

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

*Improved Access. Improved Services. Better Health Outcomes.*

Photo by Samy Rakotoniaina/MSH

## 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.*



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## SUPPORTING A MALARIA-FREE WORLD

A malaria-free world requires strong pharmaceutical systems that deliver on their mandate to ensure universal access to quality, safe, and effective diagnostic, preventive, and treatment tools.

Data from the *World Malaria Report 2018* reveal that although there were 20 million fewer cases of malaria in 2017 than in 2010, no significant progress was made in reducing global malaria cases between 2015 and 2017. The World Health Organization (WHO) African region accounted for 92% of malaria cases in 2017. Key interventions for reducing the burden of malaria are the use of intermittent preventive treatment, seasonal chemoprevention, and long-lasting insecticidal nets for prevention; early diagnosis with rapid diagnostic tests; and prompt treatment with quality-assured, safe, efficacious, and affordable antimalarial medicines, particularly artemisinin-based combination therapy.

WHO's Global Technical Strategy (GTS) for Malaria 2016–2030 aims to reduce global malaria incidence and deaths by at least 90% by 2030. To achieve these targets, high malaria burden countries need strong national pharmaceutical systems that can support the effective implementation of key malaria interventions.

According to the *World Malaria Report 2018*, WHO, the RBM Partnership to End Malaria, and other partners will support the new country-driven approach to jumpstart progress against malaria—"High burden to high impact"—founded on four pillars:

- Galvanize national and global political attention to reduce malaria deaths
- Drive impact in country through the strategic use of information
- Establish best global guidance, policies, and strategies suitable for all malaria endemic countries
- Implement a coordinated country response

USAID MTaPS will support countries seeking to achieve the GTS target using the "High burden to high impact" approach by strengthening their pharmaceutical sectors.

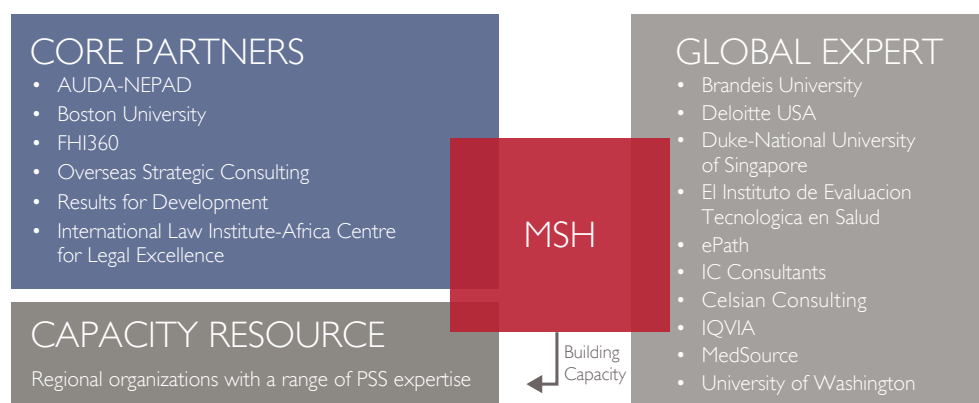
### MTaPS helps countries:

- Improve governance, transparency, and accountability throughout the pharmaceutical management system for malaria, including the implementation of public information access mechanisms

- Support stakeholders to identify and implement needed pharmaceutical-sector reforms around malaria and build the capacity of stakeholder groups to engage in policy dialogue, advocate for reforms, and monitor reform progress
- Support national medicines regulatory authorities' strategic planning for overall regulatory systems strengthening and promoting advocacy for increased political and financial support
- Support national malaria control programs to identify and explore other sources of funding to increase pharmaceutical-sector malaria interventions toward meeting the GTS milestones
- Identify and develop viable approaches to reducing financial barriers to access to antimalarials and malaria commodities and work with country governments to establish sustainable systems to assess pricing policies and other factors that may negatively affect the affordability of malaria medicines
- Introduce modern procurement and distribution practices for malaria commodities by supporting policy and institutional modernization of public- and private-sector medicine supply chains
- Identify private-sector entities and increase their capacity to conduct pharmaceutical system operations in malaria, such as procurement, supply chain management, and monitoring of performance management plans
- Develop and roll out new and existing information system solutions to meet country-specific pharmaceutical system needs for malaria (e.g., product registration, pharmacovigilance systems, malaria commodity management and distribution).
- Support country-to-country learning exchanges on improving access to preventive therapies and malaria medicines in universal health coverage programs, lowering out-of-pocket spending, and controlling costs
- Strengthen country systems to promote patient-centered, quality pharmaceutical services (including use of antimicrobials in the prevention of malaria and adherence to malaria treatment guidelines) in the public and private sectors through interventions such as the introduction of pharmacy accreditation schemes to improve pharmacy practice standards

## 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).



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