

Supply Chain of Family Planning Service: Research Findings from 2014-2018 Facility Assessment for Reproductive Health Commodities and Services in Myanmar

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Abstract

With an effort to ensure a steady, reliable supply of quality contraceptives, the nationwide cross sectional survey “Facility Assessment for Reproductive Health Commodities and Services” had been conducted every year since 2014 in Myanmar, covering all states and regions with a representative sample size. The objectives of this study were to review and identify gaps existed at different level of health facilities concerning supply chain of family planning service from 2014 to 2018. The main responsible person for drug indent was medical superintendent and role of assigned medical officer/Specialist was also increasing at tertiary level while those were assigned medical officer at secondary level and health assistant/lady health visitor/sister at primary level. To quantify resupplies, pull system showed increasing from 26.7% in 2014 to 60.5% in 2018 but still lower in primary level, reaching only 56.6%. One third of all types of health facilities did not use standard form for indent. The main source of supplies was State/Regional Health Department for tertiary level and Township Health Department for secondary and primary level. The estimated length of time between indent order and receiving of supplies and also time for resupply was irregular in about 40% and 30% of all health facilities, respectively. The availability of cold chain was stable, nearly 100% in tertiary level and about 85% in secondary level while it showed increasing in primary level, 24.2% in 2014 to 42.9% in 2018. Although the improvement was seen in supply chain of family planning service within five years, the findings indicated that the pull system to quantify resupplies should be promoted with ruling use of standard form of indent in all health facilities. In the meantime, the program needs to develop strategies for improving regular supplies.