Exploring Structural and Systemic Improvements to Promote Effective and Efficient Pharmaceutical Supply Chain Management for HIV/AIDS Service Delivery in Nigeria

Author
Ibegbunam, Innocent Ndubuisi

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Abstract
The uninterrupted availability of health products is essential for the provision of HIV/AIDS services. A 2015 assessment of public health supply chain systems in Nigeria supporting HIV/AIDS services revealed that some vital HIV/AIDS products were unavailable in about 9%–16% of health facilities visited. This implied >10% of the health facilities visited did not have all the life-saving HIV/AIDS commodities needed to provide needed clinical services. Health commodity unavailability interrupts health service delivery, negatively affects the quality of services and adversely affects patient adherence to treatment. This suggests a need for changes in the HIV/AIDS supply chain management (SCM) system.

The aim of this study was to explore structural and systemic improvements needed to promote effective and efficient public-sector pharmaceutical SCM system for HIV/AIDS service delivery in Nigeria through (I) identification of current gaps in the pharmaceutical SCM system (II) identification of potential solutions to address the gaps (III) exploring effective solutions in Nigeria and other places, and (IV) identification of policy improvements for the pharmaceutical SCM system. The study was conducted using sequential mixed-method design of surveys and key informant interviews.

The results identified poor logistics data management and use, poor information dissemination for decision-making, limited leadership and funding, poor performance management and limited human resources capacity to support SCM services which disrupts HIV/AIDS service delivery. Some of the solutions to address these gaps include: use of electronic systems for logistics data management to enhance decision-making, more widespread dissemination of information on changes in clinical guidelines and the SCM system, improvements in government leadership and funding, establishment of an accountability structure, improved performance management of private sector contracted to support the supply chain system, and improved human resource management. In addition, the study identified the need to set policies on minimum remaining shelf-life requirements for donated health products, minimum levels of government funding to support the supply chain system, and an implementation plan for the national supply chain policy.

Advisor
Silberman, Pam

Committee member
Bazira, Deus M.; Hamzat, Omotayo; Herrington, Jim; Umble, Karl

University/institution
The University of North Carolina at Chapel Hill