



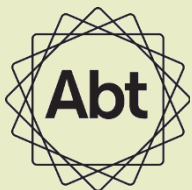
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Global Access Programs and Local Supply Chains for LARC Commodities: Is everyone being served?

Françoise Armand
Private Sector Advisor
Abt Associates

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Abt Associates leads the project in collaboration with
Banyan Global
Jhpiego
Marie Stopes International
Monitor Group
O'Hanlon Health Consulting

Key aspects of LARC supply

- Manufacturing
- Procurement
- Supply chains
- Service delivery
- Financing

Global IUD supply

- Copper T IUD:
 - Most widely used IUD, about 20 models manufactured worldwide
 - UNFPA prequalified TCu380A suppliers include four Indian and one Brazilian manufacturer (2014)

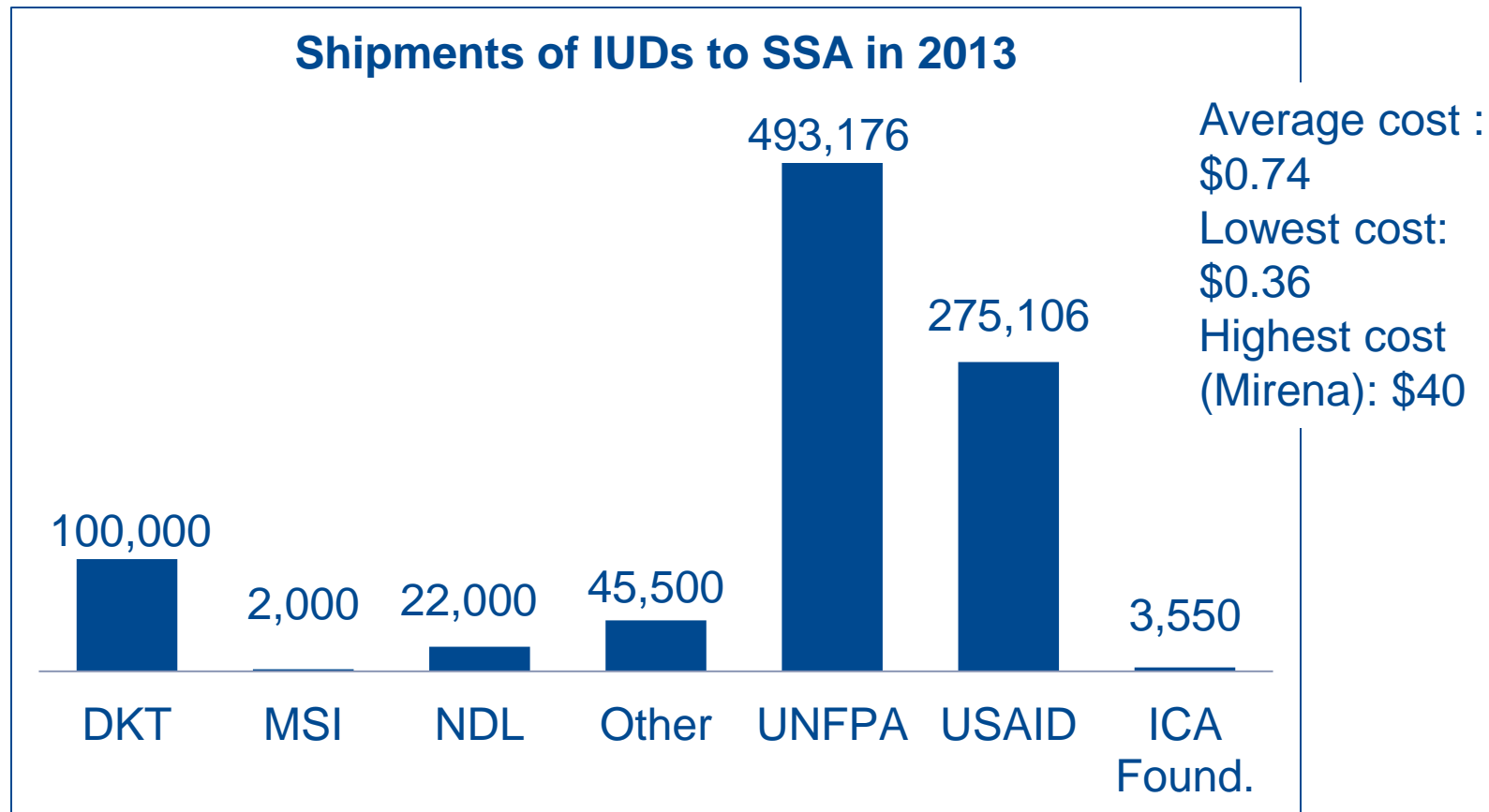


Global IUD supply

- Levonorgestrel IUS (Mirena)
 - Manufactured by Bayer Healthcare Pharmaceuticals
 - Available in 120 countries
 - Since 2003, available through the International Contraceptive Access Foundation donation program

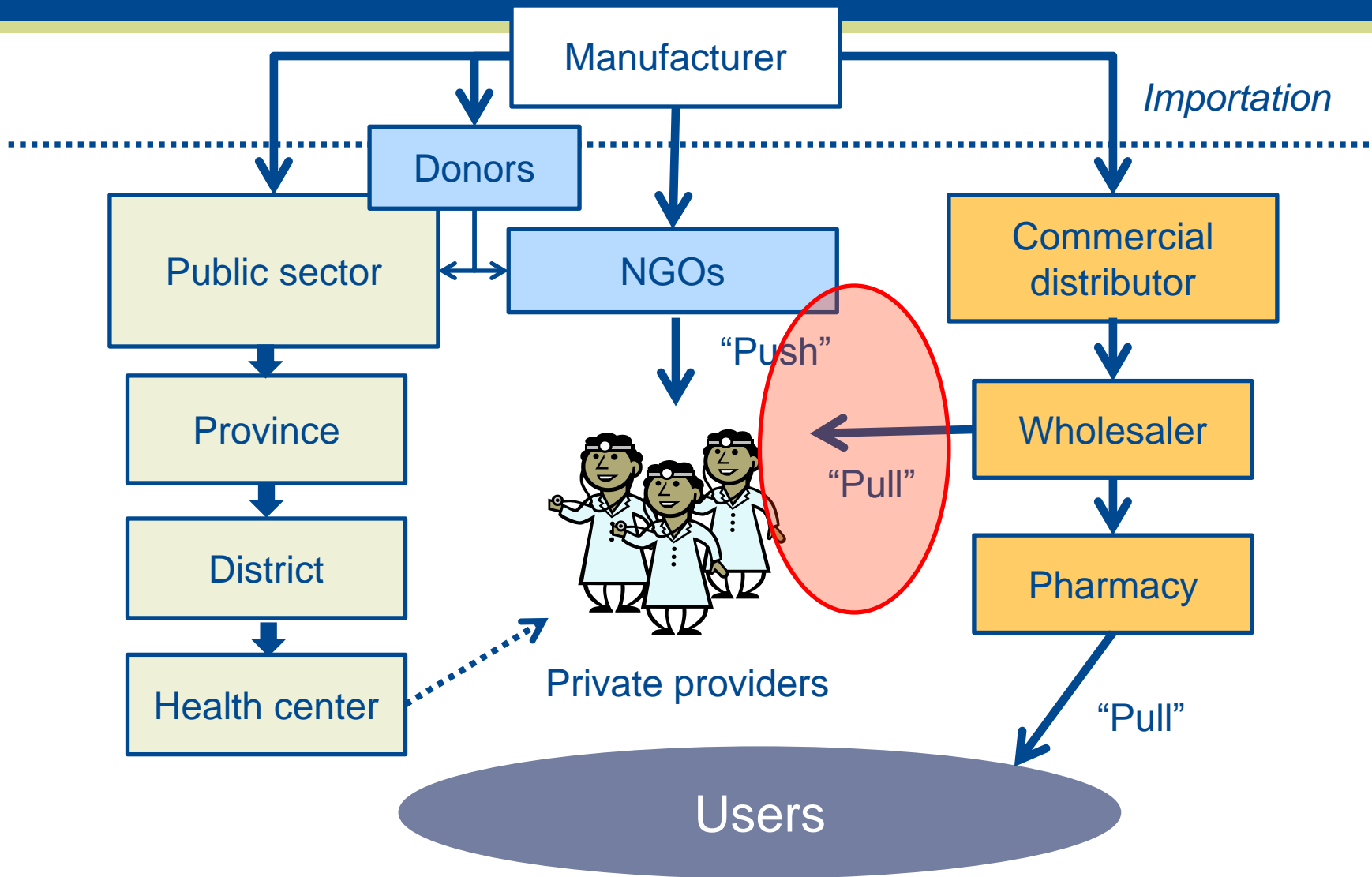


IUD supply in sub-Saharan Africa

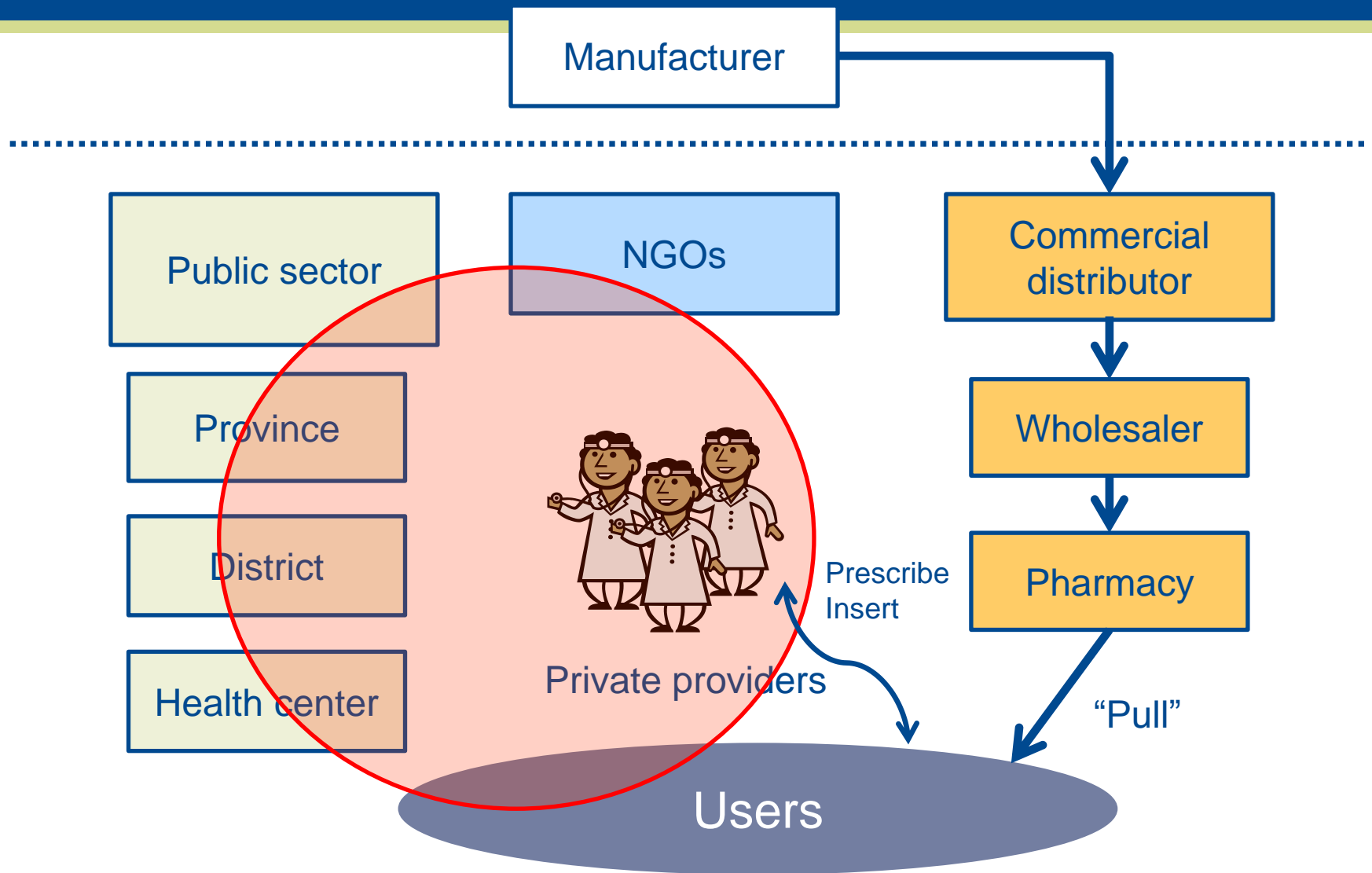


Source: RHInterchange

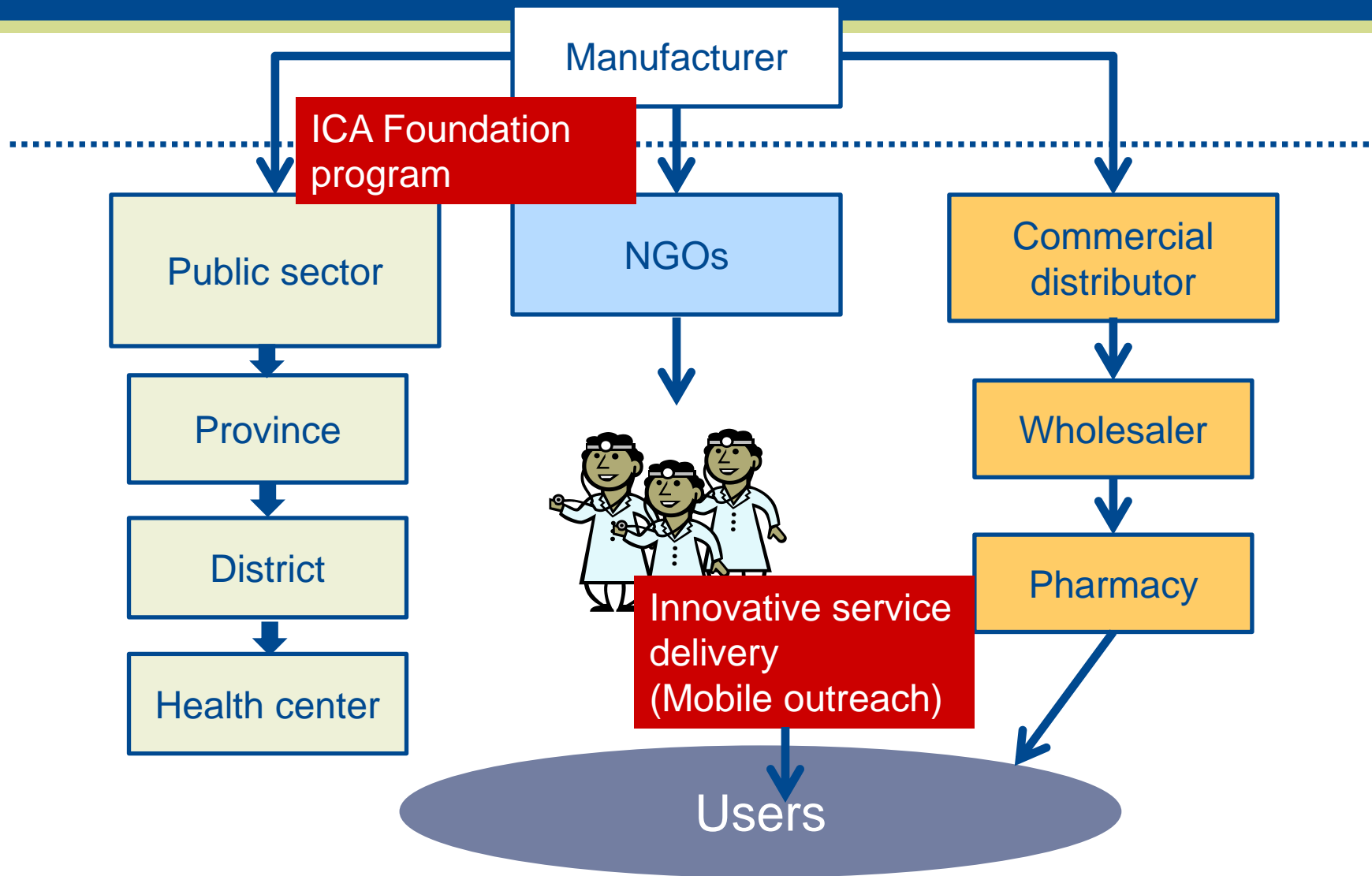
Supply of IUDs in low-income countries



Supply of Mirena in low-income countries



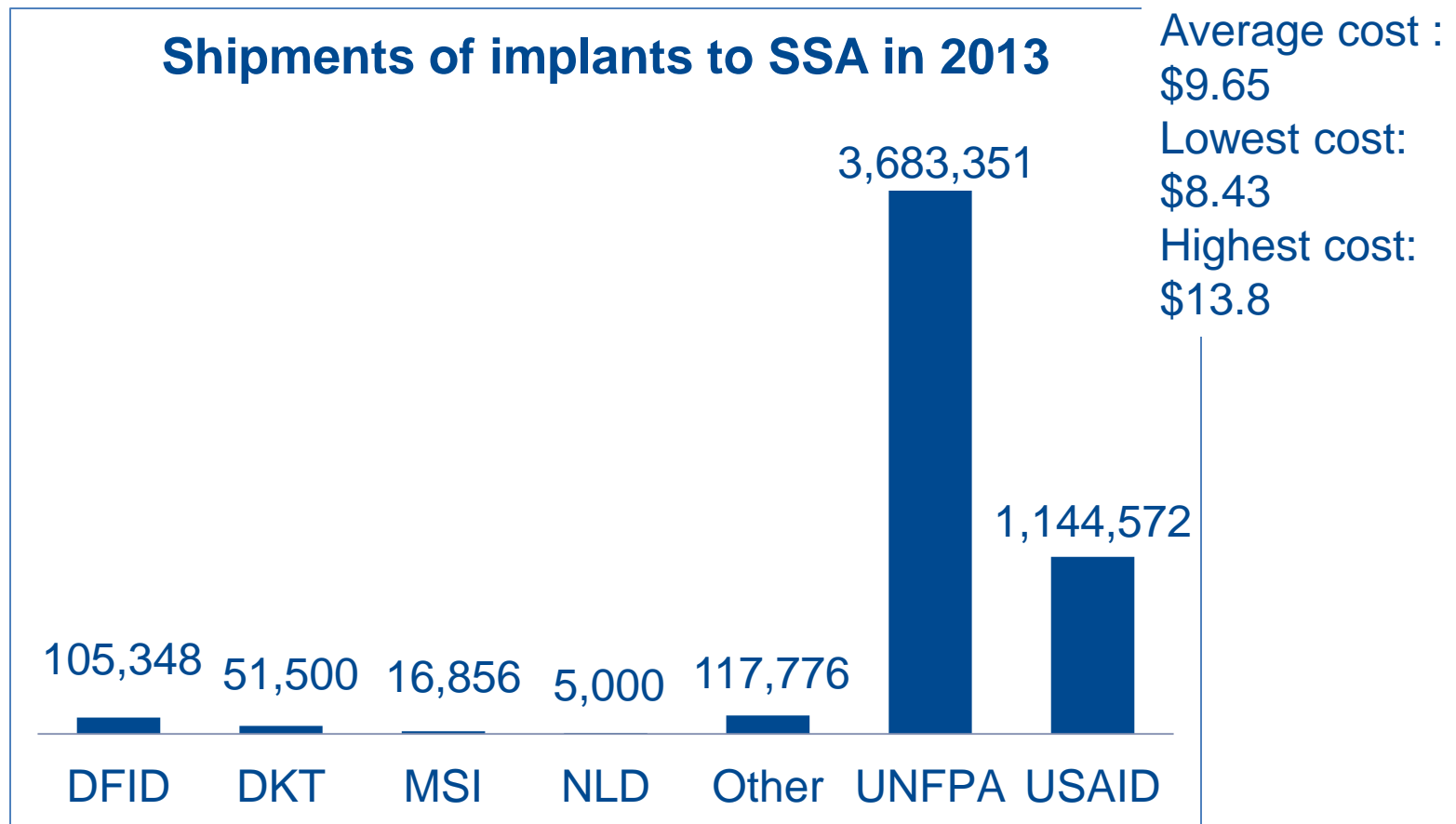
Supply of Mirena in low-income countries



Global access programs for implants

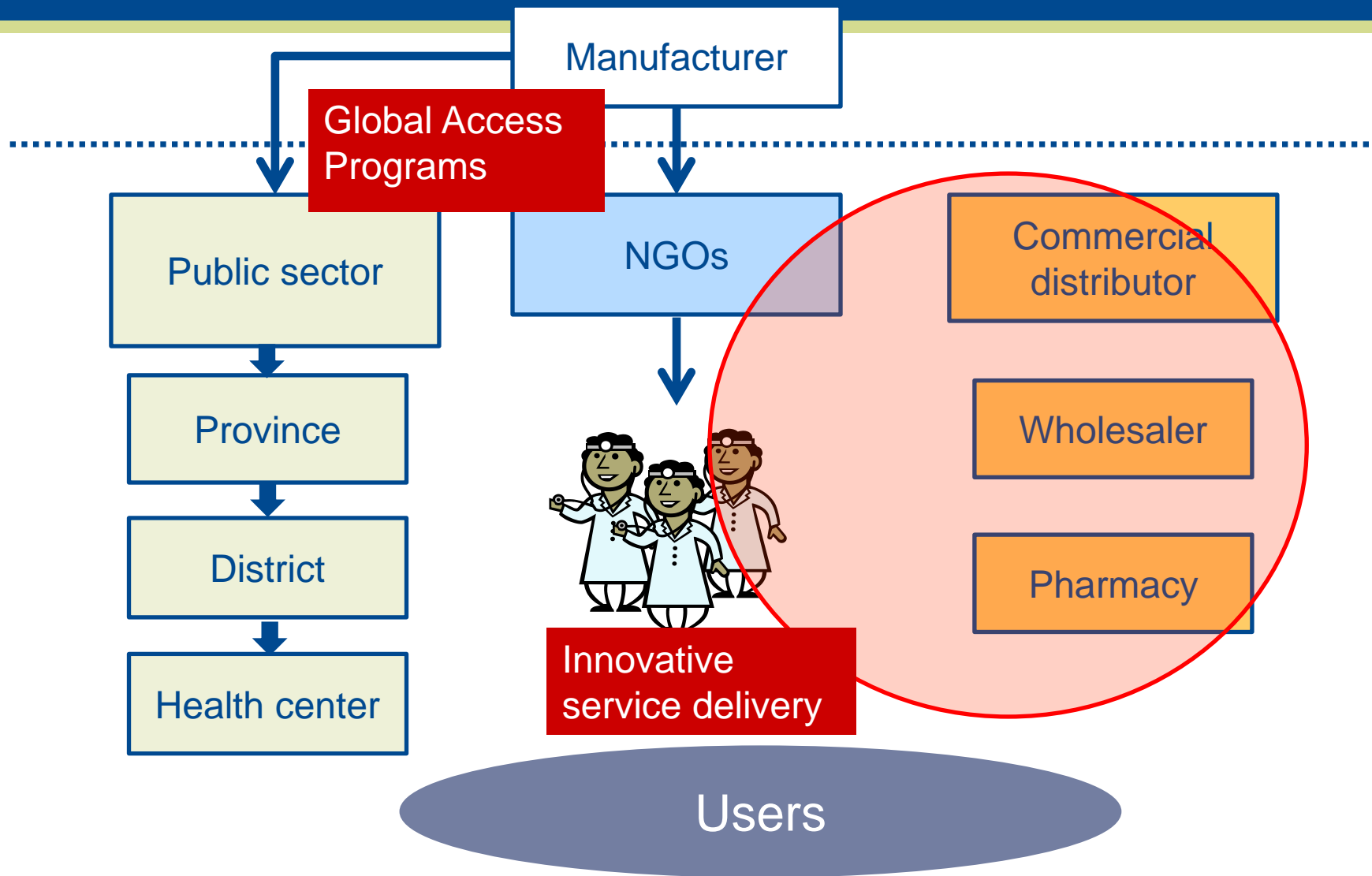
Product	Program	Price
Jadelle 2-rod Levonorgestrel implant	Jadelle Access Program: Partnership between Bayer HealthCare AG, BMGF, CHAI, governments (Norway, UK, US, Sweden), UNFPA, and Children's Investment Fund Foundation.	Unit price for public and NGO sector reduced in 2013 from \$18 to \$8.50
Sino Implant 2-rod Levonorgestrel implant	Partnership between FHI360, the BMGF and Shanghai Dahua Pharmaceuticals.	Price agreements with public and NGO sectors: Approximately \$8/unit
Implanon Implanon NXT Single-rod Etonorgestrel implant	Implanon® Access Initiative (IAI) between Merck/MSD and RHSC. 2013 volume guarantee agreement between MSD and the BMGF, supported by coalition of partners.	Price reduced three times from \$20 to \$8.50 since 2011.

Implant supply in sub-Saharan Africa



Source: RHInterchange

Supply of implants in low-income countries



Impact on country availability

- Global access programs have transformed market dynamics for LARC
- Implants are now more accessible to the public and NGO sectors
- Prices are lower for partner organizations, affiliated providers and beneficiaries
- But implants are poorly represented in the commercial sector in global access countries

Questions for discussion

- How can independent private providers and facilities access commodities?
- How can we ensure that all population groups are served by global and local supply systems?
- Which sectors should serve whom (total market approach)?



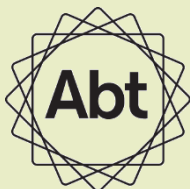
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Thank you!

Francoise_armand@abtassoc.com

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