

Editorial

The year 2020 has been a sad one for the EAC RCE-VIHSCM. Our esteemed colleague, former Training Coordinator, Associate Editor of the Rwanda Journal of Medicine and Health Sciences, and Chairman of Board at Rwanda Medical Supply Ltd, Prof. Pierre Claver Kayumba, suddenly and unexpectedly passed away. He was a strong voice in the field of pharmaceutical challenges in Africa. We remember him, we thank him for his service and we dedicate this issue in his memory.

Robust and responsive supply chains to deliver affordable and high-quality medicines, medical supplies, vaccines and other health products are essential for a health care system.[1] The complexity and dynamism of their interconnected components, including technology, activities, information, people and resources have established supply chain management as a well-developed scientific discipline.[2] Subsequent enquiry and investigation of the key processes, structures and outcomes, continue to generate novel advances to optimise their efficiency and effectiveness.

Contemporary supply chains offer more than delivering the required medicines and health products to the desired population. They provide critical information regarding the need, demand and consumption to health system planners to enable the development of strategies that strengthen the system's ability to respond to the healthcare needs of a population.[3]

In recent times, significant funds have been invested into global health initiatives aimed at tackling global health issues such as HIV/AIDS, malaria, and tuberculosis in developing countries.[4] However, despite this investment, the availability of medical resources in public health facilities is lacking.[5] There is growing international recognition that inadequacies in supply chains are key obstacles in realizing the full potential of these investments.

Key attributes of the supply chain including health financing, health information systems and regulation have received particular focus as areas to improve under-performance. Synchronized financial flows; product quality and regulation; strong regulatory oversight; enhanced epidemiological information of needs and consumption patterns; and increased availability of skilled human resource in the health system, have been reported as effective interventions successfully implemented to optimise the design of the supply chain.[6]

However, supply chains are context-specific, diverse and dependent on multiple external factors thus, reform requires strong and objective evidence coupled with specific feasibility and implementation analysis. Therefore, there is a fundamental need for policy makers, industry leaders, academics and practitioners to work together in designing supply chain reform to create better performing systems that are cost-effective and responsive to the needs of their population.

It is therefore, a great pleasure to assist the first cohort in Masters of Health Supply Chain Management program at the University of Rwanda with the publication of their research in this special issue of Rwanda Journal of Medicine and Health Sciences.

This special issue features a variety of commentaries and studies on that aim to develop a greater understanding of local supply chains and investigate approaches to enhance their effectiveness and efficiency. The topics include three reviews of existing supply chain systems- one of which focuses on existing storage and inventory practices in South Sudan; the second investigates the factors contributing to medicines expiry in Rwanda; and thirdly, a review of inventory management practices and supply chain performance of antiretroviral medicines in public hospitals in Kenya.

Thereafter, evaluations of innovative interventions are reported on, namely annual procurement planning; an electronic logistical management information system; public-private partnerships; universal health coverage; and an integrated management approach.

The remaining articles seek to develop the evidence base for specific innovations within the vaccine and antiretroviral medicine supply chain. The manuscripts report on an electronic immunization registry; a cost analysis of redesigned vaccine distribution systems; commodity security of antiretroviral medicines; and a web-based antiretroviral ordering and ordering system.

Clearly, and as stated by all of the authors, there is much research that needs to be done. The complexity of the challenges, as well as their multidimensional scopes requires knowledge and expertise from multiple disciplines. We hope that this issue will stimulate and assist further research in this domain.

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