Contraceptive Commodity Funding During the COVID-19 Pandemic

Analysis of funding trends and potential pandemic impacts in low- and middle-income countries

Summary Presentation | February 2023





Key Findings



COMMON LESSONS TO STRENGTHEN FINANCING IN THE FUTURE INCLUDE:

- Increase domestic resources
- Learn from other programs
- Develop the private sector
- Improve supply chain management



KEY INSIGHTS INCLUDE:

- Resilience factors
 protected against funding
 drops; funding already
 allocated, leveraging new
 funding, manufacturer
 agreements in place
- SRH community reacted
 with improved
 coordination and faster
 decision making; should
 be maintained in the
 future
- Olobal economic and social challenges, some as a result of COVID-19 and some external, may make increased funding difficult

Background and Methods

Background

- Analysis commissioned by RHSC to assess:
 - Recent trends in public sector funding for contraceptive commodities
 - Potential impacts of COVID-19
- Builds on recent roadmap: <u>Building resilient sexual and reproductive health</u>
 <u>supply chains during COVID-19 and beyond: a community roadmap for action and technical findings</u>
- Analysis uses available data from several sources to examine trends in funding for commodities before and during COVID-19

Understanding Contraceptive Funding

Multiple funding sources

- Domestic government funding
- Donors to country: biggest donors of contraceptive funding are USAID and UNFPA
- Individual users of contraceptives
- Private organizations e.g. insurance companies
- Many factors impact contraceptive funding (see figure 1)
- In recent years:
 - Increasing desire and attempts to diversify funding sources and reduce reliance on donor funding
 - Increased national government budget commitments to fund contraceptives

Figure: Existing (pre-pandemic) factors impacting contraceptive funding

- Year-on-year funding fluctuations are the norm
- → Inflation and changing exchange rates



- Shifting balance in donor funding
 UNPFA increasing share of funding,
 - Introduction of National Health Insurance Schemes
- Changes in methods
 e.g. more products available, rapid
 growth in demand for implants
- Manufacturing contraints
 e.g. production limitations on some
 methods

- Humanitarian crises and regional/internal conflicts that divert contraceptive funding
- Ountries reducing overseas development assistance
- Increasing wealth in LMICs, increasing ability of national governments to fund contraceptives
- National economic, social and political changes

How might COVID-19 impact on FP commodity funding?

Figure: Theoretical framework of potential impact of COVID-19 on contraceptive funding **ENABLING ACCESSIBILITY & SUPPLY CHAIN** ENVIRONMENT DEMAND Changes in Funding for Production demand & slows down COVID-19 accessibility of services Shipping Economic Changes in mCPR delays shifts & method mix Need more/fewer Funding shifts Increase costs commodities Less money for Same money buys less Different financing needs contraceptives Shifts in method mix Economic downturns Unable to fulfill orders Costs inc/decrease Less money for Money can't depending on changes contraceptives be spent

Method Overview

- Quantitative data analysis of four data sources for trends in public sector contraceptive funding
 - RHViz/VAN (RHSC)
 - <u>Family Planning (FP) Market Report (CHAI and RHSC)</u>
 - Contraceptive Security (CS) Indicators Survey (USAID)
 - National Budget Allocation and Spending (UNFPA)
- EXAMINED
 3 CHANGES IN
 FUNDING TRENDS

 1 OVERALL PUBLIC SECTOR FUNDING
 DONOR FUNDING

 3 DOMESTIC FUNDING
- Qualitative data analysis from 40+ interviews and discussions with stakeholders
 - Global level (donors, contraceptive manufacturers, international non-governmental organizations)
 - National level (Kenya, Uganda, Zambia): to develop three country case studies to represent a range of settings and trends observed in the quantitative data analysis

Main limitations

- Quantitative data differences in how funding is captured in each data source may limit comparability; most data sources had only one year of data during the pandemic period
- Qualitative data number and range of stakeholders able to participate within the timeframe.

Funding Trends

- Compared trends in funding at a global and national level 'pre-pandemic' (2017-2019) to trends from 2019 onwards
- Funding situation classified as 'improving', 'worsening' or 'no/little change'

Box: Trend Categories





Improving is used to describe a positive change in the national funding situation for contraceptives from 2019 onwards, compared to the trend in 2017-2019. This includes countries where:

- Funding was decreasing pre-COVID-19, but reversed during the pandemic and began to increase
- Funding was decreasing pre-COVID-19, but the trend of decreasing funding slowed during the pandemic
- Funding was already increasing pre-COVID-19, and this increase accelerated



Worsening is used to describe a negative change in the national funding situation for contraceptives from 2019 onwards, compared to the trend in 2017-2019. This includes countries where:

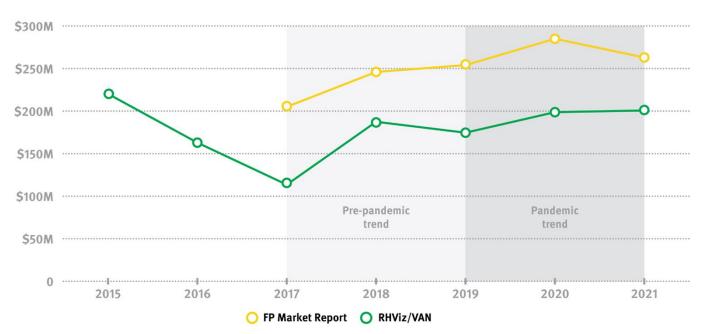
- Funding was increasing pre-COVID-19, but reversed during the pandemic and began to decrease
- Funding was increasing pre-COVID-19, but the trend of increasing funding slowed during the pandemic
- Funding was already decreasing pre COVID-19, and this decrease accelerated

Countries where there was little or no discernible change in funding were categorized as 'no/little change'.

Findings: Overall Public Sector Funding Trends

Aggregate Trends

Figure: Trends in overall public funding for contraceptives, by data source



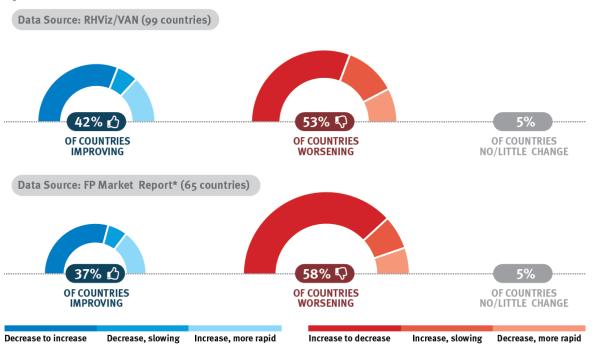
No apparent substantial decrease of contraceptive funding during the pandemic period

According to stakeholders interviewed:

- Most early concerns about major, sustained supply chain disruptions and stock-outs generally did not eventuate
- Overall funding remained relatively stable because: 1) funding was already committed (at least for 2020), and 2) other donors stepped in to fill funding gaps caused by the FCDO cuts (see later)

Country Level Variation

Figure: Distribution of type of change at country level in overall contraceptive funding, by data source

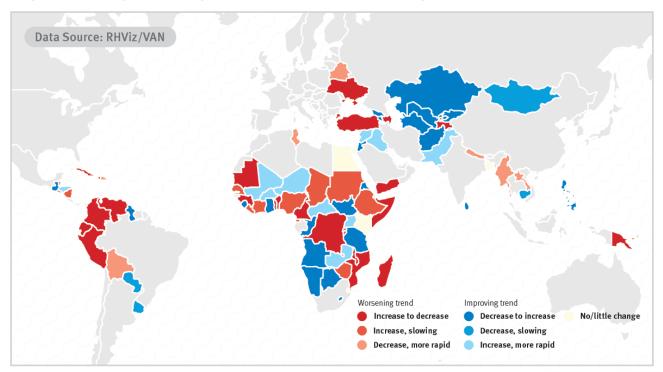


In over half of countries there was a worsening of contraceptive funding. Most commonly this was an increase in funding pre-COVID-19, followed by a decline in funding during the pandemic.

^{*}FP Market Report results do not include 2021 data as it was not published at time of analysis

Country Level Variation

Figure: Map of type of change in overall contraceptive funding



No clear geographic patterns of change; all regions have countries experiencing both improving and worsening of funding during the pandemic

Reflections from country-level stakeholders interviewed

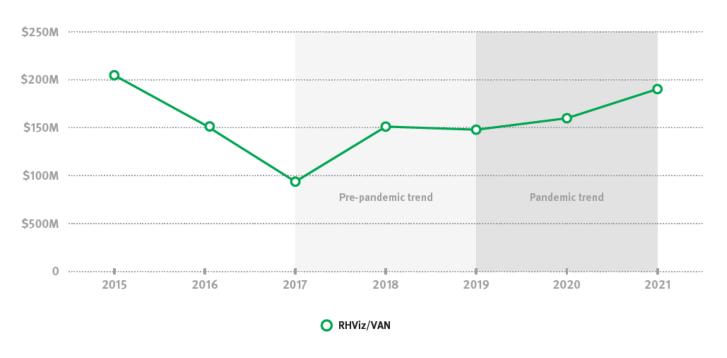
"...even when you have the resources, you couldn't get some of the commodities that you wanted" (Uganda, donor).

"...maybe we have survived this one [pandemic], but the next one, we may actually see that family planning is adversely affected." (Uganda, UN agency)

Findings: Donor Funding Trends

Aggregate Trends in Donor Funding

Figure: Trends in total donor funding for contraceptives from RHViz/VAN



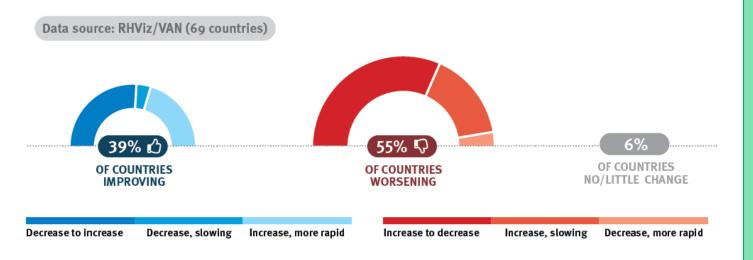
No apparent impact of the pandemic on total donor funding.

According to stakeholders interviewed:

- While some donor countries decreased their funding, others increased - resulting in overall funding remaining steady
- The biggest impact on donor funding in recent years was FCDO's reduction of their overall overseas aid in 2020 due to the pandemic's effects on the UK's economy
- Other donors stepped in to fill this gap, but it did result in funding delays

Country Level Variation in Donor Funding





Country level results reveal wide variation in funding trends.

More than half of countries had worsening of donor funding during pandemic

According to stakeholders interviewed:

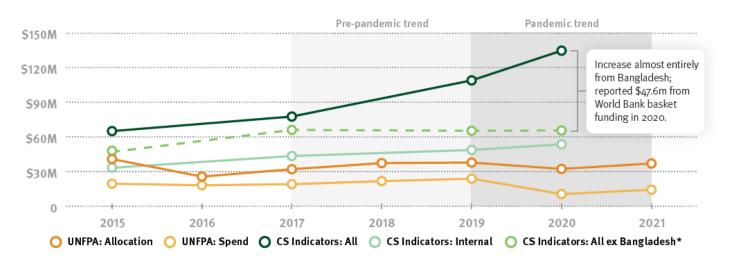
- Reductions seen in individual countries may have been due to delays in UNFPA funding (caused by the FCDO reductions and pandemic-related supply chain and manufacturing challenges), rather than actual funding decreases
- Non-pandemic related disruptions are also impacting funding

"Non-COVID-19 related shocks are affecting a lot of countries in the region. The food security issues affecting the Horn of Africa countries are a good example. You've also had major flooding in Nigeria and Pakistan. I think a lot of these other crises can be plausibly linked to climate related risks. There is the conflict in Ethiopia, Burkina Faso, Mozambique and Democratic Republic of Congo." (Multilateral Institution Stakeholder)

Findings: Domestic Funding Trends

Aggregate Trends in Domestic Funding

Figure: Trends in domestic funding and allocations for contraceptives, by data source



Domestic funding generally low and stagnant.

No apparent large impact of pandemic on domestic funding for contraceptives

^{*}Our conclusions regarding the stagnant funding trend exclude Bangladesh, which shows a large increase in 2019 and 2020 from large purchases of contraceptives from a World Bank basket fund.

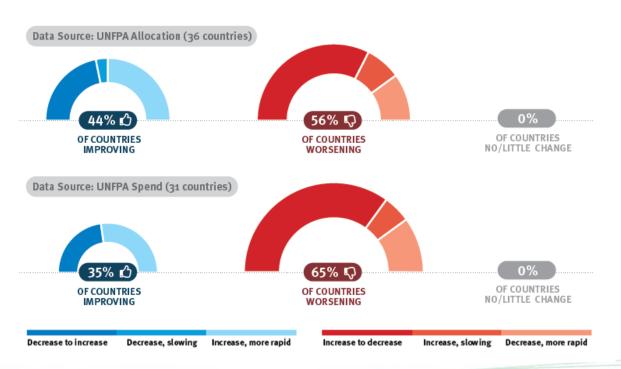
According to stakeholders interviewed:

 Detailed information about government expenditure can be hard to access so it may take time to uncover what actually occurred

"... there were those [prices] that were agreed with the manufacturers. And I don't think after the lock down they were able to increase the costs because they had to meet the purchase agreements that were made before." (Zambia, Government)

County Level Variation in Domestic Funding (1)

Figure: Distribution of type of change at country level in domestic contraceptive funding and allocation, by data source

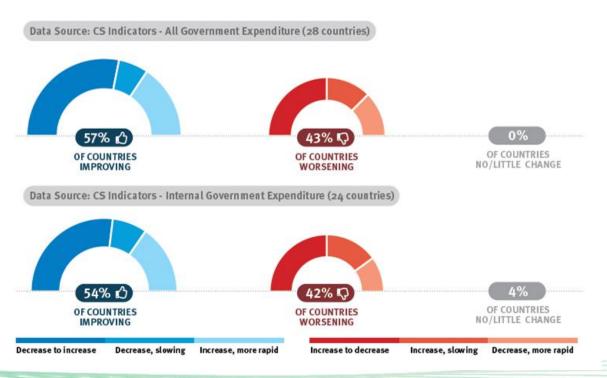


Country level results reveal wide variation in funding trends.

As per UNFPA data, over half of countries had worsening trends in funding allocations and/or spending

County Level Variation in Domestic Funding (2)

Figure: Distribution of type of change at country level in domestic contraceptive funding and allocation, by data source (continued)



By contrast, according to CSI data, just over half of countries had improving funding trends in domestic funding.

The most common trend was a pre-pandemic decrease in domestic funding, shifting to increasing funding from 2019 to 2020.

Reflections from stakeholders interviewed:

"During COVID we have seen some [national government contraceptive commodity] commitments not being fulfilled. When we asked countries why, they would say this is because funding had been redirected to other priorities; COVID response, social welfare, etc." [UNFPA stakeholder].

"...we saw a huge move for the clients that were accessing commodities from the public sector into the private sector,.... there was quite a widespread stock out level within the public sector facilities" (Zambia, NGO)

Reflections and Looking Ahead

Key Risk and Resilience Factors & Lessons Learned from COVID-19: Insights from Global and Country stakeholders (1)

<u></u> RISKS		C LESSONS LEARNED
Diversion of contraceptive funding to tackle pandemic	Pre-existing funding agreements and early allocation of donor funds	 Need to reduce reliance on donor funding (domestic funding, national health insurance schemes)
Decrease in funding due to pandemic effect on global economy	Donors increased funding to fill funding gaps	 Importance of diverse funding sources Need for UNFPA to maintain 'cushion funding'
Increasing costs (mainly freight and shipping)	Volume and price guarantees Manufacturers and donors absorbed cost increases	 Need to adapt the current procurement system to facilitate direct ordering by domestic governments Future cost increases would necessitate funding increases

Key Risk and Resilience Factors & Lessons Learned from COVID-19: Insights from Global and Country stakeholders (2)

⚠ RISKS		O LESSONS LEARNED
Shipping and delivery delays	Large stocks of commodities in-country Rapid resumption of global supply chain	 Need for quality supply chain management Need for quality procurement and expenditure data Fast-tracking decisions without sacrificing quality is possible
Changes in amount and type of contraceptives needed due to changes in accessibility and demand	SRH community adopted or scaled-up innovative approaches to maintain equitable access	 SRH community must advocate for continuation and scale-up of approaches adopted during the pandemic

Reflections from stakeholders interviewed:

"When you get a pandemic that upends the whole system, when it's already an inefficient system, then you know, the problems are just made worse." (Kenya, NGO)

"There is need for agility in our supply chain for family planning that we need to do planning in such a way that we are able to respond amidst any life-threatening situations." (Uganda, donor)

"During COVID, different initiatives like self-care became commonplace and accepted as service delivery options. We think some of these practices will continue beyond COVID and will help us reach more women and girls." [UNFPA stakeholder]"

Recommendations for the Future

- Prepare the SRH sector and governments to transition away from reliance on donors
- Ongoing push to domestic resource mobilization, but not all countries are able or ready for this
- Contraceptive markets operate to suit large donors rather than direct domestic procurement
- Role for private sector as service provider and in supply chain, using public funding
- Ensuring strategic use of donor funding

- 2 Improve forecasting and procurement processes through better understanding and use of data
- More accurate, transparent and timely forecasting and procurement processes are needed to enable strategic funding decisions
- Clear, timely and quality data needed for all countries; ongoing work by VAN around this
- Investment is needed in human resources, systems and infrastructure at the national level

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