

The background features a dark blue gradient with faint, light blue technical diagrams. On the left, a large circular scale with tick marks and numbers (160, 170, 180, 190, 200, 210, 220, 230, 240, 250, 260) is visible. Several circular diagrams with arrows and dashed lines are scattered across the background, suggesting a technical or scientific theme.

POPULATION SERVICES INTERNATIONAL

INTRODUCTION

- **Population Services International (PSI)** is a 501(c)(3) registered nonprofit global health organization with programs targeting malaria, child survival, HIV, and reproductive health. Working in partnership within the public and private sectors, and harnessing the power of the markets, PSI provides life-saving products, clinical services and behavior change communications that empower the world's most vulnerable populations to lead healthier lives

- Its world headquarters are in Washington, D.C and its European offices are in Amsterdam. The organization employs more than 250 U.S. staff, more than 150 overseas expatriate staff and 8,000 local PSI affiliate staff. Major donors include the governments of the United States, United Kingdom, Germany and the Netherlands; the Global Fund, United Nations agencies, private foundations, corporations and individuals.
- It is a member of the U.S. Global Leadership Coalition, a Washington D.C.-based coalition of over 400 major companies and NGOs that advocates for a larger International Affairs Budget, which funds American diplomatic and development efforts abroad

STRUCTURE

- PSI is an international non-governmental organization that provides consumer-driven global health services primarily to women, girls, and children in the areas of malaria; HIV/TB; contraceptives and reproductive health; water, sanitation and hygiene; and non-communicable diseases. With 6,500 staff worldwide, PSI is headquartered in Washington, DC and operates branch and affiliate offices in 50 countries around the world.

BOARD OF DIRECTORS

- J. Brian Atwood: Chair | Senior Fellow, Watson Institute for International and Public Affairs at Brown University – Providence, RI
- Gail Harmon: Vice Chair | Partner, Harmon, Curran, Spielberg + Eisenberg - Washington, D.C.
- Frank Loy: Chair | Former Under Secretary of State for Global Affairs , U.S. Department of State - Washington, D.C.
- Rehana Ahmed: Physician - Nairobi , Kenya
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- Carolyn Brehm: Founder and CEO, Brehm Global Ventures, LLC - Washington, D.C.
- Nitesh K. Choudhry: Professor, Harvard Medical School - Boston, MA
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- Maureen Erasmus: Advisory Partner, Bain & Co. - London, UK

BUSINESS AND SUPPLY CHAIN

- PSI operates through both direct implementation as well as contracting with both local and international non-profits and NGOs, suppliers of health products, host government Ministries of Health, public and private healthcare providers, pharmacies, health promoters and educators, and researchers to provide increased access to affordable healthcare goods and services. In order to meet the objectives under PSI's awards, PSI works with suppliers and subrecipients across all levels of our activities.

POLICIES

- PSI will not tolerate any forms of abuse or modern-day slavery in its work or supply chains and has incorporated preventive measures into its policies guiding proper behavior and procedures for PSI personnel and into our vendor and sub-agreement templates.
- PSI Employee Code of Conduct;
- Trafficking in Persons policy;
- Recruitment and employment policies;
- supply chain agreements
- Implementing Subrecipient/Subcontractor agreements
- PSI's Policy on Child Protection and Preventing Sexual Exploitation and Abuse
- Procurement due diligence process

AWARENESS

- Additionally, the PSI Code of Conduct is signed by all PSI personnel to show that they have read, understood, and will abide by its policies and principles. The code of conduct statement specifically covers trafficking in persons, modern slavery, child welfare, and preventing sexual exploitation and abuse.

CONCLUSION

Results demonstrate that social franchises in these three West African countries serve a wealthier segment of the population, likely those who are able to afford out-of-pocket costs for private care. The relative wealth of social franchise clients must also be assessed within the context in which they are located, and all three of these West African franchise networks are concentrated in capital cities and other urban settings. Depending on the franchise goals, program managers can use this information to target middle-income clients, offer subsidies to the poorest, or continue to provide a high quality private sector alternative to those who can afford to pay, relieving a burden on stressed public systems.

The background features a gradient from dark purple at the top to dark blue at the bottom, overlaid with a field of small white stars. Several technical diagrams are visible: a circular gauge with a scale from 0 to 210 and a needle pointing to approximately 180 is in the top right; a circular diagram with concentric lines and arrows is in the bottom right; and a circular diagram with a dashed line and an arrow is in the bottom left.

Thank you