



USAID MEDICINES, TECHNOLOGIES, AND PHARMACEUTICAL SERVICES (MTaPS) PROGRAM

Improved Access. Improved Services. Better Health Outcomes.

Photo by Liza Talukder

MTaPS objectives

1. Pharmaceutical-sector governance strengthened
2. Institutional and human resource capacity for pharmaceutical management and services increased, including regulation of medical products
3. Availability and use of pharmaceutical information for decision making increased and global learning agenda advanced
4. Pharmaceutical-sector financing, including resource allocation and use, optimized
5. Pharmaceutical services, including product availability and patient-centered care, to achieve health outcomes improved

The MTaPS Program is from the American People through USAID

Based on its decades of expertise in strengthening health systems to save lives and improve the health of people in low- and middle-income countries, USAID supports better governance and integrated, innovative, and sustainable strategies to strengthen pharmaceutical systems.

Funded by the US Agency for International Development and led by Management Sciences for Health (MSH), the goal of the five-year USAID Medicines, Technologies, and Pharmaceutical Services (MTaPS) Program (2018–2023) is to help low- and middle-income countries strengthen their pharmaceutical systems to ensure sustainable access to and appropriate use of safe, effective, quality-assured, and affordable essential medicines and pharmaceutical services.



ENHANCING THE AVAILABILITY AND USE OF INFORMATION FOR DECISION MAKING

Pharmaceutical systems depend on efficient and reliable information tools, data governance, and data analytics systems to ensure sustainable access to and appropriate use of safe, effective, quality-assured, and affordable products and services.

Pharmaceutical systems and the health system in general in many low- and middle-income countries suffer from poor data availability and accessibility. Typically, data are manually collected at service delivery points and then sent to the district, regional, or Ministry level for processing and storage with the hope that they will be captured electronically and analyzed. However, these collected data often become outdated and are not analyzed or used to inform decision making.

USAID MTaPS is designed to change this poor data cycle by improving local capacity for data governance, analytics, interoperability, and integration. This will help to streamline data collection, collation, and analysis; improve data availability and accessibility; and help countries reap the benefits of evidence-based decision making.

For example, Pharmadex—a tool used for medicines registration developed under the USAID-funded Systems for Improved Access to Pharmaceuticals and Services program—decreased the time needed to process a medicines marketing authorization by as much as 50%, thereby saving time and resources while improving access to medicines.

Key objectives:

- Ensuring that pharmaceutical management information systems are interoperable and link patients and products
- Ensuring that pharmaceutical information is available and used

MTaPS works with countries to improve their information systems to optimize and ensure sustainability of their pharmaceutical systems by:

- Enhancing information systems for all aspects of pharmaceutical systems, including registration of medicines, pharmacovigilance, supply chain, pharmaceutical performance indicators, and pharmacy benefits management

- Assessing pharmaceutical information infrastructure, including identifying critical information that adds value to the system and determining what systems to keep, enhance, or replace
- Developing data governance, data standards, and data management strategies and infrastructure, including training and long-term road maps
- Enhancing interoperability and integration of commodity and patient information
- Supporting the implementation of DHIS 2 to track performance metrics
- Creating sustainable systems and training local talent to support application development and data science initiatives
- Building capacity to collect and analyze data for decision making, modeling, and planning, which could include assistance to develop the necessary infrastructure and long-term road map
- Improving data analytics capacity, including data warehousing, data science, and data visualization
- Mentoring decision makers to link data analysis with policy decisions, including developing integrated, web-based business intelligence solutions such as dashboards and automated data analysis
- Mobilizing stakeholders and building coalitions, including the private sector, to improve governance, interoperability, and standards across the health care ecosystem
- Providing the cost analysis and skills necessary to promote and maintain sustainable information systems and practices
- Developing a country data security strategy and practice



Learn more about MTaPS tools at <http://siapsprogram.org/tools-and-guidance/>.

The MTaPS Consortium

Led by Management Sciences for Health (MSH), the MTaPS consortium comprises core partners, global experts, and capacity resource partners. Core partners and global experts are listed below. Capacity resource partners include local organizations with regional or country-based knowledge, technical expertise, and networks (African Health Economics and Policy Association, African Collaborating Centre for Pharmacovigilance and Surveillance, Ecumenical Pharmaceutical Network, Kilimanjaro School of Pharmacy, Muhimbili University, Pharmaceutical Systems Africa, U3 SystemsWork, and the University of Ibadan) and other partners (Columbus Consulting, Empower Swiss, and Softworks).

CORE PARTNERS

- AUDA-NEPAD
- Boston University
- FHI360
- Overseas Strategic Consulting
- Results for Development
- International Law Institute-Africa Centre for Legal Excellence

CAPACITY RESOURCE

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MSH

Building Capacity

GLOBAL EXPERT

- Brandeis University
- Deloitte USA
- Duke-National University of Singapore
- El Instituto de Evaluacion Tecnologica en Salud
- ePath
- IC Consultants
- Celsius Consulting
- IQVIA
- MedSource
- University of Washington

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