

**USAID GLOBAL HEALTH
SUPPLY CHAIN PROGRAM**
Procurement and Supply Management

Increasing Access to Malaria Commodities through Improved Logistics Data Management and Mentoring in Kebbi State, Nigeria

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Background

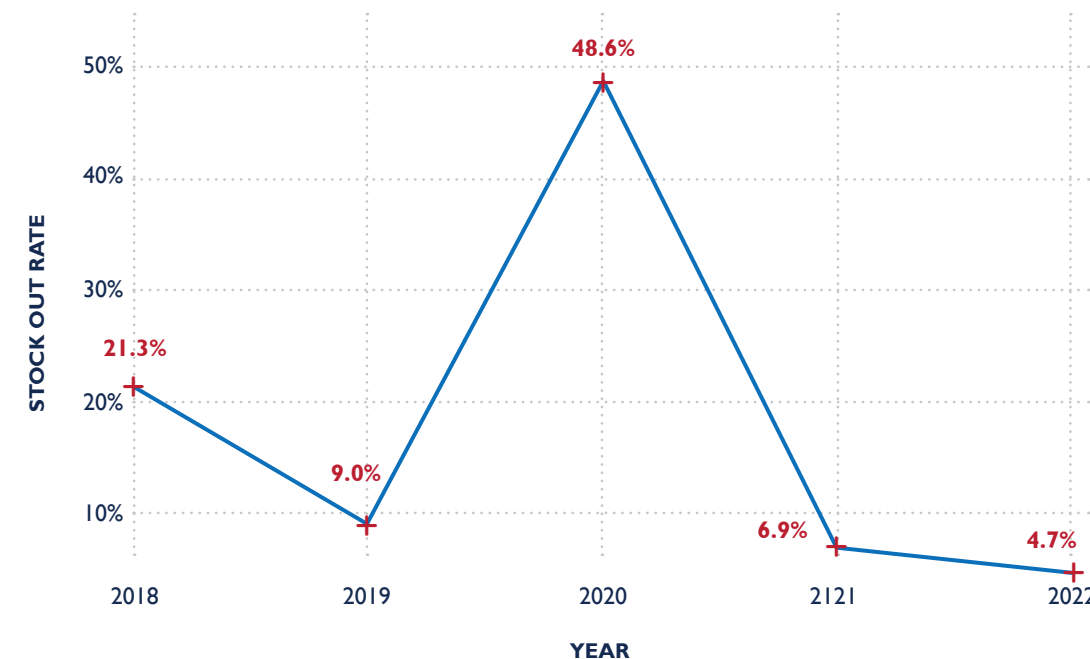
Kebbi State, located in northwestern Nigeria, is burdened with the highest malaria prevalence in the country among children under five at 49% in 2021 and the highest mortality rate, with malaria being the leading cause of death (Malaria Indicator Survey, 2022).

Between 2018 and 2022, the U.S. President's Malaria Initiative (PMI), through the USAID Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project, increased support to reduce the malaria burden in Kebbi State.

Why does this matter?

Non or inconsistent availability of malaria medicines is a key causative factor of malaria-induced infant mortality. This study looks at the impact of improved artemisinin-based combination therapies (ACTs) supply to service delivery points in Kebbi State, achieved by increasing the capacity of health facility officials to manage malaria commodity logistics.

ACTs Stockout Trend in Kebbi State



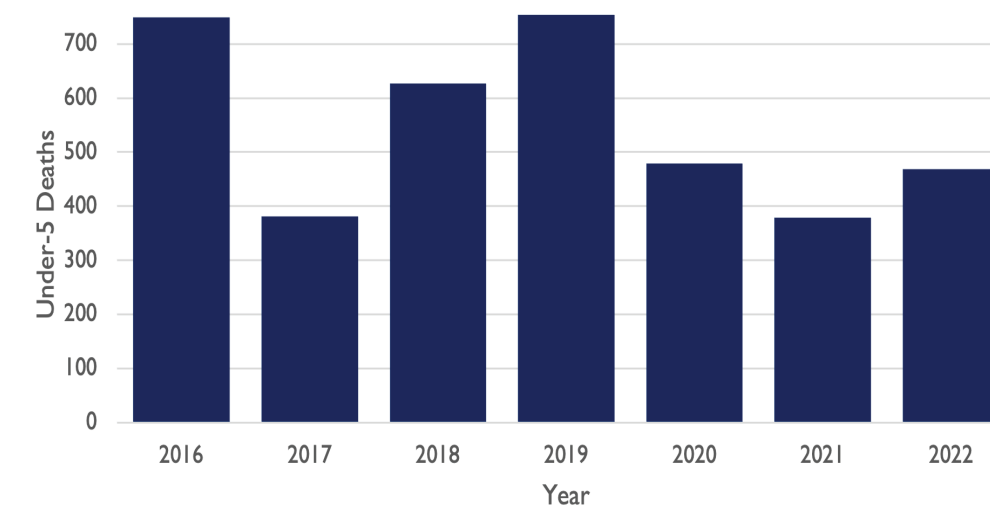
Statement of Problem

Frequent stockouts of ACTs in Kebbi State health facilities stood at 21.3% in 2018. This might have contributed to the elevated mortality rate among children. A significant reason for this was the limited capacity of health facility officials to record and transmit commodity logistics data with minimal errors and inadequate monitoring and supervision of health facility managers.

Interventions from PMI

- Trained 527 health facility officers on Malaria Commodity Logistics System (MCLS).
- Trained an additional 200 Kebbi State officials to supervise MCLS operations in the state.
- Last-mile distribution of 16.4 million doses of ACTs.

Kebbi State Under-5 Mortality Rate



Intervention Process Flow



Ongoing last-mile delivery of malaria commodities to a service delivery point in Birnin Kebbi Local Government, Area of Kebbi State. Photo Credit: GHSC-PSM

Results

- Decline in stockouts of ACTs from 21.3% in 2018 to 4.7% in 2022 (NHLMIS).
- Prompt resolution of logistics issues.
- Improved malaria data quality.
- Improved commodity resupply decisions.
- Decline in under-5 mortality rate from 627 to 468 deaths per 1,000 live births between 2018 to 2022.

Lessons Learned

- Enhanced capacity of health facility operators on MCLS is key to commodity resupply decisions.
- Ensuring commodity availability was critical to the decline in infant mortality rate.
- Regular supervision and mentoring will enhance sustainability.
- These lessons can be replicated in other provinces or states in the country.