Saving and Improving Lives through Increased Access to Contraceptives

By helping women delay, space, and limit pregnancies, family planning is a cost-effective intervention that saves the lives of mothers and their children and also saves thousands of dollars in healthcare spending every year. Based on the 2010 Afghanistan Mortality Survey contraceptive use has increased, coupled with a declining total fertility rate. Afghan women, however, still have a one-in-32 lifetime risk of maternal death, the fifteenth-highest in the world, resulting from a maternal mortality ratio of 460 maternal deaths per 100,000 live births.

USAID Contraceptive Investment

At the request of the Government of Afghanistan, the U.S. Government (USG) has provided assistance to improve the country’s health commodity supply chains and to better serve those who need family planning. 

From FY2009 to 2013, the USG has spent over $12 million to purchase more than—

- 16.4 million cycles of oral contraceptives
- 16 million condoms
- 6.2 million doses of Depo-Provera® (DMPA) injectable
- 95,000 Copper T-380A IUDs.

From FY2009-2013 USAID invested

$12 MILLION of commodities:

1.1 MILLION unintended pregnancies PREVENTED

90,000 infant deaths PREVENTED

2,500 maternal deaths PREVENTED

$59.5 MILLION in direct healthcare spending SAVED
USAID Investment Impact

From FY2009 to 2013, USAID-funded contraceptives had the potential to meet the needs of more than 3.2 million Afghan couples. In the hands of women and men who need them, these contraceptives prevented approximately—

- 1.1 million unintended pregnancies
- 188,000 induced abortions
- 90,000 infant (under the age of one) deaths
- 32,000 child (under age five) deaths due to improved birth spacing
- 2,500 maternal deaths.

During this time, by avoiding the direct costs of unintended pregnancy and delivery care, and of treating complications from unsafe abortions, Afghan families and the public health system saved an estimated U.S. $59.5 million in direct healthcare spending.  

Why Invest in Supply Chains?

USAID is a leader in efforts to meet the reproductive health needs of women in Afghanistan and other countries in the developing world. Improving access to modern methods of contraception is crucial to meeting these needs. As the Afghan government expands its efforts to improve the health of its women and children, continued USAID investment in procuring contraceptives and strengthening the national supply chain systems is essential to increasing access and reducing the unmet need for family planning.

Through implementing partners, and in partnership with ministries of health and other organizations, USAID develops and strengthens reliable and sustainable public health supply chains by implementing robust logistics solutions, promoting supportive commodity security environments, procuring health commodities and building lasting local capacity, all to ensure that contraceptives make it into the hands of the women and men who need them.

Table 1. Estimated Impact of USAID Contraceptive Commodity Support in Afghanistan, by Fiscal Year (FY)

<table>
<thead>
<tr>
<th></th>
<th>FY2009</th>
<th>FY2010</th>
<th>FY2011</th>
<th>FY2012</th>
<th>FY2013</th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Couple-years of protection (CYP) generated by commodities shipped</td>
<td>820,200</td>
<td>24,000</td>
<td>856,800</td>
<td>913,900</td>
<td>606,100</td>
<td>3,221,000</td>
</tr>
<tr>
<td>Unintended pregnancies averted</td>
<td>285,600</td>
<td>8,600</td>
<td>293,600</td>
<td>315,500</td>
<td>199,000</td>
<td>1,102,300</td>
</tr>
<tr>
<td>Unintended Live births averted</td>
<td>188,600</td>
<td>5,700</td>
<td>193,900</td>
<td>208,400</td>
<td>131,500</td>
<td>728,100</td>
</tr>
<tr>
<td>Abortions averted</td>
<td>48,800</td>
<td>1,500</td>
<td>50,200</td>
<td>53,900</td>
<td>34,000</td>
<td>188,400</td>
</tr>
<tr>
<td>Infant (U1) deaths averted</td>
<td>24,200</td>
<td>700</td>
<td>24,000</td>
<td>25,300</td>
<td>15,700</td>
<td>89,900</td>
</tr>
<tr>
<td>Child (U5) deaths averted due to improved birth spacing</td>
<td>8,300</td>
<td>200</td>
<td>8,500</td>
<td>9,200</td>
<td>5,800</td>
<td>32,000</td>
</tr>
<tr>
<td>Maternal deaths averted</td>
<td>800</td>
<td>0</td>
<td>600</td>
<td>700</td>
<td>400</td>
<td>2,500</td>
</tr>
<tr>
<td>Direct healthcare costs savings (U.S.2013)</td>
<td>$16,310,900</td>
<td>$490,300</td>
<td>$14,368,200</td>
<td>$15,146,900</td>
<td>$13,170,200</td>
<td>$59,486,500</td>
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</tbody>
</table>