



USAID
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Maternal and Child Health
Integrated Program



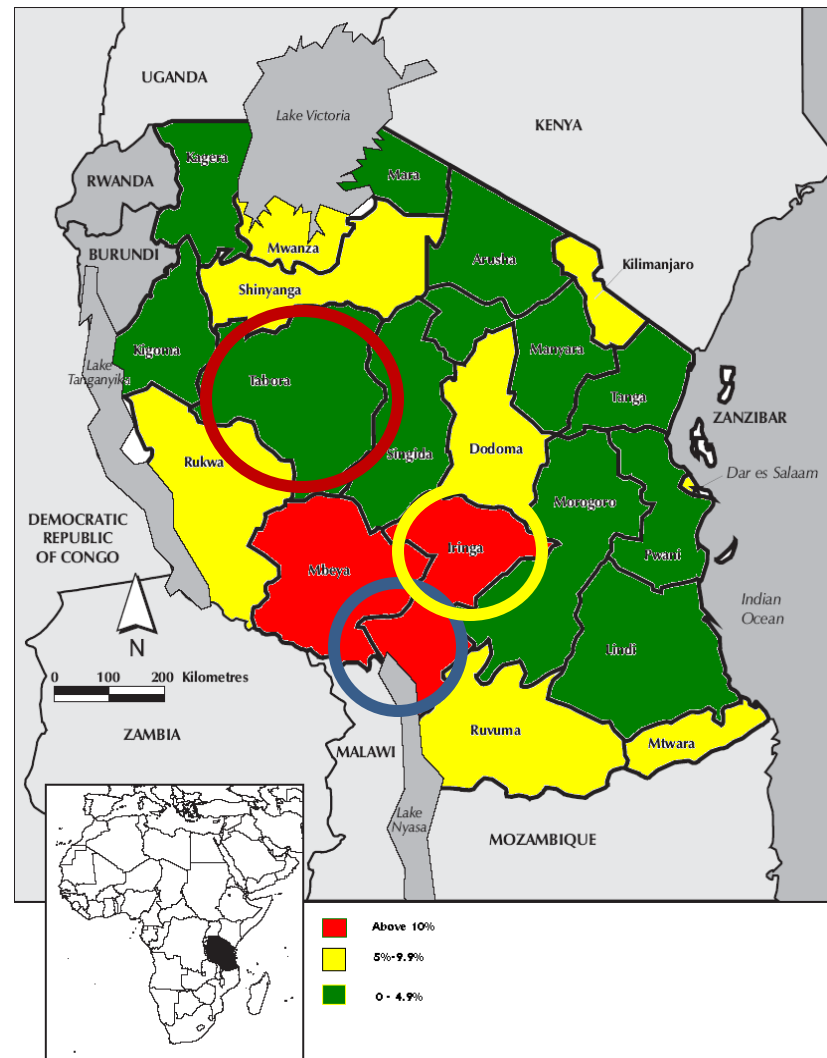
TANZANIANS AND AMERICANS
IN PARTNERSHIP TO FIGHT HIV/AIDS

Experiences with Commodities: Tanzania

26 September 2012

MCHIP VMMC Program in Tanzania

- Scale up VMMC in collaboration with Iringa, Njombe and Tabora regions
 - Iringa launched November 2009
 - Njombe launched May 2010
 - Tabora launched April 2012



Cumulative VMMCs

November 2009 to August 2012

Iringa	Njombe	Tabora	TOTAL
69,357	46,681	16,544	132,582

**Approximately 65,000 VMMCs in
FY 2012 to date**

Commodities

Until recently, the program relied on:

- Reusable instruments purchased in Tanzania
- Locally purchased medical equipment and commodities (e.g. gauze, cat gut, autoclaves, generators)
- GOT-provided HIV kits
- Pharmaceuticals purchased via SCMS – but supplemented by Jhpiego corporate funds because of frequent stock-outs



Challenges for Commodities



- Frequent HIV test kit shortages
- The current volume presents tremendous challenges for managing commodities (warehousing, ordering, push/pull systems, etc.)
- But also... the program is now VERY rural – too hard to bring generators/autoclaves to enough sites
- In 2011 during winter campaign we circumcised 31,000+ clients. Would have been more but electricity crisis prevented us from using autoclaves in several sites.

MC Kits



- MC kits, when we have had them, have been a godsend. But supply is still infrequent (only 30,000 VMMC kits have been by kit).
- Many providers remain unhappy with the kits – and they are quite insufficient in a country not using diathermy.
- (Report was provided to USAID with feedback from Tanzania VMMC providers.)

Pharmaceuticals



- In the past, supply of pharma has been unreliable
- Better now, but until recently standardized units/ordering sheet, means that pharma orders sometimes have mistakes
- Also, some pharma that can be ordered locally through the PV system have failed quality standards
- The cycle of ordering/receiving is “off” the COP year

Other Issues

- Introduction of diathermy
- Introduction of infant circumcision – and necessary commodities
- Tents, pre-fabs and other infrastructure?
- Waste disposal
- Challenges associated with introduction of devices



What We Are Working Towards with SCMS and USAID

- Reliable, continuous supply of pharmaceuticals, HIV and MC kits
- Standardized systems/units for ordering pharma
- Back-up pharma (available in-country)
- Technical assistance establishing push/pull systems (necessary with scale)
- Technical assistance in commodities management
- Ability to order additional commodities such as tents, prefabs, and diathermy via SCMS
- Assistance figuring out how to manage kit waste
- When devices come...

Asante Sana

