How Contraceptive Security Indicators Can Be Used to Improve Family Planning Programs

How can we measure contraceptive security to highlight successes and identify areas for improvement?

A standard set of contraceptive security indicators is available for countries to use and adapt for their own purposes.

Why Use Contraceptive Security Indicators?

Increasingly, ministries of health and other stakeholders are recognizing the importance of countries attaining contraceptive security (CS)—the condition where everyone is able to choose, obtain, and use quality contraceptives and condoms whenever they need them. A variety of factors contribute to CS—including context, commitment, capital, coordination, capacity, client demand and utilization, and commodities.

With the multitude of determinants of CS, how is a country to know how it is doing, that is, which aspects are succeeding in improving access to contraceptives, and which areas require more focused interventions?

A standard set of CS indicators is now available to aid program managers, advocates, and decisionmakers to track country progress toward contraceptive security. These indicators simultaneously serve to highlight areas for intervention and draw attention to successes that have already been realized. The set of indicators offer a timely understanding of the CS situation in a country and can be updated routinely by the countries themselves.

The indicators and the data collected on the indicators from approximately 35 countries in 2009, 2010, and 2011 are available on the USAID | DELIVER PROJECT website (see the references list at the end of this brief). In addition, papers summarizing the findings are available for the surveyed countries, and online maps of select indicators present results in a more visual and interactive way (see references list). The availability of this information promotes visibility and accountability regarding a country’s CS status. Country governments and advocates may choose to adapt the CS indicators to best fit their country’s context. Reproductive health and contraceptive security committees can regularly track these indicators to help foster progress toward CS.
Questions That Contraceptive Security Indicators Address

The *CS Indicators* enable a comprehensive understanding of the CS situation in a country. They address many questions, including—

- Which contraceptive methods are offered in the country?
- Which contraceptives are included in the country’s national essential medicines list?
- What is the government’s share of the spending for contraceptives, and how has it changed over time?
- Have there been issues regarding stockouts?
- Are there policies that limit the ability of the private sector to provide contraceptives?
- If clients are required to pay for contraceptives in the public sector, are there exemptions for people who cannot afford to pay?
- Are there policies that restrict access to contraceptives for certain subpopulations?
- Is there a national committee that works on CS?

The answers to CS indicator questions help enable stakeholders to develop appropriate approaches to improve access to contraceptives.

Using Contraceptive Security Indicators for Monitoring, Planning, and Advocacy

The data collected through the CS indicators may be used for monitoring progress, to inform program planning, and as an advocacy tool. Stakeholders can use CS indicators to monitor specific aspects of their country’s CS status and track country progress toward CS.

For example, stakeholders can track government budget line items, allocations, and spending, as well as donor expenditures.

The existence of a budget line item for contraceptive procurement is one commonly used indicator of the government’s commitment and willingness to finance contraceptives. The figure illustrates the degree of overlap between surveyed countries securing a budget line item and those where the government actually expended funds for contraceptive procurement.

Based on 2010 survey responses, 50 percent of surveyed countries had a budget line and spent funds on contraceptive procurement. However, 12 percent had such a line item but did not follow through with funding. This shows that while a budget line item may help ensure funding, it does not guarantee it. This illustrates the importance of not only collecting information about budget lines but also about allocations and actual expenditures.
The following figure displays the surveyed countries that used government-controlled funds on contraceptives during the year. It shows the government’s share of the total spending on contraceptive procurement for public sector facilities in these countries.

**Government-Controlled Share of the Total Spending for Public Sector Contraceptives**

![Graph showing percentage of government-controlled funds for public sector contraceptives across different countries.](image)

Notes: a) Government funds include internally generated funds, basket funds, and other funds given to the government for their use. b) Depending on the country, data represents fiscal year 2008–2009 or calendar year 2009. c) This figure displays government percentage of the funds spent for public sector procurement; it does not reflect percentage of the overall need.

Using the *CS Indicators*, stakeholders can also compare how much funding was allocated for contraceptives to how much was actually spent in order to help identify the causes of financing issues. Stakeholders can use all of the finance indicators to help ensure sufficient funds for contraceptives—whether by advocating for a budget line item, for sufficient allocations, or for mobilization of the allocated resources.

As countries work to increase the accessibility of contraceptives, adequate financing is necessary but not sufficient. The array of contraceptive methods offered in a country and the inclusion of the various methods within the country’s national essential medicine list are examples of commodity and policy CS indicators that are also important to track. Information collected through the commodity indicators can inform program planning and advocacy to ensure method choice. For example, findings from the 2010 *CS Indicators* survey show that only 46 percent of surveyed countries offer emergency contraceptives and just 31 percent offer female condoms in public sector facilities. *CS Indicator* findings such as these indicate a lack of global access for particular methods and indicate an area for more advocacy. Stakeholders can also advocate for the inclusion of contraceptives within NEMLs in order to highlight their significance and help to ensure their availability by influencing decisions on resource allocation, procurement, and provider training.

### How You Can Use the Contraceptive Security Indicators Data Spreadsheet

The *CS Indicators* data collected are available on the data spreadsheets on the USAID | DELIVER PROJECT website (see references list). With the spreadsheets, results of all of the indicator questions can be viewed. The availability of this country-level data can also contribute to more tailored and in-depth analyses. For example, as countries continue to collect this information annually, trends over time can be

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1 Starting with the 2011 data collection
explored. Such data can also be used to uncover correlations between various indicators and outcomes such as contraceptive prevalence rates. In addition, countries are encouraged to adapt and use the *CS Indicators* data spreadsheet as a data collection tool for their own monitoring purposes.

**Conclusion**

The systematic tracking of CS indicators can be an effective way for country governments, CS committees, advocates, and policymakers to regularly monitor their country’s CS status. Stakeholders can also use indicator findings to enable informed decisionmaking.

The set of indicators and data from the recent *CS Indicators* surveys can be accessed on the USAID | DELIVER PROJECT website. Stakeholders can adapt the CS indicators to best fit their country’s context and use the data to improve program planning and strengthen advocacy efforts to help foster progress toward CS.

**References**


