

UN Commission on Life-Saving Commodities for Women and Children

Presentation in Paris/RHSC

2012

Introduction

- **Supporting the UNSG's Global Strategy: Saving lives through improving equitable access to life saving commodities**
- **Building on 10 Recommendations for 13 “overlooked” life saving commodities**
- **Strengthening 3 cross-cutting areas: market shaping, performance and accountability, and innovation**

Background

- **Scaling up the 10 non-family commodities could save the lives of 6.2 million women and children at an estimated cost of \$1.3 billion.**
- **Enabling 120 million more women to gain access to contraceptives between 2012 and 2020 can impact in 300,000 fewer women and 3 million fewer infants death with cost of approx. \$4 billion.**
- **Family planning programmes can save 100,000 maternal lives every year.**

1. High-impact, effective commodities

In general, high-impact commodities are those medicines, medical devices and health supplies that effectively address avoidable causes of death and disease among children and women during pregnancy, childbirth and childhood.

2. Inadequate funding

Inadequate funding means the commodity lacks the monetary support that would allow a rapid increase in its distribution and use. Selected commodities, therefore, are not funded by existing mechanisms, such as The Global Fund to Fight AIDS, Tuberculosis and Malaria, and GAVI.

3. Untapped potential

Innovation and rapid increases in product development and market opportunities (including the potential for better formulations, price reduction and improved stability of supply) could rapidly improve the affordability, availability and use of selected medicines, medical devices and supplies.

13 Life-Saving Commodities



| RMNCH Continuum of Care | Commodity | Usage |
|-------------------------|---|---|
| Reproductive health | Female Condoms | Family planning/Contraception |
| | Implants | Family planning/Contraception |
| | Emergency Contraception | Family planning/Contraception |
| Maternal Health | Oxytocin | Post-Partum Hemorrhage |
| | Misoprostol | Post-Partum Hemorrhage |
| | Magnesium sulfate | Eclampsia and Severe Pre-Eclampsia/Toxemia of Pregnancy |
| Newborn Health | Injectable antibiotics | Newborn Sepsis |
| | Antenatal Corticosteroid (ANCS) | Respiratory Distress Syndrome for preterm babies |
| | Chlorhexidine | Newborn Cord Care |
| | Resuscitation Equipment | Newborn Asphyxia |
| Child Health | Amoxicillin | Pneumonia |
| | Oral Rehydration Salts (ORS) | Diarrhea |
| | Zinc | Diarrhea |

Recommendations (10)

Improved markets for life-saving commodities

1. Shaping global markets
2. Shaping local delivery markets
3. Innovative Financing
4. Quality strengthening
5. Regulation efficiency

Improved national delivery of life-saving commodities

6. Supply and awareness
7. Demand and awareness
8. Reaching women and children
9. Performance and accountability

Improved integration of the private sector and consumer needs

10. Product innovation

Implementation Plan

Improved markets for life-saving commodities

1. Volume guarantee, demand/forecast for priority commodities
2. Create incentives for wholesalers, increase private sector channels
3. Solicit interest from countries for Innovative Financing
4. Quality survey and engage with manufacturers
5. Status of EML in countries

Improved national delivery of life-saving commodities

6. Best practices for ICT solutions
7. Marketing and communication and behaviour change
8. Establish indicators and scorcard
9. Promote national clinical guidelines

Improved integration of the private sector and consumer needs

10. Invest in R&D

Conveners for Recommendations

- 1. Shaping global market CHAI, DFID
- 2. Shaping delivery markets CHAI, Gov. of Nigeria
- 3. Innovative Financing World Bank, Norway
- 4. Quality strengthening WHO, Gov. of Nigeria
- 5. Regulation efficiency WHO, Gov. of Nigeria
- 6. Supply and awareness USAID, UNFPA
- 7. Demand and awareness USAID, Gov. of Tanzania
- 8. Reaching women and children Gov. of Uganda, SC
- 9. Performance and accountability AMREF
- 10. Product innovation PATH

Lead agencies

- Oxytocin, MgSO₄ USAID
- Misoprostol, fem. condoms UNFPA
- Injectable antibiotics SNL
- ANCS SC
- Chlorhexidine PATH
- Newborn resusc. eqp USAID
- Amoxicillin UNICEF
- ORS, zinc CHAI
- Female condoms UNFPA
- Contraceptive implants BMGF/DFID
- Emergency contraception WHO

20 Commissioners

Michael Anderson, Director-General for Policy and Global Programmes, DFID

H.E. Zainab Hawa Bangura, Minister of Health and Sanitation, Sierra Leone

MK Bhan, Secretary to the Government of India Department of Biotechnology

Heather Bresch, CEO, Mylan Inc.

Dan Brutto, President, UPS International

Ray Chambers, UN Secretary-General's Special Envoy for Malaria

Gary Cohen, Executive Vice President, Becton Dickson

Bob Collymore, Chief Executive Officer, Safaricom

Jamie Cooper-Hohn, President and CEO, Children's Investment Fund Foundation

Christopher Elias, President for Global Development, Bill and Melinda Gates Foundation

Kenneth C. Frazier, President and CEO, Merck

Julio Frenk, Chair, Partnership for Maternal, Newborn and Child Health

Teguest Guerma, Director General, AMREF

Per Heggenes, CEO, IKEA Foundation

Robert Lee, President, Shanghai Fosun Pharmaceutical Development Co., Ltd.

Hassan Mshinda, Director General, Tanzania Commission for Science and Technology

Agnès Saint-Raymond, Head of Human Medicines Special Areas, European Medicines Agency

Rajiv Shah, Administrator, USAID

Jasmine Whitbread, Chief Executive Officer, Save the Children International

Sir Andrew Witty, Chief Executive Officer, GlaxoSmithKline

Next Steps

- Abuja meeting, 14-16 October
- Recent Implant announcement
- Implementation plan
- Suggested structure