

Donor Support for Contraceptives and Condoms for STI/HIV Prevention

2002

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List of abbreviations and acronyms

AIDS Acquired immunodeficiency syndrome

BMZ/KfW Bundesministerium für wirtschaftliche Zusammenarbeit und

Entwicklung/Kreditanstalt für Weideraufbau

CIDA Canadian International Development Agency
CMU Commodity Management Unit (UNFPA)

CPR Contraceptive prevalence rate

DFID Department for International Development

DKT DKT International EU European Union

GFATM Global Fund to Fight AIDS, Tuberculosis and Malaria

HIV Human immunodeficiency virus

ICPD International Conference on Population and Development

IPPF International Planned Parenthood Federation

IUD Intra-uterine deviceMOH Ministry of Health

MSI Marie Stopes International NGO Non-governmental organization PSI Population Services International

RH Reproductive health

RTI Reproductive tract infection

SIDA Swedish International Development Cooperation Agency

STI Sexually transmitted infection

UNAIDS Joint United Nations Programme on HIV/AIDS

UNFPA United Nations Population Fund

USAID United States Agency for International Development

VFT Vaginal foaming tablet WHO World Health Organization

SUMMARY

Since 1990, the United Nations Population Fund (UNFPA) has been monitoring trends and gaps between estimated needs and actual donor support to monitor commodity shortfalls and trends in donor funding.

This report, the latest in a series, highlights trends for the period 1990-2002, and provides information on, for example, donor support by region and product, the top ten countries supported by donors and the quantity of male and female condoms supplied.

- Estimated requirements for contraceptives and condoms for 2002 were \$ 657 million.
- In 2002, donor support for contraceptives amounted to US\$ 197.5 million a 12 per cent decline from the figure of \$ 224.2 million in 2001.
- Total support for condoms appears to have declined slightly in 2002 compared to 2001. Support for other methods – except implants – also declined.
- In 2002, the Africa region received the largest share of donor support, or 45 per cent, compared with Asia and the Pacific with 34 per cent, Latin America with 14 per cent, and Arab States and Europe with 7 per cent.
- Since the mid-1960s, the contraceptive prevalence rate in developing countries has increased from approximately 10 per cent to almost 60 per cent, with a projected increase in users for the period 2000-2025 of 40 per cent.
- Increased demand for STI/HIV diagnosis, treatment and prevention is also contributing to rising requirements for reproductive health commodities including condoms.
- Between 1990 and 2002, 17 donors and agencies provided support for reproductive health (RH) commodities in the amount of US\$ 1.8 million.
- Compared to 2001, when donors met 25 per cent of estimated needs for all contraceptives including condoms for STI/HIV, they only met 20 per cent in 2002.

INTRODUCTION

This report is intended for use in planning contraceptive supply, and for advocacy and resource mobilization. It contains country-specific information provided by donors on the type, quantity and total cost of contraceptives they supplied to reproductive health programmes in developing countries during 2002. The United Nations Population Fund (UNFPA) collected information for this report in 2003; as in earlier years, the UNFPA database is especially useful to illustrate commodity shortfalls and changes in funding by donor and country.

The report highlights trends since 1990 and the gap between estimated needs and actual donor support, comparing UNFPA estimates of condom requirements for STI/HIV prevention, and contraceptive requirements for family planning programmes⁴, with actual donor support. It also indicates donor support by region and product, the top ten countries supported by donors and the quantity of male and female condoms supplied.

UNFPA tried to collect information on donor support for antibiotics for prevention of STIs/RTIs. In many cases, however, either donors did not record this information or the countries receiving support did not disaggregate information by commodity. UNFPA's Commodity Management Unit will continue to discuss how to collect this information.

As in the past, information from some donors was missing or incomplete. Some tables and figures in the 2002 Report may differ from those of earlier years because of subsequent information from donors. Support from the Canadian International Development Agency (CIDA) in the amount of \$262,000 and a portion of World Bank support of \$1.5 million was estimated on the basis of funding received by UNFPA to procure and supply contraceptives. These amounts were subtracted from the UNFPA total of \$43 million.⁵

To avoid double counting for three social marketing organizations, Marie Stopes International (MSI), DKT International (DKT) and Population Services International (PSI), the report does not include amounts provided to MSI, DKT and PSI that donors report elsewhere.

In 2002, the Swedish International Development Cooperation Agency (SIDA), the CIDA, the European Union (EU), the Government of the Netherlands, Pathfinder, 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 total support. Pathfinder, UNAIDS and WHO did not procure contraceptives in 2002. UNFPA will continue to update subsequent annual reports with any information from these donors.

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¹UNFPA, Global Estimates of Contraceptive Commodities and Condoms for STI/HIV Prevention 2000-2015 (New York, UNFPA), 2002.

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

The World Bank provided information for 2002 that was not available in previous years. Developing countries used \$21 million in World Bank loans and grants for contraceptive procurement in 2002.

The governments of the Canada, Netherlands, and the United Kingdom announced substantial increases in support for commodities to UNFPA in 2000, but procurement and delivery were continued until 2002. UNFPA's total of \$41 million³ includes some continued execution in 2002.

A number of countries used financial support from the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) to buy condoms. This support is not included in the database unless UNFPA or any of the agencies in the database, as listed in Table 1, have procured these condoms.

³ The amount of \$41 million excludes support from the World Bank and CIDA through UNFPA.

LEVELS OF DONOR SUPPORT

Recorded donor support for contraceptives and condoms for STI/HIV prevention to developing countries in 2002 was \$198 million, a decline of 12 per cent from 2001 (Table 1). In 1996 donor support met 44 per cent of global contraceptive needs for family planning; support in 2002 met only 30 per cent.⁶

Table 1: Estimated Contraceptive Commodity Support by Donor/Agency, 1990-2002, in US \$000

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	TOTALS	
															Total
BMZ/KfW			10,798	18,312	11,350	9,317	38,071	13,305	8,627	7,976	35,482	16,387	20,115	169,625	9.6
CIDA					1,385	4,514	7,249	0	1,036	2,885	4,808	208	262	22,347	1.3
DFID			4,125	4,712	7,192	10,924	9,205	13,149	7,807	13,188	7,317	6,130	16,403	100,152	5.7
DKT						177	0		3,759	5,148	4,868	7,849	9,643	31,444	1.8
EU				180	5,845	1,820	9,215	7,435	644	13,109	48	309		38,605	2.2
IPPF	5,843	5,410	6,184	6,165	6,258	6,746	6,003	11,148	3,416	3,016	3,814	3,667	4,226	71,896	4.1
JAPAN					28	315	300	838	36	159	1,657	340	184	3,857	0.2
MSI			409	1,173	405	0	0	1,439	61			3718	3,835	11,040	0.6
NETHER LANDS						102			2,700	2,584				5,386	0.3
PATH FINDER			1400	1,692	462	892	0							3,746	0.2
PSI			418			7,419	7,239	6,633	200	264	456	22,359	30,943	75,931	4.3
SIDA			1,297		6	1,400	750	0		514				3,967	0.2
UNAIDS										218				218	0.0
UNFPA [1]	14,753	21,499	18,534	27,817	34,087	37,858	37,611	39,861	32,201	14,396	16,721	89,205	41,209	425,752	24.2
USAID	57,636	59,892	39,575	55,142	47,848	51,059	46,481	39,383	63,087	45,522	58,093	67,908	49,628	681,254	38.7
WHO	957	975	628	483	968	1,663	2,099	2,673	481	1,078				12,005	0.7
WORLD BANK						5,000	7,930	1,662	19,138	20,718	20,781	6,130	21,060	102,419	5.8
TOTALS	79,189	87,776	83,368	115,676	115,834	139,206	172,153	137,526	143,193	130,775	154,045	224,210	197,509	1,759,645	100

^[1] UNFPA figures represent the procurement from the UNFPA Country Programme Budget. UNFPA also procured and supplied contraceptives on behalf of CIDA and the World Bank, and received extra-budgetary support from the Governments of Canada, the Netherlands, and the United Kingdom.

Notes

Blank space $\,=$ not procured or information is not available for that year.

 $^{^4}$ Estimated requirements for 2002 were \$657 million.

In 2002, some support to UNFPA spilled over from 2001, thanks to the generous contributions from the Governments of Canada, the Netherlands and the United Kingdom, in the amount of \$78.45 million in 2000 UNFPA's overall contraceptive procurement, including procurement on behalf of the World Bank and CIDA, was \$43 million in 2002.

Figure 1 illustrates the contributions of some major donors in 2002. Compared with 2001, UNFPA's share declined by 54 per cent and the United States Agency for Development (USAID) by 27 per cent. In 2002, UNFPA's share was 21 per cent. PSI's support increased substantially, rising to \$31 million in 2002, making it the third highest contributor for the year. This may be mainly because of procurement services provided by PSI to buy condoms for governments with support from the Global Fund to Fight AIDS, Tuberculosis and Malaria.

USAID continues to be an important donor with contributions of \$49.6 million, though its support declined by \$18 million in 2002 compared to 2001. USAID's share also fell, to 25 per cent of the total donor support figure of \$198 million compared with 30 per cent in 2001.

The contribution of \$20 million from BMZ/KfW, the fourth major donor in 2002, increased by 23 per cent compared with 2001. Its overall share increased to 10 per cent in 2002, compared to 7 per cent in 2001.

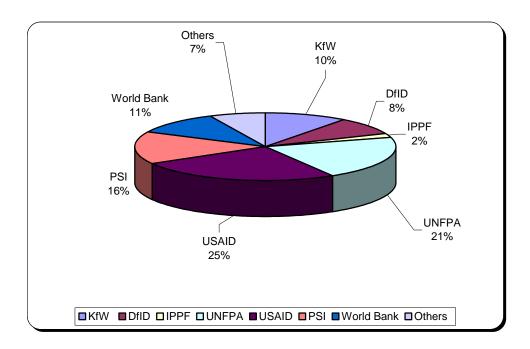


Figure 1: Support by Major Donors, 2002 (in percentages)

PATTERNS OF DONOR SUPPORT

Fluctuations in support

Figure 2 indicates a fluctuating pattern of support by the six main donors since 1990. BMZ/KfW continues to be third among the top six donors over the twelve-year period, behind USAID and UNFPA whose support declined in 2002. However, PSI, DFID and the World Bank increased their support substantially.

Any trend that shows increasing support is a welcome sign. However, it may be difficult for a recipient country to manage a large increase or decrease by a donor unless donor and recipient efforts are well coordinated. Donors as a group should have a strategy for coordination, which would allow recipients to absorb fluctuations in individual support without affecting overall sustainability.

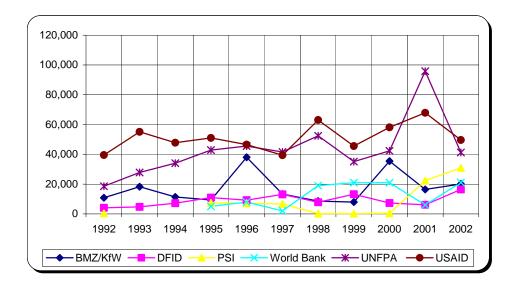
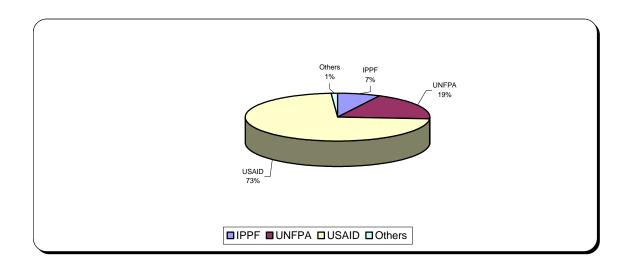


Figure 2: Patterns in contraceptive supply, 1990-2002, in \$US 000

Changing patterns of support

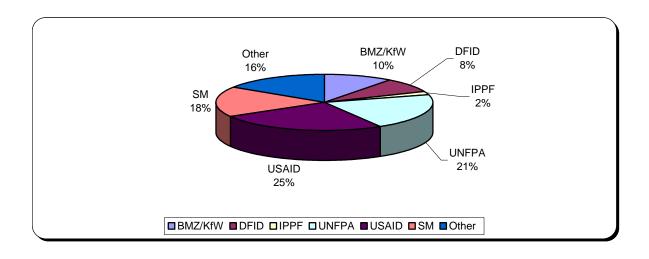
The pattern of donor support for contraceptives in the last decade has changed. In 1990, USAID was the major donor, followed by UNFPA and International Planned Parenthood Federation (IPPF) (Figure 3). At that time, USAID contributed 73 per cent of the total of \$80 million. By 2002, the addition of new donors had changed the pattern. The UNFPA share has increased overall to 21 per cent, though its share has fluctuated over the period.

Figure 3: Comparison of major donor support, 1990 and 2002 1990 Total: \$ US80 million



In 2002, with ten donors, USAID's share declined to 25 per cent. Social marketing organizations had a combined share of 18 per cent.

2002 Total: \$ US 198 million

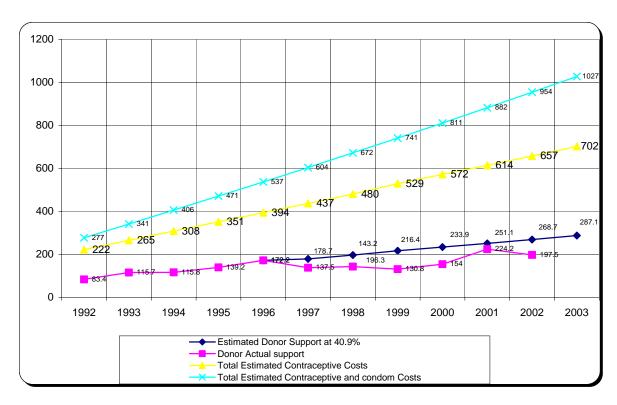


PROJECTED COSTS AND ESTIMATED REQUIREMENTS

Contraceptive prevalence in developing countries has grown dramatically in the past four decades. Since the mid-1960s, the contraceptive prevalence rate has increased from approximately 10 per cent to almost 60 per cent. The United Nations Population Division projections show that the reproductive-age population in developing countries will increase 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 both of population growth and an increase in the proportion of people using contraception. Increased demand for STI/HIV prevention is also contributing to rising requirements for contraceptives and condoms, and for increased donor support.

Figure 4 shows that donors provided 41 per cent of total contraceptive requirements from 1992 to 1996. However, after 1996, donor support began to decline. In 2002, donors met only 30 per cent of total estimated requirements. To maintain their support at 41 per cent, donors would have had to supply about \$269 million worth of contraceptives in 2002, some \$71 million more than the actual amount of \$198 million. Adding the \$297 million needed for condoms for STI/HIV prevention programmes, the potential shortfall in donor support rises to \$368 million.

Figure 4: Trend of reported donor support for contraceptives compared with estimated requirements, 1992-2003 (in millions of US dollars)



REGIONAL DISTRIBUTION OF DONOR SUPPORT FOR CONTRACEPTIVES AND CONDOMS FOR STI/HIV PREVENTION

In 2002, the Africa region received the largest share of donor support (Figure 5). Increased condom support to various African countries partly explains the increase.

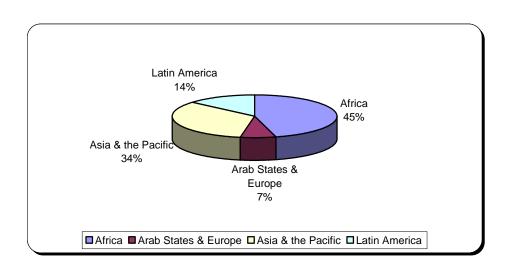


Figure 5: Donor Support, 2002, by region (in percentages)

COUNTRIES RECEIVING THE MOST COMMODITY SUPPORT

The "top ten" countries for donor support received \$92 million among them in 2002, some 49 per cent of the total. Of the ten countries, four are in the Africa region, with 43 per cent; four countries are in the Asia and the Pacific region, with 42 per cent; one country is in the Latin America and the Caribbean region, with 9 per cent, and one country is in Arab States and Europe region with 6 per cent.

Over the period 1992-2002, Bangladesh emerges as the top recipient of donor support, receiving a total of \$336.5 million. Pakistan, Philippines and Ethiopia are the second, third and fourth largest recipients with \$67.9 million, \$65.2 million and \$64.6 million respectively.

Table 2: Top ten countries receiving the most donor support, 1992-2002, \$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		2001		2002			
Country	Value	Country	Value	Country	Value		
Bangladesh	48.3	Bangladesh	37.4	Bangladesh	17.53		
Ethiopia	10.8	Ethiopia	20.8	Nigeria	16.72		
Philippines	10.6	Nigeria	13.3	Kenya	11.90		
Pakistan	6.6	Philippines	12.4	Philippines	11.70		
Indonesia	6.3	Pakistan	10.6	Ethiopia	9.20		
Ghana	5.1	Zimbabwe	8.7	Brazil	7.94		
Uganda	5	Egypt	7	Pakistan	7.21		
Nepal	4.3	Ghana	6.99	Ghana	5.91		
Peru	3.7	Peru	6.97	Egypt	5.51		
India	3.4	Uganda	4.9	Sri Lanka	5.27		
Total	104.1	Total	129.06	Total	98.89		

TOTAL EXPENDITURE BY METHOD

Total support for condoms and implants appear to have increased slightly in 2002 compared to 2001. Support for other methods declined. The largest decline was in injectables, possibly accounted for by production problems for Depo Provera's manufacturer.

Table 3: Expenditure by Method, 1992-2002, \$US million

Method	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	2002	Totals	Percent
Condom	21.3	39	37.8	60.6	68	50.9	51.4	37.9	46	91.2	94.9	599.0	48.1
Oral	33.7	48.2	43.8	46.9	63.9	30.2	34.4	44.4	71	58.1	47.0	521.6	23.8
Injectable	10.5	15.9	16.8	18	21.8	37.8	34.3	31.5	29.5	57.7	36.5	310.3	18.5
IUD	9.5	5.6	8.7	5.3	9.2	6.3	9.7	6.5	2.9	6.6	6.4	76.7	3.3
VFT	2.5	2.8	3.4	3.4	4.2	3	2.6	1.9	1.7	2.1	2.0	29.6	1.0
Implant	1.6	1.5	3.9	2.9	3.3	4	10.4	8.5	2.8	5.1	5.9	49.9	3.0
Foam/Jelly/ Others	1.5	0.2	0.2	2.1	0.1	5.3	0.4	0.1	0.2	0.4	0.1	10.7	0.1
Diaphragm	N/A	N/A	0.1	N/A	0.1	N/A	N/A	N/A	N/A	0.0	0.0	0.2	0.0
Emergency Contraceptive Pill	N/A	N/A	N/A	N/A	1.5	N/A	N/A	N/A	N/A	1.0	0.4	2.9	0.2
Female Condom	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2.0	4.2	6.2	2.1
Raw Materials	2.7	2.5	1.1	N/A	6.3	0.0							
Totals	83.3	115.7	115.8	139.2	172.1	137.5	143.2	130.8	154.1	224.2	197.5	1,613.4	100.0

Notes: N/A = Not ascertained.

CONCLUSION

Donor support is declining despite rising needs for contraceptive commodities worldwide. This underscores the need to monitor requirements and potential shortfalls, by collecting and analyzing country-specific supply data from all possible sources, including commercial suppliers, governments, and NGOs. Additional country-specific information on the dollar value of the different types of commodity supplied would also help in building a more complete global picture, and facilitate both flexible and effective programme design and management of the method mix.

ANNEX

Donor support for male condoms

Table 4 indicates donor support for male condoms during the years 1998-2002. 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. These figures, however, represent condoms supported by donors only. In most countries condoms are supplied by government, commercial, social marketing and NGO sectors.

Table 4: Donor supply of male condoms in countries and territories, 1998-2002

Country	1998	1999	2000	2001	2002
Arab States,					
Europe and Central					
Asia					
Albania	1,437,184	953,146	1,508,326	65,914,120	2,557,542
Algeria				2,592,000	5,760,000
Armenia	42,000				504,000
Azerbaijan	720,000			273,600	2,188,800
Belarus	18,000		18,000	3,000,000	
Bosnia-Herzegovina				583,500	1,195,200
Bulgaria	720,000	1,728,500			4,996,800
Cyprus					
Czech Republic					
Djibouti	154,080	129,600	86,400	408,960	115,200
Egypt	5,916,000	4,274,200	6,150,000	8,310,000	
Georgia	450,400			3,171,127	
Hungary	54,720				
Iraq	288,000	86,400		1,010,730	288,000
Jordan	4,116,000	1,206,000	942,000	2,220,000	1,104,000
Kazakhstan	5,760,000		936,000	907,225	15,879,033
Kosovo				10,747,403	1,872,570
Kyrgistan		2,664,000		4,651,200	1,656,000
Latvia					
Lebanon	273,600	172,800	90,000	102,000	
Macedonia					
Moldova					86,400
Morocco	2,795,760	3,816,000	1,896,000	748,800	3,645,600
Oman	64,800	216,000		195,552	
Occupied Palestine	1.4.400	2.12.500	50.000	1.55.000	210.201
Territories	14,400	343,680	60,000	166,800	218,304
Poland		504,000	0.1.170	0.0.000	
Romania	1,440,144	1,774,080	84,672	99,330	20,344,026
Russian Federation	374,400	1,794,000	93,200	296,069	7,524,685
Somalia			48,000	150,000	748,800
Sudan	150,192	374,400	314,920	3,519,200	648,000
Syrian Arab Republic	230,400	3,024,000	1,440,000	2,473,000	3,024,000
Tajikistan	1,013,064		3,000	432,000	1,296,000

Tunisia	349,920	8,000		237,600	1,166,400
Turkey	0.5,520	403,200	4,872,960	2,808,144	1,100,100
Turkmenistan	1,008,000	,	.,072,500	1,896,050	3,009,600
Ukraine	264,000	861,600	896,968	720,000	3,007,000
Uzbekistan	204,000	216,000	792,000	29,435,900	8,016,000
Yemen	460,800	578,000	28,800	2,767,719	712,000
Yugoslavia	400,800	378,000	28,800	2,707,719	712,000
Sub-Total:	28,115,864	25,127,606	20,261,246	153,297,029	88,556,960
Sub-Total.	20,113,004	23,127,000	20,201,240	133,297,029	00,330,700
Asia and the Pacific					
Afghanistan					962,400
Bangladesh	296,922,230	101,760,668	120,721,259	328,730,393	173,995,960
Bhutan	1,468,800	2,881,000	3,024,000		2,160,000
Cambodia	27,509,000	7,212,934	18,072,108	15,850,300	48,125,410
China	24,834,302	28,000,000	31,427,176		
Cook Islands	7,200	99,600		5,760	288
Democratic Peoples					
Republic of Korea	4,440,960				144,000
Fiji	197,568		30,000	2,408,880	2,452,896
Hong Kong					56,160
India	63,664,808	7,108,270	58,137,523	96,787,192	54,272,857
Indonesia	28,000,000	29,442,240	39,227,169	43,847,150	52,153,026
Iran				3,459,000	28,800,000
Kiribati	37,440	46,800	86,640	34,800	11,520
Lao People's					
Democratic Republic			1,530,912	5,134,933	9,861,510
Malaysia		10,600,000	10,797,696		
Maldives	316,800	439,200		201,600	
Marshall Islands	7,200	50,400			
Micronesia	100,800	33,120			
Mongolia	883,728	12,151,320	3,875,040	4,711,698	4,181,760
Myanmar	12,836,800	10,646,450	2,811,904	28,849,800	18,179,502
Nepal	33,188,496	35,187,120	17,236,080	17,500,000	54,854,094
New Zealand				144,000	
Pakistan	124,685,522	5,856,480	51,680,562	285,115,011	278,162,541
Papua New Guinea	120,000	94,800	12,000		12,096
Philippines	29,974,656	25,340,400	14,014,176	107,874,645	50,488,886
Republic of Korea	, ,	, ,	, ,	15,867,120	14,400,000
Samoa	7,200			10,007,120	11,100,000
Solomon Islands	381,600	216,000	73,000	57,620	43,776
Sri Lanka	12,341,814	6,537,600	4,644,000	5,627,000	12,834,000
Thailand	,,~	201,600	,- ,- ,	-242,700	,,- 30
Timor-Este		- ,		432,000	
Tokelau				,	
Tonga	72,000	90,000	82,320		11,088
Tuvalu	36,250	70,000	4,320	6,000	26,352
Vanuatu	223,200	501,600	1,520	129,600	1,491,840
Viet Nam	41,407,704	47,338,000	36,224,632	107,052,098	16,557,600
v ict i vaiii	T1, 1 07,704	T1,550,000	30,224,032	107,032,030	10,557,000

Western Samoa	123,840		30,000	576,000	29,952
Sub-Total:	703,789,918	331,835,602	413,742,517	1,070,159,900	824,269,514
Latin America and					
the Caribbean					
Anguilla	64,800				
Antigua and Barbuda	72,000				5,760
Argentina	129,600	100,800			4,039,200
Aruba	72,000	14,400	48,960	74,880	
Bahamas	21,600	309,600	5,760	339,696	
Barbados	36,000		16,992	40,320	28,800
Belize	360,000			8,600	331,200
Bolivia	9,011,567	189,600	1,842,000	7,856,444	11,688,177
British Virgin Islands	100,800				
Brazil		43,847,160	56,320,561	42,586,594	622,034,250
Curacao				11,520	
Chile	21,600	432,000	1,000	28,800	424,800
Colombia	360,010	187,200		504,000	496,800
Costa Rica				11,633	
Cuba	172,800	1,440,000	432,000	1,873,700	4,779,429
Dominica	2,498	93,600	66,240	80,640	80,640
Dominican Republic	3,792,000	265,152		1,695,792	626,400
Ecuador	3,811,200	6,516,000		4,584,000	3,546,000
El Salvador	3,396,000	2,436,000	1,524,000	5,670,920	2,856,000
Grenada	21,600	21,600		23,040	
Guatemala	12,822,000	4,602,300	7,074,000	10,257,145	18,561,267
Guyana	1,190,880	432,000			504,000
Haití	16,920,000	16,627,680	10,800,000	75,532,936	22,839,252
Honduras	3,834,000	7,284,000	4,794,000	17,880,179	4,879,238
Jamaica			29,100	4,536,000	11,520
México	4,376,000	37,000	6,440	1,036,800	37,274,112
Montserrat	36,000				
Nicaragua	9,406,800	3,492,000	2,070,000	5,217,911	7,602,720
Panama	438,912	295,200	478,080	504,000	351,360
Paraguay	3,435,600	84,000	1,830,000	908,065	3,889,223
Peru	21,186,048	100,080	14,010,000	18,821,800	13,840,704
St. Kitts and Nevis				17,280	1,008
St. Lucia			23,040	11,520	28,800
St.Vincent and the					
Grenadines	7,200		1,440	864	4,320
Suriname		122,400			100,800
Trinidad and Tobago	338,400	158,400	63,360		504,000
Turks and Caicos Islands	86,400				
Uruguay	00,400	219,168	109,440	447,840	69,120
Venezuela	36,000	7,200	107,440	447,840	112,320
Sub-Total:	95,560,315	89,314,540	101,546,413	201,006,439	761,511,220

Sub-Saharan Africa	1,181,664	3,226,500	2 110 050	9 025 591	14 242 725
Angola Benin	3,876,000		3,448,850	8,935,581	14,243,725
Botswana	3,870,000	8,490,000 2,200	10,188,000	27,063,922 659,500	44,380,661
	14.160.040	·	12 600 005		20.050.525
Burkina Faso	14,168,040	18,504,000	13,609,005	31,912,400	20,959,535
Burundi	438,528	1,157,148	1,617,792	4,243,581	4,472,269
Cameroon	16,518,000		19,677,500	41,189,425	66,693,342
Cape Verde	2,952,000			7,488,000	
Central African Republic	115,200	224,064	742,800	15,736,366	4,065,852
Chad	704,000	2,016,000	2,117,306	13,730,300	3,875,830
Comoros	114,000	374,400	118,800	1,107,120	455,760
Congo	1,952,048	6,153,840	6,402,760	61,803,590	5,733,792
Côte d'Ivoire	27,798,000	28,944,000	10,684,800	30,878,089	117,867,336
Congo, Democratic	21,170,000	20,744,000	10,004,000	30,070,002	117,007,550
Republic		3,223,200	13,015,000		74,757,190
Equatorial Guinea	21,600		28,800	34,560	51,840
Eritrea	5,152,800	450,000	2,521,200	17,801,160	7,250,998
Ethiopia	55,434,800	36,673,600	99,686,000	218,760,159	201,150,489
Gabon	120,000	86,400	60,904	59,904	100,800
Gambia	464,887	612,000	2,940,000	66,240	2,940,656
Ghana	3,666,000	6,005,840	16,070,300	37,146,000	70,754,000
Guinea	5,746,080	5,196,000	12,000	17,802,067	7,017,521
Guinea-Bissau		48,780	172,800	1,474,240	9,673,837
Kenya	1,510,048	66,688,800		59,188,950	345,428,213
Lesotho	205,000	425,800	126,000	3,372,856	6,325,050
Liberia	1,728,000	64,800	1,392,000	2,280,000	5,000,400
Madagascar	6,852,000	1,026,000	7,628,952	10,501,039	17,556,089
Malawi	5,184,000	10,800,000	10,440,000	14,220,533	50,186,888
Mali	9,318,000	5,406,000		9,764,884	8,975,358
Mauritania		777,600		2,849,904	1,732,200
Mauritius	304,992	500	144,864	216,000	
Mozambique	24,396,000	20,576,100	7,420,000	22,870,111	20,823,803
Namibia	360,000	150,000	1,690,335	22,413,298	2,565,471
Niger	605,300	17,280	1,384,752	11,764,720	40,320
Nigeria	17,760,000	50,176,400	68,832	208,167,301	521,679,850
Rwanda	5,771,520		3,775,666	12,585,633	18,033,224
Sao Tome &					
Principe	144,000		267,840	314,496	544,896
Senegal	9,577,210	4,115,000	6,960,000	8,624,200	7,152,000
Seychelles	100,800		204,000	360,000	247,680
Sierra Leone	7,968,336	1,029,360	40,320	4,320	7,133,616
South Africa	300,000	79,786,000	41,520,000	34,150,750	13,433,864
Swaziland	2,046,000		978,300	12,072,000	244,800
Togo	7,140,000	11,772,240	5,054,000	12,817,948	12,932,660
Uganda	6,838,580	33,569,200	77,882,269	71,645,367	46,517,093

Grand Total:	1,150,920,386	944,797,560	947,433,323	2,727,443,013	3,575,326,248
Sub-Total:	323,454,289	498,519,812	411,883,147	1,302,979,645	1,900,988,554
Zimbabwe	31,000,000	62,471,440	12,000	140,026,884	27,337,099
Zambia		1,740,000	40,098,400	50,488,042	66,822,505
United Republic of Tanzania	43,920,856	26,539,320	1,680,000	67,617,385	63,830,042

Donor support for female condoms

The growth in donor support for female condoms is encouraging. The Female Health Company, manufacturer of female condoms, has provided the following data for the information in Table 5.

Table 5: Distribution of female condoms (in pcs) in public and private sectors

Year	1997	1998	1999	2000	2001	2002	TOTAL
Africa	814,000	3,536,500	2,906,420	992,000	3,725,910	4,452,140	16,426,970
Asia	15,000	14,000	76,500	51,000	99,700	91,600	347,800
Australasia	31,150	1,000	4,000	500	1,000	20,000	57,650
Europe	150,000	113,000	333,000	478,500	579,000	558,000	2,211,500
N. America	318,000	1,384,000	1,892,000	1,716,000	2,361,000	2,380,000	10,051,000
C. America	18,000	44,000	80,280	7,300	57,600	207,600	414,780
S. America	6,000	603,000	308,000	2,390,000	1,384,640	3,992,000	8,683,640
Total	1,352,150	5,695,500	5,600,200	5,635,300	8,208,850	11,701,340	38,193,340



United Nations
Population Fund

220 East 42nd Street New York, NY 10017

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