



***Donor Support
for
Contraceptives
and
Condoms
for STI/HIV
Prevention***

2001

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Table of Contents

List of Abbreviations and Acronyms	iv
List of Tables	iii
Introduction	1
Levels of Donor Support	3
Patterns of Donor Support	5
Fluctuations in Support	5
Changing Patterns of Support	5
Projected Contraceptive Costs and Estimated Requirements	7
Regional Distribution of Donor Support for Contraceptive Commodities	8
Countries Receiving the Most Contraceptive Commodity Support	8
Total Expenditure by Method	10
Conclusion	10
ANNEX	11
Donor Support for Male Condoms	12
Donor Support for Female Condoms	16

List of Tables

(within text)

1: Estimated Contraceptive Commodity Support by Donor/Agency, 1990-2001	3
2: Top Ten Countries Receiving the Most Donor Support, 1992-2001	9
3: Expenditure by Method, 1992-2001	10

(Annex)

4: Donor Supply of Male Condoms in Countries and Territories, 1998-2001	12
5: Distribution of Female Condoms in Public and Private Sectors	16

List of Figures

1: Support by Major Donors, 2001	4
2: Patterns in Contraceptive Supply, 1990-2001	5
3: Comparison of Major Donor Support, 1990 and 2001	6
4: Trend of Reported Donor Support for Contraceptives Compared with Estimated Requirements, 1992-2003	7
5: Donor Support, 2001, by Region	8

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)
COESIDA	Consejo Estatal para el Control y Prevencion del SIDA
CPR	Contraceptive prevalence rate
DFID	Department for International Development
DKT	DKT International
HIV	Human immunodeficiency virus
ICPD	International Conference on Population and Development
IPPF	International Planned Parenthood Federation
IUD	Intra-uterine device
MOH	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

Introduction

This report was prepared by analysing information from a database generated by the United Nations Population Fund (UNFPA) on Donor Support for Reproductive Health Commodities. 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 2001. The information for this report was collected in 2002. This report, the latest in a 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 2001. 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 countries' 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. Nevertheless, the UNFPA Commodity Management Unit (CMU) will continue to dialogue with donors and countries to collect this information.

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 2001 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 \$96 million.²

The information from three companies, Marie Stopes International (MSI), Population Services International (PSI) and DKT International (DKT), was compared and contrasted with the reports received from donors to avoid double counting. MSI, PSI and DKT

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

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

receive support from donors that often report the same information, with regard to their support in developing countries. Thus, only the amount of support these companies provided from their own funding and other donor support that was not previously recorded was estimated and reported.

In 2001, the Swedish International Development Cooperation Agency (Sida), the Canadian International Development Agency (CIDA), the European Union, the Government of the Netherlands, Pathfinder, the Joint United Nations Programme on HIV/AIDS (UNAIDS), the World Health Organization (WHO), and the World Bank (WB) 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 2001. In 2001, the Governments of the Netherlands, Canada and the United Kingdom announced substantial increases in support for reproductive health commodities to UNFPA, which are reflected in this report.

Levels of Donor Support

Donor support for contraceptives to developing countries in 2001 was recorded at \$224 million, an increase of 46 per cent over the support provided in 2000 (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 2001 met only 36 per cent of the year's total estimated contraceptive needs for family planning of \$614 million.

Table 1: Estimated Contraceptive Commodity Support by Donor/Agency, 1990-2001, in \$US 000

	1990	1991	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	TOTALS	% of Total
BMZ/KfW			10,798	18,312	11,350	9,317	38,071	13,305	8,627	7,976	35,482	16,387	169,625	10.7
CIDA					1,385	4,514	7,249	0	1,036	2,885	4,808	208	22,085	1.4
DFID			4,125	4,712	7,192	10,924	9,205	13,149	7,807	13,188	7,317	6,130	83,749	5.3
DKT						177	0		3,759	5,148	4,868	7,849	21,801	1.4
EU				180	5,845	1,820	9,215	7,435	644	13,109	48	309	38,605	2.4
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	67,670	4.3
JAPAN					28	315	300	838	36	159	1,657	340	3,673	0.2
MSI			409	1,173	405	0	0	1,439	61			3718	7,205	0.5
NETHERLANDS						102			2,700	2,584			5,386	0.3
PATHFINDER			1400	1,692	462	892	0						3,746	0.2
PSI			418			7,419	7,239	6,633	200	264	456	22,359	44,988	2.8
SIDA			1,297		6	1,400	750	0		514			3,967	0.3
UNAIDS										218			218	0.0
UNFPA	14,753	21,499	18,534	27,817	34,087	37,858	37,611	39,861	32,201	14,396	16,721	89,205	384,543	24.3
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	631,626	39.9
WHO	957	975	628	483	968	1,663	2,099	2,673	481	1,078			12,005	0.8
WORLD BANK						5,000	7,930	1,662	19,138	20,718	20,781	6,130	81,359	5.1
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	1,582,251	100

[1] UNFPA figures represent the procurement from the UNFPA Country Programme Budget. UNFPA also procured and supplied contraceptives on behalf of CIDA, the World Bank and the European Union in 2001 and received extra budgetary support provided by the Governments of the Netherlands, Canada and the United Kingdom.

Notes:

N/A = Not ascertained.

In 2001, the most significant increase in donor support to UNFPA, was due to the generous contributions from the Governments of Canada, the Netherlands and the United Kingdom, in the amount of \$78.45 million.

UNFPA's overall contraceptive procurement, including procurement on behalf of the World Bank, the European Union and CIDA, was \$96 million in 2001.

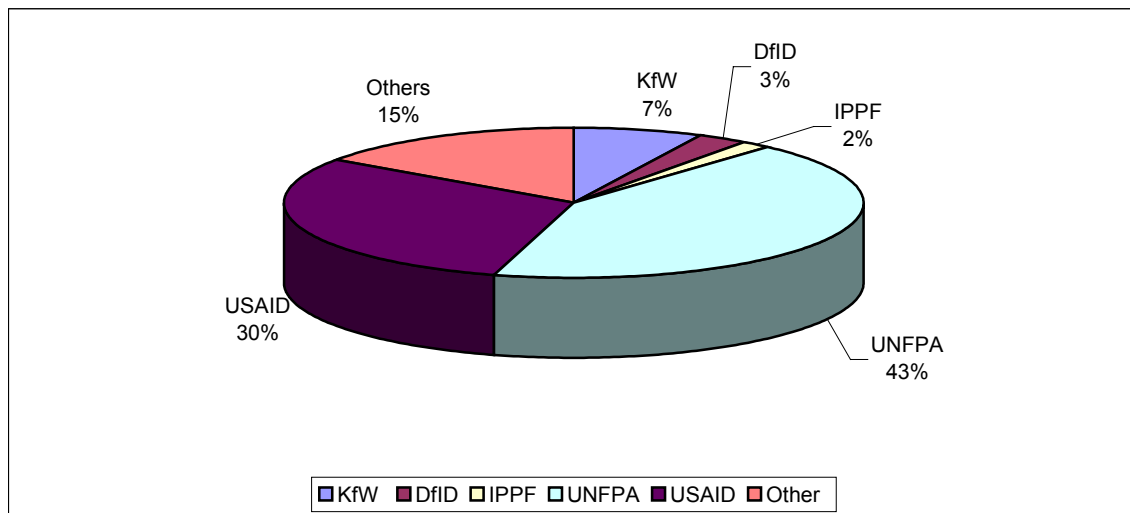
Figure 1 illustrates the contributions of four major donors of contraceptives in 2001. Overall, the UNFPA total equals 43 per cent and includes the amount of contraceptives

purchased with money received from different sources, including the World Bank, the European Union and CIDA. PSI's support has also increased substantially, rising to \$22.3 million in 2001 from less than half a million dollars in the preceding year, placing its support at the third highest level for the year.

USAID continues to be a strong donor with contributions of \$67.9 million, though it dropped to providing the second highest level of support in 2001, with UNFPA's support being currently at the highest level for the year. Although USAID's share has reduced to 30 per cent in 2001 from 38 per cent in the previous year, its funding support scales at over three times greater than the next place donor's level of support.

For BMZ/KfW, the fourth major donor in 2001, its level of support at \$16.3 million has declined to less than half the level of support it provided in 2000, with a corresponding decline of its share to 7 per cent in 2001 compared to 23 per cent in 2000.

Figure 1: Support by Major Donors, 2001 (in percentages)



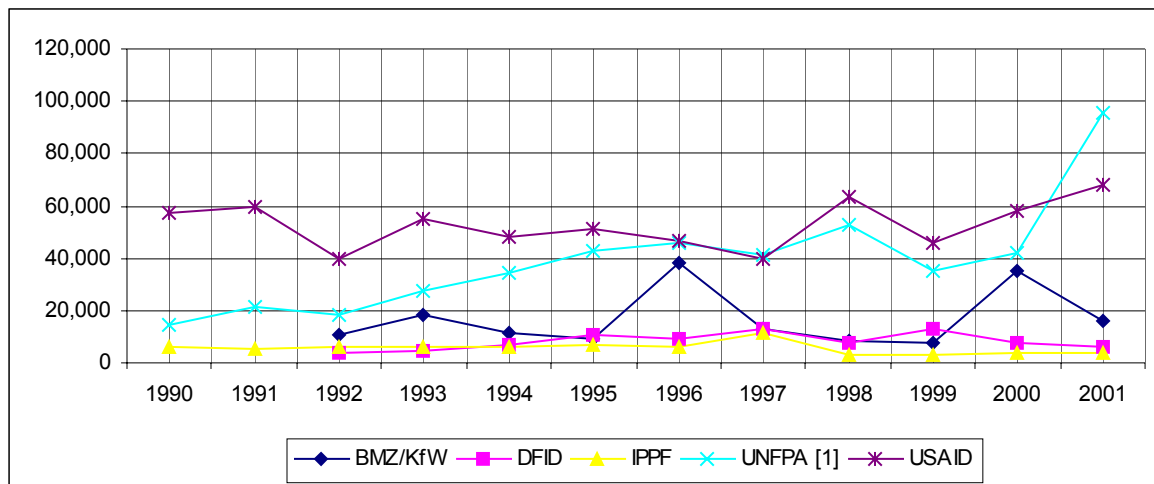
Patterns of Donor Support

Fluctuations in Support

Figure 2 indicates a fluctuating pattern of support by the five main donors since 1990. UNFPA support reflects its total procurement figures. BMZ/KfW, continues to be third among the top five donors over the twelve year period illustrated, even though it showed a declining pattern in 2001, with support falling to less than half the prior year's contribution. DFID and IPPF also showed declines in 2001. Social marketing companies are not shown in this figure, due to their often varying levels of support. The largest increase in UNFPA support occurred in 2001 as a result of the funds contributed by the Governments of the Netherlands, the United Kingdom and Canada.

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 in support from a donor, particularly from the point of view of sustainability, 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, 1990-2001, in \$US 000

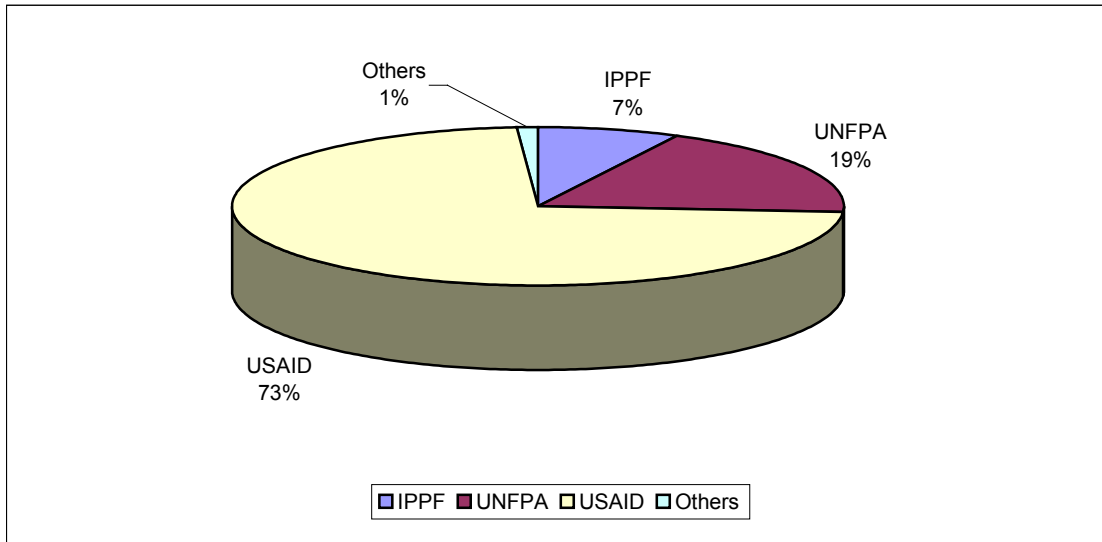


Changing Patterns of Support

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). At that time, USAID contributed 73 per cent of the total of \$80 million reported support for contraceptives provided by donors. In 2001, UNFPA changed the pattern due to the extra budgetary support it received, UNFPA became the largest provider of support, accounting for 43 per cent of the reported \$224 million donor support total.

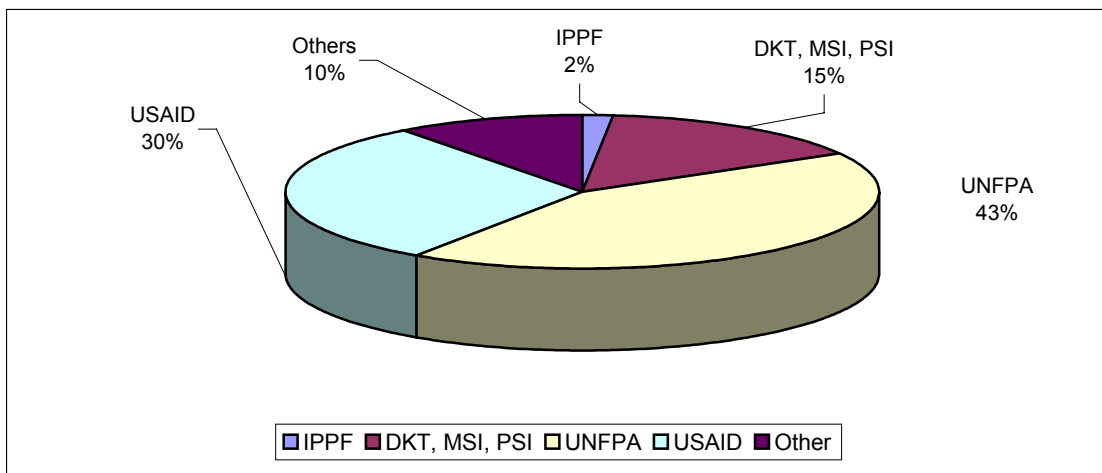
Figure 3: Comparison of Major Donor Support, 1990 and 2001

1990 Total: \$US80 million



In 2001, twelve donors provided the total of \$224 million for contraceptives. USAID's share declined to 30 per cent from 73 per cent in 1990. DKT, MSI and PSI, had a combined share of 15 per cent. During the period 1990-2001, the UNFPA share fluctuated depending upon its funding situation and/or the levels of bilateral funding received from other donors.

2001 Total: \$US 224 million

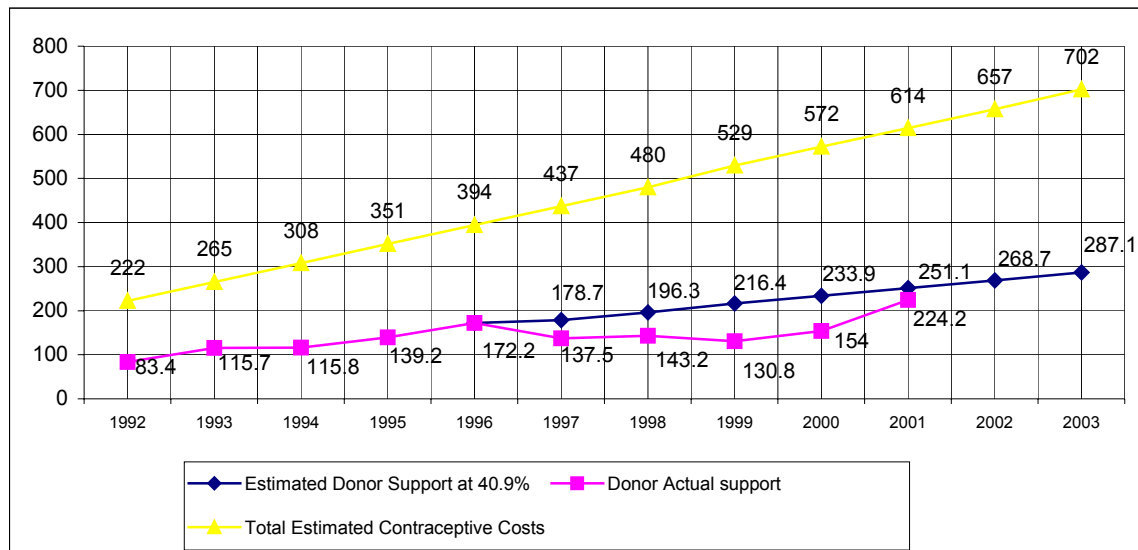


Projected Contraceptive Costs and Estimated Requirements

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. 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 of both population growth and an increase in the proportion of people who use contraception. Increased use of contraceptives and condoms for STI/HIV prevention is another factor contributing to rising requirements and a continued need for increasing donor support.

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 2001, donors met only 36 per cent of total estimated requirements. Had donors maintained their support at 40.9 per cent, they would have supplied about \$251.1 million worth of commodities in 2001 rather than the actual amount of \$224 million, a potential shortfall of some \$27 million. Beyond projecting and costing overall future requirements for contraceptives, separate estimation of future contraceptive and condom costs for STI/HIV is also a necessary step in assessing and managing potential gaps in needs versus availability of funding.

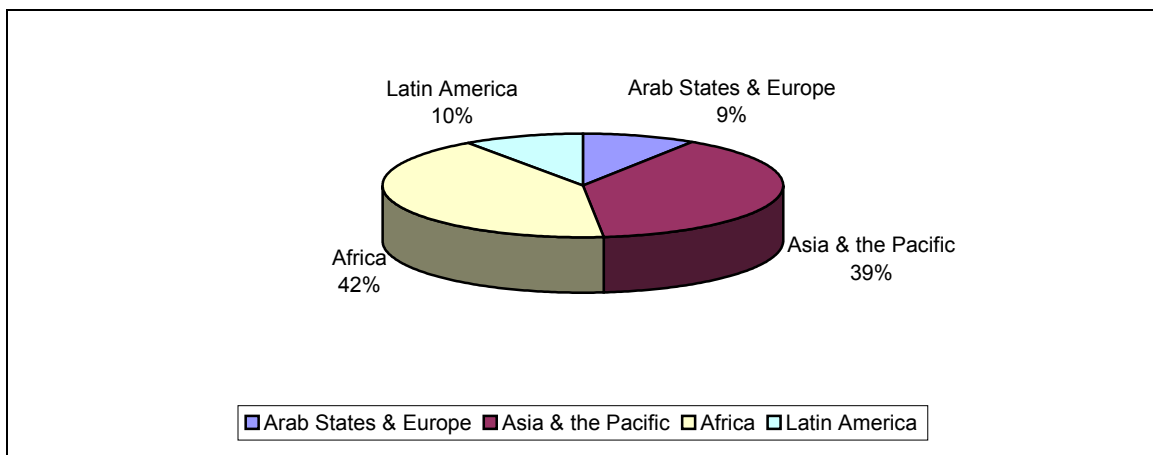
Figure 4: Trend of Reported Donor Support for Contraceptives Compared with Estimated Requirements, 1992-2003 (in millions of US dollars)



Regional Distribution of Donor Support for Contraceptive Commodities

In 2001, the Africa region received the largest share of the total support (Figure 5), whereas in 2000 the Asia and the Pacific region received the most support. One of the reasons for the larger regional share of the Asia and the Pacific region in 2000, could have been the KfW support to Bangladesh at that time. The increased condom support to various African countries partly explains the rise in percentage that makes the Africa region the largest recipient region in 2001.

Figure 5: Donor Support, 2001, by region (in percentages)



Countries Receiving the Most Contraceptive Commodity Support

Of the ten countries that received the most donor support in 2001, three are in the Asia and the Pacific region, with 47 per cent, five countries are in the Africa region, with 42 per cent, one country is in the Arab States and Europe region, with 5 per cent and one country is in the Latin America and the Caribbean region with 5 per cent of the \$129 million received by those ten countries. The ten countries listed in Table 3 for 2001 received about 58 per cent of the total donor support for contraceptives and condoms for STI/HIV prevention provided to all countries in 2001.

Taking a cumulative ten year view of the countries in Table 3, Bangladesh emerges as the top recipient of donor support, receiving a total of \$319 million over the period 1992-2001. Pakistan, Ethiopia and the Philippines are the second, third and fourth largest recipients with \$60 million, \$59 million and \$57 million respectively in cumulative ten year donor support.

**Table 2: Top Ten Countries Receiving the Most Donor Support, 1992-2001,
\$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					
Country	Value	Country	Value				
Bangladesh	48.3	Bangladesh	37.4				
Ethiopia	10.8	Ethiopia	20.8				
Philippines	10.6	Nigeria	13.3				
Pakistan	6.6	Philippines	12.4				
Indonesia	6.3	Pakistan	10.6				
Ghana	5.1	Zimbabwe	8.7				
Uganda	5	Egypt	7				
Nepal	4.3	Ghana	6.99				
Peru	3.7	Peru	6.97				
India	3.4	Uganda	4.9				
Total	104.1	Total	129.06				

Total Expenditure by Method

For the first time in three years, donor support for condoms was higher than support for oral contraceptives. This can be partly explained by the decline in support for oral contraceptives that had been provided to Bangladesh by KfW and the World Bank the previous year. The share of condoms is rising, in 1992 it was 25 per cent, and by 2001, the condom share increased to 41 per cent, with the condom amount being \$91.2 million out of the total expenditures of \$224 million for the year. For quantities of male and female condoms supplied to recipient countries, refer to Tables 5 and 6 in the annex.

Table 3: Expenditure by Method, 1992-2001, \$US million

Method	1992	1993	1994	1995	1996	1997	1998	1999	2000	2001	Totals	Percent
Condom	21.3	39	37.8	60.6	68	50.9	51.4	37.9	46	91.2	504.1	40.7
Oral	33.7	48.2	43.8	46.9	63.9	30.2	34.4	44.4	71	58.1	474.6	25.9
Injectable	10.5	15.9	16.8	18	21.8	37.8	34.3	31.5	29.5	57.7	273.8	25.7
IUD	9.5	5.6	8.7	5.3	9.2	6.3	9.7	6.5	2.9	6.6	70.3	2.9
VFT	2.5	2.8	3.4	3.4	4.2	3	2.6	1.9	1.7	2.1	27.6	0.9
Implant	1.6	1.5	3.9	2.9	3.3	4	10.4	8.5	2.8	5.1	44.0	2.3
Foam/Jelly/ Others	1.5	0.2	0.2	2.1	0.1	5.3	0.4	0.1	0.2	0.4	10.5	0.2
Diaphragm	N/A	N/A	0.1	N/A	0.1	N/A	N/A	N/A	N/A	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	2.5	0.5
Female Condom	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	2.0	2.0	0.9
Raw Materials	2.7	2.5	1.1									
Totals	83.3	115.7	115.8	139.2	172.1	137.5	143.2	130.8	154.1	224.2	1,416	100.00

Notes:

N/A = Not ascertained.

Conclusion

Upon review, global donor support from 2001 appears to be declining despite the rising needs for contraceptive commodities worldwide. Rising condom support for STI/HIV prevention is also a growing and significant emerging trend, shaping the nature and direction of donor funding. This underscores the need to comprehensively monitor growing requirements and potential shortfalls, by collecting and analyzing country-specific data from all possible support channels, commercial, government procurement, and NGO's, among others. Additional country-specific information on dollar value support by commodity type, would also help in building a more complete global picture, facilitating flexible and effective program design and method mix management, necessary aids in meeting the ICPD goal of universal choice and availability of contraceptives by 2015.

ANNEX

Donor Support for Male Condoms

Table 4 indicates donor support for male condoms during the years 1998-2001. 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, 1998-2001 (in pcs)

Country	1998	1999	2000	2001
Arab States, Europe & Central Asia:				
Albania	1,437,184	953,146	1,508,326	65,914,120
Algeria				2,592,000
Armenia	42,000			
Azerbaijan	720,000			273,600
Belarus	18,000		18,000	3,000,000
Bosnia-Herzegovina				583,500
Bulgaria	720,000	1,728,500		
Cyprus				
Czech Republic				
Djibouti	154,080	129,600	86,400	408,960
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
Jordan	4,116,000	1,206,000	942,000	2,220,000
Kazakhstan	5,760,000		936,000	907,225
Kosovo				10,747,403
Kyrgistan		2,664,000		4,651,200
Latvia				
Lebanon	273,600	172,800	90,000	102,000
Moldova				
Morocco	2,795,760	3,816,000	1,896,000	748,800
Oman	64,800	216,000		195,552
Occupied Palestinian Territory	14,400	343,680	60,000	166,800
Poland		504,000		
Romania	1,440,144	1,774,080	84,672	99,330
Russian Federation	374,400	1,794,000	93,200	296,069
Somalia			48,000	150,000
Sudan	150,192	374,400	314,920	3,519,200
Syrian Arab Republic	230,400	3,024,000	1,440,000	2,473,000
Tajikistan	1,013,064		3,000	432,000
Tunisia	349,920	8,000		237,600
Turkey		403,200	4,872,960	2,808,144
Turkmenistan	1,008,000			1,896,050

Ukraine	264,000	861,600	896,968	720,000
Uzbekistan		216,000	792,000	29,435,900
Yemen	460,800	578,000	28,800	2,767,719
Yugoslavia				
Sub-Total:	28,115,864	25,127,606	20,261,246	153,297,029
Asia & Pacific:				
Afghanistan				
Bangladesh	296,922,230	101,760,668	120,721,259	328,730,393
Bhutan	1,468,800	2,881,000	3,024,000	
Cambodia	27,509,000	7,212,934	18,072,108	15,850,300
China	24,834,302	28,000,000	31,427,176	
Cook Islands	7,200	99,600		5,760
Dem. Peoples Rep. of Korea	4,440,960			15,867,120
Fiji	197,568		30,000	2,408,880
India	63,664,808	7,108,270	58,137,523	96,787,192
Indonesia	28,000,000	29,442,240	39,227,169	43,847,150
Iran, Islamic Rep. of				3,459,000
Kiribati	37,440	46,800	86,640	34,800
Lao. People's Dem. Rep.			1,530,912	5,134,933
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
Myanmar	12,836,800	10,646,450	2,811,904	28,849,800
Nepal	33,188,496	35,187,120	17,236,080	17,500,000
New Zealand				144,000
Pakistan	124,685,522	5,856,480	51,680,562	285,115,011
Papua New Guinea	120,000	94,800	12,000	
Philippines	29,974,656	25,340,400	14,014,176	107,874,645
Samoa	7,200			
Solomon Islands	381,600	216,000	73,000	57,620
Sri Lanka	12,341,814	6,537,600	4,644,000	5,627,000
Thailand		201,600		-242,700
Timor-Leste				432,000
Tonga	72,000	90,000	82,320	
Tuvalu	36,250		4,320	6,000
Vanuatu	223,200	501,600		129,600
Viet Nam	41,407,704	47,338,000	36,224,632	107,052,098
Western Samoa	123,840		30,000	576,000
Sub-Total:	703,789,918	331,835,602	413,742,517	1,070,159,900
Latin America/Caribbean:				
Anguilla	64,800			
Antigua and Barbuda	72,000			
Argentina	129,600	100,800		
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
Belize	360,000			8,600
Bolivia	9,011,567	189,600	1,842,000	7,856,444
British Virgin Islands	100,800			
Brazil		43,847,160	56,320,561	42,586,594
Curacao				11,520
Chile	21,600	432,000	1,000	28,800
Colombia	360,010	187,200		504,000
Costa Rica				11,633
Cuba	172,800	1,440,000	432,000	1,873,700
Dominica	2,498	93,600	66,240	80,640
Dominican Republic	3,792,000	265,152		1,695,792
Ecuador	3,811,200	6,516,000		4,584,000
El Salvador	3,396,000	2,436,000	1,524,000	5,670,920
Grenada	21,600	21,600		23,040
Guatemala	12,822,000	4,602,300	7,074,000	10,257,145
Guyana	1,190,880	432,000		
Haiti	16,920,000	16,627,680	10,800,000	75,532,936
Honduras	3,834,000	7,284,000	4,794,000	17,880,179
Jamaica			29,100	4,536,000
Mexico	4,376,000	37,000	6,440	1,036,800
Montserrat	36,000			
Nicaragua	9,406,800	3,492,000	2,070,000	5,217,911
Panama	438,912	295,200	478,080	504,000
Paraguay	3,435,600	84,000	1,830,000	908,065
Peru	21,186,048	100,080	14,010,000	140,171,000
St. Kitts and Nevis				17,280
St. Lucia			23,040	11,520
St. Vincent and the Grenadines	7,200		1,440	864
Suriname		122,400		
Trinidad and Tobago	338,400	158,400	63,360	
Turks and Caicos Islands	86,400			
Uruguay		219,168	109,440	447,840
Venezuela	36,000	7,200		443,520
Sub-Total:	95,560,315	89,314,540	101,546,413	322,355,639
Sub-Saharan Africa:				
Angola	1,181,664	3,226,500	3,448,850	8,935,581
Benin	3,876,000	8,490,000	10,188,000	27,063,922
Botswana		2,200		659,500
Burkina Faso	14,168,040	18,504,000	13,609,005	31,912,400
Burundi	438,528	1,157,148	1,617,792	4,243,581
Cameroon	16,518,000		19,677,500	41,189,425
Cape Verde	2,952,000			7,488,000
Central African Republic	115,200	224,064	742,800	15,736,366
Chad	704,000	2,016,000	2,117,306	

Comoros	114,000	374,400	118,800	1,107,120
Congo	1,952,048	6,153,840	6,402,760	61,803,590
Cote d'Ivoire	27,798,000	28,944,000	10,684,800	30,878,089
Congo, Democratic Republic		3,223,200	13,015,000	
Equatorial Guinea	21,600		28,800	34,560
Eritrea	5,152,800	450,000	2,521,200	17,801,160
Ethiopia	55,434,800	36,673,600	99,686,000	218,829,279
Gabon	120,000	86,400	60,904	59,904
Gambia	464,887	612,000	2,940,000	66,240
Ghana	3,666,000	6,005,840	16,070,300	37,146,000
Guinea	5,746,080	5,196,000	12,000	17,802,067
Guinea-Bissau		48,780	172,800	1,474,240
Kenya	1,510,048	66,688,800		59,188,950
Lesotho	205,000	425,800	126,000	3,372,856
Liberia	1,728,000	64,800	1,392,000	2,280,000
Madagascar	6,852,000	1,026,000	7,628,952	10,501,039
Malawi	5,184,000	10,800,000	10,440,000	14,220,533
Mali	9,318,000	5,406,000		9,764,884
Mauritania		777,600		2,849,904
Mauritius	304,992	500	144,864	216,000
Mozambique	24,396,000	20,576,100	7,420,000	22,870,111
Namibia	360,000	150,000	1,690,335	22,413,298
Niger	605,300	17,280	1,384,752	11,764,720
Nigeria	17,760,000	50,176,400	68,832	208,167,301
Rwanda	5,771,520		3,775,666	12,585,633
Sao Tome & Principe	144,000		267,840	314,496
Senegal	9,577,210	4,115,000	6,960,000	8,624,200
Seychelles	100,800		204,000	360,000
Sierra Leone	7,968,336	1,029,360	40,320	4,320
South Africa	300,000	79,786,000	41,520,000	34,150,750
Swaziland	2,046,000		978,300	12,072,000
Togo	7,140,000	11,772,240	5,054,000	12,817,948
Uganda	6,838,580	33,569,200	77,882,269	71,645,367
United Rep. of Tanzania	43,920,856	26,539,320	1,680,000	67,617,385
Zambia		1,740,000	40,098,400	50,488,042
Zimbabwe	31,000,000	62,471,440	12,000	140,026,884
Sub-Total:	323,454,289	498,519,812	411,883,147	1,302,979,645
Grand Total:	1,150,920,386	944,797,560	947,433,323	2,844,901,213

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

Ital=UNAIDS Supply Proj.

Country/ Region	1997-98 (10/97-9/98) 12 months	1998-99 (10/98-9/99) 12 months	1999-2000 (10/99-9/00) 12 months	2000-01 (10/00-9/01) 12 months	2001-02 (10/01-9/02) 12 months	1997-2002 Total FCs	Average
Public sector/NGO							
Africa							
Angola		60,000	63,000	30,000	500	153,500	30,700
Benin				12,000	50,000	62,000	12,400
Botswana		2,000		10,000	50,000	62,000	12,400
Burkina Faso					11,000	11,000	2,200
Burundi			3,000	11,000	50,000	64,000	12,800
Cameroon			8,000		30,000	38,000	7,600
Cape Verde					3,000	3,000	600
Central African Republic			9,000	7,200	60,000	76,200	15,240
Chad				40,000		40,000	8,000
Comoros				1,000		1,000	200
Congo		2,500	2,000	9,000	22,000	35,500	7,100
Cote d'Ivoire	31,000			88,500		119,500	23,900
Equatorial Guinea				20,000		20,000	4,000
Eritrea	24,000			22,000		46,000	9,200
Ethiopia			20,000			20,000	4,000
Gabon				2,200		2,200	440
Gambia					20,000	20,000	4,000

Ghana			410,000	1,000,000		1,410,000	282,000
Guinea-Bissau					5,000	5,000	1,000
Kenya	110,000	200,000		200,000	1,000	511,000	102,200
Lesotho		8,000	17,000	57,000	66,000	148,000	29,600
Liberia				2,000		2,000	400
Madagascar	5,000	5,000	16,000		12,000	38,000	7,600
Malawi		1,000	5,000		21,000	27,000	5,400
Mali			11,000	5,000		16,000	3,200
Mauritania				1,000	3,000	4,000	800
Mauritius	500	500				1,000	200
Mozambique			4,000			4,000	800
Namibia		7,500	14,000	181,000	436,000	638,500	127,700
Niger		1,000		5,000	1,000	7,000	1,400
Nigeria			110,000	60,000	21,000	191,000	38,200
Rwanda			2,000	16,000	10,000	28,000	5,600
Sao Tome & Principe				1,000	2,000	3,000	600
Senegal			23,000	18,000		41,000	8,200
Seychelles				1,000		1,000	200
Sierra Leone				10,000	1,000	11,000	2,200
South Africa	1,200,000	1,779,000		1,340,000	1,009,000	5,328,000	1,065,600
Sudan			1,000			1,000	200
Swaziland			13,000		96,000	109,000	21,800
Tanzania, United Rep.				2,000	4,000	6,000	1,200
Togo			6,000	5,000	12,000	23,000	4,600
Uganda		600,000				600,000	120,000
Zambia				6,000		6,000	1,200
Zimbabwe	256,000	195,000	129,000	117,000	775,000	1,472,000	294,400
SUB-TOTAL:	1,626,500	2,861,500	866,000	3,279,900	2,771,500	11,405,400	2,281,080
Arab States, Europe & Central Asia							
Algeria					2,000	2,000	400
Azerbaijan				700		700	140
Bosnia					20,000	20,000	4,000
Bulgaria		500				500	100
Georgia	4,000					4,000	800

Kosovo				5,000		5,000	1,000
Moldova					6,000	6,000	1,200
Somalia					50,000	50,000	10,000
Syria	1,000					1,000	200
Tajikistan		3,000	1,000	1,000		5,000	1,000
Turkmenistan				5,000		5,000	1,000
Ukraine			1,000			1,000	200
Yemen	3,000	2,000		500		5,500	1,100
SUB-TOTAL:	8,000	5,500	2,000	12,200	78,000	105,700	21,140
Asia & the Pacific							
Bangladesh	1,000		30,000		25,000	56,000	11,200
Bhutan		1,000				1,000	200
Cambodia		30,000	20,000			50,000	10,000
China			5,000		15,000	20,000	4,000
India	500			90,000		90,500	18,100
Indonesia					1,000	1,000	200
Kiribati	1,000			1,000	1,000	3,000	600
Korea			1,000	1,000		2,000	400
Micronesia						0	0
Mongolia	2,000	7,500			34,600	44,100	8,820
Myanmar			1,000			1,000	200
Nepal					15,000	15,000	3,000
New Caledonia		1,000	500			1,500	300
Papua New Guinea					20,000	20,000	4,000
Solomon Islands			1,000			1,000	200
Sri Lanka	2,000				2,000	4,000	800
Vanuatu		3,000				3,000	600
Vietnam		30,000				30,000	6,000
SUB-TOTAL:	6,500	72,500	58,500	92,000	113,600	343,100	68,620
Latin America/ Caribbean							
Antigua						0	0
Bahamas					1,000	1,000	200
Bermuda			3,000			3,000	600
Bolivia						0	0
Brazil	100,000	1,000	2,000,000	670,000	3,330,000	6,101,000	1,220,200
Chile			1,000	1,000		2,000	400
Costa Rica						0	0
Cuba		10,000			5,600	15,600	3,120
Dominican Republic					50,000	50,000	10,000
Guatemala					2,000	2,000	400

Guyana					1,000	1,000	200
Haiti		45,000				45,000	9,000
Honduras					1,000	1,000	200
Jamaica			300	2,500	2,000	4,800	960
Mexico			4,500	4,100	45,000	53,600	10,720
Panama					5,000	5,000	1,000
Paraguay	6,000	4,000		1,000		11,000	2,200
Suriname					1,000	1,000	200
Turks & Caicos				5,000		5,000	1,000
Uruguay	5,000					5,000	1,000
Venezuela			50,000		60,000	110,000	22,000
SUB-TOTAL:	111,000	60,000	2,058,800	683,600	3,503,600	6,417,000	1,283,400
UNFPA Bulk Purchase						0	0
UNFPA Emergency RH Kits				108,000		108,000	21,600
USAID Bulk Purchase						0	0
Various (incl USAID OR)	13,650	79,450	97,350	3,000	1,000	194,450	38,890
SUB-TOTAL:	13,650	79,450	97,350	111,000	1,000	302,450	60,490
Sub-total public sector	1,765,650	3,078,950	3,082,650	4,178,700	6,467,700	18,573,650	3,714,730
	23	32	40	51	57	106	
Social Marketing							
Africa							
Congo						0	0
Ethiopia		46,000				46,000	9,200
Ghana		75,000	10,000			85,000	17,000
Mozambique		8,640				8,640	1,728
Namibia				70,920	45,000	115,920	23,184
South Africa	300,000	300,000			203,000	783,000	160,600
Tanzania, United Rep.	75,500	49,000	102,000	50,000	210,000	486,500	97,300
Togo		17,280		76,590	44,640	138,510	27,702
Uganda	605,000					605,000	121,000
Zambia	281,000				320,000	601,000	120,200
Zimbabwe	46,000	103,000	244,000	250,000	800,000	1,443,000	288,600
SUB-TOTAL:	1,307,500	598,920	356,000	447,510	1,622,640	4,332,570	866,514
Latin America/ Caribbean							
Bolivia	92,000			50,000	16,000	158,000	31,600

Brazil	510,400	200,840	602,600	690,200	539,000	2,543,040	508,608
Guatemala		17,280				17,280	3,456
Haiti	44,000	18,000		24,000	50,000	136,000	27,200
Mexico			2,000	22,000	53,000	77,000	15,400
Paraguay				8,640		8,640	1,728
Venezuela	10,000	5,680		2,000	3,000	20,680	4,136
SUB-TOTAL:	656,400	241,800	604,600	796,840	661,000	2,960,640	592,128
Sub-total social marketing	1,963,900	840,720	960,600	1,244,350	2,283,640	7,293,210	1,458,642
	9	11	5	10	12	19	
TOTAL	3,729,550	3,919,670	4,043,250	5,423,050	8,751,340	25,866,860	5,173,372
% Increase over previous year		5%	3%	34%	61%		
Total Countries	25	34	37	50	61	105	
Average	149,182	115,284	109,277	108,461	143,465	246,351	
Cumulative Total	3,729,550	7,649,220	11,692,470	17,115,520	25,866,860		



**United Nations
Population Fund**

220 East 42nd Street
New York, NY 10017

E/500/2003