

Overbranding and overpackaging of DMPA-SC in private and social marketing sectors

The DMPA-SC Access Collaborative (AC), an initiative led by PATH in partnership with JSI, solicited input from our regional technical advisors, country coordinators, and local partners to better understand the status of overbranding—and any related advocacy—in the countries we support.

Summary of the current landscape

The desire for private sector family planning programs to have the ability to overbrand¹/overpackage the Pfizer Inc. DMPA-SC product, Sayana® Press, has existed since initial product introduction planning discussions among global partners took place in 2008–2009.

Historically, Pfizer Inc., currently the sole manufacturer of DMPA-SC, has insisted that the product be branded as Sayana® Press in all low- or middle-income country (LMIC) service delivery outlets, restricting local overbranding by private sector entities and social marketing organizations. This preference impacts progress on some countries' total market approach strategies, inhibiting full availability of a family planning method mix across sectors.

There were some special cases of DMPA-SC overbranding that were approved by the manufacturer during the earliest days of introduction and pilot studies in LMIC, which are “grandfathered” in today (see Niger and Senegal in Table 1, page 2). Available information indicates that the manufacturer stopped allowing any special cases of overbranding at least five years ago despite lengthy negotiations.

The DMPA-SC Access Collaborative is aware of increasing urgency from several country partners to secure overbranding authorization for their private and/or social marketing sector providers.

While there are multiple reasons for overbranding, in the case of Sayana® Press, this desire stems from the fact that private and social marketing sectors feel they cannot sell a competitive DMPA-SC product at a cost to consumers when the same product (with the same branding) is available at no or lower cost in the public sector.



Example of DMPA-SC overbranding/overpackaging from Senegal. Image: *Abt Associates/ShopsPlus project.*

Similarly, there is concern among both private and public sector leadership that offering the same brand in both sectors could foster corruption via leakage. Free public sector DMPA-SC product could be stolen and then sold in the private sector for a profit, and the consumer has no way of distinguishing between the products.

The lack of differentiation between public and private/social marketing product offerings impacts the perceived market opportunities for private/social marketing providers, dampening enthusiasm for DMPA-SC service provision due to perceived limited cost-benefit.

If an overbranded option were available to private and social marketing sector providers, they could develop specialized marketing campaigns around it and their consumers would recognize the product as distinct from the public sector option, diversifying consumer options and the market for DMPA-SC.

The following table (pages 2–3) details current information on the overbranding environment, by country.

1. “Overbranding” can refer to a range of practices, including overbranding, cobranding, rebranding, overpackaging/re-packaging, and duplicate registrations. In this document, we use the term overbranding broadly to cover all of the above options.

Table 1: Overbranding landscape in select countries²

Country	Private sector market share ³	% public sector SDPs offering self-injection ⁴	Notes
DRC	57%	NA	<ul style="list-style-type: none"> No DMPA-SC overbranding currently taking place. DMPA-SC is distributed in private pharmacies by DKT. DKT has sought overbranding authorization from the manufacturer, but this has not progressed to date.
Kenya	34%	0.6%	<ul style="list-style-type: none"> No DMPA-SC overbranding currently taking place. In Kenya, only one DMPA-SC product at a time can be registered with the Pharmacy and Poisons Board. If overbranding were to happen, the manufacturer would need to formally change the registration to the name/packaging of the alternative brand. Partners are not optimistic about overbranding given the local regulatory policy. Around 2020, the manufacturer was requiring any partner to sign a marketing agreement to use the manufacturer's own marketing materials. Partners noted that they currently do not have funds to support overbranding and subsequent marketing of DMPA-SC and would require additional donor support to do so. A social marketing partner commented that their model is usually not to overbrand, as they use their own brands that they register, market, and distribute. However, this is reliant on availability of multiple product options, including generics. In the limited cases where they do market single-supplier products such as DMPA-SC, they do not overbrand due to the same registration challenges with DMPA-SC.
Madagascar	NA	59%	<ul style="list-style-type: none"> No DMPA-SC overbranding currently taking place. There is strong desire for an overbranding/overpackaging option in Madagascar to enable a private sector product. Local pharmacists feel private sector distribution without overbranding is not feasible, as it reduces their market share and competitiveness compared to free DMPA-SC in public sector outlets. Pharmacists feel overbranding will reduce corruption, as it will prevent people from acquiring free product through the public sector and attempting to sell it in the private sector. The Association of Pharmacists of Madagascar is advocating for the local manufacturer representative to submit an overbranding application to regulatory authorities.
Niger	5%	1.46%	<ul style="list-style-type: none"> Overbranding is taking place in Niger. Niger, along with Senegal (see below), has "grandfathered" overbranding status that was initially approved by the manufacturer in preparation for the country's DMPA-SC initial introduction in 2014. A local social marketing organization, ANIMAS-Sutura, overbrands and overpackages DMPA-SC as "Sutura Press". ANIMAS-Sutura obtained necessary national authorization to sell Sutura Press in 2015 and again in 2020 as part of scale-up efforts. The product is procured by UNFPA, and the rebranding adheres to the requirements set forth in the 2014 agreement between the manufacturer and UNFPA.

2. The information in this table came from Access Collaborative regional technical advisors, country coordinators, and local partners including ADEMAs, DKT (multiple countries), MSI Reproductive Choices Kenya, and ZamHealth.

3. From [Track20 Country Reporting dashboard](#). Indicator: percentage of modern contraceptive users who last obtained their family planning method from private medical source.

4. From [DMPA-SC Access Collaborative Dashboard](#). Indicator: number and percentage of service delivery points actively offering self-injection. Quarter 4, 2021.

Nigeria	41%	75%	<ul style="list-style-type: none"> • Several private sector partners have been pursuing overbranding options since at least 2018. • A priority desire from partners is to adjust the number of units (DMPA-SC devices) available by packaging units in a 1-year bundle (i.e., 4 units) aimed at consumers or reducing bulk packaging to smaller box sizes (e.g., from 200-unit boxes to 50-unit boxes) aimed at sellers. However, these alternative packaging options have not been approved by the manufacturer. • DKT does currently offer single packs and a 25-unit pack (which is referred to as the “hospital” pack); neither are overbranded. • According to previous conversations with Nigeria’s regulatory agency, all modifications require regulatory approval from National Agency for Food & Drug Administration and Control and must be submitted by the market authorization holder (MAH), i.e., the manufacturer. • Overbranding stickers are not approved as they can be easily removed/altered. MAHs must sign a binding agreement when their products are imported to ensure that those products will have information directly printed on them and not covered with stickers.
Senegal	9%	69%	<ul style="list-style-type: none"> • Overbranding is taking place in Senegal. • Similar to Niger, Senegal has a fairly unique case of overbranding that has carried forward from the earliest days of DMPA-SC pilot introduction. • ADEMÁS, a local social marketing organization promotes DMPA-SC as “Sécuril Press” with overbranding and overpackaging (see image, page 1). • ADEMÁS pursued these approvals independently, though there may have been involvement from key donor facilitators (e.g., UNFPA or USAID) to facilitate this.
Uganda	39%	59%	<ul style="list-style-type: none"> • No DMPA-SC overbranding currently taking place. • Partners regularly express interest in overbranding, usually during national meetings (e.g., the Family Planning Technical Working Group, DMPA-SC Task Force, Drug Shop Task Force, and partners’ meetings). However, to date we are not aware of deliberate advocacy to advance change on the issue. • Local stakeholders feel that private sector rollout of DMPA-SC would not be feasible from a market perspective until overbranding is possible or if there is a generic option from another manufacturer—due to the concerns about market share and market and consumer differentiation. Quote from a partner: <i>“It is imperative that the sooner donors come up with the exact period/year the better to stop the anxiety around this issue and plan accordingly.”</i> • During the PATH Self-Injection Best Practices project, the private sector expressed interest in having an overbranded product, stating that the public sector product would affect their market share. • Stakeholders feel that overbranding and product differentiation could help curb the leakage of product from the public to private sector. • Along with overbranding, partners expressed the need to repackage the product into smaller packs of 25 to 50 to enable social marketing.
Zambia	9%	40%	<ul style="list-style-type: none"> • No DMPA-SC overbranding is currently taking place. • DMPA-SC is available at very low cost in the private sector (a minimal service fee) because the product is provided by the government. • There is interest in overbranding to differentiate the public sector product from the private sector product and to avoid pilfering. However, there is concern that overbranding may raise the price of the private sector product. • Previous attempts to offer overbranded DMPA-SC through social marketing did not progress due to lack of authorization from the manufacturer.

SDPs: Service delivery points.

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