



Global Trends of Method Mix and the Role of the Private Sector

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Abt Associates leads the project in collaboration with

Banyan Global

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Monitor Group

Objectives

- ✓ Explore the evolution of Total Fertility Rate (TFR) and modern Contraceptive Prevalence Rate (or mCPR) along with *method* and *source* mix across all regions for the last 20 years
- ✓ Get a better understanding of the role played by the private sector in each region for each type of method
- √ Frame discussion on increasing access to family planning
 and the role of the private sector

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Data and methods

- DHS surveys from 36 countries, according to the following criteria:
 - At least three DHS surveys between 1992 and 2012
 - At least one survey from each of the following periods:
 - Period 1: 1992-2000
 - Period 2: 1998-2006
 - Period 3: 2006-2012
- Regional averages are unweighted
- Unit of analysis: women of reproductive age either married or living in union.

List of 36 countries

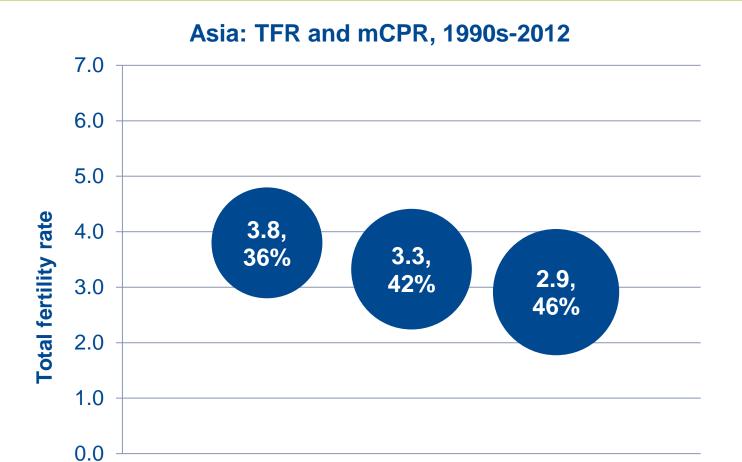
List of countries		
Sub Saharan Africa (SSA)	Asia	LAC
Benin	Bangladesh	Bolivia
Burkina Faso	Cambodia	Colombia
Cameroon	Egypt	Dominican Rep.
Ethiopia	India	Haiti
Ghana	Indonesia	Peru
Kenya	Jordan	El Salvador
Madagascar	Nepal	Guatemala
Malawi	Philippines	Honduras
Mali		Nicaragua
Namibia		Paraguay
Niger		
Nigeria		
Rwanda		
Senegal		
Tanzania		
Uganda		
Zambia		
Zimbabwe		

TFR and modern CPR: Evolution by region

 Both mCPR and TFR in Latin America and Asia have had a similar evolution in the last 20 years.
 TFR has decreased significantly by almost 1 child, and mCPR has increased moderately.

 However, the story for Sub-Saharan Africa is different. mCPR has doubled, but TFR has barely decreased in over two decades.

In Asia, TFR went down and mCPR increased...



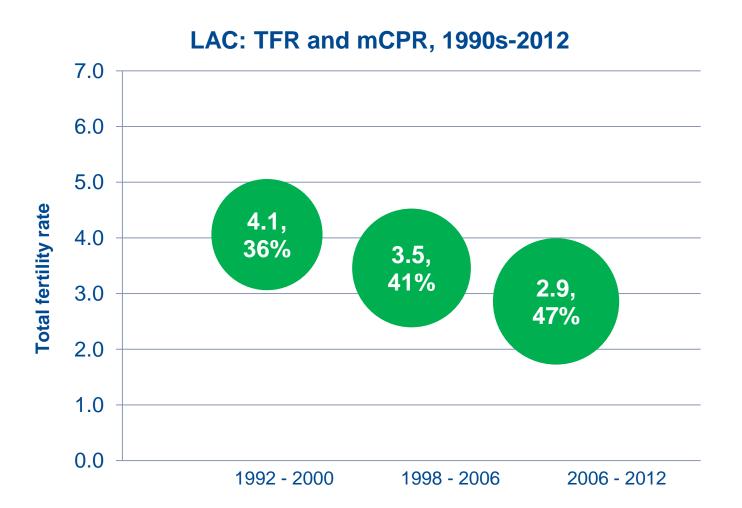
1998 - 2006

2006 - 2012

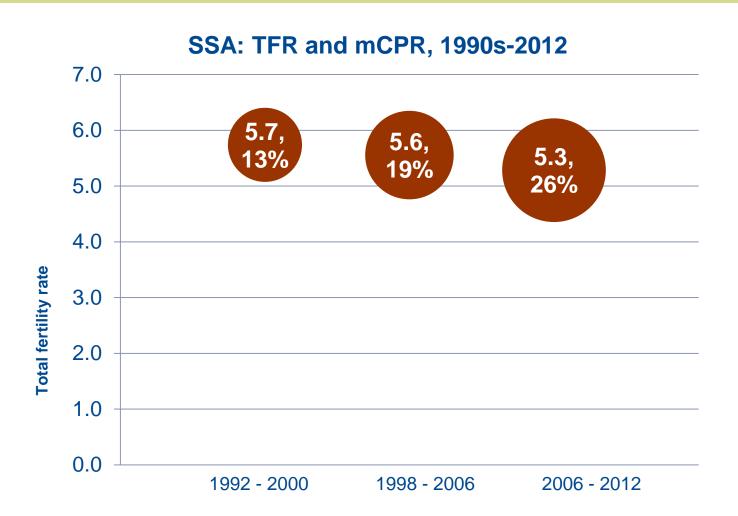
Source: Demographic Health Surveys (DHS)

1992 - 2000

Similar trend can be observed in LAC.

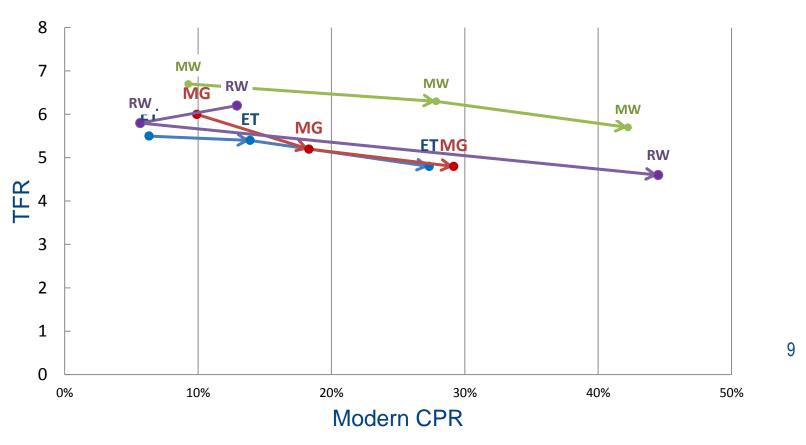


But in <u>SSA</u>, while mCPR doubled, TFR barely decreased in 20 years...



A wide range of successful stories in the region...

SSA: TFR and mCPR

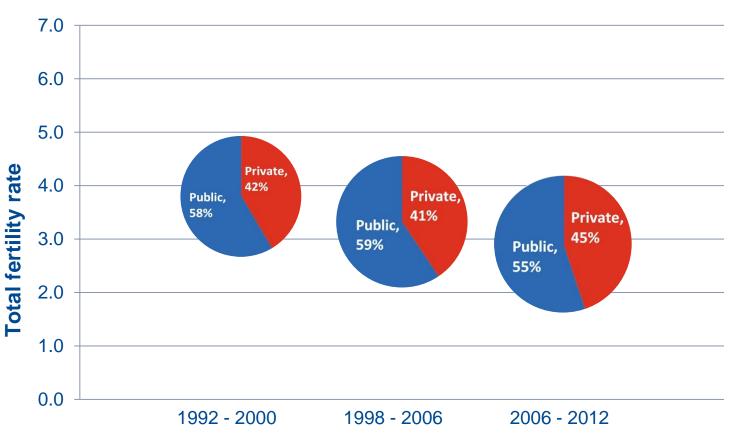


Source Mix: Regional trends

What can we say about the evolution of the source mix – especially the private sector – across the three regions?

In <u>Asia</u>, the private sector's share has remained unchanged – and large – over the years.

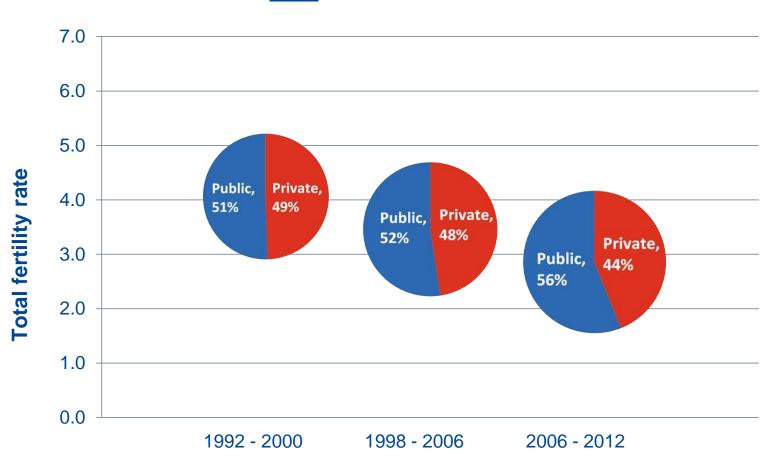




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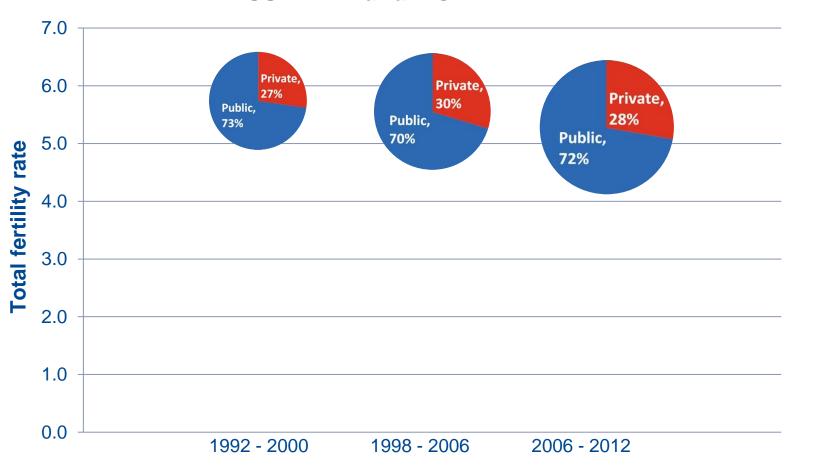
LAC has a very similar story.

LAC: TFR and mCPR



In <u>SSA</u>, the private sector's share is smaller but also remains unchanged over the years.



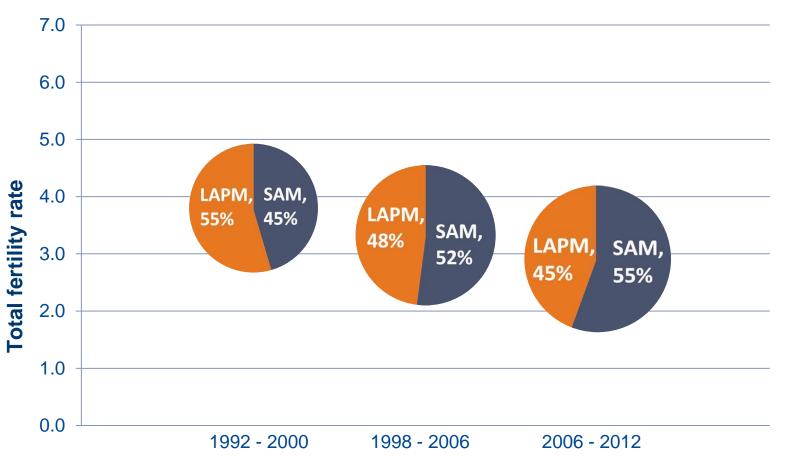


Method Mix: Regional trends

What can we say about the evolution of the method mix – SAMs and LAPMs– across the three regions?

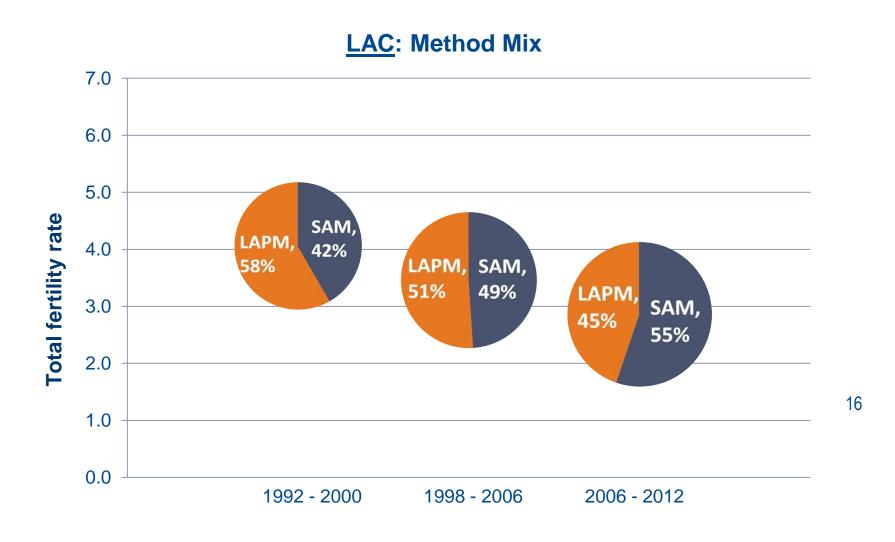
In <u>Asia</u>, SAMs are increasing as a proportion of mCPR as LAPMs decrease



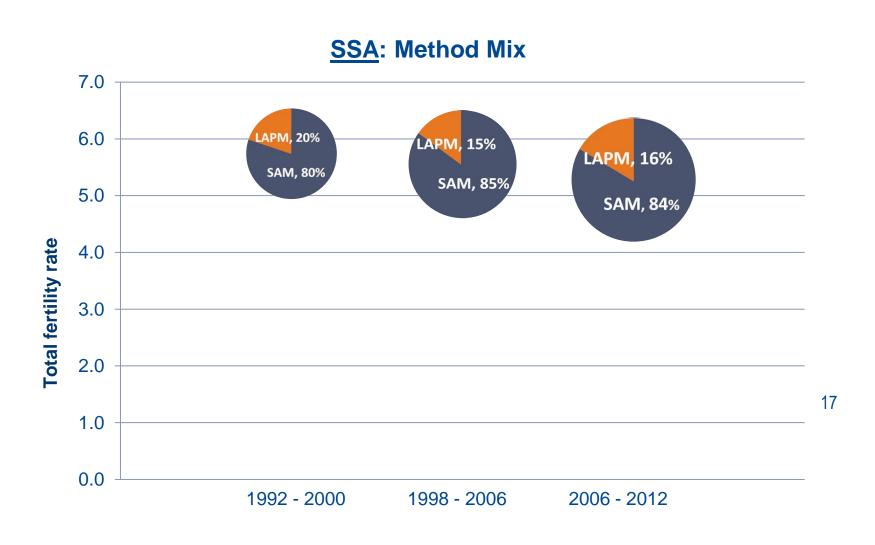


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In <u>LAC</u>, SAMs are also increasing as LAPMs decrease.



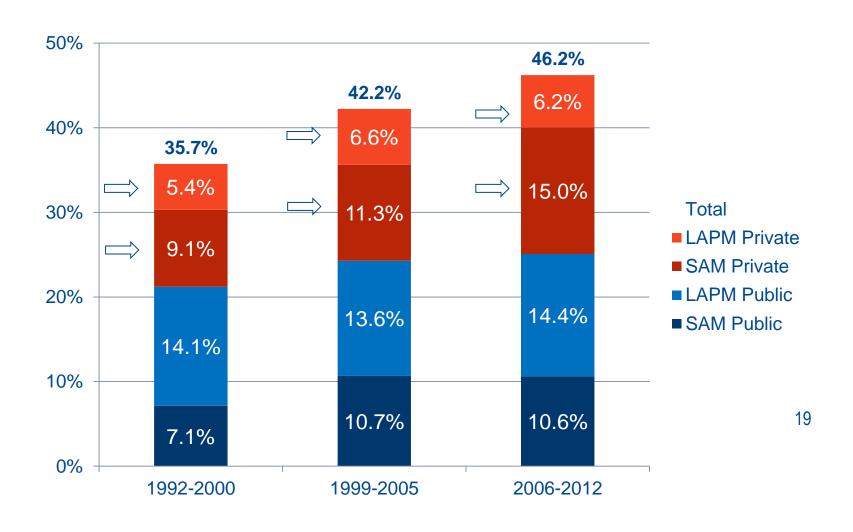
In <u>SSA</u>, the share from LAPMs have remained unchanged but at low levels...



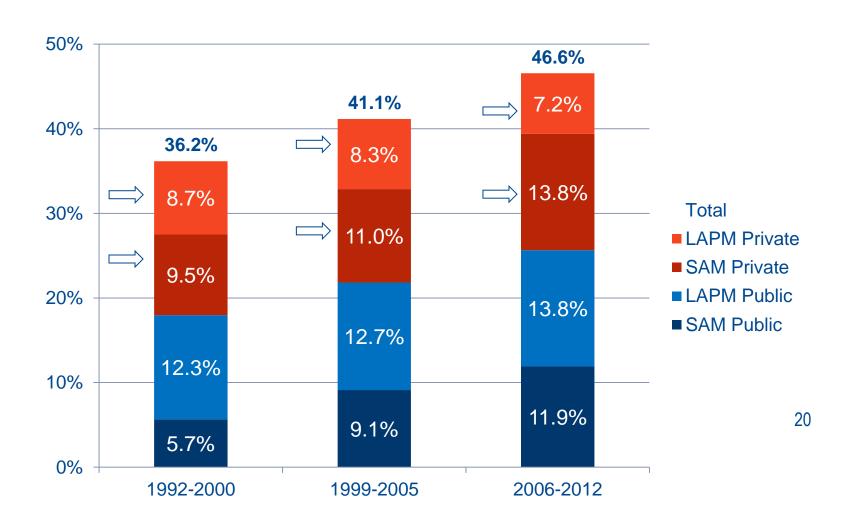
Trends of the Method Mix and the Source Mix

We now examine method mix <u>and</u> source mix in each region to understand the role of the private sector...

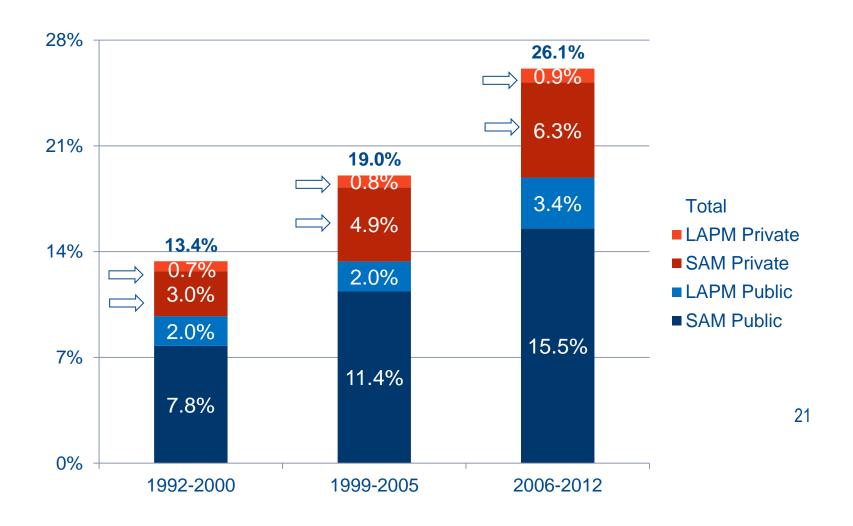
Asia: Increasing role of private sector in SAM provision, but role remains limited for LAPM.



In LAC, private sector has also increased its role primarily through SAMs...



<u>SSA</u>: the private sector increased SAM provision over time, but role in LAPM provision remains limited



Conclusions

 In Asia and LAC, the private sector represents almost half of modern CPR provision; in SSA, it represents just more than one quarter of the market.

• Similarly, in both Asia and LAC, LAPMs represent about half of the modern method mix; in SSA, LAPMs represent less than one fifth.

Way Forward

What innovative approaches exist to expand the role of the private sector in providing modern contraceptive methods, especially LAPMs?







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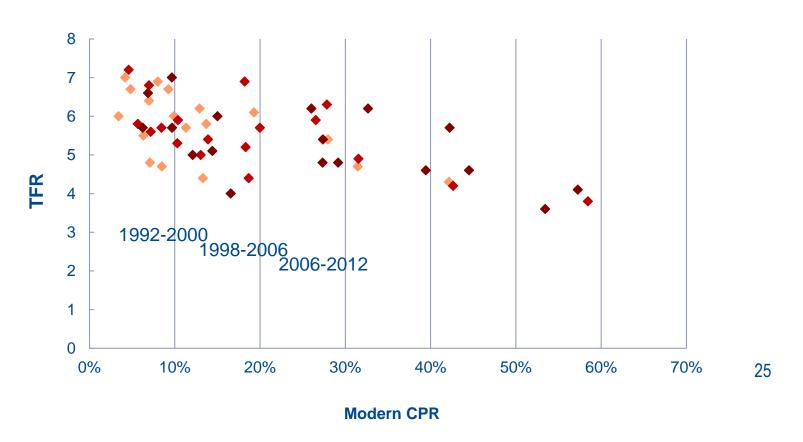
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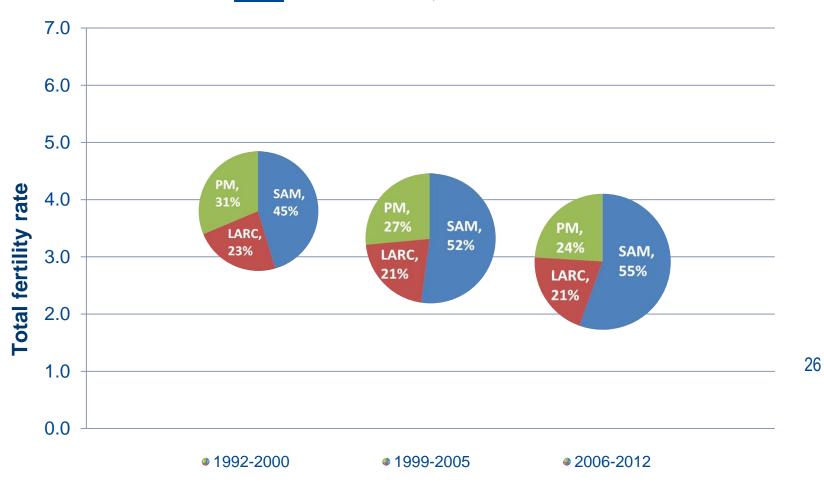
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Appendix

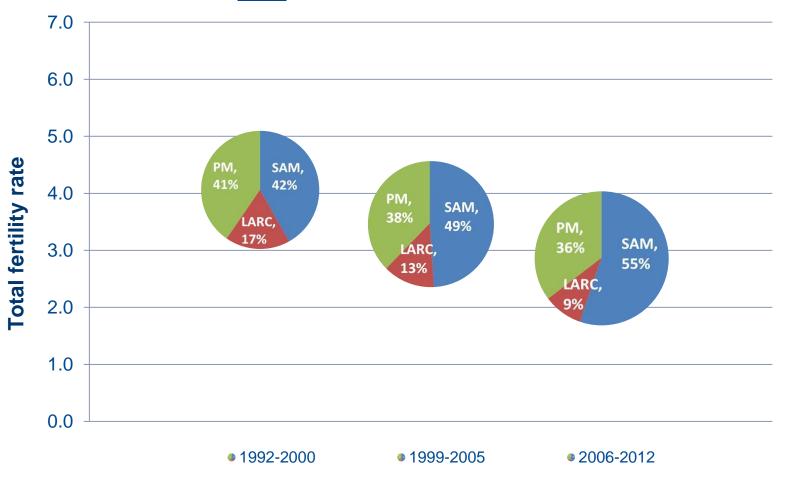
SSA: TFR and mCPR



Asia: Method Mix, 1990s-2012



LAC: Method Mix, 1990s-2012



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