

2022 UPDATE

FAMILY PLANNING | REPRODUCTIVE HEALTH

IMPACT BRIEF: NEPAL



Saving Lives and Improving Health Outcomes in Nepal 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/RH commodities worldwide through the USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project.¹

Nepal has a population of 30million.² In 2022, approximately 28.2 percent of married Nepalese 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 Nepal gives birth to 2.1 children in her lifetime.⁴ Nepal has a maternal mortality ratio of 186 per 100,000 live births, compared to 157 in South Asia, on average.⁵ The mortality rate for children under 5 for every 1,000 live births is 28, compared to 38 in the South Asia region.⁶

The Government of Nepal 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 46.4 percent among married women aged 15 to 49 by 2022.⁷



Photo credit: GHSC-PSM

ESTIMATED HEALTH IMPACTS FROM USAID PROCUREMENT INVESTMENTS



551K
unintended pregnancies
PREVENTED



335K
abortions
AVERTED



500
maternal deaths
AVERTED



2K
child deaths
AVERTED



\$23M
in direct healthcare spending
SAVED

¹ 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.

² World Bank: Population, total, Nepal (2021). <https://data.worldbank.org/indicator/SPPOPTOT.L?locations=NP>. Accessed December 26, 2022.

³ Family Planning 2030 Indicator Summary Sheet: Nepal 2022 Measurement Report. https://www.track20.org/pages/participating_countries/countries_country_page.php?code=NP. Accessed December 26, 2022.

⁴ World Bank: Fertility rate, total (births per woman), Nepal (2020). <https://data.worldbank.org/>

[indicator/SP.DYN.TFRT.IN?locations=NP](https://data.worldbank.org/indicator/SP.DYN.TFRT.IN?locations=NP). Accessed December 26, 2022.

⁵ World Health Organization (2019). Trends in maternal mortality 2000 to 2017: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division: executive summary. <https://apps.who.int/iris/handle/10665/327596>. Accessed December 23, 2022.

⁶ United Nations Inter-agency Group for Child Mortality Estimation (UN IGME). 'Levels & Trends in Child Mortality: Report 2021'. <https://www.who.int/publications/m/item/levels-and-trends-in-child-mortality-report-2021>. Accessed December 23, 2022.

⁷ Family Planning 2030. Country Fact Sheet-2022 (Nepal). https://www.track20.org/pages/participating_countries/countries_country_page.php?code=NP. Accessed December 23, 2022.

USAID Contraceptive Investment

In partnership with the Government of Nepal and other in-country stakeholders, USAID has supported the procurement and distribution of more than 23 million FP/RH commodities to USAID-supported health facilities and organizations in Nepal from FY 2017-2022. The contraceptives, when combined with proper counseling and correct use, are estimated to provide approximately 1.6 million couple years protection⁸ and to help prevent:

- 551,000 unintended pregnancies
- 335,000 abortions
- 500 maternal deaths
- 2,000 child deaths⁹

These investments in contraceptives have the potential of saving approximately **\$23 million** in direct spending on healthcare¹⁰—resources that can be reinvested in Nepal's health system.

Through its investments in contraceptives and supply chains, USAID and its global and in-country partners are helping Nepal 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

To measure the impact of FP/RH programs, the indicators presented in this brief were calculated using the Impact 2 model¹¹, a socio-demographic mathematical model, using procurement data from the GHSC-PSM project database¹².

The FP/RH impact indicators, as reported in this brief, estimate the demographic, health, and economic impact of USAID's support of contraceptives to Nepal's health programs.

For more information, please contact PSMMonitoringandEval@ghsc-psm.org.

⁸ CYP 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>

⁹ 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.

¹⁰ The figures are not adjusted for inflation and based on the costs of services from 2011.

¹¹ <https://www.maristopes.org/what-we-do/our-approach/our-technical-expertise/impact-2/>, Accessed November 30, 2022. 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 GHSC-PSM's Automated Requisition Tracking Management Information System (ARTMIS) is used to enter, manage, process and track orders throughout the supply chain.





¹³ Units of measurement for contraceptives: combined oral (cycle); implantable (implant); standard days (piece); injectable (device); condoms (piece); progestin only pills (cycle); copper-bearing intra-uterine (device); emergency oral (package)



A client receives a contraceptive implant at Hansaposa Health Post, Sunsari District, Province 1. Photo credit: GHSC-PSM/Shailendra Patel

“We provide all the kinds of FP services in our health post throughout the year. The unmet need for FP is still high in our community. We are working to involve and engage men, community leaders and faith leaders for advocacy, acceptance, scaling and continued contraceptive use, especially among ethnic minorities and disadvantaged groups.”

—Pooja Bhattarai, health assistant, Hansaposa, Health Post, Province 1

| CONTRACEPTIVE METHODS ¹³ | TOTAL PRODUCTS DELIVERED FY 2017-2022* |
|---|--|
|  Male condoms | 17.5M |
|  Copper bearing intrauterine devices | 5K |
|  Implantable contraceptives | 7K |
|  Injectable contraceptives | 5.6M |
| TOTAL NUMBER OF CONTRACEPTIVES DELIVERED | 23.1M |
| TOTAL VALUE OF COMMODITIES | \$5.4M* |

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

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