

INVESTING IN FAMILY PLANNING FOR ACCELERATED ACHIEVEMENT OF MDGs.

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Reproductive Health in International Perspective.

Relationship between Reproductive Health Variables and Dev't

| Country | GDP/Capita (PPP US \$) | IMR (2005) | TFR (2000-05) | MMR (2005) | Contraceptive Prevalence Rate (U) | BASHP | HDI | HDI Ranking (2007) | Popn Growth rate |
|-----------|---------------------------|---------------|------------------|---------------|---|-------|-------|--------------------------|------------------------|
| Norway | 41,420 | 3 | 1.8 | 7 | 85% | N/A | 0.968 | 1 | 0.6% |
| UK | 33,238 | 5 | 1.7 | 8 | 84% | N/A | 0.946 | 16 | 0.4% |
| Malaysia | 10,882 | 10 | 2.9 | 62 | 53% | N/A | 0.811 | 63 | 1.6% |
| Mauritius | 12,715 | 13 | 1.9 | 15 | 76% | N/A | 0.804 | 65 | 0.7% |
| Kenya | 1,240 | 79 | 5.0 | 560 | 39% | 17% | 0.521 | 148 | 2.6% |
| Niger | 781 | 150 | 7.4 | 1800 | 14% | 21% | 0.374 | 174 | 3.3% |
| Uganda | 1,454 | 79 | 6.7 | 435 | 17.9 | 42% | 0.505 | 154 | 3.2% |

United Nations Population Fund

Because Everyone Counts

The MDG Situation: Uganda's Performance: SLOW

| Indicators | 1995 | 2001 | 2006 | 2015 |
|--|--------|--------|--------|-----------------|
| 5.1 Maternal mortality ratio | 506 | 505 | 435 | 131 (354) RM |
| 5.2 Proportion of SBAs | 38% | 39% | 42% | 100% 75% RM |
| 5.3 Contraceptive prevalence rate | 15% | 23% | 24% | 50% |
| 5.4 Adolescent birth rate | 198 | 190 | 159 | |
| 5.5 ANC coverage (at least 1 & 4) | 91/47% | 92/42% | 94/47% | ----- Na/75% |
| 5.6 Unmet need for family planning | 29% | 35% | 41% | ----- 5%-RM |
| • Proportion of institutional deliveries | 38% | 38% | 41% | 75% |

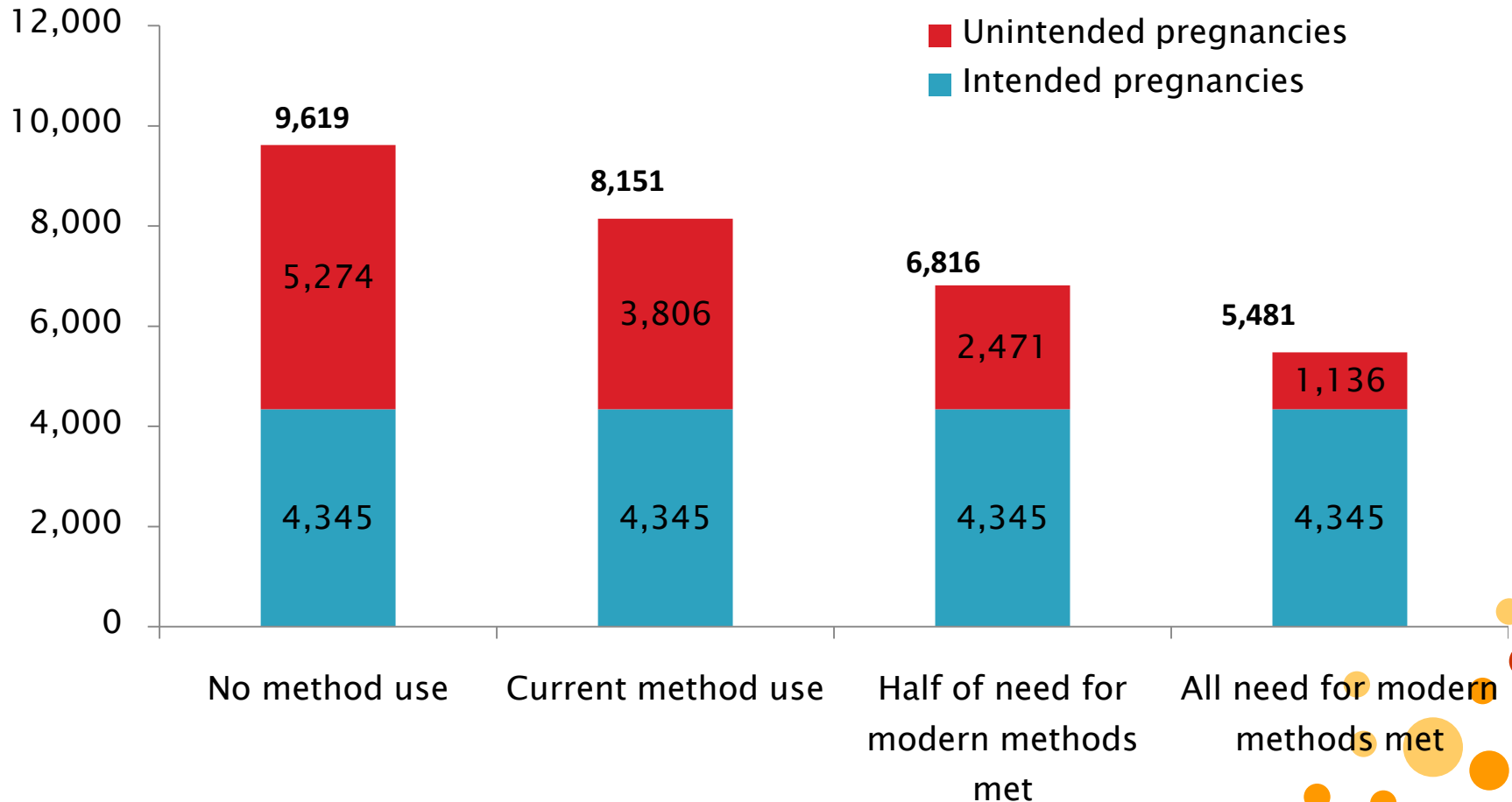
THE INVESTMENT CASE

Investing in family planning is the single most strategic, low cost, high impact and quick win strategy to achieving economic, social and political transformations:

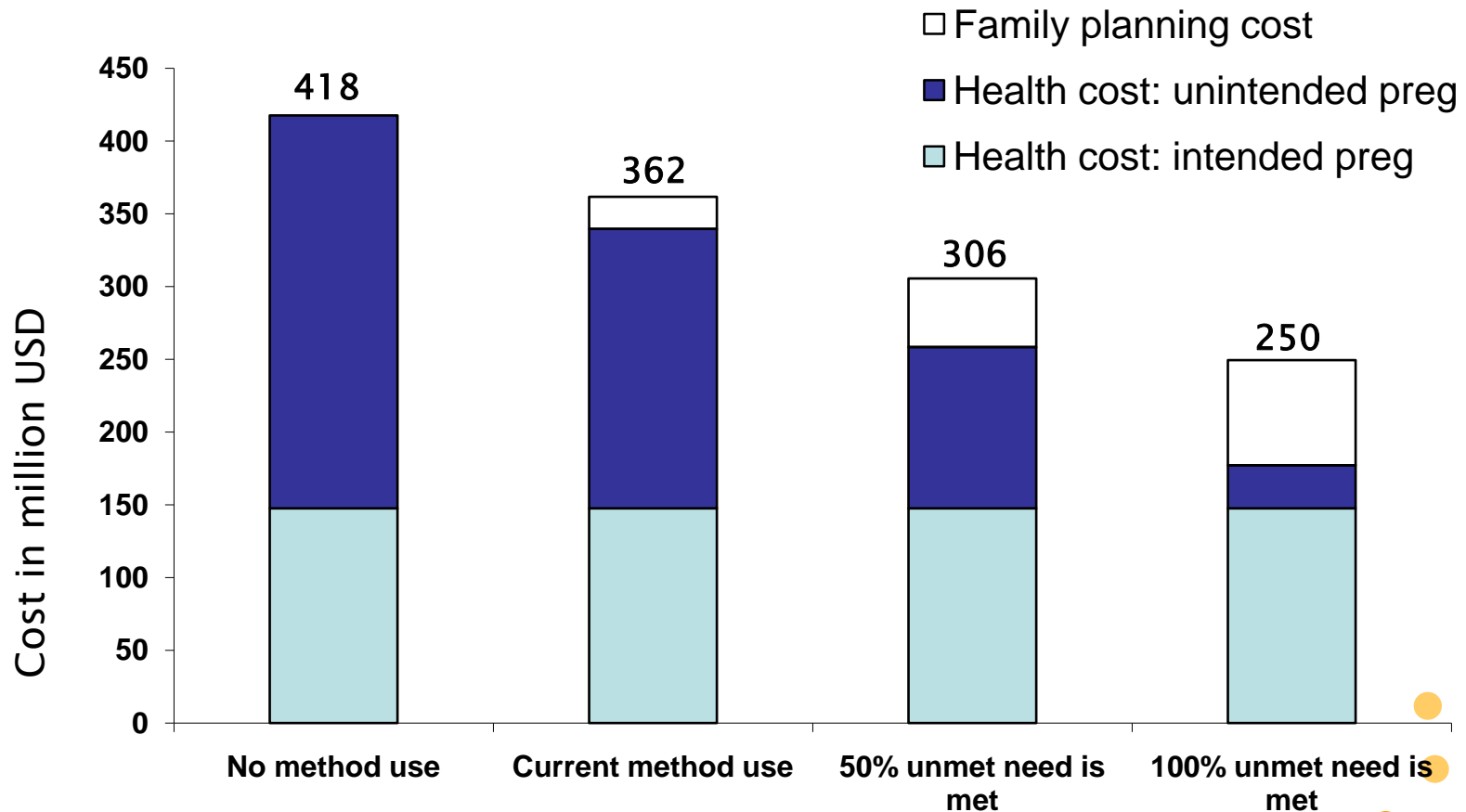
Why Low Cost

- **For every USD \$1 spent on family planning:**
 - **USD \$4 is saved in health care cost (Global)**
 - **USD \$3 is saved in health care cost (Uganda)**
- **Uganda needs US\$108 million in FP commodity cost to meet all unmet needs for FP.**
- **Uganda needs 2,000 additional midwives at total training cost estimated at USD \$6million**

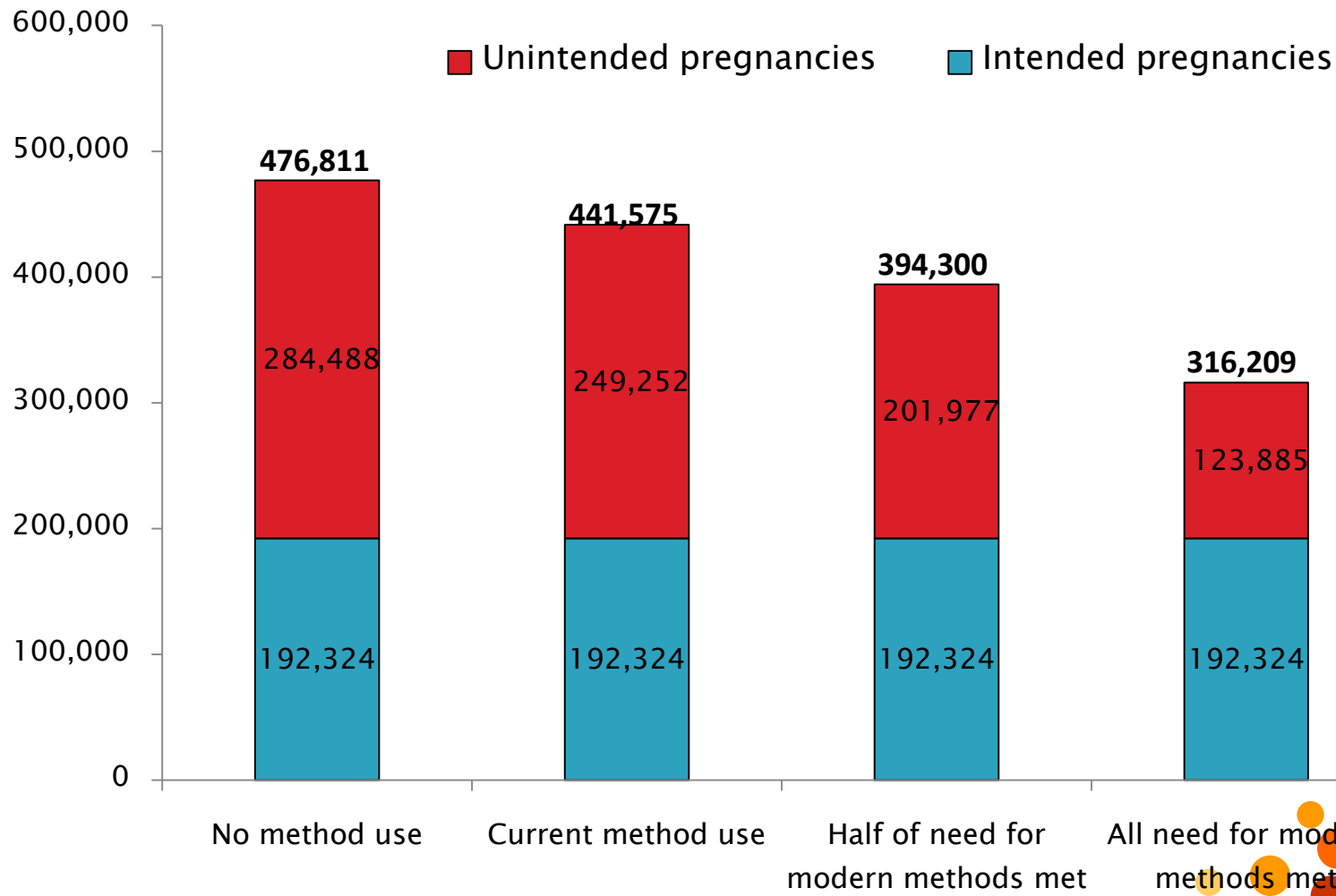
Why high Impact: investing in FP would reduce maternal death by 33% of current levels (or 2,670 maternal deaths)



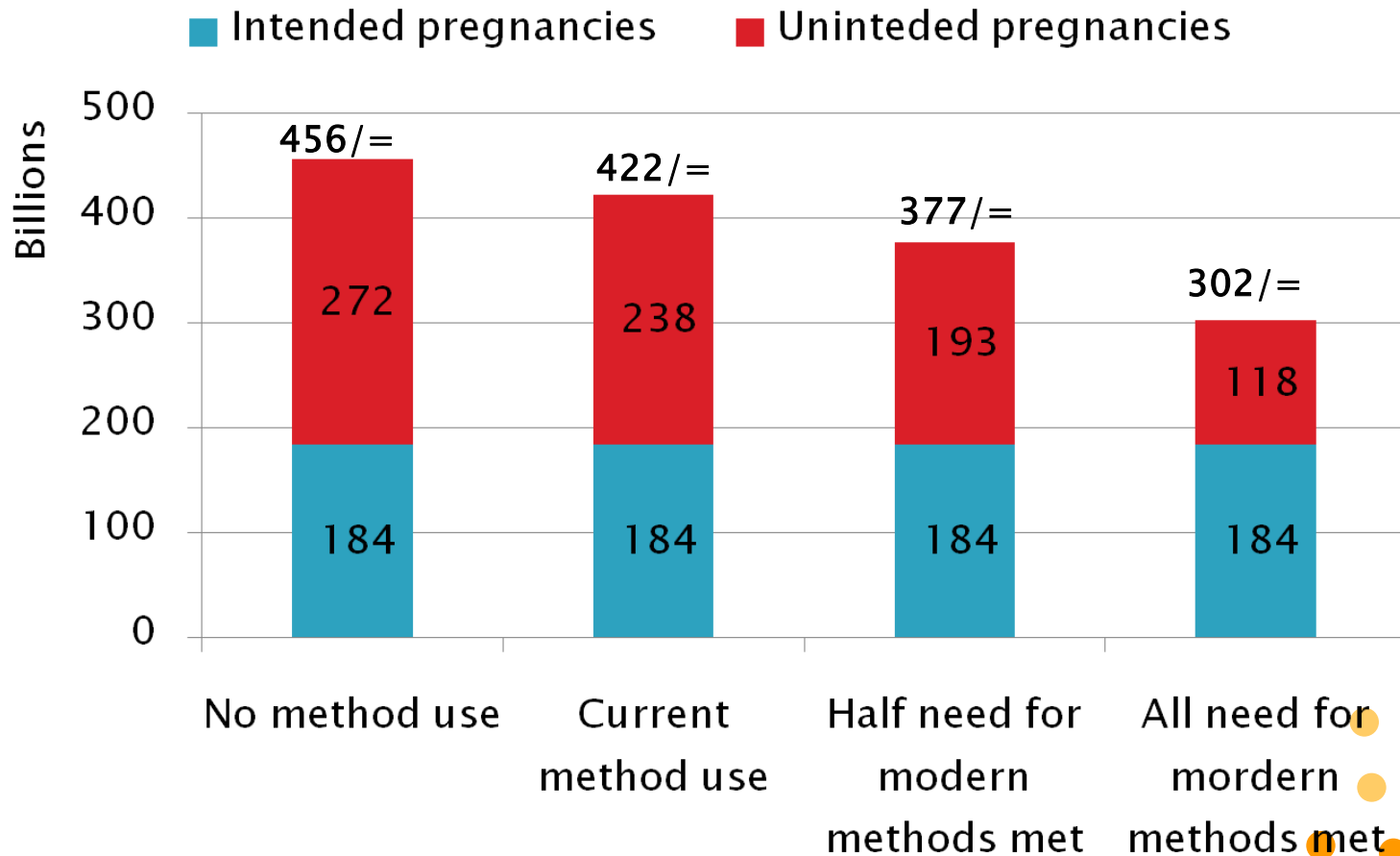
Why high impact: net saving of US \$112m in health care cost if all unmet need for FP were met



Why high impact: reduced by 125,366, the total years lost and years lived in disability



Why high impact: reduced potential earnings lost by UGX120bn or 0.4% of GDP because of DALYS



Why high impact: achieves fertility transition from TFR of 6.7 to TFR of

| Scenarios | Current TFR | Total Demand | Adjusted unmet need | Adjusted current use | Predicted TFR from adjusted use |
|---|-------------|--------------|---------------------|----------------------|---------------------------------|
| Scenario 1: convert no unmet need to current use | 6.7 | 64.2 | 40.6 | 23.7 | 5.2 |
| Scenario 2: Convert all unmet need to current use | 6.7 | 64.2 | 0.0 | 64.2 | 2.9 |
| Scenario 3: Reduce unmet need by 50% & increase current use by 50% | 6.7 | 64.2 | 20.2 | 44.0 | 4.0 |
| Scenario 4: Reduce unmet need by 20% & increase current use by 20% | 6.7 | 64.2 | 32.4 | 31.8 | 4.7 |
| Scenario 5: Reduce unmet need by 10% & increase current use by 10% | 6.7 | 64.2 | 36.4 | 27.8 | 4.9 |

Quick Wins: Basis and Case for Investment

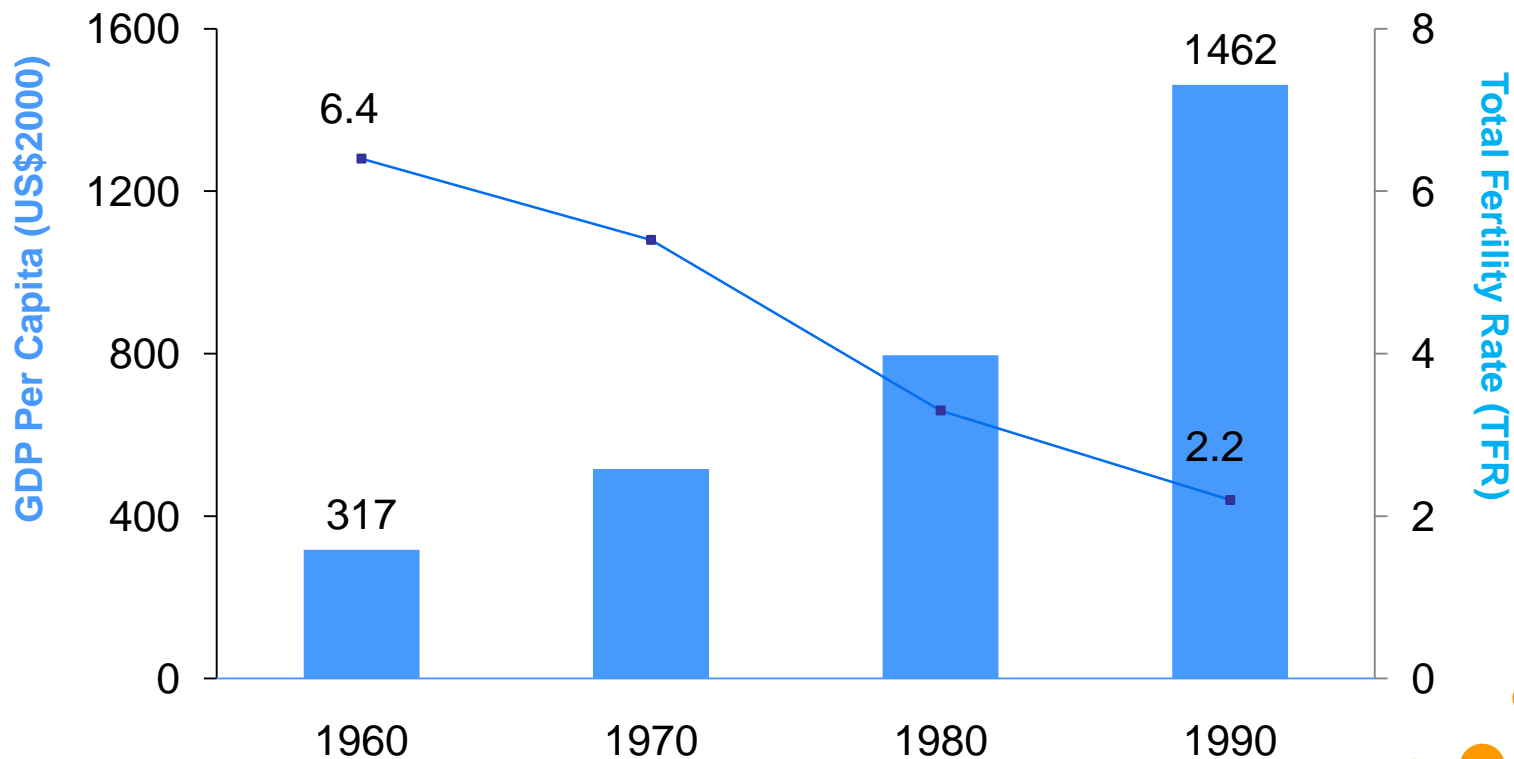
National Vision:

A transformed Ugandan society from a peasant to a modern and prosperous country within 30 years.

Uganda aspires to become a middle income economy in Africa....

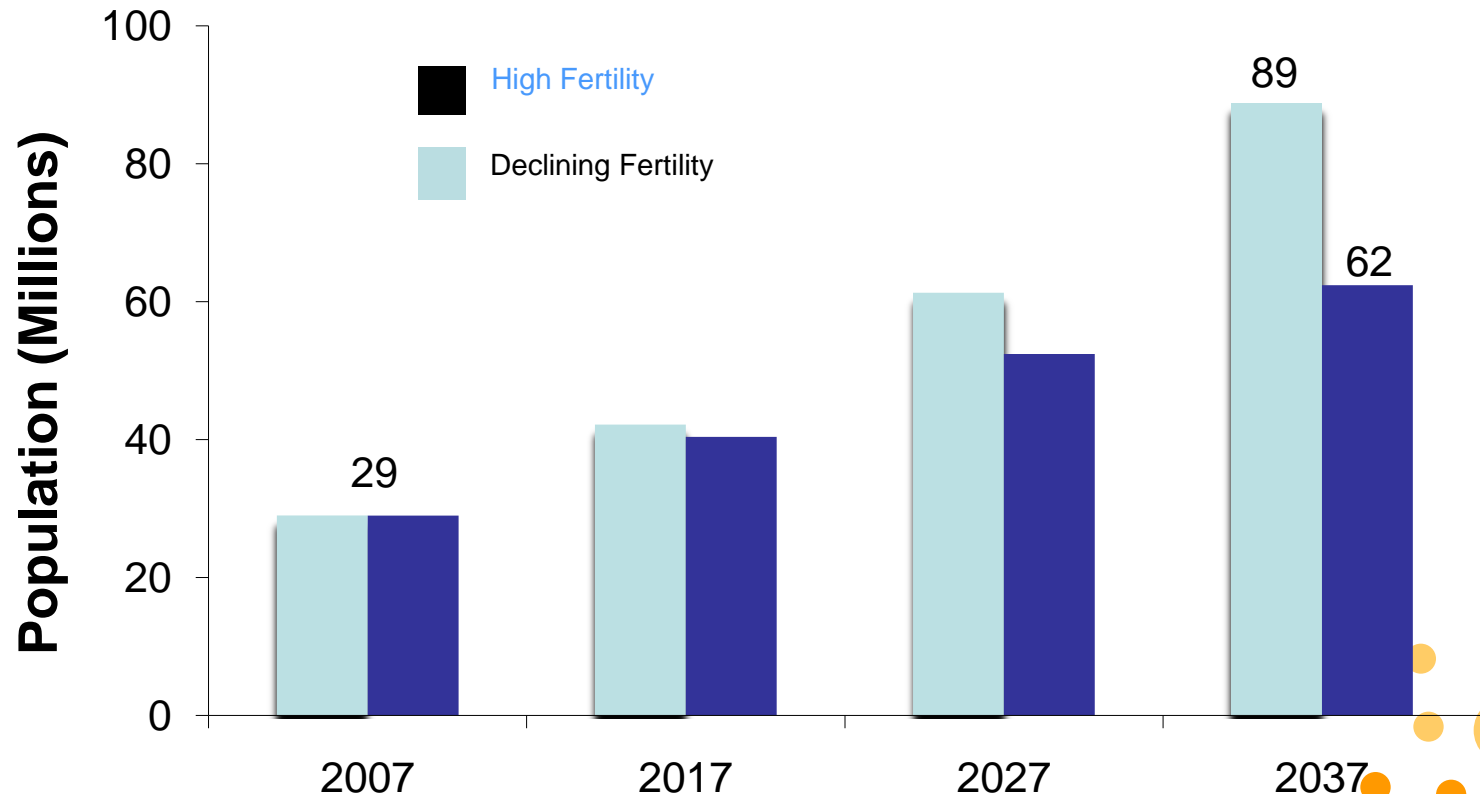
Why quick wins: enables Uganda to achieve middle income status in 30 yrs time or less, like Thailand!!

Success Story: Thailand, an Asian Tiger



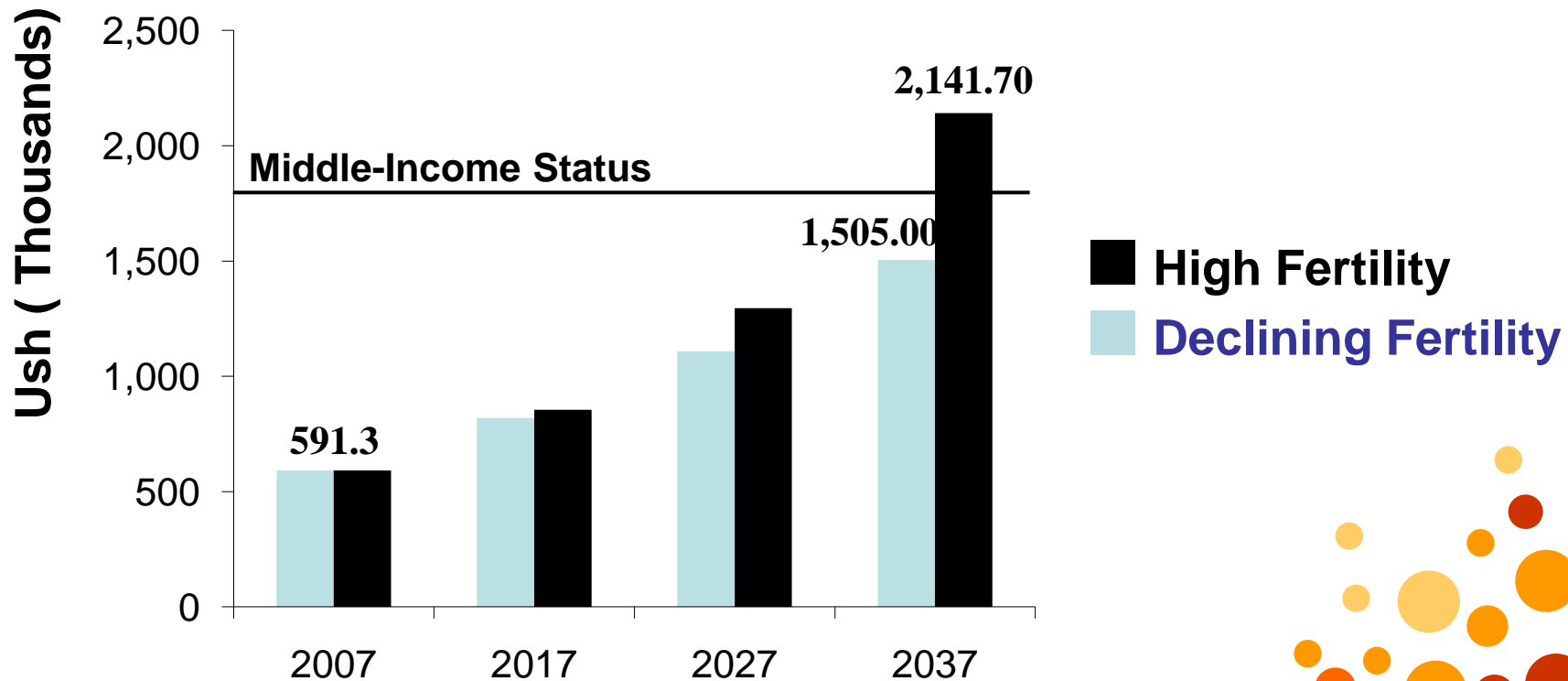
Why quick wins: Population, fertility scenario & impact on sectors & Uganda's vision....

Population Will Triple By 2037



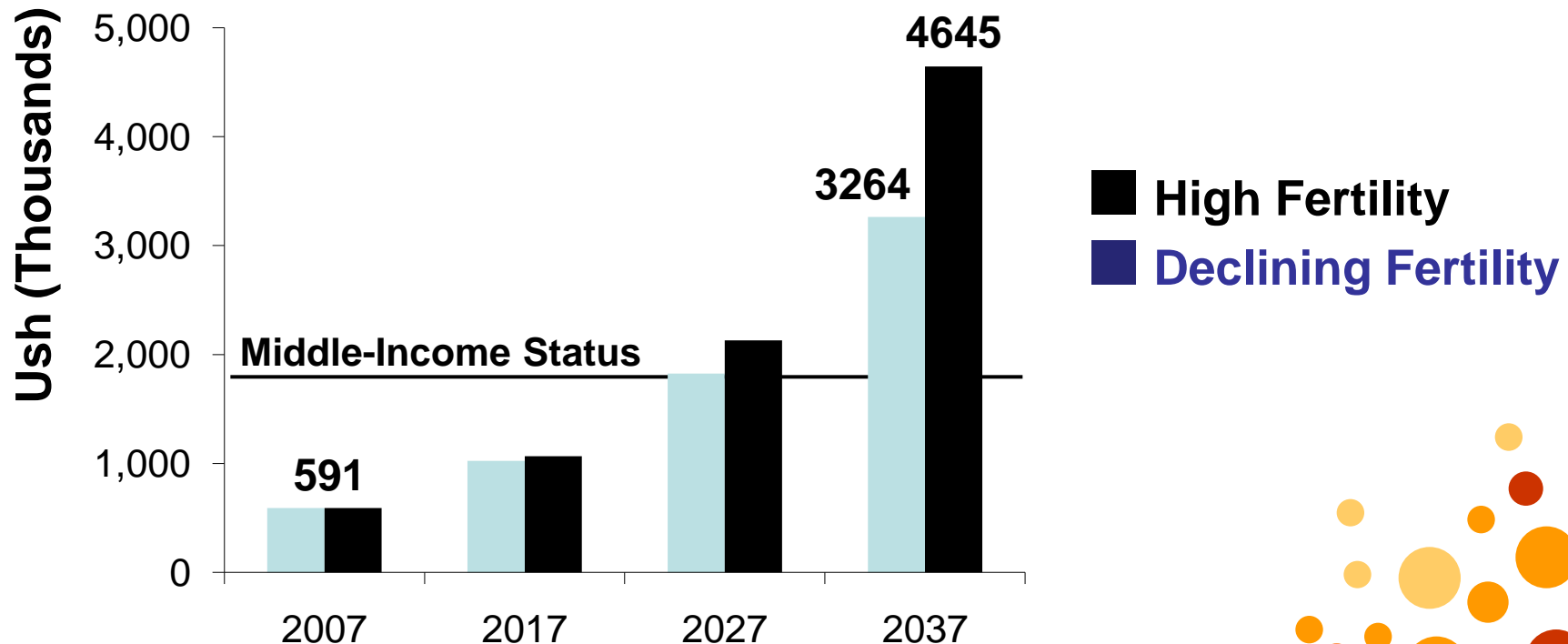
Why Quick Wins: GDP Per Capita & fertility

Assume 7% Growth Rate



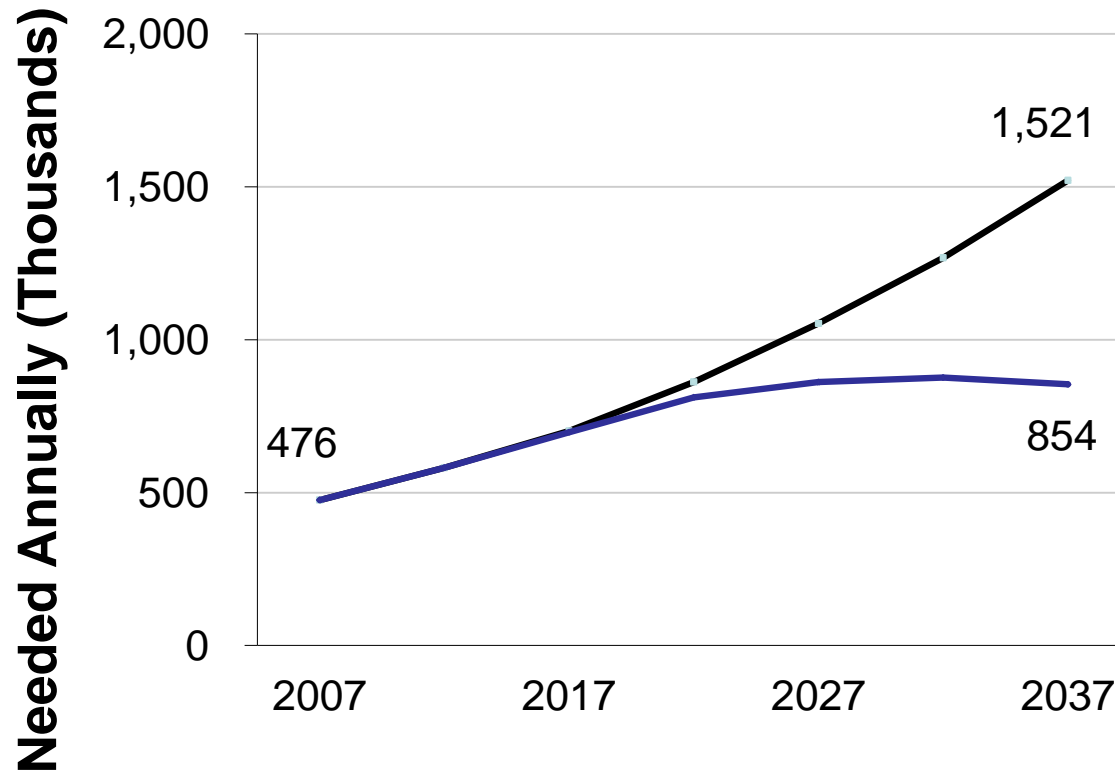
Why Quick Wins: GDP Per Capita & fertility

Assumes 10% Growth Rate



Why Quick wins: labour & employment

Fewer New Jobs Needed



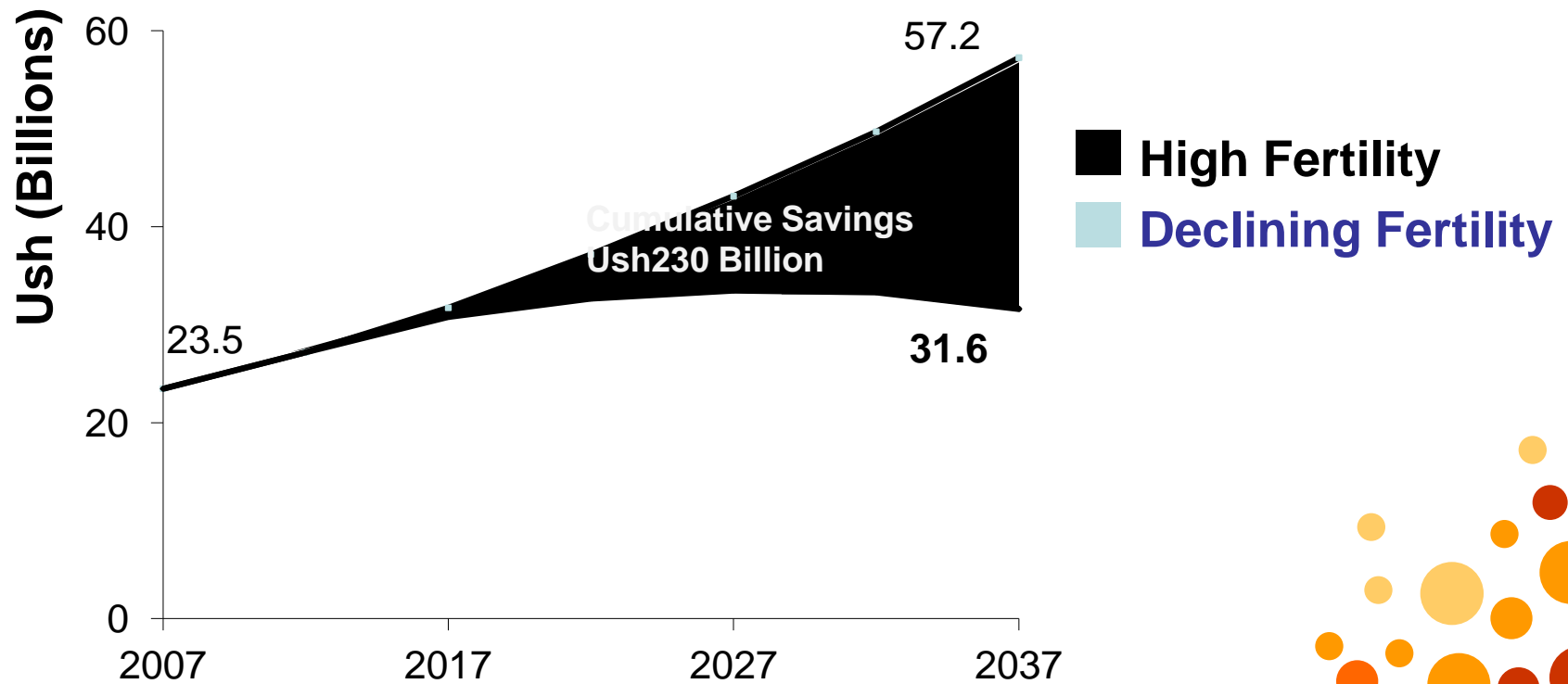
■ High Fertility
■ Declining Fertility

Why quick wins: Education resources & expenditures

Fewer Resources Needed:

Teachers: pupils -

Classroom -



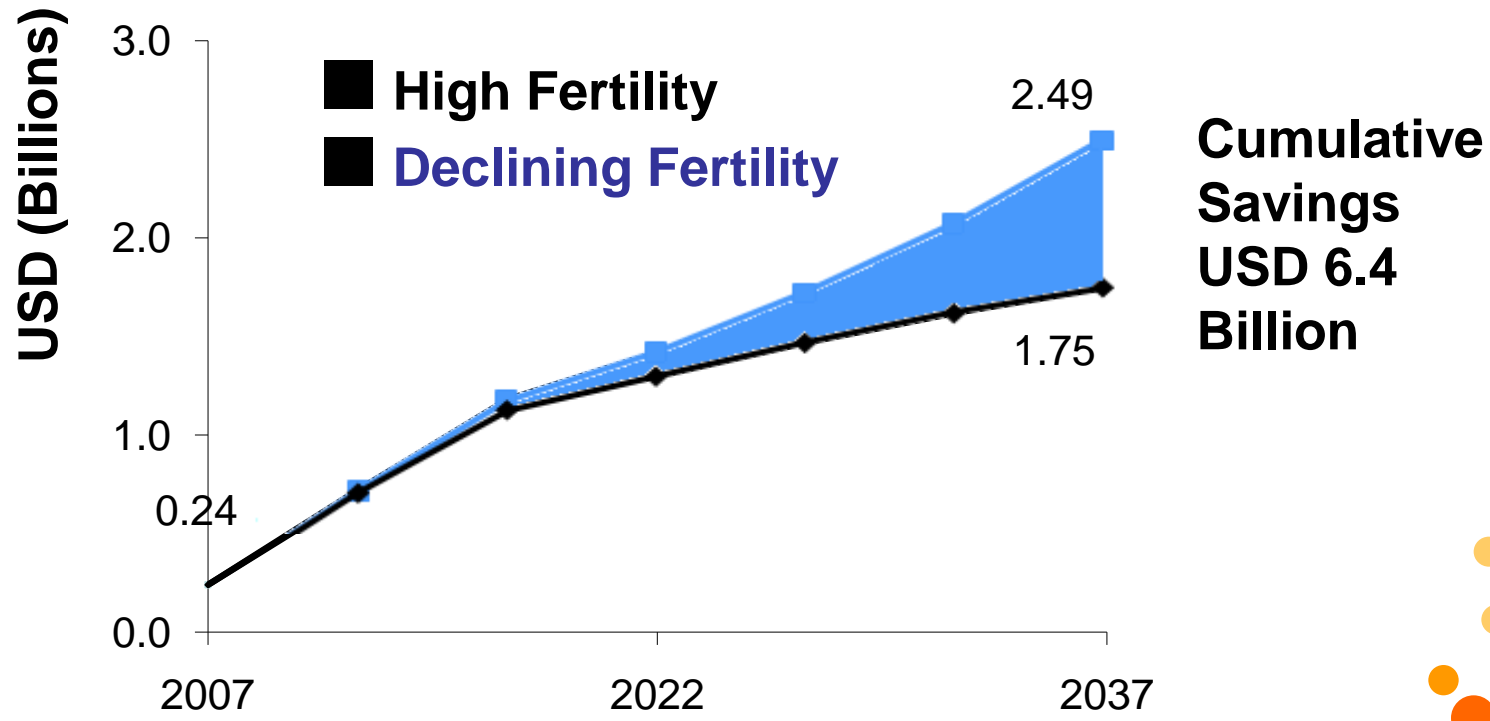
Investment in the Education Sector

UGANDA: MDG 2 PERFORMANCE STATUS: SLOW PROGRESS

| Indicators | 2000 | 2003 | 2006 | 2009 | 2015 |
|--|-------------|-------------|-------------|-------------|-------------|
| 2.1 Net enrolment ratio in primary education | 86% | 101% | 92% | 93% | 100% |
| 2.2 Proportion of pupils starting grade 1 who reach last grade of primary | 63% | 56% | 48% | 52% | 100% |

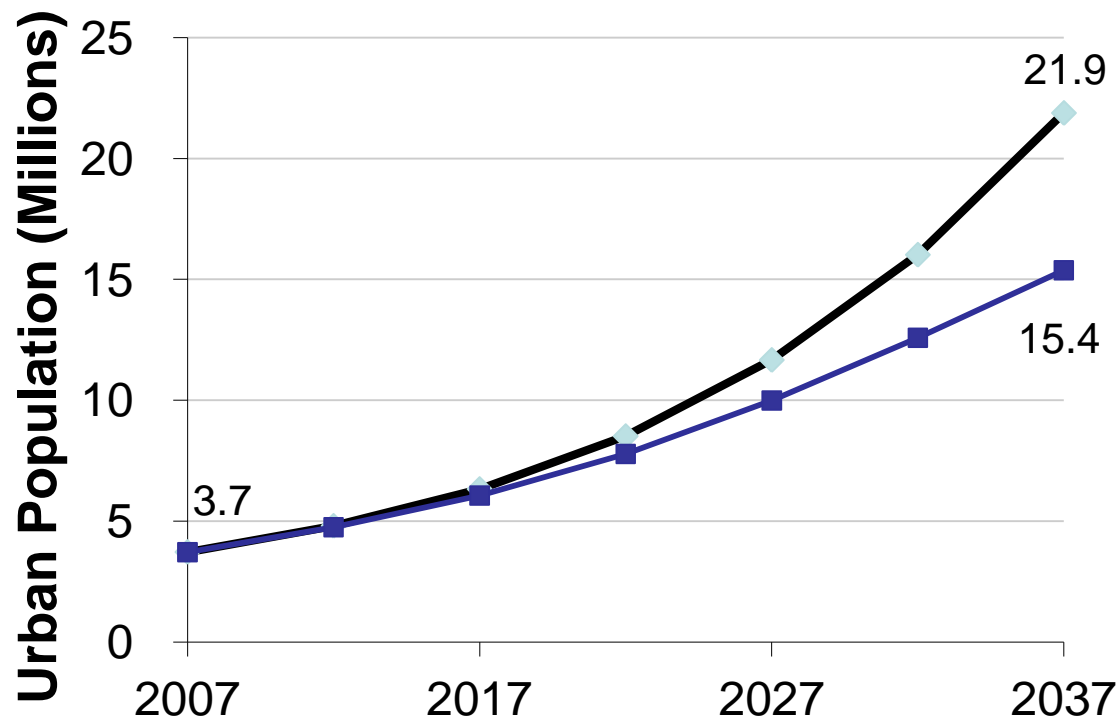
Why quick wins; Health resources & expenditures

Fewer Resources Needed, with cumulative savings of US \$6.4bn



Why quick wins: Urban population growth

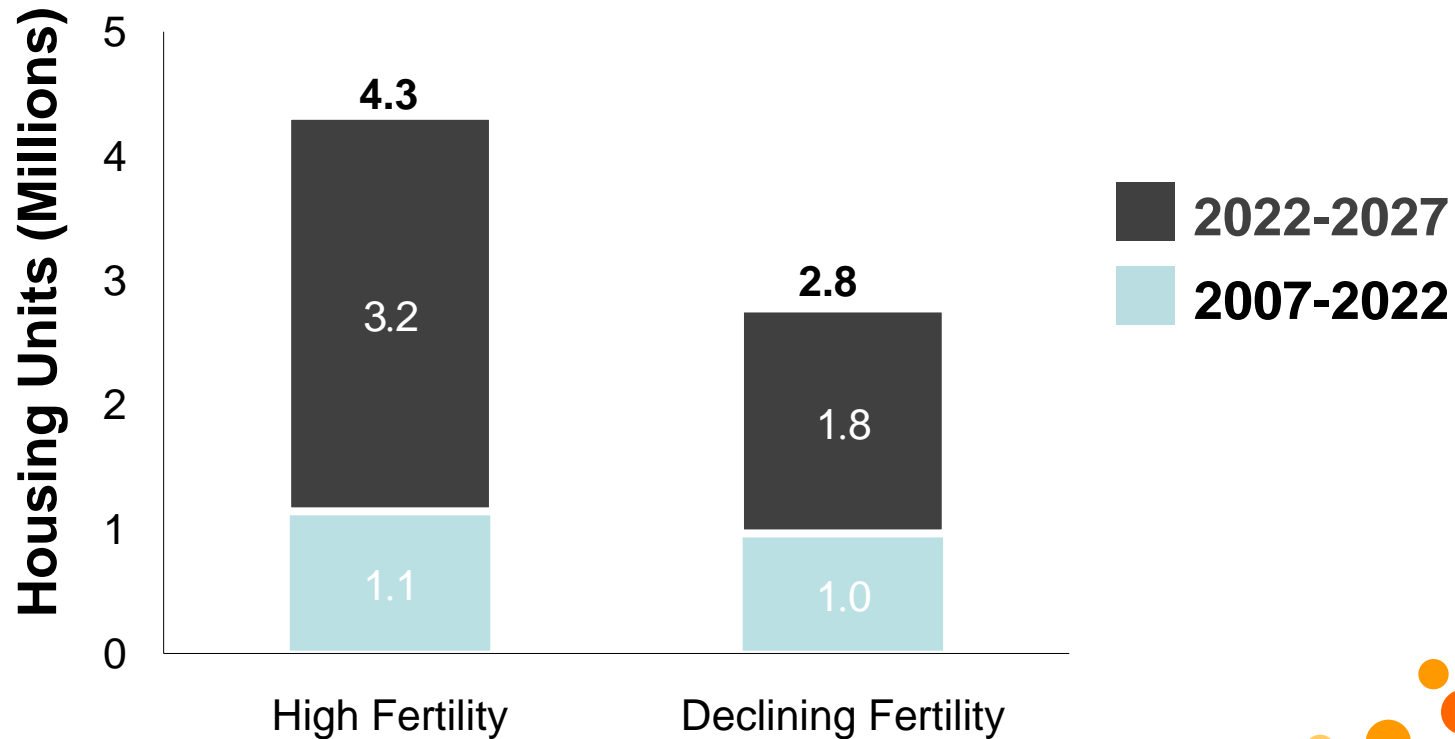
Less Crowded Cities



■ High Fertility
■ Declining Fertility

Why quick wins: Required housing units

Fewer Housing Units Needed



Why quick wins: family planning, child survival & household security concerns

| Uganda MDG Indicators | 2001 | 2006 |
|--|------|-------|
| 4.1 Under-five mortality rate (per 1,000 live births) | 152 | 137 |
| 4.2 Infant mortality rate (per 1,000 live births) | 88 | 76 |
| 4.3 Proportion of 1 year-old immunized against measles | 63% | 79% |
| Other indicators | | |
| • Neonatal mortality rate | 33.2 | 29 |
| • Stunting (chronic malnutrition) | 39% | 32.2% |

- **Number of children and household concern for child survival**
- **Number of children and household concern for farm labour .**
- **Number of children and concern for old age support.**

Uganda: Instruments for investing in family planning

1. The National Development Plan (2010/11 – 2014/15)

- This document has succeeded the Poverty Eradication Action Plan (PEAP);
- Has clear targets for family planning, e.g. CPR increase from 24% to 50%; TFR from 6.7 to 6.0
- Focuses on investing in “demographic window”

2. Medium Term Expenditure Framework

- Have we linked the NDP targets with the MTEF?
- What sectors do we prioritize to bring about investment?

3. Annual Budget

- Annual Health Sector budget allocation relatively stagnant for FP over the years.
- Need to monitor whether or not what is allocated gets spent on FP or becomes a case of “fungibility”



THANK YOU