

## Rapid and Effective Use of Increased Funds for Family Planning

**Increase in USAID's Budget for Family Planning and Reproductive Health:** USAID's family planning program has experienced significant increases in budgets:

- 2008 – \$457 million
- 2009 – \$545 million
- 2010 – \$593 million (Administration's Request Level)
- 2010 – \$648 million (House State – Foreign Operations Subcommittee Mark-Up Level)

However, based on an analysis of USAID's present program, five former directors of the Office of Population and Reproductive Health recommended that USAID's budget be increased to \$1.2 billion.<sup>1</sup> An increase to around \$1 billion would enable the United States to take on a leadership role in family planning and reproductive health similar to that we now have in HIV/AIDS and malaria.

**Rapid and Effective Use Of Funds:** Our analysis, which included an extensive examination of USAID's family planning portfolio in 30 countries, indicates that the Agency could rapidly obligate these funds by: scaling-up successful projects to a national scale; introducing successful approaches, such as community-based provision of injectables, in countries not using these well documented approaches; and, eliminating disruption of contraceptive flows by increasing supplies and improving logistics.

**Pent-Up Demand for Family Planning Services:** The underlying reason why USAID can rapidly and effectively accelerate its funding is that donor and government funding levels for family planning have stagnated and have not kept pace with the growing number of couples who want family planning. In the 1970s, roughly 680 million women of reproductive age lived in countries where USAID worked. Today, there are 1.4 billion. It is estimated that 200 million women, who want no more children or want to delay having a child, are not using contraceptives. Much of this existing need for quality family planning services can be met by the relatively simple action of expanding the availability of family planning information and services.

**Professional Staff:** USAID has maintained a strong core of experienced, professional staff that knows how and where an increased family planning budget can best be used. Indeed, the rapid expansion of services could begin immediately.

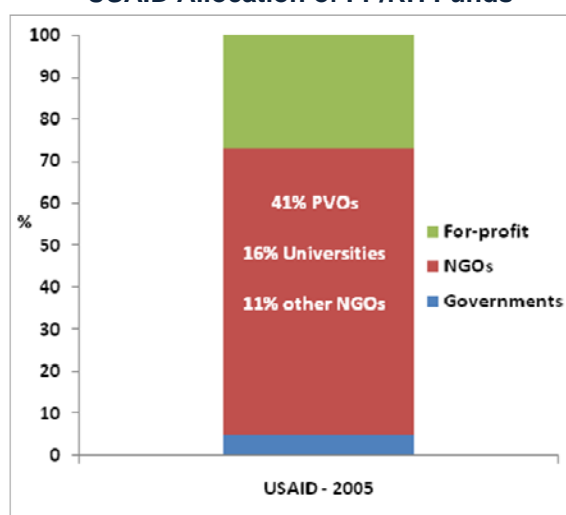
**New and Flexible Funding Mechanisms:** Historically, the International Planned Parenthood Federation, Marie Stopes International, and UNFPA were major conduits for USAID funds. Due to the policies of the past administration, these organizations did not receive any family planning funds or, in the case of UNFPA, very little funds. With the change in administration, these three major organizations are now eligible for funding.

In addition, unlike most donors, USAID supports family planning programs through a range of flexible and responsive organizations. Sixty-eight percent (68%) of USAID funds go to non-governmental organizations (NGOs), such as IntraHealth International and Family Health International. An additional 24% goes through the for-profit sector, primarily for the purpose of purchasing contraceptives. These organizations can more quickly and effectively deploy resources and implement programs than governments.

**For more information:**

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**USAID Allocation of FP/RH Funds**



Source: USAID

<sup>1</sup> Duff Gillespie, Elizabeth Maguire, Margaret Neuse, Steven Sinding, and J. Joseph Speidel. *Making the Case for U.S. International Family Planning Assistance*, 2009. For additional copies: <http://www.jhsph.edu/gatesinstitute>.