

# Ugandan Condom Crisis

## Timeline

Center for Health and Gender Equity  
August 2005

### January through November 2004:

Condom shortages, or “stock-outs,” begin to develop in Uganda as the main social marketers of condoms, including Population Services International (PSI) and Marie Stopes International (MSI), fall short of condom stocks due to disrupted supplies

New policies set by the Office of the Global AIDS Coordinator (U.S. Department of State) restrict condom procurement under the President’s Emergency Plan for AIDS Relief (PEPFAR) to the numbers needed only for “high-risk” populations, as defined by OGAC, restricting social marketing of condoms to the general population with funds from PEPFAR.

### September 2004:

Consumer reports of a “bad odor” associated with Uganda’s *Engabu* brand condoms prompt the Ugandan National Drug Authority (UNDA) to send three batches of condoms to Sweden for testing. The batches fail the “freedom from holes,” and “smell” tests.

### October 2004:

UNDA makes a public announcement of concern about the quality of *Engabu* condoms and issues a nationwide recall. The Ugandan Ministry of Health quarantines the remaining 10 million condoms stocked at the country’s central storage facility, instructing district health services to collect or halt distribution of those condoms already sent to regional health centers.

Quality tests conducted by the Australian laboratory that had performed the original tests on these condoms find no holes taken from samples of the same batch of condoms that failed the Swedish tests, but confirm problems of odor. The Ugandan Director General of Health Services claims these findings are nonetheless sufficient grounds for ceasing distribution of the condoms.

Condom supplies are further reduced when the UNDA institutes a new policy requiring that, in addition to all pre-shipment quality tests, all condoms shipments entering Uganda must undergo quality testing after arriving in the country but before being distributed.

All condom stocks in government warehouses are therefore frozen and unable to be distributed. The Government of Uganda has no plan for replacement condoms in place.

#### **November to December 2004:**

No condom stocks are available to replace these and a widespread shortage ensues. Public confidence in *Engabu* deteriorates as questions about quality arise in the press, condom shortages worsen, and the First Lady of Uganda, Janet Museveni attacks condom effectiveness overall. After years of establishing and raising awareness of condom use, condoms are becoming “restigmatized.”

Shortages and the imposition of new import duties drive up the price of condoms. After recalling *Engabu*, the Government of Uganda places onerous new taxes on all condoms imported for social marketing and for sale on the private market. This in turn leads to price increases of up to 500 percent for condoms on the private market, effectively eliminating any source of affordable condoms in the country.

The policy affects supplies of condoms throughout the country. Population Services International experiences a complete stock-out of its own brand of condoms, and in the last quarter of 2004, the distribution of condoms by Marie Stopes International declines to just over ten percent of the number distributed in the same quarter in 2003.

Costs to importers also rise, as they must now pay the costs of shipping and testing the condoms at the Swedish laboratory.

#### **November 2004 to March 2005:**

Stephen Buchmann and Quangzhou, the German and Chinese companies that supply *Engabu* condoms, contest the Swedish test results, insisting that condoms shipped to Uganda previously passed all quality tests conducted by an independent Australian laboratory prior to shipment, and were found free of any quality defects. Questions are raised about whether improper storage of condoms by the Government of Uganda led to deterioration of the latex.

Ongoing condom shortages in government health clinics, adverse publicity about the quality of *Engabu* condoms, and the rising cost of condoms further diminish public confidence in and access to condom supplies. Rural and peri-urban areas are especially hard hit by the shortages.

Condoms continue to enter the country under the Buchmann-Quangzhou group contract, but are stored by the Government until these can be tested.

Persistent bad publicity, shortages and high costs lead to what many believe is the permanent stigmatization of the *Engabu* brand.

Rural areas are particularly hard hit by the condom shortages.

#### **April to June 2005:**

Massive condom shortages persist. Further testing of *Engabu* condoms in storage show these to be perfectly sound. The Government proposes distributing existing stocks of *Engabu* condoms, but public health officials argue that these are now so discredited in the public's mind that, though quality is not an issue, they are now effectively worthless, and cannot be repackaged under another name because of internal imprints of the *Engabu* logo. Public health professionals argue that the

brand has become so stigmatized at this point that the only effective route is to completely replace the brand, though even this would take up to a year at a minimum.

The Government of Uganda secures 20 million condoms through an emergency grant from the British Department of International Development (DFID) and the Danish International Development Agency (DANIDA).

### **June to July 2005:**

With no capacity to quickly procure and distribute the condoms, the Government turns in June to MSI and PSI to procure and distribute the emergency stock of condoms, mostly in urban areas. Yet while the government depends on social marketers to distribute condoms, the First Lady continues to vilify condoms and condom programs,

PSI loans the government approximately 5 million condoms from its small incoming US supply to help make up the shortfall in government clinics, to the military, among internally displaced persons, and through VCT sites. Stock-outs continue as a result of pressures on existing supplies, the quarantine process and the lack of replacements for *Engabu*.

Reports come in of people using garbage bags as condom substitutes.

### **August 2005:**

PSI, the incumbent cooperating agency under USAID in Uganda, is eliminated from a new grant procurement competition for social marketing in Uganda before the “best and final” round, a highly uncommon occurrence as incumbents invariably make it to best and final. No other competitor in the process has the same level of capacity for marketing and distribution in-country. This occurs at a time when Senator Tom Coburn (R-Oklahoma) and members of the House International Relations Committee publicly attack PSI for condom distribution. Many question the role of politics in this decision in Uganda.

The condom crisis continues, with no end in sight.

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<sup>1</sup> This timeline was compiled by the Center for Health and Gender Equity (CHANGE) with information gathered by CHANGE; Human Rights Watch; Emily Bass, Fulbright Scholar, Uganda, and Health Global Access Project (Health GAP).