

Early Warning System for Contraceptives in West and Central Africa Improves Supply Availability

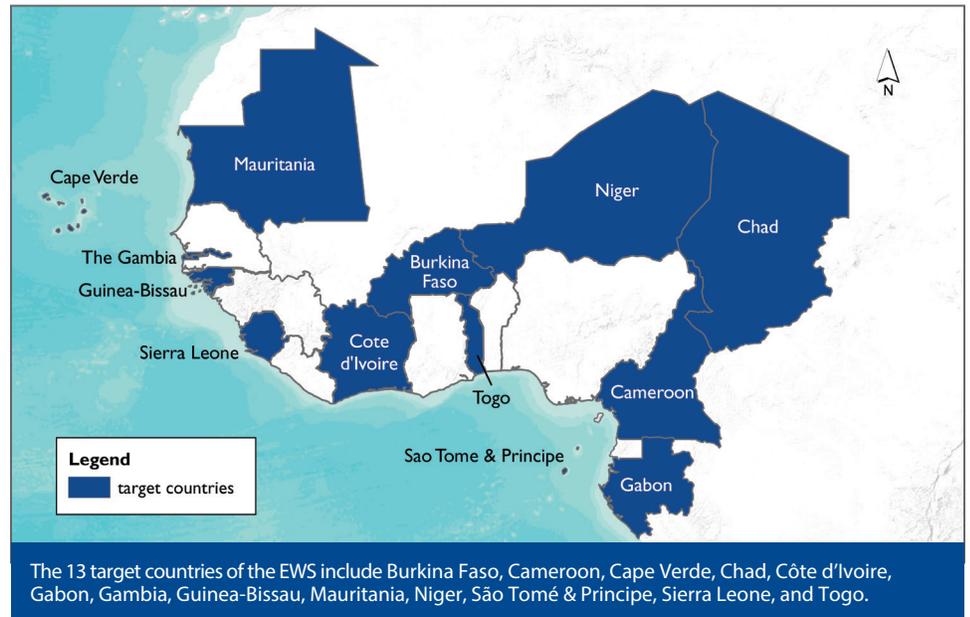
The early warning system (EWS) for contraceptives has improved visibility and monitoring of contraceptive stock status in West and Central Africa, and mitigated critical contraceptive stock imbalances.

Contraceptive Security in the Region

Contraceptive security exists when every person is able to choose, obtain, and use quality contraceptives and condoms whenever s/he needs them. The West and Central Africa region has some of the lowest contraceptive prevalence rates in the world, and some of the highest unmet need for family planning. A major challenge to addressing unmet need and ensuring the success of family planning programs in the region is ensuring a continuous supply of quality contraceptives and continuous monitoring of contraceptive stocks at the country level.

The Early Warning System

The two components of the EWS are the Procurement Planning and Monitoring Report (PPMR) and the Coordinated Assistance for Reproductive Health Supplies (CARhs) group. The PPMR provides information on stock levels and shipments for contraceptives for the public sector, nongovernmental organizations, and social marketing programs in more than 30 countries. Participating countries report data to a central database on a monthly or quarterly basis. The CARhs group uses the data at the country and global levels to respond to supply issues. CARhs



members include UNFPA, USAID, the West African Health Organization, the Implants Access Program, the Clinton Health Access Initiative, and the Reproductive Health Supplies Coalition (RHSC). The CARhs group meets monthly to review the PPMR, identify contraceptive stock imbalances, discuss solutions, and act within available financial resources to avoid or mitigate stock problems, including stockouts and overstocks. The EWS operates via an online system that allows registered users to enter data, access current and historical country data, and create reports. The CARhs group also uses the online system to create the monthly meeting agenda and to track the outcomes of identified issues. To learn more about the online system, please visit <http://ppmr.rhsupplies.org>.

Participation Improves Supply Availability

Since December 2011, when the first West and Central African country started participating in the EWS, the CARhs group has used the data to:

- Create 56 new shipments to avoid or resolve stockouts in 10 countries in the region. The value of the new shipments is approximately \$7.8 million.
- Arrange two transfers between countries in the region to avoid product expiration in one country and fill a critical stock need in the other.
- Accelerate six shipments to avoid or resolve stockouts.
- Cancel or reduce the quantity of five shipments to avoid or reduce overstocks, for a savings of approximately \$440,000.

The EWS in West and Central Africa

In August 2011, USAID West Africa provided funding for the extension of the EWS to 13 countries in West and Central Africa. The USAID | DELIVER PROJECT now works directly with the ministries of health (MOHs) in the 13 countries to support them to report contraceptive stock level data via the PPMR on a regular basis. In several of these countries, other programs providing family planning services have also started reporting data on contraceptive stock levels via the PPMR (including social marketing programs, International Planned Parenthood member associations, and Marie Stopes International). By May 2015, all 13 target countries¹ and a total of 20 programs had submitted quality data for review by the CARhs group.

The USAID | DELIVER PROJECT continues to provide remote support to the 13 countries and in-person technical assistance in focus countries to ensure the ongoing and timely submission of high-quality data. Despite this support, a few countries and programs continue to have difficulties submitting reliable data on a regular basis.

Benefits of the EWS

Participation in the EWS allows countries to communicate up-to-date data and supply needs to in-country and global stakeholders. Countries can ask donors to provide updated information about pending shipments, create emergency shipments, expedite existing shipments, or delay or cancel shipments to avoid overstocks or expiries. The CARhs group considers requests monthly and its members take action based on respective donor involvement in each country and

¹ The 13 target countries of the EWS are Burkina Faso, Cameroon, Cape Verde, Chad, Côte d'Ivoire, Gabon, Gambia, Guinea-Bissau, Mauritania, Niger, São Tomé & Príncipe, Sierra Leone, and Togo.

their ability to respond in the requested timeframe.

The implementation of the EWS in the region has led to—

- Increased visibility of country data and contraceptive needs.
- Improved monitoring of contraceptive stock levels at the country level.
- Improved in-country coordination among family planning stakeholders and programs.
- Improved coordination at the global level to respond to country supply needs.
- Increased information sharing on shipments to countries.
- Increased donor and health authority awareness of the need for supply chain systems strengthening.
- Increased resources for contraceptive procurement.

Use of the PPMR Data Beyond the CARhs Group

Recently, other global coordination mechanisms have started using data reported via the PPMR for longer-term procurement planning and decisionmaking. For example, the Coordinated Supply Planning Group (CSP)² uses PPMR data to help assess the risk of longer-term stockouts and overstocks for key commodities (such as implants and Depo-Provera) so that actions can be taken in advance to avoid stock crises and meet country needs. PPMR data is now used by the CARhs group to address imminent supply imbalances and by the CSP to prevent future supply imbalances.

²The Coordinated Supply Planning (CSP) group of the RHSC was formed based on a need identified during a meeting of the System Strengthening Working Group in October 2012. The overarching objective of the group is to improve supply chain coordination for family planning commodities through continuous collaborative development of forecasts and supply plans among the major donors and the countries they support.



A client holds a packet of condoms that she just received in Mali.

World Education 2004

Additional Activities in the Region

The USAID | DELIVER PROJECT also provides targeted contraceptive security strengthening technical assistance to five focus countries in the region: Burkina Faso, Côte d'Ivoire, Mauritania, Niger, and Togo. Activities support existing country objectives and strategies and include building capacity in supply chain management, strengthening the contraceptive logistics system, strengthening reproductive health commodity security committees and their use of data for decisionmaking, and supporting efforts to increase investments in supply chains and contraceptives. These activities are managed by the project's regional office in Ouagadougou, Burkina Faso with support from project headquarters in Washington, D.C.

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