# Session 2: Building Resilient SRH Supply Chains during COVID-19 and Beyond: A Roadmap for SRH Community Action

Moderator: John Skibiak; Panelists: Alexis Heaton, JSI, and Johnson Anyona, inSupply Health

From the panelists: Thank you for all of the great questions. We've tried to answer here but we would be happy to have follow up conversations with anyone to go into more detail.

Questions from chat box:

## From Ashley Jackson

Thanks, Alexis and Johnson, for the excellent presentation. Was this data representative of private sector FP outlets as well as public? I wonder if access to FP was more disrupted in small, private outlets that serve as a bigger source of supply for fast-moving consumer goods such as condoms. Apologies if you already addressed this and I missed it!

We did not have a lot of private sector data so cannot say much quantitatively. In Kenya we heard from some partners serving the private sector that they saw similar demand trends of dips in the first ~2-3 months of pandemic response and then sales returning to or exceeding prepandemic levels for many products.

## Jeffrey Jacobs

What is the Coalition's position on "localizing" the manufacturing of SRH products, recognizing that economies of scale and subsequent pricing pressure may be a negative consequence of this potential shift?

The Coalition has not taken a formal position on this issue. As a study team we asked whether local or regional production might make sense for specific SRH products, under certain circumstances, but certainly not for all. Therefore, one of the recommendations to come out of this was to scope opportunities for local and regional manufacturing and assess when and specifically for what products that might be an appropriate option.

## Saumya Ramarao

Thanks Alexis and Johnson. Did you see any indication of "nationalism"? For example in availability of APIs If so, could you comment on the role that RHSC can play in smoothing out such challenges.

At the beginning of the pandemic we all heard about export restrictions for many health products that limited the movement of critical goods, but through the course of this work we did not hear of anything specific to APIs indicating that as a source of disruption; the causes were more related to manufacturing capacity and freight availability.

## Ricardo Vernon

if no disruptions were seen in 2020 because all the orders had been made, have there been disruptions in 2021?

I think that is the concern, both in terms of freight and financing. We know that freight continues to be a limiting factor, both in terms of availability and costs, and therefore is delaying shipments

and increasing costs along the supply chains. Similarly, we are concerned about less funding (donor, government, and individual) being available in 2020, due to costs associated with COVID-19 response.

## Ashley Jackson

Good question, Ricardo! The trickle-down effects of manufacturing disruptions may not have hit yet. We know some SRH suppliers are still operating at reduced capacity but from what we understand, at least now that reduced capacity can be planned for in terms of communicating lead times to customers. The big question mark is what is yet to come in terms of further lockdowns and disruptions that could affect manufacturing and distribution of products in different geographies.

# Saskia Husken

Thanks for this excellent presentation. Our partners in particular in Ethiopia and Kenya report increases in GBV, unintended pregnancies, and consequently a rise in unsafe abortions, due to the stay-at-home Covid-restrictions. Did you find this reflected in increased demand for commodities such as EC and safe abortion products?

Reviewing the consumption data via the public sector, there does not appear to be any significant change in Kenya with ECs (through September 2020), and a slight dip in Ethiopia. Kenya did not report abortion-related products, but combi-pack consumption did decrease in Ethiopia in 2020 compared to 2019, but this decline started in Quarter 4 2019, pre-COVID-19.

# Mukul Taparia

do we anticipate changes in method mix due to COVID? Especially if we see 2nd and 3rd waves?

Based on what we saw in the data from the 6 countries we looked at in 2020, there were some shifts from shorter term methods to longer terms methods, which at times and for some countries, was different from what was expected based on national guidelines issued around pandemic response (where guidelines recommended shifts to lower-contact methods). Knowing the pandemic continues to affect different geographies in different times and to different degrees it would be difficult to predict generally how future waves will affect demand, it would require more of a context-specific analysis.

## Martha Brady

What is the status of availability of COVID vaccine in these countries and are immunizations I'm not sure if this question got cut off so apologies if I am not answering fully; but we did not include vaccines in the scope of this work.

## Munish Mehrotra

The trickle effect of disruptions during early stage of pandemic are being felt right now more on logistic aspect as the supply chain due to shortages of containers and huge increase of shipping costs. That's exactly right - the mismatch of supply and demand for containers and port congestion is a major problem; and that coupled with more general economic downturns and

funding constraints is a concern as freight costs increase, adding costs all along the supply chain.

## Sarah Rich

Thank you so much, Alexis and Johnson. Can you share your thoughts on how we can leverage expertise on emergency preparedness from the humanitarian community to address some of these challenges?

Preparedness activities, such as those that provide greater resilience and agility of the supply chains by investing in supply chain structures, policies, procedures, and capacity, are some of the same ones recommended for greater resilience generally.

## Andre Shongo

another recommendation from this presentation in my understanding is to propose to RHSC to work together in each country with the government but also with a NGO that can hold the leadership when the gouvernement MoH is committed to fight against new outbreak Thank you for that suggestion- we agree that would be a useful role to play.

# Megan Christofield

^I second this recommendation from Andre Shongo Diamba! Thank you!