

The Impact of Dutch International Assistance for Family Planning and HIV, 2024

Investments in sexual and reproductive health and rights (SRHR), including family planning and HIV services and programs, have far-reaching and measurable benefits. By helping to address people’s reproductive health needs, such investments not only promote health and well-being throughout people’s lives but also contribute to improvements in gender equality, economic development and environmental sustainability.¹

The Netherlands’ Support for SRHR

The Netherlands has a track record of robust investments in SRHR. From 2012 to 2022, the Netherlands allocated approximately 10% of its official development assistance (ODA) budget to SRHR, adding up to approximately 5 billion euros (€).² This contribution made the nation the second largest European donor for SRHR, reaffirming its status as a principal global player supporting the health and rights of women, girls, LGBTQI+ individuals and people living with HIV.³ The Netherlands fills a key need in SRHR programming by focusing on these marginalized populations. Dutch long-term support has a profound impact on people’s health and on promoting gender equality worldwide.

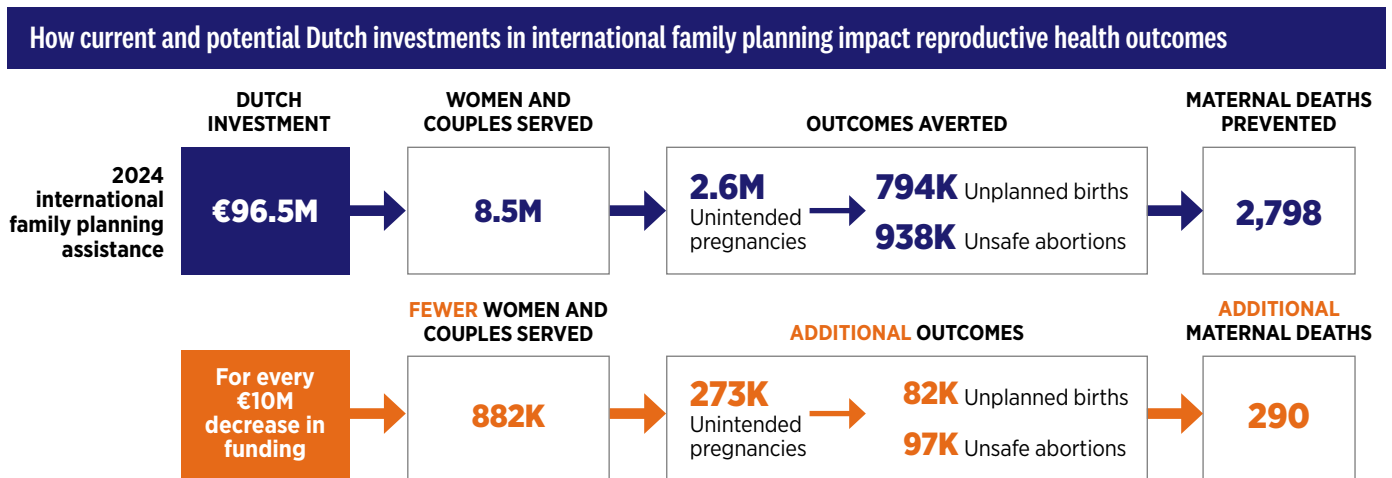
The Dutch government from 2022 to 2024 pledged to continue to support SRHR in its coalition agreement.⁴ Liesje Schreinemacher, the prior government’s Minister for Foreign Trade and Development Cooperation, issued a policy note reinforcing the Netherlands’ bold commitment to invest in the full range of SRHR activities.⁵ The Ministry of Foreign Affairs subsequently launched the Dutch Global Health Strategy 2022–2030, which outlines the Netherlands’ commitment to being an advocate, innovator and connector in the field of global health and SRHR.⁶

The Dutch government’s comprehensive investments in SRHR include critical funding to support family planning in low- and middle-income countries. In 2022, the Netherlands disbursed €350.3 million dedicated to SRHR, including €93.5 million for family planning.⁷ Assuming the share of ODA going to family planning remains at 1.44%, it is estimated that the Netherlands will disburse €96.5 million in 2024 in family planning assistance globally. The country has similarly maintained a strong commitment to funding HIV programming and services: In 2022, it pledged €180 million over three years to the Global Fund to fight AIDS, Tuberculosis and Malaria (Global Fund), equating to an annual contribution of €60 million in 2024.⁸

This critical funding for SRHR is at grave risk with the announced planned funding cuts to all ODA, starting at €300 million in 2025 and scaling up to €2.4 billion annually in 2027—representing almost one-third of the country’s total ODA.⁹ Though the Netherlands has been a leading donor in SRHR and family planning, these cuts may threaten essential SRHR services and care needed globally. Cuts to SRHR funding may also negatively impact progress on key priorities of the UN’s 2030 Agenda for Sustainable Development, such as gender equality and achieving broader health and development goals.

Impact of Dutch Investment in Family Planning

In 2024, the Netherlands’ family planning funding of €96.5 million is estimated to provide 8.5 million women and couples with modern contraceptive methods, resulting in 2.6 million unintended pregnancies averted—and, consequently, 938,000 unsafe abortions and 794,000 unplanned births averted. Ultimately, this investment will avert 2,798 maternal deaths in low- and middle-income countries in 2024.



Notes: Impacts estimated using Adding It Up 2024 data. M=million. K=thousand.

The graphic shows the benefits of the current Dutch investments, but also what is at risk if this funding is cut. Unfortunately, the drastic proposed cuts would be devastating for people’s health outcomes. Even seemingly small decreases in international family planning assistance would lead to increases in unintended pregnancies, unplanned births and unsafe abortions around the world. For example, every €10 million decrease in funding would deny 882,000 people contraceptive services, increase the number of unintended pregnancies by 273,000 and fail to prevent 290 maternal deaths.

Impact of Dutch Investment in HIV Services

In 2024, the Netherlands’ disbursement of €60 million to the Global Fund is estimated to save 68,000 lives. These funds will provide antiretroviral therapy to 93,000 people living with HIV, give 9,000 mothers medicine to prevent transmitting HIV to their babies, provide 2.6 million people with HIV counseling and testing and reach 154,000 members of key populations with HIV prevention programs.¹⁰

Cuts to this funding would have devastating impacts. Every €10 million decrease in development assistance the Netherlands provides to the Global Fund would result in 12,000 more deaths, 17,000 fewer people receiving life-saving antiretroviral treatment and 2,000 mothers not receiving the medicines necessary to prevent transmitting HIV to their babies.

| How Dutch disbursements to the Global Fund to Fight AIDS, Tuberculosis and Malaria impact health outcomes | | | | | | |
|---|------------------------------------|--|---|---|---|-------------|
| | DUTCH INVESTMENT | PEOPLE PROVIDED ANTIRETROVIRAL THERAPY | MOTHERS TREATED TO PREVENT HIV TRANSMISSION TO THEIR BABIES | PEOPLE RECEIVING HIV COUNSELING AND TESTING | MEMBERS OF KEY POPULATIONS REACHED WITH HIV PREVENTION PROGRAMS | LIVES SAVED |
| 2024 Global Fund disbursement | €60M | 93K | 9K | 2.6M | 154K | 68K |
| | For every €10M decrease in funding | -17K | -2K | -466K | -28K | -12K |

Notes: Impacts estimated using data from the Global Fund’s Seventh Replenishment Investment Case 2022. M=million. K=thousand.

Maintaining Dutch Leadership in SRHR Funding

The Netherlands’ investments in SRHR—and, in particular, family planning and HIV services and programming—have had significant, measurable impacts. They have saved lives, improved health and ensured that women and girls can decide if and when they want to have children. The Dutch government has proven itself through these investments to be a true champion of SRHR globally, but planned cuts to its ODA risk tarnishing this reputation. Worse, however, is the risk to essential sexual and reproductive health care for those with the least ability to secure it.

Methodology and Sources

The impacts of current and decreased investment outlined in this report were calculated using the Family Planning Investment Impact Calculator (FPIIC).¹¹ To estimate the level of Dutch funding for family planning in 2024, the last known proportion of ODA going to family planning from 2022 (1.44%)⁷ was applied to the estimated ODA for 2024, resulting in an estimated €96.5 million allocated to family planning in 2024.¹² For sources in US dollars, the average annual exchange rate of the relevant year was used for converting to euros.¹³

The FPIIC estimates the impacts of actual, planned or hypothetical investments in family planning and assumes investments would go toward the total costs of providing contraceptive care—both family planning service delivery costs and associated programs and systems costs necessary to support the larger health system in providing this care. The calculator is designed to estimate impacts based on the costs associated with the current service provision environment. The calculator does not account for the additional indirect costs that would be needed to scale up services to meet the needs of a large number of additional users—e.g., for new infrastructure development, workforce expansion, etc.

To estimate the number of women and couples who would be expected to receive contraceptive care at any given investment amount, the calculator divides the entered annual funding amount by the average annual cost of contraceptive care per user from 2024. The average annual cost of contraceptive care is based on distribution of types of methods used and the cost for annual use of each method, as of 2024. To estimate the pregnancy-related impacts of the entered funding amount, the calculator uses ratios of impacts per contraceptive user served, taken from Adding It Up 2024 (forthcoming).

Estimates of the impacts of funding given to the Global Fund come from the modeling work conducted by Avenir Health and Imperial College London as part of the Global Fund's Seventh Replenishment Investment Case, the methodology of which is described in Annex 3 of the report.¹⁰ Annual impacts were measured based on one-third of the total three-year funding commitment of €180 million, or €60 million annually. The Global Fund calculator uses an exchange rate as of September 21, 2022.

Just the Numbers estimates for the Netherlands in 2024 are not directly comparable to prior Just the Numbers reports for other countries, which were based on older estimated impacts of family planning funding.

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This resource is also available at <https://www.guttmacher.org/2024/10/just-numbers-impact-dutch-international-assistance-family-planning-and-hiv-2024>



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