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John Snow, Inc.

# ON TRACK

Ghana

## Developing a Strategy for Contraceptive Security in Ghana

*It has always been said that the chances of making health gains in the developing world remain very slim without the proper supplies.*

— **MOSES DANI BAAH**  
 DEPUTY MINISTER OF HEALTH, GHANA

**C**ontraceptive security is a guarantee that all people have continuous access to the quality products they need for family planning and prevention of sexually transmitted infections. It is not only dependent on sufficient funding for procuring commodities, but also on designing and conducting effective service delivery programs, on rationalizing the role of the public and private sectors, and on the use of up-to-date methods for efficiently managing supply logistics.

In May 2002, the Ghana Ministry of Health hosted a two-day symposium for government representatives to discuss contraceptive security strategies with international donors, partner institutions, and non-governmental organizations. The event, called “Meeting the Commodity Challenge,” was organized by DELIVER, a project that works to strengthen the supply chains for health and family planning programs in developing countries. DELIVER is funded by the United States Agency for International Development (USAID) and managed by John Snow, Inc.

By defining 14 priority issues to increase the efficiency and sustainability of contraceptive supply programs, the symposium’s 49 participants helped establish Ghana as one of the first developing countries to incorporate contraceptive security into its overall family planning policy.

### What is the link between contraceptive security and reproductive health?

The international community recognizes that population and development are inextricably linked. In 1999, 179 countries ratified an “ICPD + 5” target for worldwide contraceptive security:

*Governments should strive to ensure that by 2015 all primary healthcare and family planning facilities are able to provide directly or through referral, the widest achievable range of safe and effective family planning and contraceptive methods; essential obstetric care; prevention and management of reproductive tract infections including sexually transmitted diseases; and barrier methods, such as male and female condoms and microbicides, if available, to prevent infection.*

— The United Nations General Assembly Special Session on the International Conference on Population and Development (ICPD), 1999

Underfunding for family planning represents the most serious threat to contraceptive security in the developing world. Both country governments and donor organizations will need to increase their budget allocations for reproductive health if the International Conference on Population and Development vision is to be realized. The Initiative for Reproductive Health Supplies estimates that the worldwide annual gap between donor support and contraceptive demand is currently U.S.\$25 million, and could stretch to U.S.\$210 million by 2015 due to expected increases in the cost of supplies and to rapid population growth.



Participants in the “Meeting the Commodity Challenge” symposium in Sogakope, Ghana

The consequences of underfunding are far reaching. According to the United Nations Population Fund (UNFPA), for every U.S.\$1 million shortfall in contraceptive commodity assistance, the number of unintended pregnancies rises by 360,000 worldwide. As a result, 150,000 new abortions are performed, 25,000 more children die before the age of five, and 800 additional mothers suffer fatal complications related to pregnancy. Even slight funding deficits significantly reduce the range of choices made available to couples for family planning, leading to lower overall usage.

### **How will contraceptive security be attained in Ghana?**

The symposium in Ghana showed that, although the principles of contraceptive security are generally agreed upon throughout the international community, the approach that each country needs to take to secure the availability of supplies is based upon a unique set of conditions.

Ghana currently suffers a U.S.\$400,000 shortfall in funding for family planning programs. In the next six years, without intervention, that gap could grow to nearly U.S.\$5 million unless Ghana—

- Projects long-term financing requirements, and secures commitments from the public and private sectors to address funding gaps.
- Ensures that product availability is consumer driven and meets quality standards.
- Develops an efficient supply chain based on accurately forecasted procurement needs among different segments of the population.
- Improves coordination between the government, the private sector, and the international donor and business community.
- Improves access to under-served population groups.

A set of 14 issues that impact the achievement of these goals were identified at the May symposium. The most urgent address Ghana's funding gap through a mix of financing mechanisms that include support from international donors and lending institutions, increased use of government revenue, and development of private sector approaches to those who can afford to pay fair market prices for contraceptive products.

To implement its plan for contraceptive security, the Ghana Ministry of Health has assigned coordination responsibility to its Reproductive and Child Health Unit. The unit has already



Staff from the Asiam Health Clinic review supply records

addressed a proposal to the UNFPA for funding through 2003. In early August, it also established and convened an Interagency Coordinating Committee, much like ones previously set up to manage other Ghanaian priority public health issues, such as malaria. 

#### **For more information, contact:**

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