

# Estimating the Impact of USAID-Funded Contraceptives: Lesotho



## Overall Contraceptive Use by Method

### Estimated Contraceptive Users, 2020-2024

	2020	2021	2022	2023	2024
<b>Condoms</b>	86,000	88,000	91,000	93,000	96,000
<b>Pills</b>	65,000	67,000	68,000	70,000	72,000
<b>Injectables</b>	107,000	110,000	113,000	116,000	119,000
<b>Implants</b>	28,000	29,000	30,000	30,000	31,000
<b>IUD</b>	9,000	9,000	9,000	9,000	10,000
<b>Sterilization</b>	9,000	9,000	10,000	10,000	10,000
<b>Other</b>	1,000	1,000	1,000	1,000	1,000
<b>Total</b>	305,000	313,000	322,000	329,000	339,000

Source: Method Mix from 2023-24 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
<b>Condoms</b>	300,000	1,301,760	1,031,250	820,500	1,013,250
<b>Pills</b>	0	0	0	0	0
<b>Injectables</b>	0	0	0	0	0
<b>Implants</b>	0	0	0	0	0
<b>IUD</b>	0	0	0	0	0
<b>Other</b>	0	0	0	0	0

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
<b>UNFPA Supplies</b>	\$372,538	\$674,005	\$305,261	\$243,562	\$464,162
<b>USAID</b>	\$9,780	\$65,912	\$33,619	\$26,748	\$33,032
<b>Other Donor</b>	\$0	\$0	\$0	\$0	\$0
<b>NGO/SMO</b>	\$0	\$0	\$0	\$0	\$0
<b>Other</b>	\$0	\$179,941	\$138,275	\$0	\$797,547
<b>UNFPA Co Financing</b>	\$0	\$2,312	\$168,710	\$0	\$0
<b>Total</b>	\$382,318	\$922,170	\$645,864	\$270,310	\$1,294,741
<b>% USAID</b>	3%	7%	5%	10%	3%

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
<b>Demographic impacts</b>				
<i>Unintended pregnancies averted</i>	179,000	2,600	176,400	1%
<i>Live births averted</i>	105,600	1,500	104,100	1%
<i>Abortions averted</i>	45,500	600	44,900	1%
<b>Health impacts</b>				
<i>Maternal deaths averted</i>	450	7	443	2%
<i>Child deaths averted*</i>	2,860	40	2,820	1%
<i>Unsafe abortions averted</i>	12,050	180	11,870	1%
<b>Couple Years of Protection (CYPs)</b>				
<i>Total CYPs (FP only)</i>	401,713	8,444	393,270	2%

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.