

## Female Condoms and the Donor Landscape in Uganda

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### BACKGROUND

Donor support for female condoms globally has surged in the past decade. Donors have increased their financial support for female condoms from nearly US\$2 million in 2001 to US\$14.3 million in 2008.<sup>1,2</sup> The bulk of donor support for female condoms has been directed at sub-Saharan Africa. Despite growing donor interest and investment in female condoms, Uganda has not been a major recipient of donor support for this critical, female-initiated prevention method in spite of high rates of HIV among women.

### PRODUCT AND DONOR HISTORY

A female condom acceptability study funded by the United Kingdom Department for International Development (DFID) and executed by Marie Stopes International-Uganda (MSI-Uganda) in 1997 paved the way for product introduction in Uganda.<sup>3</sup> Subsequently, in 1998, female condom procurement was financed by the World Bank through the Sexually Transmitted Infections Project.<sup>4</sup> A total of 1.2 million female condoms were procured by the Ministry of Health (MOH) in 1998,<sup>5</sup> and 200,000 units were designated for MOH demonstrations and trials.<sup>6</sup>

***"Women - both married and single - have asked us to bring back the female condom. They want a procedure within their control and need more choices for prevention."*** Vastha Kibirige, coordinator of the condom unit at the Ministry of Health in Uganda.

In 2000, the FC1 female condom was introduced by MSI-Uganda and was distributed countrywide through the same channels as the male condom.<sup>7</sup> Despite favorable findings among potential users during the acceptability study, a combination of programmatic, policy, social and financial factors caused the female

condom to register little success. The government eventually stopped distributing female condoms in its prevention programs in 2007 until women recently demanded access to this vital prevention tool.<sup>8</sup> It is against this backdrop that the Ministry of Health decided to reintroduce the female condom in Uganda in the fall of 2009.

### RECENT DONOR SUPPORT

Donor support for female condom commodities in Uganda after the product's original introduction was practically nonexistent. Only in recent years have donors supported female condom procurement. The International Planned Parenthood Federation shipped very small amounts of FC1 female condoms to its Reproductive Health Uganda affiliate in 2006 and 2007 (1,000 units each year).<sup>9</sup> The lion's share of commodity support has come from the United Nations Population Fund (UNFPA), which shipped a combined total of 3.5 million FC2 female condoms from 2008-2010 to be distributed by the Ministry of Health.<sup>10</sup>

Noticeably absent in Uganda is female condom commodity support from the United States Agency for International Development (USAID). USAID was the largest supplier of female condoms globally in 2008, accounting for 46 percent of all female condoms supplied.<sup>11</sup> Yet, the U.S. government has not shipped any female condoms to Uganda. Rather, in August 2009, Mike Strong, coordinator for the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) in Uganda, was quoted by TIME.com stating, "we're waiting to see any evidence that this is a cost-effective method of protecting women against unwanted pregnancy and HIV transmission."<sup>12</sup> In comparison, USAID is a solid supporter of male condoms in Uganda, shipping 18.5 million units to Uganda in 2008 alone.<sup>13</sup>

The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) is another important source of funding for female condoms. Between 2005 and 2007, the GFATM financed 5.2 million female condoms.<sup>14</sup> It also funded about 14 percent of all female condoms

donated during 2005 and 2006.<sup>15</sup> Countries are increasingly leveraging GFATM for female condom procurement. For instance, in 2005, only three countries procured female condoms through GFATM: Djibouti, Namibia and Suriname.<sup>16</sup> From 2007-2009, more than 10 countries used the GFATM to purchase female condoms, including Tanzania and the Democratic Republic of Congo, which each purchased more than one million units.<sup>17</sup> The GFATM represents another untapped avenue for female condom funding in Uganda.

### CIVIL SOCIETY

The female condom was strongly supported by women's groups and advocates when it was launched in Uganda in 2000. Female condom introduction, however, did not capitalize on the energy and resources of civil society. Follow-up training of providers was limited, minimal funding was available for education and women's groups were not routinely engaged to create awareness needed for uptake at the community level.<sup>18</sup>

Learning from past experience, the Ugandan female condom re-launch strategy calls for greater consultation and engagement of civil society stakeholders, including women's groups, AIDS service organizations, community and faith-based organizations and service providers.

To capitalize on that strategy, 30 representatives of Ugandan civil society gathered in June 2009 to build a coalition dedicated to advocacy around the female condom. In fall 2009, the coalition developed and submitted to the Ministry of Health a concept note to explore the issues surrounding the government's reintroduction of the female condom and to define their role in advocating for effective female condom programming. The coalition has been involved in stakeholder meetings convened by the Ministry, and has continued to push them for greater inclusion of civil society.

Moreover, the coalition has been working to change U.S. policy in Uganda regarding female condoms by presenting the U.S. mission with evidence of demand. Unfortunately, the coalition reports that female condom supplies remain very low, and while uptake has been good during the pilot project, it is very difficult to advocate for them when there is low supply.

### NOTES

<sup>1</sup>United Nations Population Fund (UNFPA), *Donor Support for Contraceptives and Condoms for STI/HIV Prevention 2007* (New York: UNFPA, 2008).

<sup>2</sup>UNFPA, *Donor Support for Contraceptives and Condoms for STI/HIV Prevention 2008* (New York: UNFPA, 2009).

<sup>3</sup>Uganda Ministry of Health, *The Female Condom in Uganda: A Situation Analysis* (Kampala: Ministry of Health, 2009).

<sup>4</sup>Ibid.

<sup>5</sup>Vastha Kibirige, "The Female Condom – Uganda Experience" (power point presented at the Global Consultation on the Female Condom, Baltimore, Maryland, September 26-29, 2005).

<sup>6</sup>Uganda Ministry of Health. 2009.

<sup>7</sup>Marie Stopes International, *Position Paper: HIV/AIDS* (London: Marie Stopes International, 2001).

<sup>8</sup>PlusNews. "Uganda: Ditched female condom makes a comeback," *PlusNews*, February 12, 2009. <http://www.plusnews.org/report.aspx?ReportId=82902>

<sup>9</sup>RHInterchange. [http://rhi.rhsupplies.org/rhi/index.do?locale=en\\_US](http://rhi.rhsupplies.org/rhi/index.do?locale=en_US) (accessed July 2, 2010).

<sup>10</sup>Ibid.

<sup>11</sup>UNFPA. 2009. *This figure from UNFPA's calculations regarding total donor support does not include data from the Global Fund to Fight AIDS, TB and Malaria or the World Bank.*

<sup>12</sup>Nick Wadhams, "The Battle in Uganda over Condoms" *TIME.com*, August 30, 2009. <http://www.time.com/time/world/article/0,8599,1919311,00.html>

<sup>13</sup>RHInterchange. 2010.

<sup>14</sup>JSI DELIVER, *Policy Brief: Global Fund Financing of Condoms and Contraceptive Security* (Arlington: John Snow (JSI) DELIVER, 2008).

<sup>15</sup>Ibid.

<sup>16</sup>Ibid.

<sup>17</sup>RHInterchange. 2010.

<sup>18</sup>Uganda Ministry of Health. 2009.