



WEBINAR RECAP

Reaching the Last Mile in Fragile Settings: Learning from Supply Chain Challenges and Strategies from Mali, Niger, and Sudan

YouTube link: <https://youtu.be/XDX-TJVgwBQ>

BACKGROUND

MOMENTUM Integrated Health Resilience works to strengthen health resilience by providing high-quality, respectful, maternal, newborn, and child health (MNCH), voluntary family planning (FP), and reproductive health (RH) health care in fragile settings. MOMENTUM recently conducted an assessment to better understand the way countries manage lifesaving commodities at the primary health care (PHC) facility and community levels. In addition, MOMENTUM explored how those commodities are dispensed and tracked and some of the major bottlenecks to their availability at various levels. This webinar, from August 2024, highlights experiences from Mali, Niger, and Sudan about their challenges, strategies, and lessons learned to strengthen the resiliency of supply chains at the last mile in fragile and humanitarian settings.

OVERVIEW AND SETTING THE SCENE (1:59)

Speaker: Marie Tien, Senior Technical Advisor, MOMENTUM Integrated Health Resilience

- Desk based interviews and questionnaires were conducted with seven MOMENTUM partner countries (Burkina Faso, Democratic Republic of Congo, Mali, Niger, South Sudan, Sudan, and Tanzania), to gain insight into the challenges healthcare workers face to obtain commodities in fragile and humanitarian contexts.
- The goal of this work was to raise awareness around the importance of including the last mile as part of supply chain strengthening initiatives and to add to the body of knowledge about managing supply chain and fragile settings to make them more resilient. Specific objectives include.
 - Understand the challenges faced by health workers and community health workers around commodity availability,
 - Understand policy and operational barriers,
 - Explore last-mile supply chain and related commodity issues,
 - Identify solutions to work around supply chain and commodity challenges,
 - Explore emergency preparedness processes and solutions,
 - Provide recommendations and templates for countries to use and tackle these challenges.

- Out of this work, several practical resources (available [here](#) for download) were developed including:
 - Report: Supply Chain Challenges and Commodity Availability at the Last Mile: Findings from Seven MOMENTUM Integrated Health Resilience Partner Countries
 - Recommendations: Recommendations to Improve Commodity Availability at the Last Mile
 - Template: Commodity Security Strategy

PRESENTATION ONE – MALI (5:43)

Speaker: Dr. Hamza Baiya Toure, Supply Chain Management & Immunization Advisor, MOMENTUM Integrated Health Resilience

- Supply chain issues identified in Mali include difficulty supplying northern regions by land from Bamako, lack of qualified MOH supply chain staff in the northern regions, inconsistent supply from the health district to the health facility level to ensure availability of commodities, and low completion rate of LMIS data from northern regions.
- The Mali team conducted a situational analysis of the supply chain, which resulted in the following observations:
 - **Strengths:** availability and maintenance of all stock management reports in Gao
 - **Areas for Improvement:** lack of local supply chain coordination committees, quantification issues of inventory reports in DHIS2, and low stock of family planning products
 - **Bottlenecks:** Lack of Logistics Management Information Systems (LMIS) skills and low completion rates in DHIS2
 - **Long-Term Corrective Measures:** Improved staff training on stock management data, incorporating LMIS into project data reviews, and developing supply chain coordination committees
 - **Actions Taken:** Creation of regional and local supply chain committees and provided guidance to health staff on the risk of expired products and proper disposal management practices.
- As a result of the project intervention reporting rates (DHIS2) at the regional and district levels increased overall between January 2023 and June 2024. Establishing supply chain coordination committees and meeting regularly improved help to improve these reporting rates.
 - Gao
 - Regional rate increased from 39% to 88%
 - Health District rate increased from 95% to 97%
 - Timbuktu
 - Regional rate increased from 28% to 56%

- Health District rate increased from 40% to 81%
- Lessons learned include support collaboration between organizations to fill in fundings gaps for supply chain activities to ensure sustainability; set up a regional coordination mechanism to improve LMIS data at the district level, and improve the capacity of local NGOs to support supply chain logistics management at the last mile.

PRESENTATION TWO – NIGER (21:42)

Speaker: Dr. Rakia Boubakar, Supply Chain Advisor, MOMENTUM Integrated Health Resilience

- Supply chain issues identified in Niger include frequent shortage of essential medicine, lack of health workers' knowledge on logistics management system (SIGL), insufficient means of transportation to get supplies to health centers, and inability to support the entirety of MOMENTUM project areas in terms of capacity building efforts related to SIGL.
- In order to address these challenges, MOMENTUM leveraged two key approaches, including strengthening of the SIGL and implementation of a drug delivery strategy at the last mile.
- MOMENTUM conducted a situational analysis of the SIGL, and then conducted training for 274 health workers within the project area, in addition to post-training supervision at 45 health centers.
- To address issues related to drug delivery, MOMENTUM examined last mile bottlenecks and developed an appropriate delivery strategy in collaboration with key stakeholders based on findings. Additionally, the project hosted orientations for mayors of three communes within MOMENTUM-supported areas.
- Lessons learned include a rigorous supply chain management system and constant monitoring are needed to ensure better management and filling of tools, and involving local players in the whole process helps to generate enthusiasm and a greater sense of ownership of the strategy for making medicines available at the last mile.

PRESENTATION THREE – SUDAN (32:22)

Speaker: Mohammed Abalgadir, Chief of Party, MOMENTUM Integrated Health Resilience

- Supply chain issues identified in Sudan include a fragmented distribution system, often a result of insecurities, increased bureaucratic and administrative impediments, and border control issues blocking cross-over from South Sudan through the South Kordofan state where MOMENTUM operates.
- Some of the key intervention and activities going on in Sudan related to strengthening the supply chain at the last mile include: working with UN agencies and key humanitarian actors to support maternal, newborn, and child health (MNCH), and water, hygiene, and sanitation (WASH) supplies, participating in national and state level coordination platforms, and conducting state-level supply chain workshops to identify key drivers of stockouts in South Kordofan where MOMENTUM works.
- The result of MOMENTUM programming to improve supply chains has resulted in the following achievements:

- Improved access to health commodities through the distribution of MNCH supplies
- Established collaborative agreements with UN peace-keeping missions in Kadugli to facilitate trainings on supply chains and identify new routes to move supplies
- In terms of lessons learned, close coordination between the health and WASH sectors at the state and national level, leveraging key partnerships with humanitarian actors, and supporting effective communication between these partners helps to increase the efficiency and effectiveness of the humanitarian supply chain system.

SUMMARY (47:12)

Speaker: Marie Tien, Senior Technical Advisor, MOMENTUM Integrated Health Resilience

The following summary points provide high-level information shared across all three presentations regarding how to improve supply chains at the last mile.

- There is a need for trained staff with supply chain, supply chain management, and LMIS skills
- Distance, transportation challenges, and on-going conflict are major obstacles to steady a supply of commodities
- Maximize attention to commodity security

Q&A (50:12)

Speaker: Nadia Olson, Senior Technical Advisor, MOMENTUM Integrated Health Resilience

- Question One: What is different between supply chains in these fragile and humanitarian settings?
 - Ultimately the supply chain principles and solutions are the same. What is different is the context and the actors you are operating with. All of the elements you need to include, and the nature of a rapidly changing environment is something that is different in these settings. Sometimes, there is a full humanitarian system operating in an area completely separately from the government which indicates that there is different approaches and information being shared between the two channels that may not always be aligned. As a result, it's important to support collaboration between all those who are involved in this work at the local level. For example, a supply chain system you mapped a year ago may look different now than it did then, as well as the demographics of the population due to internal and external displacement. These are not always things considered in more "stable" environments.
- Question Two: What causes reporting rates to be low in fragile settings? Is it just lack data?
 - No, it is not just a lack of data. If the people at the lower level of the system don't trust that reporting will result in benefits to their facility, they may not choose to do this. Perhaps they don't understand how to report due to lower literacy levels, or perhaps staff are overburdened. There are a variety of different reasons for this. For example, in Niger, three different health facility populations have been displaced so that is something that has affected their reporting rates.

RESOURCES

- [Learning Brief Series on Supply Chain Management Practices in Humanitarian Crisis](#)
- [Ready to Save Lives: A Preparedness Toolkit for Sexual and Reproductive Health Care in Emergencies](#)
- [The Logistics chapter of IAWG's *Inter-Agency Field Manual on Reproductive Health in Humanitarian Settings*](#)
- [Supply Chain Management for Health Care in Humanitarian Response Settings: Addendum to the Supply Chain Manager's Handbook](#)
- [Develop a continuity of operations plan \(COOP\) to develop emergency protocols](#)