Lessons from the Transparent, Participation and Accountability Field for RH supplies

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Reproductive health (RH) supplies often fail to reach the women seeking to use them due to systematic weaknesses in the timely delivery of supplies, vulnerabilities to disrespect, abuse and rent-seeking, and providers’ biases at different points in health systems.
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40 Participants discussed:

• Practical strategies to address the bottlenecks in the supply chain and implementation challenges that limit citizen’s contraceptive choice;

• We focused on citizen oversight and accountability
First Reflection: There are some conceptual shifts needed.

• Where does the supply chain start?
Second Reflection: We need to politicize RH Supplies

How can “unmet demand” be converted more effectively from an invisible problem to public claims for rights to services?
Third Reflection: Understanding Power is central to applying TPA to RH Supplies

• Complexity of the accountability “ecosystem” for RH supplies - includes donors, private sector and CSOs
• We need to understand actors, influence, oversight mechanisms
Fourth Reflection: How can we make use of currently data for concrete action or change?

Currently strong performance and monitoring data collection but:

• Little awareness among of what data is being collected - and how it might be used.
• Public access is difficult
Fifth Reflection: Challenges of applying TPA strategies

- Slow burning activities
- Strains relations with authorities
- Tension between sustainability and independence
What’s Next

- Power Mapping Analysis of the Supply Chain
- How is family planning priority in social accountability
- Equity analysis and Access to Medicines
- Citizen oversight of the GFF implementation
Table Discussion Questions:

How can systems design be applied to your work?

How can citizen monitoring and oversight be applied to your work?