



USAID Contraceptive Investment

Around 218 million women of reproductive age in low- and middle-income countries have an unmet need for modern family planning and contraceptive methods.¹ USAID ensures an uninterrupted supply of quality family planning commodities worldwide through its procurement mechanism, the USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project.

In partnership with country governments and other in-country stakeholders, USAID has supported the procurement and distribution of over 245 million contraceptives², worth \$134.4 million, to 60 countries since FY 2017. When combined with proper counseling and correct use, these contraceptives can positively impact maternal and child health.²

What impact can **\$134.4M** in contraceptive investments have on women and families?

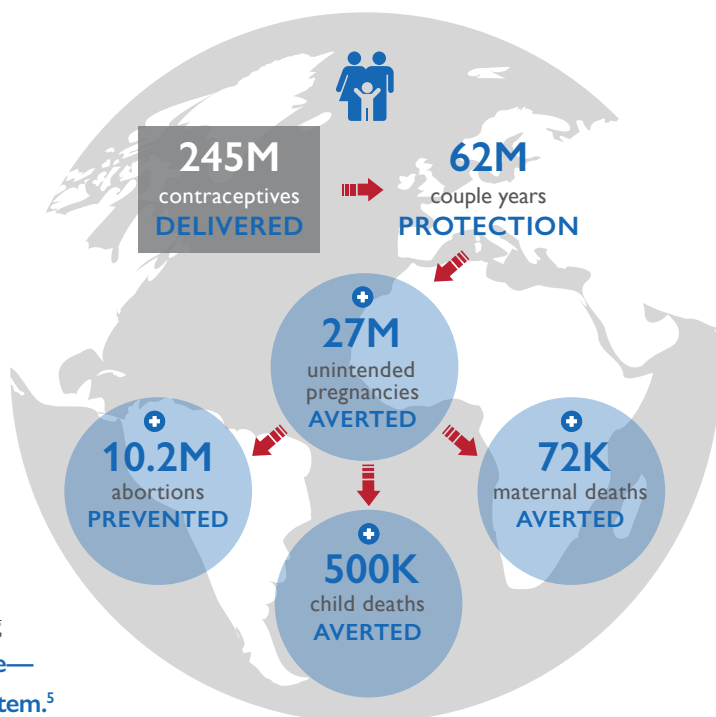
Access to a choice of modern contraceptives allows couples to plan and space births, ensuring families have the means necessary to properly care for their children.

The millions of contraceptives delivered through the GHSC-PSM project, combined with proper counseling and correct use, are estimated to provide 62 million couple years protection,³ and have or will help prevent approximately:

- 27 million unintended pregnancies
- 10.2 million abortions
- 72,000 maternal deaths
- 500,000 child deaths averted⁴



These investments in contraceptives have the potential of saving approximately **\$1.8 billion in direct spending on healthcare—resources that can be reinvested in the overall health system.**⁵



¹Guttmacher Institute. "Adding It Up: Investing in Contraception and Maternal and Newborn Health, 2017," <https://www.guttmacher.org/fact-sheet/investing-sexual-and-reproductive-health-low-and-middle-income-countries>. Accessed March 16, 2020. Unless otherwise noted, all figures reported in this brief are over the life of the GHSC-PSM project and do not reflect USAID's contraceptive investment prior to FY 2017. The figures reflect delivered commodities, not shipped commodities, and may not be comparable to figures reported in previous materials.

²Unless otherwise noted, all figures reported in this brief are over the life of the GHSC-PSM project and do not reflect USAID's contraceptive investment prior to FY 2017. The figures reflect delivered commodities, not shipped commodities, and may not be comparable to figures reported in previous materials.

³This is the estimated protection provided by contraceptive methods during a one-year period, based upon the volume of all contraceptives sold or distributed free of charge to clients during that period. <https://www.usaid.gov/global-health/health-areas/family-planning/couple-years-protection-cyp>

⁴This indicator only estimates reduction in deaths as a result of improved birth spacing. The data linking contraceptive prevalence rate, birth spacing, and child mortality is currently limited.









⁵The costs saved modelled in Impact 2 are an estimate of the direct costs (supplies and personnel) associated with pregnancies and birth. The cost estimate represents money that would have been spent by families or the healthcare system for pregnancy care, safe delivery and treatment of complications.



Methodology

The indicators presented in this brief were calculated by entering procurement data from the GHSC-PSM project database⁶ into the Impact 2 model,⁷ a socio-demographic mathematical model used to measure the impact of reproductive health programs.

The family planning and reproductive health impact indicators, as reported in this brief, estimate the global demographic, health, and economic impacts of USAID's support of contraceptives for in-country programs. To make these calculations, GHSC-PSM adjusted certain criteria in the model. For more information, please contact PSMMonitoringandEval@ghsc-psm.org.

CONTRACEPTIVE METHODS ⁹	TOTAL PRODUCTS DELIVERED FY2017-2020*
 Condoms ⁸	104.4M
 Combined oral contraceptives	65M
 Copper bearing intrauterine devices	758K
 Emergency oral contraceptives	188K
 Implantable contraceptives	7.1M
 Injectable contraceptives	62.5M
 Progestin only pills	5.1M
 Standard days methods	875K
TOTAL NUMBER OF CONTRACEPTIVES DELIVERED	245M
TOTAL VALUE	\$134.4M**

*Data through Q2 of FY 2020

**This figure represents solely the calculation of the value of commodities and does not include shipment or other associated costs.

Contact Us

John Vivalo

USAID Bureau of Global Health, Office of Population and Reproductive Health, Commodities Security and Logistics Division

Tel: +1 202-916-2165

Alan Bornbusch

USAID Bureau of Global Health, Office of Population and Reproductive Health, Commodities Security and Logistics Division

Tel: +1 202-916-2159

⁶GHSC-PSM's Automated Requisition Tracking Management Information System (ARTMIS) is used to enter, manage, process, and track orders throughout the supply chain.

⁷<https://www.maristopes.org/what-we-do/our-approach/our-technical-expertise/impact-2/>. Accessed March 16, 2020. The number of preventable deaths, abortions and unintended pregnancies averted is calculated by entering into the model the number of family planning/reproductive health (FP/RH) commodities delivered by GHSC-PSM across a selected time period.

⁸This brief only includes analysis on condoms procured with FP funds from FY 2017 onward. Information on condoms funded through PEPFAR can be obtained from the USAID Office of HIV/AIDS.

⁹Units of measurement for contraceptives: combined oral (cycle); implantable (implant); standard days (piece); injectable (device); condoms (piece); progestin only pills (cycle); copper-bearing intrauterine (device); emergency oral (package)