



**World Health
Organization**



Measuring medicine prices, availability, affordability and price components

**The second edition of the survey manual is now
available!**

Background

To address high medicine prices and poor affordability of common treatments, the World Health Organization (WHO) and Health Action International (HAI) launched the *Project on Medicine Prices and Availability* in 2001. A key achievement has been the development of an innovative standardized methodology for measuring medicine prices, availability, affordability and price components. Following pilot testing in 9 countries, the methodology was launched as a draft manual at the World Health Assembly in 2003. Since that time over 50 surveys have been conducted, generating reliable information on the prices, availability and affordability of medicines in a number of countries. A second edition of the manual has been published incorporating the wealth of practical experience gained in conducting surveys around the world.

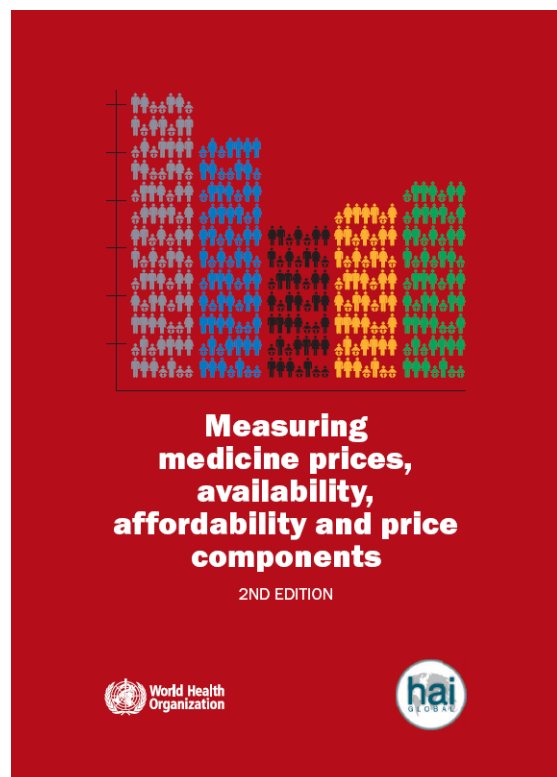
Survey overview

Data are collected on the availability and price of medicines from a sample of medicine outlets in the public, private and other sectors (e.g. NGOs) in six regions of a country. Data on medicine prices, but not availability, are also collected for government procurement. Fifty medicines are surveyed, including core medicines that allow for global and regional comparisons, and supplementary medicines of local importance. For each medicine, data are collected on the originator brand and the lowest-priced generic equivalent found at each medicine outlet.

A second, important part of the methodology is the price components survey, where the add-on costs that contribute to the final price of medicines are measured by tracking selected medicines through the distribution chain.

What's new in the second edition?

The second edition of *Measuring medicine prices, availability, affordability and price components* includes updated versions of the survey manual, automated data workbook,



survey instruments and CD ROM of survey tools and background materials, all of which have been refined based on the lessons learnt in the 50+ surveys conducted to date.

Methodology changes

In addition to adding more practical guidance and lessons from the field, changes have been made to the survey methodology to strengthen the reliability of the results obtained:

- In light of the often poor availability observed, particularly in the public sector, the number of regions or survey areas has been increased from 4 to 6 to ensure sufficient price data for robust analysis.
- The list of 30 core medicines has been replaced by a global core list of 14 medicines used in all surveys, plus region-specific lists of 16 medicines each. This will account for regional differences in medicine usage but will still allow for comparisons across countries within the same region. Up to 20 supplementary medicines can still be selected at the country level for their local importance.
- The methodology for collecting data on medicine price components has been further developed based on case studies conducted in four countries. To enable comparisons across health systems and between countries, data are now analysed according to five common stages of the medicines supply chain: manufacturer's selling price + insurance/freight (Stage 1); landed price (Stage 2); wholesale/ Central Medical Store price (Stage 3); retail/Regional Medical Store price (Stage 4); dispensed medicine price (Stage 5).

New guidance on international comparisons, policy, advocacy, monitoring

The new manual provides additional advice on making international comparisons of medicine price, availability and affordability; using the survey results to identify policy options; stimulating action to lower prices and improve availability and affordability through advocacy activities; and establishing routine monitoring of medicine prices and availability.

Expanded survey workbook

The survey workbook, which is pre-programmed to consolidate and summarize results, has also been further developed. For example, public sector availability can now be analysed according to the level of care where medicines are expected to be available, and can be limited to medicines on the national Essential Medicines List. These changes will provide a more accurate picture of public sector availability than was previously possible.

Additional tools and resources

The CD ROM that accompanies the manual contains a more extensive collection resources and tools, such as sample training materials, frequently asked questions, and a report template for use in developing national survey reports.

The HAI Global web site (<http://www.haiweb.org/medicineprices/>) has a publicly accessible global database dedicated to the storage of country survey data collected using the WHO/HAI methodology. It is the world's most extensive, freely-accessible data on medicine prices in developing and transitional countries, and on medicines' availability and affordability. Recently, the database has been further developed to cope with the large volumes of survey data being created, and analytical tools have been created to allow in-depth statistical analysis and comparisons (e.g. between regions, countries, sectors, medicines or therapeutic groups).

To receive a copy the 2nd edition of the medicine prices, availability affordability and price components survey manual contact HAI (info@haiweb.org) or WHO (medicineprices@who.int). Or, download a copy from the HAI Global web site (<http://www.haiweb.org/medicineprices/>).