

USAID GLOBAL HEALTH SUPPLY CHAIN PROGRAM  
PROCUREMENT AND SUPPLY MANAGEMENT

*Situation analysis:*

# Contraceptive Manufacturing in Pakistan

September 2017

This publication was produced for review by the United States Agency for International Development. It was prepared by Chemonics International Inc.



This publication was produced for review by the United States Agency for International Development and Ministry of National Health Services, Regulation and Coordination (MoNHSR&C) – Population Planning Wing (PPW). It was prepared by Chemonics International Inc. under Global Health Supply Chain Program - Procurement and Supply Management (GHSC-PSM) Contract No. AID-OAA-I-15-00004 and Task Order 03 Contract No. AID-OAA-TO-15-00010.

Recommended citation: USAID Global Health Supply Chain – Procurement and Supply Management Single Award IDIQ. 2016. USAID GHSC-PSM report on situation analysis on feasibility to explore the potential of local production of contraceptives in Pakistan, Chemonics International Inc.

Chemonics Contact:

Muhammad Tariq  
Country Director – GHSC-PSM Pakistan  
20<sup>th</sup> Floor, PTML Tower  
Jinnah Avenue, Blue Area  
Islamabad, 44000  
P [+91 51-835-0530]  
[mtariq@ghsc-psm.org](mailto:mtariq@ghsc-psm.org)

# Contents

Context .....	1
Background .....	4
Methodology .....	8
Public Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	10
Private Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	11
Punjab - Public Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	12
Punjab - Private Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	13
Sindh - Public Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	14
Sindh - Private Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	15
KP - Public Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	16
KP - Private Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	17
Balochistan - Public Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	18
Balochistan - Private Sector Contraceptive Projection with Costing (2017-18 to 2029-30) .....	19
Investment Growth Potential .....	21
Way Forward .....	26
Annexure-I: PPW request for commissioning study .....	28
Annexure- II: USAID Pakistan concurrence to the PPW request .....	30
Annexure- III: Public sector contraceptive data (2007 – 2010) .....	31

# Acronyms

COC	Combined Oral Contraceptive
DMPA	Depot Medroxyprogesterone Acetate
DOH	Department of Health
ECP	Emergency Contraceptive Pill
FP	Family Planning
GoP	Government of Pakistan
GHSC	Global Health Supply Chain
GHSC-PSM	Global Health Supply Chain – Procurement and Supply Management
IDIQ	Indefinite Delivery Indefinite Quantity Contract
IMR	Infant Mortality Rate
IUD	Intrauterine Device
LMIS	Logistics Management Information Systems
MoNHSR&C	Ministry of National Health Services Regulations & Coordination
MMR	Maternal Mortality Rate
NGO	None Governmental Organization
POP	Progesterone Only Pill
PPW	Population Program Wing
PSM	Procurement and Supply Management
ROI	Return on Investment
TO	Task Order
U5MR	Under 5 Mortality Rate
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development

## CONTEXT

In 1950, Pakistan's population reached 37 million people, making it the world's 13<sup>th</sup> most populous country. By 1998, Pakistan was ranked as world's sixth most populous country. The provisional data of Census 2017 shared by the Pakistan Bureau of Statistics records 207.7 million habitants within Pakistan, placing it now as the fifth most populous country in the world. As per UN estimates, Pakistan's population is geared to rise to 380 million by 2050 (Figure-1) and is likely to surpass Indonesia, Brazil, Russia, and the United States. This projected growth would further strain water, forests, and arable land resources as well as reverse the economic gains made in recent years.

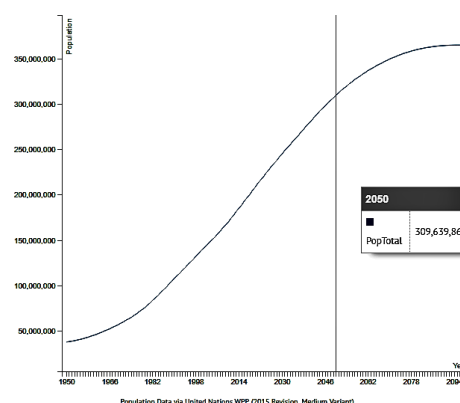


Figure 1: Pakistan Population Growth (Source: Population Data via [United Nations WPP](#) (2015 Revision, Medium Variant))

The federal as well as provincial governments are cognizant of the fact that some pregnancy-related mortality and complications are preventable and that the solution lies in increased contraceptive use. Contraceptive use reduces overall maternal mortality and improves women's health by preventing unwanted and high-risk pregnancies and reducing the need for unsafe abortions. This has a direct correlation with child and family well-being by reducing the economic and emotional burden of parenthood and affording increased opportunities for participation in educational, economic, and social activities.

As per the Economic Survey of Pakistan 2016-17 and FP2020 Commitment, Pakistan fares poorly on some of the key indicators are listed in the table below:

SDG (target by 2030)	Current standing <sup>1</sup>	Percentage outside of target
MMR: < 70 per 100,000 live births	170/100,000	242%
IMR: < 12 per 1,000 live births	62/1000	517%
U5MR: < 25 per 1,000 live births	81/1000	324%
FP2020 (target by 2020)	Current standing <sup>2</sup>	
Contraceptives Prevalence Rate (CPR) 50% Pakistan	CPR 35%	15%
Contraceptives Prevalence Rate (CPR) 55% for Punjab	CPR 40.7%	14.3%
Contraceptives Prevalence Rate (CPR) 45% for Sindh	CPR 29.5%	15.5%
Contraceptives Prevalence Rate (CPR) 42% for Khyber Pakhtunkhwa	CPR 28.1%	13.9%
Contraceptives Prevalence Rate (CPR) 32% for Balochistan	CPR 19.5%	12.5%

<sup>1</sup> Economic Survey of Pakistan 2016-17

<sup>2</sup> Pakistan Demographic and Health Survey 2012-13

Pakistan has embarked upon an ambitious, yet attainable, path towards ensuring universal access to reproductive health commodities and hopes to raise the contraceptive prevalence rate to 50% by FY2020. The federal and provincial governments in Pakistan have responded with political commitment by mobilizing sufficient allocation of \$110m so far until FY2019-20. Pakistan is also committed to accomplishing SDGs by reducing MMR, IMR, U5MR and ensuring universal access of reproductive health care services which include integration of reproductive health into national strategies and programs. Contraceptive services are now included in the essential package of health services, developed by provinces to improve service delivery and include facility-based and outreach services.

Although Pakistan was one of the first Asian countries to begin a family planning program with some help from international donors, fertility declined slower than in neighboring countries. Through the commodity assistance provided by the United Nation Population Fund (UNFPA) in the 1990s, Pakistan strived to reduce the population growth and brought it down from 4.5% per year to 2.9%. This support lasted until FY1999.

Subsequently, from FY2000 to FY2004, the Government of Pakistan (GoP) started sourcing contraceptives from UNFPA using the World Bank's withdrawal application procedure. With the enactment of public procurement rules in FY2004, the former health and population ministries embarked upon procurement of contraceptives through open competitive bidding for the locally manufactured contraceptive products; however, they continued using UNFPA platform for commodities not manufactured in Pakistan. The GoP's annual investment on family planning commodities during FY2000 - FY2009 remained steady at \$5-6 million, which was far below the actual requirements.

From FY2010 - 2015, USAID worked with the GoP and donated contraceptive commodities worth \$108m through supply chain programs to relevant public and private sector stakeholders across the country. Table I indicates USAID's yearly cost of commodity support to the GoP.

During FY2012 - FY2015, USAID also provided financial support worth \$1.5m to federal and provincial governments for transportation of contraceptive commodities from the Central Warehouse, Karachi to district stores across the country.

Owing to the total commodity support provided by USAID during the period indicated above (2010 to 2015) and recognizing the needs of forecasting and supply planning for concrete domestic financing, USAID initiated country-wide technical assistance on procurement and supply management. The GoP took this support positively and initiated domestic financing starting with Sindh and Punjab provinces in 2015. The commercial sector's share shrunk as they were not able to liquidate their business during 2010-2014. However, by 2015 local manufacturers and transporters were benefitting from the domestic financing of contraceptives by the provincial governments.

Another important stakeholder in the distribution of contraceptives has been the private sector i.e. NGOs who were historically supported by the Government of Pakistan. Their FP commodities future requirement until 2030 out of the total contraceptive ecology in Pakistan is presented in the private sector projection table appearing later in this document.

<i>Cost in million</i>	
<b>Fiscal Years</b>	<b>Support</b>
2010-11	\$10
2011-12	\$20
2012-13	\$20
2013-14	\$20
2014-15	\$38
<b>Total</b>	<b>\$108</b>

*Table 1: USAID's commodity support from 2010 till 2015*

Year	GoP Financing
2014-15	\$16.09m
2015-16	\$18.25m
2016-17	\$22.10m
2017-18	\$23.94m
2018-19	\$13.00m
2019-20	\$16.00m
<b>Total</b>	<b>\$109.38m</b>

Table 2: GoP committed financing till FY 2020

Realizing the significance of investments in family planning (FP) commodities, all provincial governments have clearly demonstrated their commitments by making allocation for FP commodities procurement as an integral part of their financial planning. Table 2 contains funds planned by the respective provinces of the Government of Pakistan who have so far committed ~\$110m for procurement and transportation of FP commodities until 2020.

With a burgeoning population as well as the contextual situation narrated above, the Population Program Wing (PPW) of the Ministry of National Health Services Regulations and Coordination (MoNHSR&C) has sought technical assistance from the United States Agency for International Development (USAID) mission in Islamabad to support them in conducting a situation analysis on feasibility to explore the potential of local production of contraceptives in Pakistan. USAID/Pakistan tasked the Global Health Supply Chain Program – Procurement and Supply Management (GHSC-PSM) project with the provision of this technical assistance along the lines mutually agreed upon in a tripartite meeting between PPW, USAID/Pakistan, and the GHSC-PSM project held on March 16, 2017 in Islamabad.

As per provisional census results of 2017 census, with 110 million inhabitants, Punjab has become the most populous province of Pakistan. Additionally, more than half of its population resides in urban centers. The current contraceptives prevalence rate stands at 41%<sup>3</sup> as against of FP2020 commitment of 55% by the Government of Punjab<sup>4</sup>.

With 48 million inhabitants, Sindh has become the second most populous province after Punjab. Additionally, more than half of its population resides in urban centers. The current contraceptives prevalence rate stands at 30% as against of FP2020 commitment of 45% by Government of Sindh<sup>5</sup>. Sindh has traditionally been a trendsetter in pioneering new FP methods using creative approaches to increase uptake of long acting contraceptive methods. Population Welfare Department of Government of Sindh was the first one to make sure this innovation of long acting method succeeds. Sindh PWD devised and sponsored strategies by creating champions for innovation, provided training to the healthcare providers and managed conflicting priorities and molds of the groups through communication techniques and social marketing.

<sup>3</sup> Pakistan Demographic and Health Survey 2012-13

<sup>4</sup> <http://www.pwd.punjab.gov.pk/fp2020>

<sup>5</sup> <http://pwdsindh.gov.pk/Publications/e-books/CIP%20Sindh-03%2015%2016-final.pdf>

With approximately 30.5 million inhabitants, Khyber Pakhtunkhwa has become the third most populous province after Punjab and Sindh with a population growth rate of 2.89. The current contraceptives prevalence rate stands at 28% as against of FP2020 commitment of 42%<sup>6</sup> by Government of Khyber Pakhtunkhwa<sup>7</sup>.

As per provisional census results of 2017 census, with 12.3 million inhabitants, Balochistan is the least populous province of Pakistan with a population growth rate of 3.37. The current contraceptives prevalence rate stands at 19.5%<sup>8</sup> as against of FP2020 commitment of 32% by Government of Balochistan<sup>9</sup>.

## BACKGROUND

The PPW of MoNHSR&C had initiated a request to the USAID Pakistan Mission in Islamabad to provide technical assistance to commission a feasibility study on local manufacturing of contraceptives in Pakistan. A formal request and action plan was sent by PPW to USAID/Pakistan through letter No. 12-2/2017-P&S dated April 26, 2017 (Annexure A) citing a meeting held with the USAID Pakistan Mission on March 16, 2017 which was followed by meeting with GHSC-PSM project on March 22, 2017. USAID/Pakistan agreed and informed PPW through letter dated May 9, 2017 (Annexure B) about assigning the provision of the assistance through the GHSC-PSM project.

To follow up on the TA, the GHSC-PSM project team started working on extracting contraceptive logistics data from government owned web-based logistics management information system (LMIS) from 2010 through 2017. As data for the study was required from 2007, the project team met with the PPW on June 15, 2017 to devise a plan of action for conducting the feasibility study which included a desk review of existing FP practices including method mix, quantities ordered, and consumption over the past 10 years. PPW was to develop a data acquisition template to obtain data from all provinces and was to share contraceptive procurement and consumption data from 2007 - 2010. Procurement and consumption data from 2010 onwards was extracted by GHSC-PSM project from USAID-funded annual contraceptive procurement tables and contraceptive LMIS, respectively.

In order to present an informed economic case to potential manufacturers, PPW, USAID/Pakistan, and GHSC-PSM devised a strategy to garner accurate procurement and consumption data for the past ten years, focusing on the projection of demand of the method mix through 2030 in light of Pakistan's international level commitments to FP2020 and targets identified in the National Health Vision-2025 as well as Sustainable Development Goals-3. FP 2020 commitments included working toward achieving universal access to reproductive health and raising the contraceptive prevalence rate to 50% by 2020.

The report at hand contains the demand projection of the method mix through 2030 with annual and total costing. The statistics here present plausible justification to expect that the sheer population size and the demand for contraceptives in view of the foregoing commitments are sufficient to lure investors

---

<sup>6</sup> [http://kp.gov.pk/uploads/2017/03/CIP\\_on\\_Family\\_Planning\\_for\\_Khyber\\_Pakhtunkhwa\\_2017-21\\_Final\\_Draft.pdf](http://kp.gov.pk/uploads/2017/03/CIP_on_Family_Planning_for_Khyber_Pakhtunkhwa_2017-21_Final_Draft.pdf)

<sup>7</sup> Pakistan Demographic and Health Survey 2012-13

<sup>8</sup> Pakistan Demographic and Health Survey 2012-13

<sup>9</sup> <http://www.pwd.punjab.gov.pk/fp2020>



to venture into local production of contraceptives.

In addition to delineating a holistic landscape of contraceptives consumption for the entire country, the provincially desegregated quantities and financial outlays have also been made available for the respective provincial governments in order that they look at their indicative share in the overall market. The analysis at hand also contains the projections for the provinces of Punjab, Sindh, Khyber Pakhtunkhwa and Balochistan for public, private and commercial sector till 2030 based on the method mix. A variety of data sources have been tapped into which have been adequately referenced in the footnotes.

### **Pharmaceutical Industry in Pakistan:**

The pharmaceutical sector in the country is a sizeable industry with an annual turnover of more than PKR 336 billion (\$3.2 billion) and a double digit annual growth rate of 15%<sup>10</sup>. Currently, the industry has approximately 700 pharmaceutical manufacturing units including those operated by 21 multinational organizations. According to Pakistan Pharmaceutical Manufacturers' Association, their industry meets around 70% of the country's demand<sup>11</sup> of medicines.

Presently, only a few pharmaceutical industries including ZAFA Pharmaceutical, Karachi and HENSEL Pharmaceutical, Lahore are producing 3-month injectable (Depot Medroxyprogesterone Acetate), combined oral pill (COC), and emergency contraceptive pill (ECP). Unfortunately, no industry is producing condoms, intra-uterine devices (IUDs), and implants (single rod and two rod), which are being imported to meet the contraceptive requirements.

### **Cost Benefits - Local vs. International procurement:**

During last three years of local contraceptive procurement (2014-15, 2015-16 and 2016-17), the Punjab, Sindh, Khyber Pakhtunkhwa and Balochistan provinces procured contraceptives including those of three products being manufactured in Pakistan. In order to have cost comparison between locally procured three commodities (3- months injection, oral contraceptive pills and emergency contraceptive pills) vis-à-vis international market prices, below tables depict year-wise as well as total cost savings which is PKR 556.68 m (\$5.30m):

#### **Year 2014-15: Savings - PKR 176.7 m**

Products	Punjab (2014-15)		
	International Market <sup>12</sup>	Local Market <sup>13</sup>	Savings
DMPA	378,730,296	315,608,580	63,121,716
COC	387,920,790	277,758,769	110,162,020
ECP	5,233,694	1,811,490	3,422,204
<b>Total</b>	<b>771,884,779</b>	<b>595,178,839</b>	<b>176,705,940</b>

<sup>10</sup> [http://www.ppma.org.pk/wp-content/uploads/2017/09/Final-Report-Pharma-Industry\\_August-10.pdf](http://www.ppma.org.pk/wp-content/uploads/2017/09/Final-Report-Pharma-Industry_August-10.pdf)

<sup>11</sup> <http://www.ppma.org.pk>

<sup>12</sup> International rates have been taken from USAID Contraceptive and Condom Catalog 2013-14

<sup>13</sup> Local rates are actual rates of locally manufactured products procured by provinces

### Year 2015-16: Savings- PKR 150 m

Prod ucts	Punjab (2015-16)			KPK (2015-16)			Sindh (2015-16)		
	Intl. Market	Local Market	Savings	Intl. Market	Local Market	Savings	Intl. Market	Local Market	Savings
DMPA	76,889,820	65,447,882	11,441,938	91,206,444	77,634,057	13,572,388	169,342,068	144,142,356	25,199,713
COC	37,040,693	26,588,292	10,452,401	91,840,902	65,600,645	26,240,258	181,165,345	129,403,798	51,761,547
ECP	37,040,693	26,588,292	10,452,401	176,876	77,988	98,888	1,304,015	551,964	752,051
<b>Total</b>	<b>150,971,205</b>	<b>118,624,466</b>	<b>32,346,739</b>	<b>183,224,222</b>	<b>143,312,689</b>	<b>39,911,533</b>	<b>351,811,428</b>	<b>274,098,117</b>	<b>77,713,311</b>

### Year 2016-17: Savings- PKR 230 m

Prod ucts	Punjab (2016-17)			KPK (2016-17)			Sindh (2016-17)			Balochistan (2016-17)		
	Intl. Market	Local Market	Savings	Intl. Market	Local Market	Savings	Intl. Market	Local Market	Savings	Intl. Market	Local Market	Savings
DMPA	119,943,180	102,094,493	17,848,688	91,206,444	77,634,057	13,572,388	214,210,080	182,333,580	31,876,500	29,464,615	25,080,000	4,384,615
COC	171,972,347.4	123,443,995	48,528,352	91,840,902	65,924,598	25,916,304	229,174,142	164,504,190	64,669,952	39,727,845	28,517,165	11,210,679
ECP	12,675,029.85	4,023,819	8,651,211	176,876	56,151	120,725	1,649,545	523,665	1,125,880	2,835,000	900,000	1,935,000
<b>Total</b>	<b>304,590,557</b>	<b>229,562,307</b>	<b>75,028,250</b>	<b>183,224,222</b>	<b>143,614,806</b>	<b>39,609,416</b>	<b>445,033,767</b>	<b>347,361,435</b>	<b>97,672,332</b>	<b>72,027,460</b>	<b>54,497,165</b>	<b>17,530,295</b>

### Provincial Savings

Province <sup>14</sup>	2014-15	2015-16	2016-17
Punjab	176,705,940	32,346,739	75,028,250
Sindh		77,713,311	97,672,332
KP		39,911,533	39,609,416
Balochistan			17,530,295
<b>Total</b>	<b>176,705,940</b>	<b>149,971,583</b>	<b>229,840,293</b>

The savings achieved through local procurement of DMPA, COC, and ECP can afford the provincial governments to re-allocate these resources to other components of the supply chain, including transportation from Central Warehouse to districts and SDP-level stores as well as robust monitoring.

In view of the cost savings achieved through local procurement of DMPA, COC, and ECP, enhancing the pharmaceutical industry's capacity to manufacture condoms, IUDs, and implants would further contribute towards cost savings.

The federal and provincial governments of Pakistan are cognizant of the whole gamut of challenges encountered by provinces in procuring internationally manufactured contraceptives during the last few years i.e. delays in international procurement owing to increased lead time, payment modalities to international manufacturers, transfer of huge foreign exchange, and finally non-existence of WHO prequalified firm and testing laboratories in Pakistan.

The potential benefits of local manufacturing of contraceptives include:

- Increased product availability, leading to improved CPR
- Efficient and timely procurement by decreased procurement timelines and procedures due to local procurement

<sup>14</sup> Sindh and KP couldn't procure contraceptives in 2014-15 and Balochistan in 2014-15 and 2015-16

- More efficiently/expediently meeting emergency requirements
- Increased efficiency and quality of locally manufactured products
- Improved pricing controls as Drug Regulatory Authority of Pakistan (DRAP) has full control over drugs pricing in the country.
- Easier product recalls
- Increased export of pharmaceutical products and boost to the local economy

There are multiple factors influencing the investment in contraceptives production, as it is capital-intensive and enjoys significant and increasing returns to scale i.e. unit production costs decrease as the volume of production increases. Hence, the production volumes must be sufficient to keep the costs – and by extension price to consumers/buyers – low enough to be competitive in the market.

## METHODOLOGY

It was agreed that GHSC-PSM project would undertake a desk review of the existing family planning procurement practices, including method mix, quantities ordered, and consumption over the past 10 years. PPW obtained data on the prescribed format from all provinces and shared contraceptives procurement and consumption data from 2007 till 2010 with the project (Annexure-III).

The GHSC-PSM project team extracted country wide procurement and consumption data from 2010 onwards from USAID supported annual contraceptive procurement tables (2010-2014) and contraceptive LMIS respectively. The project further worked on the data and generated projection of the demand including method mix till 2030 in view of Pakistan's FP2020 commitments, and National Health Vision-2025 and SDG-3 targets. The latest Pakistan Demographic and Health Survey was conducted in 2012-13. It is believed that the reliability of the demographic data alone to forecast business, without undertaking other important variables, would be unrealistic. Hence the project used forecast modelling based on all possible factors operating in the ecology of Pakistan. The methodology included the demographics, logistics and method mix.

While carrying out the analysis of the data, it was observed that over the years, data has shown fluctuating trends in terms of consumption of contraceptives. There may be different factors attributable to the fluctuation which include but are not limited to a shift from short-acting to long acting methods, promotions, and accessibility trends.

In view of the above, different forecast growth factors have been applied for different FP products. For accuracy purposes, more recent LMIS consumption data trends of FY 2016 have been selected for extrapolation. It is pertinent to note that based on consumption trends, growth factors for method mix have been estimated leading to projections for 2017-18.

Once the factors were accounted for and a forecast for 2017-18 developed, then a flat 10% yearly increase was used for demand projections till 2030. This 10% annual increase will cater to the yearly population growth and the gradual improvements that would be registered in reporting rate of contraceptives use (currently the reporting rate of DOH and other stakeholder hovers around 60% and is likely to improve in the years to come.)

Similarly, analysis of the data for private sector was carried out and it has been observed that the trends for consumption have a tendency to fluctuate. The data is not representative of the entirety of the private sector as it mainly focuses three organizations, Greenstar Social Marketing, Marie Stope Society, and Family Planning Association of Pakistan, who are reporting into the LMIS. There may be different factors attributable to the fluctuation which include but are not limited to a shift from short-acting to long acting methods, promotions of any method by private sector stakeholders, and accessibility trends which cover different options of product availability for FP clients.

The costing for the projected demands has been carried out on the basis of the unit costs of Punjab's procurement of contraceptives for 2016/17, and a 5% yearly inflation in prices (calculated on recent years' inflation) has been factored in to arrive at the final cost. The highly diverse and disorganized structure of the private and commercial market operators poses a serious challenge to obtain accurate data for future projections. However, we have used PDHS to obtain our estimates which are given below. The table below contains the demand projections through 2030.



# PUBLIC SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

National Public Sector <sup>15</sup> Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																				
Rationale for Forecast / Projections ( based on July 2016 - June 2017 Consumption trend)																				
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle	
1-yr AVG	20,254,187		11,932		1,065,080		166,098		98,081		12,077		23,341		398,255		2,013		4,805	
3-month AVG	11,722,544		5,424		834,016		6,912		68,862		290		934		296,993		1,392		3,597	
% growth 1 yr to 3-month	-42.1%		-54.5%		-21.7%		-95.8%		-29.8%		-97.6%		-96.0%		-25.4%		-30.9%		-25.1%	
forecast growth factor	1.03		1.03		1.06		1.03		1.05		1.03		1.03		1.05		1.05		1.10	
1-yr avg*growth factor	20,861,813		12,290		1,128,985		171,081		102,985		12,440		24,041		418,168		2,113		5,286	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	250,341,752	493,173,252	147,475	4,866,688	13,547,819	275,698,110	2,052,969	18,476,723	1,235,815	45,601,586	149,275	14,927,481	288,498	43,274,678	5,018,017	358,788,230	25,362	25,463,147	63,426	69,768,600
2018 - 19	257,852,005	533,366,872	151,900	5,263,323	14,360,688	306,851,996	2,114,558	19,982,576	1,297,606	50,275,749	153,753	16,144,071	297,153	46,801,564	5,268,918	395,564,023	26,630	28,073,119	69,769	80,582,733
2019 - 20	265,587,565	576,836,272	156,457	5,692,284	15,222,329	341,526,272	2,177,995	21,611,156	1,362,486	55,429,013	158,366	17,459,812	306,067	50,615,891	5,532,364	436,109,336	27,961	30,950,614	76,745	93,073,057
2020 - 21	273,555,192	623,848,428	161,150	6,156,205	16,135,669	380,118,740	2,243,335	23,372,465	1,430,611	61,110,487	163,117	18,882,787	315,249	54,741,086	5,808,982	480,810,543	29,359	34,123,052	84,420	107,499,380
2021 - 22	281,761,848	674,692,075	165,985	6,657,936	17,103,809	423,072,158	2,310,635	25,277,321	1,502,141	67,374,312	168,010	20,421,734	324,707	59,202,485	6,099,431	530,093,623	30,827	37,620,665	92,862	124,161,784
2022 - 23	290,214,703	729,679,480	170,964	7,200,558	18,130,037	470,879,312	2,379,954	27,337,423	1,577,248	74,280,179	173,050	22,086,106	334,448	64,027,487	6,404,403	584,428,220	32,369	41,476,783	102,148	143,406,861
2023 - 24	298,921,144	789,148,357	176,093	7,787,403	19,217,840	524,088,674	2,451,353	29,565,423	1,656,111	81,893,897	178,242	23,886,123	344,482	69,245,728	6,724,623	644,332,112	33,987	45,728,153	112,363	165,634,924
2024 - 25	307,888,779	853,463,948	181,376	8,422,077	20,370,910	583,310,694	2,524,893	31,975,004	1,738,916	90,288,022	183,589	25,832,842	354,816	74,889,254	7,060,854	710,376,154	35,686	50,415,289	123,599	191,308,338
2025 - 26	317,125,442	923,021,260	186,817	9,108,476	21,593,165	649,224,803	2,600,640	34,580,967	1,825,862	99,542,544	189,097	27,938,219	365,460	80,992,729	7,413,897	783,189,709	37,471	55,582,856	135,959	220,961,130
2026 - 27	326,639,205	998,247,493	192,422	9,850,817	22,888,755	722,587,206	2,678,659	37,399,316	1,917,155	109,745,655	194,770	30,215,184	376,424	87,593,636	7,784,592	863,466,655	39,344	61,280,099	149,555	255,210,105
2027 - 28	336,438,381	1,079,604,663	198,195	10,653,658	24,262,080	804,239,560	2,759,019	40,447,360	2,013,013	120,994,585	200,613	32,677,721	387,717	94,732,517	8,173,821	951,971,987	41,312	67,561,309	164,511	294,767,671
2028 - 29	346,531,533	1,167,592,443	204,140	11,521,931	25,717,805	895,118,630	2,841,790	43,743,820	2,113,664	133,396,530	206,631	35,340,956	399,348	102,453,217	8,582,512	1,049,549,115	43,377	74,486,343	180,962	340,456,660
2029 - 30	356,927,479	1,262,751,228	210,265	12,460,969	27,260,873	996,267,035	2,927,043	47,308,942	2,219,347	147,069,674	212,830	38,221,243	411,329	110,803,155	9,011,638	1,157,127,900	45,546	82,121,193	199,058	393,227,443
Total Cost (PKR)		10,705,425,772		105,642,326		7,372,983,190		401,078,496		1,137,002,233		324,034,280		939,373,427		8,945,807,606		634,882,623		2,480,058,687
Total cost (PKR) from 2017-18 to 2029-30: 33,046,288,640																				
PKR in million: 33,046.288																				
USD in million: 314.726																				

<sup>15</sup> DOH and PWD

PRIVATE SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

National Private Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																										
Rationale for Forest / Projections ( based on 2012 - 2016 Consumption trend)																										
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle		Femplant		1-Month Inj		Safe Load	
5-yr AVG	11,511,421		4,509		115,613		188,816		26,094		33,031		44,344		50,463		542		432		207		13,899		2,691	
1 Yr AVG	10,398,761		10,118		82,084		191,461		35,634		13,245		27,323		41,568		23		648		92		9,858		5,032	
% growth 5 to 1 Yr	-9.7%		124.4%		-29.0%		1.4%		36.6%		-59.9%		-38.4%		-17.6%		-95.8%		49.8%		-55.5%		-29.1%		86.9%	
forecast growth factor	1.10		1.05		1.10		1.10		1.10		1.01		1.02		1.10		1.05		1.10		1.01		1.01		1.01	
5 yr avg* growth factor	12,662,563		4,735		127,175		207,698		28,703		33,362		45,231		55,510		569		475		209		14,038		2,718	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	151,950,752	299,342,981	56,818	1,875,009	1,526,096	31,056,058	2,492,370	22,431,331	344,441	12,709,857	400,341	40,034,097	542,770	81,415,431	666,117	47,627,357	6,824	6,851,667	5,706	6,276,270	2,509	2,519,484	168,460	12,044,913	32,620	32,750,855
2018 - 19	167,145,827	345,741,143	59,659	2,067,197	1,678,706	35,869,747	2,741,607	25,908,187	378,885	14,679,885	404,344	42,456,160	553,625	87,195,927	732,729	55,009,597	7,166	7,553,963	6,276	7,249,092	2,535	2,671,913	170,145	12,773,630	32,947	34,732,282
2019 -20	183,860,410	399,331,021	62,642	2,279,085	1,846,576	41,429,558	3,015,768	29,923,956	416,773	16,955,268	408,388	45,024,758	564,697	93,386,837	806,001	63,536,085	7,524	8,328,245	6,904	8,372,701	2,560	2,833,563	171,846	13,546,435	33,276	36,833,585
2020 -21	202,246,451	461,227,329	65,774	2,512,691	2,031,234	47,851,139	3,317,345	34,562,169	458,450	19,583,334	412,472	47,748,756	575,991	100,017,303	886,602	73,384,178	7,900	9,181,890	7,594	9,670,470	2,585	3,004,994	173,565	14,365,994	33,609	39,062,017
2021 -22	222,471,096	532,717,565	69,063	2,770,242	2,234,357	55,268,066	3,649,079	39,919,306	504,295	22,618,751	416,596	50,637,555	587,511	107,118,531	975,262	84,758,726	8,295	10,123,033	8,354	11,169,393	2,611	3,186,796	175,300	15,235,137	33,945	41,425,269
2022 -23	244,718,205	615,288,787	72,516	3,054,191	2,457,793	63,834,616	4,013,987	46,106,798	554,725	26,124,657	420,762	53,701,127	599,261	114,723,947	1,072,788	97,896,328	8,710	11,160,644	9,189	12,900,648	2,637	3,379,597	177,053	16,156,863	34,284	43,931,498
2023 -24	269,190,026	710,658,549	76,142	3,367,246	2,703,573	73,728,982	4,415,386	53,253,352	610,197	30,173,979	424,970	56,950,046	611,247	122,869,347	1,180,067	113,070,259	9,145	12,304,610	10,108	14,900,249	2,664	3,584,063	178,824	17,134,353	34,627	46,589,354
2024 -25	296,109,029	820,810,624	79,949	3,712,389	2,973,930	85,156,974	4,856,924	61,507,621	671,217	34,850,946	429,220	60,395,523	623,472	131,593,071	1,298,073	130,596,149	9,603	13,565,833	11,119	17,209,788	2,690	3,800,899	180,612	18,170,981	34,973	49,408,010
2025 -26	325,719,931	948,036,271	83,947	4,092,908	3,271,323	98,356,305	5,342,617	71,041,303	738,339	40,252,842	433,512	64,049,453	635,941	140,936,179	1,427,881	150,838,552	10,083	14,956,331	12,231	19,877,305	2,717	4,030,853	182,418	19,270,326	35,323	52,397,194
2026 -27	358,291,925	1,094,981,893	88,144	4,512,432	3,598,455	113,601,532	5,876,878	82,052,704	812,173	46,492,033	437,847	67,924,444	648,660	150,942,648	1,570,669	174,218,528	10,587	16,489,355	13,454	22,958,287	2,745	4,274,720	184,243	20,436,180	35,676	55,567,224
2027 -28	394,121,117	1,264,704,087	92,551	4,974,956	3,958,301	131,209,769	6,464,566	94,770,874	893,390	53,698,298	442,225	72,033,873	661,633	161,659,576	1,727,736	201,222,399	11,116	18,179,514	14,799	26,516,821	2,772	4,533,340	186,085	21,672,569	36,033	58,929,042
2028 -29	433,533,229	1,460,733,220	97,179	5,484,889	4,354,131	151,547,284	7,111,023	109,460,359	982,729	62,021,534	446,648	76,391,923	674,866	173,137,406	1,900,509	232,411,871	11,672	20,042,914	16,279	30,626,929	2,800	4,807,607	187,946	22,983,760	36,394	62,494,249
2029 -30	476,886,552	1,687,146,869	102,038	6,047,090	4,789,544	175,037,113	7,822,125	126,426,715	1,081,002	71,634,872	451,114	81,013,634	688,363	185,430,161	2,090,560	268,435,711	12,256	22,097,312	17,907	35,374,102	2,828	5,098,467	189,825	24,374,277	36,757	66,275,151
Total Cost (PKR)		10,640,720,341		46,750,323		1,103,947,143		797,364,675		451,796,256		758,361,349		1,650,426,364		1,693,005,740		170,835,312		223,102,054		47,726,295		228,165,420		620,395,730
Grand Total (PKR)																								18,432,597,001		
Millions (PKR)																								18432.60		
Million (USD)																								175.55		

## PUNJAB - PUBLIC SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

Punjab Public Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																				
Rationale for Forecast / Projections ( based on July 2016 - June 2017 Consumption trend)																				
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle	
1-yr AVG	20,254,187		11,932		1,065,080		166,098		98,081		12,077		23,341		398,255		2,013		4,805	
3-month AVG	11,722,544		5,424		834,016		6,912		68,862		290		934		296,993		1,392		3,597	
% growth 1 yr to 3-month	-42.1%		-54.5%		-21.7%		-95.8%		-29.8%		-97.6%		-96.0%		-25.4%		-30.9%		-25.1%	
forecast growth factor	1.03		1.03		1.06		1.03		1.05		1.03		1.03		1.05		1.05		1.10	
1-yr avg*growth factor	20,861,813		12,290		1,128,985		171,081		102,985		12,440		24,041		418,168		2,113		5,286	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	129,526,823	255,167,841	76,304	2,518,024	7,009,641	142,646,202	1,062,206	9,559,856	639,411	23,594,261	77,235	7,723,479	149,269	22,390,318	2,596,322	185,637,030	13,122	13,174,632	32,817	36,098,274
2018 - 19	133,412,627	275,964,020	78,593	2,723,243	7,430,220	158,765,223	1,094,072	10,338,985	671,381	26,012,673	79,552	8,352,942	153,747	24,215,129	2,726,138	204,664,826	13,778	14,525,032	36,098	41,693,506
2019 -20	137,415,006	298,455,087	80,951	2,945,188	7,876,033	176,705,693	1,126,895	11,181,612	704,950	28,678,971	81,938	9,033,707	158,359	26,188,662	2,862,445	225,642,970	14,467	16,013,848	39,708	48,155,999
2020 -21	141,537,456	322,779,177	83,379	3,185,221	8,348,595	196,673,436	1,160,701	12,092,913	740,198	31,618,566	84,397	9,769,954	163,110	28,323,038	3,005,567	248,771,375	15,191	17,655,267	43,679	55,620,179
2021 -22	145,783,580	349,085,680	85,881	3,444,816	8,849,511	218,897,535	1,195,523	13,078,486	777,208	34,859,469	86,928	10,566,205	168,003	30,631,366	3,155,846	274,270,441	15,950	19,464,932	48,047	64,241,307
2022 -23	150,157,087	377,536,163	88,457	3,725,569	9,380,481	243,632,956	1,231,388	14,144,382	816,068	38,432,565	89,536	11,427,351	173,043	33,127,822	3,313,638	302,383,161	16,748	21,460,088	52,851	74,198,710
2023 -24	154,661,800	408,305,360	91,111	4,029,202	9,943,310	271,163,480	1,268,330	15,297,150	856,872	42,371,903	92,222	12,358,680	178,235	35,827,739	3,479,320	333,377,435	17,585	23,659,746	58,137	85,699,510
2024 -25	159,301,654	441,582,247	93,844	4,357,582	10,539,909	301,804,953	1,306,380	16,543,867	899,715	46,715,023	94,989	13,365,913	183,582	38,747,700	3,653,286	367,548,622	18,464	26,084,871	63,950	98,982,934
2025 -26	164,080,704	477,571,200	96,659	4,712,725	11,172,303	335,908,913	1,345,571	17,892,193	944,701	51,503,312	97,839	14,455,235	189,089	41,905,638	3,835,950	405,222,356	19,387	28,758,570	70,345	114,325,289
2026 -27	169,003,125	516,493,253	99,559	5,096,813	11,842,642	373,866,620	1,385,938	19,350,406	991,936	56,782,402	100,774	15,633,336	194,762	45,320,947	4,027,748	446,757,647	20,357	31,706,323	77,380	132,045,708
2027 -28	174,073,219	558,587,453	102,546	5,512,203	12,553,200	416,113,548	1,427,516	20,927,464	1,041,533	62,602,598	103,797	16,907,453	200,605	49,014,604	4,229,135	492,550,306	21,375	34,956,221	85,118	152,512,793
2028 -29	179,295,415	604,112,330	105,622	5,961,447	13,306,392	463,134,379	1,470,342	22,633,053	1,093,610	69,019,364	106,911	18,285,410	206,623	53,009,295	4,440,592	543,036,712	22,443	38,539,234	93,630	176,152,276
2029 - 30	184,674,278	653,347,485	108,791	6,447,305	14,104,776	515,468,564	1,514,452	24,477,646	1,148,290	76,093,849	110,118	19,775,671	212,822	57,329,552	4,662,621	598,697,975	23,565	42,489,505	102,993	203,455,879
Total Cost (PKR)	2,022,922,774	5,538,987,294	1,191,696.32	54,659,339	132,357,013	3,814,781,502	16,589,315	207,518,014	11,325,874	588,284,956	1,206,237	167,655,337	2,331,249	486,031,811	45,988,609	4,628,560,856	232,432	328,488,269	804,752	1,283,182,365
Total Cost (PKR)																			17,098,149,742	
Total Cost (PKR) in Millions																			17,098	
Total Cost (USD) in Millions																			\$163	



PUNJAB - PRIVATE SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

Punjab Private Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																										
Rationale for Forecast / Projections ( based on 2012 - 2016 Consumption trend)																										
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle		Femplant		1-Month Inj		Safe Load	
5-yr AVG	11,511,421		4,509		115,613		188,816		26,094		33,031		44,344		50,463		542		432		207		13,899		2,691	
1 Yr AVG	10,398,761		10,118		82,084		191,461		35,634		13,245		27,323		41,568		23		648		92		9,858		5,032	
% growth 5 to 1 Yr	-9.7%		124.4%		-29.0%		1.4%		36.6%		-59.9%		-38.4%		-17.6%		-95.8%		49.8%		-55.5%		-29.1%		86.9%	
forecast growth factor	1.10		1.05		1.10		1.10		1.10		1.01		1.02		1.10		1.05		1.10		1.01		1.01		1.01	
5 yr avg* growth factor	12,662,563		4,735		127,175		207,698		28,703		33,362		45,231		55,510		569		475		209		14,038		2,718	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	78,619,319	154,880,059	29,398	970,129	789,602	16,068,404	1,289,552	11,605,971	178,214	6,576,080	207,136	20,713,642	280,829	42,124,344	344,649	24,642,394	3,531	3,545,053	2,952	3,247,342	1,298	1,303,581	87,161	6,232,038	16,878	16,945,293
2018 - 19	86,481,251	178,886,468	30,868	1,069,568	868,562	18,559,007	1,418,508	13,404,896	196,035	7,595,373	209,208	21,966,817	286,446	45,115,172	379,114	28,461,966	3,707	3,908,421	3,247	3,750,680	1,311	1,382,448	88,033	6,609,076	17,047	17,970,483
2019 - 20	95,129,376	206,613,870	32,411	1,179,198	955,419	21,435,653	1,560,358	15,482,655	215,638	8,772,655	211,300	23,295,810	292,174	48,318,350	417,025	32,873,570	3,893	4,309,034	3,572	4,332,036	1,324	1,466,086	88,913	7,008,925	17,217	19,057,697
2020 - 21	104,642,314	238,639,020	34,032	1,300,066	1,050,961	24,758,179	1,716,394	17,882,466	237,202	10,132,417	213,413	24,705,206	298,018	51,748,952	458,728	37,968,974	4,087	4,750,710	3,929	5,003,501	1,338	1,554,784	89,802	7,432,965	17,389	20,210,688
2021 - 22	115,106,545	275,628,068	35,733	1,433,323	1,156,057	28,595,697	1,888,034	20,654,249	260,922	11,702,942	215,547	26,199,871	303,978	55,423,128	504,600	43,854,165	4,292	5,237,657	4,322	5,779,044	1,351	1,648,848	90,700	7,882,660	17,563	21,433,434
2022 - 23	126,617,200	318,350,419	37,520	1,580,239	1,271,662	33,028,030	2,076,837	23,855,657	287,015	13,516,898	217,702	27,784,963	310,058	59,358,170	555,060	50,651,560	4,506	5,774,517	4,754	6,674,795	1,365	1,748,604	91,607	8,359,561	17,739	22,730,157
2023 - 24	139,278,919	367,694,733	39,396	1,742,213	1,398,828	38,147,375	2,284,521	27,553,284	315,716	15,612,017	219,879	29,465,954	316,259	63,572,600	610,567	58,502,552	4,732	6,366,405	5,230	7,709,389	1,378	1,854,394	92,524	8,865,314	17,916	24,105,332
2024 - 25	153,206,811	424,687,417	41,366	1,920,790	1,538,711	44,060,218	2,512,973	31,824,043	347,288	18,031,879	222,078	31,248,644	322,584	68,086,255	671,623	67,570,447	4,968	7,018,962	5,753	8,904,344	1,392	1,966,585	93,449	9,401,666	18,095	25,563,704
2025 - 26	168,527,493	490,513,967	43,434	2,117,671	1,692,582	50,889,552	2,764,270	36,756,770	382,017	20,826,821	224,299	33,139,187	329,036	72,920,379	738,785	78,043,867	5,217	7,738,406	6,328	10,284,517	1,406	2,085,563	94,383	9,970,467	18,276	27,110,308
2026 - 27	185,380,242	566,543,632	45,606	2,334,732	1,861,841	58,777,433	3,040,697	42,454,069	420,218	24,054,978	226,542	35,144,108	335,617	78,097,726	812,664	90,140,666	5,478	8,531,592	6,961	11,878,618	1,420	2,211,740	95,327	10,573,680	18,459	28,750,482
2027 - 28	203,918,266	654,357,895	47,886	2,574,042	2,048,025	67,887,935	3,344,767	49,034,450	462,240	27,783,499	228,807	37,270,326	342,329	83,642,664	893,930	104,112,469	5,752	9,406,080	7,657	13,719,803	1,434	2,345,550	96,280	11,213,387	18,644	30,489,886
2028 - 29	224,310,093	755,783,368	50,280	2,837,881	2,252,827	78,410,565	3,679,243	56,634,790	508,464	32,089,942	231,096	39,525,181	349,176	89,581,294	983,323	120,249,902	6,039	10,370,204	8,423	15,846,373	1,449	2,487,456	97,243	11,891,797	18,830	32,334,524
2029 - 30	246,741,102	872,929,790	52,794	3,128,764	2,478,110	90,564,202	4,047,167	65,413,182	559,310	37,063,883	233,407	41,916,454	356,159	95,941,565	1,081,656	138,888,637	6,341	11,433,149	9,265	18,302,561	1,463	2,637,947	98,216	12,611,251	19,018	34,290,763
Total Cost (PKR)	1,927,958,930	5,505,508,704	520,724	24,188,617	19,363,187	571,182,252	31,623,320	412,556,483	4,370,280	233,759,383	2,860,415	392,376,162	4,122,662	853,930,601	8,451,725	875,961,170	62,543	88,390,190	72,394	115,433,003	17,930	24,693,585	1,203,640	118,052,788	233,071	320,992,751
Total Cost (PKR)																								9,537,025,688		
Total Cost (PKR) in Millions																								9,537		
Total Cost (USD) in Millions																								\$90.83		

SINDH - PUBLIC SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

Sindh Public Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																				
Rationale for Forecast / Projections ( based on July 2016 - June 2017 Consumption trend)																				
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle	
1-yr AVG	20,254,187		11,932		1,065,080		166,098		98,081		12,077		23,341		398,255		2,013		4,805	
3-month AVG	11,722,544		5,424		834,016		6,912		68,862		290		934		296,993		1,392		3,597	
% growth 1 yr to 3-month	-42.1%		-54.5%		-21.7%		-95.8%		-29.8%		-97.6%		-96.0%		-25.4%		-30.9%		-25.1%	
forecast growth factor	1.03		1.03		1.06		1.03		1.05		1.03		1.03		1.05		1.05		1.10	
1-yr avg*growth factor	20,861,813		12,290		1,128,985		171,081		102,985		12,440		24,041		418,168		2,113		5,286	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	62,585,438	123,293,313	36,869	1,216,672	3,386,955	68,924,527	513,242	4,619,181	308,954	11,400,397	37,319	3,731,870	72,124	10,818,669	1,254,504	89,697,057	6,340	6,365,787	15,857	17,442,150
2018 - 19	64,463,001	133,341,718	37,975	1,315,831	3,590,172	76,712,999	528,640	4,995,644	324,402	12,568,937	38,438	4,036,018	74,288	11,700,391	1,317,230	98,891,006	6,657	7,018,280	17,442	20,145,683
2019 -20	66,396,891	144,209,068	39,114	1,423,071	3,805,582	85,381,568	544,499	5,402,789	340,622	13,857,253	39,591	4,364,953	76,517	12,653,973	1,383,091	109,027,334	6,990	7,737,654	19,186	23,268,264
2020 -21	68,388,798	155,962,107	40,288	1,539,051	4,033,917	95,029,685	560,834	5,843,116	357,653	15,277,622	40,779	4,720,697	78,812	13,685,272	1,452,246	120,202,636	7,340	8,530,763	21,105	26,874,845
2021 -22	70,440,462	168,673,019	41,496	1,664,484	4,275,952	105,768,040	577,659	6,319,330	375,535	16,843,578	42,003	5,105,434	81,177	14,800,621	1,524,858	132,523,406	7,707	9,405,166	23,216	31,040,446
2022 -23	72,553,676	182,419,870	42,741	1,800,139	4,532,509	117,719,828	594,988	6,834,356	394,312	18,570,045	43,263	5,521,526	83,612	16,006,872	1,601,101	146,107,055	8,092	10,369,196	25,537	35,851,715
2023 -24	74,730,286	197,287,089	44,023	1,946,851	4,804,460	131,022,169	612,838	7,391,356	414,028	20,473,474	44,560	5,971,531	86,120	17,311,432	1,681,156	161,083,028	8,497	11,432,038	28,091	41,408,731
2024 -25	76,972,195	213,365,987	45,344	2,105,519	5,092,728	145,827,674	631,223	7,993,751	434,729	22,572,005	45,897	6,458,211	88,704	18,722,314	1,765,214	177,594,038	8,922	12,603,822	30,900	47,827,084
2025 -26	79,281,360	230,755,315	46,704	2,277,119	5,398,291	162,306,201	650,160	8,645,242	456,466	24,885,636	47,274	6,984,555	91,365	20,248,182	1,853,474	195,797,427	9,368	13,895,714	33,990	55,240,282
2026 -27	81,659,801	249,561,873	48,105	2,462,704	5,722,189	180,646,801	669,665	9,349,829	479,289	27,436,414	48,692	7,553,796	94,106	21,898,409	1,946,148	215,866,664	9,836	15,320,025	37,389	63,802,526
2027 -28	84,109,595	269,901,166	49,549	2,663,415	6,065,520	201,059,890	689,755	10,111,840	503,253	30,248,646	50,153	8,169,430	96,929	23,683,129	2,043,455	237,992,997	10,328	16,890,327	41,128	73,691,918
2028 -29	86,632,883	291,898,111	51,035	2,880,483	6,429,451	223,779,658	710,447	10,935,955	528,416	33,349,132	51,658	8,835,239	99,837	25,613,304	2,145,628	262,387,279	10,844	18,621,586	45,240	85,114,165
2029 - 30	89,231,870	315,687,807	52,566	3,115,242	6,815,218	249,066,759	731,761	11,827,235	554,837	36,767,418	53,208	9,555,311	102,832	27,700,789	2,252,909	289,281,975	11,386	20,530,298	49,764	98,306,861
Cost (PKR)	977,446,257	2,676,356,443	575,810	26,410,581	63,952,944	1,843,245,797	8,015,711	100,269,624	5,472,494	284,250,558	582,836	81,008,570	1,126,425	234,843,357	22,221,013	2,236,451,902	112,308	158,720,656	388,844	620,014,672
Total Cost (PKR)																		8,261,572,160		
Total Cost (PKR) in Millions																		8,262		
Total Cost (USD) in Millions																		\$79		

SINDH - PRIVATE SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

Sindh Private Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																										
Rationale for Forecast / Projections ( based on 2012 - 2016 Consumption trend)																										
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle		Femplant		1-Month Inj		Safe Load	
5-yr AVG	11,511,421		4,509		115,613		188,816		26,094		33,031		44,344		50,463		542		432		207		13,899		2,691	
1 Yr AVG	10,398,761		10,118		82,084		191,461		35,634		13,245		27,323		41,568		23		648		92		9,858		5,032	
% growth 5 to 1 Yr	-9.7%		124.4%		-29.0%		1.4%		36.6%		-59.9%		-38.4%		-17.6%		-95.8%		49.8%		-55.5%		-29.1%		86.9%	
forecast growth factor	1.10		1.05		1.10		1.10		1.10		1.01		1.02		1.10		1.05		1.10		1.01		1.01		1.01	
5 yr avg*growth factor	12,662,563		4,735		127,175		207,698		28,703		33,362		45,231		55,510		569		475		209		14,038		2,718	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	37,987,688	74,835,745	14,205	468,752	381,524	7,764,015	623,093	5,607,833	86,110	3,177,464	100,085	10,008,524	135,692	20,353,858	166,529	11,906,839	1,706	1,712,917	1,426	1,569,068	627	629,871	42,115	3,011,228	8,155	8,187,714
2018 - 19	41,786,457	86,435,286	14,915	516,799	419,676	8,967,437	685,402	6,477,047	94,721	3,669,971	101,086	10,614,040	138,406	21,798,982	183,182	13,752,399	1,791	1,888,491	1,569	1,812,273	634	667,978	42,536	3,193,408	8,237	8,683,071
2019 -20	45,965,102	99,832,755	15,661	569,771	461,644	10,357,389	753,942	7,480,989	104,193	4,238,817	102,097	11,256,189	141,174	23,346,709	201,500	15,884,021	1,881	2,082,061	1,726	2,093,175	640	708,391	42,962	3,386,609	8,319	9,208,396
2020 -21	50,561,613	115,306,832	16,444	628,173	507,809	11,962,785	829,336	8,640,542	114,613	4,895,833	103,118	11,937,189	143,998	25,004,326	221,650	18,346,044	1,975	2,295,472	1,899	2,417,617	646	751,248	43,391	3,591,499	8,402	9,765,504
2021 -22	55,617,774	133,179,391	17,266	692,560	558,589	13,817,016	912,270	9,979,826	126,074	5,654,688	104,149	12,659,389	146,878	26,779,633	243,815	21,189,681	2,074	2,530,758	2,088	2,792,348	653	796,699	43,825	3,808,784	8,486	10,356,317
2022 -23	61,179,551	153,822,197	18,129	763,548	614,448	15,958,654	1,003,497	11,526,700	138,681	6,531,164	105,191	13,425,282	149,815	28,680,987	268,197	24,474,082	2,177	2,790,161	2,297	3,225,162	659	844,899	44,263	4,039,216	8,571	10,982,875
2023 -24	67,297,507	177,664,637	19,036	841,811	675,893	18,432,245	1,103,846	13,313,338	152,549	7,543,495	106,243	14,237,511	152,812	30,717,337	295,017	28,267,565	2,286	3,076,153	2,527	3,725,062	666	896,016	44,706	4,283,588	8,657	11,647,338
2024 -25	74,027,257	205,202,656	19,987	928,097	743,482	21,289,243	1,214,231	15,376,905	167,804	8,712,736	107,305	15,098,881	155,868	32,898,268	324,518	32,649,037	2,401	3,391,458	2,780	4,302,447	673	950,225	45,153	4,542,745	8,743	12,352,002
2025 -26	81,429,983	237,009,068	20,987	1,023,227	817,831	24,589,076	1,335,654	17,760,326	184,585	10,063,211	108,378	16,012,363	158,985	35,234,045	356,970	37,709,638	2,521	3,739,083	3,058	4,969,326	679	1,007,713	45,605	4,817,581	8,831	13,099,299
2026 -27	89,572,981	273,745,473	22,036	1,128,108	899,614	28,400,383	1,469,220	20,513,176	203,043	11,623,008	109,462	16,981,111	162,165	37,735,662	392,667	43,554,632	2,647	4,122,339	3,363	5,739,572	686	1,068,680	46,061	5,109,045	8,919	13,891,806
2027 -28	98,530,279	316,176,022	23,138	1,243,739	989,575	32,802,442	1,616,142	23,692,718	223,348	13,424,574	110,556	18,008,468	165,408	40,414,894	431,934	50,305,600	2,779	4,544,878	3,700	6,629,205	693	1,133,335	46,521	5,418,142	9,008	14,732,260
2028 -29	108,383,307	365,183,305	24,295	1,371,222	1,088,533	37,886,821	1,777,756	27,365,090	245,682	15,505,384	111,662	19,097,981	168,716	43,284,351	475,127	58,102,968	2,918	5,010,728	4,070	7,656,732	700	1,201,902	46,986	5,745,940	9,098	15,623,562
2029 - 30	119,221,638	421,786,717	25,509	1,511,772	1,197,386	43,759,278	1,955,531	31,606,679	270,251	17,908,718	112,779	20,253,408	172,091	46,357,540	522,640	67,108,928	3,064	5,524,328	4,477	8,843,526	707	1,274,617	47,456	6,093,569	9,189	16,568,788
Total Cost (PKR)		2,660,180,085		11,687,581		275,986,786		199,341,169		112,949,064		189,590,337		412,606,591		423,251,435		42,708,828		55,775,513		11,931,574		57,041,355		155,098,933
Total Cost (PKR)																								4,608,149,250		
Total Cost (PKR) in Millions																								4,608		
Total Cost (USD) in Millions																								\$43.89		

# KP - PUBLIC SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

Khyber Pakhtunkhwa Public Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																				
Rationale for Forecast / Projections ( based on July 2016 - June 2017 Consumption trend)																				
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle	
1-yr AVG	20,254,187		11,932		1,065,080		166,098		98,081		12,077		23,341		398,255		2,013		4,805	
3-month AVG	11,722,544		5,424		834,016		6,912		68,862		290		934		296,993		1,392		3,597	
% growth 1 yr to 3-month	-42.1%		-54.5%		-21.7%		-95.8%		-29.8%		-97.6%		-96.0%		-25.4%		-30.9%		-25.1%	
forecast growth factor	1.03		1.03		1.06		1.03		1.05		1.03		1.03		1.05		1.05		1.10	
1-yr avg*growth factor	20,861,813		12,290		1,128,985		171,081		102,985		12,440		24,041		418,168		2,113		5,286	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	36,599,964	72,101,929	21,561	711,510	1,980,691	40,307,064	300,144	2,701,297	180,676	6,666,952	21,824	2,182,398	42,178	6,326,758	733,634	52,454,839	3,708	3,722,712	9,273	10,200,169
2018 - 19	37,697,963	77,978,237	22,208	769,498	2,099,533	44,861,762	309,148	2,921,453	189,710	7,350,315	22,479	2,360,263	43,444	6,842,389	770,316	57,831,460	3,893	4,104,290	10,200	11,781,196
2019 -20	38,828,902	84,333,463	22,874	832,212	2,225,505	49,931,141	318,423	3,159,551	199,196	8,103,722	23,153	2,552,625	44,747	7,400,043	808,832	63,759,185	4,088	4,524,980	11,220	13,607,281
2020 -21	39,993,769	91,206,640	23,560	900,037	2,359,035	55,573,360	327,976	3,417,054	209,155	8,934,353	23,848	2,760,663	46,089	8,003,147	849,273	70,294,501	4,292	4,988,790	12,342	15,716,409
2021 -22	41,193,582	98,639,981	24,267	973,390	2,500,577	61,853,150	337,815	3,695,544	219,613	9,850,124	24,563	2,985,658	47,472	8,655,403	891,737	77,499,688	4,507	5,500,141	13,576	18,152,453
2022 -23	42,429,390	106,679,140	24,995	1,052,722	2,650,611	68,842,555	347,949	3,996,731	230,594	10,859,762	25,300	3,228,989	48,896	9,360,819	936,324	85,443,406	4,732	6,063,906	14,934	20,966,083
2023 -24	43,702,271	115,373,490	25,745	1,138,518	2,809,648	76,621,764	358,388	4,322,465	242,123	11,972,888	26,059	3,492,151	50,363	10,123,725	983,140	94,201,355	4,969	6,685,456	16,427	24,215,826
2024 -25	45,013,339	124,776,429	26,517	1,231,308	2,978,227	85,280,024	369,139	4,674,746	254,230	13,200,109	26,841	3,776,762	51,874	10,948,809	1,032,297	103,856,994	5,217	7,370,715	18,070	27,969,279
2025 -26	46,363,740	134,945,708	27,313	1,331,659	3,156,921	94,916,666	380,214	5,055,737	266,941	14,553,120	27,646	4,084,568	53,430	11,841,137	1,083,912	114,502,336	5,478	8,126,214	19,877	32,304,517
2026 -27	47,754,652	145,943,783	28,132	1,440,189	3,346,336	105,642,249	391,620	5,467,780	280,288	16,044,815	28,475	4,417,460	55,033	12,806,190	1,138,107	126,238,825	5,752	8,959,150	21,865	37,311,717
2027 -28	49,187,291	157,838,202	28,976	1,557,565	3,547,116	117,579,824	403,369	5,913,404	294,302	17,689,408	29,330	4,777,483	56,684	13,849,894	1,195,013	139,178,304	6,040	9,877,463	24,051	43,095,034
2028 -29	50,662,910	170,702,015	29,845	1,684,506	3,759,943	130,866,344	415,470	6,395,347	309,018	19,502,573	30,209	5,166,848	58,385	14,978,660	1,254,763	153,444,081	6,342	10,889,903	26,457	49,774,764
2029 - 30	52,182,797	184,614,229	30,741	1,821,794	3,985,540	145,654,241	427,934	6,916,567	324,469	21,501,586	31,116	5,587,946	60,136	16,199,421	1,317,501	169,172,099	6,659	12,006,118	29,102	57,489,852
Total Cost (PKR)	571,610,571	1,565,133,248	336,734	15,444,908	37,399,682	1,077,930,142	4,687,588	58,637,676	3,200,315	166,229,727	340,842	47,373,812	658,733	137,336,395	12,994,848	1,307,877,072	65,678	92,819,839	227,396	362,584,580
Total Cost (PKR)																		4,831,367,399		
Total Cost (PKR) in Millions																		4,831		
Total Cost (USD) in Millions																		\$46		

# KP - PRIVATE SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

Khyber Pakhtunkhwa Private Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																										
Rationale for Forecast / Projections ( based on 2012 - 2016 Consumption trend)																										
Products	Condom		POP		COC		ECP		Copper T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle		Femplant		1-Month Inj		Safe Load	
5-yr AVG	11,511,421		4,509		115,613		188,816		26,094		33,031		44,344		50,463		542		432		207		13,899		2,691	
1 Yr AVG	10,398,761		10,118		82,084		191,461		35,634		13,245		27,323		41,568		23		648		92		9,858		5,032	
% growth 5 to 1 Yr	-9.7%		124.4%		-29.0%		1.4%		36.6%		-59.9%		-38.4%		-17.6%		-95.8%		49.8%		-55.5%		-29.1%		86.9%	
forecast growth factor	1.10		1.05		1.10		1.10		1.10		1.01		1.02		1.10		1.05		1.10		1.01		1.01		1.01	
5 yr avg*growth factor	12,662,563		4,735		127,175		207,698		28,703		33,362		45,231		55,510		569		475		209		14,038		2,718	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	22,215,200	43,763,944	8,307	274,126	223,115	4,540,396	364,385	3,279,461	50,357	1,858,181	58,530	5,852,985	79,353	11,902,936	97,386	6,963,120	998	1,001,714	834	917,591	367	368,349	24,629	1,760,966	4,769	4,788,175
2018 - 19	24,436,720	50,547,355	8,722	302,224	245,427	5,244,157	400,823	3,787,777	55,393	2,146,199	59,115	6,207,091	80,940	12,748,044	107,125	8,042,403	1,048	1,104,389	918	1,059,817	371	390,634	24,875	1,867,505	4,817	5,077,860
2019 -20	26,880,392	58,382,195	9,158	333,202	269,969	6,057,001	440,905	4,374,882	60,932	2,478,860	59,706	6,582,620	82,559	13,653,156	117,837	9,288,976	1,100	1,217,589	1,009	1,224,089	374	414,267	25,124	1,980,489	4,865	5,385,070
2020 -21	29,568,431	67,431,435	9,616	367,355	296,966	6,995,837	484,996	5,052,989	67,025	2,863,083	60,303	6,980,868	84,210	14,622,530	129,621	10,728,767	1,155	1,342,392	1,110	1,413,823	378	439,330	25,375	2,100,308	4,914	5,710,867
2021 -22	32,525,274	77,883,308	10,097	405,009	326,663	8,080,191	533,495	5,836,202	73,728	3,306,861	60,906	7,403,211	85,894	15,660,729	142,583	12,391,726	1,213	1,479,987	1,221	1,632,965	382	465,910	25,629	2,227,377	4,963	6,056,374
2022 -23	35,777,802	89,955,221	10,602	446,523	359,329	9,332,621	586,845	6,740,814	81,101	3,819,425	61,515	7,851,105	87,612	16,772,641	156,842	14,312,443	1,273	1,631,686	1,343	1,886,075	386	494,097	25,885	2,362,133	5,012	6,422,785
2023 -24	39,355,582	103,898,280	11,132	492,291	395,262	10,779,177	645,529	7,785,640	89,211	4,411,436	62,131	8,326,097	89,364	17,963,499	172,526	16,530,872	1,337	1,798,934	1,478	2,178,416	389	523,990	26,144	2,505,042	5,062	6,811,364
2024 -25	43,291,140	120,002,513	11,689	542,751	434,789	12,449,950	710,082	8,992,414	98,132	5,095,208	62,752	8,829,826	91,152	19,238,907	189,778	19,093,157	1,404	1,983,325	1,626	2,516,071	393	555,691	26,406	2,656,597	5,113	7,223,451
2025 -26	47,620,254	138,602,903	12,273	598,383	478,267	14,379,692	781,091	10,386,238	107,945	5,884,966	63,379	9,364,030	92,975	20,604,869	208,756	22,052,596	1,474	2,186,616	1,788	2,906,062	397	589,311	26,670	2,817,322	5,164	7,660,470
2026 -27	52,382,279	160,086,353	12,887	659,717	526,094	16,608,544	859,200	11,996,105	118,740	6,797,135	64,013	9,930,554	94,834	22,067,815	229,632	25,470,749	1,548	2,410,744	1,967	3,356,502	401	624,964	26,936	2,987,770	5,216	8,123,928
2027 -28	57,620,507	184,899,737	13,531	727,339	578,704	19,182,868	945,120	13,855,502	130,614	7,850,691	64,653	10,531,352	96,731	23,634,630	252,595	29,418,715	1,625	2,657,845	2,164	3,876,759	405	662,774	27,206	3,168,530	5,268	8,615,426
2028 -29	63,382,558	213,559,197	14,208	801,891	636,574	22,156,213	1,039,632	16,003,104	143,675	9,067,548	65,300	11,168,499	98,665	25,312,689	277,854	33,978,616	1,706	2,930,274	2,380	4,477,657	409	702,872	27,478	3,360,226	5,321	9,136,659
2029 - 30	69,720,814	246,660,872	14,918	884,085	700,231	25,590,426	1,143,595	18,483,586	158,043	10,473,018	65,953	11,844,193	100,639	27,109,890	305,640	39,245,301	1,792	3,230,627	2,618	5,171,694	413	745,396	27,752	3,563,519	5,374	9,689,427
Total Cost (PKR)	544,776,953	1,555,673,314	147,139	6,834,897	5,471,391	161,397,072	8,935,696	116,574,715	1,234,895	66,052,613	808,258	110,872,429	1,164,927	241,292,334	2,388,176	247,517,439	17,673	24,976,123	20,456	32,617,520	5,066	6,977,584	340,109	33,357,784	65,858	90,701,856
Total Cost (PKR)																								2,694,845,682		
Total Cost (PKR) in Millions																								2,695		
Total Cost (USD) in Millions																								\$25.67		

## BALUCHISTAN - PUBLIC SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

Balochistan Public Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																				
Rationale for Forecast / Projections ( based on July 2016 - June 2017 Consumption trend)																				
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle	
1-yr AVG	20,254,187		11,932		1,065,080		166,098		98,081		12,077		23,341		398,255		2,013		4,805	
3-month AVG	11,722,544		5,424		834,016		6,912		68,862		290		934		296,993		1,392		3,597	
% growth 1 yr to 3-month	-42.1%		-54.5%		-21.7%		-95.8%		-29.8%		-97.6%		-96.0%		-25.4%		-30.9%		-25.1%	
forecast growth factor	1.03		1.03		1.06		1.03		1.05		1.03		1.03		1.05		1.05		1.10	
1-yr avg*growth factor	20,861,813		12,290		1,128,985		171,081		102,985		12,440		24,041		418,168		2,113		5,286	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	22,756,065	44,829,449	13,406	442,382	1,231,497	25,060,958	186,615	1,679,534	112,336	4,145,184	13,569	1,356,908	26,224	3,933,668	456,138	32,613,850	2,305	2,314,600	5,765	6,341,966
2018 - 19	23,438,747	48,483,049	13,808	478,436	1,305,387	27,892,846	192,213	1,816,416	117,952	4,570,066	13,976	1,467,496	27,011	4,254,262	478,945	35,956,770	2,421	2,551,847	6,342	7,324,970
2019 - 20	24,141,910	52,434,417	14,222	517,429	1,383,710	31,044,738	197,980	1,964,454	123,850	5,038,497	14,395	1,587,097	27,822	4,600,985	502,892	39,642,339	2,542	2,813,411	6,976	8,460,341
2020 -21	24,866,167	56,707,822	14,649	559,599	1,466,732	34,552,794	203,919	2,124,557	130,043	5,554,943	14,827	1,716,445	28,656	4,975,965	528,036	43,705,678	2,669	3,101,785	7,674	9,771,694
2021 - 22	25,612,152	61,329,510	15,088	605,206	1,554,736	38,457,259	210,037	2,297,708	136,545	6,124,325	15,272	1,856,336	29,516	5,381,506	554,438	48,185,510	2,802	3,419,718	8,441	11,286,306
2022 -23	26,380,517	66,327,865	15,541	654,531	1,648,020	42,802,929	216,338	2,484,972	143,372	6,752,068	15,730	2,007,627	30,401	5,820,099	582,160	53,124,525	2,942	3,770,240	9,285	13,035,684
2023 -24	27,171,932	71,733,586	16,007	707,875	1,746,902	47,639,660	222,828	2,687,497	150,540	7,444,155	16,202	2,171,249	31,313	6,294,437	611,268	58,569,789	3,089	4,156,689	10,214	15,056,215
2024 -25	27,987,090	77,579,873	16,487	765,567	1,851,716	53,022,942	229,513	2,906,528	158,067	8,207,181	16,688	2,348,205	32,253	6,807,433	641,832	64,573,192	3,244	4,582,750	11,235	17,389,928
2025 -26	28,826,703	83,902,633	16,982	827,960	1,962,819	59,014,535	236,398	3,143,410	165,971	9,048,417	17,189	2,539,584	33,220	7,362,239	673,923	71,191,945	3,406	5,052,482	12,359	20,085,367
2026 -27	29,691,504	90,740,697	17,491	895,439	2,080,588	65,683,177	243,490	3,399,598	174,269	9,975,880	17,705	2,746,560	34,217	7,962,262	707,619	78,489,119	3,576	5,570,361	13,595	23,198,599
2027 -28	30,582,249	98,136,064	18,016	968,418	2,205,423	73,105,376	250,795	3,676,665	182,983	10,998,408	18,236	2,970,405	35,243	8,611,186	743,000	86,534,254	3,755	6,141,323	14,954	26,794,381
2028 -29	31,499,716	106,134,153	18,556	1,047,344	2,337,748	81,366,283	258,319	3,976,313	192,132	12,125,745	18,783	3,212,493	36,301	9,312,997	780,150	95,404,015	3,943	6,770,809	16,449	30,947,510
2029 - 30	32,444,708	114,784,087	19,113	1,132,702	2,478,013	90,560,673	266,068	4,300,383	201,739	13,368,633	19,346	3,474,311	37,390	10,072,007	819,158	105,182,926	4,140	7,464,816	18,094	35,744,375
Total Cost (PKR)	355,399,459	973,123,203	209,365	9,602,887	23,253,291	670,204,172	2,914,512	36,458,035	1,989,799	103,353,503	211,919	29,454,716	409,568	85,389,044	8,079,560	813,173,911	40,835	57,710,830	141,384	225,437,335
Total Cost (PKR)																		3,003,907,637		
Total Cost (PKR) in Millions																		3,004		
Total Cost (USD) in Millions																		\$29		

BALUCHISTAN - PRIVATE SECTOR CONTRACEPTIVE PROJECTION WITH COSTING (2017-18 TO 2029-30)

Balochistan Private Sector* Contraceptives Forecast with Cost for the Period 2017-18 to 2029-30																										
Rationale for Forecast / Projections ( based on 2012 - 2016 Consumption trend)																										
Products	Condom		POP		COC		ECP		Copper-T-380A		Multiload		2-Month Inj		3-Month Inj		Implanon		Jadelle		Femplant		1-Month Inj		Safe Load	
5-yr AVG	11,511,421		4,509		115,613		188,816		26,094		33,031		44,344		50,463		542		432		207		13,899		2,691	
1 Yr AVG	10,398,761		10,118		82,084		191,461		35,634		13,245		27,323		41,568		23		648		92		9,858		5,032	
% growth 5 to 1 Yr	-9.7%		124.4%		-29.0%		1.4%		36.6%		-59.9%		-38.4%		-17.6%		-95.8%		49.8%		-55.5%		-29.1%		86.9%	
forecast growth factor	1.10		1.05		1.10		1.10		1.10		1.01		1.02		1.10		1.05		1.10		1.01		1.01		1.01	
5 yr avg* growth factor	12,662,563		4,735		127,175		207,698		28,703		33,362		45,231		55,510		569		475		209		14,038		2,718	
Year	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)	Quantity	Cost(PKR)
2017 - 18	13,812,323	27,210,277	5,165	170,438	138,722	2,822,996	226,556	2,039,008	31,310	1,155,326	36,391	3,639,099	49,338	7,400,663	60,550	4,329,327	620	622,817	519	570,513	228	229,021	15,313	1,094,883	2,965	2,977,053
2018 - 19	15,193,556	31,427,870	5,423	187,908	152,594	3,260,560	249,212	2,355,054	34,441	1,334,402	36,755	3,859,265	50,325	7,926,110	66,605	5,000,372	651	686,655	571	658,942	230	242,877	15,466	1,161,123	2,995	3,157,164
2019 -20	16,712,911	36,299,190	5,694	207,169	167,854	3,765,947	274,133	2,720,088	37,885	1,541,234	37,122	4,092,750	51,331	8,488,864	73,266	5,775,430	684	757,037	628	761,079	233	257,571	15,621	1,231,371	3,025	3,348,173
2020 -21	18,384,202	41,925,564	5,979	228,404	184,639	4,349,669	301,547	3,141,701	41,673	1,780,125	37,494	4,340,362	52,358	9,091,573	80,592	6,670,622	718	834,634	690	879,046	235	273,154	15,777	1,305,869	3,055	3,550,737
2021 -22	20,222,623	48,424,027	6,278	251,815	203,103	5,023,867	331,701	3,628,665	45,840	2,056,044	37,869	4,602,954	53,405	9,737,074	88,651	7,704,568	754	920,184	759	1,015,298	237	289,680	15,935	1,384,874	3,086	3,765,557
2022 -23	22,244,885	55,929,751	6,592	277,626	223,413	5,802,567	364,871	4,191,108	50,425	2,374,731	38,247	4,881,432	54,473	10,428,407	97,516	8,898,776	792	1,014,503	835	1,172,669	240	307,205	16,094	1,468,659	3,116	3,993,373
2023 -24	24,469,373	64,598,862	6,921	306,083	245,755	6,701,964	401,359	4,840,730	55,467	2,742,815	38,630	5,176,759	55,562	11,168,824	107,268	10,278,087	831	1,118,489	919	1,354,433	242	325,791	16,255	1,557,513	3,148	4,234,972
2024 -25	26,916,311	74,611,686	7,267	337,456	270,330	7,740,769	441,494	5,591,043	61,014	3,167,951	39,016	5,489,953	56,674	11,961,810	117,995	11,871,190	873	1,233,134	1,011	1,564,370	245	345,502	16,418	1,651,742	3,179	4,491,188
2025 -26	29,607,942	86,176,497	7,631	372,045	297,363	8,940,588	485,644	6,457,654	67,115	3,658,983	39,406	5,822,095	57,807	12,811,099	129,794	13,711,224	917	1,359,530	1,112	1,806,847	247	366,405	16,582	1,751,673	3,211	4,762,905
2026 -27	32,568,736	99,533,854	8,012	410,180	327,100	10,326,379	534,208	7,458,591	73,827	4,226,126	39,800	6,174,332	58,963	13,720,687	142,774	15,836,464	962	1,498,882	1,223	2,086,908	249	388,572	16,748	1,857,649	3,243	5,051,061
2027 -28	35,825,610	114,961,601	8,413	452,223	359,810	11,926,968	587,629	8,614,672	81,209	4,881,175	40,198	6,547,879	60,142	14,694,855	157,051	18,291,116	1,010	1,652,518	1,345	2,410,379	252	412,081	16,915	1,970,037	3,275	5,356,650
2028 -29	39,408,170	132,780,650	8,834	498,576	395,790	13,775,648	646,392	9,949,947	89,330	5,637,757	40,600	6,944,026	61,345	15,738,190	172,756	21,126,239	1,061	1,821,901	1,480	2,783,988	254	437,011	17,084	2,089,224	3,308	5,680,727
2029 - 30	43,348,988	153,361,650	9,275	549,680	435,370	15,910,874	711,031	11,492,188	98,263	6,511,610	41,006	7,364,139	62,572	16,855,602	190,032	24,400,806	1,114	2,008,646	1,628	3,215,506	257	463,451	17,255	2,215,622	3,341	6,024,411
Total Cost (PKR)	338,715,630	967,241,479	91,484	4,249,604	3,401,843	100,348,795	5,555,778	72,480,449	767,798	41,068,280	502,535	68,935,047	724,295	150,023,756	1,484,851	153,894,222	10,988	15,528,930	12,719	20,279,977	3,150	4,338,320	211,463	20,740,237	40,947	56,393,972
Total Cost (PKR)																								1,675,523,067		
Total Cost (PKR) in Millions																								1,676		
Total Cost (USD) in Millions																								\$15.96		



The highly diverse and disorganized structure of the private and commercial market operators poses a serious challenge in obtaining accurate data for future projections. The highlighted portion of the table below pertains to the commercial sector's contribution in percentage terms. However, in the wake of rapid urbanization in the last five years, these figures are likely to change and the commercial sector's share in contraceptives market may be increased. The table below has been copied from PDHS 2012-13 and the data pertaining to commercial enterprises is highlighted in yellow.

**Table 7.7 Source of modern contraception methods**

Percent distribution of users of modern contraceptive methods age 15-49 by most recent source of method, according to method, Pakistan 2012-13

Source	Female sterilization	Pill	IUD	Injectables	Condom	Total
<b>Public sector</b>	66.5	47.5	53.3	56.3	17.7	45.6
Public government hospital (RHSC)	65.2	15.2	27.3	22.5	2.6	31.3
Rural health center	1.0	0.4	2.9	3.5	0.2	1.1
Family welfare center (FWW)	0.0	2.4	4.8	2.9	0.2	1.0
Mother-child health center	0.2	0.1	3.1	4.1	0.0	0.9
Lady health worker	0.0	28.8	4.3	21.1	13.9	9.7
Lady health visitor	0.0	0.5	6.6	1.8	0.6	1.1
Basic health unit	0.0	0.1	3.3	0.3	0.1	0.4
Other public	0.1	0.0	0.9	0.1	0.1	0.1
<b>Private medical sector</b>	33.0	36.1	40.8	40.0	34.7	35.0
Private/NGO hospital/clinic	33.0	5.6	35.8	23.7	1.7	18.9
Private pharmacy, chemist	0.0	23.1	0.4	2.5	30.9	13.0
Private doctor	0.0	2.2	4.5	6.4	0.5	1.5
Dispensary/compounder	0.0	4.8	0.0	7.4	1.0	1.5
Other private	0.0	0.4	0.0	0.0	0.6	0.2
<b>Other source</b>	0.0	13.5	5.9	3.4	31.9	13.3
Shop	0.0	10.5	0.0	1.4	26.8	10.5
Friend/relative	0.0	3.0	0.2	0.1	4.9	2.0
Hakim	0.0	0.0	0.0	0.0	0.2	0.1
Dai/traditional birth attendant	0.0	0.0	5.7	1.9	0.0	0.8
Other	0.3	1.4	0.0	0.0	8.3	3.2
Don't know	0.0	1.1	0.0	0.0	6.9	2.5
Missing	0.1	0.5	0.0	0.3	0.5	0.3
<b>Total</b>	100.0	100.0	100.0	100.0	100.0	100.0
<b>Number of women</b>	1,120	204	299	357	1,140	3,160

Note: Total includes 32 women whose husbands are sterilized and 8 women who are using implants and are not shown separately but excludes women using the lactational amenorrhea method (LAM).

RHSC = Reproductive health service center

FWW = Family welfare worker



## INVESTMENT GROWTH POTENTIAL

On the basis of the above tabular analysis for public, private, and commercial sectors, it is evident that there is huge potential for venture capitalists, pharmaceutical industry investors, and existing suppliers to benefit from the high return on investment (ROI) besides affording opportunity to attract foreign investment. The projections conducted above offer a promising ROI to the new entrants as well. The table below summarizes projected revenues till 2030.

### Projected market till 2030 – Entire Country

Description	PKR in million	USD in Million
Public Sector	33046.3	314.73
Private Sector/NGOs	18432.6	175.55
Commercial Sector	6692.26	63.74
<b>Total</b>	<b>58171.16</b>	<b>554.01</b>

### Projected market till 2030 – Punjab province

Description	PKR in million	USD in Million
Public Sector	17,098	\$163
Private Sector/NGOs	9,537	\$91
Commercial Sector	4,435	\$43
<b>Total</b>	<b>31,070</b>	<b>\$297</b>

### Projected market till 2030 – Sindh province

Description	PKR in million	USD in Million
Public Sector	8,262	\$79
Private Sector/NGOs	4,608	\$44
Commercial Sector	1,673	\$16
<b>Total</b>	<b>14,543</b>	<b>\$139</b>

### Projected market till 2030 – Khyber Pakhtunkhwa province

Description	PKR in million	USD in Million
Public Sector	4,678	\$45
Private Sector/NGOs	2,315	\$22
Commercial Sector	1,253	\$12
<b>Total</b>	<b>8,246</b>	<b>\$79</b>

### Projected market till 2030 – Balochistan province

Description	PKR in million	USD in Million
Public Sector	3,004	\$29
Private Sector/NGOs	1,676	\$16
Commercial Sector	779	\$7
<b>Total</b>	<b>5,459</b>	<b>\$52</b>

It would be a prudent economic decision for the investors to tap into a largely expanding consumer market whose family planning needs must be domestically met through local production. It is a promising opportunity for the national pharmaceutical companies to step forward mobilize their resources.

The tables below are titled accordingly. The first set of tables contains national level tabular analysis of the internationally produced products and their projection as well as financial impact till 2030. The first table contains the commodities that are currently being procured from international market which includes condoms, intrauterine devices and implants. A quick scan of the tabular analysis reveals that condoms alone are the big ticket items and a huge amount of financial allocation is required in the years to come to fulfil the requirements of the population using barrier method. Approximately 270 million USD would be required to provide condoms to the users. Though the share of intrauterine devices and implants in the table below is not substantial, however, the current shift from short acting method to long acting methods may significantly impact the cost estimation which has been currently calculated at approximately 59 million USD. For Punjab approximately 140 million USD would be required to provide condoms to the users and 31 million USD would be spent on providing intrauterine devices and implants. Similarly approximately 68 million USD would be required to provide condoms to the users in Sindh and 16 million USD would be spent on providing intrauterine devices and implants. For Khyber Pakhtunkhwa approximately 40 million USD would be required to provide condoms to the users besides spending 16 million USD on intrauterine devices and implants. Balochistan's share of condoms would be around 25 million USD and for intrauterine devices and implants 05 million USD would be needed.

Given the foregoing scenario, it is evident that a sizeable amount of business opportunity exists for the potential investors, pharmaceutical industry and other entrepreneurs. It could also accrue financial benefits to the provincial and regional governments through local manufacturing of these commodities. The local manufacturing will help in forestalling the incidence of stock-out and would ensure availability of supplies at the last mile besides contributing the national exchequer.

Within the tables below, there are commodities that are locally produced in Pakistan and these tables represent the commodities requirement till 2030. The estimated cost of these products for the entire country is approximately 212 million USD. Whereas estimated cost of the locally produced products is 109.4 million USD for Punjab, 52.8 million USD for Sindh, 30.9 million USD for Khyber Pakhtunkhwa and approximately 19.2 million USD for Balochistan.

## INTERNATIONALLY & LOCALLY MANUFACTURED CONTRACEPTIVE NATIONAL REQUIREMENT WITH COST -- 2017 TO 2030

Internationally Procured Contraceptive National Requirement with Cost -- 2017 to 2030 <sup>16</sup>										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions
1	Condom	3,909,785,029	10,705	103	3,726,244,549	10,641	102	2,435,893,435	6,809	65.5
2	Cu-T	21,889,976	1,137	11	8,446,617	452	4	1,789,859	94	0.9
3	Multiload	2,331,343	324	3	5,528,440	758	7			
4	Implanon	449,231	635	6	120,880	171	2			
5	Jadelle	1,555,378	2,480	24	139,919	223	2			
<b>Total</b>			<b>15,281</b>	<b>147</b>		<b>12,245</b>	<b>118</b>		<b>6,903</b>	<b>66.4</b>
<b>Estimated production value</b>			<b>PKR3,4429million (\$331.4million)</b>							

<sup>16</sup> New method e.g., SayanaPress or change in method mix or production needs for other regional countries and markets will require adjustment

Pakistan market alone										
Locally Manufactured Contraceptive National Requirement with Cost -- 2017 to 2030 <sup>17</sup>										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions
1	COC	255,811,777	7,373	71	37,424,018	1,104	11	39,586,832	1,144	11.0
2	ECP	32,062,843	401	4	61,119,675	797	8	12,579,640	162	1.6
3	DMPA	88,884,053	8,946	86	16,334,993	1,693	16	3,577,448	362	3.5
<b>Total</b>			<b>16,720</b>	<b>161</b>		<b>3,594</b>	<b>35</b>		<b>1,668</b>	<b>16.0</b>
<b>Estimated total market for existing local production</b>			<b>PKR 21982 million (\$212million)</b>							

### INTERNATIONALLY & LOCALLY MANUFACTURED CONTRACEPTIVE PUNJAB REQUIREMENT WITH COST -- 2017 TO 2030

Internationally Procured Contraceptive Requirement with Cost -- 2017 to 2030 <sup>[1]</sup>										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions
1	Condom	2,022,922,774	5,539	53	1,927,958,930	5,506	53	1,260,331,263	3,523	33.9
2	Cu-T	11,325,874	588	6	4,370,280	234	2	926,073	49	0.5
3	Multiload	1,206,237	168	2	2,860,415	392	4			
4	Implanon	232,432	328	3	62,543	88	1			
5	Jadelle	804,752	1,283	12	72,394	115	1			
Total			7,907	76		6,335	61		3,572	34.3
Estimated production value Punjab market alone			PKR 17,814million (\$171.3million)							
Locally Produced Contraceptive Requirement with Cost -- 2017 to 2030 <sup>[2]</sup>										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions
1	COC	132,357,013	3,815	37	19,363,187	571	5	20,482,227	592	5.7
2	ECP	16,589,315	208	2	31,623,320	413	4	6,508,706	84	0.8
3	DMPA	45,988,609	4,629	45	8,451,725	876	8	1,850,971	187	1.8
Total			8,651	83		1,860	18		863	8.3
Estimated Punjab total market for existing local			PKR 11,374 million (\$109.4million)							

### INTERNATIONALLY & LOCALLY MANUFACTURED CONTRACEPTIVE SINDH REQUIREMENT WITH COST -- 2017 TO 2030

Internationally Procured Contraceptive Requirement with Cost -- 2017 to 2030*										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD m	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD m
1	Condom	977,446,257	2,676	26	931,561,137	2,660	26	608,973,359	1,702	16.4
2	Cu-T	5,472,494	284	3	2,111,654	113	1	447,465	23	0.2
3	Multiload	582,836	81	1	1,382,110	190	2			

<sup>17</sup> Change in method mix, local market trend, and needs of exports will require adjustments

4	Implanon	112,308	159	2	30,220	43	0			
5	Jadelle	388,844	620	6	34,980	56	1			
<b>Total</b>			<b>3,820</b>	<b>37</b>		<b>3,061</b>	<b>29</b>		<b>1,726</b>	<b>16.6</b>
<b>Estimated production value Sindh market alone</b>			<b>PKR 8,607million (\$82.8million)</b>							

Locally Produced Contraceptive Requirement with Cost -- 2017 to 2030*										
S.N o	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR <i>millions</i>	Cost USD <i>m</i>	Quantity	Cost PKR <i>millions</i>	Cost USD <i>millions</i>	Quantity	Cost PKR <i>millions</i>	Cost USD <i>m</i>
1	COC	63,952,944	1,843	18	9,356,005	276	3	9,896,708	286	2.8
2	ECP	8,015,711	100	1	15,279,919	199	2	3,144,910	40	0.4
3	DMPA	22,221,013	2,236	22	4,083,748	423	4	894,362	90	0.9
<b>Total</b>			<b>4,180</b>	<b>40</b>		<b>899</b>	<b>9</b>		<b>417</b>	<b>4.0</b>
<b>Estimated Sindh total market for existing local production</b>			<b>PKR 5,496 million (\$52.8million)</b>							

## INTERNATIONALLY & LOCALLY MANUFACTURED CONTRACEPTIVE KHYBER PAKHTUNKHWA REQUIREMENT WITH COST -- 2017 TO 2030

Internationally Procured Contraceptive Requirement with Cost -- 2017 to 2030[1]										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions
1	Condom	571,610,571	1,565	15	544,776,953	1,556	14.96	356,127,620	996	9.57
2	Cu-T	3,200,315	166	2	1,234,895	66	0.64	261,677	14	0.13
3	Multiload	340,842	47	0.5	808,258	111	1.07			
4	Implanon	65,678	93	1	17,673	25	0.24			
5	Jadelle	227,396	363	3	20,456	33	0.31			
Total			2,234	21		1,790	17		1,009	9.70
Estimated production value Khyber Pakhtunkhwa market alone			PKR5,034million (\$48.4million)							

Locally Manufactured Contraceptive Requirement with Cost -- 2017 to 2030[2]										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions
1	COC	37,399,682	1,078	10	5,471,391	161	1.6	5,787,595	167	1.6
2	ECP	4,687,588	59	1	8,935,696	117	1.1	1,839,143	24	0.2
3	DMPA	12,994,848	1,308	13	2,388,176	248	2.4	523,023	53	0.5
<b>Total</b>			<b>2,444</b>	<b>24</b>		<b>525</b>	<b>5.1</b>		<b>244</b>	<b>2.3</b>
<b>Estimated total KP market for existing local production</b>			<b>PKR3,214million (\$30.9million)</b>							

## INTERNATIONALLY & LOCALLY MANUFACTURED CONTRACEPTIVE BALOCHISTAN REQUIREMENT WITH COST -- 2017 TO 2030

Internationally Procured Contraceptive Requirement with Cost -- 2017 to 2030 <sup>[1]</sup>										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions
1	Condom	355,399,459	973	9	338,715,630	967	9.30	221,422,713	619	5.95
2	Cu-T	1,989,799	103	1	767,798	41	0.39	162,698	9	0.08
3	Multiload	211,919	29	0.3	502,535	69	0.66			
4	Implanon	40,835	58	1	10,988	16	0.15			
5	Jadelle	141,384	225	2	12,719	20	0.19			
<b>Total</b>			<b>1,389</b>	<b>13</b>		<b>1,113</b>	<b>11</b>		<b>627</b>	<b>6.03</b>
<b>Estimated production value Balochistan market alone</b>		<b>PKR3,130million (\$30.1million)</b>								

Locally Manufactured Contraceptive Requirement with Cost -- 2017 to 2030 <sup>[2]</sup>										
S.No	Product	Public Sector			Private Sector			Commercial Sector		
		Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions	Quantity	Cost PKR millions	Cost USD millions
1	COC	23,253,291	670	6	3,401,843	100	1.0	3,598,443	104	1.0
2	ECP	2,914,512	36	0.4	5,555,778	72	0.7	1,143,489	15	0.1
3	DMPA	8,079,560	813	8	1,484,851	154	1.5	325,190	33	0.3
<b>Total</b>			<b>1,520</b>	<b>15</b>		<b>327</b>	<b>3.1</b>		<b>152</b>	<b>1.5</b>
<b>Estimated total market Balochistan for existing local</b>		<b>PKR1,998million (\$19.2million)</b>								

Whereas the tables below contains analysis of local production of COC, ECP, and DMPA by Zafa and Hensel which has resulted in the following yearly sale. In 2014-15, the Government of the Punjab procured locally produced contraceptives (COC, ECP and DMPA) worth 595 million PKR. The following year, KP, Punjab and Sindh procured the products of worth 536 million PKR. During the fiscal year 2016-17, all four provinces sourced the locally produced contraceptives worth 775 million PKR. In addition to the national level analysis, the four tables below contain provincially desegregated costs on yearly basis as per their procurement on the locally produced commodities.

Year	PKR in million	USD in million
2014-15	595.00	5.67
2015-16	536.00	5.10
2016-17	775.00	7.38
<b>Total</b>	<b>1,906.00</b>	<b>18.15</b>

### Punjab's Cost on locally produced products

Year	PKR in million	USD in million
2014-15	595	5.66
2015-16	119	1.12
2016-17	229	2.18
<b>Total</b>	<b>943</b>	<b>8.96</b>

### Sindh's Cost on locally produced products

Year	PKR in million	USD in million
2015-16	274	2.6

2016-17	347	3.3
Total	621	5.9

#### **Khyber Pakhtunkhwa's Cost on locally produced products**

Year	PKR in million	USD in million
2015-16	40	0.38
2016-17	39	0.37

#### **Balochistan's Cost on locally produced products**

Year	PKR in million	USD in million
2016-17	54.49	0.51

The main barriers impeding local production have been a high-dependency on external aid for contraceptives and fragmentary cooperation between local manufacturers, technical and development partners, and national authorities. Therefore, a significant degree of coherence across health, trade, investment and intellectual property areas is essential for Pakistan to reap the maximum benefit of a viable pharmaceutical sector particularly in family planning commodities. This would result in significant saving in public funds and would ensure sustainable and uninterrupted supply of FP commodities.

Restraining the unprecedented population growth, and ultimately harmonizing it to a tolerable level requires multipronged strategies focused on ensuring commodity security of FP goods. Since Pakistan aims to achieve targets of universal access of FP commodities to be able to comply with 50% CPR by 2020, the provincial governments have ramped up their financial allocations for the procurement of contraceptives. Other concomitant efforts of removing structural barriers to access and strengthening of overall health systems are also underway.

Producing a full range of the family planning commodities to be procured by the provincial governments in Pakistan in the years to come is economically viable and less risky from a market niche perspective. In the wake of the new census figures ringing alarm bells in terms of unprecedented growth, the investment climate for such investment seems highly conducive for local production of contraceptives that are currently being imported from the international market.

## **WAY FORWARD**

1. The local production of FP commodities could be highly lucrative for investors; therefore, upon endorsement of contraceptive commodity projection report, the PPW should arrange a seminar for potential local manufacturers and pharmaceutical industries to disseminate the projected data to stir private sector interest and attract investments in local production of contraceptives. The GHSC-PSM project will provide technical support to the PPW for arranging the event.
2. The PPW should coordinate with all provincial governments to partner with them and to solicit their commitments to purchase the contraceptives from the potential local investors. If there is no commitment on the part of the provincial governments to give confirmed business to the potential investors, the likelihood of investment in local manufacturing of contraceptives would be minimal.

3. The GHSC-PSM project will work with the PPW team to incorporate feedback, if any, from the seminar into the data / report and will prepare future roadmap. The roadmap will aim on how the MoNHSR&C / PPW can facilitate and assist the local interested manufacturers in registration, licensing of contraceptive products, rebates on import of machinery and equipment, and waivers on commercial taxes.

# ANNEXURE-I: PPW REQUEST FOR COMMISSIONING STUDY

No.12-2/2017-P&S  
GOVERNMENT OF PAKISTAN  
M/O NATIONAL HEALTH SERVICES, REGULATIONS & COORDINATION  
(Population Programme Wing)  
10<sup>th</sup> Floor, Shaheed-e-Millat Secretariat

Islamabad, the 26<sup>th</sup> April 2017

Subject:- **REQUEST FOR COMMISSIONING OF FEASIBILITY STUDY ON THE MANUFACTURING OF CONTRACEPTIVES IN PAKISTAN**

Dear Ms. Monica Villanueva,

Please recall our meeting of 16<sup>th</sup> March 2017. This meeting was followed up by another meeting with the Technical Team of USAID Global Health Supply Chain Programme on 22<sup>nd</sup> March 2017. As an outcome of the aforesaid meetings, the following are identified components / dimensions of the feasibility study:-

S.No.	Area of Technical Assistance	Responsibility
i.	Desk review outlining existing method mix, including quantities ordered and consumed over the past 10 years.	Global Health Supply Chain Programme (GHSCP).
ii.	The projection of the demand of the method mix till 2030 while keeping in view: a. Pakistan commitments in FP 2020; b. Vision 20205 and SDGs;	
iii.	Provincial preparedness for procurement in terms of their choice, method-mix requirements and funding allocation for contraceptive procurement as reflected in their CIPs.	
iv.	Writing a letter of intent to private sector / pharmaceutical companies.	Population Programme Wing (PPW)
v.	Holding a briefing session with short-listed / interested organizations and invite their technical proposals to determine potential investments to gain access to internal and external markets and commercial advantage.	Population Programme Wing supported by Global Health Supply Chain Programme.
vi.	Evaluation of Technical proposal and award of contract. Coordinate and sign MoUs with the Provincial Government(s) for obtaining of commitment to purchase contraceptives from potential investors.	Committee chaired by: * Additional Secretary Members: * DG (Population) * DG (Health) * Country Director (GHSCP).
vii.	Facilitate interested firms on the following: a. Facilitating registration and licensing. b. Rebate on import of machinery / equipment.	
viii.	Concession / waivers on commercial taxes.	



2. We will appreciate if USAID may engage an appropriate organization / consultant to carry out the feasibility study.

With best regards,


Yours faithfully,

  
(ABDUL GHAFAR KHAN)  
Director General (P)  
Ph.9216280

**Ms. Monica Villanueva**  
MCH Team Leader  
USAID Office  
Islamabad

Copy to:-

1. SPS to Secretary, M/o NHR&C, Islamabad
2. Dr. Muhammad Tariq, Country Director, Global Health Supply Chair  
Programme – Procurement and Supply Management, Islamabad

  
Director General (P)

## ANNEXURE- II: USAID PAKISTAN CONCURRENCE TO THE PPW REQUEST



**USAID | PAKISTAN**  
FROM THE AMERICAN PEOPLE

May 09, 2016

Mr. Abdul Ghaflar Khan  
Director General,  
Population Program Wing  
Ministry of National Health Services, Regulations and Coordination  
LG&RD Complex, G-5/2,  
Islamabad

**Subject: Request for Commissioning of Feasibility Study on the Manufacturing of Contraceptives in Pakistan**

Dear Mr. Khan,

Thank you for your letter dated April 26, 2017 requesting USAID to engage an appropriate consultant to carry out the feasibility study on the manufacturing of contraceptives in Pakistan. USAID is happy to provide technical assistance for this request through the Procurement & Supply Management (PSM) project. We have advised the PSM project to work closely with you and the Population Programme Wing (PPW) to carry out and complete the requested feasibility study as outlined in your letter.

We look forward to greater future collaboration.

Sincerely,

**Monica Villanueva**  
MCH Team Lead/USAID Pakistan

Copy for information:

1. Dr. Assad Hafeez, Director General, MoNHSR&C, Islamabad
2. Sargita Patel, Director Health Office, USAID Pakistan, Islamabad
3. Dr. Muhammad Tariq, Country Director, USAID GHSC-PSM, Islamabad

## ANNEXURE- III: PUBLIC SECTOR CONTRACEPTIVE DATA (2007 – 2010)

Total Consumption of Contraceptives of Provincial / Regional Population Welfare Departments for the Period July-2007 to June 2010										
Year	Condom	COC	POP	EC-Pills	Copper-T	Multi load	Norigest	DMPA	Norplant	Implanon
2007-08	55502062	2701914	150841	50706	57948	519733	1527729	511692	1400	
2008-09	66358006	3305675	144000	76703	728354	823811	1561595	758495	1545	886
2009-10	41364808	3343099	68817	48887	662887	96508	1336905	905182	0	2171
2010-11	71383308	3356055	120068	52678	782922	291453	946500	857025	1192	426
TOTAL	234608184	12706743	483726	228974	2232111	1731505	5372729	3032394	4137	3483

Total Consumption Of Provincial Health Program (PHC Project) For The Period Of July-2007 To June 2010			
Year	Condom	COC	DMPA
2007-08	163368000	4993200	0
2008-09	168984000		
2009-10	10544976	3455500	75500
2010-11	100649884	6503040	1030400
Total	443546860	14951740	1105900

Amount Allocated By Provincial/ Regional PWD For Contraceptive Procurement For Next Three Year 2017-20		
S.#	Province / Region	Amount
1.	PWD Punjab	2.943 Billion
2.	Sindh	2.700 Billion
3.	KPK	2.000 Billion
4.	Balochistan	120.00 Million
5.	AJK	60.00 Million
6.	G.B	55.348 Million
7.	FATA	59.179 Million

### Private Sector 5 Years consumption data as extracted from cLMIS

Private Sector Yearly Report for Stakeholder(s) = 'All' And Indicator = 'Consumption' (2012-16)												
Year	Condom	POP	COC	ECP	Copper-T-380A	Safe Load	1-Month Inj	3-Month Inj	Implants	Multiload	2-Month Inj	
2016	10,398,761	0	82,084	191,461	35,634	5,032	9,858	41,568	763	13,245	27,323	
2015	11,177,743	0	93,321	181,418	37,300	1,743	10,261	42,966	1,269	20,413	31,943	
2014	11,187,177	10,118	109,568	200,169	25,322	1,961	14,042	52,027	2,219	34,720	37,503	
2013	16,096,454	3,094	183,355	238,990	14,932	3,070	19,904	67,443	699	66,891	65,918	
2012	8,696,968	9,335	109,739	132,042	17,283	1,651	15,431	48,314	955	29,888	59,032	