



---

# Planning for Contraceptive Security in El Salvador:

Is there a role for the commercial sector?

---

Veronica Siman de Betancourt

James Gribble

Varuni Dayaratna

May 31, 2006

---

# A Methodology for Addressing Contraceptive Security

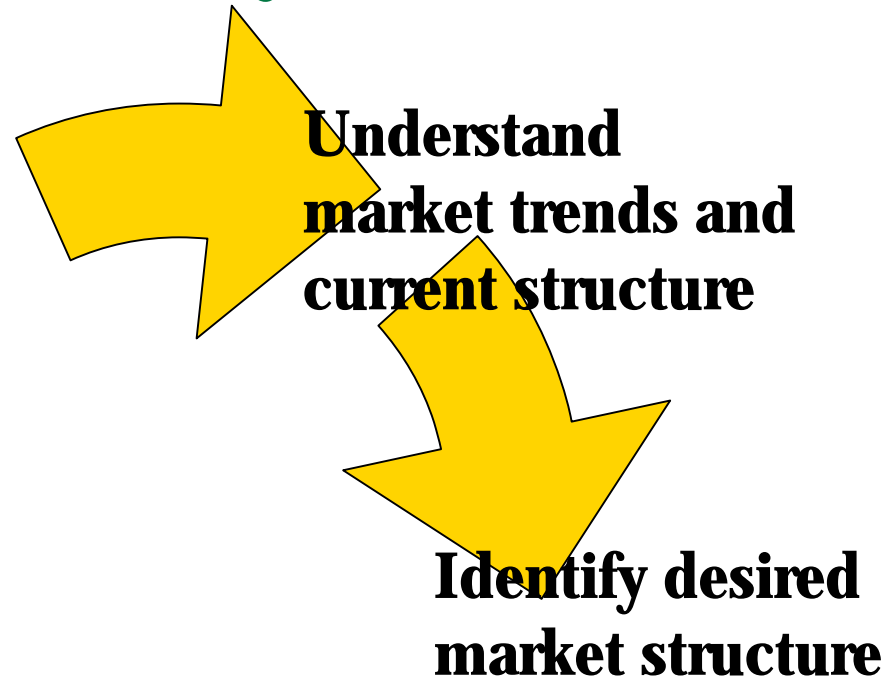


**Understand  
market trends and  
current structure**

---

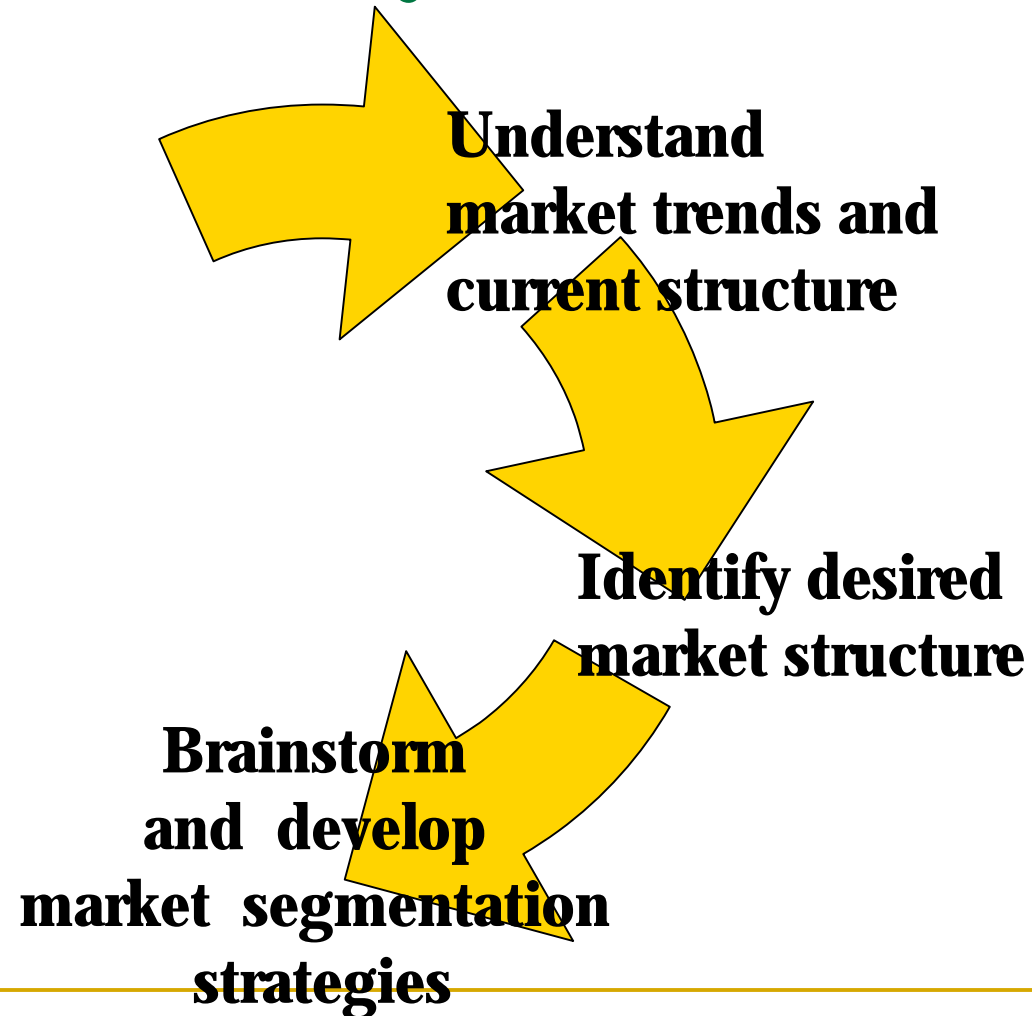
---

# A Methodology for Addressing Contraceptive Security



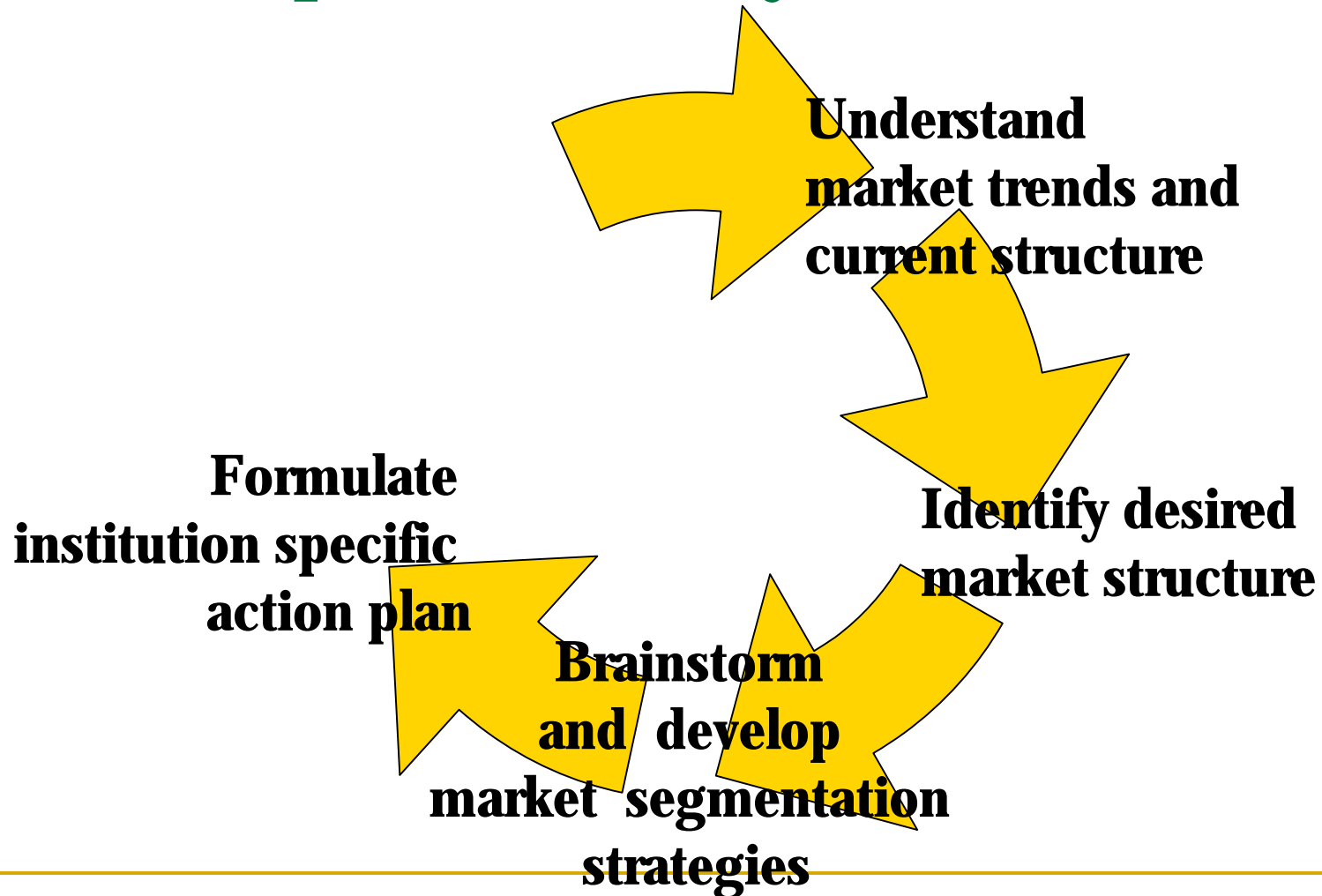
---

# **A Methodology for Addressing Contraceptive Security**



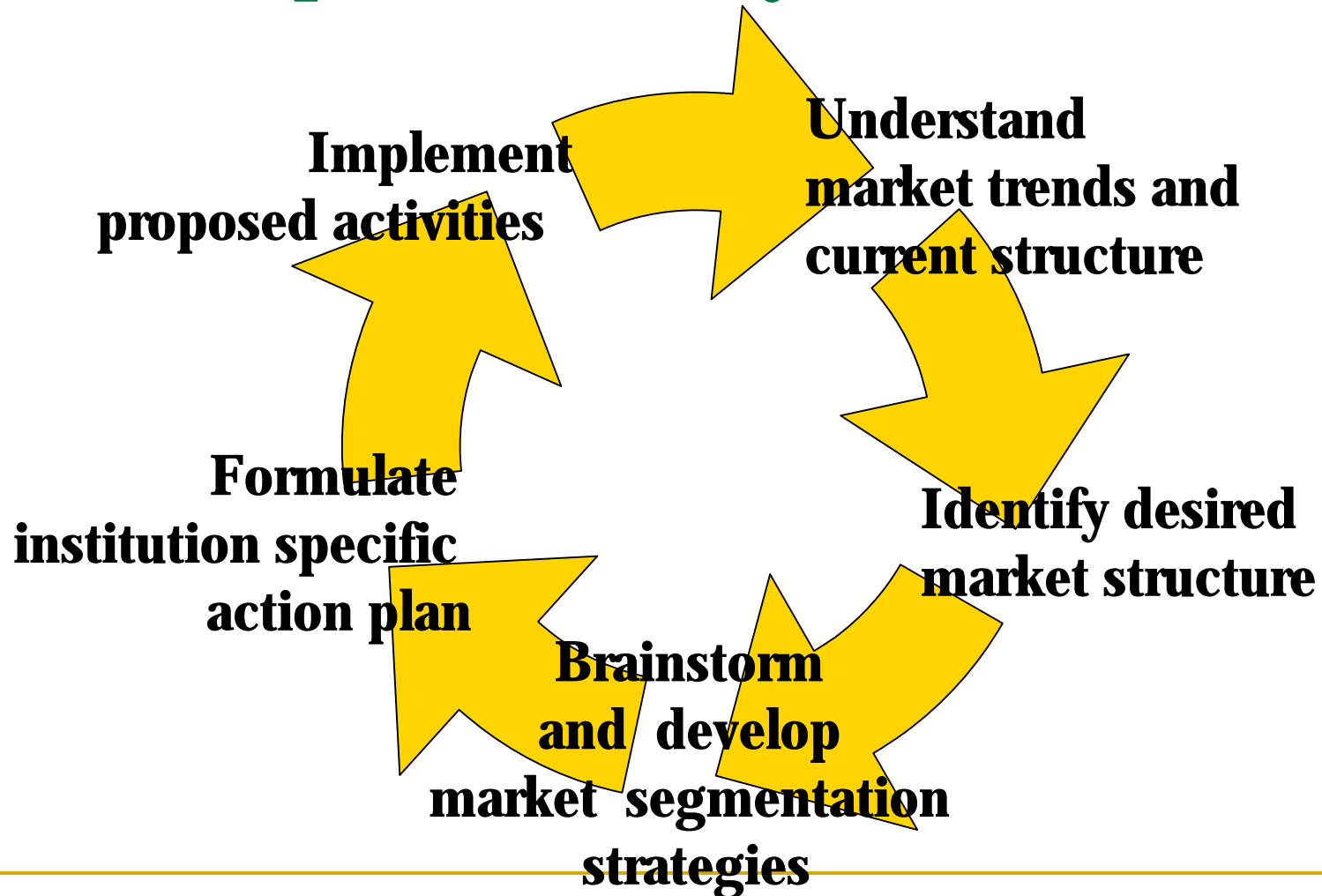
---

# A Methodology for Addressing Contraceptive Security



---

# A Methodology for Addressing Contraceptive Security



---

# Phase 1: Understand market trends



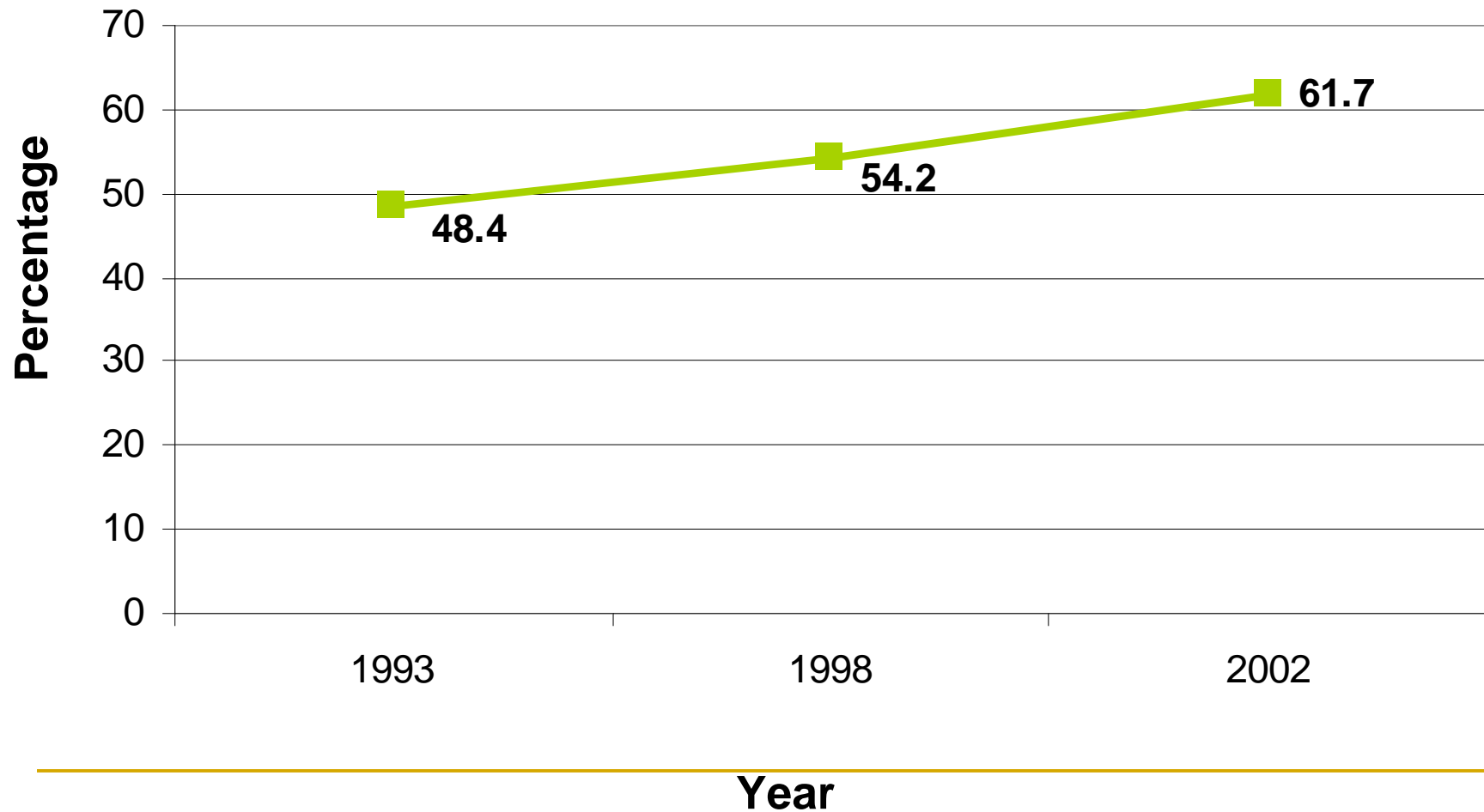
---

# Key Players in family planning

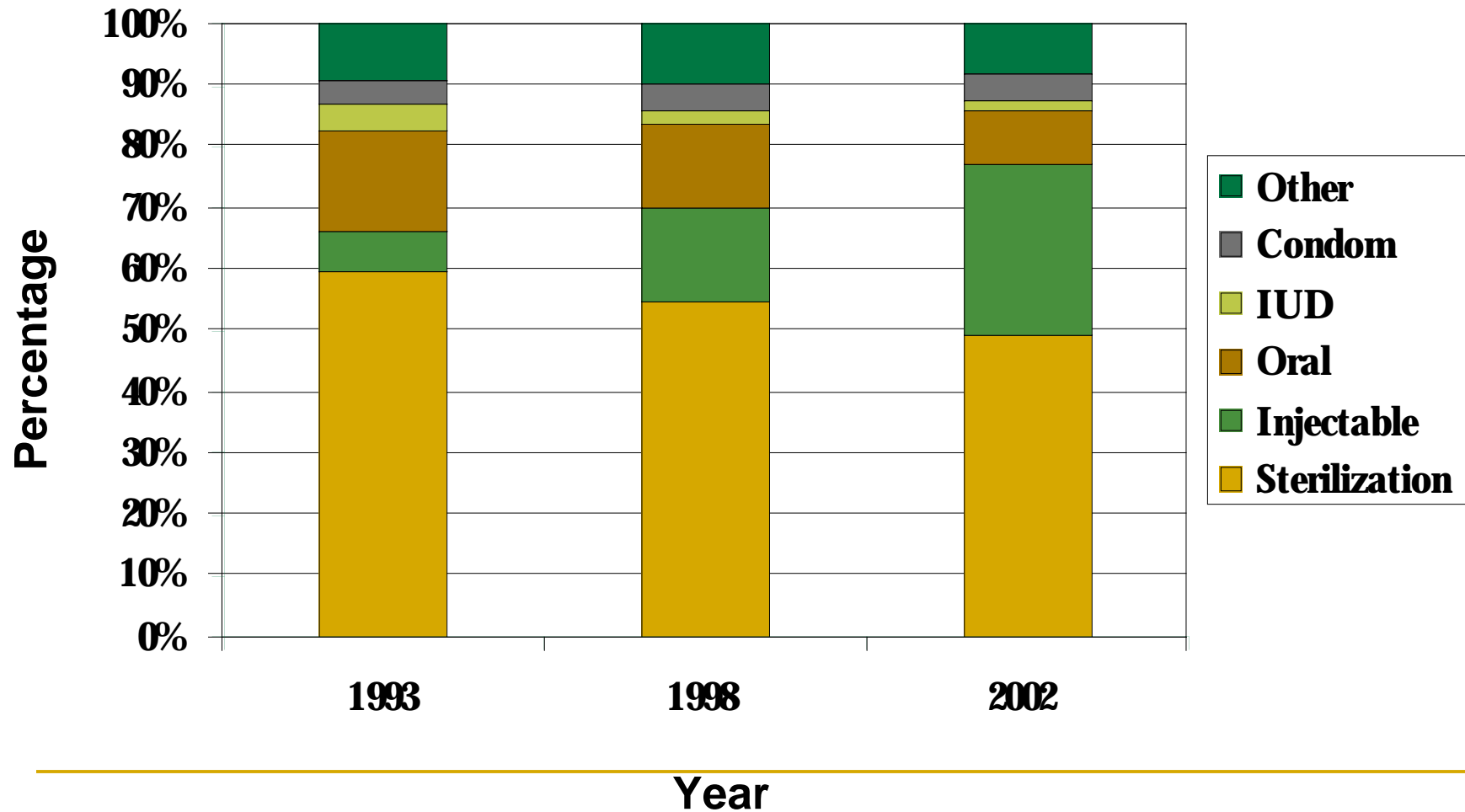
- MSPAS: Ministry of Public Health & Social Assistance (MOH)
  - ISSS: Salvadoran Institute of Social Security
  - ADS: Salvadoran Demographic Association (IPPF affiliate)
  - Commercial sector
    - Commercial pharmacies
    - Private health facilities
-



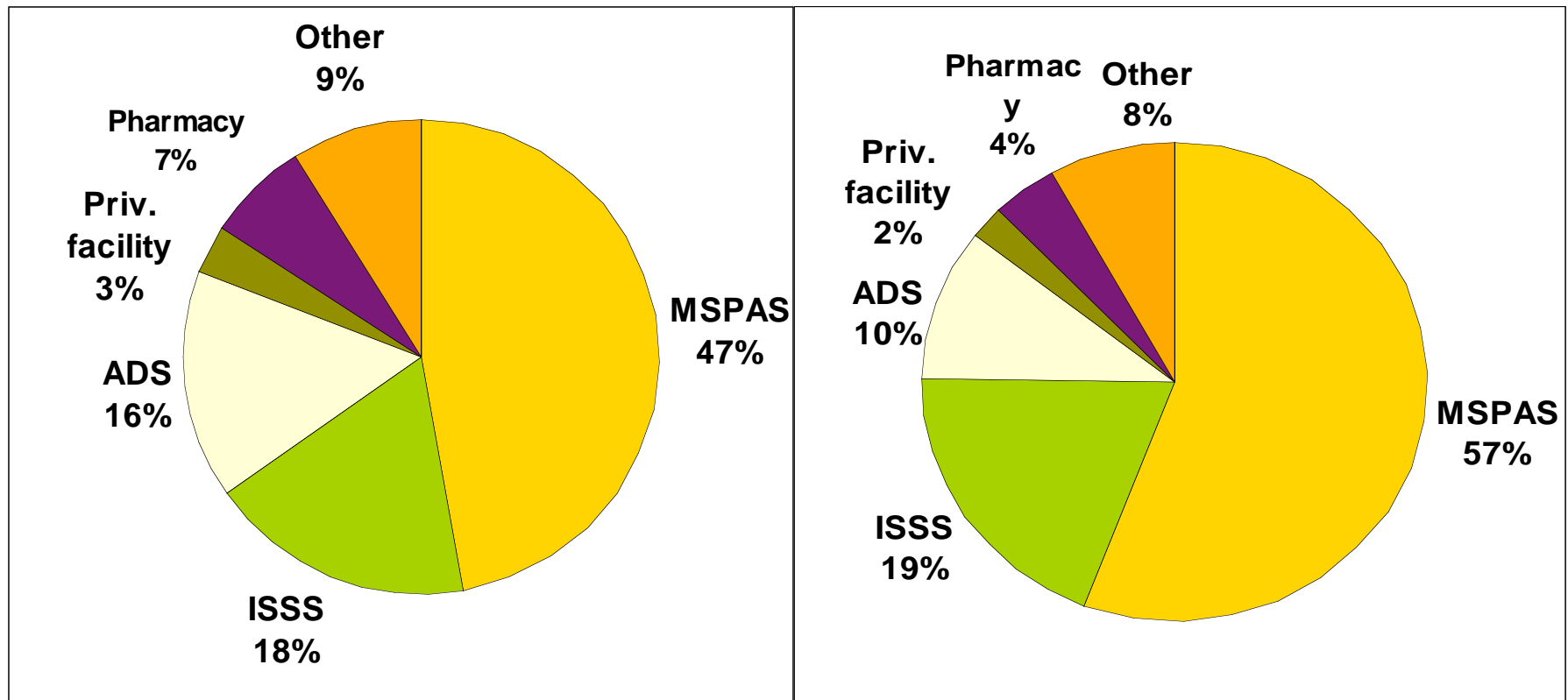
# Trends in Modern Method Use, 1993-2002



# Trends in FP Method Mix, 1993-2002



# Trends in FP Source Mix: 1998 & 2002



1998

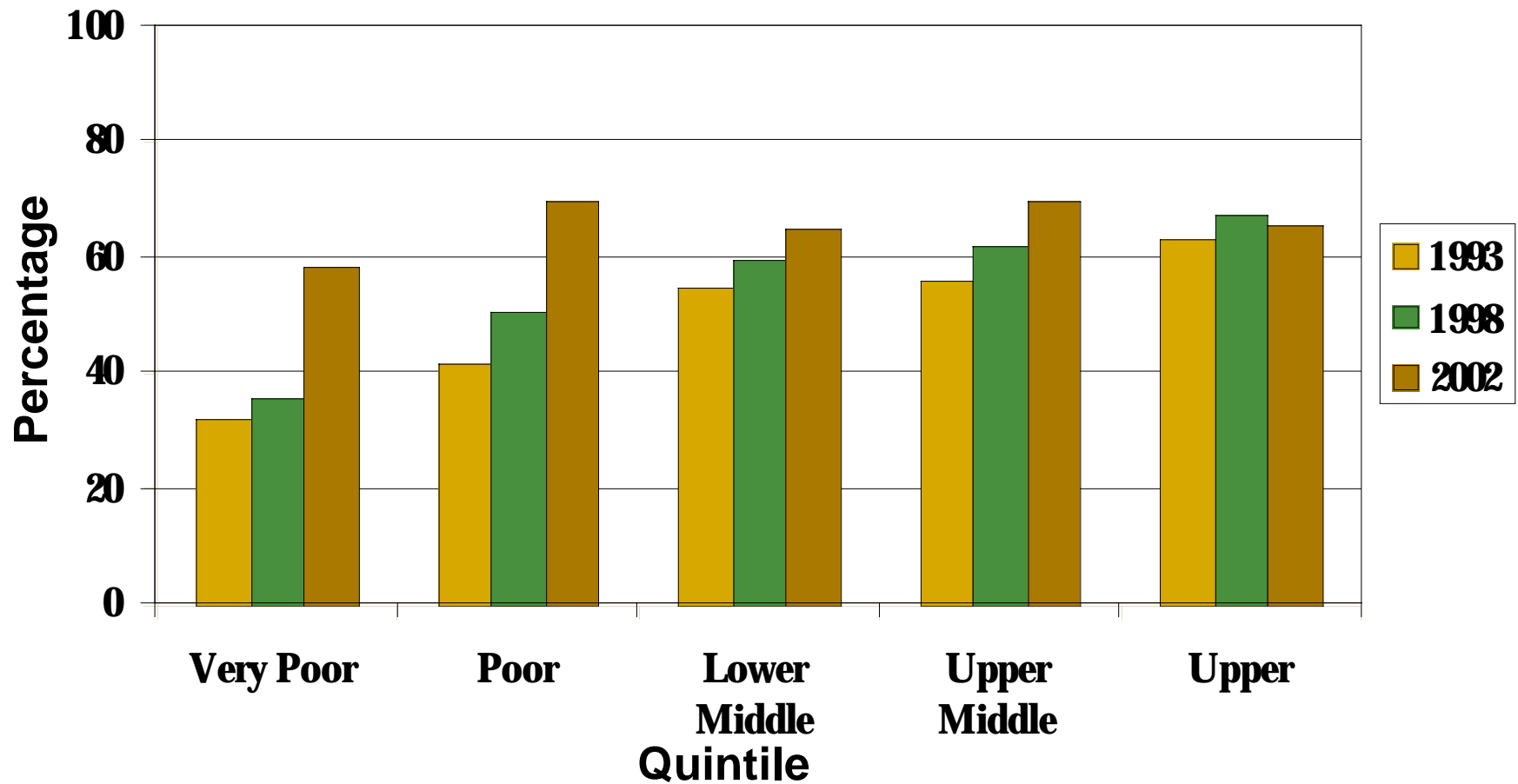
2002

---

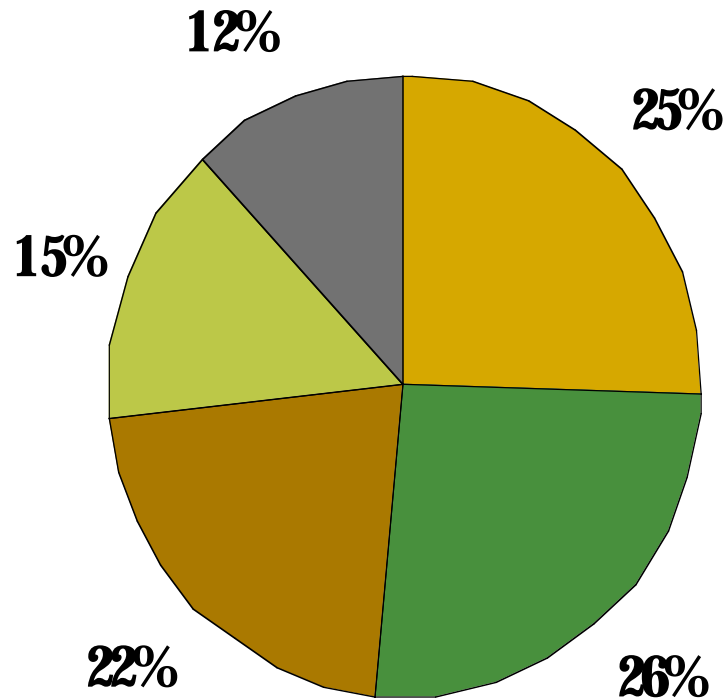
# Market Segmentation and Standard of Living Index (SLI)

- Market segmentation analysis
    - Relationship between SES quintiles and use, method mix and source mix
  - Using SLI to estimate SES quintile
    - Based on household characteristics
    - Factor analysis of household characteristics
    - Population divided into 5 groups (quintiles)
-

# Use of modern methods by quintile, 1993-2002



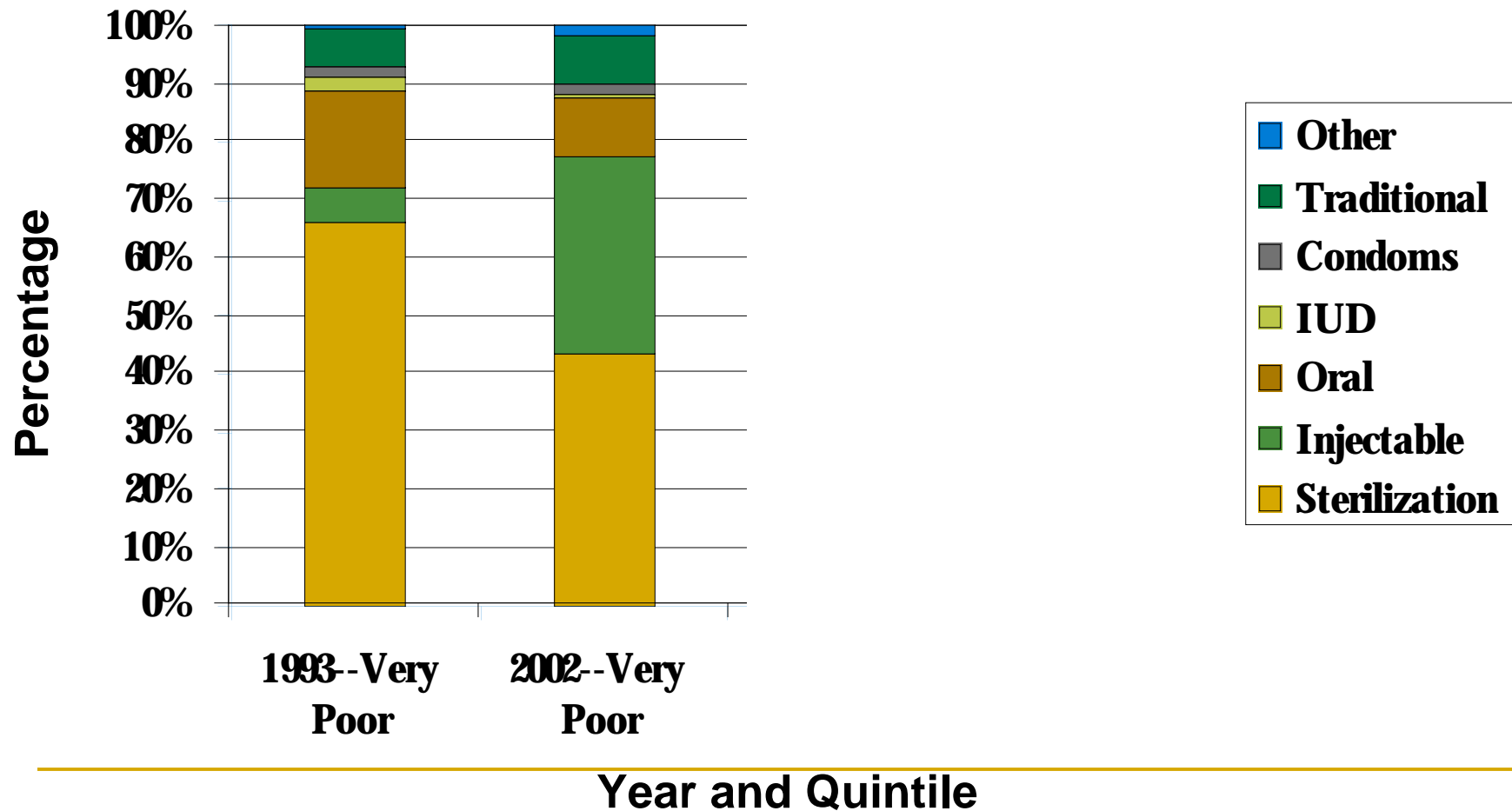
# MOH Client Profile by Quintile, 2002



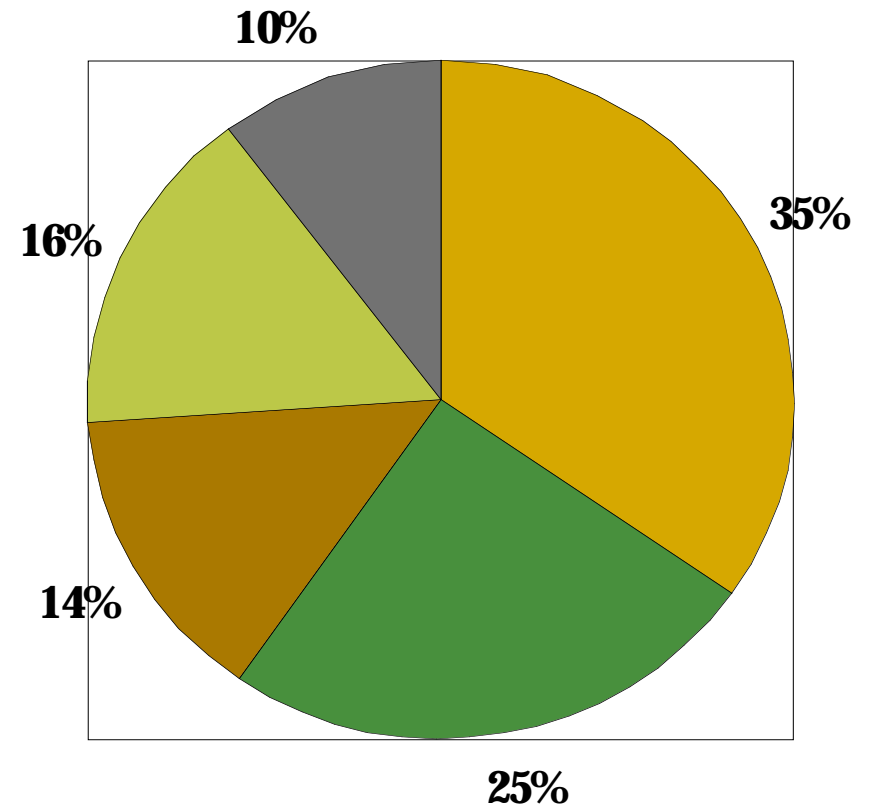
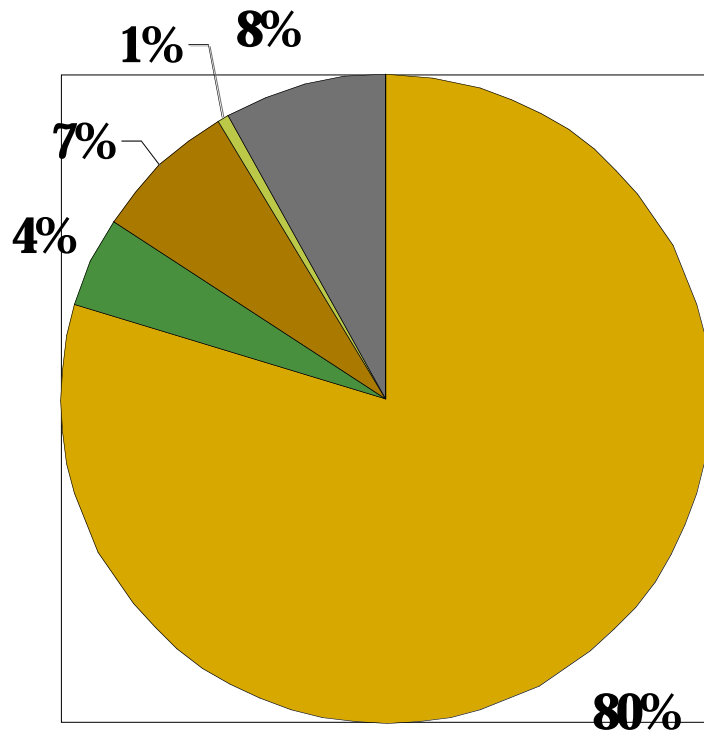
2002

■ Very Poor ■ Poor ■ Lower Middle ■ Upper Middle ■ Upper

# Changes in method mix by SLI quintile (Very Poor & Upper Quintiles), 1993-2002



# Changes in Source Mix by SLI Quintile (Very Poor & Upper Quintiles), 1993-2002



■ MOH ■ ISSS ■ ADS ■ Private ■ Other/DK



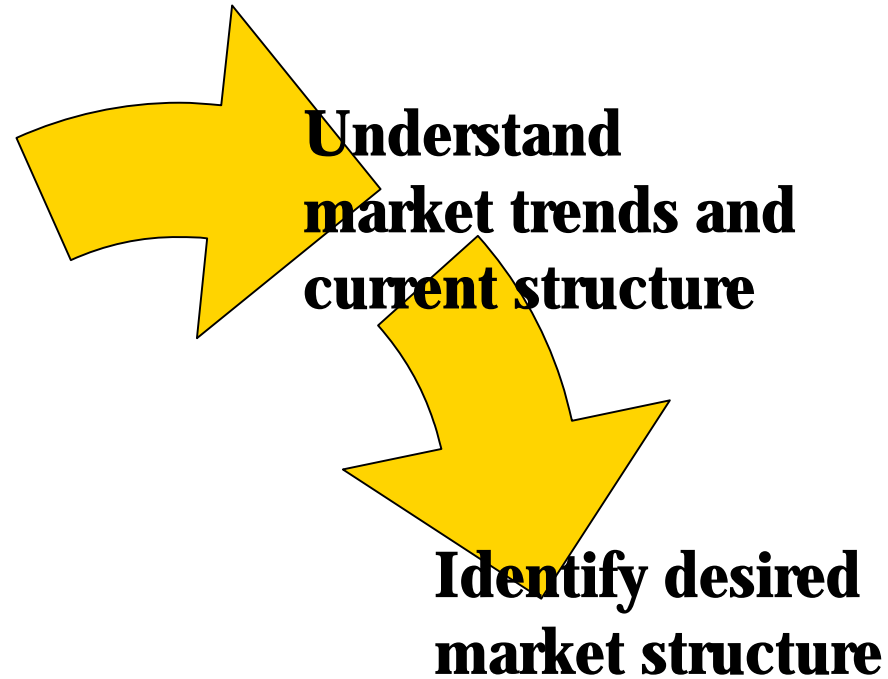
---

# Summary of market segmentation


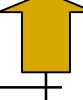

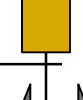


- Modern method use increased among very poor & very poor
    - MINSA is principal source
    - Use of injectables
  - Upper middle and upper quintiles rely on public sector services
-

---





# Phase 2: Develop Desired Market Structure



# Prevalence and Method Mix: 2002 and Proposed for 2010

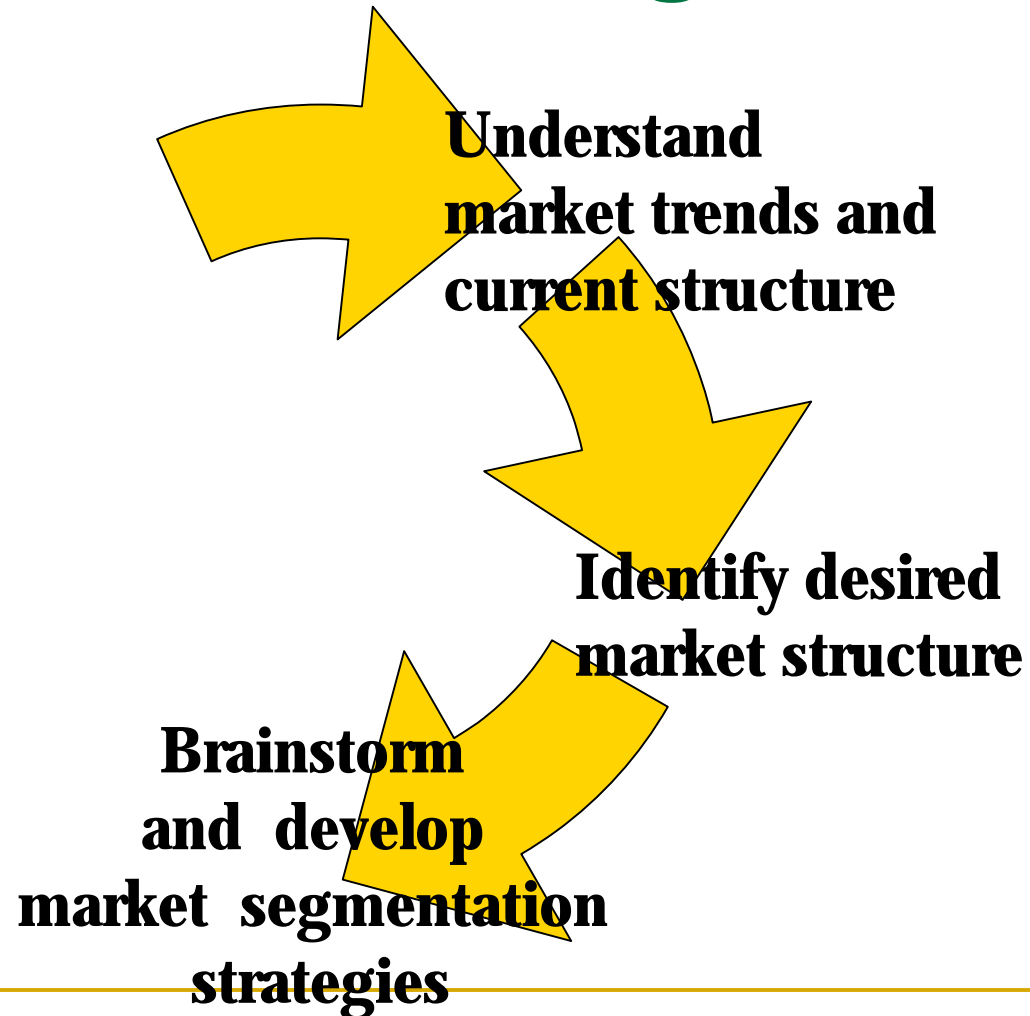
	2002/2003	
<b>Prevalence</b>	<b>67%</b>	
<b>Method</b>		
Sterilization	49%	
Injectables	27	
Oral	9	
Condoms	4	
IUD	2	
Other	10	

# Source Mix: 2002 and Proposed for 2010

Source	2002 (Actual)	
MOH	56%	
ISSS	19%	
ADS	10%	
Commercial	7%	
Other/DK	8%	

---

# Phase 3: Brainstorm and develop market segmentation strategies



---

# General Strategies for Reaching Proposed Structure

- IEC campaigns
  - Resource targeting mechanisms
  - Enhanced services and product offerings
  - Increased access
  - Improved coordination mechanisms
  - Removal of legal/regulatory mechanisms
  - Improved training on IUDs
-

---

# **Strategies for reaching Very Poor and Poor Quintiles with MOH services**

- Target MOH resources for these quintiles
  - Expand access through CBD
-

---

# Strategies for Reaching Lower Middle Quintile through ISSS and private sector

- Increase reliance on ISSS and private sectors
    - Sliding scale for fees
    - ISSS coverage for informal sector
    - Improved services and availability through ISSS
    - ADS (IPPF affiliate) social marketing
-



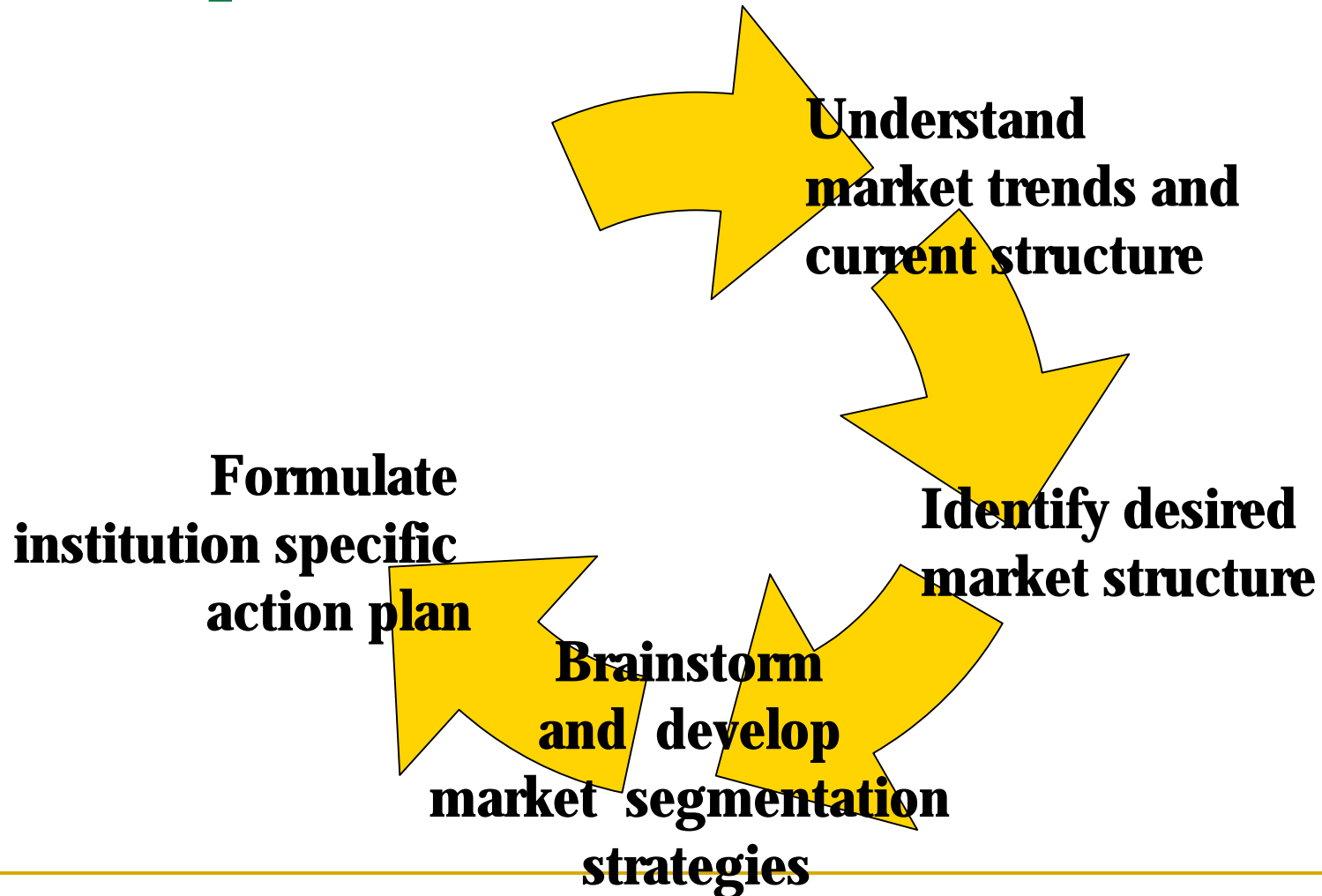
---

# Strategies for increasing reliance on ISSS and private sector among Upper Middle and Upper Quintiles

- Increase reliance on ISSS and private sector
    - Voluntary sliding scale fee for MSPAS
    - Social solidarity campaigns
    - ISSS membership database shared
    - Improved services through ISSS
    - Pharmaceutical advertising
-

---

# Phase 4: Develop institution-specific action plans



---

# Institutional Action Plan: MOH

- Goal: Increase use among two lowest quintiles
    - Free services among lowest two quintiles
    - CBD via local health workers, mobile clinics, NGOs
  - Decreasing use among wealthier quintiles
    - Social solidarity campaigns (MSPAS for poor)
    - Mechanisms for institutional coordination
-

---

# Institutional Action Plans: Asociacion Demografica Salvadorena

- Goal: Redefine consumer profile
    - Expand products and services
    - Eliminate idea that ADS services are free
    - Market survey about middle and high quintiles
    - Plan to commercialize products and services
  - Goal: Increase use among middle and higher quintiles
    - Improve quality of services—more client-centered
    - Expand range of methods offered
-

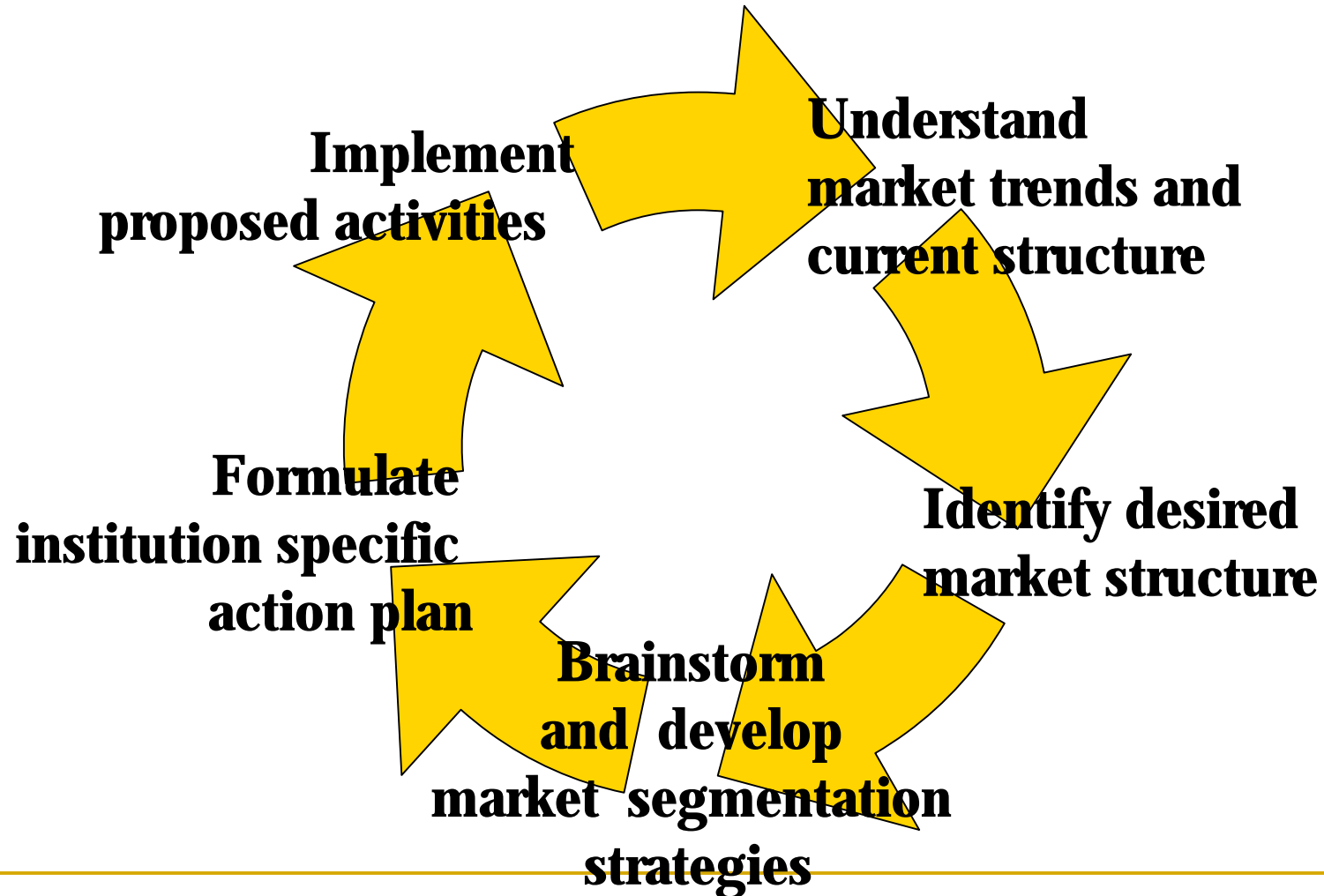
---

# Strategies for increasing involvement of commercial sector

- Commercial sector round table meeting
    - Hospitals
    - Private physicians
    - Commercial pharmacies
    - Pharmaceutical companies
  - Follow-up public-private round table meeting
  - Purpose: To discuss existing barriers and identify opportunities & strategies for commercial sector involvement
-

---

# Phase 5: Implement proposed activities



---

# Planning for Contraceptive Security in El Salvador:

There is a role for the commercial sector

- Public sector cannot afford to serve everyone
  - Other FP providers (MSPAS, ISSS, ADS) see its important role in CS;
  - MSPAS willing to assist commercial sector in carving out market niche.
  - Activities to involve commercial sector must now be implemented to ensure CS
-