



# Reproductive Health Supplies Coalition

13<sup>th</sup> Annual Membership Meeting

4-5 October 2012

The LAC FORUM WORK



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# Where are we in LAC today

- The income indicator is relevant but can be misleading:
  - LAC has the highest level of income inequality worldwide
  - ICPD and MDG achievements hide large inequalities
  - Limited capacities of governments to overcome challenges: institutional frameworks, governance, citizen security, and historical imbalances
- Subnational differences: Mexico, Brazil
  - Development aid to benefit poor people, not just poor countries
- A comprehensive approach has been taken by most countries- Reproductive Health is part of main policies, programs- however, conservative groups are growing and gaining influence at the society level
- Donors and technical cooperation are phasing out from the region ( graduation of FP/MH programs, less fresh financial resources and therefore less resources to address the needs of young people, women, men and families)



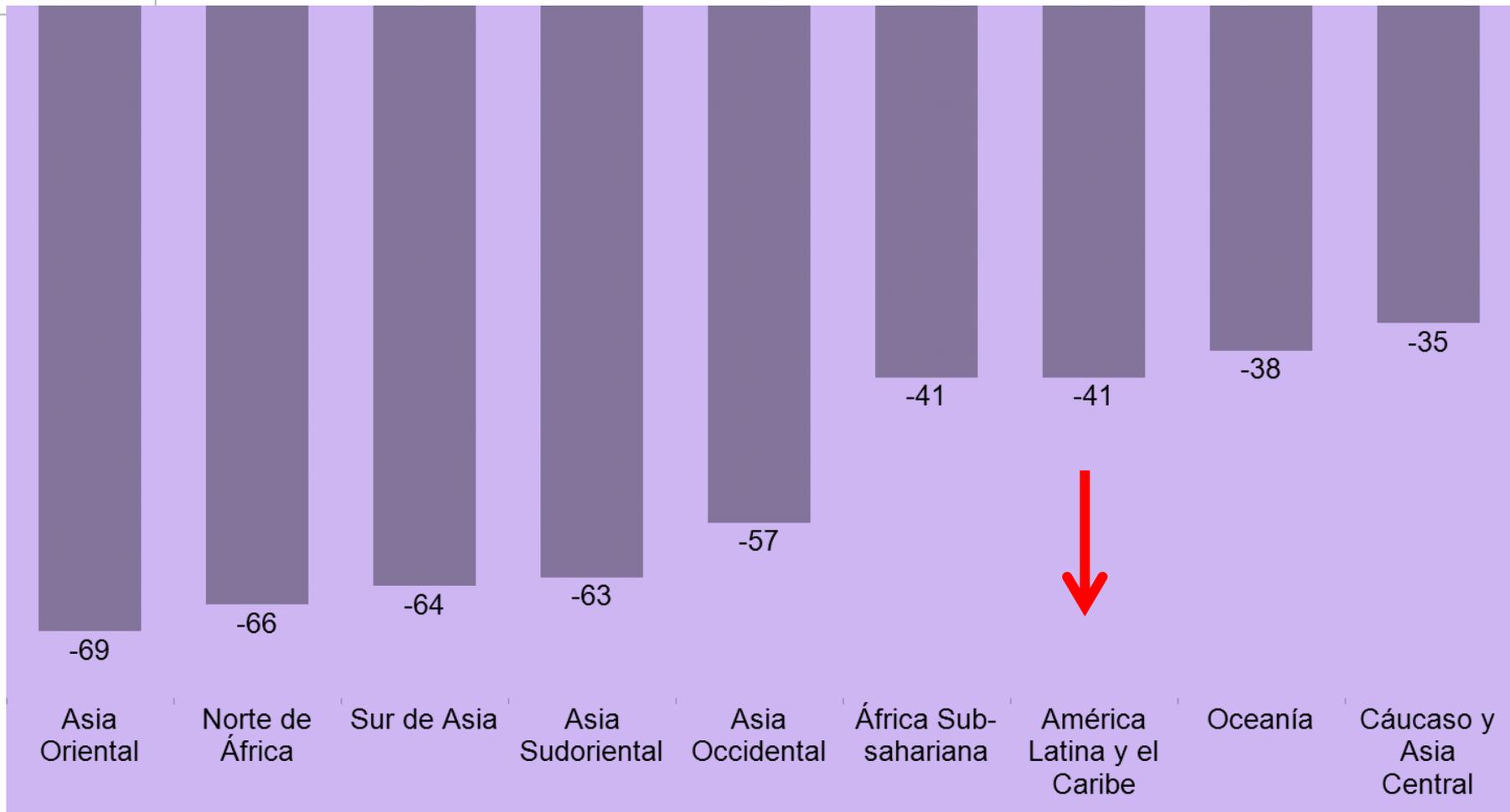
# Progress on main RH indicators.

## Important gaps persist among and within countries

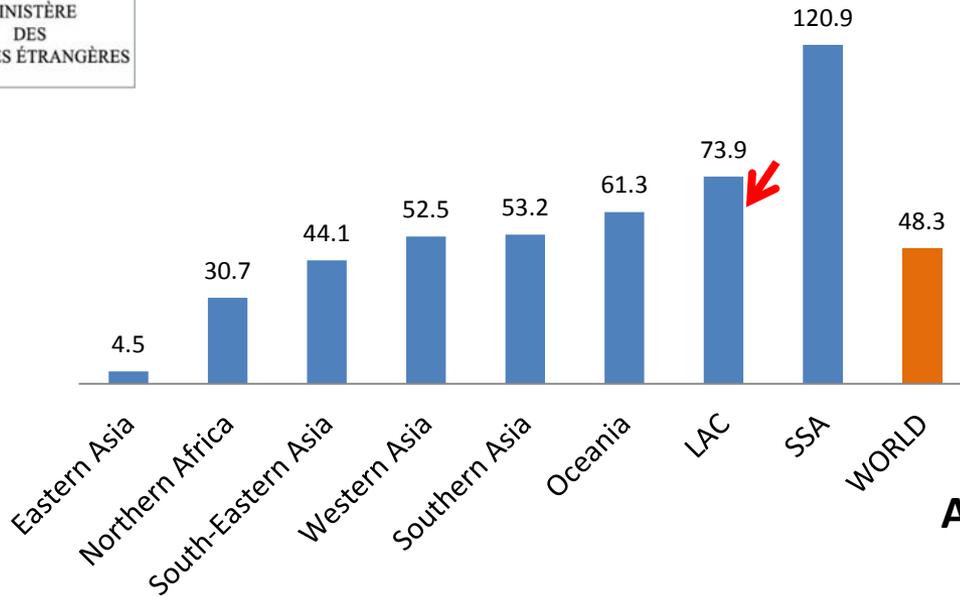
- MMR reduced in 41% from 140 in 1990 to 80 in 2010
- 13 countries remain with High MMR in the region: Bolivia, Guatemala, Guyana, Haiti, Honduras, Paraguay, Peru, Dominican Republic, Suriname, Jamaica, Ecuador, El Salvador, Nicaragua (OPS, 2011).
- Unmet need in family planning: 22% as regional average (8% - 42%)
- HIV/Aids remains high with prevalence (> 1.4%) Caribbean and most excluded and vulnerable populations.
- 5-16% of women report SV by intimate partners in lifetime. (DHS and RH surveys in 16 countries.)
- Cervical cancer among the leading causes of deaths in women.



# Good news: progress in the reduction of maternal mortality



# ADOLESCENT AGE SPECIFIC FERTILITY RATE , 2007

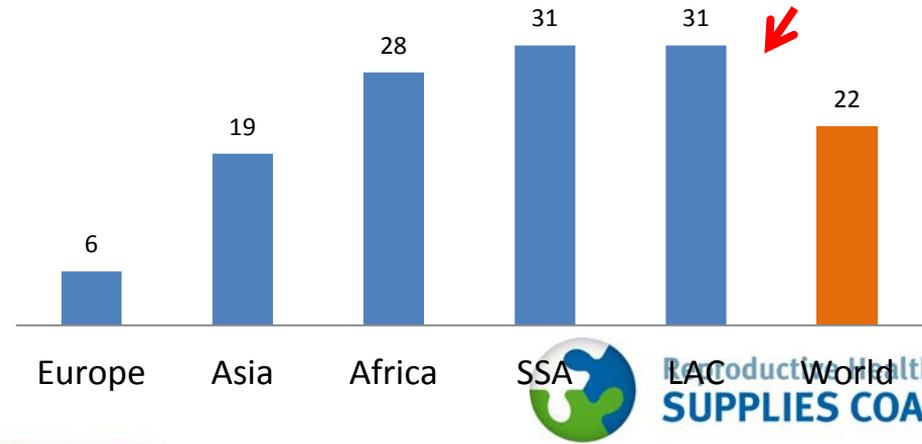


← One of the highest in the world

Source: UN Population Division

## Annual unsafe abortion rate per 1000 women 15-44 years, 2008

→ The highest in the world



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Source: WHO- 2010



# The FORO LAC or the LAC FORUM



- Some countries have increased budgets for RH/MCH, however not all resources are earmarked for FP and other key priorities
- A RHCS regional forum has been established in 2010, at that time the Forum counted around 15 committed members. Now it has reached 230 members. to harmonize the regional work on RHCS and move forward joint initiatives, advocacy and health systems strengthening
- The founders were determined to join forces with a clear mission. To identify common and complementary strategies responding to the complex reality in the region in order to maintain the undeniable progress and avoid setbacks in securing availability of essential RH supplies.
- One example of our work is the study funded by the FORO that our colleague Zaira will be presenting on behalf of our group



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# Progress and challenges to advance Reproductive Health Commodity Security in LAC region

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# Objectives

To share results of the qualitative study undertaken by the Foro LAC Nov 2011-May 2012

- Presents progress and challenges in the field of strategic RHCS in the region.
- Identify gaps and opportunities for the development of coordinated actions between organizations and countries, oriented to RHCS in LAC region.



# Study scheme

- ▶ Background
- ▶ Regional context
- ▶ Progress and challenges:
  - ▶ Current country commitments on RHCS
  - ▶ Resources allocated for RHCS
  - ▶ Coordination and complementarity between actors
  - ▶ Capacities of countries to develop certain competencies: policies; forecasting, procurement and distribution of supplies; service deliver and monitoring and evaluation
- ▶ Conclusions
- ▶ Recommendations for action



# Metodology

Countries of the study: Guatemala, Dominican Republic, Nicaragua, Perú, Paraguay y Bolivia.

34 Interviews to stakeholders were made

1. Desk review

2. Interviews

15 : agencies

10 : social society

9 : public sector

3. Analysis of information, findings and

4. Recommendations and conclusions

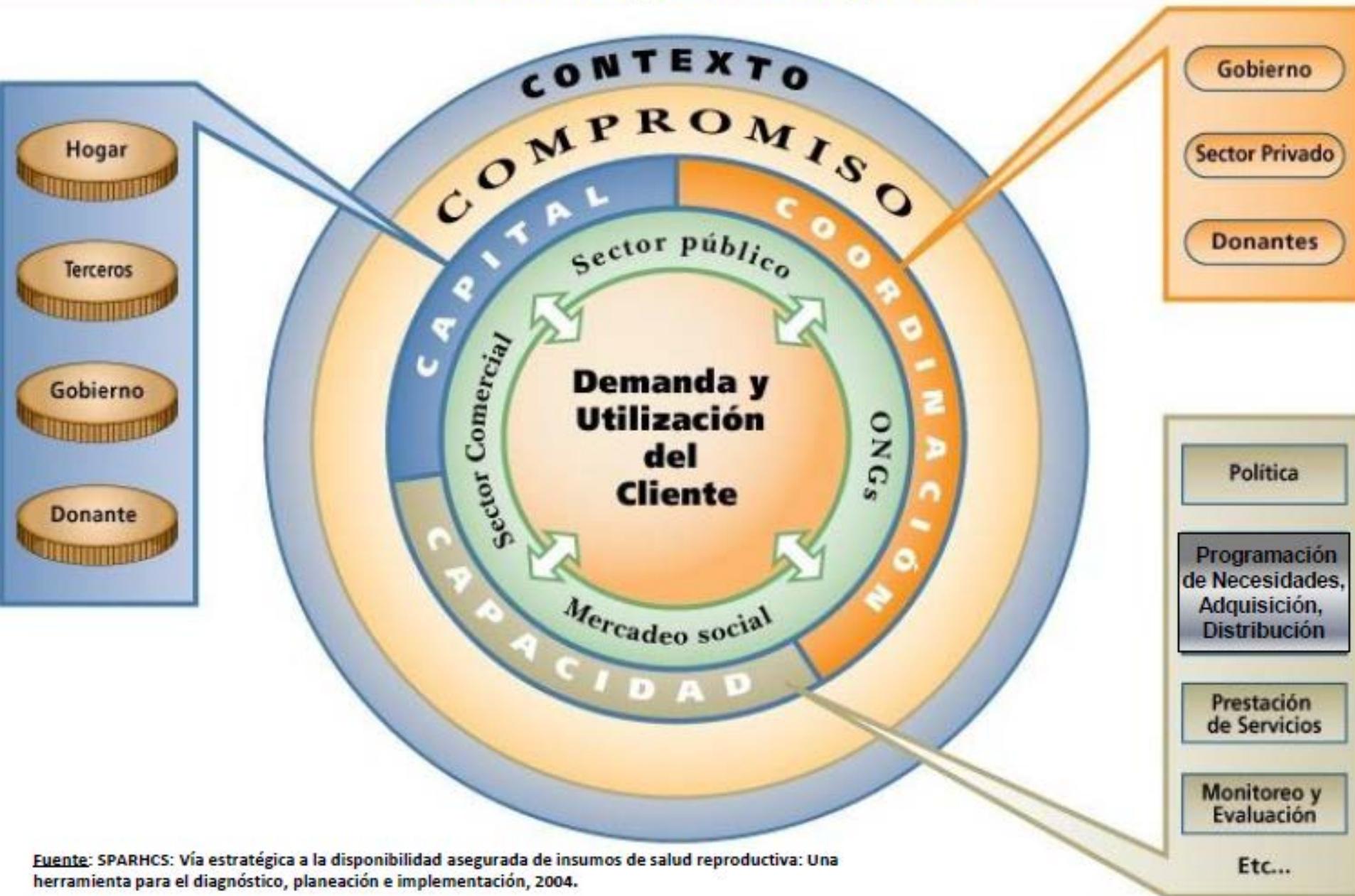


# Conceptual Framework

Ensuring Reproductive Health Supplies, implies that all people have access to the necessary supplies to meet their reproductive health needs safely, constant and based on adequate information. That is, they can choose, obtain and use the supply they want or need.



# Marco de la Disponibilidad Asegurada de Insumos y Anticonceptivos



Fuente: SPARHCS: Vía estratégica a la disponibilidad asegurada de insumos de salud reproductiva: Una herramienta para el diagnóstico, planeación e implementación, 2004.

# Findings: current policies regarding RHCS

- Strong political commitment to reduce maternal mortality within the MDG 5 ( a and b) framework.
- Focused on: access to essential services including supplies for FP, prenatal care , delivery, post partum and emergency obstetric care
- Legal framework is generally favorable, with particular restrictions:
  - Peru, adolescents restricted to access to FP methods.
  - Dominican Republic: The Constitution recognizes that life starts at the moment of conception



# Findings: Resources allocated for RHCS

- Progressive budget allocation for supply purchases from fiscal funds. In all 6 countries
- However, fiscal resources are insufficient for effective and efficient logistics management
- Human resources are insufficient and not qualified to manage and operate the supply chain
- Weaknesses found on the supply chain (infrastructure, equipment and information systems)



# Findings: Coordination and complementarity between stakeholders

- All countries, but Bolivia, in the study have intersectoral functioning committees for commodity security, which are mainly focused on FP
- Committees have proven to be an effective mechanism, but its sustainability is questionable
- More work is needed to strengthen committee's institutionalization and therefore ensure country ownership
- It would be important to document and promote this model in other countries in the region. One important issue is to expand to a broader reproductive health approach. ( e.g maternal health and others)



# Main challenges that need to be addressed: Policies and social participation

- Changes of government generates political instability as involves changes of personnel in the public sector including the technical levels
- Limited resources for implementation of the regulatory framework in RHCS
- Decentralization affect somehow the implementation of national policies- adherence of national policies is still weak at local levels
- Civil society is a necessary and important actor for social auditing and advocacy



# Main challenges that need to be addressed: forecasts, procurement and distribution

- Infrastructure for MIS continue to be weak in most aspects, e.g. equipment, technology, internet access, etc.
- Procurement processes require policy changes in some countries
- Human resources do not have all the competencies needed for manage RHCS
- Poor logistics infrastructure- storage and distribution of supplies ( risk of damage/loss of supplies)
- Regulatory framework - should be enforced and adjusted to RHCS needs.



# Main challenges that need to be addressed: RH service delivery

- Improvement of supply chain: work in progress
- Training of human resources is needed to improve FP and maternal care services delivery
- Low coverage of services in rural areas and those with poor geographical access
- Mismatches between training schools and current models of health care
- Lack of professional programs for human resources in logistics management E.g pharmacist are not trained in areas relates to management of logistics



# Main challenges that need to be addressed: monitoring and evaluation

- ▶ Insufficient financial and human resources for supportive and timely supervision, monitoring and evaluation
- ▶ Fragmented information systems
- ▶ Need for better regulatory frameworks to develop this competency



# Conclusions

- Countries have made progress in strengthening its legal and policy frameworks for RHCS, but it is still insufficient, need to increase resources for effective implementation.
- Adequate financial resources are allocated for the purchase of supplies, but for logistics management is insufficient.
- Continuity of policy implementation is threatened particularly in the context of decentralization.



# Conclusions

Countries need to improve competencies with regards to:

- Procurement
- Programming supplies based on demand
- Distribution from central warehouses to the local level
- Monitoring and evaluation of the quality of supplies along the supply chain
- Training human resources in logistics management
- Harmonization of training needs with training schools.



# Recommendations for action

More action is needed at the country and regional level to improve technical and financial support in order to:

Achieve national ownership and expansion of national CS committees including others reproductive health supplies. Eg maternal health essential drugs

Ensure more civil society organizations to advocate for the implementation of the regulatory framework in RHCS, particularly due to decentralization.



# Recommendations for action

More action is needed at the country and regional level to improve technical and financial support in order to:

Research and to document good practices to raise awareness among decision-makers at all levels, about the importance of RHCS

use existing tools to improve skills for procurement, storage, distribution and delivery of supplies.



# Recommendations for action

More action is needed at the regional level to improve technical and financial support in order to:

Promote the exchange of experiences among countries in the field of logistics management.

Develop a proposal to promote the professionalization of human resources in logistics management. Eg curriculum, advocacy with stakeholders,

Strengthen logistics information systems at all levels (training, equipment, software, internet, etc)



# Perspectives

- The need to earmark allocation of public resources for purchase of RH commodities ( FP; MH)/
- To support the creation of specific national laws to guarantee access to RH services, particularly to most vulnerable populations
- To continue working on Government accountability ensuring full participation of civil society
- The FORO LAC is working to ensure the participation of the public sector and civil society





# Progress and strategic challenges for Reproductive Health Commodity Security in LAC region

Thanks for your attention!

