

2024

Contraceptive **Social Marketing & Social Business** Statistics Report

Published September 2025



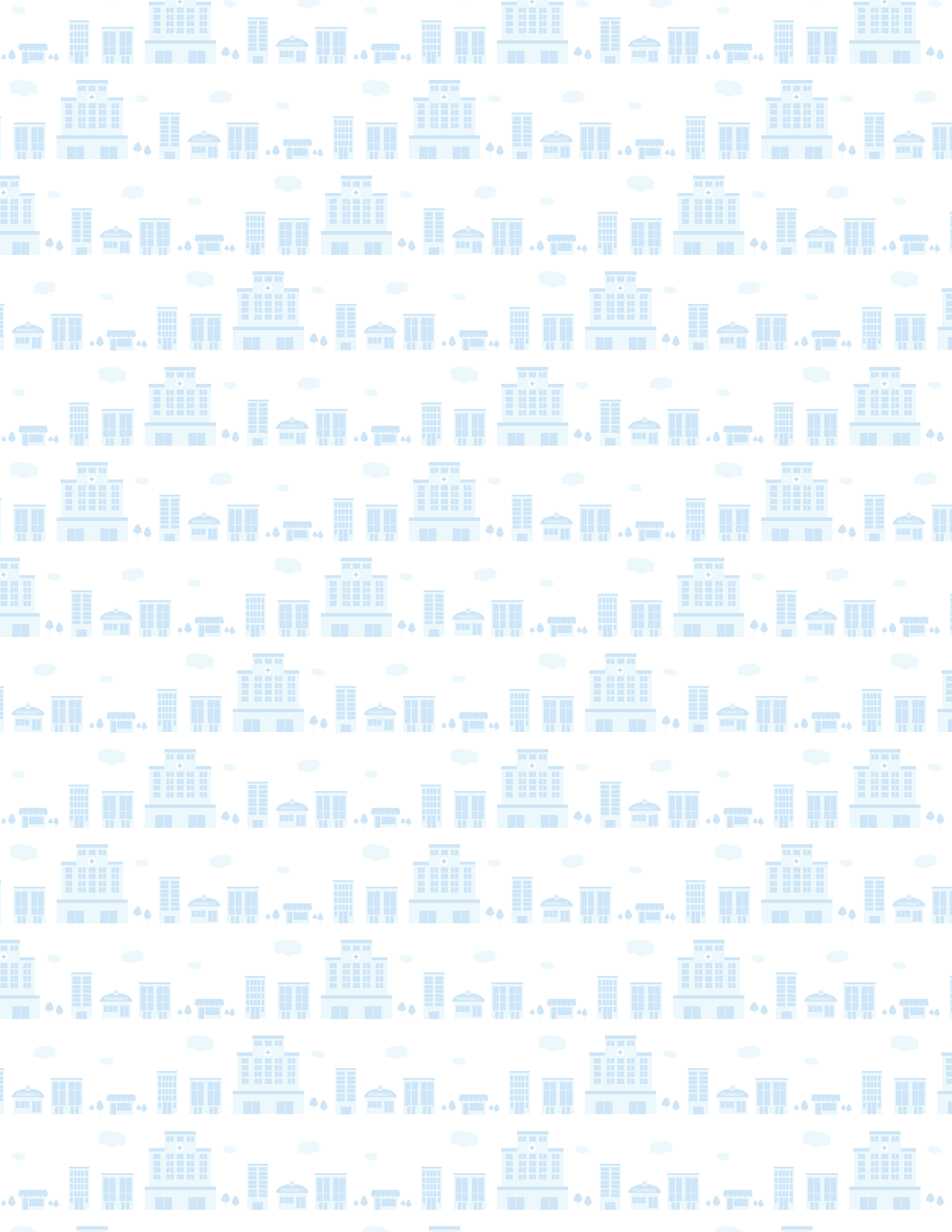


Table of contents

2	PREFACE
4	SOCIAL MARKETING AND SOCIAL BUSINESS WITHIN THE TOTAL MARKET
6	CHANGES FROM PREVIOUS YEARS
8	MEASURING IMPACT
10	2024 STATISTICS - SMOs & SOCIAL BUSINESSES
12	2024 SALES - SMOs & SOCIAL BUSINESSES
30	APPENDIX A: UPDATE ON THE USER-INFORMED DESIGN PROCESS
31	APPENDIX B: ACKNOWLEDGMENTS

Preface

Report explanation

The Contraceptive Social Marketing and Social Business Statistics (CSM) Report is a tool that aims to provide the global sexual and reproductive health (SRH) community with accurate data that can support the healthy development of a market in constant evolution. The CSM Report aggregates sales data from reporting organizations whose business models leverage a social marketing or social business approach to expand access to critical family planning commodities and safe abortion supplies. These programs typically sell commodities to the private sector (including clinics, supermarkets, mini-markets, and other shops), but some programs also make sales to nongovernmental organizations and/or to the public sector. With over three decades of data, the CSM Report complements public health data by providing unique insights into the contributions of social marketing organizations (SMOs) and social businesses to global SRH markets.

This is the second year that the Reproductive Health Supplies Coalition (RHSC) leads the development of the CSM Report, having taken over the report's production from DKT International in 2023. As RHSC continues to develop and publish the CSM Report, a guiding principle of our approach is to continue refining the report to ensure that it can best meet the needs of stakeholders across the community, particularly within the context of a changing landscape. After detailed conversations with key stakeholders and wider consultations with users, this year's report includes some updates to the report's scope, metrics, and impact analysis. These updates are tailored to support the data visibility and use needs across the SRH data landscape and ensure that the report's data can inform a healthier and more resilient community.

Director's note



At the start of 2025, US funding cuts sent a shockwave through the reproductive and global health spaces. With such a drastic shift to the funding landscape for family planning and reproductive health commodities, SMOs and social businesses will play an even more pivotal role in ensuring that women and girls can access the reproductive health supplies they need. While SMOs and social businesses have long created a pathway for affordable access to reproductive health, the loss of US funding from the global architecture for financing family planning commodities will require markets to adapt and evolve business models to ensure that access to these lifesaving commodities remains. It is very clear that SMOs and social businesses continue to innovate across a range of critically important channels in many markets worldwide.

This market shift will require data visibility into the role that SMOs and social businesses play in accelerating access to reproductive health supplies in markets throughout low-resource settings. Data around sales volumes, the contribution of SMOs and social businesses to global impact, and understanding of the context of SMOs and social businesses within individual geographies and across the globe will help inform decisions about how to best meet the needs of women and girls in a changing landscape. These data will also identify new opportunities, both to leverage social marketing or social business approaches, and also to collectively come together to address persistent challenges. The 2024 CSM Report provides an important baseline before these funding cuts took effect, informing decision-making and new approaches in the years to come.

The CSM Report has long been a valued, respected community data resource in the reproductive health field. In 2023, RHSC took over the production and dissemination of this key report with both pride and gratitude for the work that DKT International had done for 30 years before. The CSM Report found a natural home within the Coalition, alongside other critical resources that promote data visibility, use, and improved decision-making for reproductive health supplies access worldwide.

In collaboration with our members, the Coalition continues to commission, produce, and disseminate a range of critical data resources on behalf of the SRH community, including the Global Family Planning Visibility and Analytics Network (VAN) and the public-facing Reproductive Health Supplies Visualizer (RH Viz) Dashboard, the Family Planning Market Report, the Landscape and Projection of Reproductive Health Supply Needs Report (LEAP), the CSM Report, and many others. These resources are key components of our data strategy, which will be presented to the community in the coming weeks. As such, ensuring that data resources evolve to meet the changing needs or emerging challenges of those who use them is critical to successful data stewardship. In that vein, this year's CSM Report includes a number of key updates to better meet the needs of our members and other critical stakeholders across the reproductive health landscape.

These changes build on the changes that we made to the 2023 CSM Report and were informed by a multisectoral advisory group (AG)¹ that was brought together in early 2024 to develop a long-term strategy and set of priorities for the future vision of the CSM Report. It serves as a consultative body and makes recommendations around shifts in definitions, scope, and analyses to be included in future iterations of the CSM Report. In the 2023 CSM Report, we shared a user-informed design roadmap, which served as a blueprint for the changes we rolled out this year.

The changes themselves are explored in more detail in a later section of this year's report, though key highlights include:

1. Expanding the report's scope beyond SMOs to also include social businesses, a meaningful shift that better represents both the market segment and organizations included in the report.
2. Adding a new abortion impact analysis at the regional level, which includes updated metrics for the safe abortion commodity sales, better articulating the impact of these sales on safe abortion access.

3. Including optional reporting on subsidy to better understand the role of subsidy within various social marketing and social business programs.
4. Streamlining the couple-years of protection (CYP) calculations within the report itself to include alignment around the United States Agency for International Development (USAID) CYP factors, and updating the historical data file with these factors to ensure comparability of trends over time.

Looking ahead, RHSC will continue to refine the CSM Report to ensure that it remains fit for purpose and provides the maximum value to members as an important data tool. This will include expanding upon the ideas outlined in the user-informed design roadmap, exploring opportunities for improved data visualization and automation, as well as the ability to compare the CSM Report to other critical data tools in our landscape. We will continue to leverage the expertise of our members and stakeholders through the AG, and we look forward to collecting feedback and responding to the needs of the community.

As we did last year, we will make the same promise to you again this year: the next iteration of the CSM Report—to be published in 2026—will build further on the rich history and strong foundation of the CSM Report, and our community can expect continual improvement in coverage and insights.

We welcome your thoughts and appreciate your engagement,

Martyn Smith
RHSC



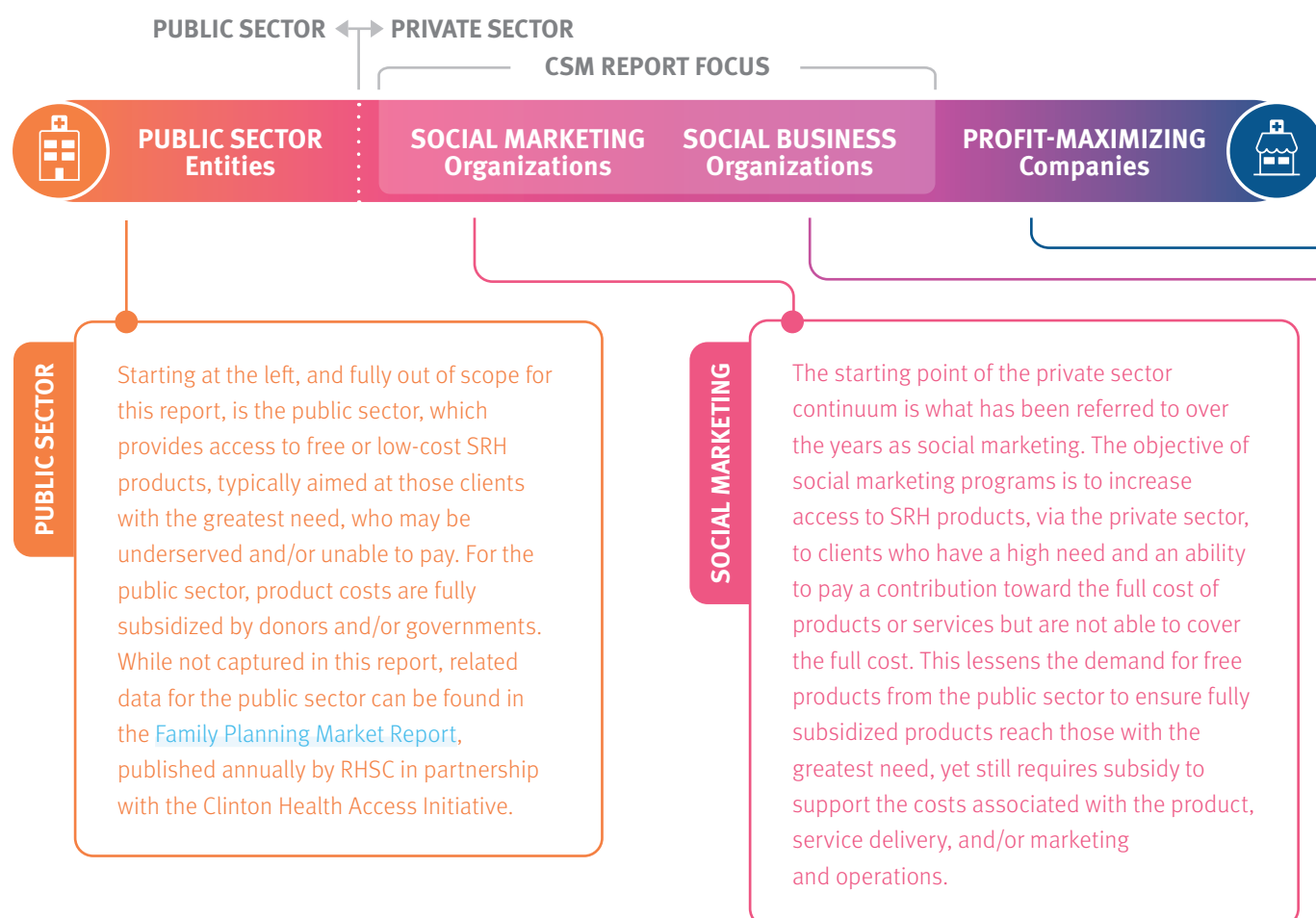
.....
1. In Appendix A, you can learn more about the AG, including its membership, scope, and next steps.

Social marketing and social business within the total market

In an effort to better reflect the evolution and variety within what has historically been grouped together under the broad category of “social marketing,” both within this report and elsewhere, the Reproductive Health Supplies Coalition (RHSC) convened an advisory group (AG) in 2024 to facilitate conversations and arrive at a common set of data definitions around the private sector. An important component of this was to break out the evolving role and business models adopted by social business enterprises within the continuum of private-sector sexual and reproductive health (SRH) service and product provision, with particular focus on the role of subsidy as a key differentiator.

The following graphic (Figure 1) aims to illustrate this continuum. Organizations may find that their business models blend elements of different models and do not neatly fit within one specific category in this continuum. Therefore, the continuum represents the fluidity between these models by placing them on a spectrum.

Figure 1. Spectrum of business models for the SRH market.



The CSM Report focuses on the middle two segments – **SOCIAL MARKETING** and **SOCIAL BUSINESSES**.

Beginning in this year (2024), the report's title and framing were expanded to include both social marketing and social business. And, in this year's data collection process, reporting organizations* were given the option to report on subsidies for each program and country, including an indication of the products or services for which subsidies were provided. In response, 12 of the 129 reporting programs that shared data indicated they had received a subsidy for at least one product. The table on the right (Table 1) shows the products and the number of organizations per product for which subsidy was reported. Given that this reporting was optional, it is important to bear in mind that this does not mean that all other products were provided without subsidy.

*The 2024 CSM Report included 23 reporting organizations, which cover 129 country programs distributed in 77 countries. The number of country programs far exceeds the number of reporting organizations, since one organization may have several programs operating in different countries. Furthermore, there are more country programs than countries represented, as several different programs may operate within a given country. Most of the analysis included in the report focuses on country programs, which helps to account for the fact that some reporting organizations are much larger, providing a more meaningful basis for comparison between programs or years. However, even within the country programs themselves, there are significant variations in program size.

Table 1. Number of programs reporting subsidy for each product

PRODUCT	PROGRAMS
1-Month Intra-Muscular Injectables (units)	1
3-Month Intra-Muscular Injectables (units)	4
3-Month Sub-Cutaneous Injectables (units)	4
3-Year Implants (units)	2
4-Year Implants (units)	1
5-Year Implants (units)	1
Combined Oral Contraceptives (COC) (cycles)	7
Condoms (units)	11
Copper-bearing IUDs (units)	3
Cycle Beads (units)	2
Emergency Contraception (doses)	2
Female Condoms (units)	2
Hormonal IUDs (units)	1
Misoprostol (tabs)	2
Progestin-only Pills (POP) (cycles)	1

SOCIAL BUSINESS

Further along the continuum are social businesses. The objective of these enterprises is to increase access to SRH products via the private sector for populations with greater purchasing power. These businesses target consumers who have the ability to pay for the full product costs. Social businesses are focused on sustainability and covering the costs of all operations; however, subsidy may be leveraged either in the short term or to reach specific consumer segments.

PROFIT-MAXIMIZING

Finally, at the far right, is the profit-maximizing segment of the private sector. The aim is to increase access to SRH products for consumers with higher purchasing power and the ability to fully cover the costs of products, service provision, and built-in profit margins. Typically, there is no subsidy involved, though profit-maximizing businesses may choose to use subsidies to reach specific consumer segments.²

2. While organizations that fall into the profit-maximizing segment have built their business models to focus on full cost recovery, there remains a diversity of organizations that fall into this category. Some may choose to reinvest profit in innovation, research, and development, while others may remain focused on full profit maximization.

Changes from previous years

Collaborative work is at the core of the RHSC's history and action; that is why each change and update we implemented in the report was preceded by extensive working sessions with partners, stakeholders, and users of the report, who generously provided their invaluable time and efforts to help us reach the current version. In the years ahead, we will continue to welcome feedback to adapt and improve the CSM Report to best meet the needs of stakeholders around the globe.

In contrast to last year, where, in consultation with the CSM AG, we made the decision to maintain the status quo of the CSM Report (with the exception of a few minor adjustments), this year presented an opportunity to implement more significant changes geared toward further improving the impact of the report. While this year's report includes more extensive changes, we still prioritized maintaining key historical elements of the report as well as ensuring that users could compare data over time. Along with the changes detailed above, such as expanding the focus to include social businesses in addition to social marketing organizations (SMOs), as well as including optional reporting on subsidies, there are other important changes aimed at improving the report's clarity and analysis.

One of the most significant differences concerns the impact metrics used throughout the report. For contraceptive commodities, couple-years of protection (CYP) remains the standard way to indicate coverage. Last year, we added the United States Agency for International Development (USAID)³ CYP factors to the 2023 CSM Report. For that edition, we maintained the historical CYP factors alongside the USAID CYP factors since the report was in a transitional year. This year, we are streamlining the report to include only the USAID CYP factors—which we will refer to simply as CYP factors in the duration of the report—since these factors are most widely accepted in the community. The historical data file has also been updated to include this CYP factor, rather than the historical CYP factor, to enable continued comparison over time. Note that this process included making several updates to how CYP factors were applied, which may mean that there are discrepancies between older reports and versions of this file and this version. We recognize that we will not be able to apply this with complete accuracy to the more than 30 years of data since calculations have changed over time, but it is a close approximation. For the 2024 CSM Report, you will notice that the CYP factor was left blank for the abortion commodities, which includes a new impact metric.

3. We refer to this as the USAID CYP factor since USAID originally published these CYP factors and their corresponding methodologies. While USAID is no longer active, these CYP factors remain widely accepted by the community.

For abortion and postabortion care (PAC) commodities, we are implementing a new impact metric and analysis section of the CSM Report. This decision resulted from an extensive consultation with the CSM Report AG, and a smaller subgroup dedicated to developing an alternate metric for safe abortion commodities. These groups considered various factors, such as the methodologies and impact metrics used by large organizations, the specific analyses users might perform with report data, and, ultimately, by asking ourselves what the actual impact of these commodities is.

The result of these changes is (1) the actual impact metric and methodology used to calculate it and (2) how we present the data within the report. For the abortion commodities, we are shifting away from CYPs to the number of uterine evacuations as the impact metric. This metric aggregates both abortion and PAC and is presented in the analysis section of the report, aggregated by region rather than linked to specific countries or programs. This mirrors the same approach that RHSC takes within the LEAP Report and provides an added layer of protection to SMOs and social businesses operating in more restrictive settings. See the dedicated section later in the report for more on the methodology for calculating this new impact metric.

The final change for this year relates to product categories. You may recall that in the 2023 CSM Report, we made minor updates to the product categories—splitting oral contraceptive pills into combined oral contraceptives (COCs) and progestin-only pills (POPs) and splitting intrauterine devices (IUDs) into hormonal IUDs and copper-bearing IUDs. Both changes were made to align with CYP calculations as well as to provide better data visibility into these product markets. This year, to further enhance product granularity of interest to users, we decided to include depot medroxyprogesterone acetate subcutaneous (DMPA-SC) as a separate category from depot medroxyprogesterone acetate intramuscular (DMPA-IM). This change follows a request from report users due to the growing usage of DMPA-SC in specific geographies and a desire for improved visibility into DMPA-SC availability.

For more details on how the AG worked through the user-informed design roadmap for the CSM Report, please see Appendix A at the end of the report.



Measuring impact

Contraceptives: How do we calculate CYPs?

CYPs are a common SRH metric representing the amount of contraception one couple needs to prevent pregnancy over a 1-year period. CYP conversion factors are based on the expected amount of time a product can be used before replacement, thus determining the number of years of protection a couple has from a given contraceptive method.

As mentioned in the previous section, we streamlined the 2024 CSM Report to use only one set of CYP factors (Table 2). For more information about the CYP calculations and rationale, please visit [this website](#).⁴

For more information on the CYP calculations and rationale from previous CSM Reports, please visit [DKT International's website](#), or reference previous CSM Reports in the CYP section.⁵

Table 2. Contraceptive products and corresponding CYP conversion factors.

PRODUCT	CONVERSION FACTOR
 Condoms	×0.00833
 Free Condoms	×0.00833
 Female Condoms	×0.00833
 Free Female Condoms	×0.00833
 Combined Oral Contraceptives (COC)	×0.0667
 Progestin-only Pills (POP)	×0.0833
 Injectable (1 mo)	×0.077
 Injectable (2 mo)	×0.167
 Injectable (3 mo)	×0.25
 Hormonal IUDs	×4.6
 Copper-bearing IUDs	×4.8
 Implants (3 year)	×2.5
 Implants (4 year)	×3.2
 Implants (5 year)	×3.8
 Emergency Contraception	×0.05
 Vaginal Foaming Tablets	×0.00833
 Vaginal Contraceptive Film	×0.00833
 Diaphragm	×1

4. Data for Impact (D4I). Couple-years of protection (CYP). Accessed September 26, 2025. <https://www.data4impactproject.org/prh/family-planning/fp/couple-years-of-protection-cyp/>

5. DKT International. Insights & news. Accessed September 26, 2025. <https://www.dktinternational.org/insights-news/>

Abortion and postabortion care: uterine evacuations

The methodology to calculate the number of uterine evacuations was co-developed by a number of CSM Report AG members, and includes several different considerations to convert both medical and surgical abortion commodity sales into the number of uterine evacuations. While we do not publish this exact methodology (to protect SMOs and social businesses who are operating in more restrictive settings), we incorporated the following elements into our methodology for medical abortion (MA) commodities:

- 1. First, we applied a discount to account for wastage and underdosing to all MA commodity sales.
- 2. Second, we applied a discount to account for non-MA use where it was applicable (e.g., misoprostol sales).
- 3. Third, we applied an effectiveness discount to all MA commodities.

Additionally, where mifepristone was sold separately from misoprostol, we assumed that each tablet of mifepristone was sold with four misoprostol (and then discounted misoprostol sales accordingly). Where the sales data did not support this (e.g., in a country program that sold mifepristone but no misoprostol), no impact calculation was done for the mifepristone. For misoprostol-only sales, we assumed a dose of 12 tablets. This both avoided overestimation of impact and was in line with assumptions made in other MA data resources.

Finally, for surgical abortion commodities, we used the same calculation as historical sales volumes, assuming a conversion factor of 25 for manual vacuum aspiration kits(MVA), manual vacuum aspiration, and aspirators (i.e., each unit is multiplied by 25).

These calculations were applied to all abortion and PAC commodities (Table 3) and rolled up into a comprehensive, regional-level analysis that explores the contribution of SMOs and social businesses to creating access to abortion.

Table 3. Safe abortion and PAC products.

PRODUCT	
	Aspirators (units)
	Cannulae (units)
	MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs)
	Mifepristone (tabs)
	Misoprostol (tabs)
	MVA (kits)
	MVA/single (units)

DATA DISCLAIMERS

All sales data in this report is self-reported, and it was not always possible to differentiate between sales to the private sector and sales to other nongovernmental organizations (NGOs) or the public sector. RHSC also recognizes that there are limitations in ensuring that all SMOs and social business organizations operating in this space worldwide are represented within the CSM Report. There is no comprehensive list of all organizations that are currently active, so there may be some that were not included in the process of developing the 2024 CSM Report, and some organizations opted out of reporting their data. Data from clinical services is not included in this report.

Following our comprehensive data review this year, we identified and corrected several CYP factor applications; this report reflects those updates. These updates have also been made to the historical data file. As a result, comparison of previous reports or versions of the historical data file may have inconsistencies to what is reflected in this updated file.

If you would like to be included in future reporting, or have additional suggestions of organizations we should include, please contact csmreport@rhsupplies.org. RHSC is eager to continue to increase the number of organizations reporting sales data to better reflect this part of the market.

2024 Statistics - SMOs & social businesses

HIGHLIGHTS: CYP TRENDS - 2020-2024

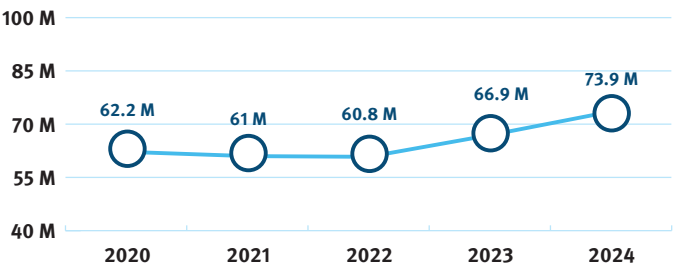
Starting this year, we use only one CYP calculation as a standardized impact metric for the report. In looking at data for the last five years, we observe a considerable increase in CYPs attributed to sales by SMOs and social businesses this year (2024) compared to 2023. To help contextualize this increase—and trends over time—we also included a table (Table 4) comparing the number of programs included in the report each year.

These numbers—as well as considerations around the relative size of individual programs—are an important factor to consider when thinking about potential explanations behind this increase. To better understand these trends, additional analysis of the sales data would be necessary. Historically, the CSM Report did not include this level of analysis, but as we look at future changes, we will explore opportunities to add additional analysis to sales and impact trends.

Table 4. Total CYPs generated and number of reporting programs per year

	CYPs	PROGRAMS		CYPs	PROGRAMS
2020	62.2 M	112	2023	66.9 M	110
2021	61 M	95	2024	73.9 M	129
2022	60.8 M	94			

Figure 2. Trend line of CYPs generated by reporting programs

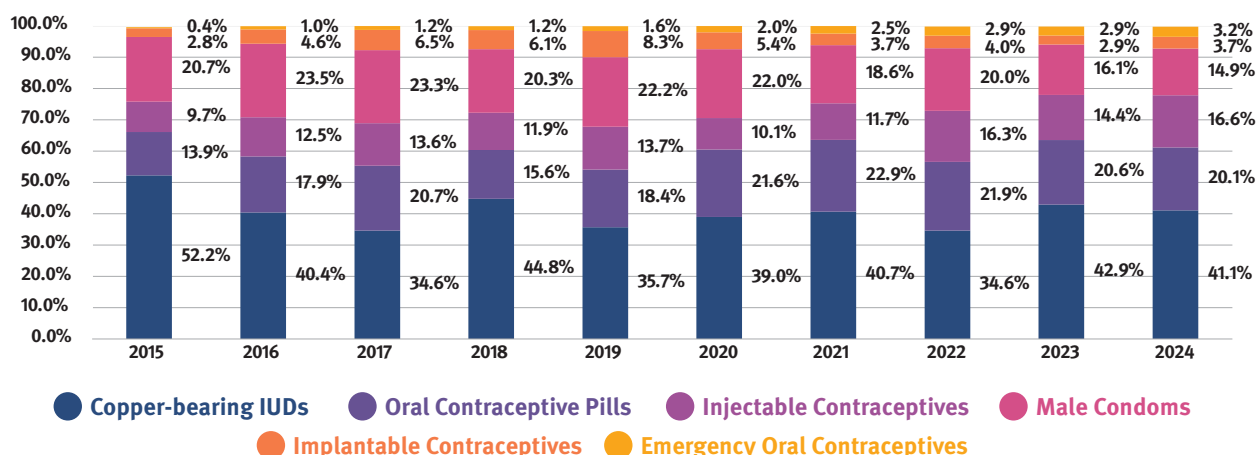


HIGHLIGHTS: CONTRACEPTIVE SALES - 2024

Table 5. Product sales and number of reporting programs.

PRODUCT	QUANTITY SOLD	PROGRAMS
 1-Month Intra-Muscular Injectables (units)	8,406,632	14
 2-Month Intra-Muscular Injectables (units)	2,901,941	2
 3-Month Intra-Muscular Injectables (units)	43,682,964	45
 3-Month Sub-Cutaneous Injectables (units)	970,704	18
 3-Year Implants (units)	648,405	37
 4-Year Implants (units)	81,506	2
 5-Year Implants (units)	227,149	16
 Combined Oral Contraceptives (COC) (cycles)	218,274,273	70
 Condoms (units)	1,315,820,017	116
 Copper-bearing IUDs (units)	6,332,416	76
 Cycle Beads (units)	5,368	3
 Diaphragm (units)	11,405	4
 Emergency Contraception (doses)	47,811,588	81
 Female Condoms (units)	423,712	8
 Free Condoms (units)	11,012,866	14
 Free Female Condoms (units)	8,880	3
 Hormonal IUDs (units)	44,967	18
 Progestin-only Pills (POP) (cycles)	3,723,000	4

Figure 3. Percent of CYPs provided by sales by method by year (**only** methods with sales that contributed more than 1% of CYPs)



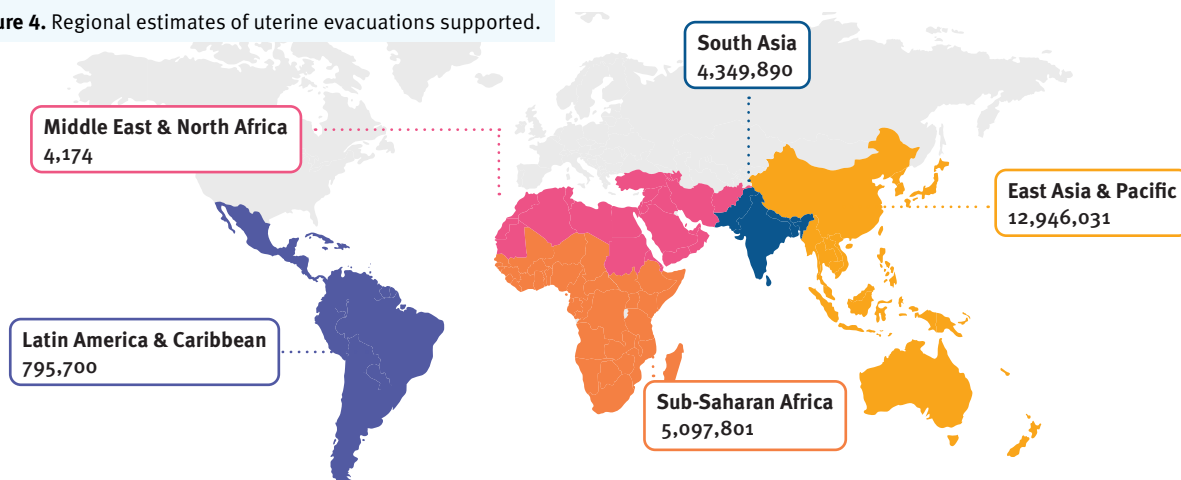
The sales of all abortion products over time are documented in the historical data file. The addition of regional analysis on the number of uterine evacuations supported by SMO and social business sales is new this year, and pending user interest, we will add additional analysis of trends over time to future reports.

Table 6. Product sales and number of reporting programs

PRODUCT	QUANTITY SOLD	PROGRAMS
 Aspirators (units)	34,807	17
 Cannulae (units)	211,667	19
 MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs)	7,508,788	47
 Mifepristone (tabs)	455,523	7
 Misoprostol (tabs)	53,451,229	69
 MVA (kits)	51,904	36
 MVA/single (units)	471,005	4

In 2024, the organizations that shared data for this report provided women with the medicine and supplies estimated to support over 23 million uterine evacuations across five regions (Figure 4).

Figure 4. Regional estimates of uterine evacuations supported.



2024 Sales - SMOs & social businesses

Sales data and statistics listed for all reporting programs

ORGANIZATION ABBREVIATIONS

ADEMAS	Agence pour le Développement du Marketing Social
AIMAS	Agence Ivoirienne de Marketing Social
ANIMAS SUTURA	Nigerian Association of Social Marketing
ASHONPLAFA	Asociación Hondureña de Planificación Familiar
ASMO	Afghan Social Marketing Organization
ATMS	Association Togolaise pour le Marketing Social et la Communication pour la Santé
CEMOPLAF	Centro Médico de Orientación y Planificación Familiar
CIES Salud Sexual - Salud Reproductiva	Centro de Investigación y Educación Sexual y Reproductiva: Salud Sexual - Salud Reproductiva
DKT	DKT International
FPA Sri Lanka	Sri Lanka Family Planning Association of Sri Lanka
MSI	MSI Reproductive Choices
OCEAC	Organization for Coordinating the Fight Against Endemics in Central Africa
PPSAC	Project for the Prevention of HIV/AIDS in Central Africa
PROMACO	Programme de Marketing Social et de Communication pour la Santé
PSI	Population Services International
PSH	Population Solutions for Health (Zimbabwe)
PS Kenya	Population Services Kenya
PS Lanka	Population Services Lanka
SFH	Society for Family Health (Rwanda)
SMC	Social Marketing Company (Bangladesh)
T-MARC	Tanzania Marketing and Communications Project

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Afghanistan (1) Started by the Communication for Behavior Change; Expanding Access to Private Sector Health Project and Services in Afghanistan (COMPRI-A) Project	ASMO	Combined Oral Contraceptives (COC) (cycles) 55,494 Condoms (units).....4,022,676 Intra-muscular injectables (1) (units) 296,834 Progestin-only Pills (POP) (cycles) 42,853 Total	3,701 33,521 22,856 3,570 63,648
 Afghanistan (2) Started by DKT in 2020	DKT	Combined Oral Contraceptives (COC) (cycles) 555,000 Condoms (units).....1,426,099 Emergency Contraception (doses) 167,500 Implants (3) (units).....2,350 Intra-muscular injectables (3) (units) 183,460 Copper-bearing IUDs (units).....115,100 Misoprostol (tabs) 68,000 MVA (kits) 755 Total	37,019 11,884 8,375 5,875 45,865 552,480 — — 661,497
 Afghanistan (3) Started by MSI in 2003	MSI	Combined Oral Contraceptives (COC) (cycles) 157,998 Condoms (units).....8,400 Total	10,538 70 10,608

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Albania	NESMARK	Condoms (units).....136,440 Total	1,137 1,137
 Angola	Viya Health	Condoms (units).....1,602,612 Total	13,355 13,355
 Argentina Started by DKT in 2018; prior year results included in regional hub (DKT Latin America South (LAS))	DKT	Condoms (units)..... 64,512 Total	538 538
 Bangladesh (1) Started by PSI in 1975; now managed by the Social Marketing Company (formerly SMP)	SMC	Combined Oral Contraceptives (COC) (cycles) 46,383,620 Condoms (units).....162,529,656 Emergency Contraception (doses).....6,629,368 Implants (5) 5,246 Intra-muscular injectables (3) (units) 9,378,931 Copper-bearing IUDs (units)..... 9,890 Progestin-only Pills (POP) (cycles).....3,457,954 Total	3,093,787 1,354,360 331,468 19,935 2,344,733 47,472 288,048 7,479,803
 Bangladesh (2) Started by MSI in 1988	MSI	MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) .29,042	—
 Benin Started by DKT in 2017	DKT	Combined Oral Contraceptives (COC) (cycles) 29,700 Condoms (units)..... 603,288 Emergency Contraception (doses)..... 332,160 Intra-muscular injectables (3) (units) 2,063 Copper-bearing IUDs (units)..... 8,880 Sub-cutaneous injectables (3) (units) 6,600 MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) ...5,500 Misoprostol (tabs) 131,040 MVA (kits) 718 Total	1,981 5,027 16,608 516 42,624 1,650 — — — 68,406
 Bolivia (1) Started by CIES in 1987	CIES Salud Sexual - Salud Reproductiva	Combined Oral Contraceptives (COC) (cycles) 3,973 Condoms (units).....40,777 Emergency Contraception (doses)..... 658 Hormonal IUDs (units) 2,565 Implants (3) (units)..... 3,159 Implants (5) (units).....3,683 Intra-muscular injectables (1) (units) 2,123 Intra-muscular injectables (3) (units) 1,145 Copper-bearing IUDs (units)..... 4,048 Total	265 340 33 11,799 7,898 13,995 163 286 19,430 54,210
 Bolivia (2) Started by DKT in 2017	DKT	Combined Oral Contraceptives (COC) (cycles) 40,970 Condoms (units).....443,376 Emergency Contraception (doses).....32,690 Implants (3) (units)..... 1,679 Intra-muscular injectables (3) (units) 14,090 Copper-bearing IUDs (units)..... 6,510 Aspirators (units) 579 Cannulae (units).....4,719 MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) 620 Misoprostol (tabs)..... 6,640 Total	2,733 3,695 1,635 4,198 3,523 31,248 — — — — 47,030

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Brazil Started by DKT in 1991	DKT	Condoms (units).....99,878,531 Diaphragm (units) 282 Emergency Contraception (doses)..... 126,720 Intra-muscular injectables (1) (units) 7,400 Copper-bearing IUDs (units)..... 84,103 Aspirators (units) 10701 Cannulae (units).....42936 Total	832,288 0 6,336 570 403,694 — — 1,242,888
 Burkina Faso (1) Started by DKT in 2016	DKT	Condoms (units)..... 3,107,520 Emergency Contraception (doses)..... 47,847 Intra-muscular injectables (3) (units) 5,210 Copper-bearing IUDs (units)..... 18,100 Sub-cutaneous injectables (3) (units) 4,200 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ..11,340 Misoprostol (tabs) 245,992 MVA (kits) 526 Total	25,895 2,392 1,303 86,880 1,050 — — — 117,520
 Burkina Faso (2) Started by MSI in 2009	MSI	Combined Oral Contraceptives (COC) (cycles) 560,000 Condoms (units).....138,840 Emergency Contraception (doses).....5,923 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ... 1,330 Misoprostol (tabs) 503,360 Total	37,352 1,157 296 — — 38,805
 Burkina Faso (3) Started by PROMACO	PROMACO	Condoms (units)..... 10,353,600 Free Condoms (units) 234,144 Total	86,277 1,951 88,228
 Burundi	DKT	Condoms (units)..... 876,291 Implants (3) (units).....1,648 Implants (5) (units).....379 Copper-bearing IUDs (units).....3,203 Sub-cutaneous injectables (3) (units) 2,125 MVA (kits) 270 Total	7,302 4,120 1,440 15,374 531 — 28,768
 Cambodia	DKT	Combined Oral Contraceptives (COC) (cycles) 9,900 Condoms (units).....55,980 Emergency Contraception (doses)..... 33,840 Copper-bearing IUDs (units)..... 6,500 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .29,620 Misoprostol (tabs) 38,000 Total	660 466 1,692 31,200 — — 34,019
 Cambodia	Viya Health	Combined Oral Contraceptives (COC) (cycles) 6,825,910 Condoms (units).....14,902,194 Emergency Contraception (doses)..... 142,667 Implants (5) (units).....6,395 Intra-muscular injectables (3) (units) 340,836 Copper-bearing IUDs (units)..... 13,075 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 244,059 Misoprostol (tabs) 299,200 Total	455,288 124,180 7,133 24,301 85,209 62,760 — — 758,872

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Cameroon Started by DKT in 2016	DKT	Combined Oral Contraceptives (COC) (cycles) 8,640 Condoms (units)..... 9,642,126 Emergency Contraception (doses).....85,870 Copper-bearing IUDs (units).....26,635 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .54,205 Misoprostol (tabs) 590,880 MVA (kits) 2,754 Total	576 80,348 4,294 127,848 — — — 213,066
 Cameroon Started by OCEAC in 2006	PPSAC - OCEAC	Condoms 6,976,812 Total	58,138 58,138
 Central African Republic Started by OCEAC in 2006	PPSAC - OCEAC	Condoms (units).....750,240 Free Condoms (units) 5,760 Total	6,252 48 6,300
 Chad (1)	DKT	Condoms (units)..... 97,920 Emergency Contraception (doses)..... 30 Copper-bearing IUDs (units)..... 1,350 Misoprostol (tabs) 32,840 MVA (kits) 170 Total	816 2 6,480 — — 7,297
 Chad (2) Started by OCEAC in 2006	PPSAC - OCEAC	Condoms (units).....2,494,244 Free Condoms (units) 1,560 Total	20,785 13 20,798
 Chile Started by DKT in 2010	DKT	Condoms (units).....841,113 Diaphragm (units) 10,512 Emergency Contraception (doses)..... 47,298 Female Condoms (units) 312,173 Implants (3) (units)..... 521 Intra-muscular injectables (3) (units) 52,531 Copper-bearing IUDs (units).....1,176 Aspirators (units) 786 Cannulae (units)..... 2,660 Misoprostol (tabs)..... 156 Total	7,009 0 2,365 2,601 1,303 13,133 5,645 — — — 32,055
 China Started by MSI in 2003	MSI	MVA/single (units) 468,697	—
 Colombia Started by DKT in 2017	DKT	Condoms (units)..... 161,952 Diaphragm (units) 601 Emergency Contraception (doses)..... 3,990 Female Condoms (units) 8 Copper-bearing IUDs (units).....4,762 Aspirators (units) 1,554 Cannulae (units)..... 19,780 Mifepristone (tabs)..... 1,280 Misoprostol (tabs).....1,615 Total	1,350 0 200 0 22,858 — — — — 24,407

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Congo / Brazzaville (1) Started by DKT in 2020	DKT	Combined Oral Contraceptives (COC) (cycles) 11,118 Condoms (units).....209,246 Emergency Contraception (doses)..... 4,557 Implants (3) (units).....1,516 Implants (5) (units).....276 Copper-bearing IUDs (units)..... 1,776 Sub-cutaneous injectables (3) (units) 1,400 MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) ... 2,635 Misoprostol (tabs) 31,948 MVA (kits) 72 Total	742 1,744 228 3,790 1,049 8,525 350 — — — 16,427
 Congo / Brazzaville (2) Started by OCEAC in 2009	PPSAC - OCEAC	Condoms (units)..... 6,757,920 Free Condoms (units) 7,200 Total	56,314 60 56,374
 Costa Rica (1) Started by DKT in 2018	DKT	Combined Oral Contraceptives (COC) (cycles) 30 Condoms (units).....414,757 Emergency Contraception (doses) 640 Copper-bearing IUDs (units)..... 84 Total	2 3,456 32 403 3,893
 Costa Rica (2)	Viya Health	Condoms (units)..... 1,386,397 Total	11,553 11,553
 Côte d'Ivoire (1) Started by PSI in 1998; now managed by AIMAS	AIMAS	Combined Oral Contraceptives (COC) (cycles) 2,985,876 Condoms (units).....18,876,570 Emergency Contraception (doses) 1,441,840 Free Condoms (units) 600,312 Intra-muscular injectables (3) (units) 222,675 Total	199,158 157,298 72,092 5,002 55,669 489,220
 Côte d'Ivoire (2) Started by DKT in 2017	DKT	Condoms (units)..... 5,509,872 Emergency Contraception (doses) 129,280 Implants (3) (units)..... 320 Copper-bearing IUDs (units)..... 41,845 Sub-cutaneous injectables (3) (units) 9,400 Misoprostol (tabs) 941,236 MVA (kits) 3,354 Total	45,914 6,464 800 200,856 2,350 — — 256,384
 Democratic Republic of the Congo Started by DKT in 2009	DKT	Combined Oral Contraceptives (COC) (cycles) 1,106,552 Condoms (units).....17,008,358 Emergency Contraception (doses) 1,690,862 Hormonal IUDs (units) 500 Implants (3) (units)..... 146,245 Implants (5) (units) 82,115 Intra-muscular injectables (3) (units) 178,567 Copper-bearing IUDs (units)..... 161,843 Sub-cutaneous injectables (3) (units) 98,587 MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) 125,596 Misoprostol (tabs) 557,492 MVA (kits) 2,545 Total	73,807 141,731 84,543 2,300 365,613 312,037 44,642 776,846 24,647 — — — 1,826,165
 Dominican Republic (1) Started by DKT in 2016	DKT	Condoms (units)..... 525,551 Copper-bearing IUDs (units).....1,616 Misoprostol (tabs) 61,600 Total	4,379 7,757 — 12,136
 Dominican Republic (2)	Viya Health	Condoms (units)..... 2,754,320 Total	22,952 22,952

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Ecuador (1) Started by DKT in 2017	DKT	Condoms (units)..... 276,144 Emergency Contraception (doses)..... 7,295 Implants (3) (units)..... 2,182 Intra-muscular injectables (3) (units) 9,845 Copper-bearing IUDs (units)..... 4,364 Aspirators (units) 370 Cannulae (units)..... 2,962 Misoprostol (tabs) 27,032 Total	2,301 365 5,455 2,461 20,947 — — — 31,529
 Ecuador (2) Started by CEMOPLAF in 1974	Fundación CEMOPLAF	Combined Oral Contraceptives (COC) (cycles) 3,190 Condoms (units)..... 125,000 Emergency Contraception (doses)..... 2,424 Hormonal IUDs (units) 620 Implants (3) (units)..... 1,025 Implants (5) (units)..... 921 Intra-muscular injectables (1) (units) 7,144 Intra-muscular injectables (3) (units) 9,866 Misoprostol (tabs) 58,338 Total	213 1,042 121 2,852 2,563 3,500 550 2,467 — 13,306
 Egypt Started by DKT in 2004	DKT	Condoms (units)..... 5,568,906 Emergency Contraception (doses)..... 595,240 Copper-bearing IUDs (units)..... 255,336 Cannulae (units)..... 158 MVA (kits) 64 Total	46,406 29,762 1,225,613 — — 1,301,780
 El Salvador (1) Started by DKT in 2016	DKT	Combined Oral Contraceptives (COC) (cycles) 25 Condoms (units)..... 257,217 Emergency Contraception (doses)..... 10,830 Intra-muscular injectables (1) (units) 400 Copper-bearing IUDs (units)..... 2,476 Misoprostol (tabs) 4,200 Total	2 2,143 542 31 11,885 — 14,602
 El Salvador (2)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 138,803 Condoms (units)..... 4,798,608 Emergency Contraception (doses)..... 5,640 Implants (5) (units)..... 1,466 Copper-bearing IUDs (units)..... 2,269 Misoprostol (tabs) 26,912 Total	9,258 39,987 282 5,571 10,891 — 65,989
 35. Ethiopia (1) Started by DKT in 1990	DKT	Combined Oral Contraceptives (COC) (cycles) 4,720,374 Condoms (units)..... 30,812,132 Emergency Contraception (doses)..... 4,648,966 Female Condoms (units) 6,899 Implants (3) (units)..... 110,750 Intra-muscular injectables (3) (units) 7,650,475 Copper-bearing IUDs (units)..... 573,090 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 320,165 Misoprostol (tabs) 2,510,520 MVA (kits) 795 Total	314,849 256,757 232,448 57 276,875 1,912,619 2,750,832 — — — 5,744,438
 Ethiopia (2) Started by MSI in 1991	MSI	Combined Oral Contraceptives (COC) (cycles) 435,063 Condoms (units)..... 871,476 Emergency Contraception (doses)..... 4,372,076 Intra-muscular injectables (3) (units) 288,044 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 560,548 Total	29,019 7,262 218,604 72,011 — 326,896

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Ethiopia (3)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 58,832 Emergency Contraception (doses) 484,920 Total	3,924 24,246 28,170
 Gabon Started by DKT in 2017	DKT	Condoms (units)..... 851,904 Total	7,099 1,497
 The Gambia	DKT	Condoms (units)..... 95,040 Total	792 792
 Ghana (1) Started by DKT in 2011	DKT	Condoms 19,405,412 Female Condoms 1,188 Copper-bearing IUDs 11,994 Implants (3) 1,729 Implants (5) 13,003 Injectables (1) 4,376 Injectables (3) 163,443 Combined Oral Contraceptives (COC) 376,791 Emergency Contraception 5,735,280 MVA kits..... 1,315 Misoprostol 165,168 MA ‘Combipack’ 83,125 Total	50,122 145,517 336,010 5 5,213 31,312 8 58,592 60,278 1,939 — — 688,995
 Ghana (2) Started by MSI in 2006	MSI	Condoms (units).....577,512 Emergency Contraception (doses)..... 106,065 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .67,660 Misoprostol (tabs).....499,620 MVA (kits) 135 Total	4,812 5,303 — — — 10,116
 Guatemala (1) Started by DKT in 2014	DKT	Condoms (units)..... 2,974,632 Emergency Contraception (doses)..... 2,600 Hormonal IUDs (units) 2,330 Implants (3) (units)..... 126 Copper-bearing IUDs (units)..... 2,881 Aspirators (units) 351 Cannulae (units)..... 3,507 Mifepristone (tabs)..... 2,182 Total	24,788 130 10,718 315 13,829 — — — 49,779
 Guatemala (2)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 162,158 Condoms (units).....10,986,280 Emergency Contraception (doses)..... 31,340 Implants (5) (units)..... 388 Intra-muscular injectables (1) (units) 25,300 Copper-bearing IUDs (units)..... 4,294 Misoprostol (tabs)..... 142,320 Total	10,816 91,549 1,567 1,474 1,948 20,611 — 127,965
 Guinea Started by DKT in 2017	DKT	Condoms (units).....1,735,560 Emergency Contraception (doses) 4,550 Copper-bearing IUDs (units)..... 2,150 Sub-cutaneous injectables (3) (units) 4,600 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 780 Misoprostol (tabs).....101,760 MVA (kits) 540 Total	14,462 228 10,320 1,150 — — — 26,160
 Guinea-Bissau Started by DKT in 2017	DKT	Condoms (units).....205,920 Total	1,716 1,716

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Honduras (1) Started by DKT in 2018	DKT	Condoms (units)..... 25,895 Emergency Contraception (doses)..... 60,000 Implants (3) (units)..... 24 Intra-muscular injectables (1) (units)..... 25 Copper-bearing IUDs (units)..... 2,474 Aspirators (units) 225 Cannulae (units)..... 1,800 Misoprostol (tabs)..... 2,912 Total	216 3,000 60 2 11,875 — — — 15,153
 Honduras (2)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 2,690 Condoms (units)..... 4,812,064 Intra-muscular injectables (1) (units) 1,826 Total	179 40,099 141 40,419
 Honduras (3) Started by Ashonplafa in 1963	ASHONPLAFA	Combined Oral Contraceptives (COC) (cycles) 1,363,336 Condoms (units)..... 364,552 Emergency Contraception (doses)..... 15,607 Hormonal IUDs (units) 35 Implants (3) (units)..... 3,322 Intra-muscular injectables (1) (units) 183,027 Intra-muscular injectables (3) (units) 162,224 Copper-bearing IUDs (units)..... 5,665 Total	90,935 3,038 780 161 8,305 14,093 40,556 27,192 185,060
 India (1) Mumbai; started by DKT in 1992; managed by DKT India	DKT	Combined Oral Contraceptives (COC) (cycles) 14,720,018 Condoms (units)..... 73,881,608 Emergency Contraception (doses)..... 867,791 Hormonal IUDs (units) 6,078 Intra-muscular injectables (3) (units) 132,540 Copper-bearing IUDs (units)..... 140,273 Aspirators (units) 969 Cannulae (units)..... 6,904 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 1,721,692 Misoprostol (tabs)..... 1,256,400 Total	2,375,274 981,825 615,655 43,390 27,959 33,135 673,310 — — — — 2,375,274
 India (2) Janani; started by DKT in 1996; managed by Janani (a social marketing program of DKT)	DKT/Janani	Combined Oral Contraceptives (COC) (cycles) 1,239,424 Condoms (units)..... 30,673,191 Emergency Contraception (doses)..... 104,637 Intra-muscular injectables (3) (units) 244,528 Copper-bearing IUDs (units)..... 69,436 Aspirators (units) 900 Cannulae (units)..... 405 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 1,963,576 Misoprostol (tabs)..... 1,052,548 MVA (kits) 494 Total	82,670 255,600 5,232 61,132 333,293 — — — — — — 737,926
 India (3)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 968,499 Condoms (units)..... 226,646 Hormonal IUDs (units) 448 Implants (3) (units)..... 20 Intra-muscular injectables (3) (units) 2,609 Copper-bearing IUDs (units)..... 12,092 Progestin-only Pills (POP) (cycles)..... 220,953 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 532,094 Misoprostol (tabs)..... 66,080 Total	64,599 1,889 2,061 50 652 58,042 18,405 — — 145,698

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Indonesia Started by DKT in 1996;	DKT	Combined Oral Contraceptives (COC) (cycles) 46,955,658 Condoms (units)..... 220,076,987 Emergency Contraception (doses)..... 436,114 Implants (3) (units)..... 17,033 Intra-muscular injectables (1) (units) 7,845,860 Intra-muscular injectables (2) (units) 2,797,560 Intra-muscular injectables (3) (units) 14,738,100 Copper-bearing IUDs (units)..... 1,616,921 Aspirators (units) 2,466 Cannulae (units)..... 5,155 Misoprostol (tabs) 234,750 Total	3,131,942 1,833,902 21,806 42,583 604,131 467,193 3,684,525 7,761,221 — — — 17,547,302
 Iraq Started by DKT in 2021	DKT	Condoms (units)..... 941,400 Total	7,845 7,845
 Jordan Started by DKT in 2022	DKT	Free Condoms (units) 21,159 Copper-bearing IUDs (units)..... 6,545 Total	176 31,416 31,592
 Kenya (1) Started by DKT in 2016	DKT	Combined Oral Contraceptives (COC) (cycles) 8,994 Condoms (units)..... 20,589,033 Emergency Contraception (doses)..... 339,340 Hormonal IUDs (units) 190 Implants (3) (units)..... 1,160 Intra-muscular injectables (3) (units) 918,775 Copper-bearing IUDs (units)..... 11,298 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 78,304 Misoprostol (tabs)..... 304,584 MVA (kits) 1,161 Total	600 171,568 16,967 874 2,900 229,694 54,230 — — — 476,833
 Kenya (2) Started by MSI in 1986	MSI	Condoms (units)..... 840,780 Emergency Contraception (doses)..... 25,684 Hormonal IUDs (units) 348 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 40,541 Misoprostol (tabs)..... 531,800 MVA (kits) 1,066 Total	7,006 1,284 1,601 — — — 9,891
 Kenya (3) Started by DKT and PSI in 1989; now managed by PS Kenya	PS Kenya	Combined Oral Contraceptives (COC) (cycles) 4,372,920 Condoms (units)..... 26,487,792 Intra-muscular injectables (1) (units) 21,550 Total	291,674 220,723 1,659 514,056
 Kenya (4)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 1,881 Emergency Contraception (doses)..... 2,846 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ... 7,962 Misoprostol (tabs)..... 12,680 Total	125 142 — — 268
 Kingdom of Saudi Arabia Started by DKT in 2018	DKT	Copper-bearing IUDs (units)..... 36,000 MVA (kits) 100 Total	172,800 — 172,800
 Laos	DKT	Condoms (units)..... 321,480 Implants (3) (units)..... 500 Copper-bearing IUDs (units)..... 50 MVA (kits) 100 Total	2,679 1,250 240 — 4,169

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Liberia Started by DKT in 2018	DKT	Combined Oral Contraceptives (COC) (cycles) 198,543 Condoms (units)..... 1,591,116 Emergency Contraception (doses)..... 320,136 Implants (3) (units)..... 13,494 Intra-muscular injectables (3) (units) 77,440 Copper-bearing IUDs (units)..... 36,823 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .. 53,172 Misoprostol (tabs) 321,192 MVA (kits) 2,447 Total	13,243 13,259 16,007 33,735 19,360 176,750 — — — 272,354
 Madagascar (1) Started by MSI in 1992	MSI	Condoms (units)..... 215,354 Emergency Contraception (doses)..... 39 Misoprostol (tabs) 353,853 Total	1,795 2 — 1,796
 Madagascar (2)	PSI	Combined Oral Contraceptives (COC) (cycles) 1,328,381 Condoms (units)..... 2,582,880 Cycle Beads (units)..... 1,918 Free Condoms (units) 2,065,648 Free Female Condoms (units)..... 36 Hormonal IUDs (units) 1,421 Implants (3) (units)..... 479 Intra-muscular injectables (3) (units) 2,035,946 Copper-bearing IUDs (units)..... 376 Sub-cutaneous injectables (3) (units) 519,715 Misoprostol (tabs) 266,000 Total	88,603 21,523 0 17,213 0 6,537 1,198 508,987 1,805 129,929 — 775,794
 Malawi Started by MSI in 1987	MSI	Condoms (units)..... 2,792,294 Emergency Contraception (doses)..... 145,037 Misoprostol (tabs) 327,000 Total	23,268 7,252 — 30,520
 Mali (1) Started by DKT in 2017	DKT	Combined Oral Contraceptives (COC) (cycles) 10,080 Condoms (units)..... 1,665,288 Emergency Contraception (doses)..... 263,201 Intra-muscular injectables (3) (units) 6,480 Copper-bearing IUDs (units)..... 3,100 Sub-cutaneous injectables (3) (units) 42,400 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ... 7,920 Misoprostol (tabs) 381,040 MVA (kits) 786 Total	672 13,877 13,160 1,620 14,880 10,600 — — — 54,809
 Mali (2) Started by MSI in 2008	MSI	Combined Oral Contraceptives (COC) (cycles) 309 Condoms (units)..... 31,680 Emergency Contraception (doses)..... 1,200 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ... 2,076 Misoprostol (tabs) 809,948 Total	21 264 60 — — 345
 Mali (3) Started by an NGO called JIGI in 1991; now managed by Momentum Private Healthcare Delivery	ONG JIGI	Combined Oral Contraceptives (COC) (cycles) 1,259,380 Cycle Beads (units)..... 1,500 Free Condoms (units) 1,100,400 Free Female Condoms (units)..... 8,294 Implants (5) (units)..... 7,860 Intra-muscular injectables (3) (units) 945,900 Copper-bearing IUDs (units)..... 3,975 Total	84,001 0 9,170 69 29,868 236,475 19,080 378,662

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Mali (4)	PSI	Combined Oral Contraceptives (COC) (cycles) 1,277,122	85,184
Started by DKT in 2021		Cycle Beads (units) 1,950	0
		Female Condoms (units) 8,297	69
		Free Condoms (units) 454,512	3,787
		Implants (3) (units)..... 13,625	34,063
		Implants (5) (units)..... 8,155	30,989
		Intra-muscular injectables (3) (units) 892,522	223,131
		Copper-bearing IUDs (units).....5,829	27,979
		Progestin-only Pills (POP) (cycles) 1,240	103
		Sub-cutaneous injectables (3) (units) 11,791	2,948
		Misoprostol (tabs).....228,020	—
		Total	408,253
		 Mauritania	DKT
Started by DKT in 2021	Emergency Contraception (doses) 1,960	98	
	Copper-bearing IUDs (units).....625	3,000	
	MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ... 1,200	—	
	Misoprostol (tabs)..... 147,376	—	
	MVA (kits) 42	—	
	Total	8,233	
 Mexico (1)	DKT	Condoms (units)..... 66,730,341	556,064
Started by DKT in 2002		Emergency Contraception (doses) 1,694,461	84,723
		Female Condoms (units) 131	1
		Hormonal IUDs (units) 13,541	62,289
		Implants (3) (units).....3,428	8,570
		Copper-bearing IUDs (units).....200,476	962,285
		Aspirators (units) 3,668	—
		Cannulae (units).....53,966	—
		MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .. 4,478	—
		Mifepristone (tabs)..... 45,991	—
		Misoprostol (tabs)..... 336,616	—
		MVA (kits) 4,563	—
		Total	1,673,931
 Mexico (2)	MSI	Condoms (units)..... 38,466	321
Started by MSI in 1999		Intra-muscular injectables (1) (units) 73	6
		Copper-bearing IUDs (units).....1,154	5,539
		MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .24,624	—
		Mifepristone (tabs)..... 6,070	—
		Misoprostol (tabs).....8,599	—
		Total	5,865
 Mongolia	MSI	Combined Oral Contraceptives (COC) (cycles) 163,935	10,934
Started by MSI in 2000		Condoms (units)..... 5,946,257	49,550
		Emergency Contraception (doses) 96,648	4,832
		Hormonal IUDs (units) 155	713
		Implants (3) (units).....11,485	28,713
		Intra-muscular injectables (3) (units) 25,776	6,444
		Copper-bearing IUDs (units).....42,492	203,962
		MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .20,958	—
		Mifepristone (tabs)..... 46,266	—
		Misoprostol (tabs).....97,201	—
		MVA/single (units) 41	—
		Total	305,148
		 Mozambique (1)	Viya Health
Total	19,014		

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Mozambique (2) Started by DKT in 2008	DKT	Combined Oral Contraceptives (COC) (cycles) 892,454 Condoms (units).....9,498,407 Emergency Contraception (doses).....217,087 Female Condoms (units) 43,454 Implants (3) (units).....17,841 Implants (5) (units).....18,702 Intra-muscular injectables (3) (units) 41,472 Copper-bearing IUDs (units).....8,029 Sub-cutaneous injectables (3) (units) 53,301 MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) 195,812 Misoprostol (tabs).....174,684 MVA (kits) 445 Total	59,527 79,150 10,854 362 44,603 71,068 10,368 38,539 13,325 — — — 327,796
 Myanmar (1) Started by DKT in 2014	DKT	Combined Oral Contraceptives (COC) (cycles) 1,641,546 Condoms (units).....2,571,840 Emergency Contraception (doses).....2,025,240 Implants (4) (units) 80,953 Intra-muscular injectables (3) (units) 304,644 Copper-bearing IUDs (units).....12,925 Aspirators (units) 1,735 Cannulae (units).....8,597 Misoprostol (tabs).....192,756 Total	109,491 21,431 101,262 259,050 76,161 62,040 — — — 629,435
 Myanmar (2)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 5,216,720 Condoms (units).....5,135,961 Total	347,955 42,798 390,753
 Myanmar (3)	Sun Community Health	Combined Oral Contraceptives (COC) (cycles) 9,578 Condoms (units).....2,928 Emergency Contraception (doses).....879 Free Condoms (units) 15,268 Free Female Condoms (units).....550 Implants (4) (units) 553 Intra-muscular injectables (3) (units) 2,323 Copper-bearing IUDs (units).....423 Total	639 24 44 127 5 1,770 581 2,030 5,220
 Nepal Started by MSI in 2002	MSI	Condoms (units).....1,452,150 MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) ..85,011 Total	12,101 — 12,101
 Nicaragua (1)	DKT	Combined Oral Contraceptives (COC) (cycles) 400 Condoms (units).....195,386 Emergency Contraception (doses).....9,800 Hormonal IUDs (units) 2,220 Copper-bearing IUDs (units).....1,238 MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) 60 Mifepristone (tabs).....150 Misoprostol (tabs).....14,400 MVA (kits) 337 Total	27 1,628 490 10,212 5,942 — — — — 18,299
 Nicaragua (2)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 73,440 Condoms (units).....5,812,840 Emergency Contraception (doses).....122 Implants (3) (units).....2,377 Copper-bearing IUDs (units).....2,450 Misoprostol (tabs).....13240 Total	4,898 48,438 6 5,943 11,760 — 71,045

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Niger (1) Started in 2007	ANIMAS-Sutura	Combined Oral Contraceptives (COC) (cycles) 284,520 Condoms (units)..... 12,744,000 Sub-cutaneous injectables (3) (units) 11,897 Total	18,977 106,196 2,974 128,147
 Niger (2) Started by MSI in 2014	MSI	Misoprostol (tabs) 28,480 Total	— —
 Nigeria (1) Started by DKT in 2013	DKT	Combined Oral Contraceptives (COC) (cycles) 4,619,099 Condoms (units)..... 125,545,059 Emergency Contraception (doses).....1,861,360 Female Condoms (units) 52,192 Hormonal IUDs (units) 13,754 Implants (3) (units).....202,499 Implants (5) (units)..... 80,012 Intra-muscular injectables (2) (units) 104,381 Intra-muscular injectables (3) (units) 1,142,511 Copper-bearing IUDs (units).....723,760 Sub-cutaneous injectables (3) (units) 158,131 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 442,575 Misoprostol (tabs).....12,745,240 MVA (kits) 18,483 Total	308,094 1,046,167 93,068 435 63,268 506,248 304,046 17,432 285,628 3,474,048 39,533 — — — 6,137,965
 Nigeria (2) Started by MSI in 2009	MSI	Condoms (units).....9,890,256 Emergency Contraception (doses)..... 758,425 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .255,171 Misoprostol (tabs).....2,677,324 Total	82,416 37,921 — — 120,337
 Nigeria (3)	Viya Health	MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 33,609 Misoprostol (tabs).....2,044,837 Total	— — —
 Pakistan (1) Started by DKT in 2012	DKT	Combined Oral Contraceptives (COC) (cycles) 2,414,544 Condoms (units).....51,092,054 Emergency Contraception (doses)..... 375,828 Intra-muscular injectables (1) (units) 14,970 Intra-muscular injectables (3) (units) 829,876 Copper-bearing IUDs (units)..... 1,083,530 Misoprostol (tabs) 8,711,870 MVA (kits) 823 Total	161,050 425,750 18,791 1,153 207,469 5,200,944 — — 6,015,157
 Pakistan (2) Started by MSI in 2003	MSI	Condoms (units).....2,995,294 Misoprostol (tabs).....261,880 Total	24,960 — 24,960
 Panama (1) Started by DKT in 2017	DKT	Condoms (units).....176,219 Emergency Contraception (doses)..... 5,000 Copper-bearing IUDs (units)..... 894 Aspirators (units) 930 Cannulae (units).....3,010 Total	1,468 250 4,291 — — 6,010
 Panama (2)	Viya Health	Condoms (units).....2,771,576 Total	23,096 23,096

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Paraguay (1) Started by DKT in 2017	DKT	Combined Oral Contraceptives (COC) (cycles) 7,932 Condoms (units).....533,752 Diaphragm (units) 10 Emergency Contraception (doses).....3,590 Implants (3) (units)..... 82 Intra-muscular injectables (3) (units) 12,500 Copper-bearing IUDs (units)..... 2,400 Aspirators (units) 288 Cannulae (units).....1,967 Total	529 4,448 0 180 205 3,125 11,520 — — 20,006
 Paraguay (2)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 893,776 Condoms (units).....3,952,200 Emergency Contraception (doses).....423,726 Intra-muscular injectables (3) (units) 15,653 Total	59,615 32,934 21,186 3,913 117,648
 Peru	DKT	Condoms (units).....559,104 Copper-bearing IUDs (units).....10,043 Aspirators (units) 3,647 Cannulae (units).....23,464 Total	4,659 48,206 — — 52,865
 Philippines Started by DKT in 1990	DKT	Combined Oral Contraceptives (COC) (cycles) 34,389,193 Condoms (units)..... 45,542,935 Intra-muscular injectables (3) (units) 1,061,426 Copper-bearing IUDs (units)..... 72,113 Aspirators (units) 5,614 Total	2,293,759 379,509 265,357 346,142 — 3,284,767
 Rwanda Started by PSI in 1993. managed by PSI Rwanda and SFH	SFH Rwanda	Combined Oral Contraceptives (COC) (cycles) 7,878 Condoms (units)..... 2,428,511 Emergency Contraception (doses).....39,945 Intra-muscular injectables (3) (units) 37,411 Total	525 20,237 1,997 9,353 32,112
 Senegal (1)	ADEMAS	Combined Oral Contraceptives (COC) (cycles) 348,336 Condoms (units).....2,185,711 Sub-cutaneous injectables (3) (units) 16,200 Total	23,234 18,214 4,050 45,498
 Senegal (2) Started by DKT in 2016	DKT	Condoms (units).....6,198,696 Emergency Contraception (doses)..... 9,100 Implants (3) (units)..... 6 Copper-bearing IUDs (units)..... 24,355 Sub-cutaneous injectables (3) (units) 6,000 Misoprostol (tabs)..... 307,200 MVA (kits) 680 Total	51,654 455 15 116,904 1,500 — — 170,528
 Senegal (3) Started by MSI in 2011	MSI	Condoms (units).....2,744 Emergency Contraception (doses).....2,633 Misoprostol (tabs)..... 409,830 Total	23 132 — 155

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Sierra Leone (1) Started by DKT in 2018	DKT	Combined Oral Contraceptives (COC) (cycles) 522,930 Condoms (units)..... 1,028,011 Emergency Contraception (doses)..... 1,597 Implants (3) (units).....5,790 Intra-muscular injectables (3) (units) 65,320 Copper-bearing IUDs (units).....8,740 Sub-cutaneous injectables (3) (units) 10,400 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .20,874 Misoprostol (tabs) 151,488 Total	34,879 8,566 80 14,475 16,330 41,952 2,600 — — 118,883
 Sierra Leone (2) Started by MSI in 1986	MSI	Combined Oral Contraceptives (COC) (cycles) 38,360 Condoms (units)..... 493,308 Emergency Contraception (doses).....265,850 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .20,641 Misoprostol (tabs) 223,620 Total	2,559 4,111 13,293 — — 19,962
 South Africa	Viya Health	Condoms (units).....20,320,928 Emergency Contraception (doses).....17,282 Copper-bearing IUDs (units)..... 5,900 Total	169,334 864 28,320 198,518
 South Sudan	DKT	Combined Oral Contraceptives (COC) (cycles) 9,200 Condoms (units).....345,588 Emergency Contraception (doses)..... 92,800 Implants (3) (units).....100 Intra-muscular injectables (3) (units) 8,100 Copper-bearing IUDs (units).....10 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ...4,520 Misoprostol (tabs) 15,552 MVA (kits) 5 Total	614 2,880 4,640 250 2,025 48 — — — 10,456
 Sri Lanka (1) Started by PSI and IPPF in 1973; now managed by FPA of Sri Lanka	FPA Sri Lanka	Combined Oral Contraceptives (COC) (cycles) 1,721,420 Condoms (units).....11,957,256 Emergency Contraception (doses).....2,034,507 Implants (5) (units).....2,189 Intra-muscular injectables (3) (units) 155,951 Copper-bearing IUDs (units).....1,477 Total	114,819 99,640 101,725 8,318 38,988 7,090 370,579
 Sri Lanka (2) Started by MSI in 1983	MSI	Combined Oral Contraceptives (COC) (cycles) 23,063 Emergency Contraception (doses)..... 55,810 Free Condoms (units) 4,469,503 Implants (3) (units) 60,000 Intra-muscular injectables (3) (units) 350,000 Total	1,538 2,791 37,244 150,000 87,500 279,073
 Sri Lanka (3)	PS Lanka	Combined Oral Contraceptives (COC) (cycles) 27,200 Condoms (units).....2,800,000 Free Condoms (units) 600,000 Total	1,814 23,332 5,000 30,146
 Tanzania (1) Started by DKT in 2015	DKT	Combined Oral Contraceptives (COC) (cycles) 1,759,330 Condoms (units).....7,231,896 Emergency Contraception (doses).....857,500 Copper-bearing IUDs (units).....2,512 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .21,590 Misoprostol (tabs) 1,360,040 MVA (kits) 1,210 Total	117,347 60,263 42,875 12,058 — — — 232,543

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Tanzania (2) Started by MSI in 1989	MSI	Condoms (units)..... 1,231,560 Emergency Contraception (doses)..... 212,022 Misoprostol (tabs) 645,100 Total	10,263 10,601 — 20,864
 Tanzania (3) Started by T-MARC in 2004	T-MARC	Combined Oral Contraceptives (COC) (cycles) 200,000 Total	13,340 13,340
 Thailand Started by DKT in 2008	DKT	Copper-bearing IUDs (units).....6,283 Cannulae (units).....8,353 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .. 23,372 MVA/single (units) 2,213 Total	30,158 — — — 30,158
 Togo (1)	ATMS	Combined Oral Contraceptives (COC) (cycles) 37,506 Condoms (units)..... 1,941,000 Free Condoms (units) 456,700 Total	2,502 16,174 3,806 22,482
 Togo (2) Started by DKT in 2008	DKT	Condoms (units)..... 1,503,360 Emergency Contraception (doses).....243,840 Implants (3) (units)..... 80 Copper-bearing IUDs (units)..... 4,000 Sub-cutaneous injectables (3) (units) 6,200 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .. 8,024 Misoprostol (tabs) 253,440 MVA (kits) 310 Total	12,527 12,192 200 19,200 1,550 — — — 45,669
 Tunisia	DKT	Copper-bearing IUDs (units)..... 2,000 Total	9,600 9,600
 Turkey Started by DKT in 2008	DKT	Condoms (units)..... 4,728,144 Emergency Contraception (doses)..... 201,534 Copper-bearing IUDs (units).....160,000 Total	39,400 10,077 768,000 817,476
 Uganda (1) Started by DKT in 2017	DKT	Combined Oral Contraceptives (COC) (cycles) 577,077 Condoms (units)..... 11,686,587 Emergency Contraception (doses).....4,302,792 Hormonal IUDs (units) 21 Implants (3) (units)..... 1,306 Intra-muscular injectables (3) (units) 446,400 Copper-bearing IUDs (units).....4,625 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) 172,080 Misoprostol (tabs)..... 518,172 MVA (kits) 687 Total	38,491 97,384 215,140 97 3,265 111,600 22,200 — — — 488,177
 Uganda (2) Started by MSI in 1997	MSI	Combined Oral Contraceptives (COC) (cycles) 599,116 Condoms (units)..... 3,515,199 Emergency Contraception (doses).....894,827 Hormonal IUDs (units) 331 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) . 79,342 Misoprostol (tabs) 4,038,162 MVA/single (units) 54 Total	39,961 29,292 44,741 1,523 — — — 115,517
 Uganda (3)	Viya Health	Combined Oral Contraceptives (COC) (cycles) 565 Condoms (units)..... 225,216 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ...5,948 Misoprostol (tabs) 43,687 Total	38 1,877 — — 1,914

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Uruguay Started by DKT in 2016	DKT	Condoms (units)..... 683,603 Copper-bearing IUDs (units)..... 213 Aspirators (units) 24 Cannulae (units)..... 124 Total	5,696 1,022 — — 6,719
 Venezuela	DKT	Condoms (units).....1,185,614 Hormonal IUDs (units) 410 Copper-bearing IUDs (units).....2,470 MVA (kits) 210 Total	9,880 1,886 11,856 — 23,622
 Viet Nam (1) Started by DKT in 1993	DKT	Combined Oral Contraceptives (COC) (cycles) 15,201,376 Condoms (units)..... 8,159,700 Emergency Contraception (doses).....120,000 Copper-bearing IUDs (units)..... 298,000 Cannulae (units)..... 21,200 MVA (kits) 3,965 Total	1,013,932 67,995 6,000 1,430,400 — — 2,518,327
 Viet Nam (2) Started by MSI in 1989	MSI	Condoms (units)..... 33,888 Emergency Contraception (doses).....159,979 Implants (3) (units)..... 284 Intra-muscular injectables (3) (units) 565 Copper-bearing IUDs (units)..... 106,223 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .68,473 Mifepristone (tabs)..... 353,584 Misoprostol (tabs).....3,445,510 Total	282 7,999 710 141 509,870 — — — 519,003
 Viet Nam (3)	Viya Health	MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) ..57,503 Total	— —
 Yemen Started by MSI in 2001	MSI	Combined Oral Contraceptives (COC) (cycles) 1,966,668 Condoms (units).....4,774,668 Implants (3) (units)..... 19,444 Intra-muscular injectables (3) (units) 433,446 Copper-bearing IUDs (units)..... 167,505 Misoprostol (tabs)..... 1,547 Total	131,177 39,787 48,610 108,362 804,024 — 1,131,960
 Zambia (1)	DKT	Emergency Contraception (doses).....72,960 Intra-muscular injectables (3) (units) 10,000 Total	3,648 2,500 6,148
 Zambia (2) Started by MSI in 2007	MSI	Combined Oral Contraceptives (COC) (cycles) 237,695 Emergency Contraception (doses).....119,605 MA ‘Combipack’ (Mifepristone Tablets-Misoprostol) (tabs) .18,564 Misoprostol (tabs)..... 347,330 Total	15,854 5,980 — — 21,834
 Zambia (3) Started by USAID Zambia Accessible Markets for Health in 2021	ZAMHealth	Condoms (units).....6,781,536 Total	56,511 56,511

PROGRAM	SOURCE	PRODUCT SALES	CYPs
 Zimbabwe (1)	MSI	Condoms (units)..... 7,437	62
		Emergency Contraception (doses).....115,107	5,755
		Implants (3) (units)..... 420	1,050
		Implants (5) (units).....1,122	4,264
		Intra-muscular injectables (3) (units) 10,421	2,605
		Copper-bearing IUDs (units).....1,380	6,624
		MA 'Combipack' (Mifepristone Tablets-Misoprostol) (tabs) ...3,923	—
		Misoprostol (tabs) 294,060	—
		MVA (kits) 41	—
		Total	20,360
 Zimbabwe (2) Started by PSH	PSH - PSI	Condoms (units)..... 7,615,760	63,462
		Free Condoms (units) 980,700	8,172
		Total	71,634
		GRAND TOTAL	73,973,902

Appendix A: Update on the user-informed design process

Following the publication of the 2023 CSM Report, the CSM Report AG initiated a process to address each theme of the user-informed design roadmap outlined last year. This process involved extensive research, presentations, the development of subgroups, and consensus-building across the AG and among other stakeholders, as well as a strong commitment to developing a resource that accurately represents the contribution of SMOs and social businesses to the SRH commodities market.

The first theme to address was **data definitions and structure**, in which we decided to expand the report's name and focus to a spectrum of business models that also includes social business. Under this theme, we also updated the data collection template to include an additional product category for DMPA-SC and two optional questions about subsidies to pilot capturing this data throughout the report.

These additional features in the data collection template also accounted for the questions and concerns identified in the **data granularity** theme. Last year, we expanded the product categories to distinguish between hormonal and copper-bearing IUDs, as well as between combined oral contraceptive pills and progestin-only contraceptive pills. This expansion was the first step toward achieving more accurate product categories when the data was available.

With regard to **data clarity and transparency**, the AG worked to develop an alternate impact metric for abortion and PAC commodities, which could be backed by a methodology accepted by the community. Last year, we eliminated the 10,000 CYPs threshold that prevented some organizations from being represented in the report, and we will continue to identify and remove barriers that could keep organizations from participating.

All of the above changes created an opportunity to expand the **data analyses** in this year's report. We built on the responses we received regarding subsidies and the new abortion and PAC impact metric to present a new set of analyses that can provide users with additional ways to explore the data that is presented to them.

Finally, for **data automation**, the process is ongoing. We are working with new tools that are helping us manage data more efficiently and reliably, including some updates to the data reporting processes. In the years ahead, we hope this process will soon translate into new ways for users and reporting organizations to handle the data, both as they report it and as they use and apply it.

For the AG, this has been a very active year, full of activities and engagement that resulted in a consensus to implement the above. In the year ahead, RHSC will continue to seek guidance from the AG and additional stakeholders for the remaining elements of the user-informed design roadmap. We expect this work to require less time and effort from the group, which has already provided countless hours of volunteer work. We are incredibly thankful for their dedication and commitment.

Appendix B: Acknowledgments

The development and publication of the 2024 CSM Report would not have been possible without the thought partnership, leadership, and input from a number of RHSC Secretariat staff and members. RHSC would like to thank the Secretariat team that worked to pull this report together, including: Reina Jara Barrientos, Sarah Webb, Alexis Heaton, Julia White, Lucian Alexe, Hannah Pandian, and Martyn Smith.

We would also like to thank the many partners who provided valuable input throughout this process, including ongoing discussions and consultations with DKT International, MSI Reproductive Choices (MSI), Population Services International (PSI), and Avenir Health. RHSC is also grateful to the many reporting organizations who reported their sales data in the 2024 CSM Report, without whom this report would not be possible.

Finally, we would like to sincerely thank the CSM Report AG, who guided us throughout this process and continues to provide important recommendations as we move forward. Thank you to our AG Members:

Abi Winskell, PSI

Agnes Chidanyika, United Nations Population Fund (UNFPA)

Andrea Bare, Independent

Chris Jones, Jones Global Insights

Deniz Kayabas, MSI

Eloise Cowan, DKT International

Gibran Abidin, PT Tunggal Idaman Abdi

Jason Bremner, FP2030

Jens Rasmussen, Missionpharma

Laurence Läser, WHO

Lutfiyya Khan, CHAI

Marcie Cook, Viya Health

Michelle Weinberger, Avenir Health

Shiza Farid, FP2030

Sydney Sauter, Tulane University, Celia Scott Weatherhead School of Public Health and Tropical Medicine

Teymur Seyidov, UNFPA

Vidhi Lohia, CHAI

Past members:

Anne Kuster, CHAI

Daksha Parmani, CHAI

Eleni Han, CHAI

Gita Ramamurti, CHAI

Gladys Tetteh-Yeboah, United States Agency for International Development (USAID) Ghana

Glenn Milano, USAID

Matthea Roemer, MSI

Other consulted stakeholders:

Andrea Fearneyhough, PSI

Gean Spektor, Consultant/WHO

Heidi Johnston, WHO

DONOR ACKNOWLEDGMENTS

The work of the SMOs included in the CSM Report would not be possible without the generous support of many donors. Reporting SMOs thank the following donors for their contributions to their work: Abt Global ; Access to Health; Bergstrom Foundation; EmpowHer; UK Foreign, Commonwealth & Development Office; Government of the Netherlands; Fòs Feminista; International Planned Parenthood Federation; KfW Development Bank; Senador; The Global Fund to Fight AIDS, Tuberculosis and Malaria; US President's Emergency Plan for AIDS Relief; UNFPA; USAID; and countless anonymous donors.

THE REPRODUCTIVE HEALTH SUPPLIES COALITION

The Reproductive Health Supplies Coalition is the world's largest network of reproductive health (RH) supplies organizations. Formed in 2004, we are a partnership of nearly 500 public entities, private corporations, and NGOs working so that everyone in low- and middle-income countries (LMICs) can access and use affordable, high-quality RH supplies.

Courtesy of the Reproductive Health Supplies Coalition

455 Massachusetts Avenue NW, Suite 1000, Washington, DC, 20001