

Improving Access to Essential Medicines for Maternal Health: *Strengthening Procurement Systems at the Subnational Level in Bangladesh*

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MNCH in Bangladesh

- Maternal mortality ratio (MMR) in Bangladesh: 194 deaths per 100,000 live births (Bangladesh Maternal Mortality Survey 2010)
- Decrease in MMR largely due to:
 - Drop in fertility
 - Increased use of health facilities for deliveries (from 9% to 23%) and maternal complications (from 16% to 29%)
- Child mortality dropped from 65 to 46 deaths per 1,000 live births and infant mortality reduced from 52 to 38 deaths per 1,000 live births from 2007-2014 (Bangladesh Demographic Health Survey 2014)



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MNCH Service Delivery

Directorate General for Health Services (DGHS)

- Maternal health
 - Comprehensive emergency obstetric care (CEmOC), basic emergency obstetric care (BEmOC)
 - Postpartum hemorrhage (PPH), pre-eclampsia/eclampsia (PE/E)
- Newborn and child health services

Directorate General for Family Planning (DGFP)

- Family planning
- Maternal health services
 - CEmOC , BEmOC
 - PPH, PE/E
- Basic newborn and child health services
 - Newborn resuscitation
 - Pneumonia
 - Diarrhea



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Challenges to Access to Medicines

- Weak governance of pharmaceutical management processes
- Human resources
- Lack of information and data for decision making
- Poor warehousing practices
- Inefficient procurement and distribution systems



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Purpose and Objectives

To understand how local procurement practices affect access to maternal health medicines

Objectives:

- To measure availability of maternal health medicines and determine their sources
- To evaluate local procurement practices
- To identify options for strengthening local procurement practices and overall procurement strategies



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Methodology

- Literature review
- Key informant interviews at the central level and semi-structured interviews at the district level
- Document and record review
- Direct observation
- Data collection tools
 - **Procurement** : Sources of medicines, procurement practices and prices
 - **Stock status** : Availability within the last 12 months and storage conditions



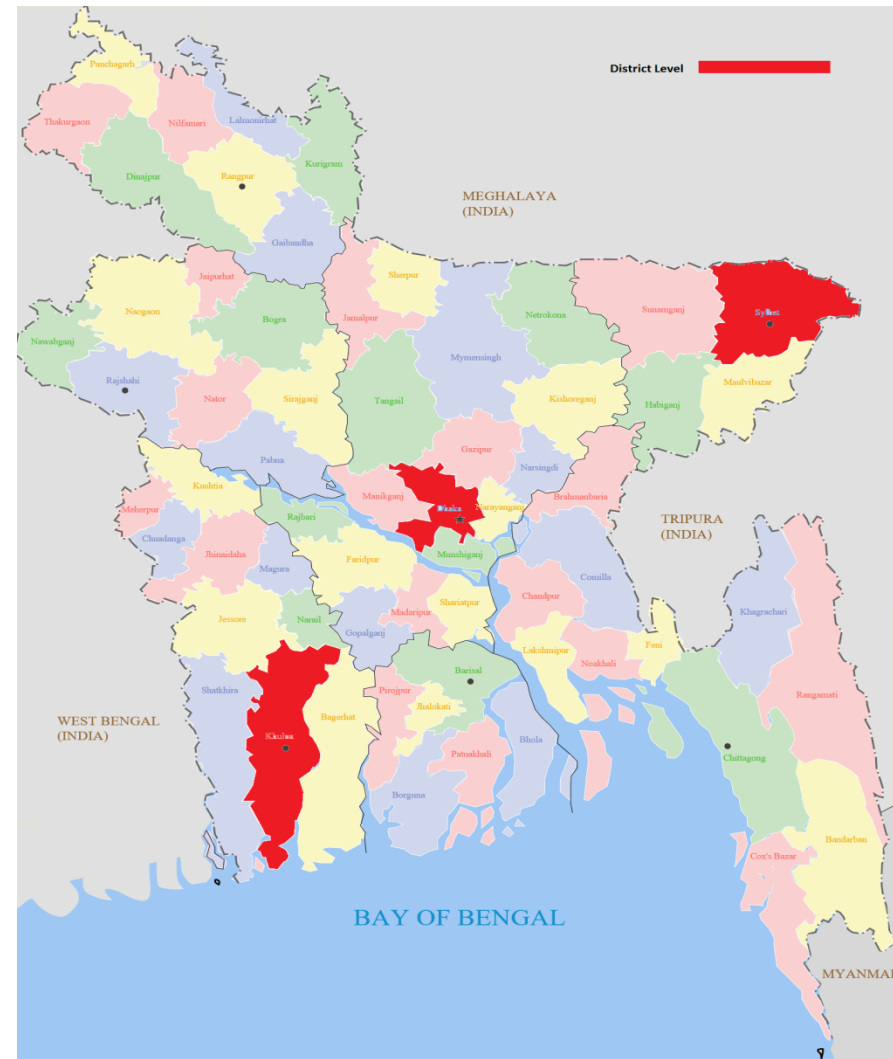
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Sample

- Three divisions and districts were selected in consultation with DGHS and DGFP based on:
 - MMR
 - Perceived capacity and performance of the system
 - Geographic accessibility



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Results

- **Availability**
- **Source of medicines**
- **Procurement**
 - Local procurement guidance and training
 - Quantification



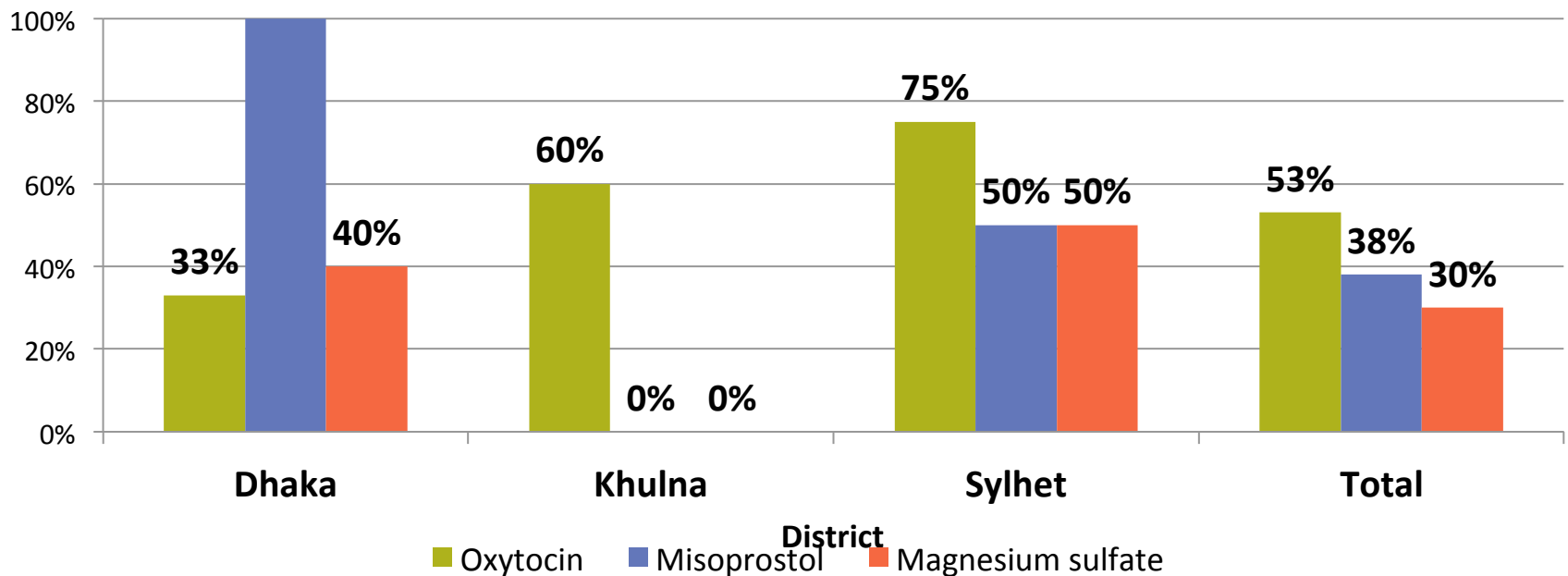
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Availability

Essential maternal health medicines are not consistently available at district-level service delivery points (or the storage facilities that supply them)

Percentage of sites that had maternal health medicines available on the day of the visit

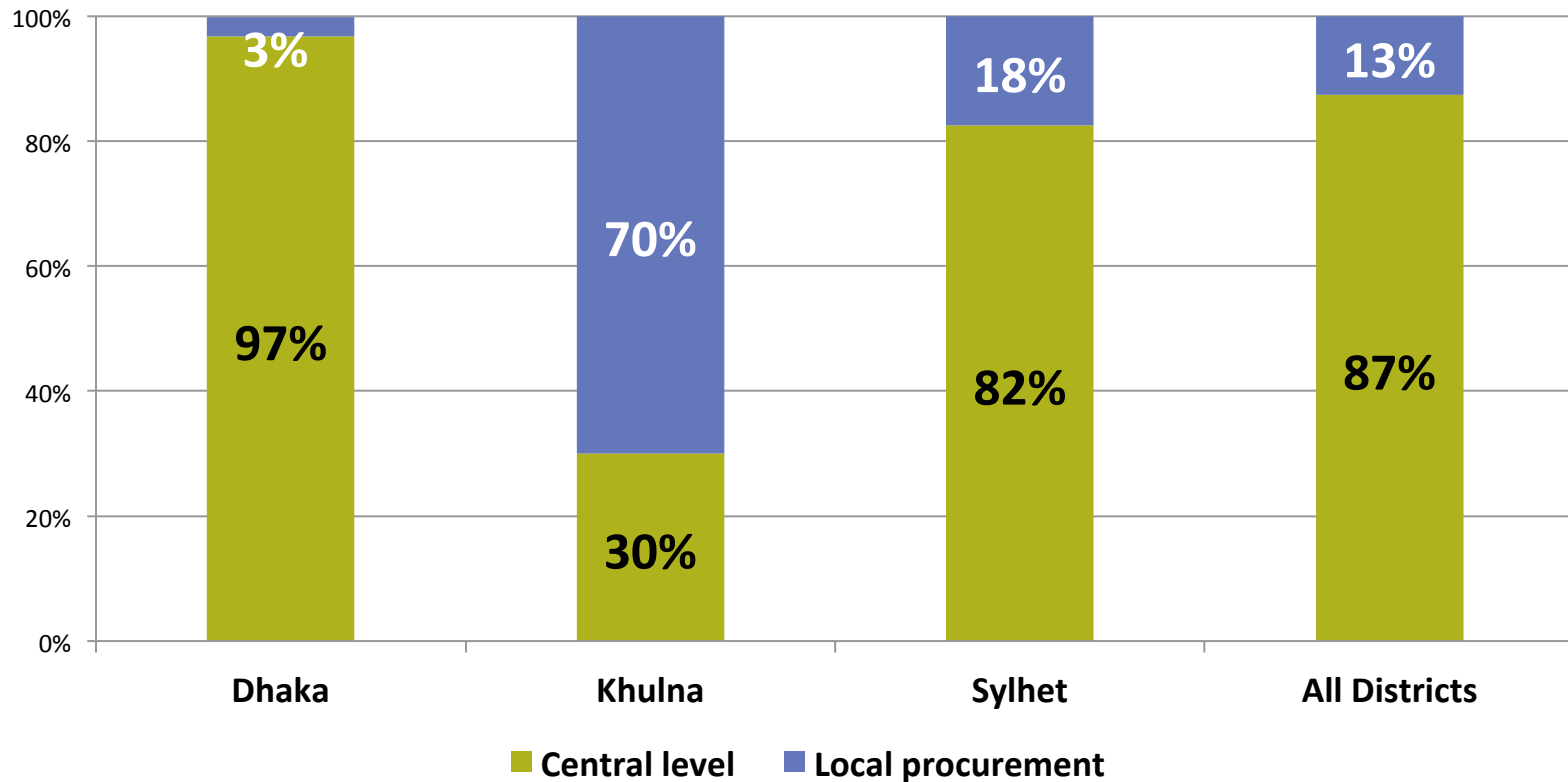


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Source of Medicines

Sources of maternal health medicines in each district



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Procurement Guidance

- All informants reported using the government rules and regulations for guidance on procurement
 - There are no official guidelines or standard operating procedures (SOPs) *specifically* for local procurement of medicines
- Uniformity observed in procurement forms and documents used by health facilities varied from some to less uniformity
 - No standard MOHFW templates



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Quantification

- No guidance or training specifically for quantification reported by health facilities
- Quantification based on incomplete and unreliable data; assumptions not evidence-based
- Facilities reported using consumption data; however, true consumption data not available
 - Distribution data used as proxy for consumption



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Conclusions

- Limited availability of maternal health medicines despite the source of medicine
- Use of local procurement varies by district
- No guidelines or SOPs specifically for local procurement, which would encourage standardization
- Current training programs do not specifically address local procurement of medicines, including quantification
- Forecasting calculations and assumptions are not evidence-based



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Game-Changing Interventions

Key follow-on activities recommended in SIAPS' procurement assessment. These activities are endorsed by the Government of Bangladesh and supported by SIAPS—

- Local procurement guidelines and training
- Logistics management tools
- Electronic Logistics Management System (eLMIS)



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Local Procurement Guidelines and Training

Issue:

- Lack of guidelines/SOPs for local procurement

Activities done:

- Development of guidelines for local procurement
- Training curriculum on local procurement
- Capacity building for local managers
- Capacity building for indigenous institutions



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Logistics Management Tools

Issue:

- Poor storage and inventory management system

Activities done:

- Basic logistics management guidelines endorsed
- Basic logistics management training

Leading to:

- Product quality
- Product availability
- Proper reporting for forecasting and procurement



eLMIS

Issues:

- No standard LMIS in DGHS
- No reporting on the actual consumption, little or no visibility of data for forecasting, procurement, and distribution of medicines

Activities done:

- National technical working group on priority medicines formed
- Beta-testing on eLMIS
- Real-time data made available for procurement planning



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Thank you!



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