Closing the Gap: From Product to Program in Contraceptive Security

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Photo by Dietmar Temps
Why the Funding GAP Tool?

- Istanbul 2001 meeting: Global Donor Gap Analysis (updated 2009)
- Call for one agreed-on number at the country level
- Provide in-country stakeholders with timely, relevant data
- Apply a simple, user-friendly tool; minimal training
Gather Data

- Distribution of FP methods by method and source
- Commodity costs by method
- Labor costs of service delivery
- Overhead costs
- Program support costs
- Current and projected funding for FP by source
Analyze Results

-Projected funding gap for FP programs
-Projected funding gap for contraceptives
-Source mix changes
-Shift in method mix
-Expected changes in funding source for FP
Plan Collectively

- Build consensus on assumptions and other data inputs
- Use to promote dialogue on resources required
- Reach agreement on results to inform policy and financial planning
It Is Simple—Many Inputs Are Pre-Loaded

### Inputs for Family Planning Cost Projections

- **Enter data in yellow cells**
- **Review data in blue cells and change if necessary**

<table>
<thead>
<tr>
<th>Country name</th>
<th>Ethiopia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year of latest CPR estimate (usually latest DHS)</td>
<td>2005 DHS</td>
</tr>
<tr>
<td>Contraceptive prevalence among all women 15-49</td>
<td>10.3% DHS</td>
</tr>
<tr>
<td>Unmet need for FP 2005</td>
<td>33.8% DHS</td>
</tr>
<tr>
<td>CPR goal</td>
<td>44.1%</td>
</tr>
</tbody>
</table>

- **Target year to meet unmet need** | 2015 |

| Number of women of reproductive age in 2006 | 19,954,636 UN Pop Div |
| Annual growth rate in number of WRA | 2.9% UN Pop Div |

### Distribution of FP users by method

<table>
<thead>
<tr>
<th>Method</th>
<th>2005</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Condom</td>
<td>2.9%</td>
<td>2.9%</td>
</tr>
<tr>
<td>Female Sterilization</td>
<td>1.9%</td>
<td>1.9%</td>
</tr>
<tr>
<td>Implants</td>
<td>1.0%</td>
<td>1.0%</td>
</tr>
<tr>
<td>Injectables</td>
<td>66.0%</td>
<td>66.0%</td>
</tr>
<tr>
<td>IUDs</td>
<td>1.0%</td>
<td>1.0%</td>
</tr>
<tr>
<td>Pills</td>
<td>20.4%</td>
<td>20.4%</td>
</tr>
<tr>
<td>Vasectomy</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Cycle beads</td>
<td>0.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Traditional</td>
<td>6.0%</td>
<td>6.0%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>100.0%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

### Contraceptive Prevalence

![Contraceptive Prevalence Chart](chart.png)
GAP in Ethiopia

Dr. Neghist Tesfaye
**Inputs**

- **Targets**
  - *Health Sector Development Plan (HSDP) IV (2010–2015)*
  - Current and future method mix plans

- **Performance**
  - Last 10 K Study (John Snow, Inc.), 2010

- **Costs**
  - Labor—FP costing study, *The Cost of Family Planning in Ethiopia* (USAID | Health Policy Initiative, Task Order 1), 2010
  - Commodities, program support, and overhead—global default
Rapid Increase in CPR

- **CPR**
  - From 29% to 66% in 5 years
  - Percentage point increase 7.5% annually

- **Users (women in union)**
  - 3.6 million women in 2010 to 9.2 million by 2015
Methods... A More Robust Mix

Source: EDHS 2011

Source: HSDP IV
Public Sector Dominates FP Market

Source of Services 2011

Source of Services 2015

Source: Last 10K Study, JSI 2010
Costs
Reaching a CPR of 66% by 2015

- **High total costs**
  - Nearly $270 million required cumulatively

- **Government share**
  - Labor, commodity, and overhead
  - Does not include capital investments and investment in education

- **Donor share**
  - Program support and commodity costs

**Total Costs by Component (2011 US$)**

Source: GAP Tool.
What Is the FP Funding Gap?

FP Resource Requirements and Funding (2011 US$)

Source: GAP Tool.

WHO = World Health Organization; MSI = Marie Stopes International; DfID = United Kingdom Department for International Development; UNFPA = United Nations Population Fund
What Is the Contraceptive Funding Gap?

Commodity Resource Needs and Commitments (2011 US$)

Source: GAP Tool.

MSI = Marie Stopes International; DfID = United Kingdom Department for International Development; UNFPA = United Nations Population Fund

Anonymous
Irish Aid
Anonymous/MSI
DfID
UNFPA
USAID
Government
Needs
Summary

- Reaching MDGs by 2015 requires significant funds
- Commitments from donors are short term
- Changing method mix has high program costs
- Most of FP expansion will occur in the public sector
Acknowledgments

We wish to acknowledge the guidance and support provided by the following:

- Ethiopian Federal Ministry of Health
- Ethiopian Family Planning Technical Working Group members
- USAID/Ethiopia Health, Population, and Nutrition Team
- USAID/Washington
- USAID | DELIVER
Thank You!

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The Health Policy Project is a five-year cooperative agreement funded by the U.S. Agency for International Development (USAID) under Cooperative Agreement No. AID-OAA-A-10-00067, beginning September 30, 2010. It is implemented by Futures Group, the Centre for Development and Population Activities (CEDPA), Futures Institute, Partners in Population and Development Africa Regional Office (PPD ARO), Population Reference Bureau (PRB), Research Triangle Institute (RTI) International, and the White Ribbon Alliance for Safe Motherhood (WRA).