

# Webinar: Commodity Gap Analysis 2019

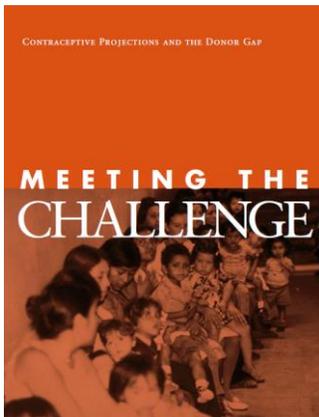
What is the CGA2019 and how can it help me?

John Skibiak, Director RHSC

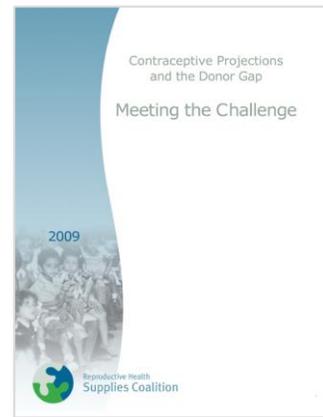
Michelle Weinberger, Technical Lead (Avenir Health)

August 14, 2019

From report to report our story is evolving to answer pressing questions. . .



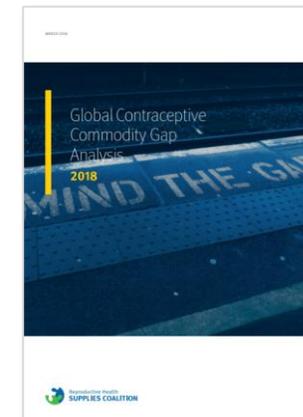
2001



2009



2016



2018

How much more must donors spend to keep pace with demand for supplies between now and 2015?

Scope:  
88 donor priority countries  
Primarily public sector



By how much will the volumes of supplies users consume, and the amount of spending needed to pay for them, change between now until 2020?

Scope:  
135 LMI countries  
Public and private sectors



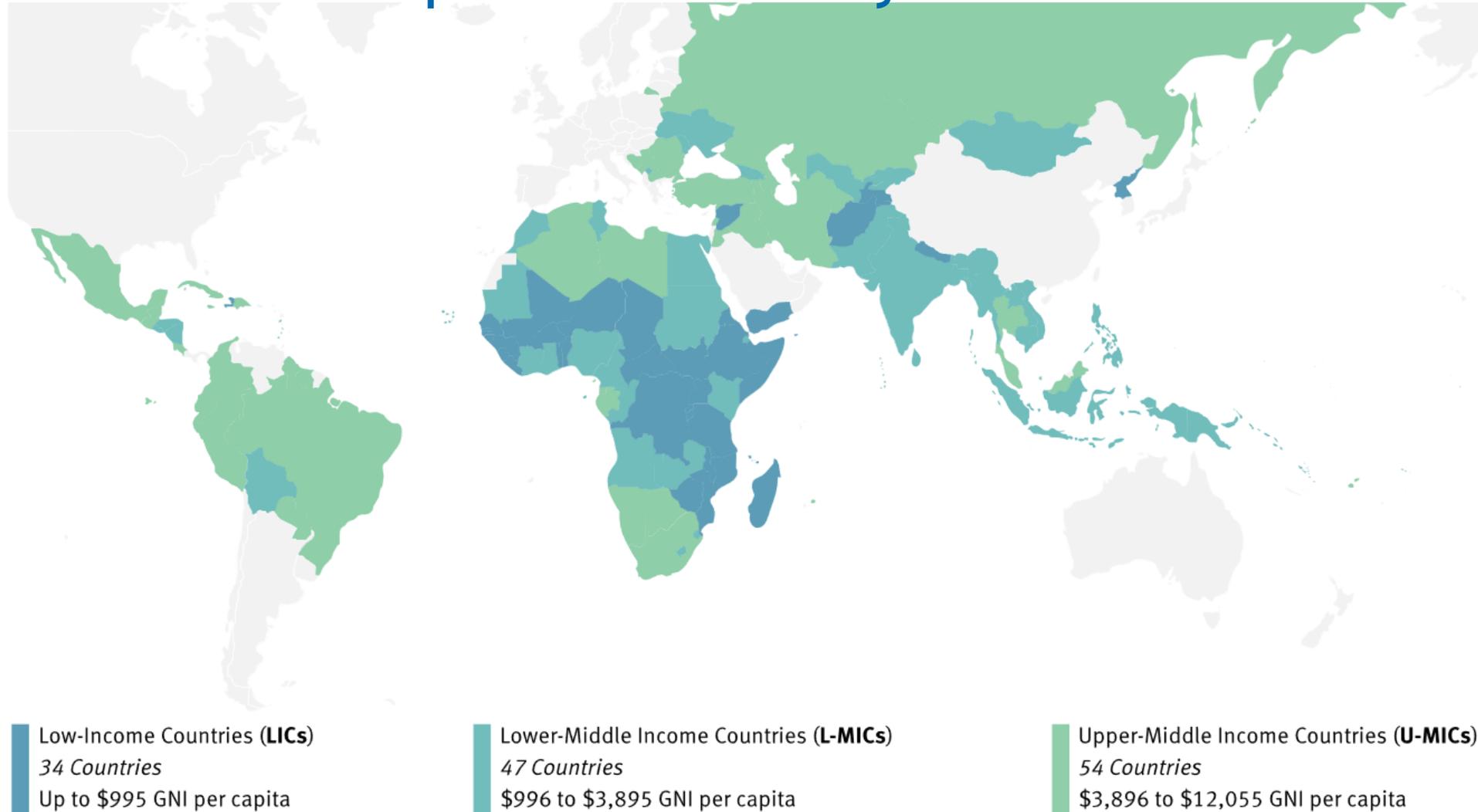
---

## CGA 2019 Additions and Highlights

- Interactive online format
- Timeframe extended to 2030
- More data sources than ever before
- Focus on differences across countries by income level
- Structured around five key themes

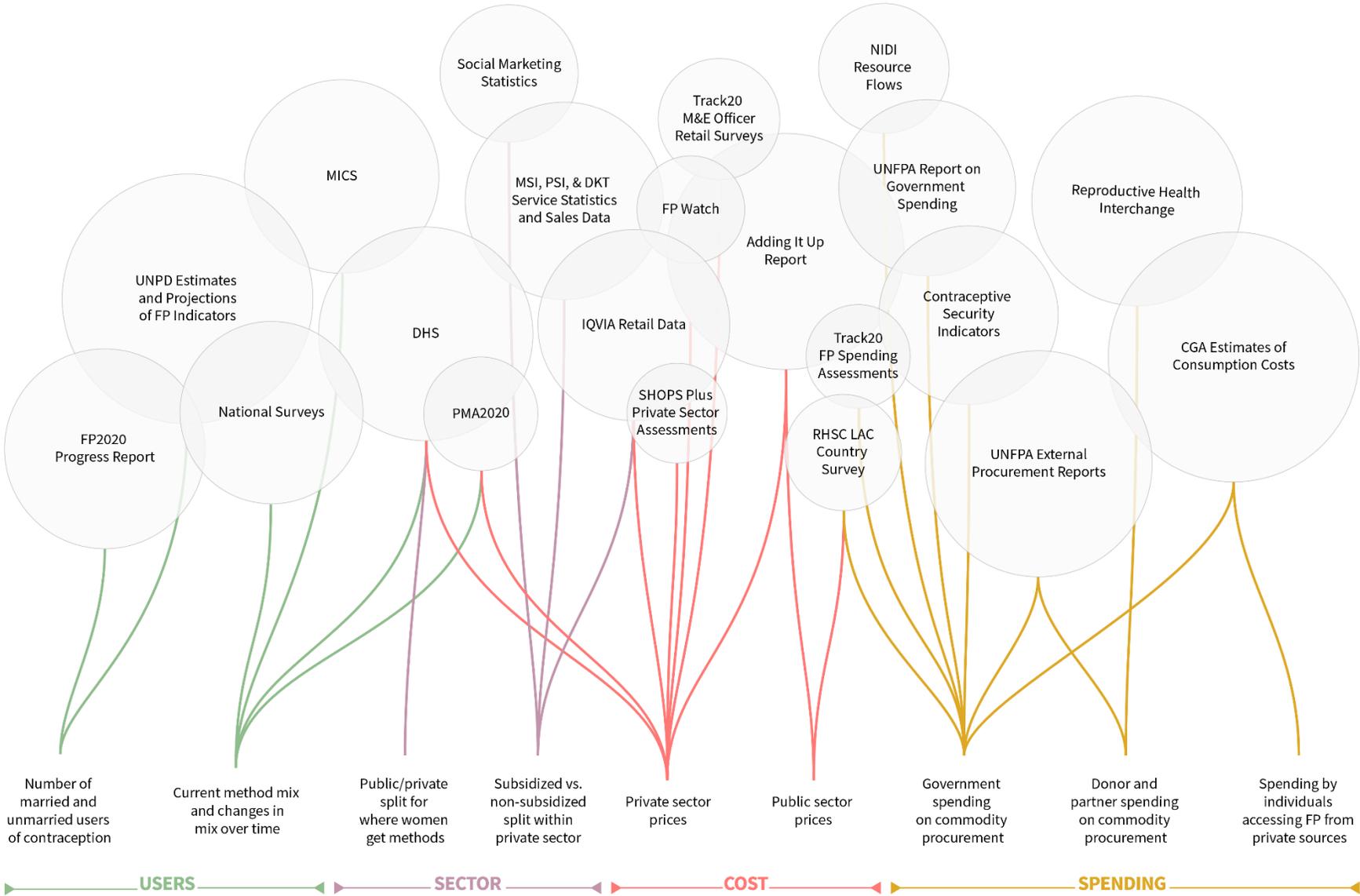
- 
- 01** Reduced or stagnant donor funding in the decade ahead
  - 02** Distinct method mix across the public and private sectors
  - 03** The significant, yet variable, role of subsidy within the private sector
  - 04** The differences between the distribution of users and consumption costs
  - 05** The possibility of significant, yet uneven, growth

# CGA 2019 is made up of 135 country stories



Note: China and Venezuela, both U-MICs, are excluded

# We use a lot of information to inform each country stories



Circle size indicates # countries

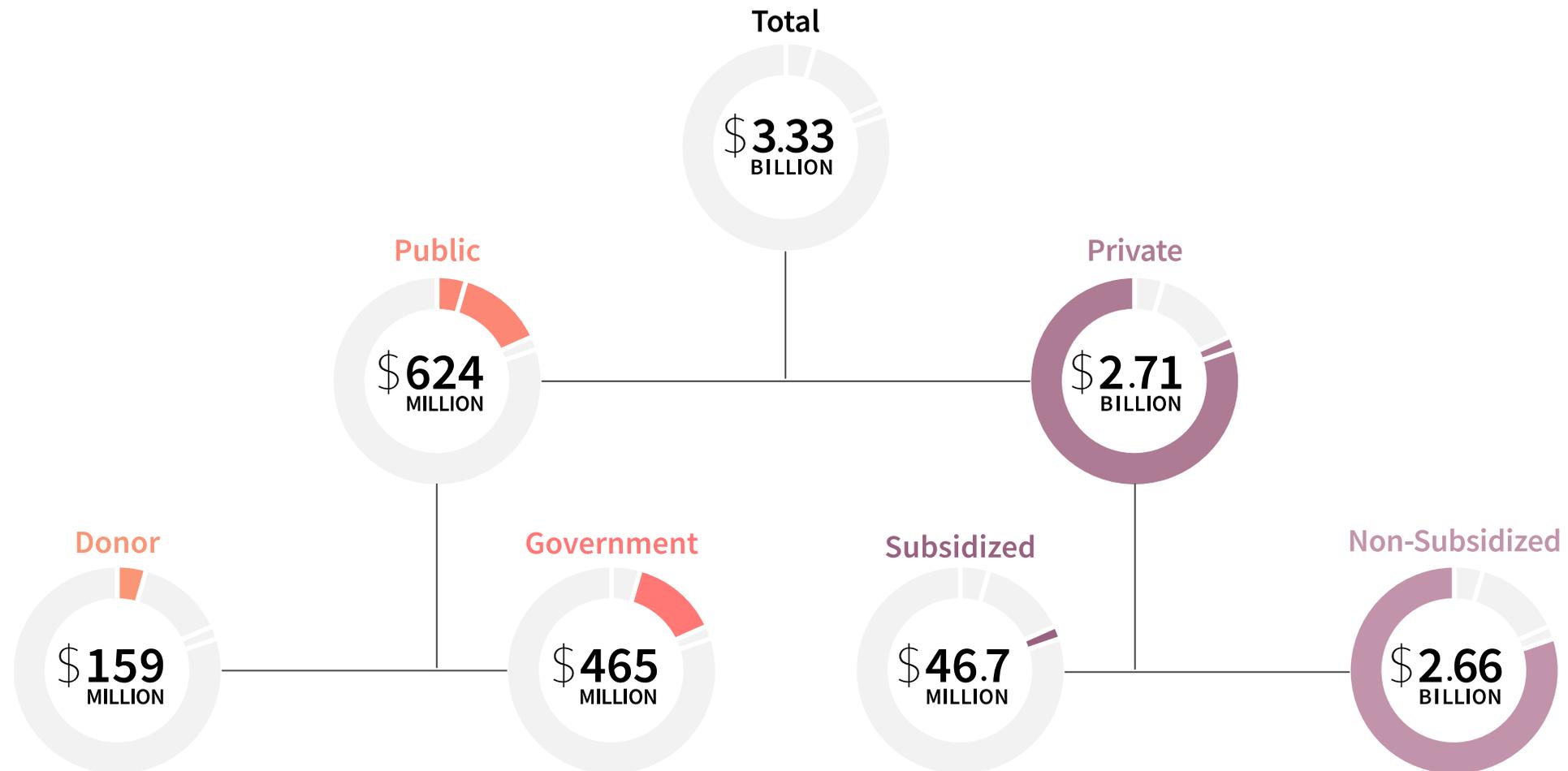
# 01

## Reduced or stagnant donor funding in the decade ahead

Conversations within the reproductive health community suggest that donor support for commodity procurement is declining and will likely continue to decline or, at best, remain stagnant in the decade to come. In the context of shrinking donor funding for commodities, it is important to understand the role donors play in different countries and what can be done to minimize the impact of limited funding on those women who need it most. Nearly half of spending within low-income countries comes from donors, and collectively the public sector accounts for 66% of spending. Looking across the three GNI groups, the role of the public sector—namely, the donor community—diminishes as income increases. Prioritizing donor funding amongst lower-income countries, therefore, will be critical, as will encouraging country governments to play a larger role in funding family planning commodities.

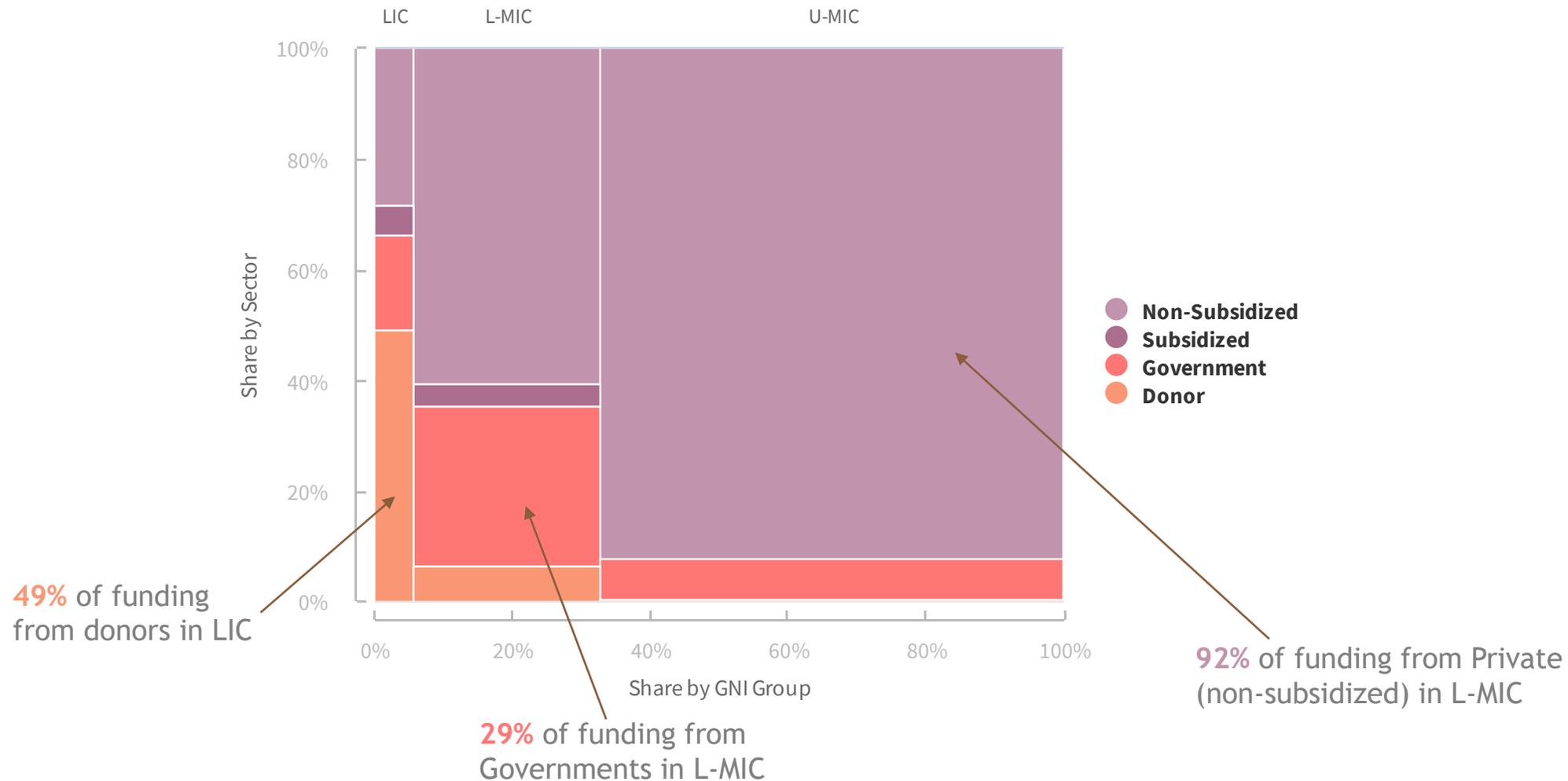
# Current spending on Contraceptive Supplies

135 low-and-middle-income countries



# Current spending on Contraceptive Supplies

Segmented by GNI group and sector



---

If spending stays at current levels while the number of women using contraception grows a funding gap will emerge. . .

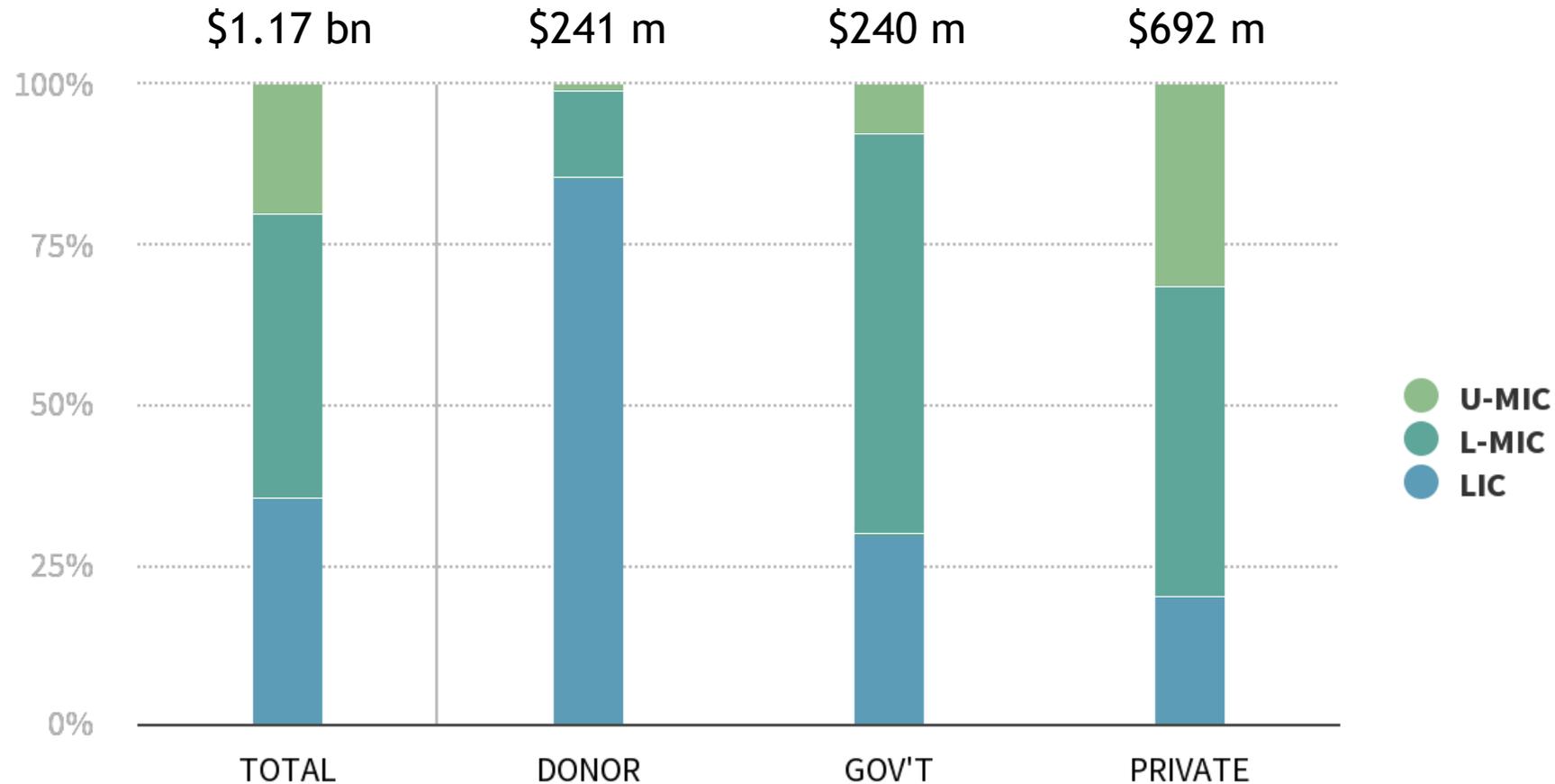
**\$178 million** by 2020

**\$266 million** by 2025

**\$1.17 billion** over five years (2021-2025)

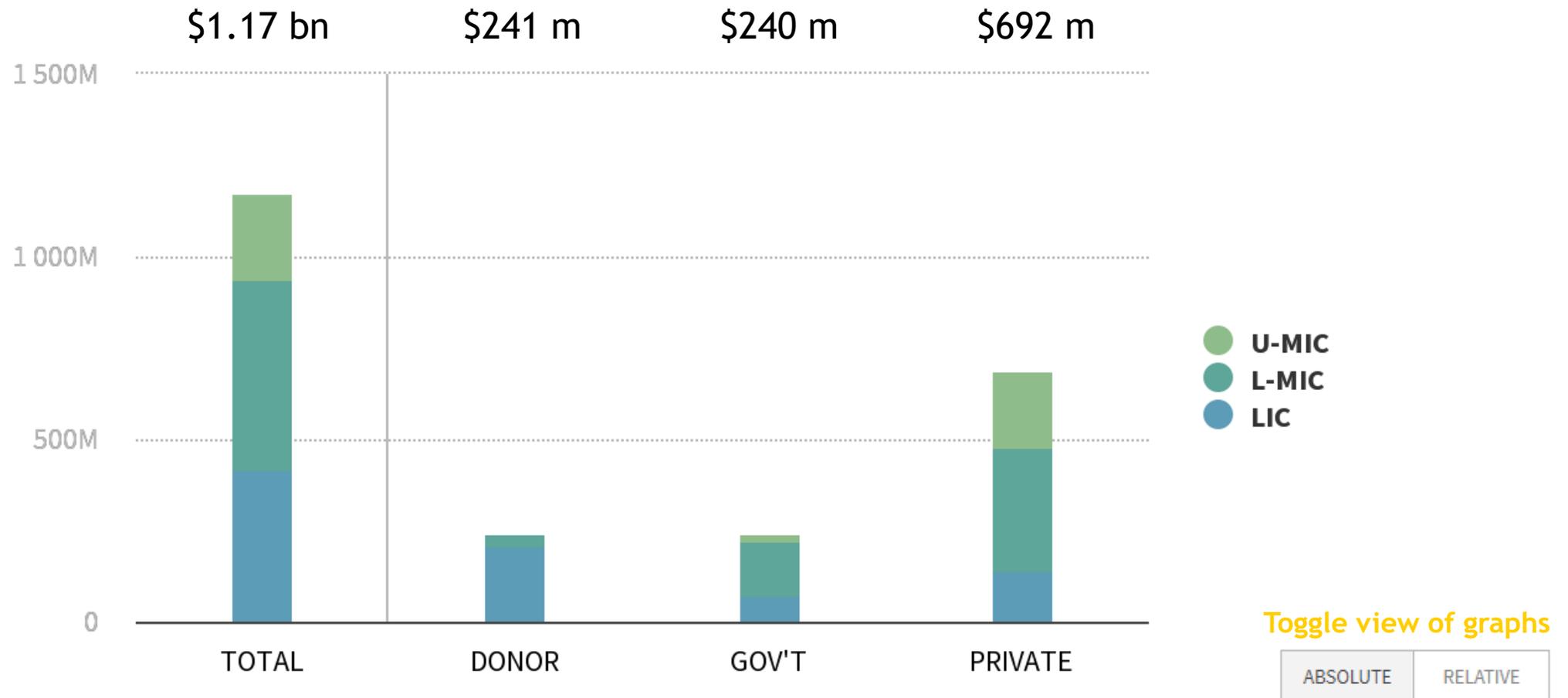
# Cumulative contraceptive supplies funding gap (2021-2025)

Comparison by sector and GNI group



# Cumulative contraceptive supplies funding gap (2021-2025)

Comparison by sector and GNI group



# 02

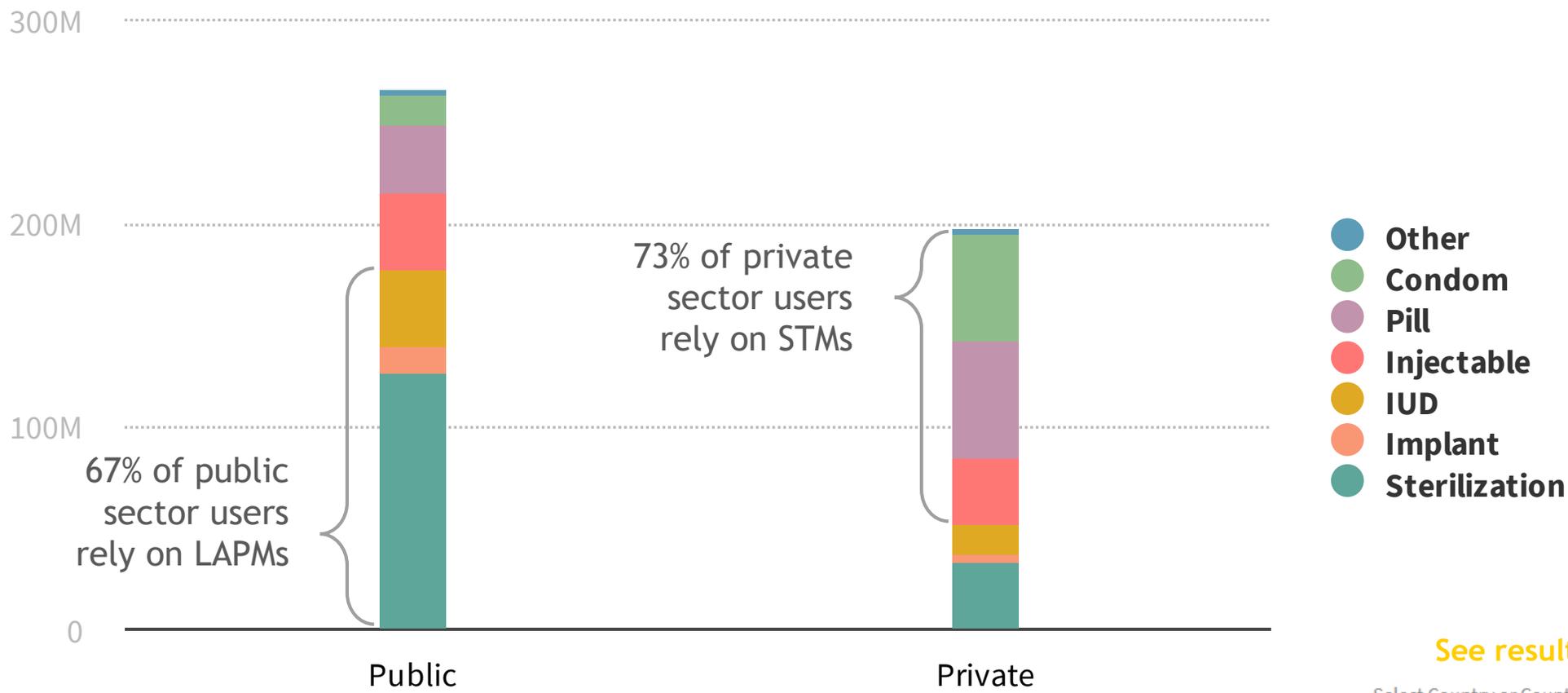
---

## Distinct method mix across the public and private sectors

Both the public and private sectors play important roles, yet the composition of each is very different. While the public sector primarily provides long-acting and permanent methods (LAPMs), the private sector almost exclusively provides short-term methods (STMs). This means the two are not interchangeable. We must take caution in assuming that in the context of shrinking donor funding, the private sector can simply take the place of what donors are supporting. Work is needed to ensure that, as the funding landscape shifts, women are still able to access a full range of contraceptive methods.

# The public and private sectors play very different roles

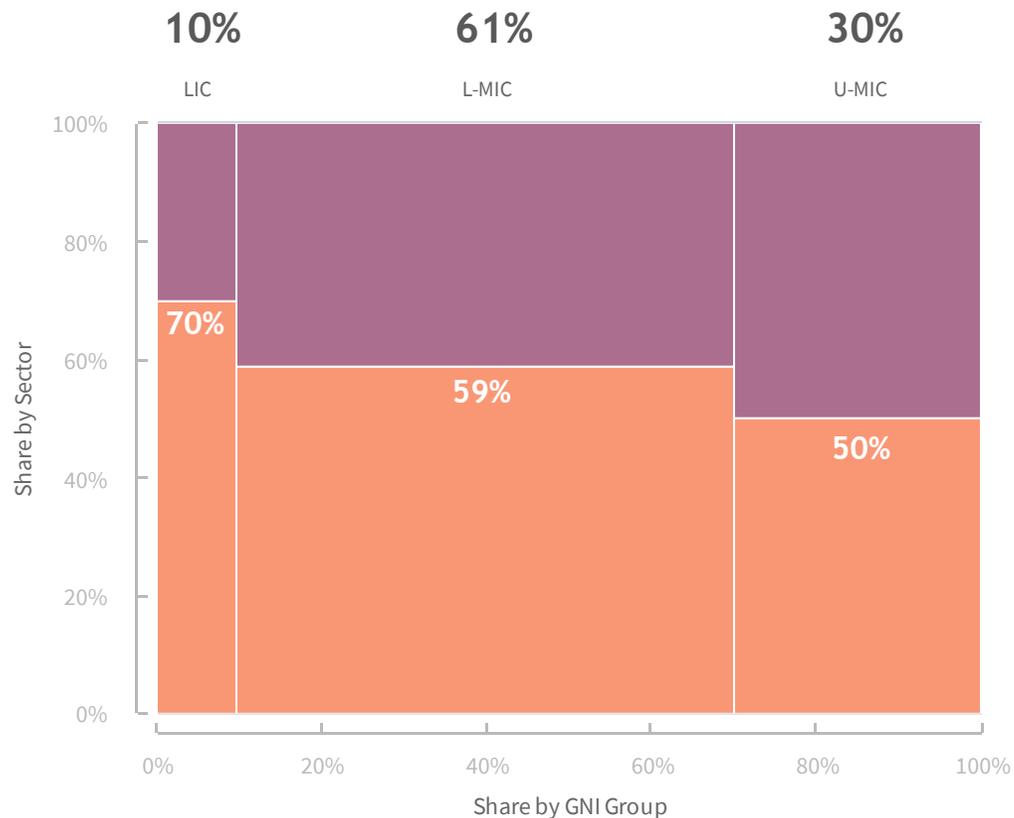
135 low-and-middle-income countries, 2018



See results for any country!

Select Country or Country Group  
All countries

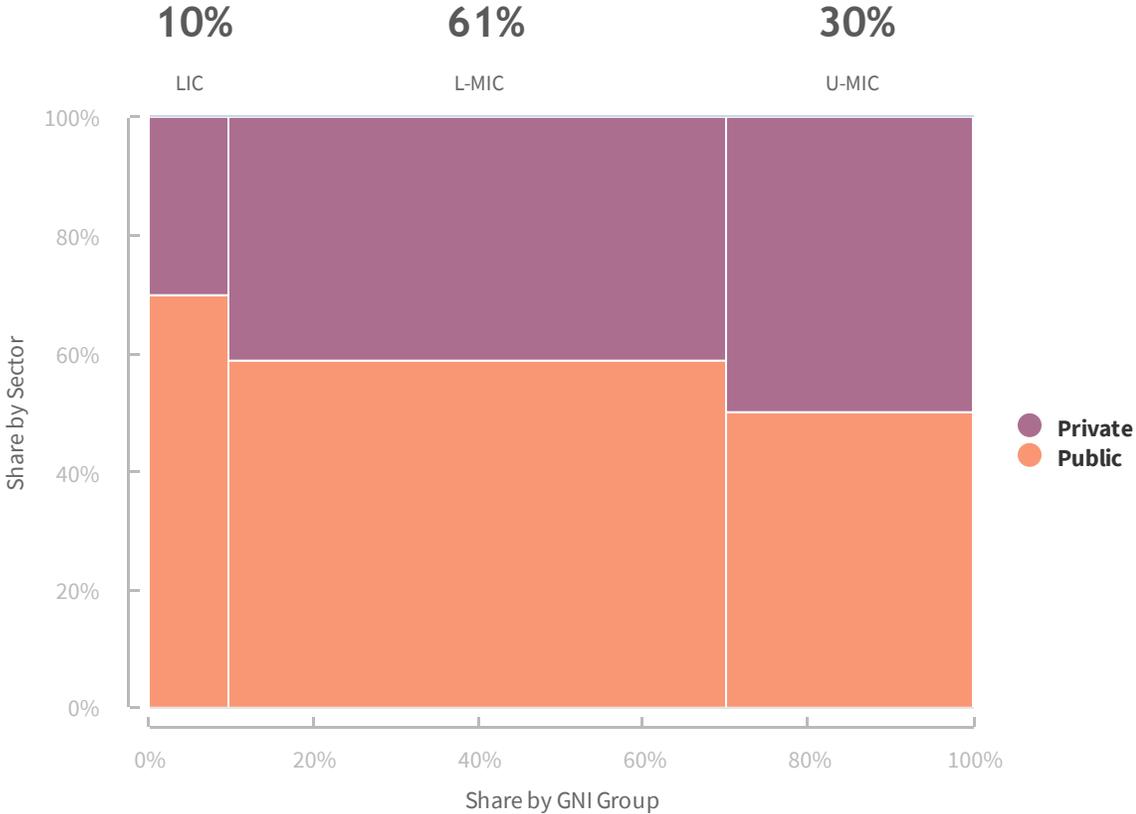
## Variation in use and sector by GNI, 2018



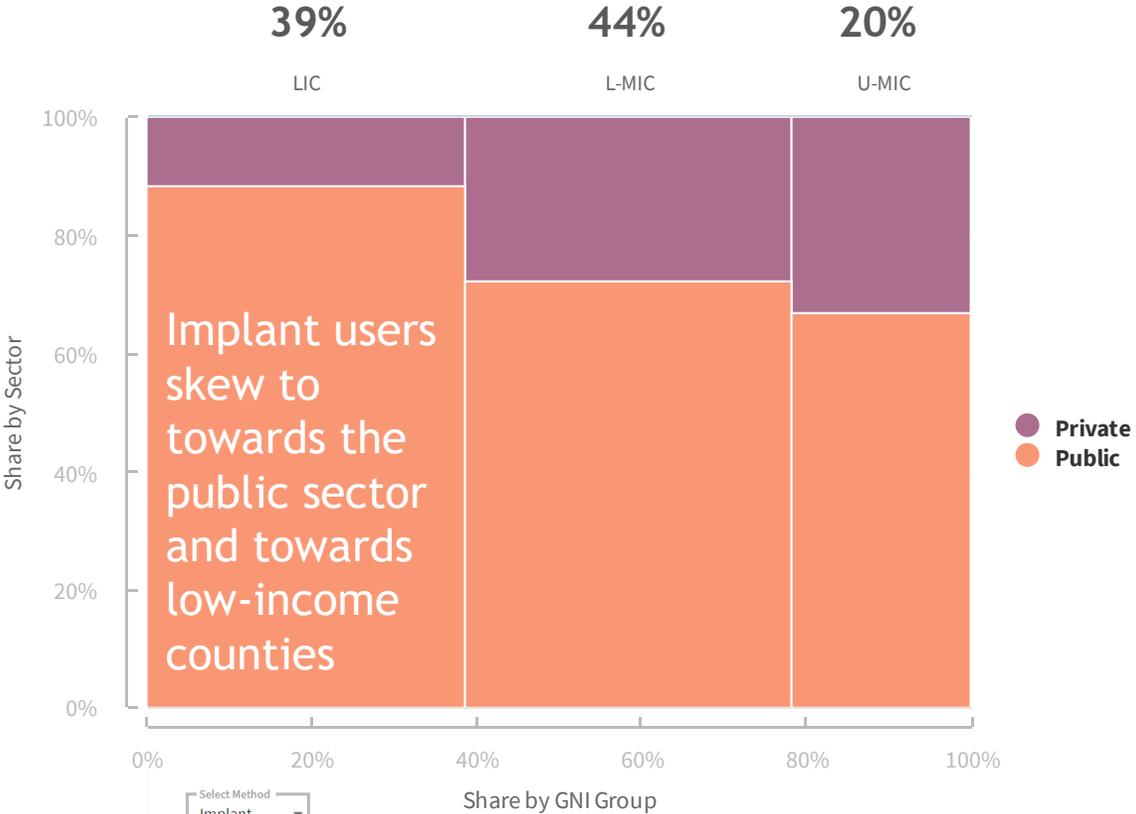
The public sector plays an increasingly smaller role in each GNI group

# Variation in use and sector by GNI, 2018

### All modern methods



### Implants



Select Method  
Implant  
All methods  
Sterilization  
Implant  
IUD  
Injectable

Explore by method!

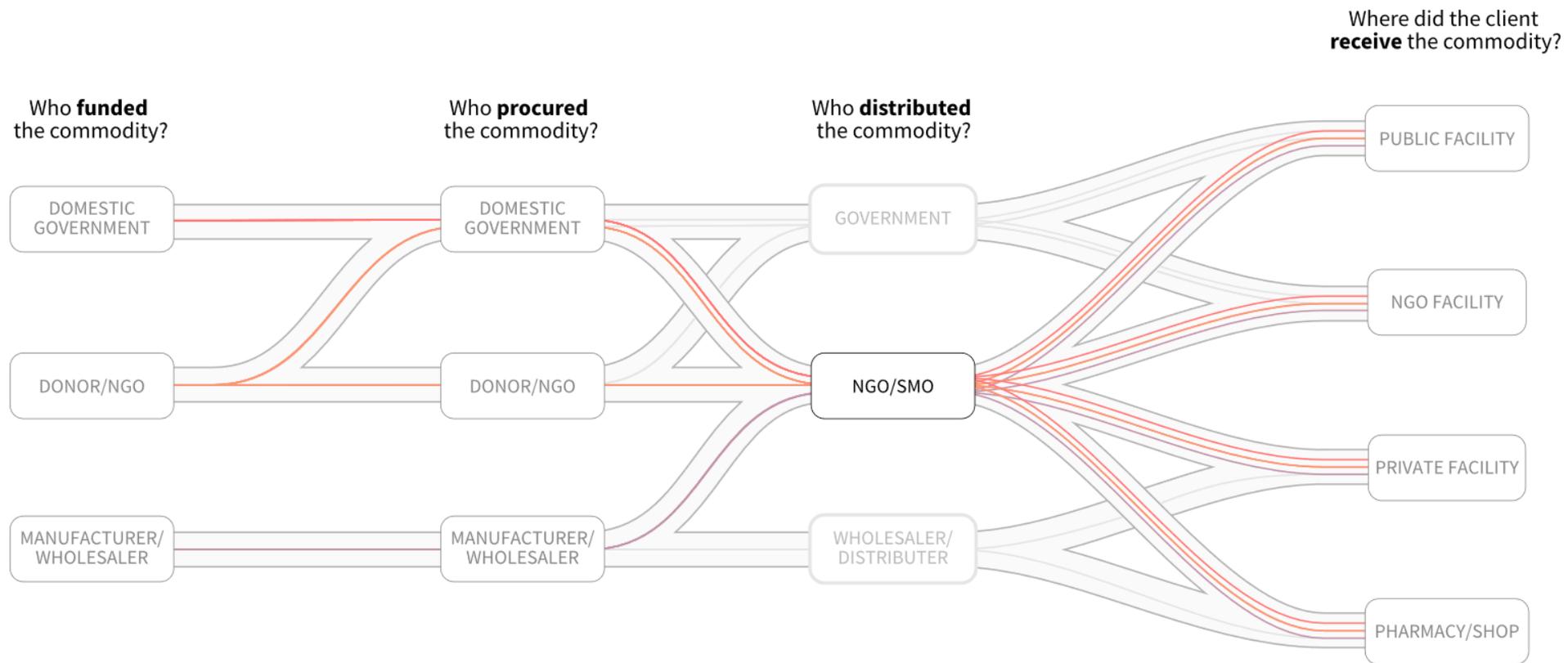
# 03

## The significant, yet variable, role of subsidy within the private sector

The previous CGA sparked debate over the relative role of public sector funding within the private sector, specifically as a result of subsidized socially marketed products. Building on new data and insights shared by DKT, MSI, PSI, and SHOPS Plus, this report distinguishes between users who purchase supplies from private sector entities at subsidized prices and those who pay non-subsidized (market-value) prices. This allows us to present two different financing models: one that is purely market driven, the other that relies on support from the public sector. The results indicate that across the 135 LMICs, only a small share of private sector users (12%) receive subsidized products. In terms of the three GNI groups, subsidized private sector commodities play the largest proportional role within low-income countries. Conversely, non-subsidized private sector commodities play the largest role within upper-middle-income countries, where they account for half of all users.

# Identifying the role of subsidy in the private sector

Setting aside distinctions between social marketing and commercial sectors to focus on the supplies themselves.

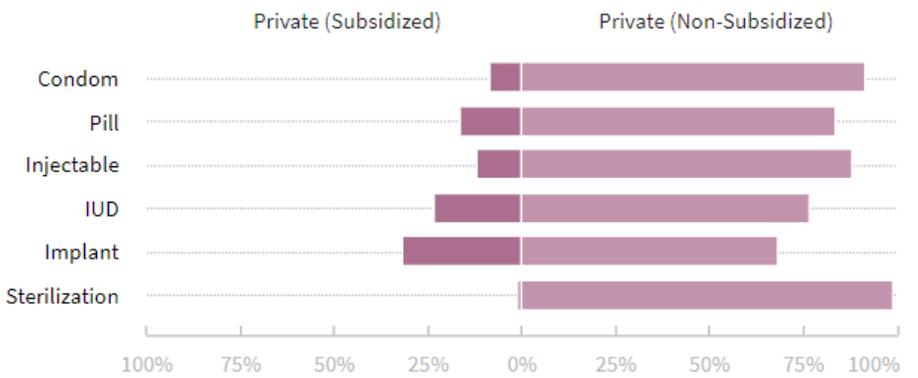


The commodities clients receive at any facility could be free, subsidized, or non-subsidized (market price).

# Large variation in the role of subsidy in the private sector

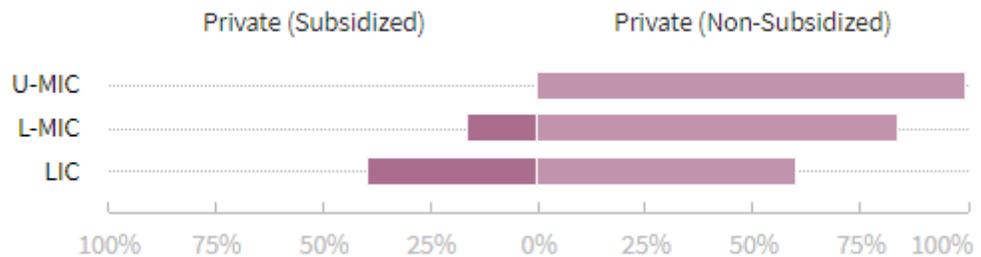
1

**Method:** subsidized product plays greatest role for implants and IUDs



2

**Income level:** subsidized products play largest (proportional) role in low-income countries



3

**Method and Income level:** larger role across all methods within low-income countries



See results for any country!

Select Country or Country Group

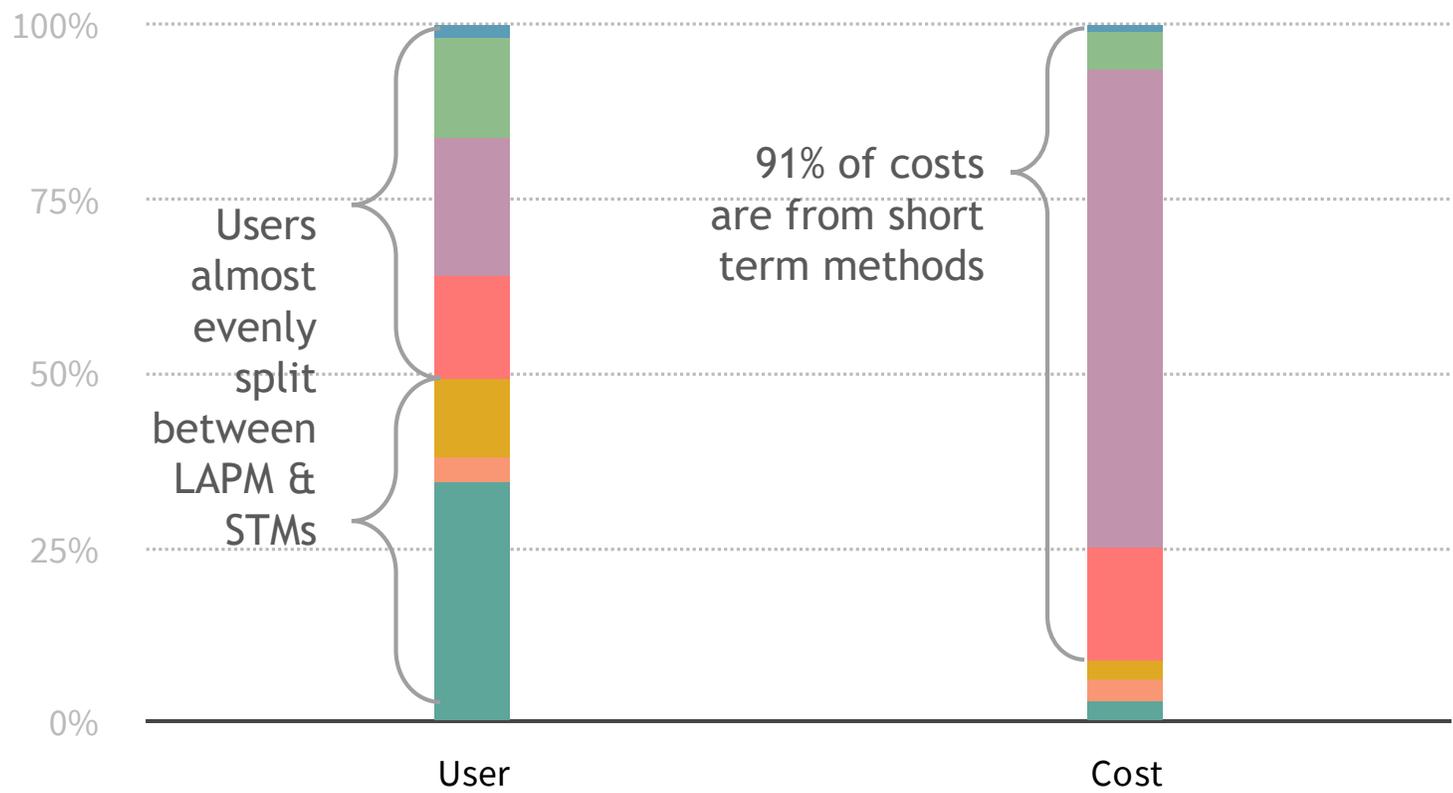
# 04

## The differences between the distribution of users and consumption costs

The results of this analysis demonstrate that cost is not a function of use. Rather, consumption costs are influenced by a number of factors, such as frequency of units consumed for each method, differences in cost between methods, and the variation of the cost of each method from country to country. Brazil, for example, accounts for only 8% of users, yet makes up 30% of the total consumption cost. By contrast, India accounts for 30% of all users across the 135 LMIC but makes up only 7% of consumption costs. Understanding how the landscapes of use compare to those of cost can help ensure all women can make their own choice from a full range of contraceptive methods.

# Use vs cost by method, 2018

135 low-and-middle-income countries



- Other
- Condom
- Pill
- Injectable
- IUD
- Implant
- Sterilization

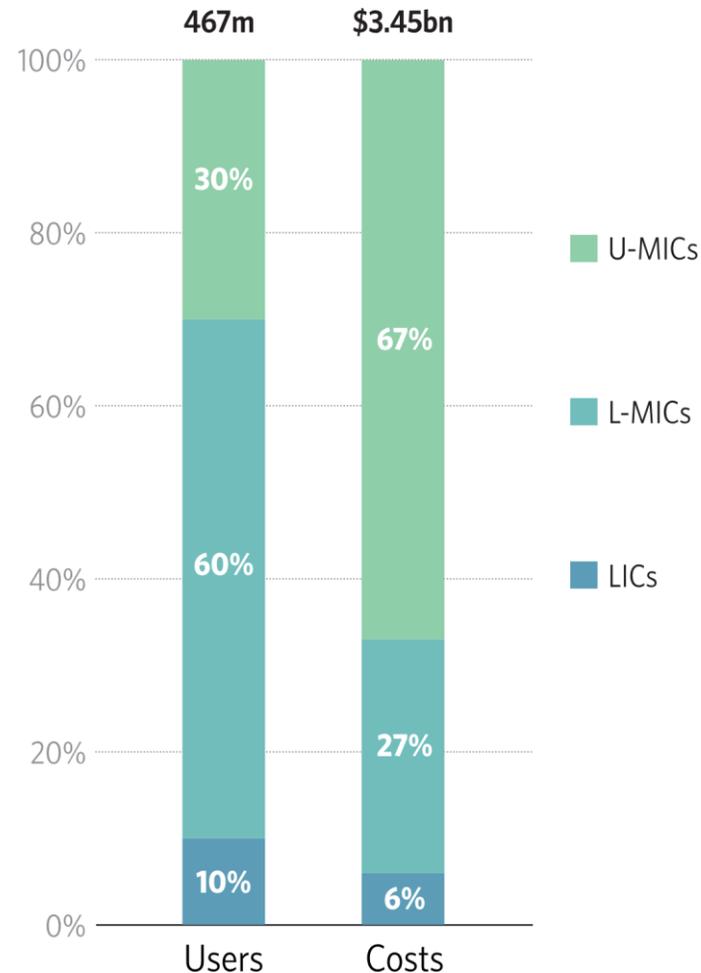
See results for any country!

Select Country or Country Group  
All countries

## Use vs cost by GNI group, 2018

**Most users live in L-MIC**

**India** accounts for nearly half of the L-MIC users and 30% of global LMIC users.



**Most costs come from U-MIC**

**Brazil** accounts for 30% of the global supply cost despite only accounting for 8% of users.

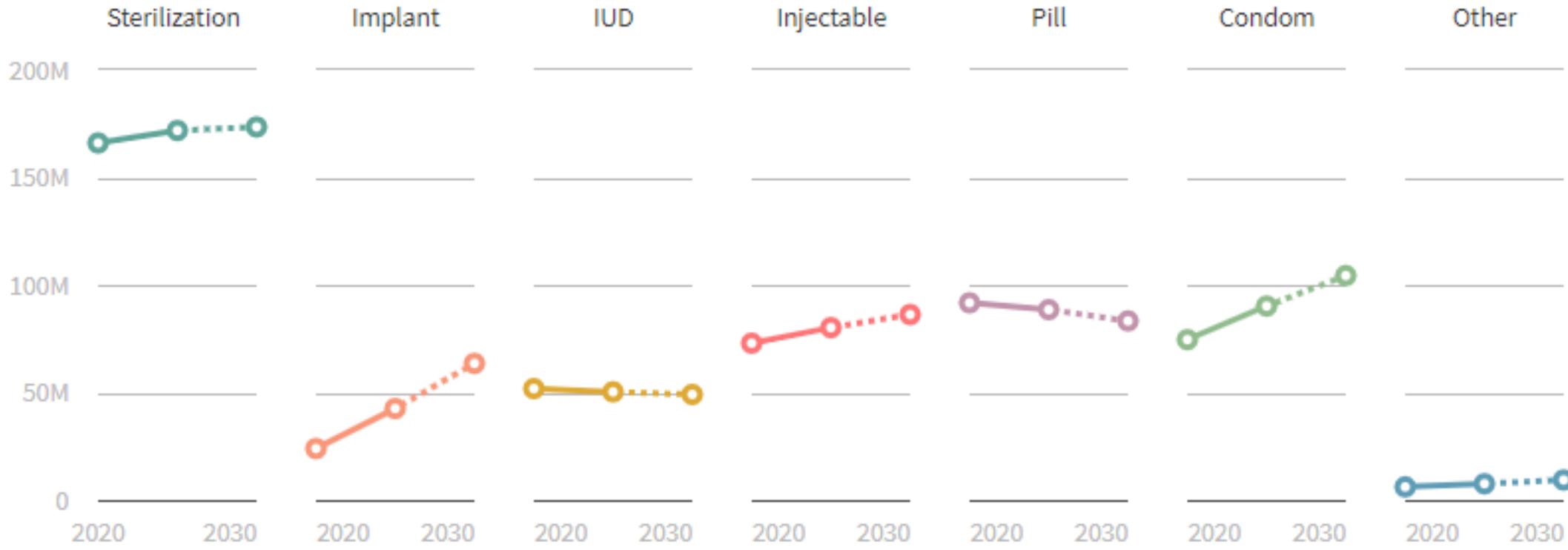
# 05

## The possibility of significant, yet uneven, growth

Over the coming decade, the total number of women using modern contraception will grow by more than 80 million. This growth, however, will not be evenly distributed across countries. Low-income countries will experience the most rapid growth in relative terms, while lower-middle-income countries will experience the largest increase in absolute terms. The efforts needed to sustain these different growth patterns will vary across countries, with some requiring additional money and more effort than others.

# Total number of users will continue to grow, but gains are not even across methods

135 low-and-middle-income countries

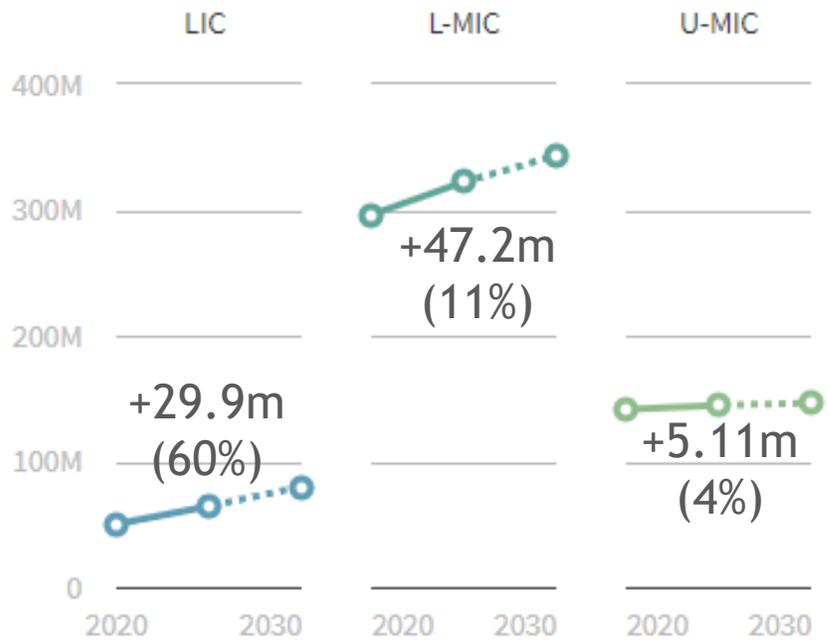


See results for any country!

# Gains will be most rapid in the low-income countries

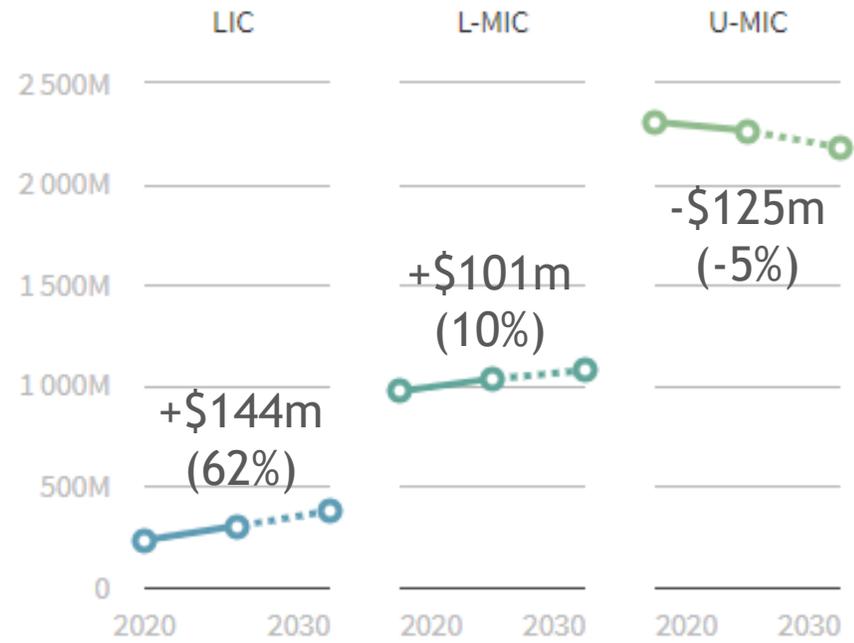
### Change in Users, 2020-2030

Comparison by GNI Group



### Change in Consumption Cost, 2020-2030

Comparison by GNI Group



Select Method  
All methods ▼

See results for any method!



---

## Getting what you need from the CGA 2019

CGA 2019 provides information to understand the **current situation** and **potential future scenarios** in order to inform key discussions.

The report itself does not give the answers, but rather can provoke discussion and ensure that we have the correct understanding of what is already happening.

# What can you get from the CGA 2019?

## Geographies



Results for the full set of 135 low-and-middle income countries

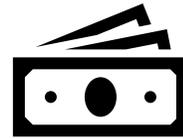


Results for geographic regions or select donor priority groups (e.g. USAID's priority countries)



Results for specific countries

## Results



Spending & Gaps\*

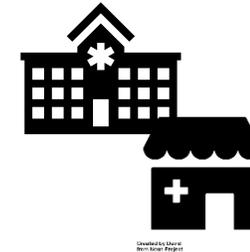


Users

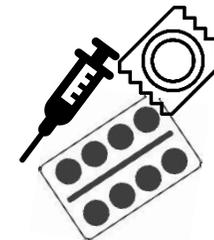


Costs

## Disaggregation



Sector

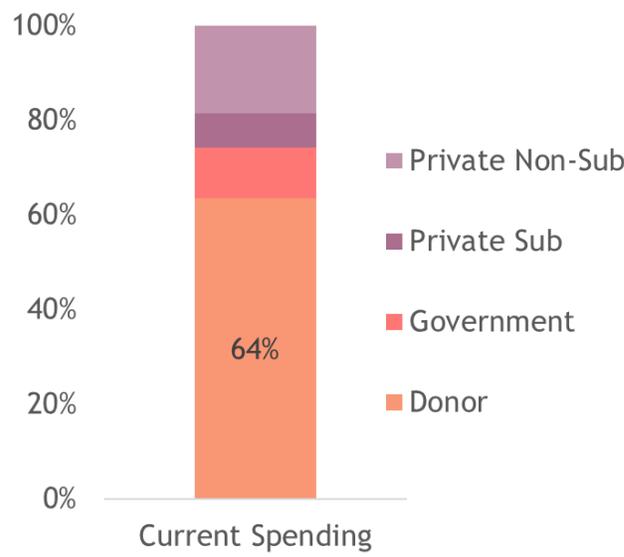


Method

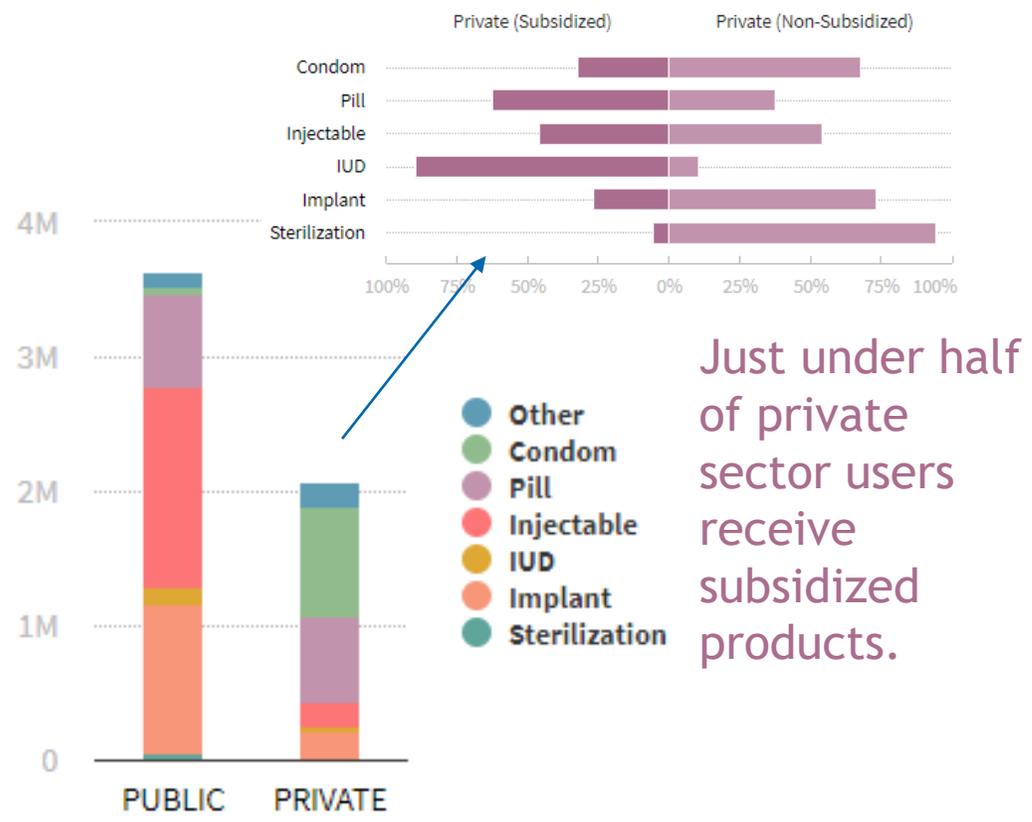
*\*not available by country*

# Example: using CGA 2019 to inform advocacy efforts to sustain donor financing in the Ouagadougou Partnership

**1** FP commodity financing is highly donor dependent  
(Theme 1)



**2** Large role of public sector  
(Themes 2 & 3)

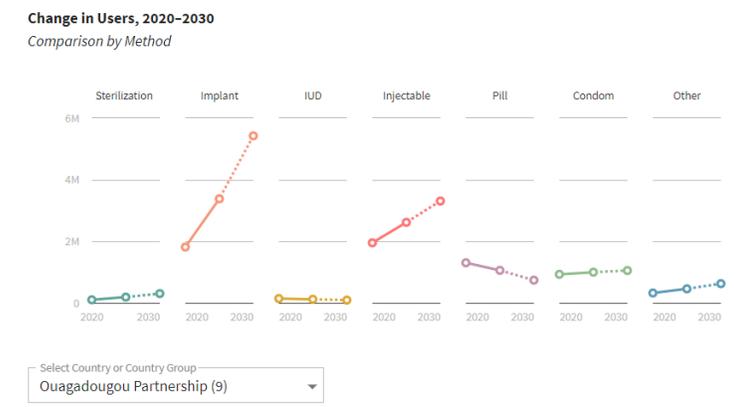


Just under half of private sector users receive subsidized products.

**3** Rapid increases in use & cost projected  
(Theme 5)



76% increase in users (+4.98 million) from 2021 to 2030

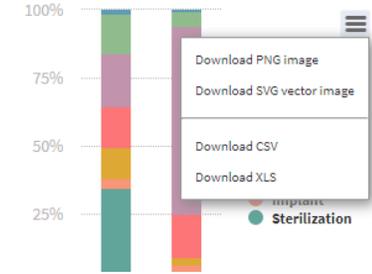


70% increase in costs (+\$22 million) from 2021 to 2030



# How to get the data you need

<https://www.rhsupplies.org/cga/>



Download charts!

- 1) Interactive tables and graphs: *embedded into the report itself*

Select Country or Country Group  
All countries ▼

Select Sector  
All sectors ▼

Select Method  
All methods ▼

- 2) Data Annex: *detailed results tables for selected country or country group*



Reproductive Health  
SUPPLIES COALITION

CGA<sup>2019</sup>

Data Annex



- 3) Summary Briefs (coming soon!)



---

# Q & A

Please type your questions or comments in the chat box. If we are not able to get to all the questions during the webinar, we are happy to follow up with you after via email.

For additional questions you can contact Michelle Weinberger:  
[mweinberger@avenirhealth.org](mailto:mweinberger@avenirhealth.org)



Thank you!

Explore CGA 2019 at  
<https://www.rhsupplies.org/cga/>