

United Nations Economic Commission for Africa

AfCFTA a Game Changer:

Realizing the Pharmaceutical Manufacturing Plan for Africa (PMPA)

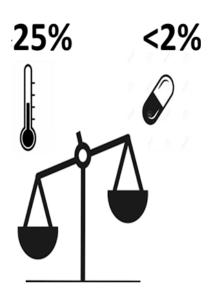
Stephen Karingi, Director, Regional Integration and Trade Division



21 November 2019 Addis Ababa, Ethiopia Jointly with AUC and other partners, the AfCFTAanchored pharmaceutical project aims to:

- address access to safe, affordable medicines and other related socio-economic challenges faced by several African countries, including budget pressures
- while promoting *sustainable social and economic growth* through the realization of the Pharmaceutical Plan for Africa (PMPA).

Rationale – Mismatch Demand to Supply



- 25% of global disease burden is in Africa while<2% of consumed medicines are manufactured on the continent....</p>
 - ~ 2 billion people, many who reside in low- or middle-income countries, still lack access to medicines that could prevent unnecessary illness and death

AFRICA IS AT A CROSS ROAD.....Unless we do something differently, the

mismatch and gap will keep on growing....

The demand for essential medicines and others will continue to increase due to a myriad of factors such as demographic growth & epidemiologic transition on the demand side but also other supply side constraints that hinder a sustainable supply....

The Current Landscape....

Socio-demographic profile, health burden, pharma regulatory vary across countries but the challenges faced and the gap between demand and supply is increasing..

Rising Government Costs/Debts

Medicines consume 45-60% of nation's healthcare budget – >70% of budget is spent on medicine imports

Poor Quality Medicines

- Up to 70% of medicines available to save lives of young mothers are sub-standard.
- ~45% of Africans have seen falsified drugs

Supply insecurity – stock outs, expiry

- 83% of LMICs had 1-9 stockouts in past year
- 41% of surveyed has 1+ shortages of critical antibiotic for Syphilis among pregnant women

Lost Productivity

- WHO est. 97 million lives will be saved by reaching SDG goals
- Nearly 50% of Africans went without medical care in the past year

Devastating out of pocket spending

~70-90% of household spending was on purchase of medicines/products

Smaller African Economies..

Pay premium prices to source their medicines due to weakened bargaining position...

Supply Market Constraints

Market forces limit access

- Manufacturers (mainly Generic) consolidating
- Global Pharma less and less able to respond to LMIC and MICS

Unattractive market for Generic production

- Generics often have low profit margins
- Have a smaller overall market
- Industries face increasing labor costs; shrinking price

Global pharma focusing on NCD and other

- Trend to stay away from neglected tropical diseases
- More recently no new antibiotics for Infectious Diseases

 increased AMR

Disincentives for smaller manufacturers

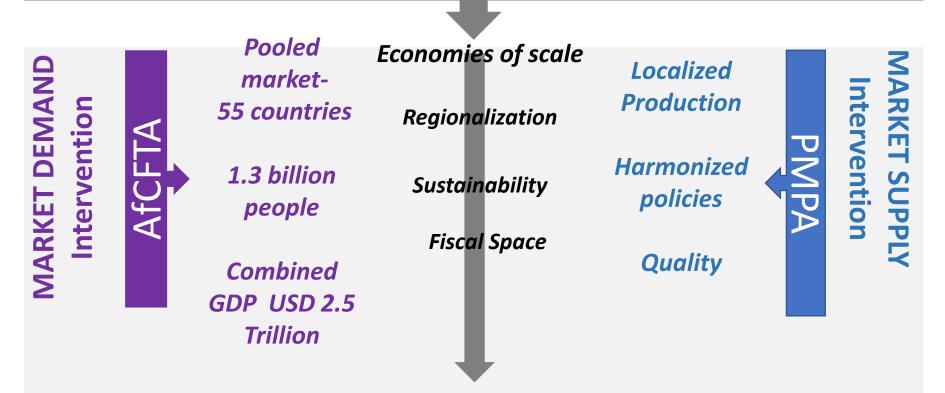
- Procurement policies; regulation of medicines (WHO pre qualifications as prerequisite for all) – exclude many capable local players
- In donor supported countries, cannot compete with the prices..

This calls for the need to do things differently and engage private sector for innovative approaches. Better understand how to support local companies, etc

Proposed Framework – "Game Changer"

Address Both Demand and Supply Side Constraints

Private Sector; Partnerships; Cross-Country Data and Information; Enabling Policies, etc.



The Initiative's Intended Impacts

SOCIAL IMPACTS ECONOMIC IMPACTS Saved lives Investments **Availability Access to medicines Productivity Sustainable** é g Medicine Economic supply Job creation Affordability growth and productivity Trade/market Quality **Cost Savings** Stronger manufacturing **Supply Chain efficiencies** Affordable base path to UHC SDG 3 – Good Health SDG 1 – No Poverty **SDG 17 - Partnerships** GOOD HEALTH AND WELL-BEING 3 NO POVERTY 17 PARTNERSHIPS FOR THE GOALS 11:42:45:1

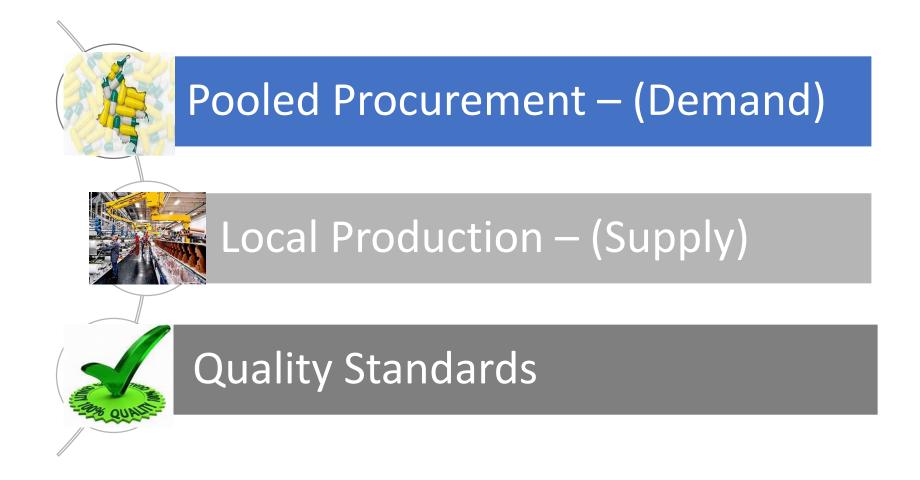
The Pilot Project – "Test and Scale"

- **Countries of interest:** Seychelles, Madagascar, Djibouti, Comoros, Eritrea, and Mauritius, Rwanda, and Intergovernmental Authority on Development IGAD anchored by Kenya and Ethiopia
- Products of interest: Maternal, Neonatal and Child Health (MNCH); Amoxicillin and Oxytocin injection and commodities (as part of WHO essential medicines).



- Horn of Africa Forum Political Will and Interest
- Ready frameworks/programs that can be leveraged upon: EAC; SADC, AU (PMPA), WHO SIDS assessment
- Seek simplicity of start for *testing initiative then scale*
- MNCH remains a burden in Africa Loss of lives/productivity
- Standard of treatment not too different across countries
- Fragmented supply chain and significant counterfeits
- Economic potential for empowering women

The Three Objectives

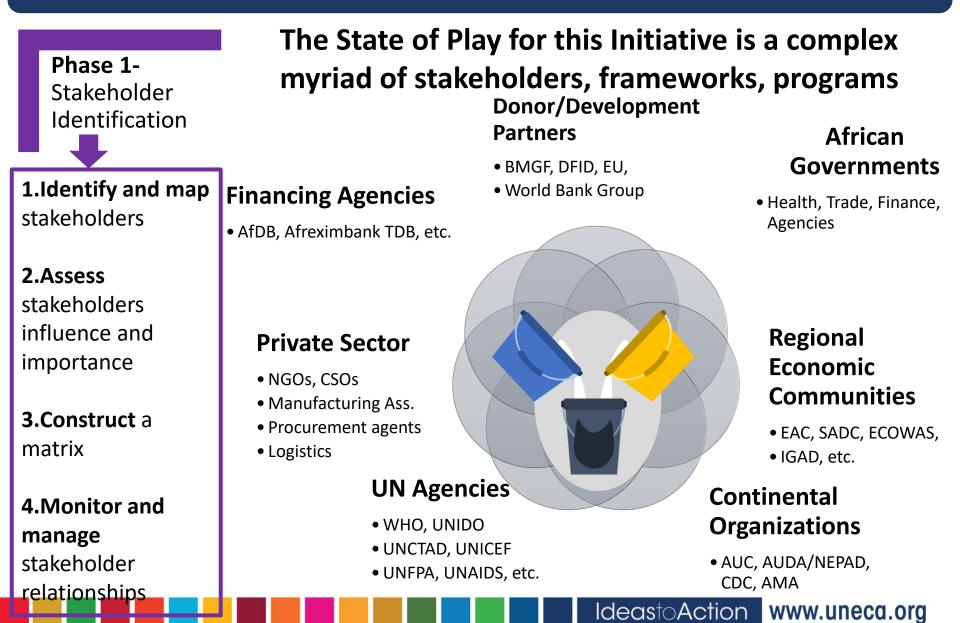


Operationalizing the Initiative

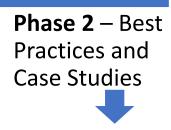
The road ahead requires long-term top-level leadership and commitment and investment - today our 1st engagement



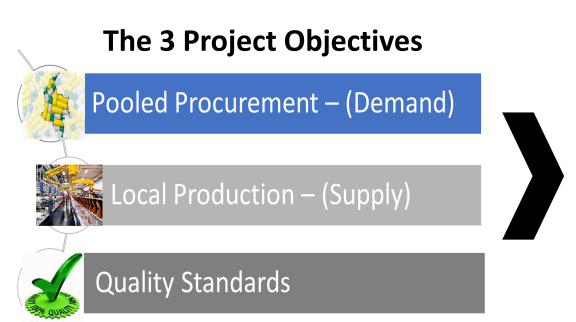
Phase 1 - State of Play



Phase 2 – Frameworks/ Models



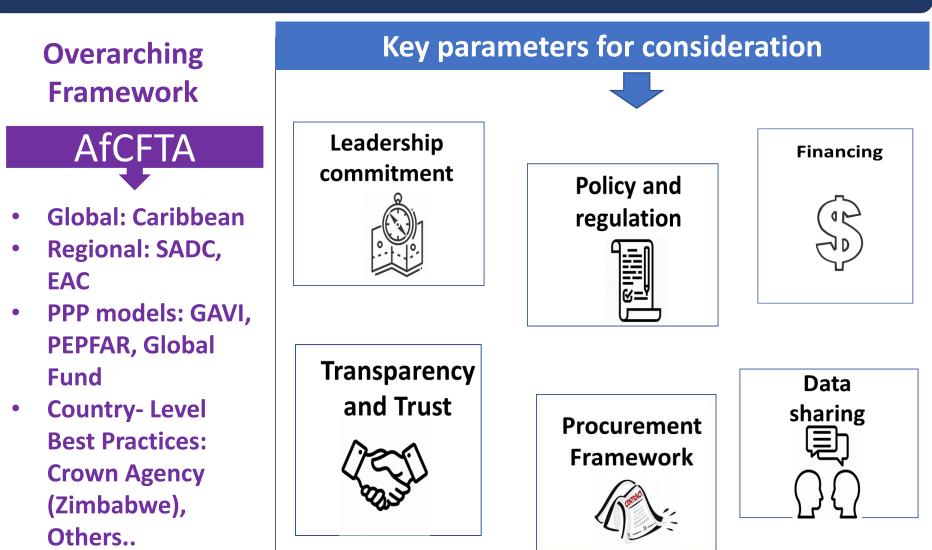
Ongoing review of global, regional frameworks/models that can be leveraged for this initiative...



Who is doing this today in this space (Across the three objectives)?

How can we engage and strengthen?

Obj. 1- Pooled Procurement



Obj. 2- Local Manufacturing/Quality

Overarching framework



- AU; AUDA/NEPAD: PMPA Business Plan; AMRH; AMA; AIDA
- WHO GMP
- RECs : ECOWAS, EAC, SADC
- Countries: Ghana, Morocco, Kenya, Ethiopia
- PSE: Tanzania, Kenya, Uganda



Key parameters for consideration



Infrastructure

Standards

Manufacturer capacity

Skills/Expertise

Investment/financing

Phase 3 – Engagement/Dialogue

Phase 3 -Engagement, Dialogue and Agreed roadmap This is the first of many dialogues and engagements to be conducted in operationalizing this AfCFTA-anchored pilot project..

Leveraging on the AfCFTA to create market opportunities to bring to bear Africa development aspirations as captured in the PMPA

- The agreement is not self executing must develop strategies and initiatives to unlock benefits from the AfCFTA;
- Create an environment in which businesses thrive, build regionally and globally competitive firms;
- ✓ develop initiatives to expand markets;
- ✓ Build the capacity of trade and investment support institutions;

Private sector is the key driver of Agreement – they are the producers.

There is more to be done: ✓ New approaches

✓ Investment✓ Coordinated actions

Phase 3 – Engagement/Dialogue

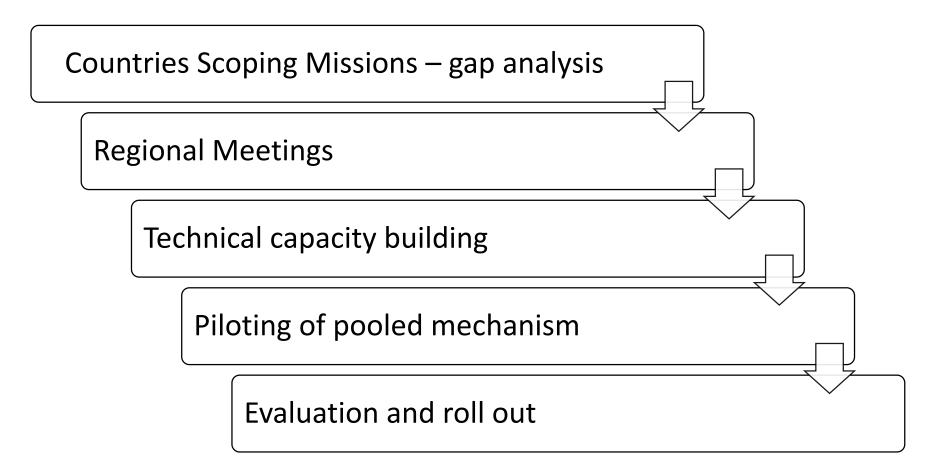
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WHAT WE NEED FROM YOU TODAY...

- ✓ LISTEN and ENGAGE key stakeholders in understanding this initiative better
- ✓ IDENTIFY and SHARE information that may have been missed that are relevant to the country or region you represent opportunities or risks
- ✓ The political will and endurance to support this long term journey
- ✓ A commitment to put in place and participate in the governance of this initiative
- ✓ Commitment and support for NEXT PHASE activities and engagement in follow up discussion to align on detailed roadmap

There is more to be done: ✓ Facilitation







THANK YOU!

