



Family Planning and Reproductive Health



Every year, over 60 million unintended pregnancies occur across the globe, and more than 500,000 women die from pregnancy-related causes. The private sector can play a significant role in reducing these numbers by using market-based approaches to improve access to quality and affordable family planning and reproductive health products, services, and information.

Through its trademark Full Market Impact™ (FMI)¹ approach, the AED Center for Private Sector Health Initiatives develops partnerships with the pharmaceutical industry and private healthcare providers to build markets for family planning /reproductive health (FP/RH)—on both the supply and demand sides.

Forging alliances to improve reproductive health

In Ukraine, AED brokered an historic public-private partnership agreement among ten parties, including the Ministry of Health and a private-sector consortium of pharmaceutical companies including Bayer Schering Pharma AG, Organon, and Gedeon Richter. The consortium increased health provider and pharmacist training, improved the availability of affordably priced contraceptives, fostered policy reform, and stimulated demand for FP/RH products. Because of this partnership, two manufacturers lowered the prices of their branded oral contraceptive pills and pharmaceutical partners

agreed to sponsor and co-fund training programs for physicians. Market surveys showed increased availability of a full range of affordable contraceptives in pharmacies.

AED provided technical assistance and matching funds in Nepal to encourage a local pharmaceutical company, Lomus Pharmaceuticals, to invest in the manufacturing, marketing, and distribution of contraceptive products. By sharing the business risk of investing in local manufacturing, AED helped Lomus with seed funds to produce their own brands of oral contraceptives rather than import them. The company launched *Femicon*, a combined oral contraceptive pill, *Feminor*, a progestin-only pill for breastfeeding mothers, and *Femitrone*, an emergency contraceptive pill. The new brands

bridged the gap between USAID-subsidized, social marketed products and more expensive imported commercial brands,

offering, instead, a mid-priced, sustainable alternative for Nepali women.

In Tanzania, AED and its local partner, T-MARC Company Ltd., applied a similar approach and developed a successful partnership with Shelys Pharmaceuticals, a leading Tanzanian pharmaceutical company. AED and T-

MARC worked with Shelys to introduce three contraceptive products: *Dume* male condoms, *Lady Pepeta* female condoms, and *Flexi P* oral contraceptives.

Working with private provider networks to ensure quality of care

Research shows that the majority of health consumers in the developing world obtain health services through private service providers—including



pharmacies and drug shops, nurses and midwives, physicians, and hospitals. AED has led the development of private provider networks, with a focus on ensuring quality of care as a key driver for building and sustaining demand for private health services. AED has worked with international and local technical resource partners to develop and execute cost-effective training and quality assurance monitoring programs for private providers. The programs cover topics such as contraceptive and RH technology updates and new products, clinical FP skills (such as sterilization, safe intrauterine device and implant insertion and removal), infection prevention techniques, and proper waste management. To ensure sustained post-training quality assurance (QA) monitoring, AED helped establish a self-monitoring tool for health providers. AED's program in Nepal has resulted in significant gains across QA indicators among a range of providers, including pharmacists, midwives, and private doctors.

Using evidence-based medicine to improve provider behavior

Concerns about the side effects of contraceptives inhibit adoption and contribute to high contraceptive discontinuation rates. Evidence has shown that many health providers in developing countries are unable to address client concerns because of their own lack of information or

personal bias against certain contraceptive methods.

In response, AED has developed a continuing medical education (CME) program to address concerns about side effects, dispel rumors, and increase understanding of the health benefits of contraception among providers and their clients. AED works with professional associations to provide CME drawing from evidence-based counseling, which puts the FP client at the center of care and improves client-provider interaction. Trained local physicians develop Critically Appraised Topics (CATs) that summarize available research findings on specific areas of concern, such as cancer or fertility. In addition, AED has designed an evidence-based detailing program for pharmaceutical medical detailing teams to reinforce concepts addressed in the CATs.

Results of an AED-managed, evidence-based medicine initiative in the Philippines showed marked improvements in providers' knowledge of contraceptive methods and an increase in the spontaneous provision of correct family planning counseling.

Creating demand for FP/RH products, services, and information

Even though FP/RH profoundly affects the social and economic development of countries, the subject is often misunderstood and shrouded in taboos and cultural sensitivities

that often prevent people from seeking information and care, preclude providers from giving it, and result in governments only partially addressing the critical issues. AED has been at the forefront of fostering environments in which FP/RH is addressed in a culturally sensitive, religiously appropriate, and politically acceptable manner. AED employs setting-specific strategies and tactics so that information and services can be provided and products can be made available. AED works with and builds the capacity of its partner organizations—ranging from market research and advertising agencies to community and faith-based organizations—to, for example, conduct branded and generic mass media advertising and to undertake interpersonal communications. AED and its partners are able to change FP/RH behaviors, attitudes, and practices that result in improved health outcomes as well as achieve secondary benefits, such as female empowerment, improved possibilities to attend school, and higher household disposable income.

¹ The FMI approach engages multiple partners from the private commercial sector, NGOs, and the public sector, in comprehensive and synergistic efforts that aim to increase the practice of healthy behaviors, and generate and fulfill demand for an affordable and accessible range of "public health" products and services. FMI addresses the four P's of marketing, (product/supply, price/affordability, place/distribution, and promotion/demand and appropriate use) and has three expected outcomes—equity, commercial viability, and sustainable public health impact.

The mission of the AED Center for Private Sector Health Initiatives (CPSHI) is to improve the health and well being of people in developing countries—particularly those at the "base of the pyramid"—by facilitating beneficial partnerships between the public and private sectors to provide information, services, and products that are affordable, accessible, and high quality.

CPSHI is part of AED, a nonprofit organization working globally to improve education, health, civil society, and the environment—the foundation of thriving societies. Focusing on the underserved, AED's worldwide staff of 2,000 implements more than 300 programs serving people in all 50 United States and more than 150 countries. In collaboration with local and national partners, AED fosters sustainable results through practical, comprehensive approaches to social and economic challenges.



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