

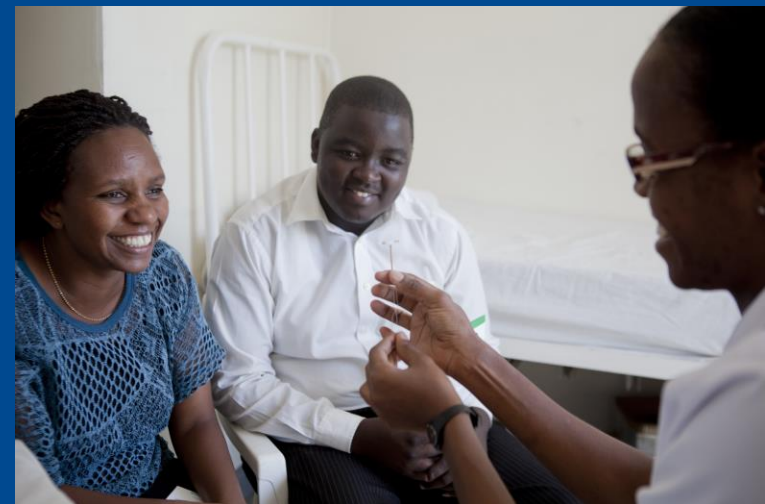


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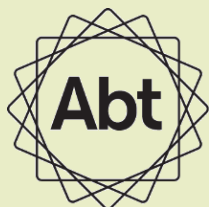
Strengthening Health Outcomes
through the Private Sector

Wealth, Long-Acting Contraception, and the Private Sector



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Abt Associates leads the project in collaboration with

Banyan Global

Jhpiego

Marie Stopes International

Monitor Group

O'Hanlon Health Consulting

Background

- Programmatic experience indicates that lower and middle income couples cannot afford LAPMs in the private sector
- Study to test whether or not this is true across countries

Why do we care about the Private Sector?

- Public sector and NGOs cannot meet all unmet need alone
- To achieve our goals requires expanding all channels
- Private sector has large presence in many countries
- But...affordability may be an issue

Research Questions

Among women using modern FP methods, what is the relationship between household wealth and:

1. Use of LAPM -- instead of SAM?
2. Obtaining LAPMs from the private sector -- instead of the public sector? (among LAPM users)

Data and Methods

- Data

- We use the most recent DHS survey from 14 countries (out of a sample of more than 40). Criteria to be included:
 - Most recent survey conducted after 2005
 - At least 5% of the current CPR must be from LAPM users
 - At least 150 observations with data on source of methods
- We exclude the not-for-profit sector from our analysis.

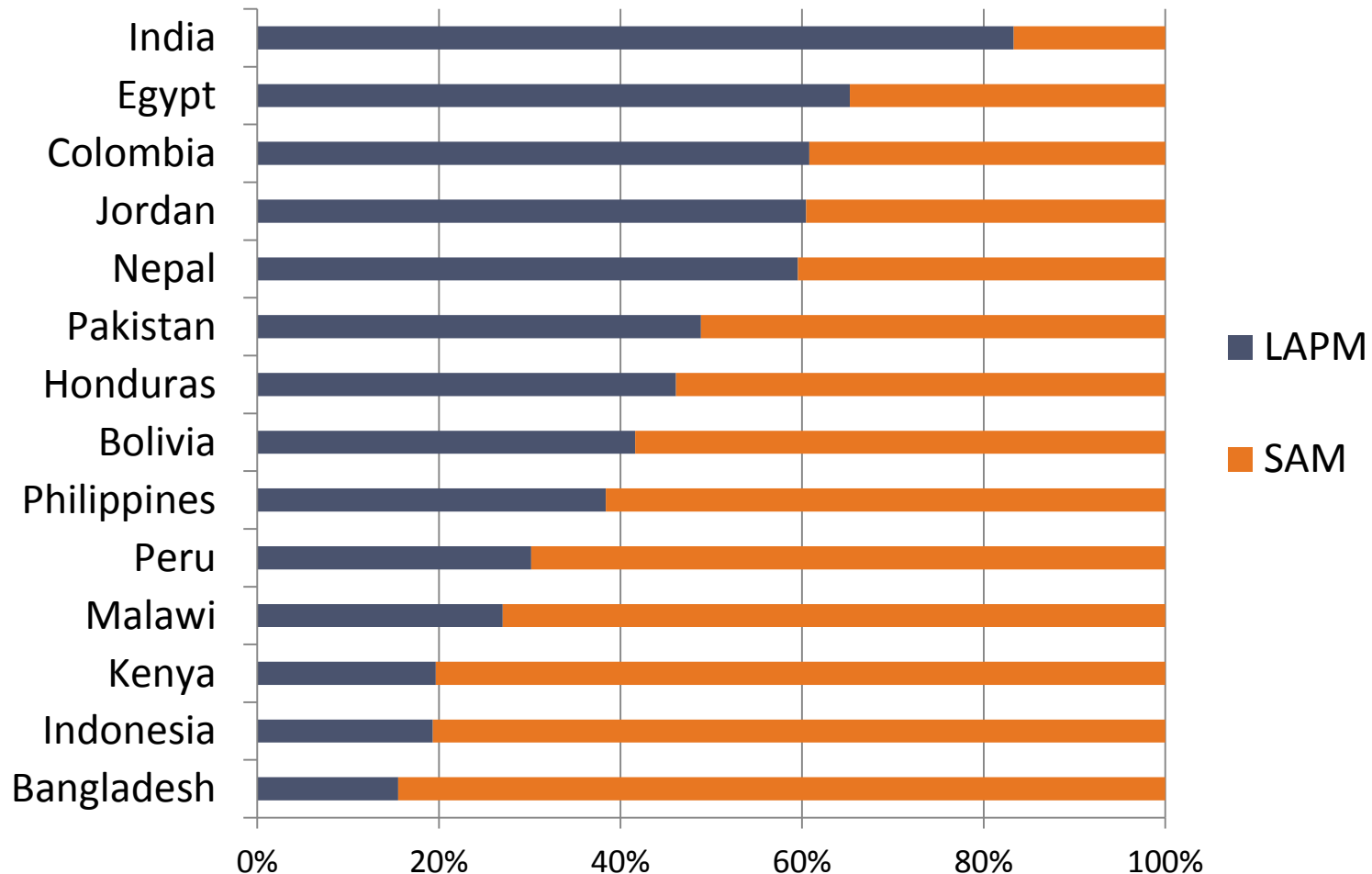
- Methods

- Logistic multivariate regression controlling for parity, age, education, residence, marital status, etc.

Research Question 1

1. What is the relationship between household wealth and use of LAPM – instead of SAM?

Method mix varies across our sample of 14 countries



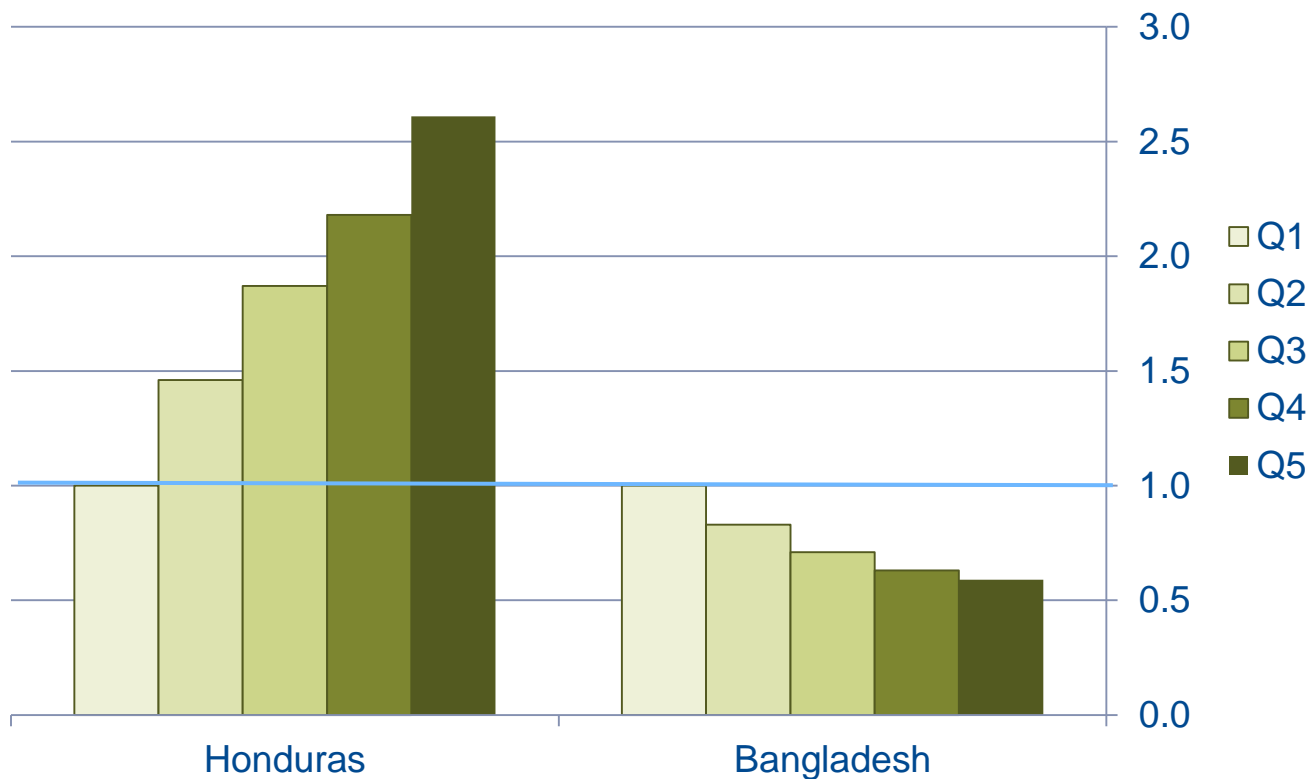
Results RQ1: Use of LAPM increases by wealth quintile in most countries

Country	Adjusted odds ratios				
	Q1	Q2	Q3	Q4	Q5
Bolivia	1.00	1.71*	2.52*	3.43*	4.29*
Peru	1.00	1.63*	2.18*	3.20*	3.60*
Honduras	1.00	1.46*	1.87*	2.18*	2.61*
Nepal	1.00	1.50*	1.70*	2.18*	2.02*
Colombia	1.00	1.47*	1.61*	2.03*	2.01*
Egypt	1.00	1.22*	1.41*	1.89*	1.97*
Indonesia	1.00	1.18+	1.20+	1.24*	1.73*
Jordan	1.00	1.28+	1.36*	1.61*	1.51*
Kenya	1.00	1.27	1.44	1.80+	2.73*
Malawi	1.00	1.17	1.29+	1.67*	2.27*
Philippines	1.00	1.18	1.17	1.17	1.28
Bangladesh	1.00	0.83+	0.71*	0.63*	0.59*
India	1.00	0.88	0.85+	0.80*	0.58*
Pakistan	1.00	0.61+	0.77	0.63+	0.81

+ p<0.05, * p<0.01

Results RQ1: Two main patterns on use of LAPM and wealth

Odd ratios: Use of LAPM for each quintile



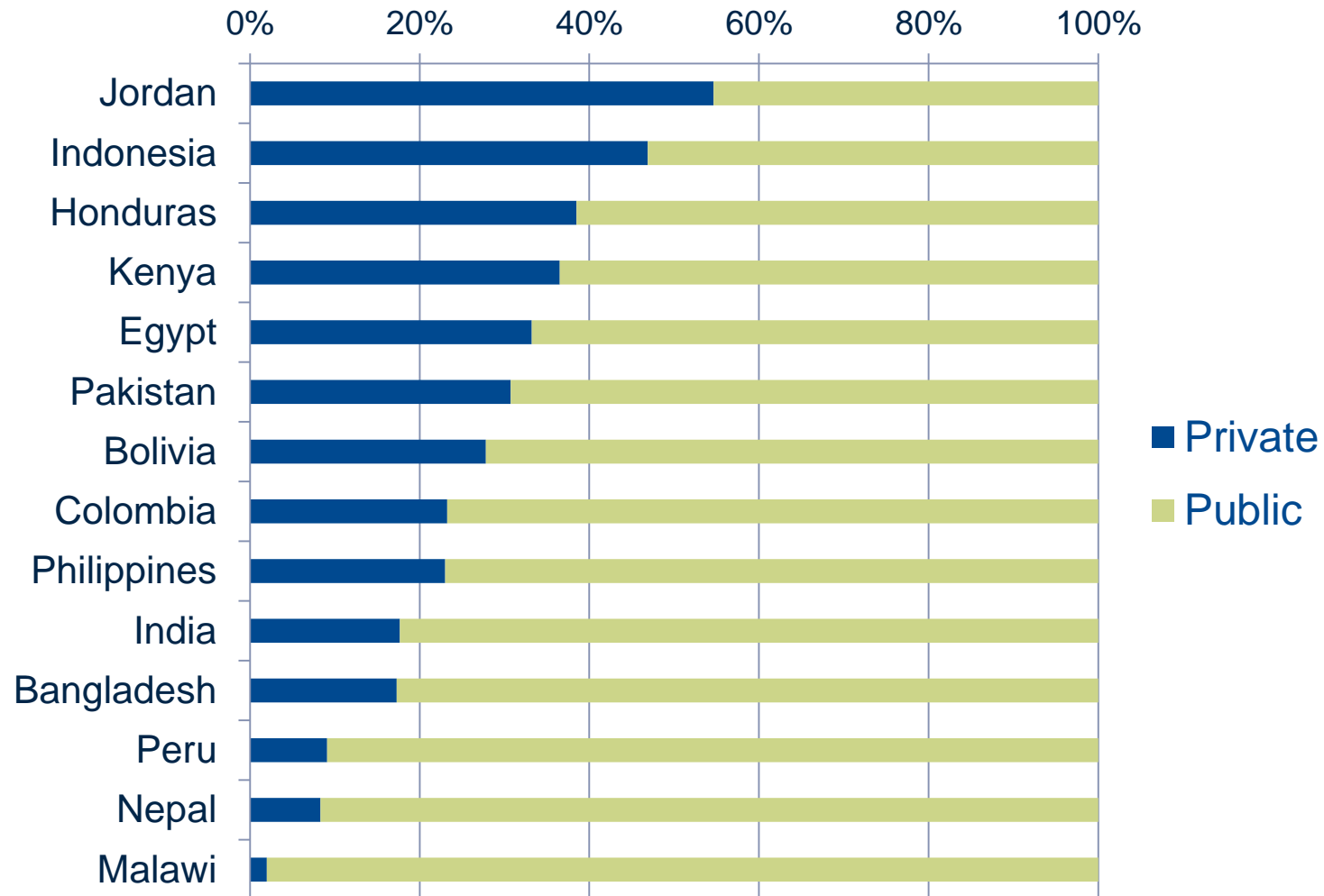
Research Question 1: Findings

- Overall, wealthier women are more likely than poorer women to use LAPMs
- But in South Asian countries, the relationship is the opposite: wealthier women are more likely than poorer women to use SAMs

Research Question 2

2. Among women using LAPM, what is the relationship between household wealth and obtaining LAPMs from the private sector – instead of the public sector?

In most countries, majority of women rely on public sector for LAPM

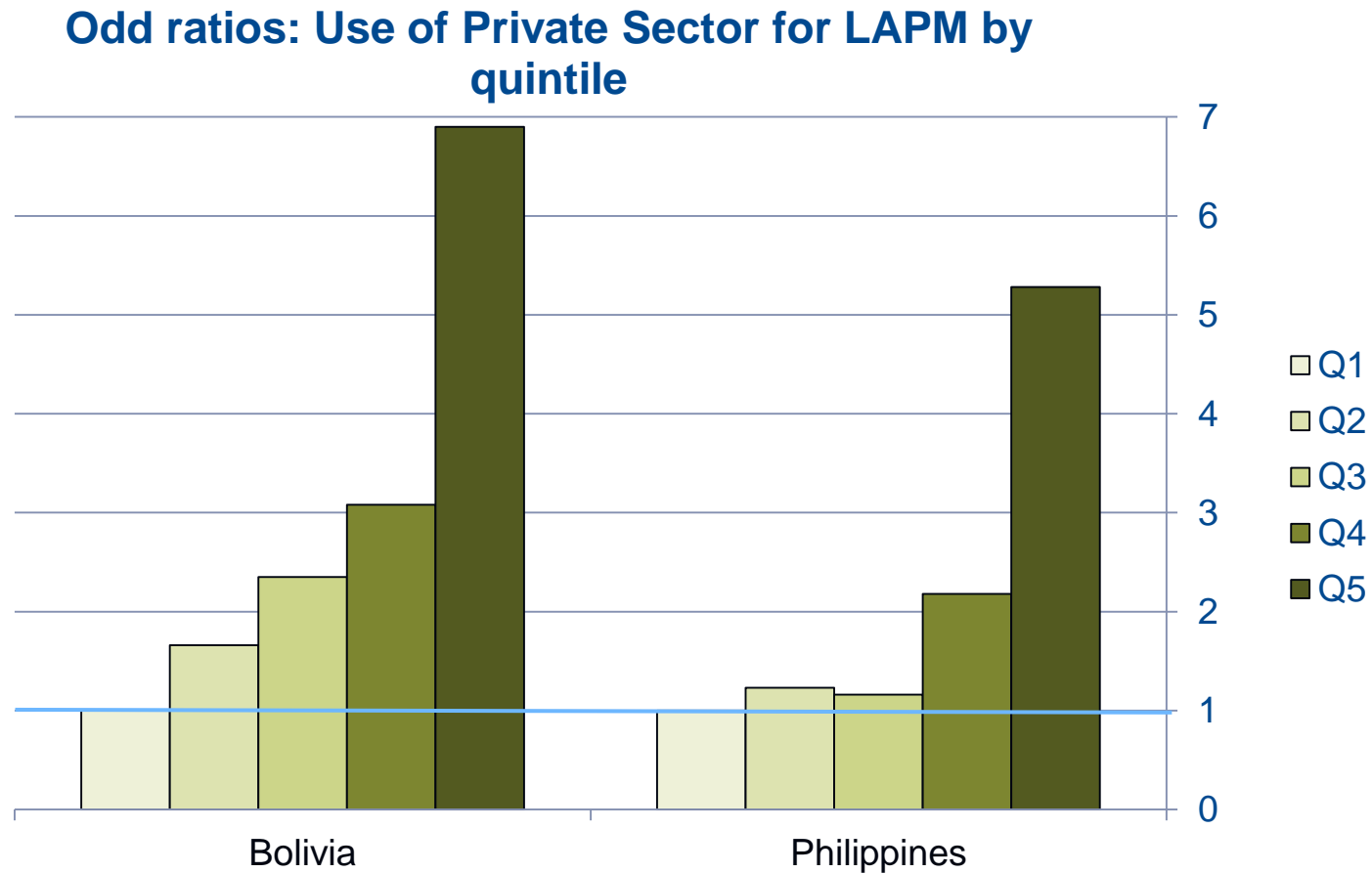


Results RQ2: Use of Private Sector for LAPMs increases by wealth quintile

Country	Adjusted odds ratios				
	Q1	Q2	Q3	Q4	Q5
India	1.00	1.80*	2.54*	3.85*	7.47*
Egypt	1.00	1.37+	1.59*	2.09*	3.61*
Honduras	1.00	1.37+	1.83*	2.05*	2.94*
Colombia	1.00	1.28*	1.76*	2.24*	2.51*
Bolivia	1.00	1.66	2.35+	3.08*	6.96*
Bangladesh	1.00	1.28	1.99+	3.08*	6.25*
Pakistan	1.00	1.59	2.49*	2.87*	5.45*
Peru	1.00	1.44	2.45	4.96*	10.84*
Philippines	1.00	1.23	1.16	2.18+	5.28*
Indonesia	1.00	1.15	1.24	1.80*	3.80*
Jordan	1.00	1.26	1.23	1.64*	2.27*
Nepal	1.00	0.70	1.16	0.99	2.68*
Malawi	1.00	0.50	0.42	1.42	3.09
Kenya	1.00	0.72	0.70	0.99	1.28

+ p<0.05, * p<0.01

Results RQ2: Two different patterns on wealth and use of private sector for LAPM

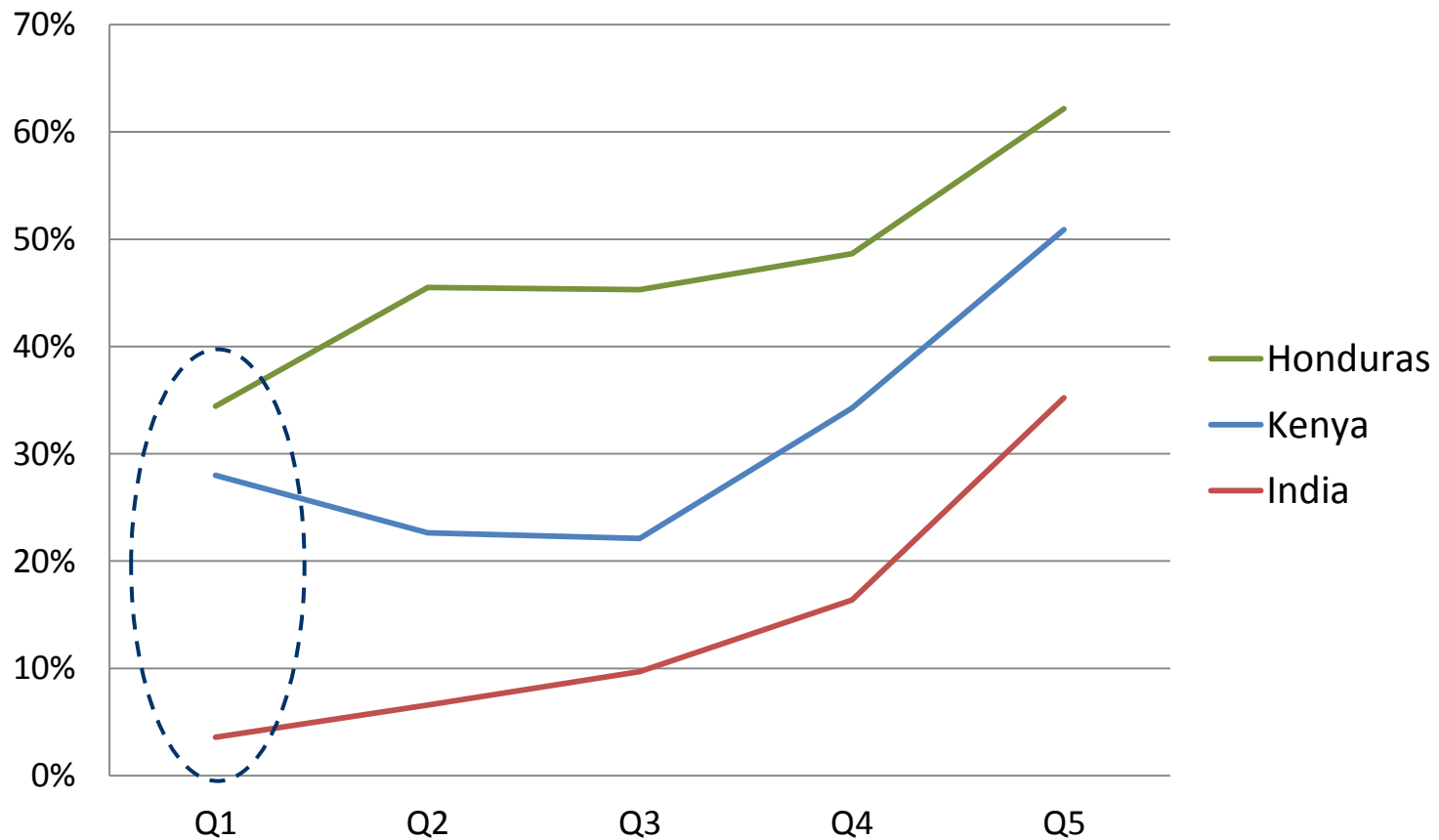


Research Question 2: Findings

- Among LAPM users, wealthier women are more likely than poorer women to obtain their method from the private sector (instead of the public sector).

Additional findings—Use of Private Sector by Lowest Quintile varies by country

Percentage of women using LAPM obtained through private sector, by wealth quintile



Key findings and implications

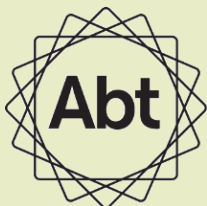
- Wealthier women are more likely than poorer women to:
 - use LAPMs (except in South Asia)
 - → Improve poorer women's access to LAPMs
 - use the private sector for LAPMs
 - → Reduce financial barriers to LAPMs in the private sector
- In several countries, a substantial proportion of poorer women rely on the private sector for LAPMs: know your context!



Comments and suggestions:

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