



**USAID**  
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Overview of Contraceptive and  
Condom Shipments

**FY 2004**

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## **Abstract**

The *Overview of Contraceptive and Condom Shipments* is an annual publication summarizing contraceptive and condom shipments sponsored by the U.S. Agency for International Development (USAID) by value and unit.



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# FY 2004

## Overview of Contraceptive and Condom Shipments



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## Overview of Contraceptive and Condom Shipments

For many years, USAID has been among the largest international donors of contraceptives and condoms. Since the 1970s, USAID has provided family planning and reproductive health commodities to countries in the Agency's Africa, Asia/Near East, Europe & Eurasia, and Latin America/Caribbean regions. The Commodities Security and Logistics Division of USAID's Office of Population and Reproductive Health administers a centralized system for commodity procurement; supports a program for health commodities and logistics management; works with country programs and other donors to ensure that these commodities are available to those who choose to use them; and maintains a database on USAID commodity assistance.

This report describes USAID's contraceptive and condom distribution activities in fiscal year (FY) 2004. It presents data on the values and quantities of commodity shipments by USAID region and country, affiliations of recipient organizations, and trends over the past decade. One-year fluctuations in contraceptive and condom shipments on the regional and country level are not necessarily the result of programmatic shifts. Variations in year-to-year shipments and commodity production schedules most often account for these fluctuations.

### Commodity Fund

The Agency has developed an operational plan for its HIV/AIDS "expanded response" strategy. One aspect of this plan includes a Commodity Fund to centrally finance male and female condoms for HIV/AIDS programs and ensure their expedited delivery to countries. (For rationale and application criteria, see Guidance on the Definition and Use of the Child Survival and Health Programs Fund, FY 2003 Update, page 331).

The Commodity Fund began in FY 2002 with \$25 million and continued in FY 2003 with \$27.8 million. In FY 2004, the Fund again continued at the \$27.8 million level. As part of the Commodity Fund strategy, USAID added another product for HIV/AIDS programs. In September 2003, a centrally funded female condom contract was awarded. USAID provided these condoms free to Missions for HIV/AIDS prevention as part of the Commodity Fund. These condoms were procured in limited quantities (4% to 7% of total Fund resources). Requests for female condoms from Missions were handled on a case-by-case basis.

## Worldwide Contraceptive and Condom Shipments

In FY 2004, the value of USAID shipments worldwide totaled \$73 million, and shipments reached 55 countries in USAID's Africa, Asia/Near East (ANE), Europe & Eurasia (E&E), and Latin America/Caribbean (LAC) regions. Compared with FY 2003, the value of USAID contraceptive and condom shipments worldwide increased by 12% in FY 2004, and eight new countries received shipments. Nine countries that received shipments in FY 2003 did not receive them in FY 2004. Between FY 1994 and FY 2004, worldwide contraceptive and condom shipments remained on an upward trend (see figure 1). While worldwide trends in total condom shipment values showed a slight decline over the past 11 fiscal years, contraceptive shipment values increased most years (figure 2).

Between FY 2003 and FY 2004, the value of contraceptive and condom shipments to Africa increased by 28% (\$31.9 million to \$40.9 million). Africa was the only region that experienced a significant increase in shipment values and accounted for the increase in contraceptive and condom shipments worldwide. As in FY 2003, the Africa region received the largest share (56%) of the value of contraceptive and condom shipments in FY 2004. The shares in value of contraceptive shipments for other regions in FY 2004 were ANE, 32%; LAC, 11%; and E&E, 1% (figure 3). The total value of contraceptive and condom funds spent in ANE was \$23.3 million; LAC, \$7.8 million; and E&E, around \$1 million.

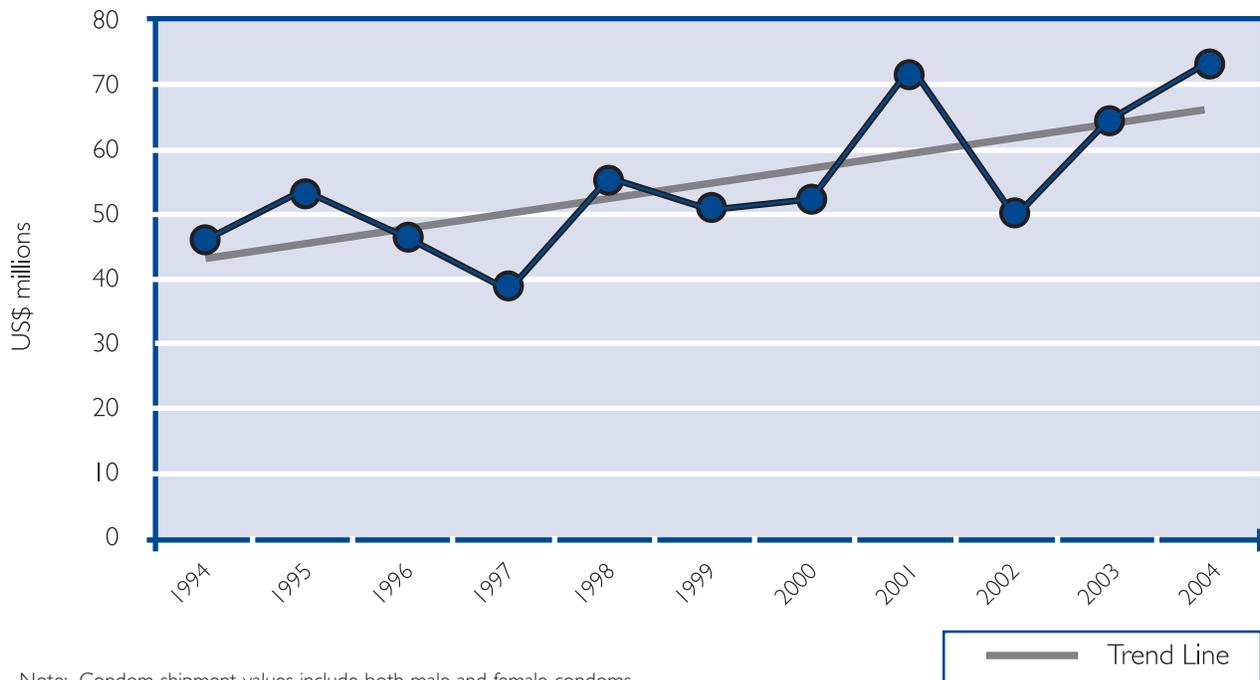
The worldwide distribution of value by method (figure 4) showed some changes from FY 2003. In FY 2004, condoms still had the highest share of value (31%), followed by oral contraceptives and injectables (each at 29%), intrauterine devices (IUDs) (5%), implants and female condoms (each at 3%), and vaginal foaming tablets (VFTs) (0.1%). In FY 2003, condoms also had the largest share of value (36%), followed by oral contraceptives (31%). The most significant change in FY 2004 was the increase in the injectables share to the same value as orals. There was also an increase in female condoms as a standard USAID method for HIV/AIDS programs, a result of the centrally funded female condom contract awarded in September 2003.

In the regional distribution of condoms, an increase in shipment values occurred only in the ANE region, from \$4.5 million in FY 2003 to \$4.7 million in FY 2004. The other three regions all showed declines in condom shipment values. Africa received the greatest value of female condom shipments in FY 2004, with smaller quantities shipped to the LAC region and none to ANE and E&E. Injectables shipment values saw a significant increase only in the Africa region.

The creation of the Commodity Fund in 2002 occurred at a time when USAID's condom manufacturers were experiencing production delays and unable to increase capacity to supply USAID's growing need in terms of quantities and brands. Condom shipments, however, have grown since 2002 as production has increased to be more in line with need, though still not to optimum levels to meet Missions' demand. Production problems also affected timely delivery of oral contraceptives. USAID has worked closely with the manufacturer to monitor production issues and minimize the effect of delays on field programs. During FY 2002 and FY 2003, USAID experienced delayed deliveries of Depo-Provera, which meant delayed shipments to the field. Obtaining an offshore waiver to purchase Depo-Provera from the manufacturer's European facility allowed USAID to secure supplies before program stocks were depleted. The increased shipment quantities in FY 2004 reflect the manufacturer's increased capacity to meet program needs on a timely basis.

Figure 1

### Trends in Total Worldwide Contraceptive & Condom Shipment Values FY 1994–2004 (US\$ millions)

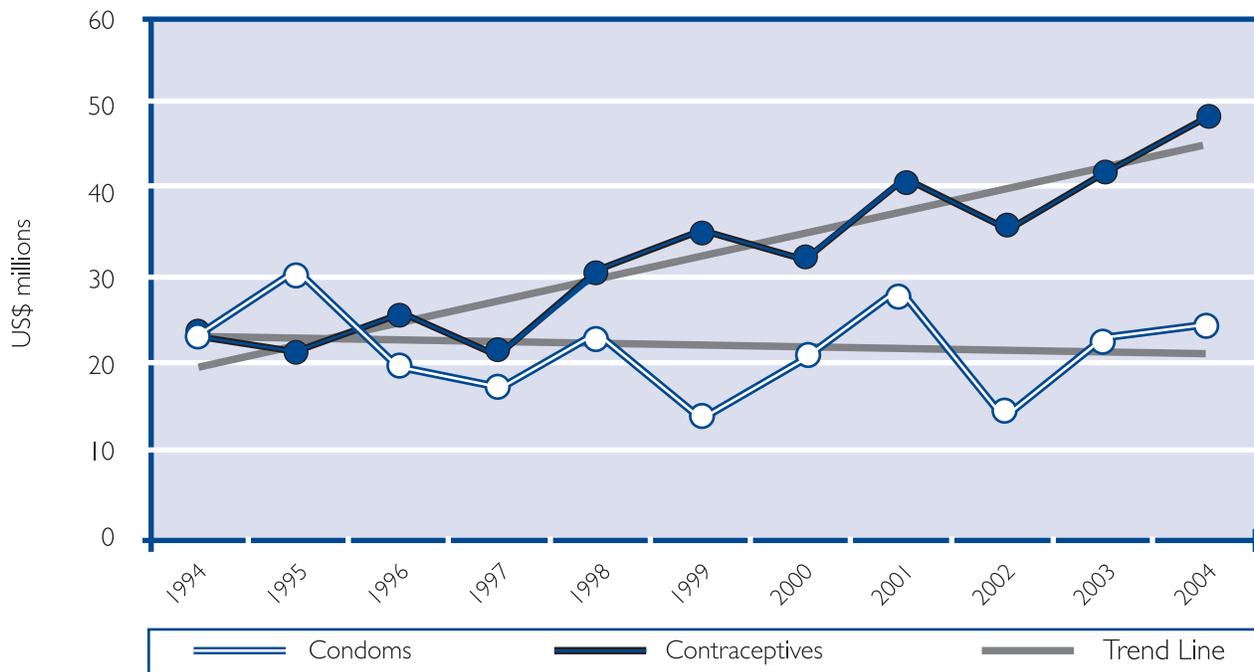


Note: Condom shipment values include both male and female condoms.

Source: NEWVERN Information System, Office of Population and Reproductive Health, May 2005.

Figure 2

### Trends in Worldwide Contraceptive & Condom Shipment Values FY 1994–2004 (US\$ millions)

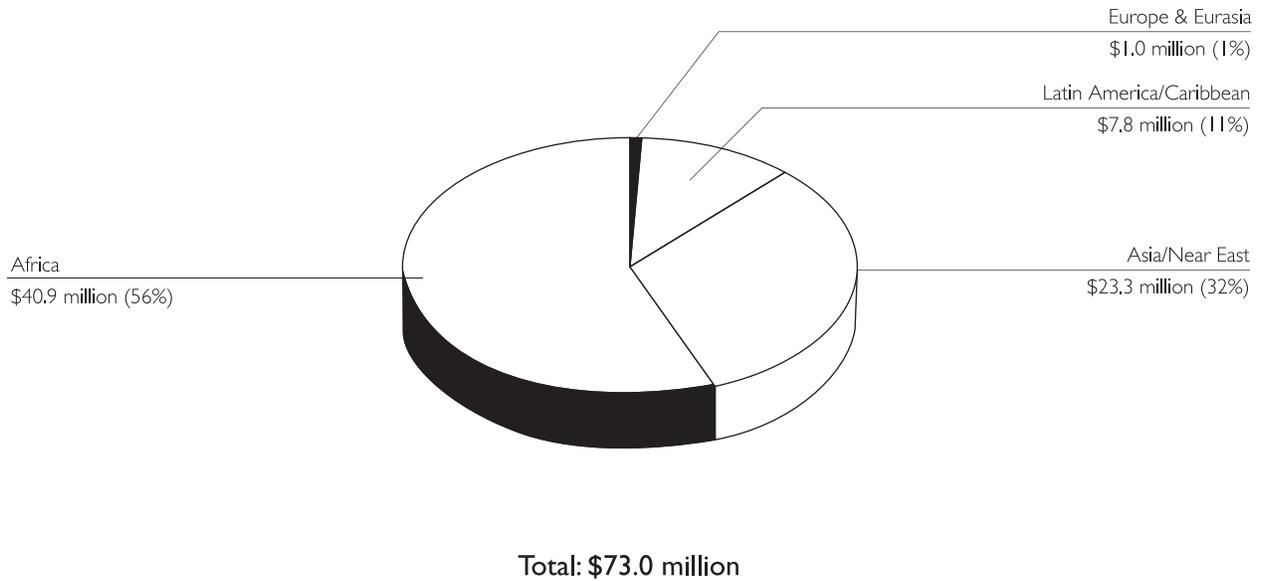


Note: Condom shipment values include both male and female condoms.

Source: NEWVERN Information System, Office of Population and Reproductive Health, May 2005.

Figure 3

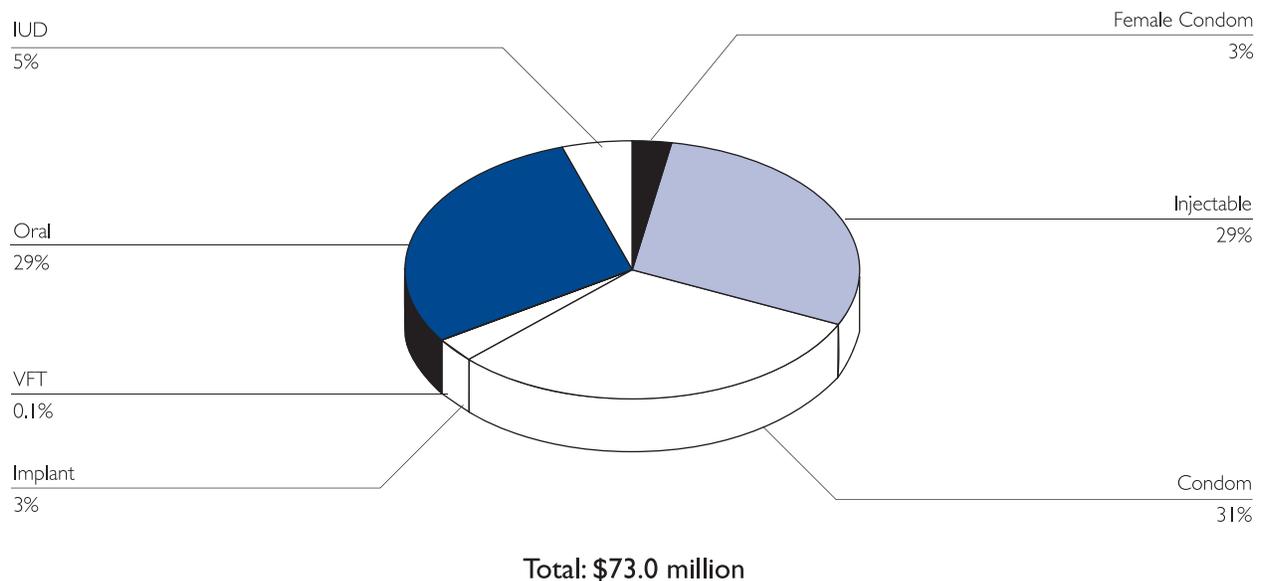
### Contraceptive & Condom Shipment Values by Region FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

Figure 4

### Worldwide Contraceptive & Condom Shipment Values by Method FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

## Contraceptive and Condom Shipments to Africa

Twenty-seven countries in USAID's Africa region received contraceptive and condom shipments in FY 2004. In FY 2003, 29 countries received shipments. The total value of contraceptive shipments was \$40.9 million, an increase from \$31.9 million in FY 2003. As shown in figure 5, there has been an upward trend in contraceptive and condom shipment values to the Africa region over the past 11 years.

Accounting for 49% of the regional shipment value, the five countries with the largest shipment values were Ethiopia (\$4.7 million), Uganda (\$4.2 million), the Democratic Republic of the Congo (DR Congo) (\$4.1 million), and Tanzania and Zimbabwe (about \$3.5 million each) (figure 6). Of these countries, Ethiopia and Zimbabwe were also among the top five countries in shipment values in FY 2003. Countries with more than 100% increases between FY 2003 and FY 2004 were DR Congo, Lesotho, Liberia, Malawi, Tanzania, and Uganda. Some of these increases were due to emergency shipments requested by the country. Namibia, Benin, Zambia, Congo (Brazzaville), and Mauritania were recipients in FY 2003 but did not receive any commodities in FY 2004. Mali, Lesotho, Cote d'Ivoire, and Togo had greater than 50% declines in commodity shipments in FY 2004.

As shown in figure 7, FY 2004 condom shipments to Africa, valued at \$15.8 million, represented 39% of the total value of contraceptive commodity shipments to the region. Injectables represented 28%, followed by oral contraceptives at 22% and then by implants and female condoms at 5% each. IUDs represented 1% and VFTs (0.1%). In FY 2003, condoms also had the highest share of value; however, the share and total value declined in FY 2004. Between the two fiscal years, female condom shipments significantly rose in value from 0.3% to 5%.

Figure 5

**Trends in Contraceptive & Condom Shipment Values to Africa  
FY 1994–2004 (US\$ millions)**

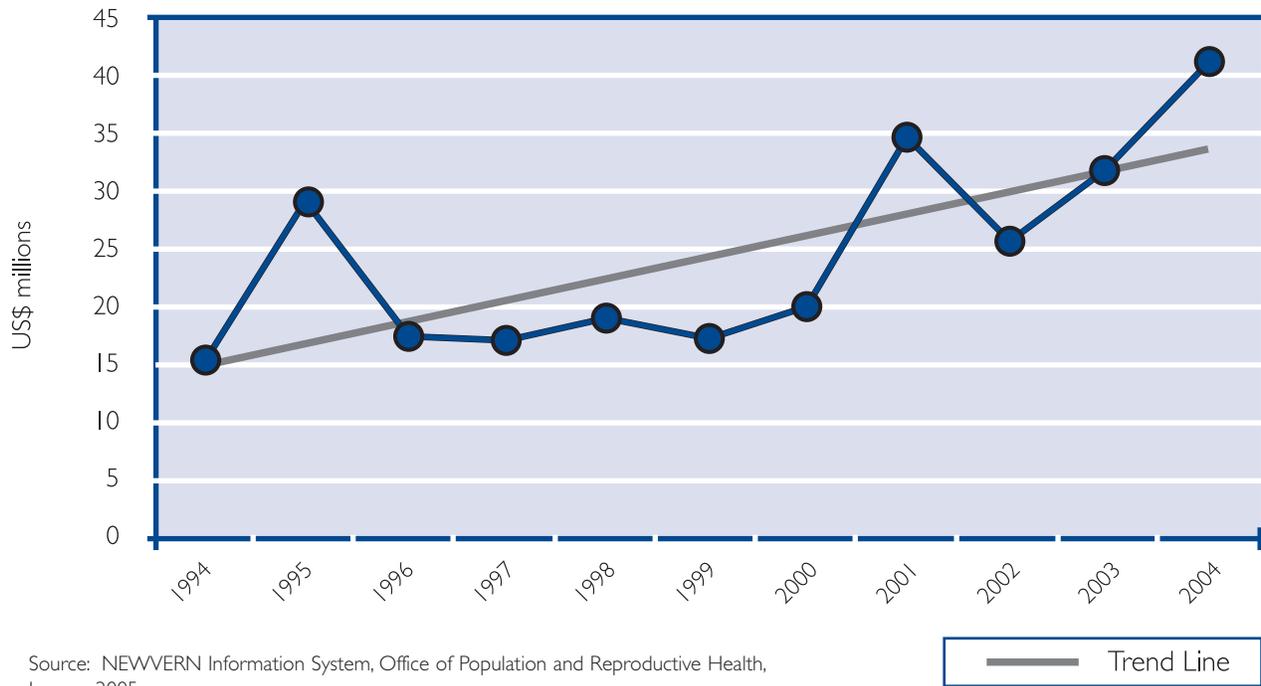
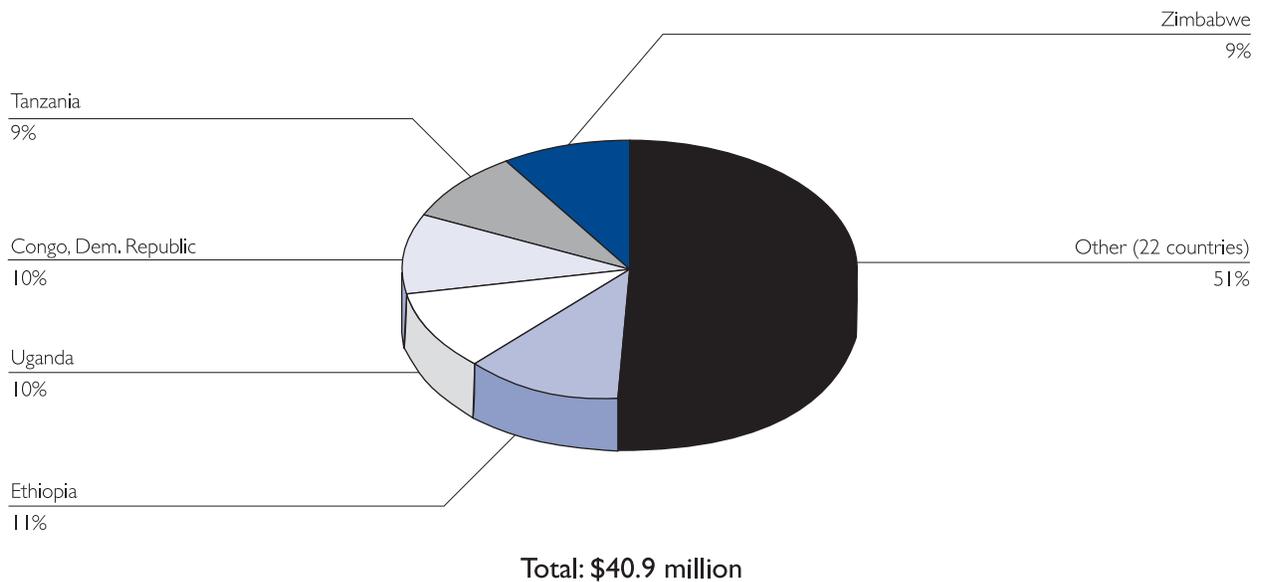
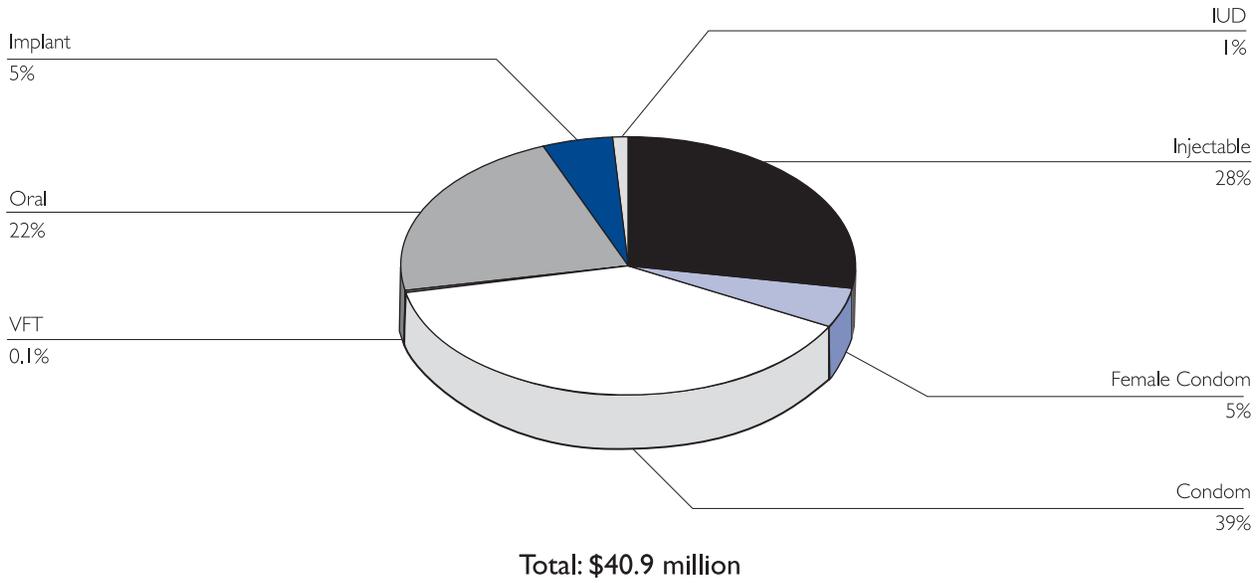


Figure 6

**Contraceptive & Condom Shipment Values to Africa  
Major Receiving Countries  
FY 2004**



### Contraceptive & Condom Shipment Values to Africa by Method FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

## Contraceptive and Condom Shipments to Asia/Near East

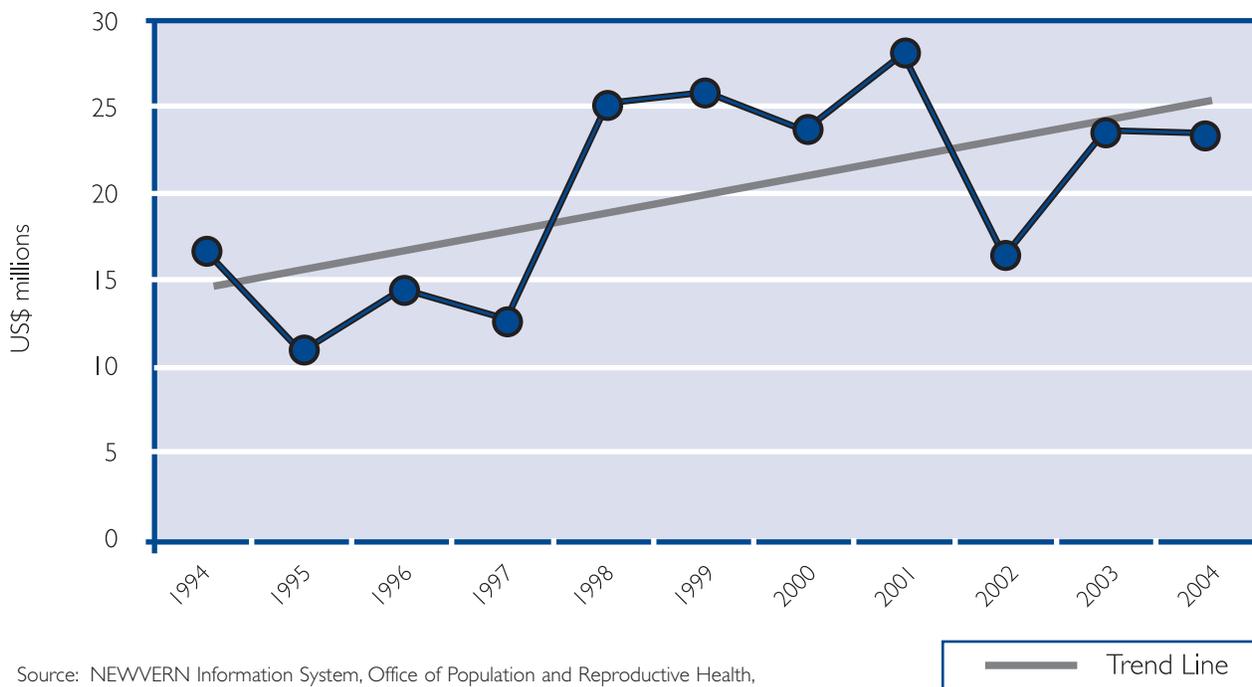
Thirteen countries in USAID's ANE region received contraceptive and condom shipments in FY 2004, compared with 12 countries in FY 2003. West Bank/Gaza was the new recipient. The total value of contraceptive shipments to the region was \$23.3 million, a slight decline from FY 2003. Part of this decline was due to the phasing out of shipments to the Philippines. Despite the decline, ANE contraceptive and condom shipment values have maintained an upward trend over the past 11 years (figure 8).

In FY 2004, Egypt (\$7.4 million), Bangladesh (\$7.1 million), Nepal (\$2.9 million), and the Philippines (\$2.5 million) accounted for 86% of the value of regional contraceptive shipments (figure 9). These four countries also accounted for the largest share of contraceptive shipments to the region in FY 2003. While shipment values to Bangladesh, the Philippines, Indonesia, Morocco, and Vietnam declined in FY 2004, shipments to Afghanistan, Egypt, Jordan, Laos,

Myanmar, Nepal, and Pakistan increased, although not enough to offset the decline in the total regional shipment value. Despite the phase-out of condom and contraceptive shipments to Indonesia and Morocco, these countries have continued to receive emergency shipments.

As presented in figure 10, oral contraceptives accounted for the largest share of regional shipment value in FY 2004 (39 percent), followed by injectables (27%), condoms (20%), and IUDs (14%). Compared with the FY 2003 method mix, implant and female condom shipment values fell to zero, while the largest increase in value was for IUDs (25%). Condom shipment values increased by 3.3%.

### Trends in Contraceptive & Condom Shipment Values to Asia/Near East FY 1994–2004 (US\$ millions)



### Contraceptive & Condom Shipment Values to Asia/Near East Major Receiving Countries FY 2004

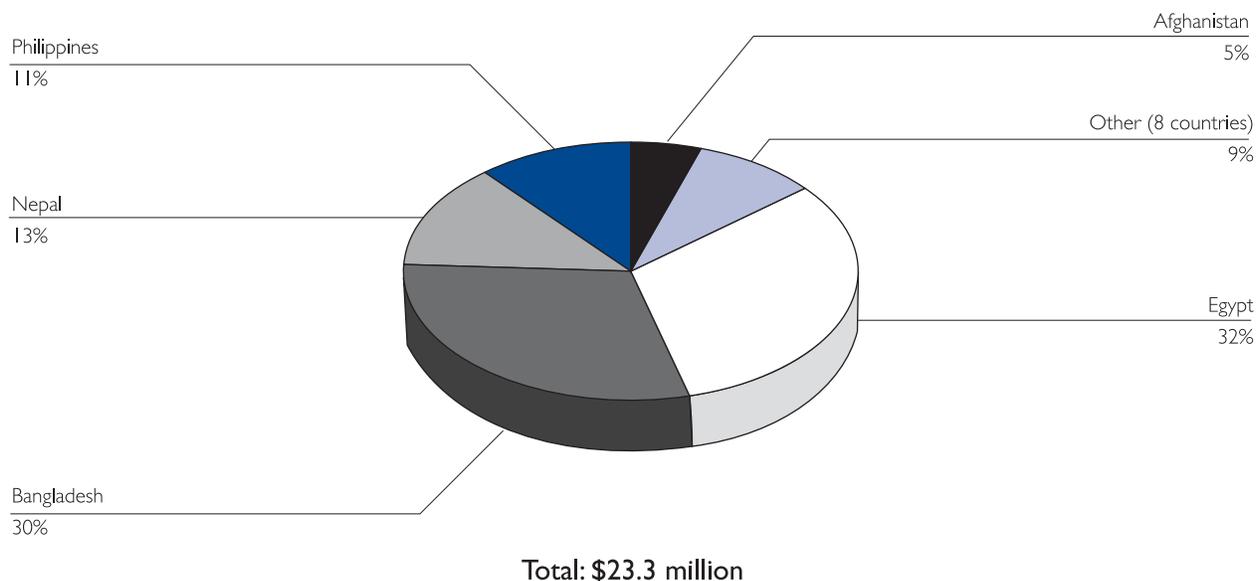
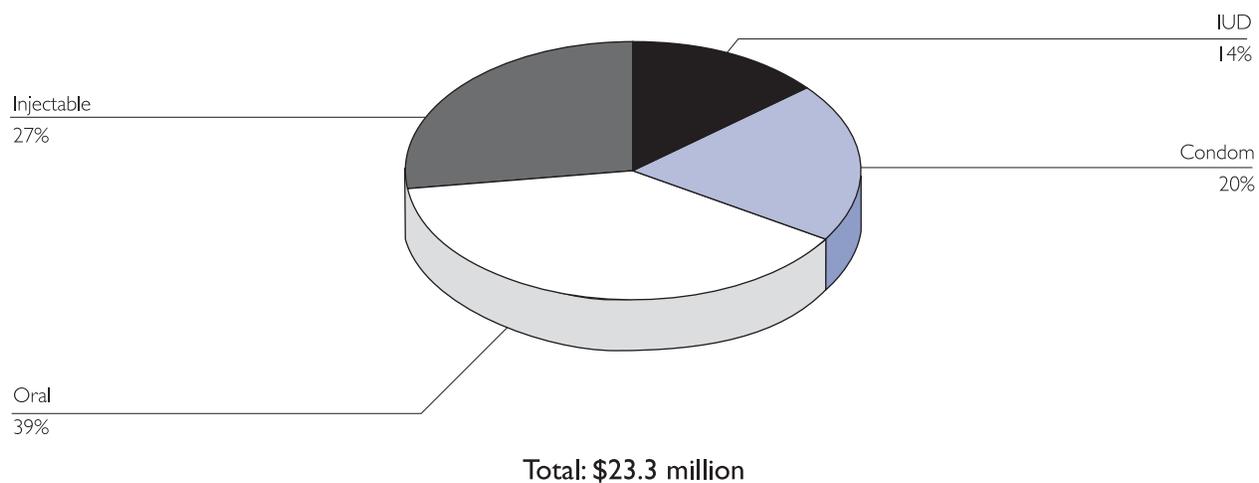


Figure 10

### Contraceptive & Condom Shipment Values to Asia/Near East by Method FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

## Contraceptive and Condom Shipments to Europe & Eurasia

Two countries in USAID's E&E region received contraceptive and condom shipments in FY 2004. The total value of contraceptive shipments was \$968,638, compared with \$942,649 in FY 2003. As shown in figure 11, there has been a downward trend in E&E contraceptive and condom shipment values over the past 11 years.

In FY 2004, Romania received 99% of the total value of contraceptive shipments to the E&E region while Azerbaijan (a new addition) received the remaining 1% (figure 12). In FY 2003, Romania accounted for 81%. Kyrgyzstan, Tajikistan, and Albania were recipients in FY 2003 but did not receive any commodities in FY 2004. Romania is the only country in the region that received contraceptive and condom shipments in FYs 2002, 2003, and 2004.

With regard to method mix (figure 13), orals (65%) accounted for the largest share of FY 2004 E&E shipment values, followed by condoms (30%), injectables (3%), and IUDs (2%). By contrast, in FY 2003 condoms accounted for the majority of the shipment value (56%), followed by injectables (32%), orals (11%), and IUDs (2%).

Figure 11

### Trends in Contraceptive & Condom Shipment Values to Europe & Eurasia FY 1994–2004 (US\$ millions)

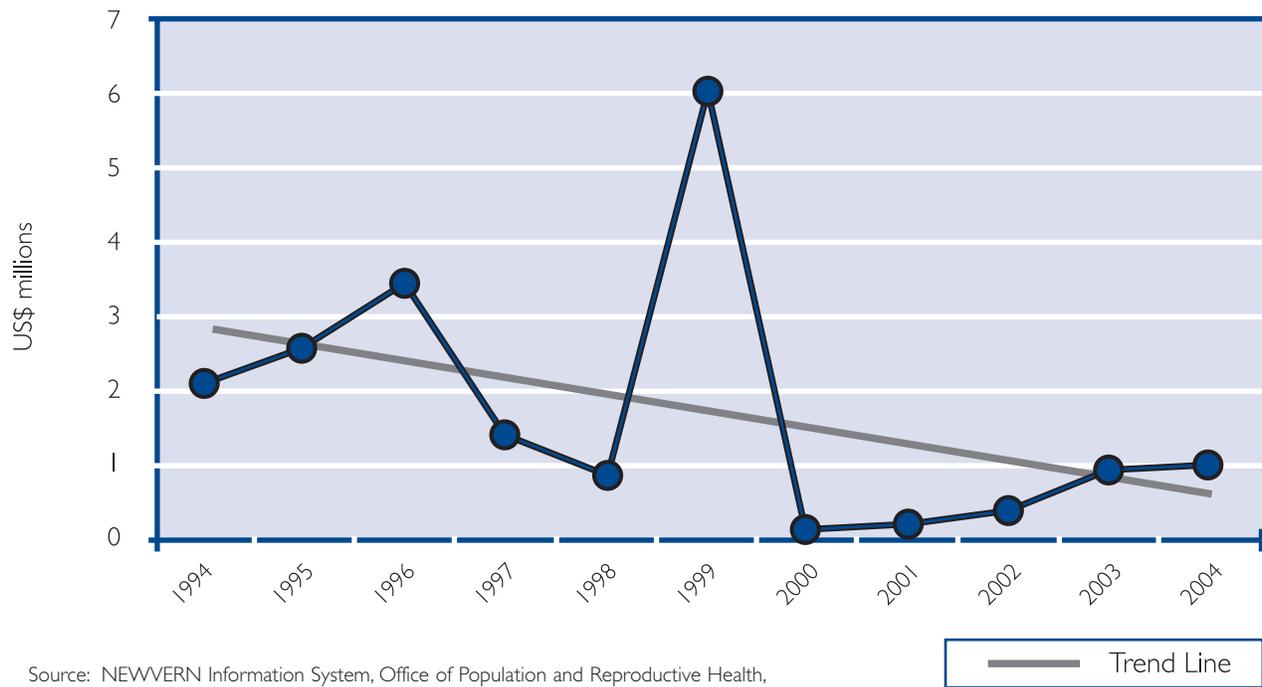
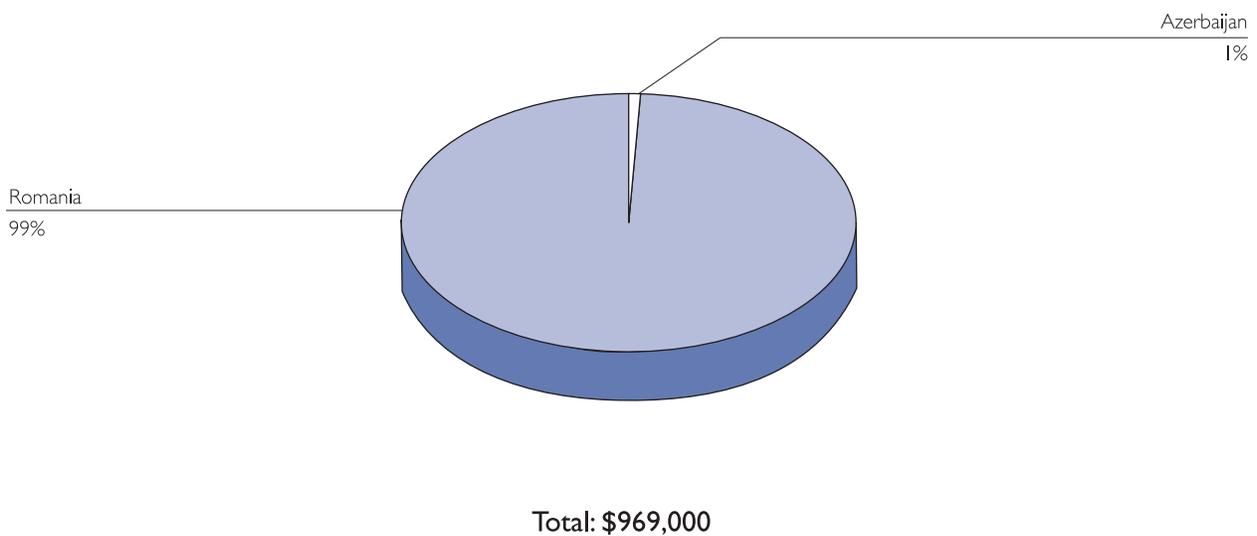


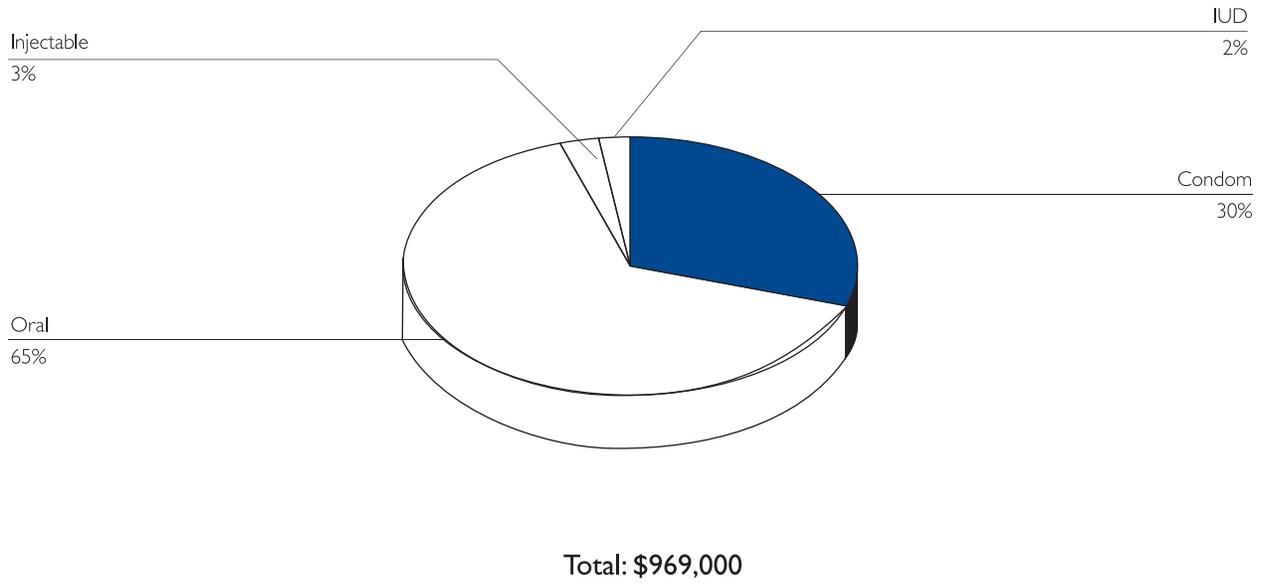
Figure 12

### Contraceptive & Condom Shipment Values to Europe & Eurasia Major Receiving Countries FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

### Contraceptive & Condom Shipment Values to Europe & Eurasia by Method FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

## Contraceptive and Condom Shipments to Latin America/Caribbean

Thirteen countries in USAID's LAC region received contraceptive and condom shipments in FY 2004, compared with 11 countries in FY 2003. St. Kitts & Nevis, Trinidad & Tobago, and Jamaica were new recipients in FY 2004. Guyana was a recipient in FY 2003 but did not receive any commodities in FY 2004. The total value of contraceptive shipments was \$7.8 million, compared with \$8.8 million in FY 2003, an 11% decrease. As seen in figure 14, LAC contraceptive and condom shipment values show a downward trend over the past 11 years.

In FY 2004, five countries accounted for 68% of the total contraceptive shipment value to the region (figure 15). These countries were Haiti (\$1.5 million), Bolivia and Peru (each nearly \$1.2 million), Honduras (\$808,429), and El Salvador (\$709,724). This differs from the distribution of share values in FY 2003, when Nicaragua, not El Salvador, was in the top five. Between FY 2003 and FY 2004, contraceptive and condom shipment values to Nicaragua, Peru, and Honduras underwent large declines (42%, 30%, and 27%, respectively). The declines for these countries were primarily due to the phase-out of

USAID-donated contraceptive supplies. Haiti also showed a decline in contraceptive shipment values.

With regard to method mix (figure 16), injectables, oral contraceptives, and condoms accounted for the largest shares of contraceptive shipment values in both FY 2003 and FY 2004. In FY 2004, injectables accounted for 42% of shipment values and orals and condoms 26% each. Between FY 2003 and FY 2004, female condoms showed the largest increase in shipment values from \$24,848 to \$127,275. During the same period, IUDs also showed an increase (27%). The largest decrease in shipment values occurred in VFTs (93%), a result of USAID's phasing out this method. Implants (52%) and orals (19%) showed the next largest decline. Condoms and injectables also decreased in shipment values by 8.6% and 7.1% respectively.

Figure 14

**Trends in Contraceptive & Condom Shipment Values to Latin America/Caribbean  
FY 1994–2004 (US\$ millions)**

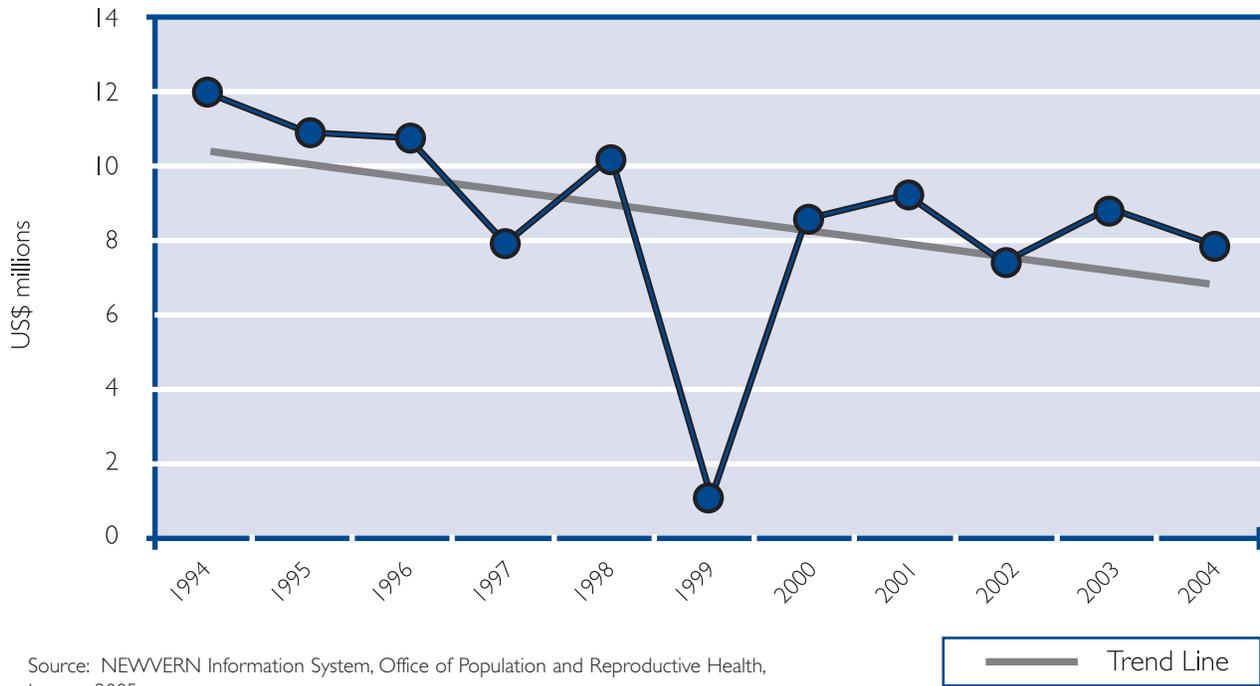
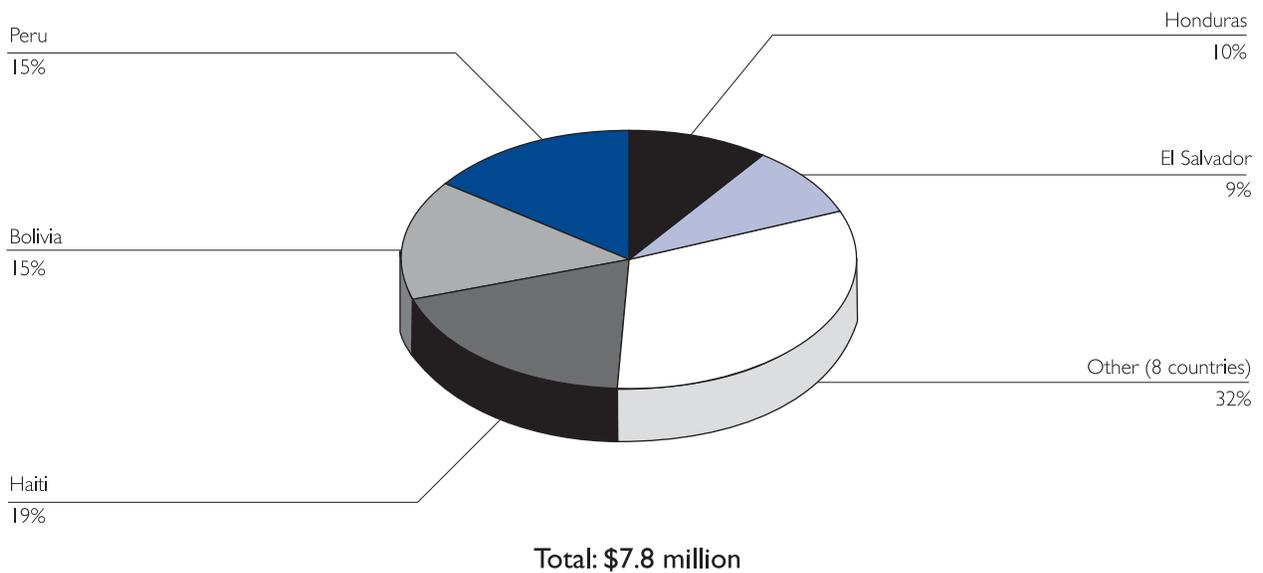


Figure 15

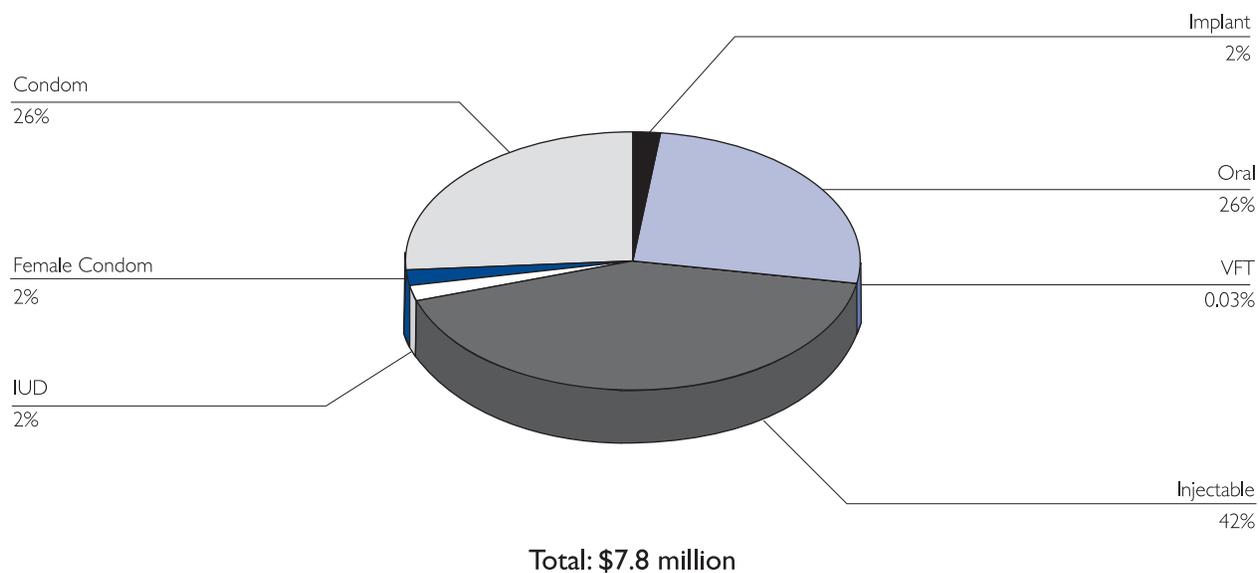
**Contraceptive & Condom Shipment Values to Latin America/Caribbean  
Major Receiving Countries  
FY 2004**



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

Figure 16

### Contraceptive & Condom Shipment Values to Latin America/Caribbean by Method FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

## Affiliation Report

Social marketing and governmental/parastatal programs were the largest recipients of USAID contraceptives and condoms in FY 2004, receiving 55% and 34% of total shipment values respectively (figure 17). The value of contraceptives and condoms shipped to social marketing programs totaled \$40.4 million, while governmental/parastatal programs received \$25 million in value. The remaining programs – disaster relief, research, and nongovernmental organization (NGO) programs – received 11% (\$7.6 million) of the worldwide contraceptives provided by USAID. Compared with FY 2003, the value of contraceptive shipments to disaster relief programs increased from about \$800,000 to \$1.8 million in FY 2004. The value of commodities to governmental/parastatal programs increased by 1.3% while the value of shipments to social marketing programs rose by 25%. The value of commodities going to research programs decreased by 32% and to NGO programs by 20%.

In the Africa region, social marketing programs (\$26 million) received 63% of the value of commodity shipments, followed by governmental/parastatal programs (\$11 million, or 27%) (figure 18). Compared with FY 2003, commodities to disaster relief programs increased significantly by 128%. Research program commodities declined by 32% between FY 2003 and FY 2004, while shipment values to NGO programs decreased by 34%.

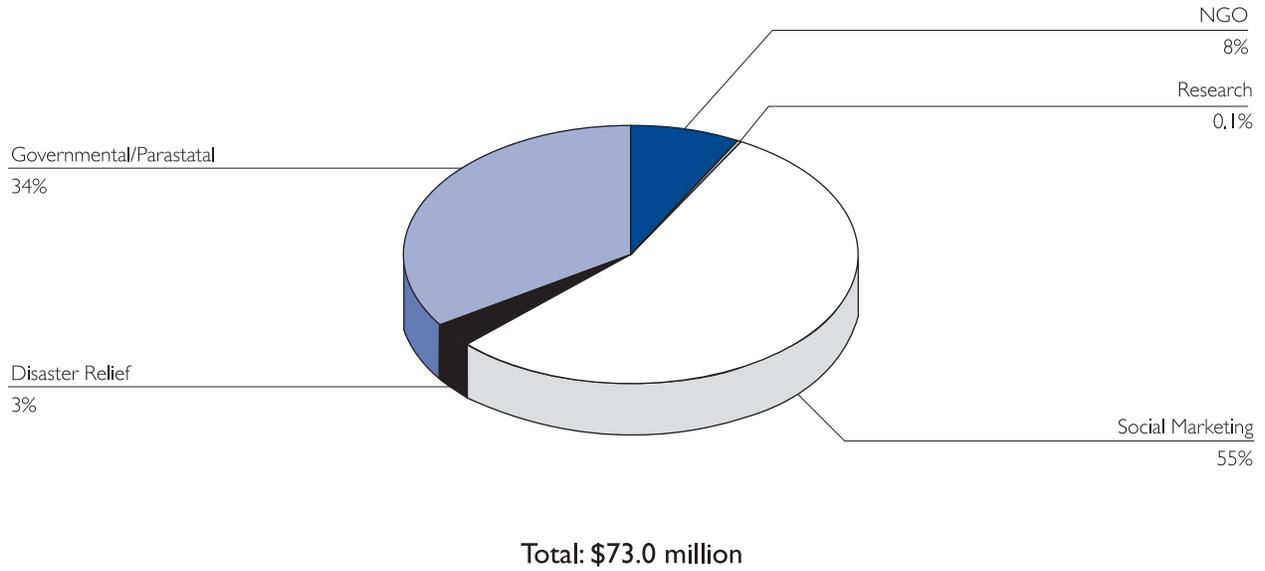
In the ANE region, only governmental/parastatal and social marketing programs received USAID support for contraceptives and condoms in FY 2004 (figure 19). Social marketing received 56% (\$13 million) while governmental/parastatal programs received 44% (\$10.3 million) of commodity shipments by value. Compared with FY 2003, the value of commodities shipped to NGO programs in the region declined from 0.9% to 0%. The share of shipment values to governmental/parastatal programs declined by 7.3% while social marketing programs increased by 7.6%.

For the E&E region, 99% of the value of contraceptive and condom shipments in FY 2004 went to NGO programs, while the remaining 1% was allocated to disaster relief programs (figure 20). Compared with FY 2003, the value of shipments to governmental/parastatal programs declined from 5.7% to 0%, while the value of shipments to NGO programs increased by 7.9%.

In the LAC region, 47% of the value of contraceptive and condom shipments in FY 2004 went to governmental/parastatal programs (\$3.7 million); 33% went to NGOs (\$2.6 million); and 20% to social marketing programs (\$1.5 million) (figure 21). Compared with FY 2003, the largest increase in shipment values occurred in social marketing programs (27.6%) while governmental/parastatal programs showed a decline of 24.2%. NGO programs showed a 4.6% decrease.

Figure 17

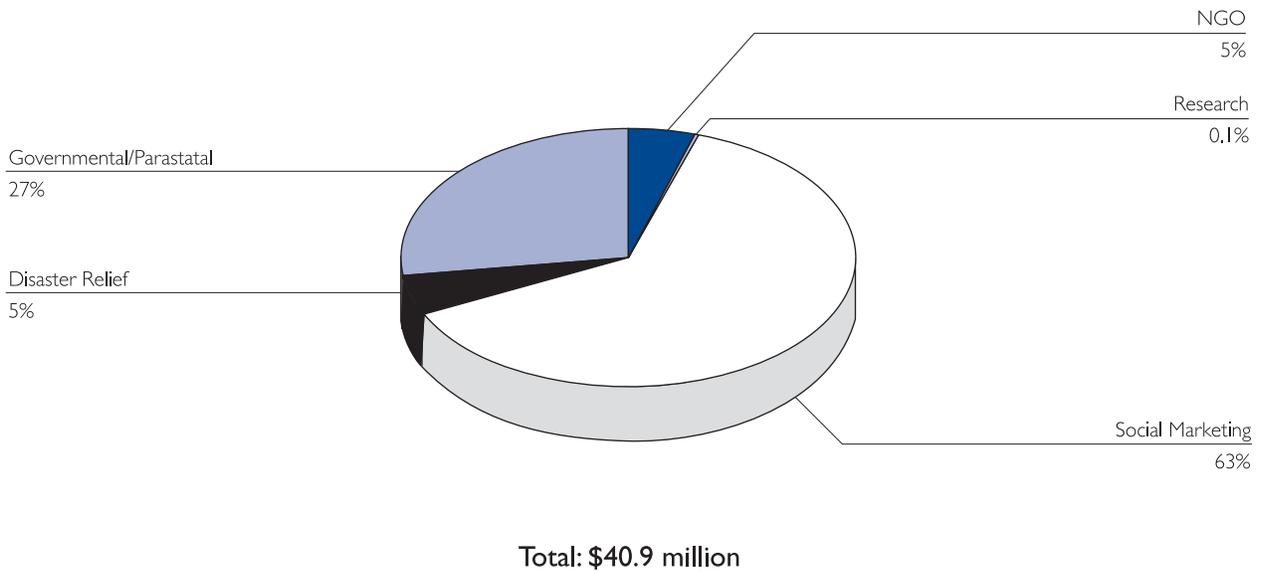
### Affiliation Report: Worldwide FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

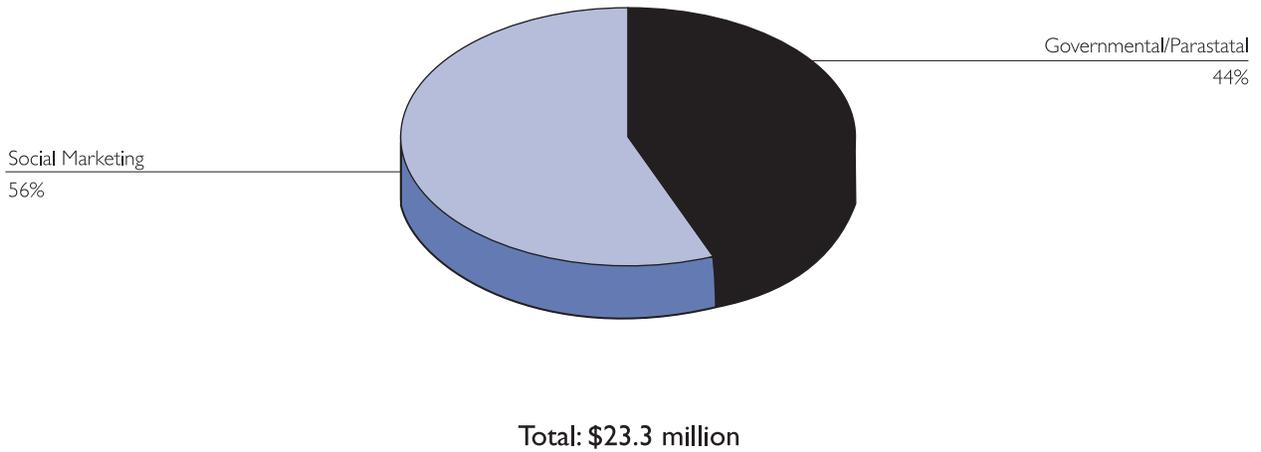
Figure 18

### Affiliation Report: Africa FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

### Affiliation Report: Asia/Near East FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

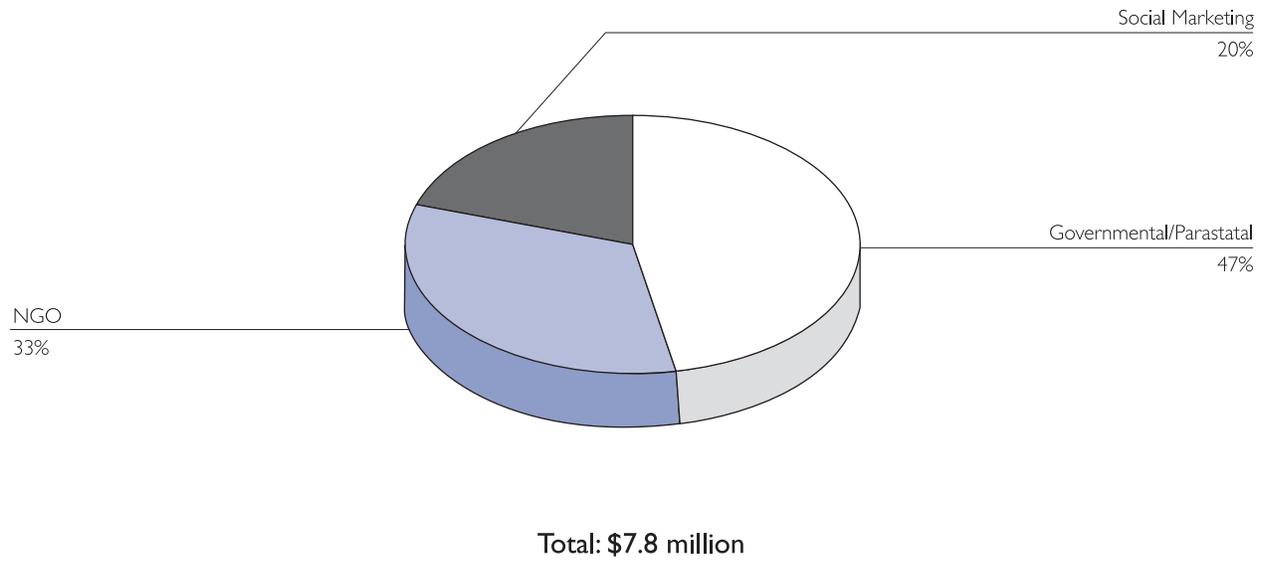
### Affiliation Report: Europe & Eurasia FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

Figure 21

### Affiliation Report: Latin America/Caribbean FY 2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

## Trends in USAID Contraceptive and Condom Shipments

The total value of worldwide USAID contraceptive and condom shipments increased by 12% between FY 2003 and FY 2004, climbing from \$65.1 million to \$73 million.

### Condoms

After increasing in FY 2003, the value of condom shipments in FY 2004 decreased slightly by 2% to a total value of \$23 million. The number of pieces shipped worldwide in FY 2004 (422 million) reached approximately the same level as in 1994, 1998, and 2001 (figure 22). Since peaking in 1995, there has been a gradual decline in shipments of condoms worldwide. Figure 22 reflects two independent trends, one through 2002 and one beginning in 2003 due to the creation of the Commodity Fund, which provided condoms for HIV/AIDS free to Mission programs. The majority of condom shipments have gone to Africa in response to the HIV/AIDS epidemic.

### Oral Contraceptives

Oral contraceptive shipments have gradually increased since FY 2000 after a few years of fluctuating shipment levels (figure 23). Over the past decade, oral contraceptive shipment levels have steadied and remained on average at approximately 70 million cycles per year. In FY 2003 and FY 2004, oral contraceptive shipments surpassed 80 million cycles, and the value of shipments increased by 4.6%. The ANE and Africa regions have been the largest recipients of oral contraceptives.

### Injectables

In contrast to condoms and oral contraceptives, shipments of injectables have increased sharply since FY 1994 (figure 24). One-quarter of a million injectable doses were delivered worldwide in FY 1994, and this figure increased to 19 million doses by FY 2004. Between FY 2003 and FY 2004, there was a 20% increase from 16.1 million to 19.4 million doses shipped worldwide. The ANE and Africa regions have been the largest recipients of injectables.

### Implants

USAID's implant shipments over the past decade have generally remained stable, usually numbering between 50,000 and 100,000 sets per year (figure 25). The highest number of implant sets (300,400) was delivered in FY 1999, which included a significant contribution to Indonesia (231,000 implants) in response to its financial crisis and the public sector's need for commodity assistance. After declining in FY 2003, the number of sets shipped in FY 2004 rose to 86,400 sets, a 17% increase from the FY 2003 figure of 73,650. The Africa region was the primary recipient of implants over the past decade.

### Intrauterine Devices

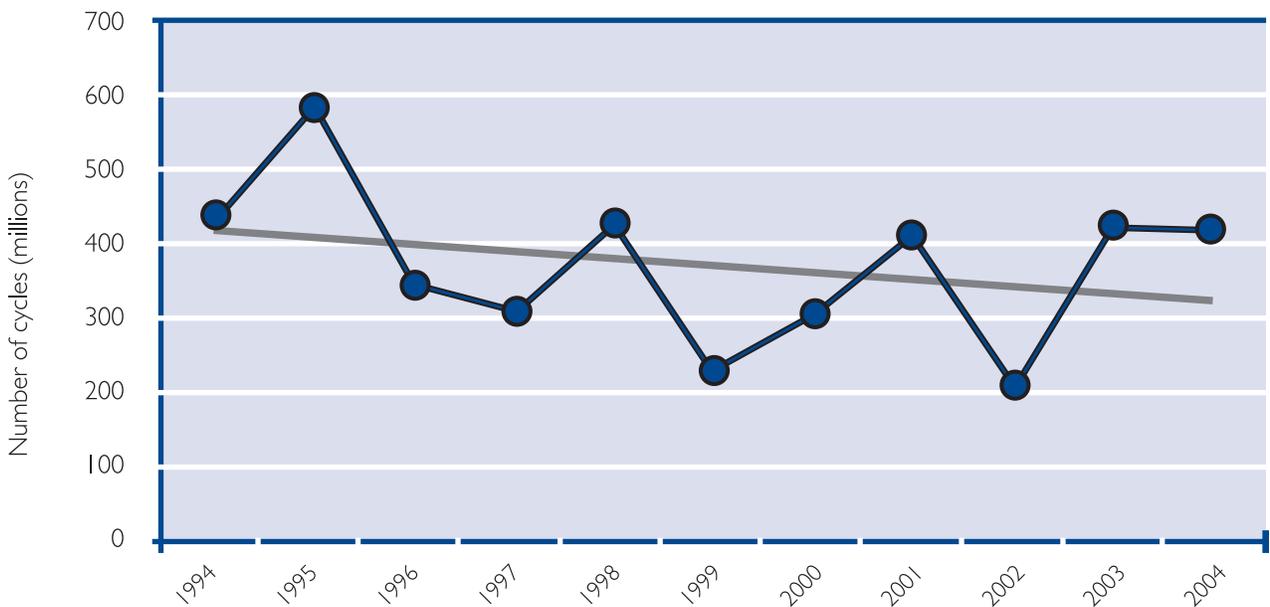
Overall, USAID's IUD shipments remain below the levels of the late 1990s (figure 26). One reason for this long-term decline is the 1999 phase-out of IUD donations to Turkey, which had received a large percentage of the IUDs procured by USAID. In FY 2004, 2.2 million units were distributed worldwide, with a value of \$3.8 million, representing an 18.7% increase in value from FY 2003. The Africa and ANE regions have been the largest recipients of IUDs.

### Vaginal Foaming Tablets

USAID's shipments of VFTs sharply declined over the last decade (figure 27). In FY 1994, approximately 16 million tablets were distributed worldwide, but by FY 2004 shipments had decreased to 321,600 tablets. Compared with FY 2003, there was an 89.7% decline in tablets shipped worldwide in FY 2004. USAID has phased out its procurement of this method, and the last shipment took place in calendar year 2004. For the past few years, the Africa and LAC regions were the only recipients of VFTs.

Figure 22

### Worldwide Condom Shipments FY 1994–2004



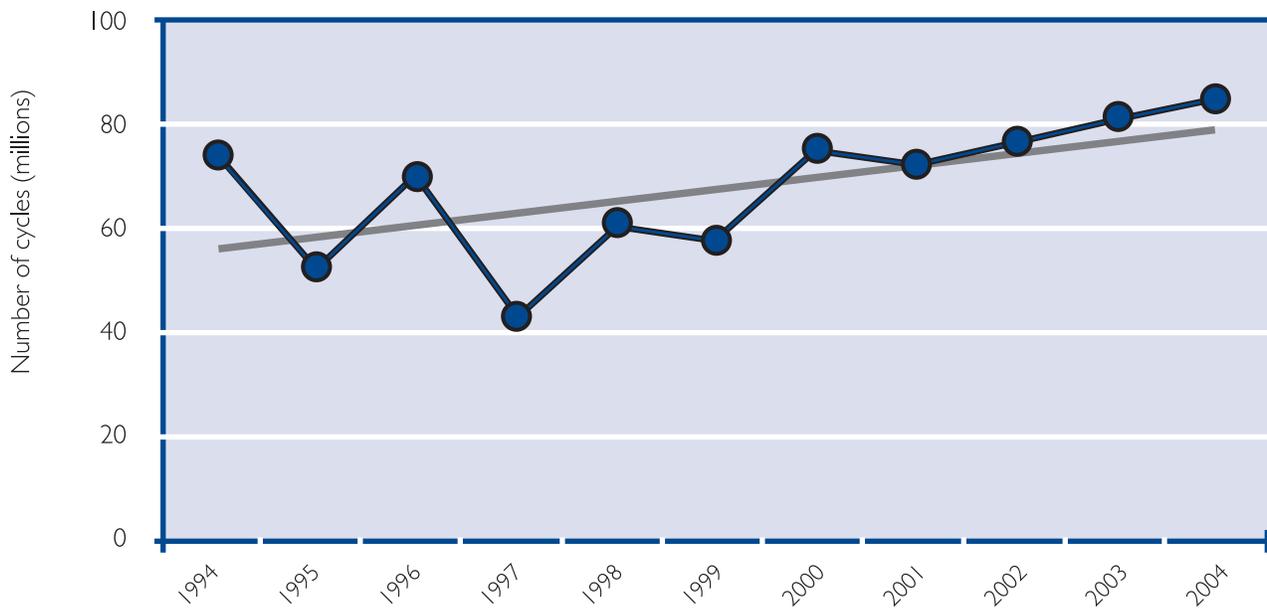
Note: Condom shipments include both male and female condoms.

Source: NEWVERN Information System, Office of Population and Reproductive Health, May 2005.

— Trend Line

Figure 23

### Worldwide Oral Contraceptive Shipments FY 1994–2004

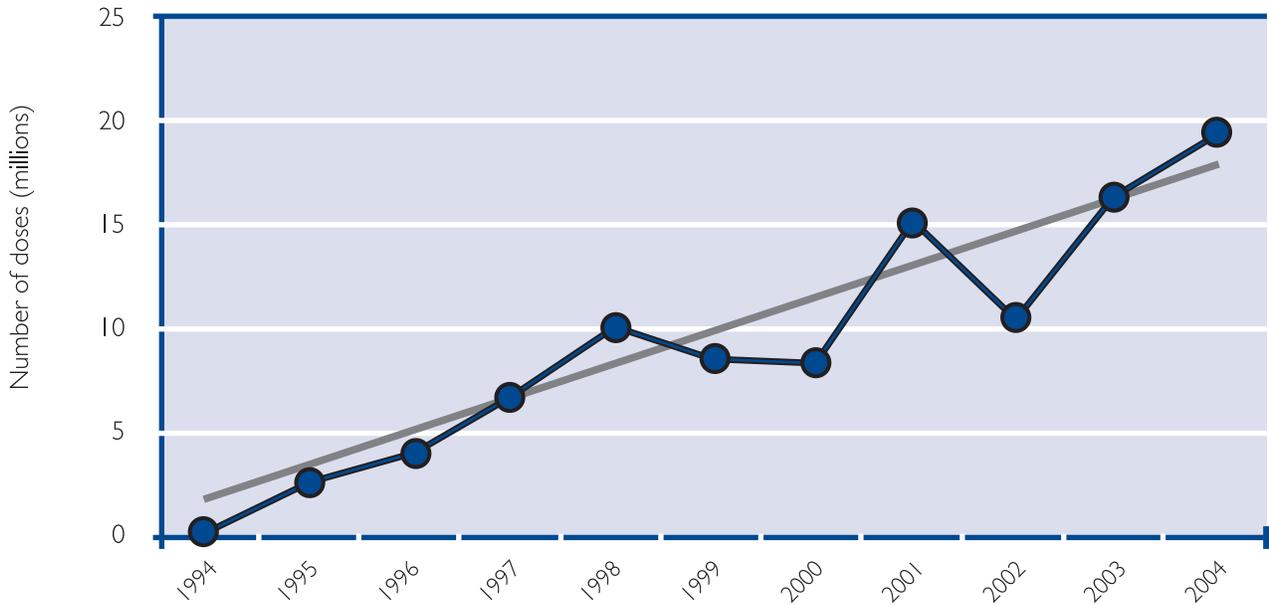


Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

— Trend Line

Figure 24

### Worldwide Injectable Contraceptive Shipments FY 1994–2004

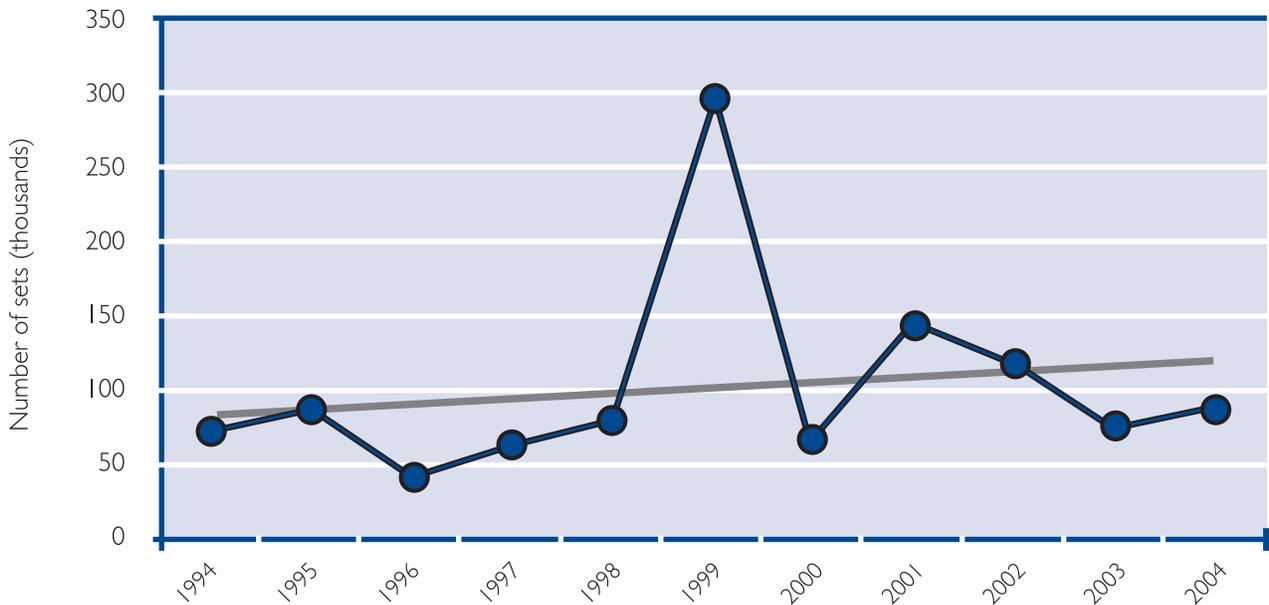


Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

— Trend Line

Figure 25

### Worldwide Contraceptive Implant Shipments FY 1994–2004



Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

— Trend Line

Figure 26

### Worldwide Intrauterine Device Shipments FY 1994–2004

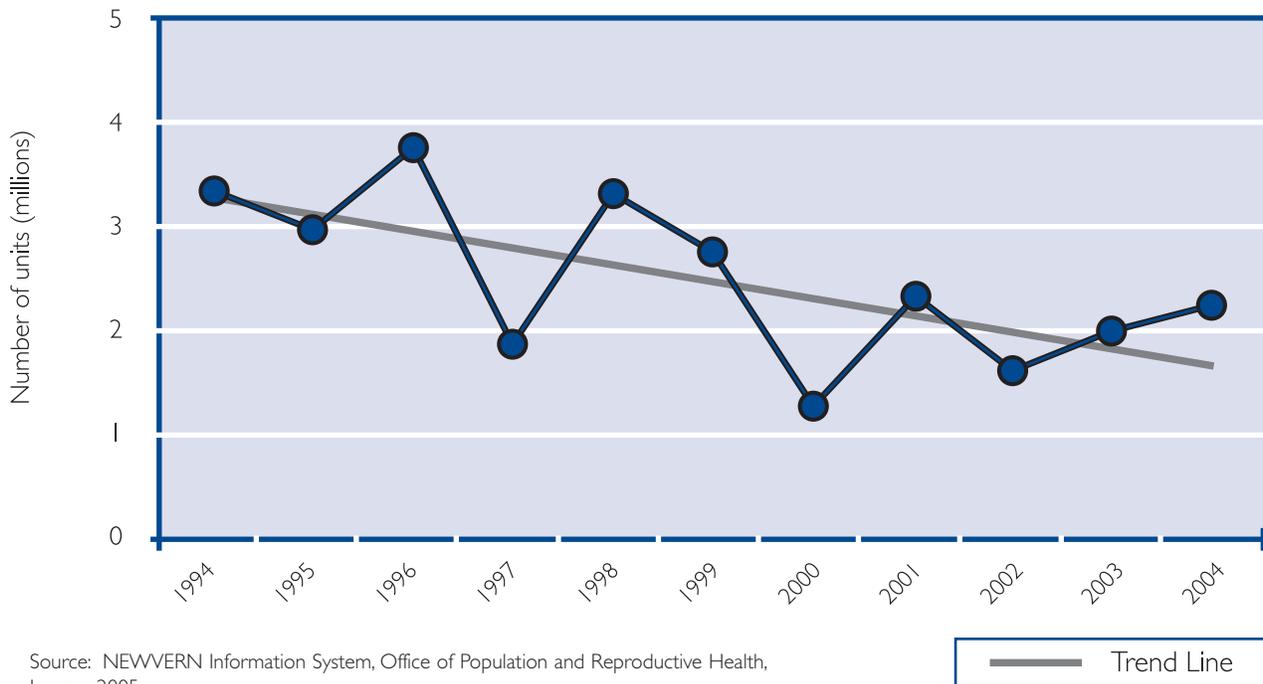
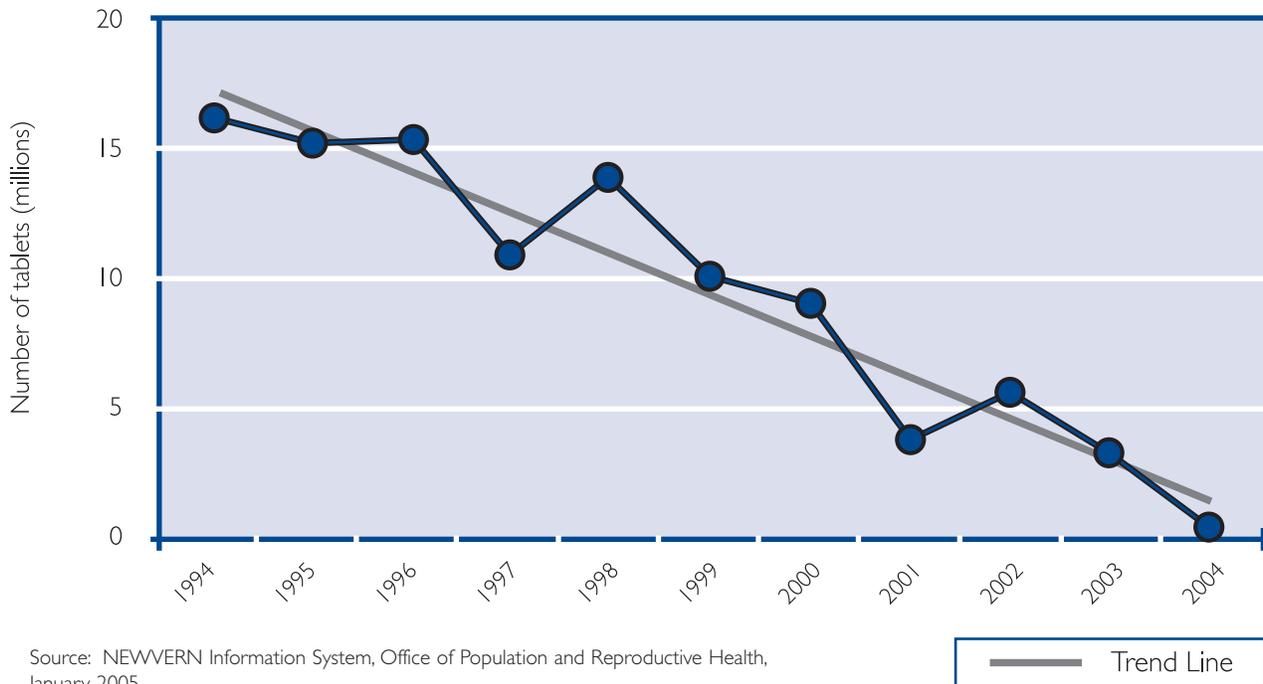


Figure 27

### Worldwide Vaginal Foaming Tablet Shipments FY 1994–2004



## Tables



### Worldwide Contraceptive & Condom Shipments by Region and Method FY 2004

Region		Condom	IUD	Oral	VFT	Implant	Injectable	Female Condom	Total
Africa	Value	\$15,827,984	\$352,141	\$9,166,263	\$44,239	\$2,052,613	\$11,591,305	\$1,865,764	\$40,900,309
	Quantity	290,277,000	195,600	36,490,800	302,400	80,800	10,843,600	2,763,000	
Asia/Near East	Value	\$4,663,489	\$3,256,026	\$9,135,773	\$0	\$0	\$6,257,870	\$0	\$23,313,158
	Quantity	91,956,000	1,887,200	37,287,600	0	0	5,623,600	0	
Europe & Eurasia	Value	\$285,753	\$22,206	\$633,666	\$0	\$0	\$27,013	\$0	\$968,638
	Quantity	5,472,000	11,800	2,582,400	0	0	24,000	0	
Latin America/ Caribbean	Value	\$2,078,811	\$200,904	\$2,003,588	\$2,638	\$143,851	\$3,271,910	\$127,275	\$7,828,977
	Quantity	34,272,000	113,600	8,017,200	19,200	5,600	2,881,600	180,000	
Total	Value	\$22,856,037	\$3,831,277	\$20,939,290	\$46,877	\$2,196,464	\$21,148,098	\$1,993,039	\$73,011,082
	Quantity	421,977,000	2,208,200	84,378,000	321,600	86,400	19,372,800	2,943,000	

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

### Value of Contraceptives & Condoms Shipped to Africa by Country FY 2004 (US\$)

Country	Condom	IUD	Oral	VFT	Implant	Injectable	Female Condom	Total
Angola	1,039,825	11,747	27,226	-	-	26,901	32,720	1,138,419
Burkina Faso	20,929	-	121,772	-	495,468	-	50,527	688,696
Burundi	91,262	-	-	-	-	-	-	91,262
Cameroon	152,052	4,538	419,058	-	206,607	383,561	146,124	1,311,940
Congo, Dem. Republic of	2,313,512	101,217	315,370	-	-	824,928	510,557	4,065,584
Cote d'Ivoire	-	-	-	-	-	-	14,778	14,778
Eritrea	417,415	-	-	-	-	-	-	417,415
Ethiopia	2,681,544	-	1,054,102	-	107,578	864,851	-	4,708,075
Ghana	50,141	12,087	1,620,701	-	405,925	1,121,600	-	3,210,454
Guinea	535,015	-	50,605	-	-	-	-	585,620
Kenya	-	167,906	-	-	-	-	-	167,906
Lesotho	595,192	-	-	-	-	-	3,577	598,769
Liberia	549,582	-	284,919	-	-	84,719	-	919,220
Madagascar	688,221	-	657,868	-	-	1,089,626	-	2,435,715
Malawi	1,011,736	407	199,545	-	220,724	-	-	1,432,412
Mali	258,823	-	84,526	27,451	-	425,391	53,698	849,889
Mozambique	95,374	31,211	-	-	-	1,012,127	-	1,138,712
Nigeria	-	-	2,223,544	-	-	811,304	-	3,034,848
Rwanda	82,293	-	34,603	-	-	75,970	-	192,866
Senegal	585,961	13,557	241,607	16,788	32,738	304,151	158,204	1,353,006
Sierra Leone	179,291	-	-	-	-	-	-	179,291
South Africa	1,670	-	-	-	-	-	7,154	8,824
Swaziland	501,504	-	-	-	-	-	3,577	505,081
Tanzania	-	-	897,453	-	252,658	2,197,066	192,988	3,540,165
Togo	297,713	-	23,545	-	101,480	184,311	40,810	647,859
Uganda	1,323,883	9,471	760,962	-	229,435	1,849,809	-	4,173,560
Zimbabwe	2,355,046	-	148,857	-	-	334,990	651,050	3,489,943
<b>Total</b>	<b>15,827,984</b>	<b>352,141</b>	<b>9,166,263</b>	<b>44,239</b>	<b>2,052,613</b>	<b>11,591,305</b>	<b>1,865,764</b>	<b>40,900,309</b>

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

## Quantity of Contraceptives & Condoms Shipped to Africa by Country FY 2004

Country	Condom Pieces	IUD Units	Oral Cycles	VFT Tablets	Implant Sets	Injectable Doses	Female Condom Pieces
Angola	20,328,000	5,000	84,000	-	-	20,000	41,000
Burkina Faso	294,000	-	441,600	-	19,600	-	70,000
Burundi	1,767,000	-	-	-	-	-	-
Cameroon	2,505,000	2,200	1,513,200	-	8,100	325,200	198,000
Congo, Dem. Republic of	41,364,000	55,000	1,263,600	-	-	912,000	755,000
Cote d'Ivoire	-	-	-	-	-	-	20,000
Eritrea	7,254,000	-	-	-	-	-	-
Ethiopia	57,717,000	-	4,024,800	-	4,200	861,200	-
Ghana	720,000	7,000	6,657,600	-	16,000	1,014,400	-
Guinea	11,580,000	-	216,000	-	-	-	-
Kenya	-	96,000	-	-	-	-	-
Lesotho	7,041,000	-	-	-	-	-	5,000
Liberia	7,740,000	-	1,035,600	-	-	76,000	-
Madagascar	11,541,000	-	2,656,800	-	-	1,092,200	-
Malawi	22,497,000	200	800,400	-	8,650	-	-
Mali	3,351,000	-	279,600	182,400	-	347,600	75,000
Mozambique	1,710,000	18,000	-	-	-	1,020,000	-
Nigeria	-	-	8,944,800	-	-	808,000	-
Rwanda	1,203,000	-	128,400	-	-	62,000	-
Senegal	10,074,000	7,200	976,800	120,000	1,250	292,600	240,000
Sierra Leone	3,003,000	-	-	-	-	-	-
South Africa	15,000	-	-	-	-	-	10,000
Swaziland	5,595,000	-	-	-	-	-	5,000
Tanzania	-	-	3,805,200	-	10,000	2,000,000	290,000
Togo	5,418,000	-	94,800	-	4,000	154,800	54,000
Uganda	23,574,000	5,000	2,967,600	-	9,000	1,557,600	-
Zimbabwe	43,986,000	-	600,000	-	-	300,000	1,000,000
<b>Total</b>	<b>290,277,000</b>	<b>195,600</b>	<b>36,490,800</b>	<b>302,400</b>	<b>80,800</b>	<b>10,843,600</b>	<b>2,763,000</b>

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

### Value of Contraceptives & Condoms Shipped to Asia/Near East by Country FY 2004 (US\$)

Country	Condom	IUD	Oral	VFT	Implant	Injectable	Female Condom	Total
Afghanistan	-	-	699,787	-	-	354,603	-	1,054,390
Bangladesh	357,648	-	6,323,575	-	-	382,992	-	7,064,215
Egypt	-	3,172,806	-	-	-	4,191,409	-	7,364,215
Indonesia	43,349	-	-	-	-	-	-	43,349
Jordan	101,512	74,147	188,748	-	-	29,923	-	394,330
Laos	431,621	-	-	-	-	-	-	431,621
Morocco	42,011	-	-	-	-	-	-	42,011
Myanmar	672,587	-	-	-	-	-	-	672,587
Nepal	2,186,606	2,946	197,717	-	-	539,904	-	2,927,173
Pakistan	557,946	-	-	-	-	-	-	557,946
Philippines	270,209	-	1,709,206	-	-	754,064	-	2,463,270
Vietnam	-	-	-	-	-	-	-	270,209
West Bank/Gaza	-	6,127	16,740	-	-	4,975	-	27,842
<b>Total</b>	<b>4,663,489</b>	<b>3,256,026</b>	<b>9,135,773</b>	<b>-</b>	<b>-</b>	<b>6,257,870</b>	<b>-</b>	<b>23,313,158</b>

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

### Quantity of Contraceptives & Condoms Shipped to Asia/Near East by Country FY 2004

Country	Condom Pieces	IUD Units	Oral Cycles	VFT Tablets	Implant Sets	Injectable Doses	Female Condom Pieces
Afghanistan	-	-	2,484,000	-	-	280,000	-
Bangladesh	6,654,000	-	25,929,600	-	-	360,000	-
Egypt	-	1,842,000	-	-	-	3,800,000	-
Indonesia	630,000	-	-	-	-	-	-
Jordan	1,500,000	40,000	722,400	-	-	26,000	-
Laos	9,000,000	-	-	-	-	-	-
Morocco	582,000	-	-	-	-	-	-
Myanmar	16,266,000	-	-	-	-	-	-
Nepal	41,907,000	1,600	812,400	-	-	475,200	-
Pakistan	10,416,000	-	-	-	-	-	-
Philippines	-	-	7,270,800	-	-	678,000	-
Vietnam	5,001,000	-	-	-	-	-	-
West Bank/Gaza	-	3,600	68,400	-	-	4,400	-
<b>Total</b>	<b>91,956,000</b>	<b>1,887,200</b>	<b>37,287,600</b>	<b>-</b>	<b>-</b>	<b>5,623,600</b>	<b>-</b>

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

Table 6

### Value of Contraceptives & Condoms Shipped to Europe & Eurasia by Country FY 2004 (US\$)

Country	Condom	IUD	Oral	VFT	Implant	Injectable	Female Condom	Total
Azerbaijan	3,671	4,357	855	-	-	-	-	8,883
Romania	282,082	17,849	632,811	-	-	27,013	-	959,755
<b>Total</b>	<b>285,753</b>	<b>22,206</b>	<b>633,666</b>	-	-	<b>27,013</b>	-	<b>968,638</b>

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

Table 7

### Quantity of Contraceptives & Condoms Shipped to Europe & Eurasia by Country FY 2004

Country	Condom Pieces	IUD Units	Oral Cycles	VFT Tablets	Implant Sets	Injectable Doses	Female Condom Pieces
Azerbaijan	42,000	1,800	2,400	-	-	-	-
Romania	5,430,000	10,000	2,580,000	-	-	24,000	-
<b>Total</b>	<b>5,472,000</b>	<b>11,800</b>	<b>2,582,400</b>	-	-	<b>24,000</b>	-

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

### Value of Contraceptives & Condoms Shipped to Latin America/Caribbean by Country FY 2004 (US\$)

Country	Condom	IUD	Oral	VFT	Implant	Injectable	Female Condom	Total
Bolivia	544,685	-	244,688	-	-	331,573	46,720	1,167,666
Dominican Republic	608,049	-	84,444	-	-	-	-	692,493
Ecuador	-	-	224,137	-	-	-	-	224,137
El Salvador	224,895	-	70,495	-	29,450	384,884	-	709,724
Guatemala	-	20,487	60,321	-	-	272,926	48,574	402,308
Haiti	354,772	-	179,530	2,638	114,401	822,173	31,981	1,505,495
Honduras	-	-	227,282	-	-	581,147	-	808,429
Jamaica	11,685	-	-	-	-	-	-	11,685
Nicaragua	111,699	26,012	83,463	-	-	432,756	-	653,930
Paraguay	117,734	45,900	222,347	-	-	29,107	-	415,088
Peru	33,501	108,505	606,881	-	-	417,344	-	1,166,231
St. Kitts & Nevis Trinidad & Tobago	49,033	-	-	-	-	-	-	49,033
<b>Total</b>	<b>2,078,811</b>	<b>200,904</b>	<b>2,003,588</b>	<b>2,638</b>	<b>143,851</b>	<b>3,271,910</b>	<b>127,275</b>	<b>7,828,977</b>

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

### Quantity of Contraceptives & Condoms Shipped to Latin America/Caribbean by Country FY 2004

Country	Condom Pieces	IUD Units	Oral Cycles	VFT Tablets	Implant Sets	Injectable Doses	Female Condom Pieces
Bolivia	7,002,000	-	842,400	-	-	270,000	60,000
Dominican Republic	10,662,000	-	333,600	-	-	-	-
Ecuador	-	-	912,000	-	-	-	-
El Salvador	3,579,000	-	259,200	-	1,100	349,200	-
Guatemala	-	11,600	254,400	-	-	243,200	75,000
Haiti	6,579,000	-	724,800	19,200	4,500	733,600	45,000
Honduras	-	-	901,200	-	-	490,000	-
Jamaica	192,000	-	-	-	-	-	-
Nicaragua	2,142,000	14,800	320,400	-	-	390,000	-
Paraguay	2,001,000	24,200	843,600	-	-	24,400	-
Peru	825,000	63,000	2,625,600	-	-	381,200	-
St. Kitts & Nevis	921,000	-	-	-	-	-	-
Trinidad & Tobago	369,000	-	-	-	-	-	-
<b>Total</b>	<b>34,272,000</b>	<b>113,600</b>	<b>8,017,200</b>	<b>19,200</b>	<b>5,600</b>	<b>2,881,600</b>	<b>180,000</b>

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.

### Affiliation Report: Value of Contraceptives According to Affiliation FY 2004 (US\$)

Region	Affiliation	Value
Africa	Disaster Relief	1,790,002
	Governmental/Parastatal	10,972,484
	NGO	2,190,365
	Research	51,811
	Social Marketing	25,895,647
	<b>Total Africa</b>	<b>40,900,309</b>
Asia/Near East	Governmental/Parastatal	10,335,016
	Social Marketing	12,978,142
	<b>Total Asia/Near East</b>	<b>23,313,158</b>
Europe & Eurasia	Disaster Relief	8,884
	NGO	959,754
	<b>Total Europe &amp; Eurasia</b>	<b>968,638</b>
Latin America/Caribbean	Governmental/Parastatal	3,726,121
	NGO	2,562,098
	Social Marketing	1,540,758
	<b>Total Latin America/Caribbean</b>	<b>7,828,977</b>
Total Worldwide	Disaster Relief	1,798,886
	Governmental/Parastatal	25,033,621
	NGO	5,712,217
	Research	51,811
	Social Marketing	40,414,547
	<b>Total</b>	<b>73,011,082</b>

Source: NEWVERN Information System, Office of Population and Reproductive Health, January 2005.



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