What price for peace of mind?

Is access to emergency contraception affordable and equitable for women in developing countries?

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Access is not just accessibility. It is also affordability.

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Project Components:

- Crowd-funded global survey of price of EC to consumer at private commercial outlets (pharmacies and drug vendors)
- Two country case studies (Democratic Republic of the Congo and Nigeria)
- Exploration of total market issues
Global survey of price of EC to consumers: Methods

• Survey sent out in English, Spanish and French to ICEC and RHSC listservs
• Asked key informants for lowest and highest EC prices
• Data received from 72 countries:
  • 21 countries in Africa
  • 15 from Latin America and the Caribbean
  • 17 from Asia (including 4 from the Middle East)
  • 2 from North America
  • 14 from Europe
  • 3 from Oceania
• Used GDP data to create measure of “affordability”
Results: Cost of EC by region and sub-region

Median % weekly income for lowest-cost EC product in private sector relative to GDP per capita

- Africa: 14.1%
- Anglophone: 20.5%
- Central America: 4.5%
- South America: 6.8%
- Caribbean: 3.5%
- Asia: 2.7%
- Central Asia: 2.3%
- Southeast Asia: 1.7%
- Middle East: 2.3%
Results: Emergency contraception access by sector and region

- 100% of countries have commercial sector product
- None of the African countries had a local product

% of countries surveyed with:
- locally manufactured EC product
- public sector product
- socially marketed product

- Africa: 67% locally manufactured, 33% socially marketed
- LAC: 60% locally manufactured, 53% socially marketed
- Asia: 35% locally manufactured, 29% socially marketed
Results: What factors affect EC cost?

- Countries with a local EC product had EC available at a lower cost in the private sector:
  - For countries with a local product the lowest cost EC product comprised a median of 2.7% of weekly income based on GDP compared to 5.7% for countries without a local product, p=0.01
- Africa does not have locally manufactured products
  - Availability of a socially marketed product is associated with lower prices in private sector
  - Public sector availability does not seem to be associated with lower prices in the private sector but is important for women who access EC via the public sector
- African women pay more than women in other regions
After adjusting for presence of local product, social marketing, and public sector product, those in the Africa region had EC prices which required 15 more percentage points of their weekly income based on GDP compared to those in Asia (p=0.002).
Results: Lowest cost of EC in private sector as percent of weekly income relative to GDP per capita.
Case Study: Democratic Republic of the Congo

- Limited EC in public sector
- Limited EC in social marketing programs
- Some EC available in private commercial sector
- Substantial supply chain issues
- EC associated with sexual assault and UN Minimum Initial Service Package (MISP) kits
- Access for lower-income and rural women unclear
Case Study: Nigeria

- No EC in public sector
- Excellent social marketing programs offering EC
- Plentiful EC in private sector
- Counterfeit or low-quality/unknown quality products a problem
- Access for lower-income and rural women unclear
Total Market Approach Recommendations: Global

- Support social marketing sector to invest in EC in more countries.
- Focus on quality of products on the market.
- Tap data from the private sector.
- Conduct market segmentation analyses.
Conclusions

• In many settings, EC products in the private sector are expensive as a proportion of income (based on national GDP)

• Francophone/Lusophone Africa has the most expensive products, followed by Central America

• At the country level, more products are coming to the market

• The quality of some of these products is unknown

• A total market approach that takes into account affordability for different populations and role of different sectors could improve access for women