USAID GLOBAL HEALTH SUPPLY CHAIN PROGRAM Procurement and Supply Management

Protecting Access to Contraceptives during COVID-19: An Assessment of Supply Chain Resilience in over 40 countries

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CONTRACEPTIVE SECURITY INDICATORS SURVEY



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 Survey: Background and purpose
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 - · Quantitative findings
 - Qualitative findings: How did COVID-19 impact FP access, and how did countries respond?

- Promising Practices
- Current status of resiliency-building practices
 - Conclusions

Background

CONTRACEPTIVE SECURITY INDICATORS SURVEY



Purpose:

Enables decision makers in countries and the global health community to monitor progress toward CS, inform program planning, and advocate for improved policies and resources.

- > More than **100 quantitative** and **qualitative** indicators covering:
 - Leadership/coordination
 - Finance/procurement
 - Commodities
 - Policy
 - Supply chain
 - Product quality
 - Private sector engagement
 - Impact of the COVID-19 pandemic on FP

Data collected in 63 countries between 2010-2021



- National-level assessment of a country's policies and practices related to access to contraceptives
- Developed by the USAID | DELIVER Project; first conducted in 2010
- Currently implemented by USAID Global Health Supply Chain (GHSC-PSM) project every 2 years

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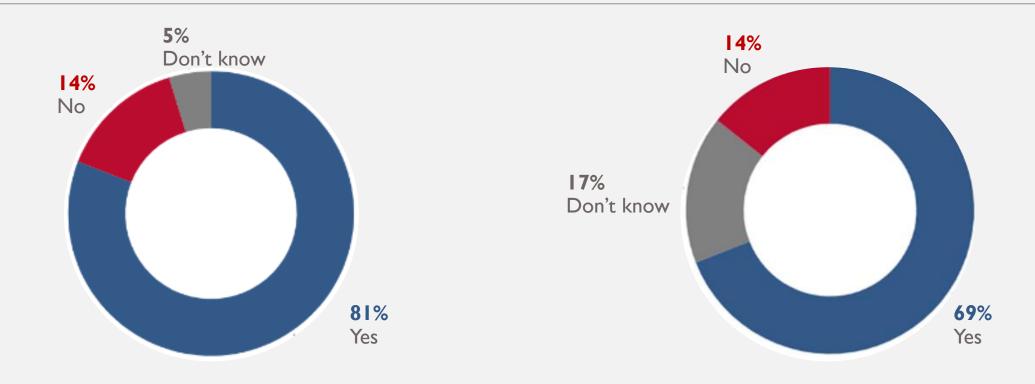
COVID-19 Impact: Quantitative Findings from 2021 CS Indicators Survey



As of 2021, most countries had an emergency plan with measures to protect family planning services



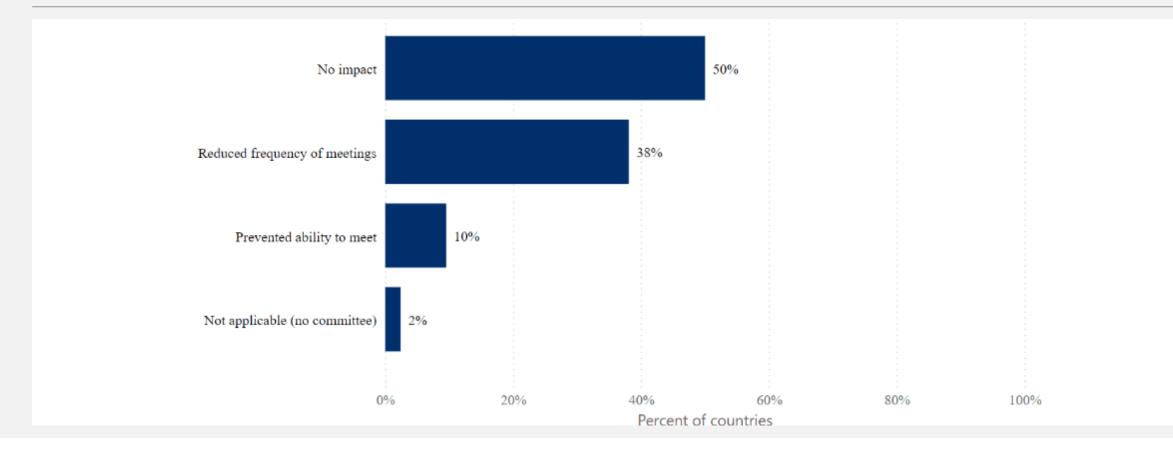
% Countries with a pandemic-related emergency preparedness plan (that includes impact on FP) % Countries with a non-pandemic-related emergency preparedness plan (that includes impact on FP)



Most contraceptive security committees continued to meet in 2020, but some met less frequently

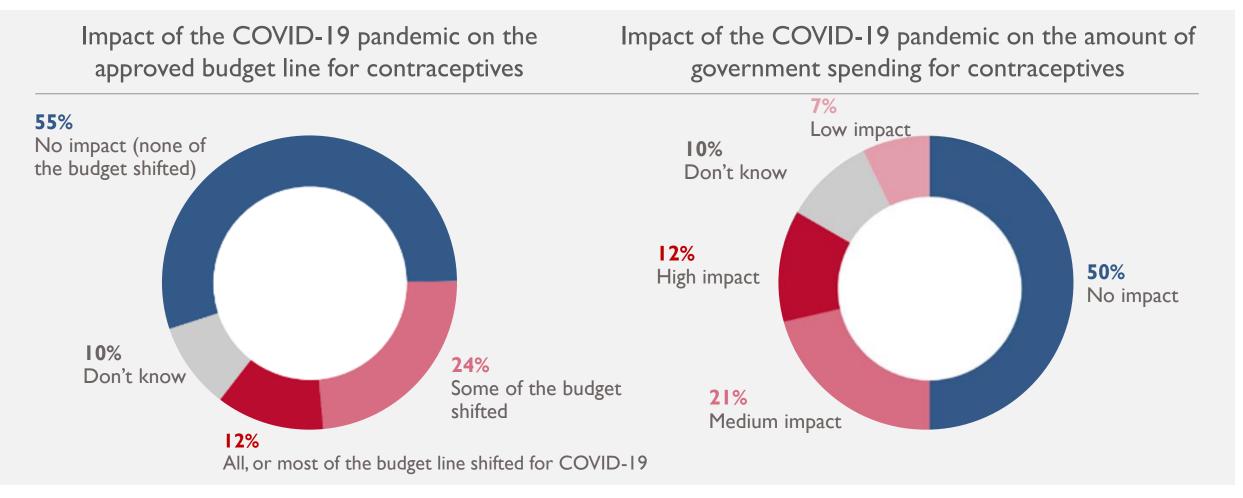


Impact of the COVID-19 pandemic on frequency of CS committee meetings in 2020



Only 5 countries reported that COVID-19 severely impacted their domestic budget for contraceptives





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COVID-19 Impact: Qualitative Findings from 2021 CS Indicators Survey

How did countries protect access to family planning during the COVID-19 pandemic?



What COVID-19 disruptions were reported?





Global level

- Global supply chain disruptions
- Financial challenges

National level

- In-country supply chain disruptions
- Financial challenges
- Reduction in face-to-face coordination meetings



Health facility level

- Personnel shortages, overwhelmed facilities
- Ineffective/underperforming technology platforms
- Personnel not experienced in online counseling/use of telehealth technology



Community and client level

- Reduction in large gatherings
- Suspension of some FP promotion and dissemination activities
- Clients fearful of going to health facilities
- Reduction in FP commodity demand

Overcoming supply chain challenges

Disruptions from COVID-19 pandemic

- Global supply chain challenges
- Financial challenges
- In-country supply chain disruptions
- Personnel shortages, overwhelmed facilities
- Challenges with telehealth technology and online counseling
- Reduction in large gatherings
- Clients fearful of going to health facilities



- Enhanced coordination and risk management
- Advocated to prioritize FP funding/commodity supply, allowed decentralized financing
- Analyzed risks, allowed decentralized procurement, alleviated bottlenecks through more frequent resupply, etc.
- Task shifting and task sharing, multi-month dispensing, integrated contraceptives with other health services
- Trained providers in online counseling, upgraded telehealth platforms
- Telehealth, mobile clinics, community and home-based distribution, small group consultations, self-care, used mass communication channels to note health facility safety measures, allowed emergency contraception without facility visit, free products offered

Promising Practices – Structural



Build structures for **coordination** and **risk management** (across partners, sectors, geography, and health system levels)



Build robust data platforms (LMIS)



Strengthen **telehealth platforms**

Expand mobile clinics



Use existing mass media channels to communicate alternative access points/health facility status and safety measures

Promising Practices – Policy & Finance



Advocate for a larger share of domestic financing of contraceptives



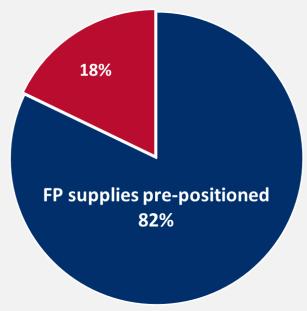
Allow for **flexible policies**

- Task shifting and sharing
- Multi-month dispensing
- Self-care options community-based distribution of injectables
- Integrate the offer of contraceptives into other health services
- Promote long-term FP methods
- Facilitate access to emergency contraception

Current status of resiliency-building practices 2023 CS Indicators Survey

Most of the resiliency-building practices implemented during the peak of COVID-19 have been maintained

More than **80%** of responding countries have FP supplies pre-positioned in case of future emergencies



Contraceptive Security = Resilient Systems





The USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project is funded under USAID Contract No.AID-OAA-I-15-0004. GHSC-PSM connects technical solutions and proven commercial processes to promote efficient and cost-effective health supply chains worldwide. Our goal is to ensure uninterrupted supplies of health commodities to save lives and create a healthier future for all. The project purchases and delivers health commodities, offers comprehensive technical assistance to strengthen national supply chain systems, and provides global supply chain leadership. For more information, visit <u>ghsupplychain.org</u>.

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