

Estimating the Impact of USAID-Funded Contraceptives: Haiti



Overall Contraceptive Use by Method

Estimated Contraceptive Users, 2020-2024

	2020	2021	2022	2023	2024
Condoms	204,000	213,000	222,000	230,000	240,000
Pills	46,000	48,000	50,000	52,000	54,000
Injectables	395,000	412,000	429,000	445,000	464,000
Implants	46,000	48,000	50,000	52,000	54,000
IUD	3,000	3,000	4,000	4,000	4,000
Sterilization	26,000	27,000	29,000	30,000	31,000
Other	13,000	14,000	14,000	15,000	15,000
Total	733,000	765,000	798,000	828,000	862,000

Source: Method Mix from 2016-17 DHS applied to modern user estimates from FP2030 2025 Report

USAID's Contribution to Contraceptive Procurement

USAID-Funded Contraceptive Commodities Procured, 2020-2024

	2020	2021	2022	2023	2024
Condoms	3,024,000	0	2,750,250	6,616,500	1,296,000
Pills	1,257,552	1,120,320	648,000	1,411,920	691,200
Injectables	875,000	1,025,500	834,500	1,003,000	1,447,000
Implants	13,800	20,000	19,500	10,500	10,000
IUD	0	1,200	0	0	0
Other	0	0	0	0	10,000

Source: RH Viz, April 2025

Note: "Other" includes emergency contraception, syringes and accessories, standard days method, and trocars. Condom values have been adjusted to exclude condoms procured for HIV programs. For USAID, an assumption was made that 75% of condoms were procured for HIV programs (based on reporting from GHSC-PSM)

Estimating the Comparative Value of USAID's Contraceptive Procurement

Total USD Value of Donor-Funded Contraceptive Products Procured, by Funder, 2020-2024

	2020	2021	2022	2023	2024
UNFPA Supplies	\$38,216	\$441,574	\$581,868	\$719,275	\$499,162
USAID	\$1,179,044	\$1,201,392	\$1,309,108	\$2,006,196	\$1,793,612
Other Donor	\$0	\$0	\$0	\$0	\$0
NGO/SMO	\$0	\$0	\$0	\$0	\$0
Other	\$0	\$0	\$0	\$0	\$0
UNFPA Co Financing	\$0	\$0	\$0	\$0	\$0
Total	\$1,217,260	\$1,642,966	\$1,890,976	\$2,725,471	\$2,292,773
% USAID	97%	73%	69%	74%	78%

Source: RH Viz, April 2025

Note: Values are only for the commodities and do not include estimates of the shipping and associated costs to get those products to the country. Values exclude personal lubricants. Condom values have been adjusted to exclude condoms procured for HIV programs. For USAID, an assumption was made that 75% of condoms were procured for HIV programs (based on reporting from GHSC-PSM) and for Global Fund, an assumption was made that 100% of condoms were procured for HIV.

Estimating the Impacts of Donor-Funded Contraceptives and USAID's Contribution

Estimated Impacts of Contraceptive Products Procured in 2024

	Impacts of Total Commodities (all funders)	Impacts of USAID-funded Commodities only	Impacts of Total Commodities <u>without</u> USAID-funded Commodities	% of Total Impact that came from USAID
Demographic impacts				
<i>Unintended pregnancies averted</i>	225,000	156,900	68,100	70%
<i>Live births averted</i>	112,400	78,400	34,000	70%
<i>Abortions averted</i>	82,000	57,100	24,900	70%
Health impacts				
<i>Maternal deaths averted</i>	380	269	111	71%
<i>Child deaths averted*</i>	3,360	2,350	1,010	70%
<i>Unsafe abortions averted</i>	61,210	42,670	18,540	70%
Couple Years of Protection (CYPs)				
<i>Total CYPs (FP only)</i>	563,271	404,050	159,221	72%

Notes: Impact estimates are Service-Lifespan impacts based on default Impact2 Model values; RH Viz does not specify implant or injectable type, so implant procurement was split evenly into 5-year and 3-year implants, and injectables were assumed to be 3-month injectables; 2025 commitments (in terms of \$ or products) not available, so 2024 is a proxy to estimate the impact of USAID funded FP commodity procurement

* Estimates of child deaths averted may be unreliable because there is currently very limited data about the linkages between CPR, birth spacing and child mortality. This part of Impact 2 will be updated as improved research becomes available.