

FAMILY PLANNING | REPRODUCTIVE HEALTH

IMPACT BRIEF: NIGERIA



2020 UPDATE



Saving Lives and Improving Health Outcomes in Nigeria 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 necessary to properly care for their children, USAID ensures an uninterrupted supply of quality FP commodities worldwide through its procurement mechanism, the USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project.1

With a population of more than 200 million,² Nigeria is Africa's most populous country. In 2018, approximately 9.5 million women in Nigeria had an unmet need for FP – meaning they wanted to avoid pregnancy, but were not using a modern method of birth control³

The average woman in Nigeria gives birth to 5.4 children in her lifetime,⁴ and as of 2015, Nigeria led the top five countries in the world for highest number of maternal deaths, with 58,000 women dying from pregnancy related causes.⁵ The child mortality rate is also alarmingly high, with 117 deaths among children under 5 per 1,000 live births, compared to 76 in the sub-Saharan region.⁶

The Government of Nigeria is collaborating with USAID and other partners to address the maternal and child health needs of Nigerians. This includes increasing investment in FP/RH to reach a projected modern contraceptive prevalence rate of 14.8 percent among all women aged 15 to 49, regardless of marital status, by 2020.7

Estimated health impacts from USAID procurement investments

unintended pregnancies **PREVENTED**

AVERTED

AVERTED

AVERTED



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 FY2017. 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, pg. 28), https://www.usaid.gov/sites/default/files/documents/1864/USAID_2019_AOTC. pdf Accessed March 16, 2020.

³Guttmacher Institute. "Adding It Up: Investing in Contraception and Maternal and Newborn Health in Nigeria, 2018," (2019), https://www.guttmacher.org/fact-sheet/adding-it-up-contraception-mnh-nigeria. Accessed March 16, 2020.

Family Planning 2020, Nigeria, 2018. https://data.worldbank.org/indicator/SPDYN.TFRT.IN. Accessed March 16, 2020

⁵Ritchie, Hannah. "How Many Women Die in Childbirth?" Our World in Data, 2019. https://ourworldindata.org/how-many-women-die-in-childbirth_Accessed March 16, 2020 ⁶World Bank, Child Mortality Rate. https://data.worldbank.org/indicator/SH.DYN.MORT. Accessed March 16, 2020.

⁷FP2020, http://www.familyplanning2020.org/sites/default/files/Data-Hub/2019CI/Nigeria 2019 Cl Handout.pdf. Accessed March 16, 2020

USAID Contraceptive Investment

In partnership with the Government of Nigeria and other in-country stakeholders, USAID has supported the procurement and distribution of over 12 million FP/RH products to USAID-supported facilities and organizations in 10 states and the Federal Capital Territory. These contraceptives, when combined with proper counselling and correct use, provide 5.3 million couple years⁸ protection and can help prevent approximately:

- 2.3 million unintended pregnancies 12,000 maternal deaths
- 946.000 abortions
- 57,000 child deaths⁹

These investments in contraceptives have the potential of saving approximately \$132.7 million in direct spending on healthcare—resources that can be reinvested in Nigeria's health system.

USAID is also supporting the federal and state governments in Nigeria to strengthen health supply chains to increase access to a variety of FP products.

Through its investments in contraceptives and supply chains, USAID, in collaboration with other global and in-country partners, is helping Nigeria 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 personal and economic futures.

Methodology

The indicators presented in this brief were calculated by entering procurement data from the GHSC-PSM project database 10 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 USAID's support of contraceptives to Nigeria's health programs. To make these calculations, GHSC-PSM adjusted certain criteria in the model. For more information, please contact PSMMonitoringandEval@ghsc-psm.org.

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'As a young mother of two children, I have come to enroll for family planning, and I decided to do this early to avoid the danger of having too many children. Family planning is for the sake of the child."

-- Taiwo, FP beneficiary



Taiwo, a young mother of two, visited Apata clinic in Oyo State, Nigeria, for FP counseling. Photo credit: Anthony Abu, GHSC-PSM

CONTRACEPTIVE METHODS ¹²	TOTAL PRODUCTS DELIVERED FY 2017-2020*
Combined oral contraceptives	5M
T Copper intrauterine devices	65K
Implantable contraceptives	785K
	5.9M
Progestin only pills	216K
Standard days method	185K
TOTAL NUMBER OF CONTRACEPTIVES DELIVERED	12 MILLION**
TOTAL VALUE	\$13.9 MILLION

^{*}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

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)



Couple years protection 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

This 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. 1ºGHSC-PSM's Automated Requisition Tracking Management Information System (ARTMIS) is used to enter, manage, process and track orders throughout the supply chain.

https://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.