

FOCUS ON RESULTS

Mali



Since 2001, Mali has seen marked improvements in contraceptive product availability. Above, village women hold up condoms.

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Mali is a country facing many reproductive health challenges: low modern contraceptive prevalence (8 percent) and a high fertility rate (approximately 6.8) that has remained almost unchanged in the last 15 years (DHS 2001). The Ministry of Health (MOH) of the Republic of Mali recognizes that a key element for improving reproductive health conditions and stemming the tide of HIV¹ and sexually transmitted infections (STIs) is a well-functioning distribution system for all drugs in the public and private sector. To address these concerns, the MOH has placed particular emphasis on strengthening the management of contraceptives and condoms to ensure product availability, minimize stockouts, and guarantee the quality of products provided to clients.

Since 2001, the DELIVER project has provided assistance to the MOH to improve the health commodity logistics system performance, increase human capacity in logistics, and strengthen reproductive health commodity security in Mali. Achievements of the collaboration so far have resulted in improved logistics system performance, increased product availability, and reduced stockouts of key family planning and STI treatment commodities.

Several of the system interventions that have taken place are highlighted below. Key results from 2001 and 2005 comparative assessments show marked improvements in product availability and reduced stockouts of key contraceptives and STI treatment commodities.

IMPROVING SUPPLY CHAIN MANAGEMENT

The MOH, with technical assistance from DELIVER, has taken several significant steps toward improving logistics system performance and the drug management system, particularly for contraceptives and STI treatment drugs. Efforts have included strengthening the logistics management information system (LMIS) and improving the skill set of trained personnel in system management.

Logistics records are the fundamental framework for every logistics system; they capture critical data about resupply quantities, forecasting, and procurement, which are used for decision making. To strengthen the LMIS, new logistics records forms and a logistics manual were developed

¹ The Mali HIV/AIDS prevalence rate was estimated at 1.7 in 2001 (DHS 2001).

and validated and are now available in all sales warehouses. In 2005, more than 70 percent of facilities reported sending their logistics management reports within the previous two months; approximately 66 percent of facilities were using the reports to manage contraceptives and STI treatment drugs. Most health facilities are now considering data (quantity received, quantity consumed, losses, and adjustments) in their product ordering. It is essential to continue emphasizing the greater use of the forms throughout the system, especially within the sales warehouses.

A well-functioning logistics system also requires trained personnel in sound inventory and logistics system management. To address this issue, a training needs assessment was completed and a training plan was developed and implemented for warehouse managers. Presently, both the regional and district levels (in USAID zones of intervention) have benefited from this training. In addition, all managers at regional and district offices have received training and are applying the acquired expertise in their daily logistics management. To ensure greater effectiveness throughout all levels of the system, additional training efforts will be focused on training for managers of community health centers.

As the revised forms and system were phased in, it was also critical that essential logistics data were collected for national forecasting purposes. Therefore, a national physical inventory of contraceptive products was routinely implemented every six months. This approach allowed the collection of essential logistics data for forecasting. Since then, the Director of Pharmaceuticals and Drugs (DPD) has standardized the forms for logistics management and instituted a drug management report that combines reporting and ordering based on logistics data. Rational forecasts are also using issues data from district distribution centers to community health centers, as well as data from the national inventory.

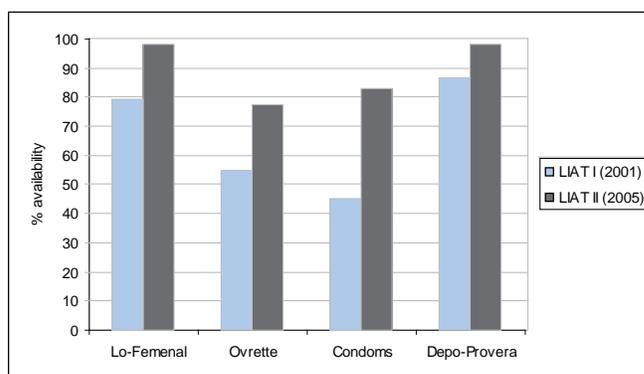
IMPROVING PRODUCT AVAILABILITY

Contraceptive logistics issues are now beginning to receive greater consideration in the national agenda. The development of an improved LMIS coupled with a larger cadre of trained personnel has significantly contributed to this increased prominence, and the environment in Mali is increasingly more favorable to sup-

porting logistics-related advances. The most tangible results of these system improvements can be seen in increased product availability and reduced stockouts of key contraceptive and STI treatment commodities.

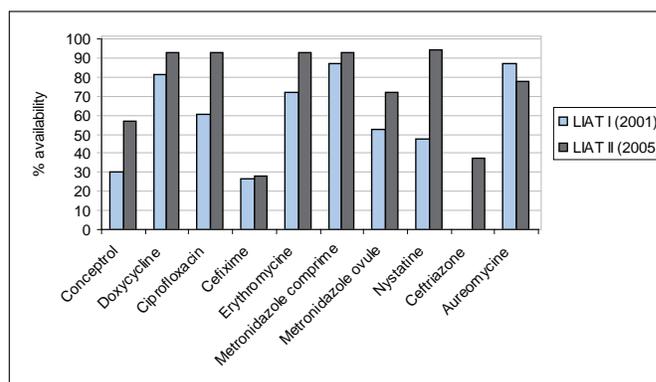
One key improvement can be seen in increased availability of many contraceptives, including Lo-Femeral and Depo-Provera, the methods in greatest demand. Most contraceptive products were also available in over 80 percent of facilities in 2005. For example, condom availability at health facilities on the day of visit increased two-fold in 2005, to approximately 82 percent. (See figure 1 for the results of the 2001 and 2005 Logistics Indicators Assessment Tool [LIAT].)

Figure 1. Percentage of Contraceptives Available on the Day of Visit



Increases in the availability of STI treatment drugs were also noted between the 2001 and 2005 assessments; all STI treatment drugs included in the assessment showed increases from 2 percent to 47 percent in terms of product availability, with the exception of aureomycine (see figure 2).

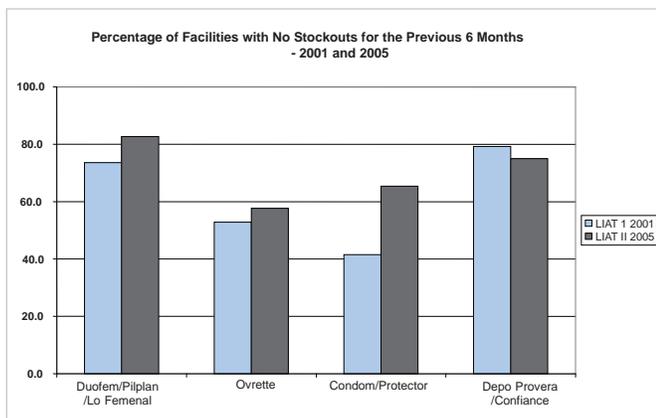
Figure 2. Percentage of STI Treatment Drugs Available on the Day of Visit



REDUCING CONTRACEPTIVE STOCKOUTS

Better use of logistics data and system improvements have also resulted in a decreasing number of facilities experiencing stockouts over a six-month period. Facilities with no stockouts of contraceptives in the six months prior to the survey increased between 2001 and 2005, indicating greater product availability for Duofem, Pillplan, Lo-Femenal, Ovrette, and Protector condoms. (See figure 3.)

Figure 3. Percentage of Facilities with Availability in the Previous Six Months



Though current trends are promising, further progress must be made for other methods, such as condoms, intrauterine devices (IUDs), Norplant, and Ovrette, which are not showing the same level of widespread availability. The lack of condom availability may in part be explained by the lower level of demand at government health facilities, as clients can often obtain condoms more easily and quickly in shops where they do not have to identify themselves. As a result, to reduce the risk of expiry, facilities tend to limit condom stocks. In addition to these concerns, methods such as the IUD and Norplant often are not offered, either because the staff are not trained to insert them or, if trained, they do not have the necessary supplies. Additional advocacy efforts are required to address these specific issues.

COMMITTING TO CONTRACEPTIVE SECURITY

A key element to ensuring the continuous supply of contraceptive products is the government's commitment to contraceptive security (CS). With the support of USAID, DELIVER, and other partners, a CS strategy

was developed to secure the supply of contraceptive products; DPD is currently coordinating this effort. A committee has been created to implement the objectives of the CS plan and to coordinate the donors and partners.

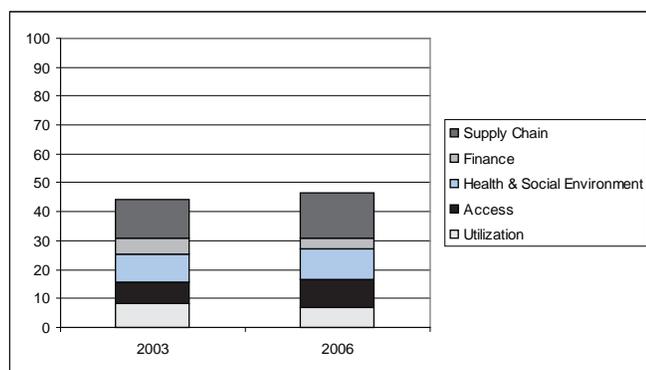
Contraceptives are currently supplied to the MOH from USAID and UNFPA. The Government of Mali does not have a specific budget line item to purchase contraceptives, but a national effort advocating for inserting this in the budget to procure contraceptive products is under way, with a strong media component aimed at raising awareness among authorities and decision makers. In addition, the Government of Mali has pledged to guarantee continuous availability of contraceptive products and quality reproductive health services. Accordingly, it has established the following specific objectives for the next 10 years:

- Transfer the acquisition of contraceptive products from donors to the government.
- Improve the management of contraceptive logistics.
- Improve the quality of services provided to family planning clients.
- Reactivate community-based distribution of contraceptives.

The Government of Mali has already adopted several strategies to achieve these objectives, including an improved political and regulatory environment and increased involvement of the private sector in the procurement and distribution of contraceptive products. Although significant strides have been made toward achieving CS, sustained action is still required.

One tool used to monitor a country's progress toward achieving CS is the *Contraceptive Security Index*. A slight gain was made between 2003 and 2006 in the overall index score (from 44.2 to 46.4), but more significantly, the index has helped identify areas for renewed efforts (see figure 4). For example, despite improved scores for access and supply, a decreasing finance component score indicates a need for the MOH and the Contraceptive Safety Committee to focus on that objective. Implementation of the strategic plan for contraceptives and increased personnel resources dedicated to implementing the strategic plan also need to be put into operation.

Figure 4. Mali Contraceptive Security Index Weighted Component Score (2003 and 2006)



CONCLUSION

The Government of Mali has made several significant first steps on the long road to ensuring the continuous availability of contraceptive and STI treatment products and contraceptive security. Recognizing that the foundation of these efforts begins with a strong logistics system, advances have been made in revising and implementing an improved LMIS and ensuring that trained personnel are available for the maintenance and

supervision of the system. Results from these efforts are starting to show in increased product availability and reduced stockouts for both contraceptives and treatment drugs for STIs. While many obstacles are ahead, continued efforts in these areas will help provide improved reproductive health conditions for all Malians.

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