

Donor Support for Contraceptives and Logistics

2000

UNFPA

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List of Abbreviations and Acronyms

AIDS	Acquired immunodeficiency syndrome
BKKBN	Badan Koordinasi Keluarga Berencana Nasional (Indonesia)
BMZE	Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung (Germany)
CDLMIS	Contraceptive Distribution and Logistics Management Information System
CDS	Contract Distribution System
CIDA	Canadian International Development Agency
CMIS	Clinical Management Information System (Romania)
CMU	Commodity Management Unit (UNFPA)
COESIDA	Consejo Estatal para el Control y Prevención del SIDA (State Council for AIDS Prevention and Control)
CPR	Contraceptive prevalence rate
CPT	Contraceptive Procurement Table
CST	Country Technical Services Team
DEPKES	Departemen Kesehatan (Ministry of Health, Indonesia)
DFID	Department for International Development
DFP	Director of Family Planning
DHS	Demographic and Health Survey
DILSAT	District Integrated Logistics Self Assessment Tool
DOH	Department of Health
DRP	Distribution Resource Planning
EPI	Expanded Programme on Immunization
FHD	Family Health Division
FP	Family planning
FPLM	Family Planning Logistics Management
HC	Health centre
HIV	Human immunodeficiency virus
ICPD	International Conference on Population and Development
IPPF	International Planned Parenthood Federation
IT	Information technology
IUD	Intra-uterine device
KfW	Kreditanstalt für Wiederaufbau
LGU	Local Government Unit
LMIS	Logistics Management Information System
LMT	Logistics Management Training
MIS	Management Information System
MOH	Ministry of Health
MOHFW	Ministry of Health and Family Welfare
MOHSA	Ministry of Health and Social Affairs
MSI	Marie Stopes International
NCMCH	National Maternal and Child Health Centre (Cambodia)
NGO	Non-governmental organization
OCP	Oral Contraceptive Pills
PSI	Population Services International

RFO	Regional Field Officer
RH	Reproductive health
RLA	Regional Logistics Adviser
RSDP	Rural Services Delivery Project
RTI	Reproductive tract infection
SDP	Services Delivery Project
SIDA	Swedish International Development Cooperation Agency
STI	Sexually transmitted disease
TA	Technical assistance
UFHP	Urban Family Health Project
UMIS	Unified Management Information System
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNFPA	United Nations Population Fund
UNV	United Nations Volunteer
USAID	United States Agency for International Development
VFT	Vaginal foaming tablet
WHO	World Health Organization

Introduction

This report, the latest in a series, was prepared by analysing information from a database of the United Nations Population Fund (UNFPA) on Donor Support for Reproductive Health Commodities and Logistics. The database contains country-specific information reported by donors on the type, quantity and total cost of contraceptives they provided to reproductive health programmes in developing countries during 2000. The information for this report was collected in 2001. The series of reports is being used for contraceptive supply planning, advocacy and resource mobilization, as is evident by citations of the UNFPA database in several publications in 2000. As in earlier years, the database is especially useful to illustrate commodity shortfalls and changes in funding by donor and country.

The report highlights trends in donor support since 1990 and the gap between estimated needs and actual donor support. For example, the estimated condom requirements for STI/HIV prevention and contraceptive requirements for family planning programmes, prepared separately by UNFPA,¹ are compared with the actual donor support figures to examine donor contributions vis-à-vis country needs. This report also indicates donor support by region, support by product, the top 10 countries supported by donors and the quantity of male and female condoms supplied in countries.

An attempt was made to collect information on donor support for antibiotics for developing-country programmes on the prevention of sexually transmitted infection/reproductive tract infection (STI/RTI). In many cases, however, either donors did not have a system to record this information or the countries receiving support did not disaggregate information by commodity. The UNFPA Commodity Management Unit (CMU) will, nevertheless, continue to dialogue with donors and countries to collect this information.

A chapter at the end of the report outlines information on logistics support provided by donors, mainly by the United States Agency for International Development (USAID) and UNFPA. Other donors did not have this information. Grouped into three categories -- technical support, infrastructure-strengthening and training -- this information is compared with the dollar amount spent on products. Participants in a UNFPA-organized workshop in Uganda in 1997 expressed the view that an investment equal to at least 15 per cent of the commodity value is desirable for maintaining an effective logistics system. Support for logistics management is also in line with the Programme of Action of the International Conference on Population and Development (ICPD). The Programme of Action stipulates that by 2015 reproductive health services and products should be accessible to all who need them. Therefore, it is crucial that donors and developing countries, together, ensure adequate support not only for providing supplies but also for strengthening the capacity of countries to deliver them.

¹UNFPA, *Global Estimates of Contraceptive Commodities and Condoms for STI/HIV Prevention 2000-2015* (New York, UNFPA), is in press.

A caveat is important in the beginning of this report. As in the past, information from some donors was missing or incomplete. Some tables and figures in the 2000 report may differ from those of earlier years because of subsequent reports from donors. The World Bank information represents only orders filled on its behalf by UNFPA to supply contraceptives in a number of countries. Contraceptives purchased using World Bank monies from other sources are not reported here. Similarly, support from the European Union and the Canadian International Development Agency (CIDA) was estimated on the basis of funding received by UNFPA to procure and supply contraceptives. Hence, the amount of support from the World Bank, CIDA and the European Union was subtracted from the UNFPA total of \$42.4 million.²

The information from two social marketing companies, Population Services International (PSI) and DKT, was compared and contrasted with the report received from donors to avoid double-counting. These companies receive support from donors that often report the same information for their support in developing countries. Only the amount of support these social marketing companies provided from their own funding was estimated and reported.

In 2000, the Swedish International Development Cooperation Agency (SIDA), the Government of The Netherlands, Pathfinder, Marie Stopes International, the Joint United Nations Programme on HIV/AIDS (UNAIDS) and the World Health Organization (WHO) did not provide information. For some agencies, it was difficult to separate contraceptive support from the total funding provided to countries. Pathfinder, UNAIDS and WHO did not procure contraceptives in 2000. The Governments of The Netherlands, the United Kingdom and Canada announced in 2000 substantial increases in support for reproductive health commodities, which will be reflected the 2001 report.

² Unless otherwise noted, all dollar figures in this report refer to U. S. dollars.

Levels of Donor Support

Donor support for contraceptives to developing countries in 2000 was recorded at \$154 million, an increase of 18 per cent over the support provided in 1999 (Table 1). However, compared with 1996, when donor support was \$172.2 million and met 44 per cent of the estimated global needs for contraceptives, support in 2000 met only 27 per cent of the estimated contraceptive needs for family planning.

Table 1: Estimated Contraceptive Commodity Support by Donor/Agency, 1990-2000, in \$US 000

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	TOTAL	% of Total
BMZ/KfW			10,798	18,312	11,350	9,317	38,071	13,305	8,627	7,976	35,482	153,238	11.21
CIDA					1,385	4,514	7,249	0	1,036	2,885	4,808	21,877	1.60
DFID			4,125	4,712	7,192	10,924	9,205	13,149	7,807	13,188	7,317	77,619	5.68
DKT						177	0	N/A	3,759	5,148	4,868	13,952	1.02
European Union				180	6,122	6,510	9,215	7,435	644	13,109	48	43,263	3.17
IPPF	5,843	5,410	6,204	6,165	6,258	6,746	6,003	11,148	3,416	3,016	3,814	64,023	4.68
Japan					28	315	300	838	36	159	1,657	3,333	0.24
Netherlands						102		3,749	2,700	2,584	N/A	9,135	0.67
Others ³			2,565	2,865	873	2,292	750	1,439	61	732	N/A	11,577	0.85
PSI			418	1,210	2,323	7,419	7,239	2,885	200	264	456	22,414	1.64
UNFPA ⁴	14,752	21,499	18,534	27,817	34,087	37,857	37,610	39,861	32,200	14,395	16,720	295,332	21.61
USAID	57,636	59,892	39,575	55,142	47,848	51,059	46,481	39,383	63,087	45,522	58,093	563,718	41.25
WHO	957	975	628	483	968	1,663	2,099	2,673	481	1,078	N/A	12,005	0.88
World Bank						5,000	7,930	1,662	19,137	20,718	20,781	75,228	5.50
TOTAL	79,188	87,776	82,847	116,886	118,434	143,895	172,152	137,527	143,191	130,774	154,044	1,366,714	100.00

Notes:

N/A = Not ascertained.

In 2000, the significant increase in BMZ/KfW support was related to increased support to Bangladesh in that year.

UNFPA's overall contraceptive procurement, including procurement on behalf of the World Bank, the European Union and CIDA, was \$42 million in 2000, an increase of 11 per cent compared with the previous year's figure of \$38 million. USAID support increased to \$58 million from \$45 million during the same period, an increase of about 29 per cent.

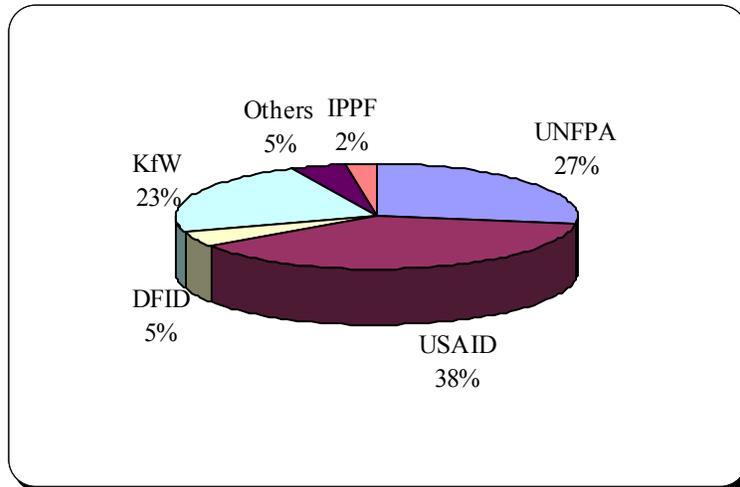
Figure 1 illustrates the contributions of five major donors of contraceptives in 2000. The UNFPA share of 27 per cent includes the actual amount of contraceptives purchased with

³ Others include Marie Stopes International (MSI), Pathfinder, SIDA and UNAIDS.

⁴ UNFPA figures present the procurement from the UNFPA Country Programme budget. In 2000, UNFPA also procured and supplied contraceptives on behalf of CIDA, the World Bank and the European Union.

money received from different sources, including the World Bank, the European Union and CIDA. When those donor procurements are removed, the UNFPA total equals 11 per cent. DFID and IPPF support has remained at 5 per cent and 2 per cent, respectively, whereas USAID support constituted 38 per cent of the global donor support.

**Figure 1: Support by Major Donors, 2000
(in percentages)**



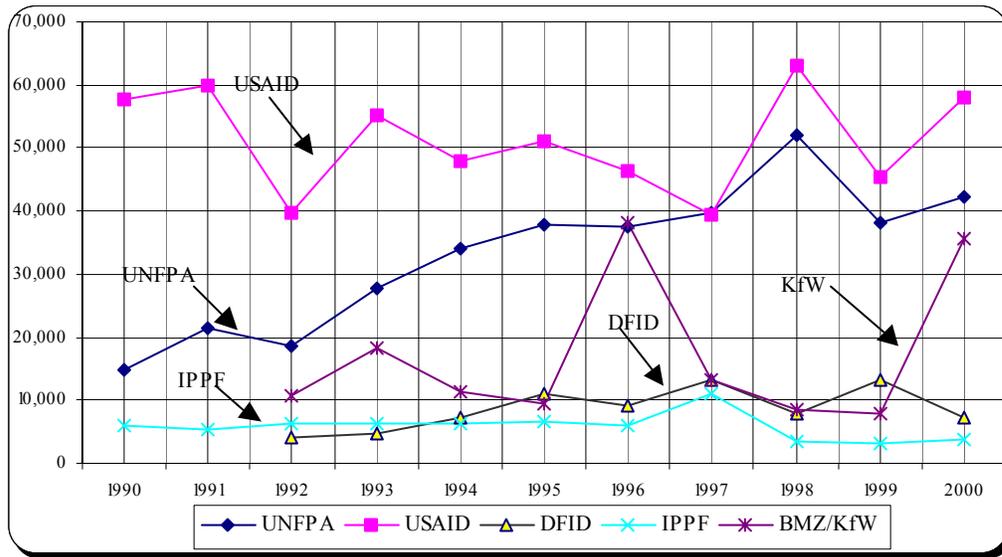
Patterns of Donor Support

Fluctuations in Support

Figure 2 indicates a fluctuating pattern of support by the five main donors since 1990. UNFPA support reflected its total procurement figures. BMZ/KfW support had the largest increase in 2000 since 1997.

Any trend that shows increasing support is a welcome sign. However, it may be difficult for a recipient Government to manage a large increase or decrease in support from a donor, particularly from the point of view of sustainability and dependency, unless donor and government efforts are well coordinated. Donors as a group should have clear-cut and well-coordinated strategies when substantially changing the levels of their support.

Figure 2: Patterns in Contraceptive Supply, 1990-2000, in \$US 000

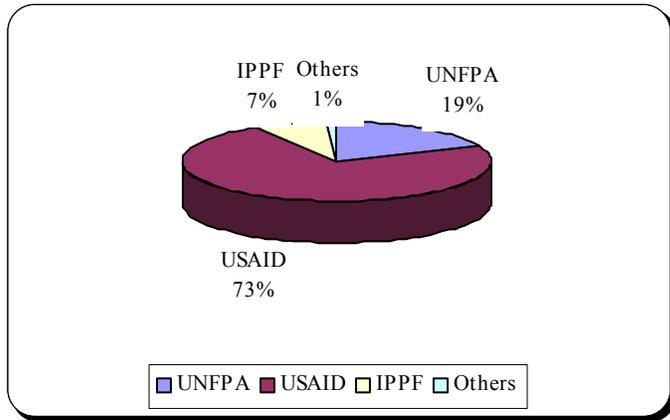


Changing Patterns of Support

The pattern of donor support for contraceptives in the last decade has changed. In 1990, USAID was the major donor, followed by UNFPA and IPPF (Figure 3). Then, USAID contributed 73 per cent of the total of \$80 million reported support for contraceptives provided by donors.

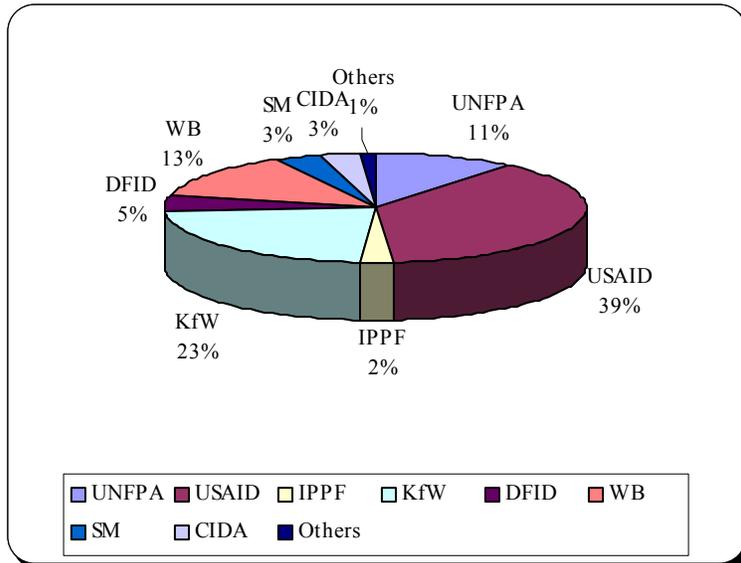
Figure 3: Comparison of Major Donor Support, 1990 and 2000

1990 Total: \$US80 million



In 2000, 11 donors provided a total of \$154 million for contraceptives. USAID’s share declined to 39 per cent from 73 per cent in 1990. Social marketing companies, viz., DKT and PSI, had a combined share of 3 per cent. KfW, the World Bank and CIDA had respective shares of 23 per cent, 13 per cent and 3 per cent. DFID maintained its share between 5 and 7 per cent of the global donor support over the past several years. During these years, the UNFPA share fluctuated depending upon its funding situation and/or the levels of bilateral funding received from other donors.

2000 Total: \$US154 million

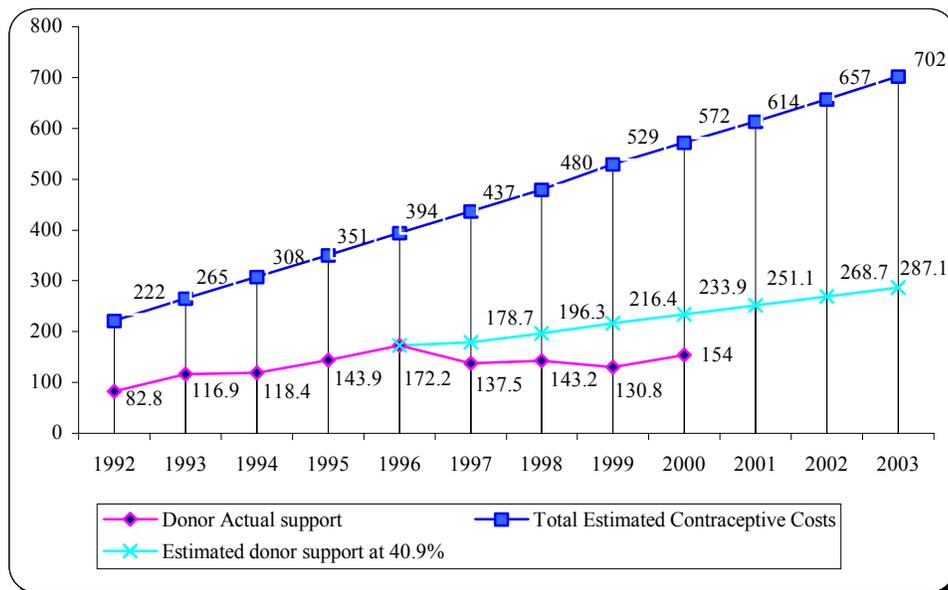


Projected Contraceptive Costs and Estimated Requirements

Contraceptive prevalence in developing countries has grown dramatically in the past four decades. In the years since the mid-1960s, the contraceptive prevalence rate (CPR) has increased from approximately 10 per cent to almost 60 per cent, with some 9 out of 10 users relying upon modern methods. The United Nations Population Division projections show that the reproductive age population in developing countries is increasing some 23 per cent between 2000 and 2015. The number of contraceptive users during the same period is projected to increase more than 40 per cent as a consequence of both population growth and an increase in the proportion of people who use contraception.

Figure 4 shows that donors provided 40.9 per cent of the total contraceptive requirements from 1992 to 1996. However, after 1996, donor support began to decline. In 2000, donors met only 27 per cent of total estimated requirements. Had donors maintained their support at 40.9 per cent support, they would have supplied in 2000 about \$234 million worth of commodities rather than the actual amount of \$154 million, a potential shortfall of some \$80 million.

Figure 4: Trend of Reported Donor Support for Contraceptives Compared with Estimated Requirements, 1992-2003 (in millions of dollars)



Estimates of Contraceptives and Condoms for STI/HIV Prevention

Contraceptive requirements for family planning and condoms for STI/HIV prevention were estimated for the period 2000-2015 and published by CMU in the *IPPF Medical Bulletin*, December 2001. The methodology used in the estimation was based mainly on population projections, contraceptive usage and, for the purpose of estimating condoms for STI/HIV prevention, the extra-marital sexual behaviour of married men and the sexual behavior of single men. (The details including methodology, etc., can be obtained separately from UNFPA or by visiting: www.unfpa.org). The estimates will be updated when further data are available.

Table 2 combines estimates of contraceptive commodities with estimates of condoms for STI/HIV prevention. The total commodity requirements increase from \$811 million in 2000 to more than \$1.8 billion in 2015. The requirements of countries for external support for these commodities vary greatly, with the least developed countries requiring the greatest level of assistance. If donors were to continue to supply 40.9 per cent of the total requirements (as they did for contraceptive commodities between 1992 and 1996), donor support would need to be at a minimum level of \$390 million in 2002, and then continue increasing to more than \$738 million in 2015.

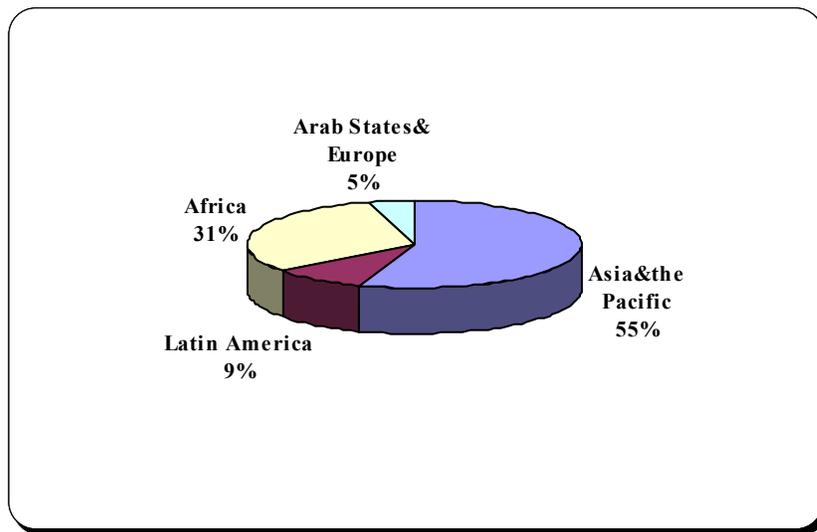
Table 2: Estimated Global Cost of Contraceptive Commodities and Condoms for STI/HIV Prevention, 2000-2015, \$US million

Year	STI/HIV Requirements	Family Planning Requirements	Total	Donor Support at 41%
2000	239	572	811	331.7
2001	268	614	882	360.7
2002	297	657	954	390.2
2003	325	702	1,027	419.9
2004	354	748	1,102	450.6
2005	383	795	1,178	481.8
2006	400	840	1,240	507.2
2007	417	887	1,304	533.1
2008	434	933	1,367	559.0
2009	451	979	1,430	584.9
2010	468	1,027	1,495	611.3
2011	486	1,071	1,557	636.9
2012	504	1,116	1,620	662.8
2013	521	1,161	1,682	687.9
2014	539	1,200	1,739	711.1
2015	557	1,249	1,806	738.7
Total	6,643	14,550	21,193	8,667.8

Regional Distribution of Donor Support

In 2000 as in 1999, the Asia and Pacific region received the largest share of the total support (Figure 5). This could be simply because of the larger population in that region. Also, KfW support to Bangladesh contributed to this increase.

Figure 5: Donor Support, 2000, by region (in percentages)



Countries Receiving the Most Contraceptive Commodity Support

Of the 10 countries that received the most donor support in 2000, 6 are in Asia, with 76 per cent of the \$104 million total of the 10 countries. The 10 countries listed in Table 3 for 2000 received two thirds of the total donor support for contraceptives and condoms for STI/HIV prevention provided to all countries in 2000.

Table 3: Top 10 Countries Receiving the Most Donor Support, 1992-2000, \$US million

1992		1993		1994		1995	
Country	Value	Country	Value	Country	Value	Country	Value
Bangladesh	16.6	Bangladesh	36.6	Bangladesh	31.1	Bangladesh	25.3
Viet Nam	4.7	Philippines	6.1	Viet Nam	5.3	Nigeria	14.1
Philippines	4.5	Kenya	5.8	Philippines	5.1	Ethiopia	8.4
India	4.3	Nigeria	5.3	Mexico	4.9	India	6.6
Zimbabwe	4.1	U. Rep. of Tanzania	3.2	Nigeria	3.9	Pakistan	6.3
Egypt	4	India	3.1	Kenya	3.8	Kenya	5.3
Kenya	4	Zimbabwe	3.1	Nepal	3.3	Uganda	4.2
Pakistan	3.2	Brazil	2.9	Uganda	2.8	Zimbabwe	4.2
Nigeria	2.3	Uganda	2.9	Pakistan	2.8	Nepal	3.7
Morocco	2.1	Morocco	2.6	Zambia	2.8	U. Rep. of Tanzania	3.7
Total	49.8		71.6		65.8		81.8
1996		1997		1998		1999	
Country	Value	Country	Value	Country	Value	Country	Value
Bangladesh	44.5	Bangladesh	16.1	Bangladesh	36.2	Bangladesh	27.3
India	17.9	Pakistan	10.3	Indonesia	8.7	Indonesia	16.7
Pakistan	9.2	Ethiopia	7	Pakistan	7.7	Philippines	7.5
Nigeria	7.2	U. Rep. of Tanzania	6.5	Egypt	5.8	Kenya	6.5
Ethiopia	5	Thailand	6.2	Nepal	5.6	U. Rep. of Tanzania	5.3
Zimbabwe	5	Philippines	5.3	Philippines	5.3	Zimbabwe	5
Ghana	4.5	Burkina Faso	5.2	U. Rep. of Tanzania	4.6	Pakistan	4
Nepal	4.4	Peru	4.9	Ethiopia	4.2	Uganda	3.1
Egypt	3.5	Zimbabwe	4.8	Peru	3.9	Ethiopia	3.1
Peru	3.5	Nepal	4.1	Myanmar	3.3	Nepal	3
Total	104.7		70.4		85.3		81.5
2000							
Country	Value						
Bangladesh	48.3						
Ethiopia	10.8						
Philippines	10.6						
Pakistan	6.6						
Indonesia	6.3						
Ghana	5.1						
Uganda	5						
Nepal	4.3						
Peru	3.7						
India	3.4						
	104.1						

Total Expenditure by Method

In 2000, donor support for condoms was lower than support for oral contraceptives. This may be partly related to the increase in support for orals by KfW and the World Bank to Bangladesh (Table 4). The share of condoms in 1992 was 25 per cent. By 2000, the condom share increased to only 30 per cent, which is roughly three fifths of the condom support provided in 1996.

Table 4: Expenditure by Method, 1992-2000, \$US million

Method	1992	1993	1994	1995	1996	1997	1998	1999	2000	Totals	Per cent
Condom	20.8	40.1	39.9	60.6	73.3	50.9	51.4	37.9	46	420.9	44.18
Oral	33.7	48.3	44.1	46.9	64	30.2	34.4	44.4	71	417	43.77
Injectable	10.5	15.8	16.8	18	21.8	37.8	34.3	31.5	29.5	216	22.67
IUD	9.5	5.6	8.7	5.3	9.2	6.3	9.7	6.5	2.9	63.7	6.69
VFT	2.5	2.8	3.4	3.4	4	3	2.6	1.9	1.7	25.3	2.66
Implant	1.6	1.5	3.9	2.9	3.3	4	10.4	8.5	2.8	38.9	4.08
Foam/Jelly/Others	4.2	2.7	1.3	2.1	1.7	5.3	0.4	0.1	0.2	18	1.89
Totals	82.8	116.8	118.1	139.2	177.3	137.5	143.2	130.8	154.1	952.7	100.00

Donor Support for Male Condoms

Table 5 indicates donor support for male condoms in the years 1996-2000. As noted in previous reports, condom supply is often provided in two-year cycles, sometimes resulting in a larger supply in one year compared with another.

Table 5: Distribution of Male Condoms in Countries and Territories, 1996-2000 (in pcs)

Country	1996	1997	1998	1999	2000	Average
Arab States, Europe & Central Asia:						
Albania	338,400	57,600	1,437,184	953,146	1,508,326	858,931
Algeria	6,324,000	309,600				1,326,720
Armenia	576,000	2,016,000	42,000			526,800
Azerbaijan	7,300	5,492,016	576,000			1,215,063
Belarus			18,000		18,000	7,200
Bulgaria	7,300	5,492,016	720,000	1,728,500		1,589,563
Cyprus		6,048				1,210
Czech Republic	328,800					65,760
Djibouti	9,936	288,000	154,080	129,600	86,400	133,603
Egypt	4,440,000	3,204,000	5,916,000	4,274,200	6,150,000	4,796,840
Georgia		4,320,000	450,400	-		954,080
Hungary			54,720			10,944
Iraq	799,200	1,980,000	288,000	86,400		630,720
Jordan	552,000	589,200	4,116,000	1,206,000	942,000	1,481,040

Kazakstan	720,000	190,800	5,760,000		936,000	1,521,360
Kyrgistan		5,534,000		2,664,000		1,639,600
Latvia	43,200					8,640
Lebanon	216,000	7,200	273,600	172,800	90,000	151,920
Macedonia						
Moldova	864,000	1,296,000				432,000
Morocco	10,196,460	5,552,400	2,795,760	3,816,000	1,896,000	4,851,324
Oman	114,000	135,072	64,800	216,000		105,974
Occupied Palestine Territories	504,000		14,400	343,680	60,000	184,416
Poland	720,000			504,000		244,800
Romania	115,200	54,720	1,440,144	1,774,080	84,672	693,763
Russian Federation	3,264,000		374,400	1,794,000	93,200	1,105,120
Somalia		1,400			48,000	9,880
Sudan	144,000	14,000	150,192	374,400	314,920	199,502
Syrian Arab Republic	648,000	115,300	230,400	3,024,000	1,440,000	1,091,540
Tajikistan		468,000	1,013,064		3,000	296,813
Tunisia	4,548,288		349,920	8,000		981,242
Turkey	23,100,000	14,020,850		403,200	4,872,960	8,479,402
Turkmenistan		1,155,000	1,008,000			432,600
Ukraine		1,047,168	264,000	861,600	896,968	613,947
Uzbekistan	1,150,000	24,000		216,000	792,000	436,400
Yemen	288,000	43,200	460,800	578,000	28,800	279,760
Sub-Total:	60,018,084	53,413,590	27,971,864	25,127,606	20,261,246	37,358,478
Asia & Pacific:						
Afghanistan						-
Bangladesh	263,300,000	232,553,060	296,922,230	101,760,668	120,721,259	203,051,443
Bhutan	2,016,000	158,400	1,468,800	2,881,000	3,024,000	1,909,640
Cambodia	123,000,000	13,649,000	27,509,000	7,212,934	18,072,108	37,888,608
China			24,834,302	28,000,000	31,427,176	16,852,296
Cook Islands			7,200	99,600		21,360
Dem. Peo. Rep. of Korea	288,000	2,160,000	4,440,960			1,377,792
Fiji	345,600	388,800	197,568		30,000	192,394
India	224,972,544	185,549,875	63,664,808	7,108,270	58,137,523	107,886,604
Indonesia	48,036,000	8,078,400	28,000,000	29,442,240	39,227,169	30,556,762
Kiribati	7,200	65,800	37,440	46,800	86,640	48,776
Lao. People's Dem. Rep.	252,000	1,080,000			1,530,912	572,582
Malaysia				10,600,000	10,797,696	4,279,539
Maldives	465,840	742,100	316,800	439,200		392,788
Marshall Islands	28,800	1,440	7,200	50,400		17,568
Micronesia	22,750	86,400	100,800	33,120		48,614
Mongolia	1,296,000	1,937,000	883,728	12,151,320	3,875,040	4,028,618
Myanmar	4,900,000	4,169,900	12,836,800	10,646,450	2,811,904	7,073,011
Nepal	35,408,880	17,766,705	33,188,496	35,187,120	17,236,080	27,757,456
Pakistan	188,869,200	43,410,720	124,685,522	5,856,480	51,680,562	82,900,497
Papua New Guinea		432,000	120,000	94,800	12,000	131,760
Philippines	15,382,800	84,303,600	29,974,656	25,340,400	14,014,176	33,803,126

Samoa			7,200			1,440
Solomon Islands	438,000	28,800	381,600	216,000	73,000	227,480
Sri Lanka	16,025,522	11,550,666	12,341,814	6,537,600	4,644,000	10,219,920
Thailand				201,600		40,320
Tonga	127,680	32,400	72,000	90,000	82,320	80,880
Tuvalu	5,040	14,400	36,250		4,320	12,002
Vanuatu	193,200	10,850,400	223,200	501,600		2,353,680
Viet Nam	2,491,200	4,200	41,407,704	47,338,000	36,224,632	25,493,147
Western Samoa	34,800	14,400	123,840		30,000	40,608
Sub-Total:	927,907,056	619,028,466	703,789,918	331,835,602	413,742,517	599,260,712
Latin America/Caribbean:						
Anguilla			64,800			12,960
Antigua and Barbuda	79,200	57,200	72,000			41,680
Argentina		86,400	129,600	100,800		63,360
Aruba	4,354	18,000	72,000	14,400	48,960	31,543
Bahamas	18,000		21,600	309,600	5,760	70,992
Barbados	28,800	24,000	36,000		16,992	21,158
Belize	24,000	432,000	360,000			163,200
Bolivia	3,558,000	5,644,800	9,011,567	189,600	1,842,000	4,049,193
British Virgin Islands			100,800			20,160
Brazil	46,540,000	1,573,200		43,847,160	56,320,561	29,656,184
Chile	266,400	72,000	21,600	432,000	1,000	158,600
Colombia	954,000	259,200	360,010	187,200		352,082
Costa Rica	86,400	3,570,000				731,280
Cuba	6,134,400	6,825,600	172,800	1,440,000	432,000	3,000,960
Dominica	19,200	87,600	2,498	93,600	66,240	53,828
Dominican Republic	4,882,560	4,188,880	3,792,000	265,152		2,625,718
Ecuador	1,224,000	1,728,000	3,811,200	6,516,000		2,655,840
El Salvador	3,194,400	6,830,400	3,396,000	2,436,000	1,524,000	3,476,160
Grenada	12,000	133,200	21,600	21,600		37,680
Guatemala	6,500,000	5,034,000	12,822,000	4,602,300	7,074,000	7,206,400
Guyana	1,511,904		1,190,880	432,000		626,957
Haiti	13,169,357	20,429,066	16,920,000	16,627,680	10,800,000	15,589,221
Honduras	6,618,000	5,505,000	3,834,000	7,284,000	4,794,000	5,607,000
Jamaica	252,000	252,000			29,100	106,620
Mexico	15,812,000	17,098,333	4,376,000	37,000	6,440	7,465,955
Montserrat	6,000	6,000	36,000			9,600
Nicaragua	5,648,976	2,362,800	9,406,800	3,492,000	2,070,000	4,596,115
Panama	540,000	21,600	438,912	295,200	478,080	354,758
Paraguay	24,000	2,706,000	3,435,600	84,000	1,830,000	1,615,920
Peru	17,442,000	1,683,600	21,186,048	100,080	14,010,000	10,884,346
St. Kitts and Nevis		57,600				11,520
St. Lucia					23,040	4,608
St. Vincent and the Grenadines			7,200		1,440	1,728
Suriname	36,000			122,400		31,680

Trinidad and Tobago	311,040	692,400	338,400	158,400	63,360	312,720
Turks and Caicos Islands	7,200		86,400			18,720
Uruguay	144,000			219,168	109,440	94,522
Venezuela	21,600	455,904	36,000	7,200		104,141
Sub-Total:	135,069,791	87,834,783	95,560,315	89,314,240	101,546,413	101,865,108
Sub-Saharan Africa:						
Angola		50,400	1,181,664	3,226,500	3,448,850	1,581,483
Benin	6,662,000	6,796,000	3,876,000	8,490,000	10,188,000	7,202,400
Botswana	1,800,000			2,000		360,400
Burkina Faso	10,631,200	210,666	14,168,040	18,504,000	13,609,005	11,424,582
Burundi		360,000	438,528	1,157,148	1,617,792	714,694
Cameroon	14,069,760	17,658,000	16,518,000		19,677,500	13,584,652
Cape Verde	557,200	2,460,240	2,952,000			1,193,888
Central African Republic	1,819,200	216,000	115,200	224,064	742,800	623,453
Chad	2,390,000	5,760,000	704,000	2,016,000	2,117,306	2,597,461
Comoro	87,120	246,000	114,000	374,400	118,800	188,064
Congo	684,000	7,717,600	1,952,048	6,153,840	6,402,760	4,582,050
Cote d'Ivoire	69,998,720	2,139,600	27,798,000	28,944,000	10,684,800	27,913,024
Dem. Rep. of Congo	19,028,176	48,000		3,223,200	13,015,000	7,062,875
Equatorial Guinea	79,200		21,600		28,800	25,920
Eritrea	2,623,776	3,447,402	5,152,800	450,000	2,521,200	2,839,036
Ethiopia	15,006,000	71,474,800	55,434,800	36,673,600	99,686,000	55,655,040
Gabon	201,500		120,000	86,400	60,904	93,761
Gambia	309,600		464,887	612,000	2,940,000	865,297
Ghana	15,070,800	368,400	3,666,000	6,005,840	16,070,300	8,236,268
Guinea	3,534,000	4,087,200	5,746,080	5,196,000	12,000	3,715,056
Guinea-Bissau	216,000	69,120		48,780	172,800	101,340
Kenya	26,296,000	6,998,132	1,510,048	66,688,800		20,298,596
Lesotho	213,600	2,706,080	205,000	425,800	126,000	735,296
Liberia	163,440	1,020,000	1,728,000	64,800	1,392,000	873,648
Madagascar	2,940,000	4,789,000	6,852,000	1,026,000	7,628,952	4,647,190
Malawi	18,744,000	18,108,008	5,184,000	10,800,000	10,440,000	12,655,202
Mali	4,362,000	6,468,000	9,318,000	5,406,000		5,110,800
Mauritania	300,000	6,000		777,600		216,720
Mauritius	489,600	1,200	304,992	500	144,864	188,231
Mozambique	12,504,000	16,095,332	24,396,000	20,576,100	7,420,000	16,198,286
Namibia		720,000	360,000	150,000	1,690,335	584,067
Niger	1,380,000	2,106,000	605,300	17,280	1,384,752	1,098,666
Nigeria	69,096,000		17,760,000	50,176,400	68,832	27,420,246
Rwanda	8,483,600	95,028,800	5,771,520		3,775,666	22,611,917
Sao Tome & Principe		295,200	144,000		267,840	141,408
Senegal	6,456,000	8,790,000	9,577,210	4,115,000	6,960,000	7,179,642
Seychelles	49,104	216,000	100,800		204,000	113,981
Sierra Leone	1,542,000	176,666	7,968,336	1,029,360	40,320	2,151,336
South Africa	19,000,000	16,004,000	300,000	79,786,000	41,520,000	31,322,000

Swaziland	73,440	7,350,000	2,046,000		978,300	2,089,548
Togo	2,777,280	4,759,680	7,140,000	11,772,240	5,054,000	6,300,640
Uganda	13,085,000	41,303,309	6,838,580	33,569,200	77,882,269	34,535,672
United Rep. of Tanzania	29,702,000	15,712,800	43,920,856	26,539,320	1,680,000	23,174,995
Zambia	18,446,848	4,832,288		1,740,000	40,098,400	13,023,507
Zimbabwe	22,387,854	42,171,618	31,000,000	62,471,440	12,000	31,608,582
Sub-Total:	423,260,018	418,767,541	323,454,289	498,519,612	410,203,147	414,840,921
Grand Total:	1,546,254,949	1,179,044,380	1,150,776,386	944,797,060	945,753,323	1,153,325,220

Donor Support for Female Condoms

The growth in donor support for female condoms is encouraging. The Female Health Company, manufacturer of female condoms, provided the information in Table 6.

Table 6: Distribution of Female Condoms (in pcs) in Public and Private Sectors

Country	Pop-million	1996-97	1997-98	1998-99	1999-2000	2000-01	1996-01 FC	Organisation	Funder
AFRICA									
Public sector/NGO									<i>Ital=UNAIDS Supply Proj</i>
Angola	11			60,000	63,000	30,000	153,000	UNFPA	UNFPA/ UNAIDS
Benin	5					12,000	12,000	MOH	MOH
Botswana	1			2,000		10,000	12,000	IPPF	IPPF
Burundi	6				3,000	11,000	14,000	UNFPA	UNFPA/ UNAIDS
Cameroon	13				8,000		8,000	IPPF	IPPF/ UNAIDS
Central African Republic	3				9,000	7,200	16,200	IPPF/UNFPA	IPPF/UNFPA
Chad	6					40,000	40,000	UNFPA	UNFPA
Comoros	1					1,000	1,000	IPPF	IPPF
Congo-Kinshasa	43			2,500	2,000	9,000	13,500	MSF/UNFPA	UNFPA
Cote d'Ivoire	11	2,000	31,000			88,500	121,500	UNAIDS/UNFPA	UNAIDS/ UNFPA
Equatorial Guinea						20,000	20,000	UNFPA	UNFPA
Eritrea	3		24,000			22,000	46,000	UNFPA	UNFPA
Ethiopia	52				20,000		20,000	UNFPA	UNFPA
Gabon	1					2,200	2,200	UNFPA/IPPF	UNFPA/IPPF
Ghana	19				410,000	1,000,000	1,410,000	UNFPA/ SWAA/MOH	UNFPA/ UNAIDS
Kenya	24		110,000	200,000		200,000	510,000	FHI/UNFPA/IPPF	USAID/ UNFPA
Lesotho	2			8,000	17,000	57,000	82,000	IPPF	IPPF/UNAIDS
Liberia	3					2,000	2,000	IPPF	IPPF
Madagascar	14		5,000	5,000	16,000		26,000	MDM	USAID
Malawi	6			1,000	5,000		6,000	Vaestoliito/ UNAIDS	Vaestoliito/ UNAIDS
Mali	11				11,000	5,000	16,000	IPPF	IPPF/UNAIDS
Mauritania	2					1,000	1,000	UNFPA	UNFPA

Mauritius	1		500	500			1,000	IPPF	IPPF
Mozambique	15				4,000		4,000	IPPF	IPPF
Namibia	1			7,500	14,000	181,000	202,500	UNFPA	UNAIDS/ UNFPA
Niger	9			1,000		5,000	6,000	UNFPA	UNFPA
Nigeria	109				110,000	60,000	170,000	ARFH/UNFPA	UNAIDS/ USAID/ UNFPA
Rwanda	8				2,000	16,000	18,000	IPPF/PSI/ UNFPA	IPPF/PSI/ UNFPA
Sao Tome	0					1,000	1,000	IPPF	IPPF
Senegal	8				23,000	18,000	41,000	UNFPA	UNAIDS/ UNFPA
Seychelles	0					1,000	1,000	IPPF	IPPF
Sierra Leone	4					10,000	10,000	UNFPA	UNFPA
South Africa- Mpumalanga	4			900,000			900,000	Prov. MOH	Prov. MOH
South Africa- National	38	4,000	1,200,000	879,000		1,340,000	3,423,000	National MOH	EU
Swaziland	1				13,000		13,000	IPPF	IPPF
[U. Rep.] Tanzania	29					2,000	2,000	MOH	MOH
Togo	3				6,000	5,000	11,000	UNFPA	UNFPA
Uganda	17			600,000			600,000	MOH	World Bank
Zambia	8	219,000				6,000	225,000	MOH/IPPF	DFID/IPPF
Zimbabwe	9	197,000	256,000	195,000	129,000	117,000	894,000	MOH	MOH/ UNAIDS
SUB-TOTAL:		422,000	1,626,500	2,861,500	865,000	3,279,900	9,054,900		
APD [Asia and Pacific]									
Azerbaijan	7					700	700	UNFPA	UNFPA
Bangladesh	107		1,000		30,000		31,000	CARE	USAID
Bhutan	2			1,000			1,000	UNFPA	UNFPA
Cambodia	8			30,000	20,000		50,000	FHI	USAID/ UNAIDS
China	1,266				5,000		5,000	Nat. Research Inst FP	UNAIDS/ Ford
India	1,000		500			90,000	90,500	PSI/UNFPA	FHC/UNFPA
Indonesia	193	15,000					15,000	OPCV	OPCV
Kiribati	0		1,000			1,000	2,000	WHO	WHO
[Rep. of] Korea	47				1,000	1,000	2,000	EZTrade	EZTrade
Micronesia	0	1,150					1,150	WHO	WHO
Mongolia	2		2,000	7,500			9,500	UNFPA/MSI	UNFPA/ UNAIDS
Myanmar	45				1,000		1,000	UNFPA	UNFPA
New Caledonia				1,000	500		1,500	AS Sida	AS Sida
Papua New Guinea	4	30,000					30,000	UNDP	UNDP

Solomon Island	0				1,000		1,000	IPPF	IPPF
Sri Lanka	17		2,000				2,000	UNFPA	UNFPA
Tajikistan	6			3,000	1,000	1,000	5,000	UNFPA	UNFPA
Turkmenistan	4					5,000	5,000	UNFPA	UNFPA
Vanuatu	0			3,000			3,000	WHO	WHO
Viet Nam	74			30,000			30,000	WHO	UNAIDS
SUB-TOTAL:		46,150	6,500	75,500	59,500	98,700	286,350	0	0
ARAB STATES [AND EUROPE]									
Bulgaria	8			500			500	IPPF	IPPF
Georgia	6		4,000				4,000	UNFPA	UNFPA
Sudan	27				1,000		1,000	IPPF	IPPF
Syria [Syrian Arab Republic]	14		1,000				1,000	UNDP	UNDP
Ukraine	51				1,000		1,000	IPPF	IPPF
Yemen	14		3,000	2,000		500	5,500	MSI/UNFPA	MSI/UNFPA
SUB-TOTAL:		0	8,000	2,500	2,000	500	13,000		
DASE									
Kosovo						5,000	5,000	UNFPA	UNFPA
SUB-TOTAL:		0	0	0	0	5,000	5,000		
LATIN AMERICA									
Antigua	0	3,000					3,000	MOH	MOH
Bermuda					3,000		3,000	MOH	MOH
Bolivia	7						0	UNFPA	UNFPA
Brazil	161		100,000	1,000	2,000,000	2,000,000	4,101,000	MOH	World Bank
Chile	14				1,000	1,000	2,000	IPPF	IPPF
Costa Rica	3	15,000					15,000	FUNDESIDA	FUNDESIDA
Cuba	11			10,000			10,000	IDA	IDA
Haiti	6			45,000			45,000	PSI/UNFPA	UNAIDS
Jamaica	3				300	2,500	2,800	UNFPA/IPPF	UNFPA/IPPF
Mexico	93				4,500	4,100	8,600	IPPF	IPPF
Paraguay	5		6,000	4,000		1,000	11,000	UNDP	UNDP
Turks & Caicos	0					5,000	5,000	MOH	MOH
Uruguay	3		5,000				5,000	UNDP	UNDP
Venezuela	21				50,000		50,000	MOH	MOH
SUB-TOTAL:		18,000	111,000	60,000	2,058,800	2,013,600	4,261,400		
UNFPA Bulk Purchase						108,000	108,000	UNFPA	UNFPA
Various (incl USAID OR)		3,000	13,650	79,450	97,350	3,000	196,450	Various	Various

Sub-total public sector		489,150	1,765,650	3,078,950	3,082,650	5,508,700	13,925,100		
		10	19	28	36	47	83		
AFRICA									
Ethiopia	52			46,000			46,000	DKT	UNAIDS
Ghana	19	18,000		75,000	10,000		103,000	GSMF	DFID/UNFPA
Mozambique	15			8,640			8,640	PSI	PSI
Namibia	1					70,920	70,920	MSI	KfW
South Africa-National	38		300,000	300,000			600,000	PSI	EU
[U. Rep.] Tanzania	27		75,500	49,000	102,000	50,000	276,500	PSI	USAID
Togo	3			17,280		76,590	93,870	PSI	PSI
Uganda	17	5,000	605,000				610,000	MSI	World Bank
Zambia	8		281,000				281,000	PSI	DFID/USAID
Zimbabwe	9	354,000	46,000	103,000	244,000	250,000	997,000	PSI	DFID/USAID
SUB-TOTAL:		377,000	1,307,500	598,920	356,000	447,510	3,086,930	0	
LATIN AMERICA									
Bolivia	7		92,000			50,000	142,000	PSI	USAID
Brazil	161		510,400	200,840	602,600	816,400	2,130,240	DKT	DKT
Guatemala	10			17,280			17,280	PSI	PSI
Haiti	6		44,000	18,000		24,000	86,000	PSI/UNFPA	USAID/Dutch
Mexico	93				2,000	22,000	24,000	COESIDA	COESIDA
Paraguay	5					8,640	8,640	PSI	PSI
Venezuela	21		10,000	5,680		2,000	17,680	ProSalud	ProSalud
SUB-TOTAL:		0	656,400	241,800	604,600	923,040	2,425,840		
Total social marketing		377,000	1,963,900	840,720	960,600	1,370,550	5,512,770		
		3	9	11	5	10	17		
GRAND TOTAL:		866,150	3,729,550	3,919,670	4,043,250	6,879,250	19,437,870		
Total Countries		12	27	38	40	55	98		

Logistics Support

Table 7 indicates the types and value of assistance for countries under the rubric of logistics support for the year 2000. The total volume of reported logistics support in 2000 was about 7 per cent of reported contraceptive support for the same period.

Table 7: Logistics Support Reported for 2000, by Country/Territory (in \$US)

Africa Division

Country	Donor	Technical Support	Infrastructure Strengthening	Training	Value of Logistics Support	Value of Contraceptive Support
Benin	USAID		- Designed integrated logistics systems for Borgou Department.	-Trained Director of the Family Planning Department of the DSF at FPLM's Arlington Logistics Training course; - Conducted Logistics Trainers Refresher Training workshops, training in the Integrated Logistics System, and contraceptives logistics workshops.	215,000	803,111
Burkina Faso	USAID	-Supported monitoring of the information management system for logistics of contraceptives. -Supported social marketing of oral pills.		Supported training of service providers in contraceptive technology	N/a	1,110,018
Burundi	UNFPA	-Provided supervision and supply of contraceptives at intermediary level.		-Trained 26 staff members at the intermediary level on management of contraceptive supplies.	1,805	263,975
Ethiopia	UNFPA	-Provided Logistics Adviser to assess and project quantity requirements of contraceptives, planning and procurement.			5,000	10,796,891
Ghana	USAID	- Completed manual in Standard Operating Procedures	.	- Conducted a Validation Workshop.	182,000	5,133,192
Guinea-Bissau	UNFPA	-Evaluated contraceptive logistics system		Trained programme managers in reproductive health.	8,000	44,592
Kenya	USAID	-Facilitated cross-national dissemination of successful logistics management techniques in Eritrea and Mozambique; -Completed write-ups of logistics better practices, assisting other logisticians in the region.		- Conducted a workshop on Decentralization, attended by 71 participants representing a wide range of stakeholders; - Provided logistical and facilitation support for the "Improving Quality of Care: State of the Art 2000" Conference in Uganda in February 2000.	876,000	1,223,542
Malawi	USAID	- Revised the CDLMIS Procedures manual to reflect the system changes recommended by the	-Assisted the Min. of Health and Population with		356,000	419,004

		Design Workshop; - Developed an implementation strategy for roll-out of the revised system; - Developed training materials.	installation, training, and set-up of Supply Chain Manager software (formerly known as Logistics 2000).			
Mali	USAID	-Provided advice on procedures for testing Depo-Provera in response to USAID/Bamako queries; -Reviewed the stock situation in country and the 2000 and 2001 Contraceptive Procurement Tables with all interested parties.		- Trained 15 MOH and NGO representatives in forecasting and CPT preparation using PipeLine software; - Conducted training of trainers for 17 central- and regional-level MOH staff to establish a core of resource persons for decentralized training for the recently integrated contraceptive and essential drug distribution network.	25,000	7,571
Mozambique	USAID	-Assisted the MOH in exploring how to help the EPI programme; -Helped ensure coordination of a possible approach with other MOH systems; -Finalized contraceptive requirements.		- Finalized the logistics training materials; - Conducted the training of service providers in FP Logistics in Beira; - Presented the LMIS to the MOH staff at the Pharmaceutical Department; - Finalized the training programme for LMIS.	199,000	1,013,257
Senegal	USAID			-Trained District storekeepers and Stock Managers in contraceptives logistics; -Prepared and began implementation of the Integration and Cost Recovery Pilot Project plan; -Drafted a logistics management on-the-job training tool with MOH and trained regional staff in its use; -Organized preliminary workshop with ENDSS (School of Health) for adding a module on logistics into the school curriculum; -Conducted forecasting and needs quantification for contraceptive commodities; monitored the pipeline.	441,000	934,162
South Africa	USAID	-Presented a paper on "Private Sector IT Technologies in a Public Sector Setting: Distribution Resource Planning in Kenya"			28,000	420,760
Sudan	UNFPA	-Provided technical support for the medical officer by monitoring the stock situation and responding to demands of various states; -Installed Pipeline Monitoring and Procurement Planning Computer programme to improve the efficiency of FP logistics management; -Developed specific reporting formats for the state reproductive health coordinators.	-Supported the renovation of the permanent storage facility with a complete temperature control system	-Trained 30 pharmacists and assistants in FP technology including delivery, storage and distribution; -Strengthened reproductive health component by adding topics relevant to family planning logistics management to the basic curricula of health care provider training; -Organized 4 master trainer courses on reproductive health and included FP logistics management.	60,000	385,525

Uganda	UNFPA		-Contracted a firm to install communication equipment in 8 districts previously procured for emergency obstetrics referral system (\$139,680); -Procured clinical equipment for the Reproductive Health project in MOH (\$31,347); -Procured office equipment and furniture for the Programme for the Enhancement of Reproductive Health (PEARL); -Procured 92 bicycles for reproductive health advocacy programme in the Ministry of Agriculture, Animal Industry, and Fisheries (\$5,005.37).	- Conducted training for 1,044 health staff members in Health Management Information Systems (HMIS) (\$26,222).		4,990,572
	Bill and Melinda Gates Foundation		-Procured office furniture and equipment for the African Youth Alliance (AYA).			
United Rep. of Tanzania	USAID	-Finalized preliminary Assessment Survey Report.	- Printed/distributed Warehouse Storage Guides for District and Hospital Level.	- Supported translation of Contraceptive Manual into Kiswahili and the printing and distribution of 6,000 copies.	328,000	937,889
Zambia	USAID	-Conducted curriculum review, practice sessions with DILSAT team; adapted curriculum as needed.		- Designed practical job aids for inventory control/MIS for two districts. - Discussed data needed for quantification with central stores.	113,000	2,152,313
	DFID	-Supported short-term visits by technical advisers for logistics management in national and DFID-funded projects. -Paid salary for a local staff under Central Board of Health –pharmaceutical logistics support.	- Rehabilitated health facilities. -Procured health facility equipment.	-Trained project staff and community based distributors		
	Total					2,152,313
Zimbabwe	USAID	-Prepared CPTs, budgets and ordering cable. -Tabulated requirements for public-sector contraceptives; identified gaps in supply. -Assessed logistics system and recommended priority activities for logistics TA.			6,000	2,351,436
Total of Africa					2,843,805	32,987,810

Division for Arab States and Europe

Country	Donor	Technical Support	Infrastructure	Training	Value of Logistics Support	Value of Contraceptive Support
Armenia	USAID	-Analysed contraceptive distribution systems to assess logistics system performance and recommend improvements.			20,000	N/a
Iran, Islamic Republic of	UNFPA	- Provided CST Specialist from Nepal to assess the contraceptive logistic system, storage system and the MoHMS's distribution system. The CST Specialist also estimated contraceptive requirements by method cost for the years 2001-2005.			5,000	N/a
Kazakhstan	UNFPA	Supported CST Adviser to provide TA related to LMIS, the national stock of contraceptives, forecasting.			5,000	
Kyrgyzstan	UNFPA	-Provided CST Specialist to review newly developed LMIS and to recommend improvements (\$2,222); -Developed, printed, dis-seminated journals for contraceptive registration, distribution and manual data collection (\$5,000); -Developed and installed computer programme on LMIS on basis of manual data collection form at country and provincial levels (\$3,000). -Organized working group on the development of the manual data collection forms and journal for contraceptive distribution and registration (\$1,100). -Supported activities of provincial Family Planning Centres responsible for contraceptive distribution.	-Procured vehicles for the Family Planning Centres of seven provinces (\$26,837). -Procured computer equipment to support the logistics management system at central and provincial levels (\$22,224). -Renovated rooms for storage in the Central warehouse (\$1,496).	-Conducted seminar on the LMIS programme on the basis of Cocoplan estimation through the use of a CST adviser -Trained logistics managers and health service providers to use the LMIS programme.	61,879	N/a
Romania	UNFPA	-Provided technical assistance for the adaptation and implementation of the Clinical Management Information System (CMIS) (\$6,900); -Provided technical assistance to the Ministry of Health for contraceptive procurement, analysis of demographic indicators, and management of reproductive health programmes (\$7,200)	-Procured data processing equipment for CMIS pilot districts (\$5,100). -Printed client data collection and technical publications on eligibility for contraceptive use (25,000).	-Trained trainers in the use of CMIS in clinical management of FP services for doctors and nurses (\$53,200).	97,400	52,718
Syrian Arab Republic	UNFPA	- Provided a CST Regional Adviser in demographic analysis and an International Consultant to conduct a needs assessment for Contraceptive Supplies and Logistics Management.		- Provided training courses for Primary Health Care Professionals in Contraceptive Logistics.		393,995

Yemen	WHO/UNFPA	<ul style="list-style-type: none"> -Revised procedure manual for RH/FP Logistics Management. -Revised job description for personnel in RH/FP logistics system. -Revised LMIS forms and records. -Designed guideline for monitoring and supervising family planning logistics activities at warehouses and health facilities. - Developed plan of action to address weak-nesses in the logistics cycle of contraceptives and reproductive health pharmaceutical products identified in a situational analysis. 		<p>Provided workshops led by a WHO consultant to improve skills and job behaviour among RH/FP logistics supervisors and storekeepers.</p> <p>-Designed and implemented a logistics management workshop for 43 participants at central and governorate levels, and NGOs</p> <p>-Designed 10 two-day training workshops for health facilities' staff (20 participants). Logistics officers implemented the workshops.</p>	20,000	
	Total					230,327
Total of Arab States and Europe					209,279	677,040

Asia and Pacific Division

Country	Donor	Technical Support	Infrastructure	Training	Value of Logistics Support	Value of Contraceptive Support
Bangladesh	USAID	<ul style="list-style-type: none"> - Conducted the LMT Needs Assessment for DHS Thana storekeepers and NGO Logistics personnel; - Provided TA to generate monthly LMIS and pipeline reports by UMIS Unit and DFP respectively; - Provided TA to MOHFW to establish Procurement Monitoring and Coordination Cell; - Provided TA to implement and trouble-shoot Customized Automated Inventory Control System (ICS) at warehouses/stores; - Worked with DFP in implementing recommendations of Stock Level Survey Report for 1999; - Coordinated with DFP in reviewing stock position of FP-MCH commodities to determine quantity, delivery schedule; - Completed draft on Guidelines for NGOs for Receiving Contraceptive Supplies and shared it with SDP, UFHP, USAID and DFP. 		<ul style="list-style-type: none"> - Conducted Logistics Workshop for selected DFP Logistics personnel. 	1,670,000	48,348,478
Cambodia	UNFPA	<ul style="list-style-type: none"> -Provided reproductive health consultant to monitor donor activity and develop procurement and logistics plan for MOH. Consultant worked to avert shortfalls (\$31,625). 	<ul style="list-style-type: none"> -Provided wall charts to facilitate health facilities throughout the country to accurately determine the need for supplies and consumption rate of contraceptives (\$7,075) - Supplied warehouse equipment for the MOH (\$41,948) 		80,648	
	RACHA (with USAID funding)	<ul style="list-style-type: none"> -Worked closely with EDB/MOH to develop the LMIS; -Provided a TA to revise and manage the national LMIS database; -Developed and distributed manual for HCs and hospitals. 	<ul style="list-style-type: none"> -Initiated and conducted inter-facility transfer of drugs/commodities in three RACHA- supported provinces. 	<ul style="list-style-type: none"> -Trained 1,570 workers on LMIS, including director and storekeeper of each functioning HC; -Conducted training sessions on facilitative supervision for 23 workers; -Developed a check-list and supervisory team to initiate facilitative supervision. 		

	PSI (With USAID funding)			-Provided (in collaboration with the MOH and NCMCH) training on the correct usage of OCP's to pharmacists and "drug sellers"; -Provided training to medical students, nurses, midwives and teachers on correct usage of condoms and OCP's (\$16,000)	16,000	
	Total					399,029
China	IPPF	-Conducted needs assessment at 32 hospitals (national, district and county levels) of medical equipment, essential drugs and training of service providers. Procurement list was developed (\$9,400); -Revised "Standard Clinical Management Protocols of Specific Issues" (\$62,000).			71,400	N/a
	UNFPA	-Provided short- tem consultant for MIS to examine logistics management system for RH/FP; -Provided short- term consultant on the Standard Service Delivery Protocol and advised on logistics management .		-Conducted training on logistics of contraceptives for six selected service providers; -Conducted training for six RH managers on needs assessments of contraceptives, essential drugs and medical equipment in rural areas, financial management and project management.	37,000	
Dem. Rep. of Korea	IPPF	-Produced a procurement list suitable to the country's situation. - Jointly, with Ministry of Public Health and IPPF, revised the Standard Clinical Management Protocols of Specific Issues.				
	IPPF			-Trained six service providers in logistics of contraceptives. -Trained six RH managers in needs assessments of contraceptives, essential drugs and medical equipment.		
	Total					59,689

India	USAID	- Helped identify the potential for replicating the LMIS in additional states; - Discussed logistics benchmarks with PHN staff and recommended modifications; - Discussed operational strategy for improving contraceptive logistics systems in four districts.			39,000	3,405,427
	UNFPA	-Provided technical input for developing training materials for packing, storage and transportation at various levels of service delivery system; -Provided advisory services to central and state governments; -Provided CST adviser and a UNFPA India National Professional to assist the Government of the State of Karnataka in a feasibility study and to strengthen all aspects of logistics, infrastructure, and training.			10,000	
Indonesia	USAID	- Completed detailed LMIS assessment for BKKBN and DEPKES; - Completed analysis of contraceptive availability.			171,000	6,306,830
Lao PDR	UNFPA	Assisted RHC logistics support survey.			15,000	
	ADB	Assisted logistics management in Khuang and Oudomxay target provinces.			1,850	
	AusAID	Assisted logistics management in Huaphan and Phongsali target provinces.			1,034	
	Total					2,366,060
Nepal	USAID	-Assisted a FPLM Core funded evaluation of the MOH logistics system -LMIS converted to Windows-based, Users' Manual and technical Manual completed. -Assisted a KfW consultant to prepare a proposal for construction of storerooms in 3 Districts. -Nepal integrated health logistics system presented at 2000 Global Health Council Meeting. -Organized and facilitated Contraceptive Consensus Forecasting Meeting. -Facilitated and participated in a World Bank funded study tour to observe the family planning and health logistics system in Bangladesh.		- Finalized the logistics management curriculum. -Conducted a four-day training for JSI RLAs and a one-day training for JSI-Kathmandu based logistics staff in job transfer skills. -Prepared an Integrated Health Logistics Procedures Manual for use with logistics training, and distributed to all health facilities.	265,000	

	UNFPA	<ul style="list-style-type: none"> - Conducted Annual Distribution Programme for ensuring availability of contraceptives at service delivery points year round; - Monitored visits to all districts to assess commodity stock to prevent shortfalls through UNFPA Regional Field Officers (RFOs); - Provided TA to the FHD/MOH for the annual Commodities Consensus Forecast Approach, the main tool for planning and advocating for contraceptive requirements of Nepal - Provided summary of stock status to the Regional Health Director and District Health Offices. 	<ul style="list-style-type: none"> - Supported the provision of space for safe storage of contraceptives; - Cleaned all of the district stores; - Constructed a building to facilitate safe storage space for contraceptives; - Assisted in the transportation of contraceptives to regional stores to selected districts of each region through the RFO. 	<ul style="list-style-type: none"> - Advised regional stores on cleaning and proper storage of contraceptives; - Trained storekeepers to integrate inventory control procedures. 	25,026	
	Total					4,291,228
Philippines	USAID		<ul style="list-style-type: none"> - Procured computers and other equipment requested by the DOH-PLS. - Upgraded the server for the LMIS. - Facilitated the refurbishment of the DOH central warehouse. 	<ul style="list-style-type: none"> - Developed a curriculum for logistics training. 	642,000	10,627,070
	USAID (through Inte-grated Family Planning and Maternal Health Programme Grant)	<ul style="list-style-type: none"> - Institutionalized the Contraceptive Distribution and Logistics Management Information System (CDLMIS), assisted by JSI; - Prepared the DOH and LGU staff to monitor CDLMIS implementation. 	<ul style="list-style-type: none"> - Upgraded the DOH POP warehouse located in the DOH by installing steel racks and ventilation, reinforcing warehouse flooring and procuring a new forklift. 	<ul style="list-style-type: none"> - Prepared DOH and LGU staff to conduct the CDLMIS related training; - Prepared selected DOH staff to assume full responsibility for operating system. 	173,868	
	World Bank (through Wo-men's Health & Safe Motherhood Initiative Project, Logistics Component)	<ul style="list-style-type: none"> - Implemented Contract Distribution System (CDS) in the Phase I regions (assisted by JSI); - Designed a distribution system for core essential drugs. 		<ul style="list-style-type: none"> - Developed CDS procurement manual and CDS training curricula; - Conducted orientation and training for concerned DOH officials and LGU staff; - Conducted training of trainers on CDS for Central office, regional and LGU staff in Phase I regions. 	362,338	

Vanuatu	UNFPA	-Recruited a UNV Specialist who designed a computerized RH Logistics Management System to monitor operational subsystems.				20,651
Viet Nam	UNFPA	Supported two studies: Developing financing policy proposals for increasing condom use; and (2) Identifying condom requirements, supply and distribution system.		Trained health workers on logistics management in selected provinces.	29,861	1,198,851
Total of Asia and Pacific					3,611,025	77,023,313

Latin America and the Caribbean Division

Country	Donor	Technical Support	Infrastructure	Training	Value of Logistics Support	Value of Com-modity Support
Bolivia	USAID	- Provided TA and participated in one- day event sponsored by USAID/Bolivia for presentation of MOH proposal for logistics management of health commodities for the Essential Services Package (Seguro Basico de Salud, SBS) under current Health Sector Reform.		- Conducted Logistics Supervision workshop and field practicum for Bolivian NGOs. - Developed logistics training guides for University and Technical Nursing School Instructors.	255,000	259,473
Dominican Republic	USAID	- Assessed training needs for Social Security Institute (IDSS).		- Conducted two logistics management courses for 38 Ministry of Health (SESPAS) personnel from the DPS. - Conducted two logistics management workshops for the Social Security Institutes.	144,000	258,568
Ecuador	USAID	- Assisted APROFE, CEMOPLF and MOH with strategies for cost recovery; - Assisted both NGOs in planning demand for 2001; - Assisted the contraceptive committee (APROFE, MOH, COF, CEMOPLAF) in managing and negotiating with contraceptive manufacturers.		- Conducted workshop with CEMOPLAF and APROFE to implement and work the PipeLine software programme and discuss its use in PipeLine monitoring.	19,000	
El Salvador	USAID	- Assessed current (2000) and future (2001-2003) contraceptive needs for MOH; - Assessed current and future status of contraceptive procurement for MOH, using national budget; - Assessed quality and reliability of data and information system flow; - Prepared projections of current and future contraceptive needs for MOH, based on physical inventory data.		- Conducted a PipeLine skills transfer workshop and CPT OJT using PipeLine with ADS, the IPPF affiliate.	21,000	752,154
Guatemala	USAID	Assisted in: -Stock out survey in MOH, Guatemalan Social Security Institute (IGSS) and IPPF- affiliated facilities; -CPTs for MOH, IGSS, Pop. Council, PCI, Social Marketing Project (IPROFASA) and IPPF-affiliate (APROFAM); -CSEP and customer satisfaction evaluation; -Support to Mission on drugstore's leakage research; -Workplan development in conjunction w/counterparts; -Presentation of three different scenarios for DELIVER TA; -Modification of LMIS in MOH; -Max-Min levels established in MOH; -Pipeline installed and OJT at MOH; -Logistics Assessment presentation at IGSS, and workplan approval; -Logistics training to PCI personnel, LMIS and Max-Min. established. -MOH National Training Strategy presentation:		-Conducted Design Workshop for Guatemalan MOH key personnel; -Trained trainers for MOH Monitoring Unit; -Conducted logistics workshop for IGSS; -Trained trainers for IGSS personnel; IGSS roll-out training monitoring.	286,000	1,338,530

		-Three different scenarios to follow in country leakage				
Haiti	USAID	- Provided two FPLM advisers who traveled to Haiti to review CPTs for 2000 and revise, with the MOH and the Mission, the April 1999 work plan; -Participated in a stock status survey of 66 institutions.		- Conducted training in PipeLine software and forecasting for 12 persons from MOH, USAID, PROMESS, HS2004, AOPS, Pathfinder and INHSAC. - Field tested the Contraceptives Logistics Procedures Manual; - Thoroughly revised the Logistics Procedures Manual and training material.	133,000	1,030,295
Honduras	USAID	- Completed a background analysis and prepared a draft five-year (2001-2006) results package/amendment to the Private Sector Population Project III based on the 1998 mid-project evaluation findings and follow-on analysis.			18,000	1,168,246
Nicaragua	USAID	- Completed Composite Indicators for Ministry of Health (MINSa) and PROFAMILIA; - Monitored use of PipeLine by MOH and PROFAMILIA, assessed months of supply on hand and completed CPTs; - Conducted six-month assessment of training impact/implement-ation of the MOH Logistics System through field visits to selected MOH facilities.		- Conducted PipeLine on-the-job training for central staff at MINSa and the local IPPF affiliate, PROFAMILIA; - Conducted logistics workshop for supervisors and admin. assistants from all regions as well as central-level training and supervision of PROFAMILIA staff; - Conducted logistics workshops for MINSa personnel: central level, SILAIS and selected municipalities.	177,000	466,577
Paraguay	USAID	- Logistics assistance			8,000	416,607
Peru	USAID	- Completed MOH integration and cost analysis.		- Conducted logistics supervision training for MOH staff.		
Latin America Division Total					1,061,000	5,690,450
Grand Total					7,725,109	116,378,613