MINISTRY OF HEALTH Meeting the Commodity Challenge: Ghana's National Reproductive Health Commodity Security Strategy 2011–2016



A woman receives a family planning consultation at a public health facility in Ghana.

Ghana has committed itself to improving the reproductive health status of people throughout the country. Reproductive health is a crucial part of overall health and is central to human development.

> -Hon. Joseph Yieleh Chireh Minister of Health

Goal of the RH Commodity Security Strategy

To ensure that every woman, man, and youth can choose, obtain, and use the quality contraceptives and condoms they need for family planning and prevention of sexually transmitted infections, and that commodities required for emergency obstetric and neonatal care are available to prevent morbidity and mortality due to pregnancy and childbirth.

Funding for this publication was provided by the U.S. Agency for International Development. It was prepared by the USAID | DELIVER PROJECT, Task Order 4. Access to reproductive health (RH) products is critical to achieving quality services and improving the RH status of the population in Ghana. To ensure long-term security of RH supplies, the Ministry of Health (MOH) developed a National Reproductive Health Commodity Security (RHCS) Strategy for 2011–2016 that includes a detailed action plan and budget. The Strategy is coordinated by the Inter-Agency Coordinating Committee on Commodity Security (ICC/CS), a multi-stakeholder body whose key membership includes health partners, donors, relevant state bodies, and MOH/Ghana Health Service (GHS) directorates and divisions with a responsibility for reproductive health.

The Strategy provides guidance for policymakers, donors, nongovernmental organizations (NGOs), social marketing agencies, and private sector organizations for identifying their roles and responsibilities during the six-year lifespan of the Strategy. The Strategy is being implemented by the MOH and partners and is currently partly funded. The main objectives of the National RHCS Strategy are to—

- 1. improve the policy environment
- 2. strengthen commitment and capacity
- 3. ensure adequate funding
- 4. strengthen coordination and information sharing
- 5. create demand and increase utilization
- 6. ensure availability and access in all sectors
- 7. strengthen the logistics system.

The RHCS Strategy addresses commodity security for the following contraceptives and RH commodities: male and female condoms, implants, injectables, intrauterine devices, combined oral pills, progestin only pills, emergency contraception, uterotonics, magnesium sulphate injections, and manual vacuum aspiration equipment.

Overview of Strategic Objectives

These objectives support the overall expected outcome of the Strategy, which is a consistent increase in contraceptive prevalence rate and a decrease in unmet need for family planning (FP).

| Objective | Key Results (see unabridged Strategy for full list) | Expected Outcomes |
|---|---|---|
| 1: To influence and improve the policy and sociocultural environment to advocate and support RH and FP commodities and services | Advocacy strategies implemented. Advocacy campaigns conducted. Government articulation of FP issues increased. Family Planning Week celebrations held annually. | Policy, social, and cultural barriers to issues of RH and FP are reduced and a supportive environment is created. |
| 2: To strengthen the commitment and capacity of stakeholders at all levels to advocate for and work toward sustained reproductive health commodity security | Stakeholders trained and engaged in advocacy for RHCS. Local RH commodity security champions advocate for strengthening RHCS. Media engaged and advocating for FP. Private sector engaged and supporting RHCS strengthening activities. | Capacity of civil society and other stakeholders for RHCS advocacy is strengthened and they are empowered to sustain advocacy efforts. |
| 3: To advocate and ensure increased and sustained funding for RH commodities and services | Contraceptives included in the National Health Insurance package and government funding secured. Additional funding sources for FP and RH commodities identified. Funding from current sources increased. Full cost recovery and other financial mechanisms piloted in the NGO and social marketing sectors. | Resources are increased to secure a full supply of FP and other RH commodities at all levels and for all sectors (public, private, NGO, and social marketing). |
| 4: To strengthen coordination and information sharing among all stakeholders in order to enhance and sustain RHCS | Technical working groups established. ICC/CS and subgroups meet regularly, with improved reporting and execution of agreed plans. Effective implementation and monitoring and evaluation of a well- coordinated RHCS strategy. | Effectiveness of the ICC/CS is improved, with central leadership role played by government. Improved coordination and collaboration with other government sectors, civil society organizations, faith-based organizations, and private sector. |

| Objective | Key Results (see unabridged Strategy for full list) | Expected Outcomes |
|--|---|--|
| 5: To create demand and increase access to and utilization of high- quality contraceptives and other RH services and products | Multimedia campaigns to address myths and misconceptions about FP. Regular in-service training for FP providers to increase knowledge. Basic FP training in pre-service training for health professionals. Regular technical supportive supervision and monitoring visits to FP providers conducted. Market segmentation analyses to help reach potential market segments with targeted services. Public and private providers trained in emergency obstetric and neonatal care (EmONC). | Demand of FP services increased through information, communication, and education campaigns. Access to FP services is increased through private sector. Quality of FP services is improved. More public and registered private sector personnel are trained to provide EmONC. |
| 6: To ensure availability of and access to quality contraceptives and other RH commodities at all levels of health care in all sectors (public, private, NGO, and social marketing) | Mechanisms for commercial sector to access commodities from public sector implemented. Regulatory bodies actively engaged in monitoring and testing FP/RH commodities. Contraceptives and other supplies procured. | An increased number of private sector contraceptive brands are introduced. There is increased availability of quality drugs and equipment for RH services across sectors. |
| 7: To strengthen the national logistics system for FP and other RH commodities | Commodity managers trained in standard operating procedures. Use of technology for logistics management implemented. Contraceptive logistics management information system (LMIS) integrated into the national health management information system. Use of logistics information for decisionmaking improved. A national quantification team established. Logistics management modules included in curriculum of health training institutions. Outsourcing of scheduled delivery of commodities piloted to complement current delivery system. | Management of health commodities is improved at all levels. Availability of health commodities is improved at service delivery points. Availability of logistics information is improved at all levels to guide decisionmaking. Distribution practices for health commodities are improved in Ghana. |

The RHCS Strategy includes a component for monitoring and evaluating activities to ensure that key objectives are achieved. The ICC/CS coordinates on a quarterly basis and champions monitoring activities that comprise annual performance tracking of RH services in the GHS, data collection, baseline studies, post-evaluation exercises, and other rapid assessments to ascertain effectiveness of specific interventions.

The estimated total budget for implementing the RHCS Strategy is approximately U.S.\$60 million, which includes more than U.S.\$42 million for RH commodities over the six-year period. Partial commitments to fund the activities have already been secured and further decisions on resource allocations by health partners will take place on an ongoing basis.

To obtain a copy of the unabridged version of Ghana's National RHCS Strategy 2011–2016, please contact the following institutions:

- The Family Health Division, GHS Telephone:0302689617/0302666101
- The National Population Council Telephone: 0302665944/0302665713
- The Policy, Planning, Monitoring and Evaluation Division, MOH Telephone: 0302684298/0302684293

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