

## What's Past is Prologue

### State of the Coalition Report; Coalition Director John Skibiak

#### 15th General Membership Meeting; Mexico City 2014

Good morning everyone; *buenos dias todos y todas.*

Ten years ago, 16 individuals came together in Washington, DC, at the World Bank, for the first ever membership meeting of the Reproductive Health Supplies Coalition. And here we are today, in Mexico City, celebrating our birthday among some of those same pioneers, and perhaps even more impressively, their spiritual heirs, some present here and others tuning in to the livestream broadcast of these proceedings.

Reaching ten years is a true rite of passage. Now I know, for many in this room, a tenth anniversary may not seem like much. After all, the Population Council is more than 60 years old, while IPPF reached that milestone two years ago. And for our partners from the manufacturing sector, such as Bayer whose roots go back to 1851, 10 years is barely a flash in the pan.

But what many here may not know is that in reaching this milestone, we are actually beating the odds in the area of global health partnerships where lifespans, like those of newly-hatched sea turtles, end before they even hit the surf. In 2007, research by PAHO and others were showing that attrition among global health partnerships was high – nearly 20 percent -- within the first seven years alone. And yet here we are, a decade on, not only surviving but -- judging from the numbers and energy of those here in this room -- thriving.

But before I get any further, let me take a second to echo Marleen's remarks and extend special thanks to our co-hosts, Mexico's Secretariat of Health, for their gracious support -- financial and logistical – for making this anniversary event possible. Mexico was the first government in Latin America to join the Coalition and, along with member organizations from across the country, it has played a critical role in growing the Coalition and the LAC Forum into the formidable entity it now is. I'd like to extend a special word of thanks to the Doctor Ricardo Garcia Cavazos, who on behalf of Mexico's Secretary of Health, Doctora Mercedes Juan López, will be addressing this gathering tomorrow.

Now I would like to be the first one to break my own rule, *y agradecer en especial a nuestros colegas Latinoamericanos, presentes aqui bajo nuestro mecanismo regional de implementación, el ForoLAC. Ellos han trabajado muy fuertemente para asegurar la selección de México como sede para esta reunión de aniversario tan auspiciosa! El ForoLAC ha ido de fortaleza en fortaleza en los últimos años. Es un testamento al apoyo y el duro trabajo de sus miembros... Aquí los saludamos por todo lo que han logrado!*

Rites of passage, as the name suggests, are always special events. They straddle the continuum between past and future and in so doing, allow us to understand how we got to where we are, and to apply that knowledge to better confront both the present and the future.

And so, in this very special anniversary year, I present to you the State of Coalition – as the confluence of three forces: the past, the present, and the future.

**Looking to the past, all I can say is that the** Coalition today is a very different beast than it was in 2004 or even 2006 when I joined. And if anyone needs any proof of that, just look around the room. We have with us here over 350 participants from more than 51 countries. But in many ways, this meeting simply mirrors the growth in the Coalition itself. From barely 16 members 10 years ago, this month we welcomed our 300<sup>th</sup> member, Bangladesh's Ministry of Health and Family Welfare. Our Secretariat has grown, our funding has grown, and our presence has grown, with staff in Brussels, Dakar, Lima and Washington, DC.

But with this growth come increased responsibilities and increased accountability – both to our members and to our donors. Over the years, we have thrived on our ability to be flexible; and to respond to the opportunities that have befallen us. But the rules that govern us, though modified over the years, were the product of an earlier era. And so this year, we returned to our roots with the aim of making sense of the past, figuring out what has brought us success, and applying that knowledge to frameworks that will guide our work in the decade to come.

Yesterday the Executive Committee approved the first comprehensive revision our Terms of Reference in almost a decade. While preserving the qualities of flexibility and openness that have brought us success, the new TOR introduces rigor to the way we work, and offers a more effective operational framework for managing the realities we face today: a larger, more diverse membership, more resources, and the desire to bring order to a rapidly evolving network.

The second landmark event of the last 24 hours was the Executive Committee's formal approval of our new Strategy 2015-2025. As you all know, development of that strategy has been an exhausting effort, involving discussions, consultations and outreach stretching as far back as our Paris membership meeting of 2012. But what excites me most about the strategy – and we will discuss that later this morning – is the fact that it draws inspiration not just from where we hope to be in a decade's time, but from what we have learned from the past. When our first Strategic Plan was developed in 2007, we lacked a track record robust enough to gauge, with any certainty, the feasibility of our proposed actions. Today, with a decade of experience to build on, we can see with greater clarity the “levers of change” that have brought us success in the past -- our brain trust, our skill in brokering partnerships, the neutral space we provide, our convening power, our flexible resource base, and our respected brand name. This new Strategy, therefore, allows us not only to address

the critically important pillars of availability, quality, equity and choice, but to focus more clearly on what is in our manageable interests and put to effective use what we know works.

## **PRESENT**

When I think of the present, I can't help but think of the infamous line from Shakespeare's *The Tempest*, "What is past is prologue" – a reference to the ways in which history both influences and sets the context for the present. Indeed, many of the successes in our shop window today, have beginnings in the Coalition's early days.

The Innovation Fund, our flagship initiative for inspiring and financing new ideas, is an immediate example. First established in 2009, the Fund has distributed more than \$3 million to more than 25 partners around the world. The lessons of that past enabled us to relaunch the fund this Anniversary Year, as a stronger resource, more accessible to all, providing technical support to partners who needed assistance in completing their funding applications, and giving precedence to applicants from the Global South.

The breadth and range of this year's grant awardees provides for a fascinating array of new opportunities:

- With Medicines360 and FHI360, we're piloting the introduction and commercialization in Kenya of a low-cost levonorgestrel IUD;
- In Mozambique, we are looking at the impact of provider motivation on quality of care and on better stock management.
- With the generic manufacturer, Pregna, we are exploring the feasibility of establishing an e-commerce portal to reduce the costs of purchasing RH supplies for providers in India;
- In Guatemala, Honduras, and Mexico, we are using an innovative philanthropic platform—Kangu—to crowdfund high-quality RH services for marginalized women.
- In Liberia, now so sadly affected by the turmoil of Ebola, we have awarded funds to strengthen training in pharmaceutical supply chain management.
- And in Burkina Faso, we are supporting our partner Bioforce to train and support Ministry health agents to act as health logisticians and carry out health logistics functions.

These activities, now just getting underway, offer tremendous promise – not only to the institutions hosting them, but to the Coalition itself. We are not -- and never have been -- an implementing organization but activities such as these, implemented at country level, provide us with a means to empower our partners on the ground and yield results of which we can all be proud.

**The Coordinated Assistance for Reproductive Health Supplies—the CARhs**—one of the oldest initiatives within the Coalition has also embarked this year on a process of reinventing itself; taking stock of what it does best, but also understanding better its role in today's ever-

evolving landscape. As in years past, the CARhs has once again come to the rescue, averting major stockouts of Jadelle in West Africa, securing donations of more than 1.1M oral contraceptives and 550,000 units of DMPA for Myanmar, and expediting shipments of more than 1.75M units of DMPA to Nepal. But they have also, through the development this year of their first strategic plan, recognized that while putting out fires is absolutely necessary, even better is making sure they don't happen in the first place. And to that end, a new workstream of the SSWG has emerged called Coordinated Supply Planning to build a more preventative mechanism for addressing issues earlier in the procurement process. Over the past year, this group has focused its efforts on joint forecasting and supply plans for two products with limited supply: DMPA and implants and have worked to prevent overstocks in one country and maximize existing production to meet other country needs more equitably.

Second guessing the skills needed to address stockouts, the Coalition has also pursued its efforts at strengthening the supply chain management skills of those in whose hands so much of our work rests. With financial support from Bayer, we just launched the second round of our LAPTOP Scholarships, which seeks to help potential students off-set the cost of courses in identified through our LAPTOP database. Last month we received more than 60 applications from supply chain managers on four continents. Next month, we will announce five recipients allowing them to further their careers and strengthen their own country's supply chains.

This idea of reinvention with an intention not just to survive but, indeed, to thrive appears to be a theme resonating with many Coalition partners. And few initiatives illustrate that more clearly than the Pledge Guarantee for Health. Developed in 2009 under the auspices of the Coalition, the Pledge Guarantee extends short-term loans on the basis of approved donor funds, thereby allowing aid recipients to accelerate the purchase, delivery, and ultimately impact of critical health supplies. Like any new initiative, PGH has had its fair share of growing pains. But rather than slow them down, these pains only seem to have spurred them on to bigger and better things. Last year, a new 5-year \$100 million guarantee from USAID and Sida, expanded PGH's lending capacity to \$1 billion. In addition it has also forged new partnerships with Ecobank, Africa's largest commercial bank, to provide a \$40M credit facility in its 31 countries; and with the Calvert Social Investment Foundation, which provides a \$10M credit facility for use by the not-for profit sector in nearly any country in the world. Clearly this increased bridge financing capacity holds out tremendous promise to our partners and I urge you to all to understand the opportunities it can provide and to use it to the fullest.

And last but not least, we cannot speak of PGH without reflecting on the success of its sister initiative, AccessRH. Now managed under the Procurement Services Branch of UNFPA, AccessRH was another product of the Coalition. And like the CARhs, it too has gone from strength to strength. Since its launch in 2011, AccessRH has provided \$92 million dollars' worth of reproductive health products to 88 countries - \$13 million this year alone.

## THE FUTURE

Today, the Coalition faces an environment notably different from that of 2006. We now have new wind behind our sails, with global support for family planning as strong as I have seen it in decades and with new movements that promise to deliver dramatic change in the reproductive health space—Family Planning 2020, which seeks to reach 120 million women and girls with family planning services by 2020; and, with an even longer time horizon, the Sustainable Development Goals within the context of the post-2015 development agenda. What does the future mean for us as a Coalition?

First, it means new ways of looking at longstanding situations and making sense of what is familiar, but somewhat unclear. The Coalition has long played a role of demystifying conundrums and calling out the unclothed emperors as acts of service to the supplies community.

This year, we published *A Business Approach to Transforming Public Health Systems*—a think piece aimed at mobilizing decision-makers to rethink the way public health systems are managed. This new approach calls on public health leaders to take a more pragmatic approach—and to ask themselves: “Is what we have today working as well as it needs to, and will it work for tomorrow?” Published under the auspices of the SSWG, the paper guides thinking with a view as to what the global health landscape will look like in the year 2035. This longer-term vision requires a hard look at the supply systems of today and how well they are equipped to take advantage of future opportunities and to meet future challenges.

Yet another groundbreaking publication came in the form of *Market Shaping for Family Planning*, a comprehensive review of the role of market shaping in improving the effectiveness of FP markets. Co-authored by Dalberg Global Development Advisors, the report draws on recent market shaping initiatives to get to the bottom of this increasingly used, but all too often misunderstood, term. The report builds on the Coalition’s brain trust of more than 40 market dynamics specialists who helped identify key elements of a healthy market, contributed to a new conceptual framework for understanding the logic of market shaping; and identified structural tensions and trade-offs that often arise from the implementation of market shaping efforts.

If the global community has become somewhat calloused to any existing challenge, it may be to the ubiquity of stockouts and the variety of seemingly insurmountable causes and sources. Despite the many excellent initiatives now underway across our community to address this problem, the fact is we have not yet succeeded in making the whole greater than the sum of its parts. We cannot create the momentum required to sustain this good work, let alone scale it up because we have no common language with which to share notes, formulate lessons learned, and build on the progress to date. Building on the experience of our former HANDtoHAND campaign, tomorrow we will launch a new initiative designed to

get us all speaking with one voice and to rally the support needed to demonstrate progress in this critical area.

And finally, the future means stepping up to the plate and taking on responsibilities for the common good. We saw that earlier this year, when our NURHT (New and Underutilized Reproductive Health Technologies) Caucus volunteered to take on the role of serving as the coordinating entity for the three individual FP TRTs under the UN Commission for Life saving Commodities: Implants, FC and EC. It was the NURHT Caucus that recommended the selection of these commodities in the first place. And so now three years on, their three offspring have come back home with new resources and an ambitious plan of action.

In the post 2015 decade, we are likely to see dramatic changes in the architecture by which development assistance is provided, especially in the area of financing. In meetings over the past few days, certain aspects of this new financing architecture have been the subject of both concern and considerable discussion. If history has taught us anything, it is that family planning, despite its potential to transform lives and indeed the well-being of countries, is so often relegated to the shadows – passed over in favor of other health efforts that can often deliver more immediate, but ultimately a more defined set of benefits. Indeed, it was this reality that gave rise to the RHSC in the first place since in the global pecking order, commodity security had for so long been relegated to the bottom of the food chain. As we look into to the decade ahead, it is critical that our community understand plans for the new architecture and be an active part of its development. It is critical, both to ensure that history does not repeat itself, but also to sustain the new positive movement we have seen in the years leading up to and since the London family planning Summit. As the world's largest voluntary network of RH organizations, the Coalition is well positioned to play that role, informing the community better and, where necessary, delivering their voices.

I would like to close my remarks here today by coming back to Mexico and saying a few words about the LAC Forum, its dogged vision, and partner commitment. As many of you know, the LAC Forum held their own annual meeting earlier this week and succeeded in drawing representatives of Ministries of Health of more than 10 countries throughout the region to focus their deliberations on three key areas: adolescents' access to quality RH supplies, long acting and permanent FP methods, and the reduction of obstacles to the purchase of contraceptives within international funding mechanisms. Despite all the progress made globally in increasing access to needed supplies, the poor in Latin America continue to pay some of the highest prices for contraceptives in the world. As a community, we can do better than that.

By serving as a conduit for channeling critical information, by supporting the work of partners through small grants, and by keeping the focus on affordable safe supplies, the LAC Forum is wielding its experience and knowledge, and as a result, gaining ground as an authoritative voice.

I would be remiss, if I didn't call out both USAID and UNFPA - whose constant support has been pivotal in assuring the LAC Forum's growth and prominence. But the burden of that support should not remain theirs alone. It is also critical that more of the Forum's work be supported by resources from within the region itself – from government, from multilaterals, and from private foundations. I call on others within the region to follow the good example of the Mexican government which, through the co-sponsorship of this meeting, not only voiced its support for ForoLAC, but actually put its money where its mouth was.

#### **CONCLUSION:**

Last week, I was struck when a good friend and partner of the Coalition, asked for advice and lessons-learned in supporting the development of another health alliance, not unlike our own. I admit that I was momentarily taken aback because, not so long ago, we were the new kid on the block. Now, the global community is looking to the Coalition for answers, for blueprints. It is indeed a privilege, and not something we take lightly.

We feel ready for the challenge. Though we are still a lean and flexible team in proportion to the volume of work we take on, our Secretariat staff has doubled in size in the last 18 months and I am happy to announce that we have a Deputy Director on board, Brian McKenna, to share the responsibility of steering the Coalition into the next decade. My staff and I are delighted to welcome you to this meeting, the last of the past decade, and the first of the next.

We stand poised on a threshold. Turning back, we see our well-wishers, our elders, and we realize afresh that the way has been stony and the climb steep. Looking around us today, we mark the respect and trust we have been afforded by leaders of the community. And gazing beyond into the future, we see challenges but we also know we will rise to them.

Thank you.