Commodity Gap Analysis 2019

What can we learn to inform discussion of method choice?

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A long history: RHSC’s Commodity Gap Analysis

Report has evolved as the questions have changed

Scope: 135 low-and-middle-income countries; public and private sectors
Depth: more granularity with the private sector, country level data
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

- **Low-income Countries (LICs)**
  - 34 Countries
  - Up to $995 GNI per capita

- **Lower-Middle Income Countries (L-MICs)**
  - 47 Countries
  - $996 to $3,895 GNI per capita

- **Upper-Middle Income Countries (U-MICs)**
  - 54 Countries
  - $3,896 to $12,055 GNI per capita

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

- UNPD Estimates and Projections of FP Indicators
- MICS
- DHS
- PMA2020
- FP2020 Progress Report

- Number of married and unmarried users of contraception
- Current method mix and changes in mix over time
- Public/private split for where women get methods
- Subsidized vs. non-subsidized split within private sector
- Private sector prices
- Public sector prices
- Government spending on commodity procurement
- Donor and partner spending on commodity procurement
- Spending by individuals accessing FP from private sources

- Social Marketing Statistics
- MSI, PSI, & DKT Service Statistics and Sales Data
- FP Watch
- Adding It Up Report
- UNFPA Report on Government Spending
- Contraceptive Security Indicators
- RHSC LAC Country Survey
- Track20 FP Spending Assessments
- UNFPA External Procurement Reports
- Reproductive Health Interchange
- CGA Estimates of Consumption Costs
The public and private sectors are not interchangeable

Users by methods and Sector, 135 low-and-middle-income countries, 2018

- 67% of public sector users rely on LAPMs
- 73% of private sector users rely on STMs

See results for any country!
Variation by income level but general pattern holds

**Method Mix within Public Sector, 2018**
Comparison by GNI Group

**Method Mix within Private Sector, 2018**
Comparison by GNI Group

% LAPM: 41% 75% 60%

% STM: 78% 71% 77%
Private does not always mean no public sector financing: role of subsidy within the private sector

Share of Users within Private Sector, 135 low-and-middle-income countries, 2018

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

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

See results for any country!
Cost is not simply a function of use: important to understand cost drivers

Method mix of Use vs Costs, 135 low-and-middle-income countries, 2018

91% of costs are from short term methods
Growth in users and costs will not be evenly distributed over the coming decade.

Changes in Users by Method, 135 low-and-middle-income countries, 2020 to 2030
Despite changes method mix still likely to be evenly split between STMs and LAPMs

Percentage Point Change in Method Mix, 2020–2030
Access CGA Results: https://www.rhsupplies.org/cga/

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

2) Country Explorer & Data Annex: *detailed results*

3) CGA Snapshots: rhsupplies.org/cga-hub

Two-page summary of key findings available for all countries and select groups of countries!
Thank you!

Explore CGA 2019 at