MARKET SHAPING FOR NEW & UNDERUSED TOOLS FOR HEPATITIS & HIV TESTING AND PREVENTION

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Background
Markets for hepatitis and HIV testing and prevention products for people who inject drugs (PWID) and other key populations suffer from systematic access barriers. Products such as long-acting depot buprenorphine (LADB); low dead space syringes and needles (LDSS/N); Hepatitis B Birth Dose Vaccine (HepB BD); and triplex tests (for screening HBV, HIV & Syphilis) suffer from barriers related to innovation & availability, quality, affordability, supply & delivery and demand & adoption. These barriers result in market failures that limit equitable access to these products for PWID and other key populations.

Approach
Across multiple global initiatives, structured market-shaping frameworks were applied to conduct a market analysis. Market assessments, supplier engagement, procurement analyses, and country stakeholder consultations were used to identify distinct access barriers to these products for PWID. This was followed by a root-cause analysis, an assessment of market shaping options, and identification of product-specific target interventions and intended outcomes for each product.

Analysis
LADB markets demonstrate a high-price/low-volume trap exacerbated by narcotics controls and limited financing, requiring mechanisms such as volume commitments and coordinated demand aggregation. For LDSS/N, procurement practices frequently prioritize non-preferred, low-quality products, and underestimate true need. This necessitates setting up a pooled procurement mechanism for LDSS/N. HepB BD scale-up is constrained by weak coverage and last-mile cold-chain systems, necessitating exploration of controlled-temperature strategies. Meanwhile, reduced donor funding pressures diagnostic markets to transition toward integrated, efficiency-oriented approaches, including triplex testing platforms that consolidate HIV, HBV, and syphilis screening.

Figure: assessment framework

<table>
<tr><th>Barriers</th><th>Root causes</th><th>Market shaping options</th><th>Finalize intervention</th><th>Results/ Outcomes</th></tr>
<tr><td>Innovation & availability</td><td>Limited market understanding</td><td>Demand Forecasting</td><td rowspan="5">Customize product specific intervention package</td><td rowspan="2">Ensure innovation benefits LMICs and boost product development</td></tr>
<tr><td>Quality</td><td rowspan="2">High product and transaction cost</td><td>Coordinated Ordering</td></tr>
<tr><td>Affordability</td><td>Pooled procurement</td><td rowspan="2">Ensure products are accessible</td></tr>
<tr><td>Supply & delivery</td><td rowspan="2">Imbalance between demand and supply</td><td>Delivery strategy</td></tr>
<tr><td>Demand & adoption</td><td>Variant optimization</td><td>Create new markets and accelerate access</td></tr>
</table>

Conclusion

Equitable and sustainable access to hepatitis and HIV testing and prevention among PWID can only be created through a deliberate market design especially in a resource constraint environment. Differentiated market-shaping interventions address the root causes of access barriers specific to each product and are essential to improve affordability and reliable supply for hepatitis and HIV testing and prevention products for PWID.

Disclosure of Interest Statement

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