

FAMILY PLANNING | REPRODUCTIVE HEALTH IMPACT BRIEF: LIBERIA (\$ 2020 UPDATE



Saving Lives and Improving Health Outcomes in Liberia through Increased Access to Contraceptives

Access to voluntary family planning and reproductive health (FP/RH) services is vital for safe motherhood and healthy families. Having a choice of modern contraceptives allows couples to plan and space births, ensuring families have the means to properly care for their children. USAID ensures an uninterrupted supply of quality FP commodities worldwide through the USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project.¹

Liberia has a population of more than 4.8 million.² In 2019, approximately 29.7 percent of Liberian women had an unmet need for FP - meaning they wanted to avoid pregnancy but were not using a modern method of birth control.³

The average woman in Liberia gives birth to 4.3 children in her lifetime.⁴ Liberia has a maternal mortality ratio of 661 per 100,000 live births compared to 534 in sub-Saharan Africa, on average.⁵ The child mortality rate is 85 deaths among children under 5 per 1,000 live births, compared to 76 on average for the sub-Saharan region.⁶

The Government of Liberia is collaborating with USAID and other partners to address the country's maternal and child health needs. This includes increasing investment in FP/RH to reach a projected modern contraceptive prevalence rate of 31.3 percent among all women aged 15 to 49, regardless of marital status, by 2020.⁷

Estimated health impacts from USAID procurement investments



⁵World Bank Maternal Mortality Ratio. <u>https://databank.worldbank.org/reports.aspx?-source=2&series=SH,STA,MMRT&country=</u>, Accessed November 24, 2020.
⁶World Bank, Child Mortality Rate. <u>https://data.worldbank.org/indicator/SH,DYN,MORT</u>, Accessed November 24, 2020.

⁷Family Planning 2020 (2018) <u>http://www.familyplanning2020.org/sites/default/files/Data-Hub/</u> 2019Cl/Liberia_2019_Cl_Handout.pdf. Accessed July 31, 2020.

¹Unless 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.

²USAID."Acting on the Call: A Focus on the Journey to Self-reliance for Preventing Child and Maternal Deaths," (2019), <u>https://www.usaid.gov/sites/default/files/documents/1864/USAID_2019_AOTC.pdf</u>. Accessed July 31, 2020.

³Family Planning 2020. 'FP2020 Core Indicator Summary Sheet: 2018-2019 Annual Progress Report,' http://www.familyplanning2020.org/sites/default/files/Data-Hub/2019Cl/Liberia_2019_Cl_Handout.pdf. Accessed July 31, 2020.

⁴Fertility rate, total (births per woman). <u>https://data.worldbank.org/indicator/SRDYN.TFRTIN</u>. Accessed July 31, 2020.

USAID Contraceptive Investment

In partnership with the Government of Liberia and other in-country stakeholders, USAID has supported the procurement and distribution of more than 20 million FP/RH products to USAID-supported health facilities and organizations in Liberia from FY 2017-2020. The contraceptives, when combined with proper counseling and correct use, are estimated to provide approximately 700,000 couple years protection⁸ and to help prevent:

- 258,000 unintended pregnancies
- I,200 maternal deaths
- 107,000 abortions
- 4,000 child deaths⁹

These investments in contraceptives have the potential of saving approximately **\$18 million** in direct spending on healthcare—resources that can be reinvested in Liberia's health system.

Through its investments in contraceptives and supply chains, USAID and its global and in-country partners are helping Liberia meet its people's FP/RH needs. Countries that partner with USAID to invest in FP/RH can achieve greater self-reliance by improving their overall health systems and empowering families to plan for their futures.

Methodology

The indicators presented in this brief were calculated by entering procurement data from the GHSC-PSM project database¹⁰ into the Impact 2 model,¹¹ a socio-demographic mathematical model used to measure the impact of FP/RH programs.

The FP/RH impact indicators, as reported in this brief, estimate the global demographic, health and economic impact of the GHSC-PSM project thus far. To make these calculations, GHSC-PSM adjusted certain criteria in the model. For more information, please contact **PSMMonitoringandEval@ghsc-psm.org**.

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

"By using these Microgynon pills, I have been able to work toward achieving my goals and aspirations. I'm in school and not thinking of pregnancy because I regularly take my family planning. I am grateful to the Liberia Government Hospital in Grand Bassa County for providing free family planning services, most especially during the COVID-19 crisis." -FP client Willimena Williams



Client Williams (right) receives FP counseling. Photo credit: GHSC-PSM

CONTRACEPTIVE METHODS ¹²	TOTAL PRODUCTS DELIVERED FY 2017-2020*
Condoms	18M
Combined oral contraceptives	1.7M
T Copper bearing intrauterine devices	5K
Injectable contraceptives	1.1M
Progestin only pills	300K
📰 Standard days methods	10K
Implantable contraceptives	36K
TOTAL NUMBER OF CONTRACEPTIVES DELIVERED	20.8M
TOTAL VALUE OF COMMODITIES	\$2.1M**

*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.

⁸CYP is the estimated protection provide 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

⁹This indicator only estimates reduction in deaths as a result of improved birth spacing. The data linking the contraceptive prevalence rate, birth spacing and child mortality is currently limited.

¹⁰GHSC-PSM's Automated Requisition Tracking Management Information System (ARTMIS) is used to enter, manage, process and track orders throughout the supply chain. ¹¹https://www.mariestopes.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 FP/RH commodities delivered by GHSC-PSM across a selected time period.

¹² Units 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)



OV WWW.GHSUPPLYCHAIN.ORG