



Reproductive Health
Supplies Coalition

Market Development Approaches Working Group WORKPLAN 2011-12

Market Development Approaches Working Group: Objectives

The Market Development Approaches Working Group [MDAWG] is one of the three Working Groups of the Reproductive Health Supplies Coalition [RHSC], a global partnership of public, private, and non-governmental organizations [NGOs] dedicated to ensuring that all people in low- and middle-income [LMI] countries can access and use affordable, high-quality supplies to ensure their better reproductive health. The MDAWG maintains an annual workplan, describing its objectives and workstreams (activities) for the coming year. The Working Group's objectives are pursued through workstreams, which are led by MDAWG members whose organizations are members of the RHSC. Further information on the MDAWG, its workplan, and its workstreams can be found on the RHSC MDAWG webpage: <http://www.rhsupplies.org/working-groups/market-development-approaches.html>

Objectives: The MDA WG contributes to the goal of RH supply security through a greater focus on the "total market" which, by definition, includes the private and commercial sectors. It seeks to bring about changes that allow for greater movement "up" the value chain, from subsidized to non-subsidized products. It aims to aid overall market growth and increase equity through better targeting of subsidies and wider private sector involvement, and improved financial sustainability through optimal resource allocation of public funds.

The **goal** of the MDA WG is: to improve access to and choice of RH supplies for low and moderate income consumers through the public, private, and commercial sectors.

The **purpose** of the MDA WG is: to ensure that country level teams and implementers are able to access models, tools, and approaches that facilitate the development of market approaches that meet the SRH needs of lower income consumers.

Projected results:

- Models, tools, and approaches that facilitate SRH supply market development shared and disseminated.
- Awareness raised, synergies exploited, and duplication avoided among Coalition members with regard to MDAs.
- Supportive environment for SRH supply market development strengthened.

Anticipated outcomes:

- Increased Efficiency – MDA interventions will serve to move people “up” the value chain from heavily subsidized products to wholly commercial and non-subsidized products.
 - Increased Effectiveness – MDA interventions will result in overall market growth.
 - Increased Equity – The success of MDA interventions relies on better targeting of subsidies by the public sector, donors, NGOs, and social marketing organizations).
 - Increased Private sector composition.
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Market Development Approaches Working Group: Workstreams

Introduction: MDAWG members, met in Washington DC, 11-12 November 2010 to review progress and update the MDAWG workplan for 2011-12. The aim was to:

- Carry out a progress review of current MDA workstreams and initiatives
- Carry out a brief brainstorming to generate either new ideas and/or better define older ones
- Pay special attention to two particular issues: the Total Market Approach and the Quality RH Medicines Strategy
- Agree on revisions to the MDAWG workplan for 2011-2012.

For further details about the meeting [including participants, sessions, and outcomes] please see the *November 2010 MDAWG Meeting Report* which can be found under Past Meetings at the following link: <http://www.rhsupplies.org/working-groups/market-development-approaches/meeting-archive/past-meetings.html>

Results

Following the meeting, the workstreams under the MDAWG workplan were revised and consolidated into five workstreams. Prior to the meeting, the MDAWG workstreams were as follows:

- WS 1: *MDA Resources, Tools* – retained, see action points below
- WS 2: *Mainstreaming alternative approaches to RHCS* – retained, see action points below
- WS 3: *Data Sources for Targeted Advocacy for MDAs* – folded into Workstream 5
- WS 4: *Quality* – retained, see action points below
- WS 5: *Involving manufacturers* – removed
- WS 6: *Access to RH Medicines Database* – removed, transferred to RHSC Secretariat
- WS *: *Facilitating the availability of new and underused RH Technologies* – new, adopted as WS 3 so as not to disrupt the numbering of the workstreams

As a result of the meeting, the five MDAWG workstreams are now:

- WS 1: MDA Resources, Tools, and Guidelines
- WS 2: Mainstreaming alternative approaches to RH commodity security
- WS 3: Facilitating the availability of new and underused RH Technologies
- WS 4: Facilitating the availability of quality assured supplies
- WS 5: Facilitating an enabling environment for the non-public sector to complement the health stewardship role of the state [Including *TMA* and *Data Sources for Advocacy for MDAs*]

Action steps for each work stream are noted in each workstream and summarized in Appendix A. All MDAWG members named in this document are listed in Appendix B.

Workstream 1: MDA Resources, Tools and Guidelines

To date, the MDA WG has developed a number of resources, tools and guidelines which are designed to facilitate Market Development Approaches. The resources developed include:

- [a] The Market Segmentation Primer [formerly Workstream 1: Market Segmentation *Toolkit*];
- [b] Indicators to measure market development [formerly Workstream 2]; and
- [c] The Market Development Approaches web-based "key issues guide" developed in 2006 [see: <http://www.eldis.org/index.cfm?objectId=8B6FF1D6-FA19-98B1-6FD7490BF36EBF86>].

Areas of focus:

[1] New Resource: A further resource—a Market Segmentation Guide—is to be developed to complement the Market Segmentation Primer. The content of the Guide is under discussion and is likely to be led by colleagues from Abt Associates – with guidance from USAID which may be in a position to fund some of the work.

[2] Promotion and Dissemination of Existing Resources: Particular effort is to be made to promote the use of the existing [and future] MDA Resources, Tools, and Guidelines as widely as possible. The initial focus will be to raise awareness of the resources among RH Supplies Coalition member colleagues. Efforts will then focus on promoting awareness of them and their use among colleagues within RHSC member organizations and then among national stakeholders in-country. This work will involve:

- Liaising with RHSC Secretariat Staff to ensure the resources are on the RHSC website
- Liaising with the RMAWG to ask them to promote and disseminate the resources – particularly among in-country partners
- Identifying individuals within organizations represented in the MDAWG to help promote and disseminate the resources.

This workstream will be led by Dawn Crosby, Leslie Patykewich, and Nadia Olson

Action points from November 2010, DC meeting:

- Jasmine Baleva will lead development of a promotional strategy, with review from Maxine Eber and Margalit Edelman
- Short resumes on user experience with MDA tools will be provided by Janet Vail, Dawn Crosby, Chris Brady, Soumitro Ghosh, and Ben Light. Resumes will be sent to Jasmine Baleva, who will send to Bonnie Keith for finalization and posting
- The RHSC Secretariat will lead translation of the Market Segmentation Primer into Spanish and disseminate among members of the LAC Forum
- Dawn Crosby will lead follow-up on potential development of a guidance document for the Primer, Jasmine Baleva will assist and they will report back in January 2011
- Dawn Crosby will lead an effort to develop a three-pager on steps to do a TMI [Chris Brady, Jasmine Baleva, Ben Light and Janet Vail will share experience]
- Steve Kinzett to coordinate uploading TMI documents to the Supplies Information Database.

Workstream 2: Mainstreaming Alternative Approaches to RH Commodity Security

[The following text is to be reworked, per the Action Points (see below)] The MDAWG is working to identify strategies that merit streamlining within the RHSC and advocating within and beyond the Coalition. Once identified, these strategies will be analysed and documented in briefs and other dissemination products and disseminated beyond the membership as part of RHSC advocacy efforts. In disseminating information about these strategies, the MDAWG will work closely with the Resource Mobilization and Awareness Working Group.

Rationale for New Workstream 2: to raise awareness of different, proven approaches that can be used to secure and sustain reproductive health supplies, strengthen coordination across working groups, and integrate the policy and technical approaches identified by the groups in the Coalition's advocacy and dissemination efforts. In other words, the Coalition's membership needs to be familiar with proven approaches in securing and sustaining reproductive health supplies if it is to advocate effectively for those strategies.

This need is especially critical when it comes to innovative financing approaches, public/private partnerships, and integrating advocacy into a changing global health context. Funding and budgeting mechanisms such as Sector Wide Approaches, budget support, basket funding, and national health insurance, together with the trend toward health sector reform in some countries, can be perceived as threats to reproductive health commodity security (RHCS). When the financing environment changes, however, advocates must find new ways to navigate the decision-making process and influence various stakeholders to ensure that RHCS remains a priority. They must also be able to articulate the potential role of the private sector in increasing the sustainability of the reproductive health product supply.

The remarkable growth of the Coalition to date and the impressive turnout by multiple donor, advocacy, and implementing organizations observed at the annual membership meetings suggest that the Coalition itself is the ideal forum for mainstreaming new approaches, increasing support for innovation, and fostering cross-sector collaboration. The mainstreaming activity aims to achieve these objectives by creating synergies between working groups and disseminating state of the art approaches within and beyond the Coalition. To drive this work forward, a "Mainstreaming" team, drawn from the MDAWG and including members of the RMAWG, is to be constituted. The activities will be organized in three parts:

[1] Document: the Mainstreaming team will document technical approaches and policies relating to public/private collaboration, health financing, and advocacy that have helped secure reproductive health supplies beyond traditional commodities donations. [Every effort will be made to use existing material from similar initiatives, such as the USAID-funded Africa Health Network.]

Topics are to include: health financing approaches such as risk pooling; national health insurance; insurance-linked provider networks; contracting mechanisms; voucher programmes; revolving drug funds [to improve financial sustainability of RHCS efforts]. The exercise will also include documenting financial mechanisms in the context of health sector reform, such as basket funding and budget support, which are increasingly used to coordinate donor contributions to government systems. For example, existing briefs such as DELIVER's primer on advocating for RH commodity security within a sector wide approach can be adapted and integrated in the Coalition's mainstreaming and advocacy activities.

[2] Mainstream: The goal of this phase will be to mainstream state of the art, innovative approaches within the Coalition and explore implications for its advocacy efforts. The Mainstreaming team will develop themes and workshop topics that foster a better understanding of health financing, public/private collaboration, whole market approaches, and new advocacy strategies to be promoted by the Coalition [among members and beyond].

One possibility would be to pilot some of these approaches during the next annual membership meeting. The Mainstreaming team will identify experts within and beyond the membership who can present case studies, articulate challenges and share best practices at the general meeting. Examples of presentations to be considered include: the role of the private sector in meeting reproductive health needs; revolving drug funds; vouchers for family planning services in Kenya; health insurance in the Philippines; health reform in CIS countries; contracting out of NGOs in Latin America; the growth of HMOs and community-based financing in West Africa; and the role of private health providers and suppliers in Indonesia.

[3] Advocate and Disseminate: the mainstreaming team will coordinate with colleagues within the same organizations and with affiliated in-country stakeholders, networks, and projects, to disseminate advocacy messages and tools [these could draw on the findings of activities carried out in the annual membership meeting and the documents gathered in parts 1 and 2].

The mainstreaming team will also work with colleagues to ensure that the alternative and innovative approaches are featured in the Supply News feature on the Coalition's website and in its newsletter, *SupplyInsider*. In addition, the briefs, case studies, research documents, tools, and presentations will be uploaded and organized in a database on the RHSC website for easy access by members and the general public. Finally, the database will be advertised through reproductive health networks to encourage learning by unaffiliated organizations. If deemed necessary, a workshop can be organized under the auspices of the RHSC or in collaboration with other initiatives [including appropriate conference events] to further mainstream the tools and approaches presented at the general meeting.

[This workstream will be led by...](#)

Action points from November 2010, DC meeting:

- Carol Shepherd will lead an effort to update the text above so it focuses solely on documentation and make a proposal on how to move forward. Francoise Armand will assist.
- Steve Kinzett will check with John Skibiak about potential KfW funding for the workstream

Workstream 3: Facilitating the availability of new & underused RH Technologies

The Coalition's Strategic Plan explicitly acknowledges the right of individuals to choose the supplies they need to satisfy their evolving reproductive health needs, making available technologies that meet users' needs and have desirable effects on reproductive health, but are not yet well integrated into the public or commercial sectors globally. To address these issues, the MDAWG will be working closely with the Coalition's Caucus on New and Underused RH Technologies to facilitate the availability of new and underused methods. The Caucus aims to improve choice of reproductive health technologies and contribute to country level efforts towards achieving universal access to RH services and products. Additional efforts will explore the potential roles of other technologies for women and men, including those with the potential for multi-purpose prevention benefits, protecting users from pregnancy, HIV, and sexually transmitted infections.

The Caucus focuses on a number of technologies considered new and underused by the Coalition, including: contraceptive implants, CycleBeads, diaphragms, emergency contraception, female condoms, HPV vaccines, the levonorgestrel intrauterine system, manual vacuum aspirators, medical abortion, and the progestin-only vaginal ring. For more details about these technologies, please see the individual Product Briefs prepared by the Caucus: http://www.path.org/files/RHSC_all_br.pdf

Members of MDAWG and the Caucus will work closely together to identify activities that will achieve the objectives of this work stream, and ultimately aid overall market growth.

Objective

The Market Development Approaches Working Group, in collaboration with the Caucus on New and Underused RH Technologies, will help integrate new and underused products into markets and facilitate the availability of products at the country level.

This workstream is continuing to develop its specific action plan; at this point current activities include:

- Serving as a forum for discussions regarding the development of different female condom products and to help build consensus, exchange information, and identify roles and responsibilities for coordination and collaboration with a view to increasing the availability of female condom products. MDA WG Leader Ben Light attended an initial gathering in Bangkok, December 2010, where it was decided that the MDAWG would host multi-sectoral discussions and provide opportunities for collaboration and partnership building. Together with the Caucus on New and Underused RH Technologies, the MDA WG hopes to work with the key partners in the female condom community to lead the way in providing support for the development of a business plan to expand the availability of female condoms. A core group of meeting participants from WHO, UNFPA, UAFC, PATH, and MDA WG are currently outlining activities and next steps.
- Serving as a forum for discussions regarding how to address market issues for emergency contraception. This activity will be carried out by the MDA WG, in collaboration with the Caucus, and MDA member International Consortium for Emergency Contraception. Details are being defined, but initial ideas are to assist in further developing the public sector market for EC or working on issues of quality and preventing counterfeit EC products. Specifics of this component of the workstream will be developed later in 2011.

This workstream will be led by the Population Council.

Action points from November 2010, DC meeting:

- Ben Light was asked by WHO and the Universal Access to Female Condom Joint Programme [UAFC] if the MDAWG could act as a neutral party and forum for discussions regarding the development of different female condom products and to help build consensus, exchange information, and identify roles and responsibilities for coordination and collaboration with a view to increasing the availability of Female Condom products. An initial gathering will be held in December 2011 in Bangkok with Ben Light attending.
- It was agreed that the Bangkok meeting could be an opportunity to strengthen links between the Caucus on New and Underused RH Technologies and MDAWG. Ben Light is to pursue opportunities to build this relationship and move this workstream forward.

Workstream 4: Facilitating the availability of quality assured supplies

In response to the imperative need for quality supplies to be available for donors, governments, and other agencies to buy, this workstream—a collaboration with the Systems Strengthening Working Group—seeks to help manufacturers of generic supplies who currently have little knowledge of what to do and where to go to negotiate the necessary steps to ensure their products meet appropriate quality standards and to get their products to market.

The workstream focuses on:

- Pre-qualification under the WHO scheme of a range of hormonal contraceptives products [from the different HC products groups—oral contraceptives, emergency contraception, injectables, implants, hormone-releasing IUS]
- Under the Innovation Fund financed AQAS Initiative, the MDAWG—with leadership from Concept Foundation—is working on the provision of technical and strategic assistance to a selection of generic manufacturers of HC products who are relatively better placed to meet and maintain the standards required to achieve pre-qualified status under the WHO prequalification scheme. This will include adherence to CGMP, the submission of complete application dossiers [plus site dossier], and documentary proof of API sourcing.
- Setting out and then implementing, in collaboration with the SSWG, a strategic plan assessing how to raise the interest of generic manufacturers of HC products in achieving pre-qualification for one or more of their products under the WHO scheme. The strategic plan will seek to identify options for action that will culminate in the emergence of a vigorous market for quality-assured generic hormonal contraceptive products and identify the key stakeholders in this dynamic process [broadly, these are: the generic manufacturers of hormonal contraceptives; the procurers that are RHSC members; the donors that are RHSC members (including, importantly, the World Bank); the national regulatory authorities—with a focus on those countries with generic manufacturers of hormonal contraceptives; testing laboratories; and WHO, as overseer and manager of the HC PQ scheme]

This workstream is being led by the Concept Foundation.

Support to WHO initiative for Pre-Qualification of Hormonal Contraceptive products

The Assuring Quality Assured Supplies [AQAS] Initiative is receiving Innovation Fund financing and is driven by the Concept Foundation with support from the AQAS Advisory Committee. The Advisory Committee is chaired by MDAWG leader, Ben Light, with members from Cardno Emerging Markets [Francoise Armand]; Concept Foundation [Lester Chinery]; and the Supplies Coalition Secretariat [Steve Kinzett]. The initiative is designed to complement the on-going work being undertaken by WHO for its Pre-Qualification scheme launched in 2006, to ensure the consistent availability of quality hormonal contraceptives [oral contraceptives, emergency contraception, implants, and injectables].

The AQAS Initiative—developed with periodic, strategic inputs from WHO—is working closely with a number of generic manufacturers of hormonal contraceptives to build their capacity to produce quality supplies and prepare them for WHO pre-qualification.

Expansion of this workstream

Matters that are connected to the overall concept of quality and efficacy of reproductive health supplies in the field may also be addressed as a logical extension of this workstream in the future. These matters relate to the general question of counterfeit goods and their proliferation in low-middle income countries, especially if they are hormonal contraceptive methods.

Action points from November 2010, DC meeting:

- Develop a quality RH medicines strategy and circulate with related activities. Ben Light and Lester Chinery will lead and share strategy by the end of November, 2011
- Develop a communications strategy for this workstream

Workstream 5: Facilitating an enabling environment for the non-public sector to complement the health stewardship role of the State

As the MDA WG has discussed before, the stewardship role of the State in guaranteeing the health of the whole population is well understood. In developed countries, the key role of the public health system is complemented by efforts of the private sector and non-profit organizations. However, in many developing countries the health sector is dominated by the public sector with non-public actors playing often undervalued and sometimes marginal roles. Relationships between public and non-public efforts are sometimes characterized by friction, mistrust, and mutual suspicion.

Workstream 5 aims to encourage the public sector to validate and value non-public sector contributions that improve the reproductive health of the population. It promotes the virtues of supporting and ensuring coordination among all in-country pro-RH efforts. In some cases, the non-public sector actors present at the November 2010 MDAWG meeting in Washington, DC, said they had experienced major difficulties in trying to work in some countries – hampered apparently by a suspicion of non-public sector involvement in health care/ provision.

Defining and clarifying possible complementary roles of the public sector and non-public sectors in contributing to national efforts to improve SRH could be an important contribution to maximising use of in-country resources. In other words, what is required are key messages that can be used to try and change the mindset of the public sector, demonstrating what works and what has been effective in other countries, and turning these words/actions into a messaging toolkit to facilitate the validation and valuing of the role of the non-public sector in reproductive health care and provision. Initial work under this workstream could also focus on using reliable data to show that a significant proportion of SRH needs of the population are already being met by the non-public sector [for example: mission hospitals, NGOs, private sector]. This information could then be used to create a more enabled environment which would be likely to lead to expansion of the whole sector and improved access to SRH services and care.

This information may come from the Demographic and Health Survey (DHS), and an effort will be undertaken to pursue inclusion of questions on brand and price of contraceptives being used in future DHS'. Further information on branding and pricing of contraceptives in country markets may also be obtained from IMS-type data, or data on prescription and use of medicines for research purposes. Formerly known as *Workstream 3: Data Sources for Targeted Advocacy for MDAs*, these efforts now fall under Workstream 5.

This workstream considers the benefits of defining and clarifying complementary roles of the public and non-public sectors in contributing to national efforts to improve SRH – thus improving the use of in-country resources. The workstream:

- supports the stewardship role of government in ensuring health of the whole population;
- recognises the significant role of the non-public sector in health service provision; and
- seeks to promote enhanced cooperation/collaboration between public and non-public sectors.

Total Market Initiative

The principal MDAWG activity in this area in recent years has been in the sphere of Total Market Approaches – specifically, the MDAWG-developed Total Market Initiative [TMI]. Two TMIs, financed by the RHSC's Innovation Fund, have been implemented in Honduras [through JSI and Abt Associates] and Madagascar [through MSI and Futures Group].

The focus of the Total Market Approaches adopted by the MDAWG is to facilitate and increase the effective delivery of RH supplies. This is done by means of a market segmentation exercise involving the in-country stakeholders from the public and non-public sectors involved in the provision of RH/FP services. The aim is to ensure the better use and targeting of resources, in particular to increase access and equity for currently underserved and otherwise marginalised population groups. The overall aim is to ensure that all individuals within the selected country are able to obtain and use the RH commodities of their choice when they need them. The total market initiative includes the segmentation of the total national market in order to reach agreement among service providers as to which population groups they will target with their particular RH/FP services.

The objective of each TMI undertaken was to facilitate better understanding of the family planning market in each country [which providers are serving which population groups with which services – and who, therefore, is under- or non-served]. This understanding is then used as a basis on which to work with a broad range of in-country stakeholders from the public and non-public sector to build an understanding of how the market could be segmented to better serve the diverse needs of all population

groups. This knowledge can also be used to [re]define the targets and roles and responsibilities [including geographical focus] of the FP service providers operating within the country in question.

The initiative is designed to be adaptable to a wide-range of country conditions with a focus on raising equity and access. Hence attention to issues such as social insurance, voucher schemes, and other mechanisms designed to help ensure individuals seeking to exercise their rights and stay healthy are not financially disadvantaged.

This workstream will be led by Abt (Jeff Barnes) and PATH (Janet Vail), with assistance from JSI (Nadia Olson).

Action points from November 2010, DC meeting:

- Conduct a follow up call to discuss documenting steps to a TMA, with links to tools
- Hold a one-day TMI meeting, aim to hold it by end January 2011. The RHSC Secretariat [Steve Kinzett] will lead on setting up the meeting. Outcomes of the meeting will be:
 - Choose a demonstration country
 - Produce a joint agreement with USAID and UNFPA on planning
- Jasmine Baleva will follow up with Margalit Edelman to see if Merck is willing to share some IMS information. She will review the text on this activity and adapt it to our current needs
- Jasmine Baleva will circulate the indicators drafted by Patricia Mengech, assess which DHS' include private sector data, and discuss use of potential indicators with MEASURE/UNC. She will also share info on which countries are scheduled for an upcoming DHS.

Appendix A: Action Points from November 2010 meeting

Workstream 1: MDA Resources, Tools and Guidelines

- Jasmine Baleva will lead development of a promotional strategy, with review from Maxine Eber and Margalit Edelman
- Short resumes on user experience with MDA tools will be provided by Janet Vail, Dawn Crosby, Chris Brady, Soumitro Ghosh, and Ben Light. Resumes will be sent to Jasmine Baleva, who will send to Bonnie Keith for finalization and posting
- The RHSC Secretariat will lead translation of the Market Segmentation Primer into Spanish and disseminate among members of the LAC Forum
- Dawn Crosby will lead follow-up on potential development of a guidance document for the Primer, Jasmine Baleva will assist and they will report back in January 2011
- Dawn Crosby will lead an effort to develop a three-pager on steps to do a TMI [Chris Brady, Jasmine Baleva, Ben Light and Janet Vail will share experience]
- Steve Kinzett to coordinate uploading TMI documents to the Supplies Information Database.

Workstream 2: Mainstreaming Alternative Approaches to RH Commodity Security

- Carol Shepherd will lead an effort to rework the workstream text so it focuses solely on documentation and make a proposal on how to move forward. Francoise Armand will assist.
- Steve Kinzett will check with John Skibiak about potential KfW funding for the workstream
- Pursue inclusion on 2011 annual meeting agenda for panel presentation on alternative financing mechanisms. Steve Kinzett and Bonnie Keith will report back to WG on meeting dates/venue progress as it is known.

Workstream 3: Facilitating the availability of new & underused RH Technologies

- It was agreed that the Bangkok meeting could be an opportunity to strengthen links between the Caucus on New and Underused RH Technologies and MDAWG. Ben Light will pursue opportunities for building this relationship and moving this workstream forward at and after the Bangkok meeting.

Workstream 4: Facilitating the availability of quality generic supplies

- Develop a quality RH medicines strategy and circulate with related activities. Ben Light and Lester Chinery will lead and share strategy by the end of November, 2011
- Develop a communications strategy for this workstream

Workstream 5: Facilitating an enabling environment for the non-public sector to complement the health stewardship role of the State

- Conduct a follow up call to discuss documenting steps to a TMA, with links to tools

- Hold a one-day TMI meeting, aim to hold it by end January 2011. The RHSC Secretariat [Steve Kinzett] will lead on setting up the meeting. Outcomes of the meeting will be:
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- Jasmine Baleva will circulate the indicators drafted by Patricia Mengech, assess which DHS' include private sector data, and discuss use of potential indicators with MEASURE/UNC. She will also share info on which countries are scheduled for an upcoming DHS.

Appendix B: MDA WG members listed in the workplan, names and affiliations

Francoise Armand, Cardno Emerging Markets

Chris Brady, Options UK

Lester Chinery, Concept Foundation

Dawn Crosby, Abt Associates

Maxine Eber, Population Services International (PSI)

Margalit Edelman, Merck MSD

Soumitro Ghosh, Marie Stopes International (MSI)

Bonnie Keith, PATH

Steve Kinzett, Reproductive Health Supplies Coalition Secretariat

Ben Light, United Nations Population Fund (UNFPA) and MDAWG Leader

Nadia Olson, John Snow Inc (JSI)

Leslie Patykewich, John Snow Inc (JSI)

Jasmine Baleva, Unites States Agency for International Development (USAID)

Carol Shepherd, University Research Company (URC)

John Townsend, Pop Council

Janet Vail, PATH

Katherine Williams, Pop Council