

Ensuring access to reproductive and maternal healthcare through stronger supply chains

MDG 5 is off-track in most of Africa. Why?

Dr Kwalombota Kwalombota identifies some of the barriers



Governments and donors have for the past decade channelled significant resources towards fighting major diseases like HIV/AIDS, TB and Malaria, thereby making progress towards achieving Millennium Development Goal Six. By contrast, Millennium Development Goal (MDG) five - to improve maternal health - remains significantly off-track. The ambitious targets of reducing the maternal mortality ratio by three-quarters and achieving universal access to reproductive health by 2015 will not be met by the vast majority of countries. Recent figures from the United Nations show that more than 350 000 women die annually from complications during pregnancy or childbirth with 99% of cases in developing countries.

Most maternal deaths are preventable. Obstetric haemorrhage accounts for nearly a third of all maternal deaths and other complications such as sepsis, unsafe abortion, obstructed labour, and hypertensive diseases, could all be easily prevented and managed with reliable access to effective healthcare and medical commodities.

The African continent is falling furthest behind in meeting MDG five. In sub-Saharan Africa, women are nearly 200 times more likely to die during pregnancy and childbirth than women living in developed countries, according to recent United Nations statistics. Every year, more than a million children are left motherless and, tragically, children who have lost their mothers are also up to 10 times more likely to die prematurely than those who have not.

Access to safe and reliable medical supplies is critical for managing maternal health and other health problems. Ensuring access to services requires a reliable supply of commodities for maternal health including contraceptives, equipment and supplies for safe delivery, and medicines for birth complications.

A number of barriers are hindering access to high-quality essential commodities for maternal health. These include severely under-resourced regulatory agencies leading to delayed and fragmented registration of commodities, variable product quality, and market failures

Dr Kwalombota Kwalombota is a senior health consultant at Crown Agents and a medical doctor with expertise in maternal health, reproductive health, and HIV/AIDS. He has 9 years' experience in clinical medicine, public health and international development with significant experience in the design and delivery of healthcare programmes in sub-Saharan Africa.

that inhibit competition. Other in-country challenges include: limited demand for products by end-users; limited supply chain management capacity; poor forecasting, warehousing inventory management and distribution; poor infrastructure; and lack of training in the use of equipment and supplies.

There has been a renewed emphasis on ensuring reliable access to reproductive and maternal healthcare as evidenced by several new initiatives. At the London Summit on Family Planning in July, global leaders pledged to provide 120 million women in the world's poorest countries with access to contraceptives by 2020. The UN Commission on Life-Saving Commodities for Women and Children also highlights how women and children are suffering due to their lack of access to life-saving commodities. The Commission, co-chaired by the President of Nigeria, Dr Goodluck Ebele Jonathan and the Prime Minister of Norway, Jens Stoltenberg, has identified a list of 13 overlooked life-saving commodities. If more widely accessed and properly used, these commodities could save the lives of more than 6 million women and children. The Reproductive Health Supplies Coalition (RHSC), meanwhile, is harnessing the power of its 200 public, private and non-governmental member organisations to ensure initiatives aimed at increasing access to affordable, high-quality reproductive health commodities are implemented.

Crown Agents is an active member of RHSC and we are supporting numerous projects in Africa that are helping to improve access to reliable reproductive and maternal health commodities. In Zimbabwe, we are purchasing and delivering contraceptives and



emergency obstetric and neonatal care equipment to reduce pregnancy-related deaths and babies infected by HIV. In Zambia, we have procured 42 types of products including delivery beds, incubators, autoclaves, and surgical ware, and distributed commodities to over 200 sites.

We have provided supply chain management support to several projects in Nigeria that are working to improve ante- and post-natal care, expand routine immunisation, increase the numbers of safe deliveries, and provide care for newborns. We have supplied hundreds of hospital and delivery beds along with a range of medicines; surgical instruments; and laboratory, operating theatre and anaesthesia equipment. We have previously helped to produce a list of essential drugs and supplies to ensure effective maternal healthcare; more recently we have procured solar equipment to ensure lighting during power shortages and we are also delivering training in the use of essential equipment. These supplies are vital for enabling governments and other service providers to ensure consistent and reliable healthcare for women and children.

Maternal health may be the most off-track MDG in Africa, but collaborative efforts to improve reproductive



and maternal healthcare services and associated supplies are helping to close the gap. In Northern Africa, the percentage of women seeing a skilled health worker at least once during pregnancy has increased by 70% and 74% of births are attended by skilled health workers. New initiatives and commitments will hopefully ensure these successes are replicated throughout the rest of Africa.





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