some contraceptive methods have known side effects that may affect one family planning user while not affecting another. Side effects such as irregular bleeding, headaches, dizziness, nausea, breast tenderness, weight change, mood change, and delay in returned fertility once the individual stops using the method are common with hormonal methods. Clients need to be informed of these possible side effects and how to manage them when receiving family planning counseling. They are not life threatening and can be addressed by the medical provider. Usually, if the side effects are bothering the client, the provider will switch the contraceptive method to something more suitable.

Some people prefer to use traditional methods of family planning. While these vary in effectiveness, they are generally less effective than modern methods. Methods such as withdrawal have the lowest level of effectiveness; additionally, there are Fertility Awareness Methods, such as the Standard Days Method, Basal Body Temperature, and the Two-Day Method. These methods have no side effects or health risks. Importantly, they require partners’ cooperation as couples must be committed to abstaining or using another method on fertile days.

Q. Women in my country have always had large families with many children. Why does this presentation encourage them to use family planning?

A. Each woman should be able to make her own decisions about future pregnancies. Being from a certain country, a member of a certain religion, or from a community traditionally known for large family size does not automatically mean that a woman wants many children. The data show that many women around the world want to space or limit births but are not using contraception. As the presentation notes, 225 million women around the world have an unmet need for family planning and four out of 10 pregnancies are unplanned.

Improving access to family planning not only allows women to make choices about their own reproductive health, but can also improve nutrition and food security of a country or a community, along with many other positive development outcomes. Allowing for at least two years after giving birth to become pregnant again will improve the nutritional status of the mother (who is able to recover from pregnancy and replenish crucial nutrients before becoming pregnant again), the young child (who is breastfed for longer, without competing with a younger sibling for resources), and the new baby (who isn’t competing with an older breastfeeding sibling during pregnancy or after birth, and is able to meet his or her nutritional needs during the critical period of gestation through two years of age). It also allows families to invest more in each child, making it more likely that each child will attend and complete school. This benefits not only the family, but also communities and entire nations which rely on these educated young people to boost their economies.

Q. The presentation suggests that adolescents should delay pregnancy until they are older. But if girls marry and start their families later in life, and contraception becomes widely available, won’t young people become promiscuous?

A. Pregnancy for girls under age 18 is dangerous for both mothers and babies. Adolescence is a critical time for girls to finish growing and reach their adult height and weight—adolescents attain 15-20 percent of their adult height and 50 percent of their adult weight during this period. This can also represent a time of catch up growth for girls who may not have had adequate access to nutrition in their own infancies and childhoods. Studies have shown that pregnancy during adolescence has serious negative impacts on the nutritional status of the young mother and can pose serious risks when girls are already malnourished—a phenomenon not uncommon in many countries where new mothers tend to be very young.
Young mothers are also more likely to have a pre-term baby or a baby with a low birth weight—two outcomes that contribute to higher chances of newborn death. These poor nutritional outcomes can continue as the child of a mother grows up—these children are more likely to be stunted and underweight. Delaying marriage and providing access to contraception are two strategies to help prevent pregnancies during adolescence. Delaying marriage also allows girls to stay in school—many studies have shown that educated mothers are less likely to have stunted or underweight children.

It is not uncommon for societies to disapprove of premarital sex and to worry that reproductive health education and services may be inappropriate and unnecessary for young people. However, studies have shown that providing information about and access to contraception does not make it more likely for young people to have sex—it just decreases rates of adolescent pregnancies. With almost half of the world’s population under the age of 25, it is important to ensure that young people have access to the services and information they need to make appropriate choices about their sexual and reproductive health and rights.

Q. We see messages all the time about the health challenges facing our countries, from infectious diseases like HIV and malaria to noncommunicable diseases like cancer and diabetes. In the face of these health challenges, why should we use family planning? Isn’t it important to promote population growth to fuel our economies?

A. It’s true that developing countries are facing serious health challenges, but restricting access to family planning will not help fuel development. According to the UN Population Division, life expectancy in developing countries has increased by about 15 years since 1950, which demonstrates that these health challenges are not insurmountable.

HIV is a treatable disease—the World Health Organization estimates that there are 11.7 million people receiving antiretroviral treatment in low and middle income countries. The numbers of people receiving treatment have increased dramatically over the years—from about 100,000 people, or just 2 percent of HIV-positive inhabitants of sub-Saharan Africa in 2002 to 9.1 million people today, or nearly 40 percent of HIV-positive people. While these figures are still far from universal coverage, people with HIV are more likely to live long and productive lives than ever before, even if they live in developing countries. Throughout the course of their lives, they will continue to need access to health services beyond what is needed to treat their HIV—including voluntary family planning.

A number of steps can be taken to reduce incidence of noncommunicable diseases, from curbing rates of tobacco and alcohol consumption to increasing exercise. A nutritious diet is an important part of these efforts, starting with pregnant women and continuing through childhood and into adulthood. As this presentation discusses, family planning can help improve nutrition for individuals and communities alike.

While family planning is not sufficient to combat all of these health challenges, it is a necessary piece of the puzzle. As discussed in the presentation, family planning can contribute to better nutrition and food security, allowing families and communities to better combat health challenges. And family planning can also help build a foundation for development; countries which have begun to develop thanks in part to family planning can strengthen their health systems and combat both infectious and noncommunicable diseases.

One way countries can boost their development using family planning is through the demographic dividend, an economic boost that occurs when fertility and mortality rates fall in a country. When a country enters this “demographic transition,” it has a larger number of people in the labor force compared to its dependent population—people too old or too young to work. This period of time opens a window of opportunity for economic growth, provided the correct social and economic investments are made. For more information about how countries can boost their economies following declining fertility and mortality rates, see the PRB brief, “The Challenge of Attaining the Demographic Dividend,” available here: www.prb.org/Publications/Reports/2012/demographic-dividend.aspx.
QUESTIONS ABOUT THE LINKS BETWEEN FAMILY PLANNING AND NUTRITION

Q. This presentation mentions that while births are well-spaced, women have time for recommended feeding practices like exclusive breastfeeding and transitioning infants to nutritious solid foods. What is so important about these feeding practices?

A. It is critical to ensure that children’s nutritional needs are met during pregnancy and the first two years of life. This period of time, known as the “1000 Day Window” allows them to grow and develop, both physically and intellectually. Improving nutrition during this period improves children’s health and educational attainment well into the future—even into adulthood.

Improving nutrition during pregnancy is important to prevent complications like low birth weight, an important indirect cause of neonatal mortality or death during the first 28 days of life. The World Health Organization estimates that low birth weight contributes to 60-80 percent of newborn deaths. Nearly all (96.6 percent) of low birth weight babies are born in developing countries.

After birth, breastfeeding is critical to make sure infants are meeting their nutritional needs. Breastmilk contains all nutrients infants need—they do not need supplementary food or water until six months of age. Exclusive breastfeeding also means that babies are protected from food and water borne illnesses like cholera and diarrhea, which are leading causes of under-five mortality in the developing world. Stunting is a big problem around the world. Globally, an estimated 162 million children under five years of age are stunted. The World Health Organization hopes to reduce this figure to 100 million children by the year 2025. Stunting is a symptom of extremely poor nutrition—children who are stunted have not received the nutrients they need to grow and develop properly. This also means that they have not received the nutrients they need for their brains to develop to their fullest potential. Studies have shown that height at the age of two years can predict future human capital, including educational attainment and economic productivity, with shorter heights being associated with poorer outcomes.

Stunted children also experience negative health outcomes as adults. In addition to reaching shorter heights as adults, stunted children are more susceptible to both infectious and noncommunicable diseases. Stunted women are also likely to have stunted children, not because the condition is hereditary but because it is difficult for malnourished, stunted women to provide enough nutrients to their babies during pregnancy.

See this brief from the World Health Organization for more information: www.who.int/nutrition/topics/globaltargets_stunting_policybrief.pdf

Q. I agree that family planning is an important issue, but why are you linking it to nutrition? Doesn’t it make more sense to talk about issues like women’s empowerment or maternal mortality that are more closely associated with family planning?

A. Actually, issues like maternal mortality and women’s empowerment are also closely—albeit indirectly—associated with nutrition. Mothers are often children’s primary caretakers, buying and preparing food for them. When women use family planning to avoid unintended pregnancies, they can reduce their exposure to the risk of death due to pregnancy-related causes (relatively high risk in many countries). When mothers survive, their children survive. They can adequately breastfeed young children and provide food for older children. Studies have shown that undernutrition, diarrheal diseases, and infant death are more common in children whose mothers have died.

While women’s empowerment is itself an important goal, women who are empowered to make choices about their lives and future pregnancies can also improve nutritional outcomes for their children. This effect is especially pronounced if adolescent girls are able to stay in school instead of getting married early and/or becoming pregnant. Educated women are less likely to have stunted or underweight children. Educated mothers also have higher earnings, allowing them to provide the correct quantity and quality of food for their children. Women’s empowerment, especially girls’ education, also leads to reduced risks of domestic violence, which has been shown to have negative impacts on women’s and children’s nutrition.
QUESTIONS ABOUT THE LINKS BETWEEN FAMILY PLANNING AND FOOD SECURITY

Q. The presentation mentions food security, but doesn’t go into great detail. I've heard people talking about the four pillars of food security. How does family planning relate to each of these?

A. The four pillars of food security are: food availability, food access, food utilization/consumption, and household food stability. Food availability is the supply of food in relation to the amount of food needed to feed a given population. Voluntary family planning has the greatest impact on this pillar. By helping women have the number of children they want, FP helps to slow the pace of population growth, and in turn helps ensure that existing food sources are enough to feed the population of a community or country. FP is also linked to food availability because smaller populations can reduce strains on agricultural resources, allowing nations to produce more and better quality food for their citizens. The connection to food access is most apparent for low-income families who are often challenged with the double burden of larger than desired family sizes—resulting from limited access to family planning—and less money to spend on food for nutritional needs. Even at a broader level, large populations can limit food supplies, driving up prices, and making nutritious food unaffordable for many. Family planning does also impact food consumption/utilization as pregnant women and women who are breastfeeding young children require greater quantities and more nutritious food.

Family planning can also improve household food stability by decreasing maternal mortality and increasing girls’ education, two factors which can significantly impact the food security of families. A forthcoming report by Jason Bremner of the Population Reference Bureau notes that “pregnancy-related death and disability impact thousands of households each year, removing caregivers, the essential providers of a family’s food and water and the critical agents of change, who could otherwise help their children, families and communities adapt...” Using family planning to prevent these deaths and disabilities can help stabilize the availability, access, and utilization of food.

Q. The presentation mentions climate change as a cause of food insecurity. How are the two linked?

A. Climate change means that weather patterns will become unpredictable—dry seasons may last longer, summers may be hotter, and extreme weather events like hurricanes may become more common. Globally, climate change is predicted to decrease agricultural production. Climate change modeling also suggests that the most severe impacts will be on developing countries, including those whose agricultural systems are already strained by population growth.

At the community level, family planning can help make families more resilient to climate change. For example, women in many communities are especially susceptible to the effects of climate change as they are often responsible for gathering natural resources like water and fuel—gathering these will become more difficult and time-consuming as resources like wood and water become more scarce due to unpredictable weather patterns caused by climate change. Population growth will also put additional pressure on these resources, meaning that women will have to travel farther to access essential goods. These efforts are only made more difficult during and after pregnancy. By allowing women to choose the timing and spacing of their pregnancies, family planning helps protect these vulnerable yet vital members of their communities.

At the national level, as the presentation notes, family planning can help offset the negative impacts of climate change by stabilizing population growth. For example, statistical models predict that increased temperatures and changing rainfall patterns will reduce agricultural production in Ethiopia by 2050. If the population of Ethiopia also continues to grow, this means that the reduced quantities of food will have to feed even more people. If women in Ethiopia, however, use voluntary family planning to meet their needs, population growth would slow down, making it easier to meet the food security and nutritional needs of the population.
Q. The presentation mentions urbanization as a cause of food insecurity, but doesn’t go into detail. How is urbanization related to food security, and how does family planning address challenges caused by urbanization?

A. Urban areas in developing countries are growing rapidly. The United Nations projects that the urban population of developing countries could double to 4.3 billion by 2020, and could further increase to 6.3 billion by 2050. This rapid growth strains urban systems like sanitation—overburdened sanitation systems can contribute to the spread of waterborne diseases, which keep people from properly absorbing nutrients from their food. Urban residents may also be more likely to eat food prepared from kiosks, which is often less nutritious than food prepared at home. Additionally, as cities grow, land that was once used for agriculture is converted into urban space, which can impact food production on a national scale.

Providing access to family planning services to urban residents can allow cities to better expand services as urban populations grow.

Additional Resources

The content for this presentation was drawn from two reviews conducted as part of the Health Policy Project (HPP): Impacts of Family Planning on Nutrition and Impacts of Family Planning on Food Security. These reports can be found at www.healthpolicyproject.com/index.cfm?id=publications&get=pubID&pubId=690. They include a full set of references and also offer more extensive detail and explanation about the data and content showcased in the multimedia presentation. Two policy briefs based on these reports can be found at www.healthpolicyproject.com/index.cfm?id=%20publications&get=pubID&pubId=691 and www.healthpolicyproject.com/index.cfm?id=publications&get=pubID&pubId=692

As a companion to the HPP reviews, the Food and Nutrition Technical Assistance III (FANTA) project conducted a review entitled Desk Review of Programs Integrating Family Planning with Food Security and Nutrition which can be found at www.fantaproject.org/focus-areas/food-security/desk-review-programs-integrating-family-planning-food-security-and-nutrition.

A select list of key references are on the following pages.

FAMILY PLANNING


NUTRITION


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FOOD SECURITY

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**FAMILY PLANNING AND DEVELOPMENT**