

BURKINA
FASO



AFRICA'S PUBLIC
HEALTH SUPPLY CHAIN
INSTITUTION



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ACRONYMS

N°	TERM	DEFINITION
1	ACAME	Association of African Central Medical Stores
2	ARC	Africa Resource Centre
3	ASCM	Association for Supply Chain Management
4	CAMEG	Central Medical Store for Generic Essential Medicines and Medical Consumables
5	CHW	Community Health Workers
6	CHU	University Hospital Centres
7	CHR	Regional Hospital Centres
8	DCAPS	Health Products Supply Chain Management Directorate
9	DGAP	Directorate-General for Access to Health Products
10	DMPA-SC	Depo-Medroxyprogesterone Acetate – Sub-cutaneous
11	DPH	Hospital Pharmacy Directorate
12	DPP	Pharmaceutical Policy Directorate
13	DSC	Community Health Directorate
14	DSD	Differentiated Service Delivery
15	DSF	Family Health Directorate
16	M&E	Monitoring and Evaluation
17	PCH	Central Hospital Pharmacy
18	PHSC	Public Health Supply Chain
19	SC	Supply Chain
20	SRH	Sexual and Reproductive Health
21	WAHO	West Africa Health Organisation



COUNTRY CONTEXT AND STRATEGIC FOUNDATION

Country Context



Figure 1 Burkina Faso Map & Geographical Position

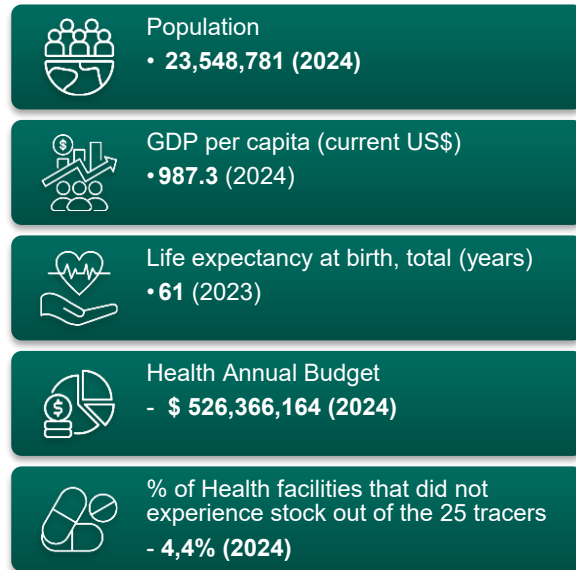


Figure 2 Key Indicators

ARC engagement in Burkina started in 2017 with the appointment of a focal point and the support was focused on advocacy for the development of a national supply chain strategy, the technical assistance to the General Directorate for Access to Health Products (DGAP) for the development of the National Supply Chain Strategy in emergency situations. From August 2020 to now, ARC has increased its support to Burkina Faso Ministry of Health (MoH) through enablement and advisory services and the implementation of strategic catalytic projects.

In 2020, enablement areas included: the assessment of the SC governance at all levels of the health system to identify the strengths and weaknesses and suggest improvement actions, from 2021 to 2023, ARC has supported the evaluation of the National Public Health Supply Chain (PHSC) Strengthening Plan, the development of the National PHSC strengthening plan 2022-2026 and the implementation Roadmap and the M&E committee, the last Mile Distribution project through the evaluation of the last mile distribution pilots, and the development of the scale up plan. ARC has also partnered with regional Organisations: WAHO, ACAME. From 2023 to now, catalytic projects have been set up and implemented.

Operating in a challenging context—a landlocked Sahelian country of 23.3 million people facing security challenges and geographic barriers—ARC has successfully implemented innovative solutions that have dramatically improved access to essential medicines and family planning services. Through differentiated service delivery models, governance strengthening, and strategic capacity building, ARC has positioned Burkina Faso's health system for sustainable, long-term success.



Strategic Areas of Focus and 2021-2025 Evolution

ARC's journey in Burkina Faso represents a strategic evolution from initial advocacy to comprehensive supply chain transformation. Beginning in 2017 with the appointment of a focal point, ARC's engagement has progressively deepened, expanding from advisory services to hands-on implementation of catalytic projects that address systemic challenges.

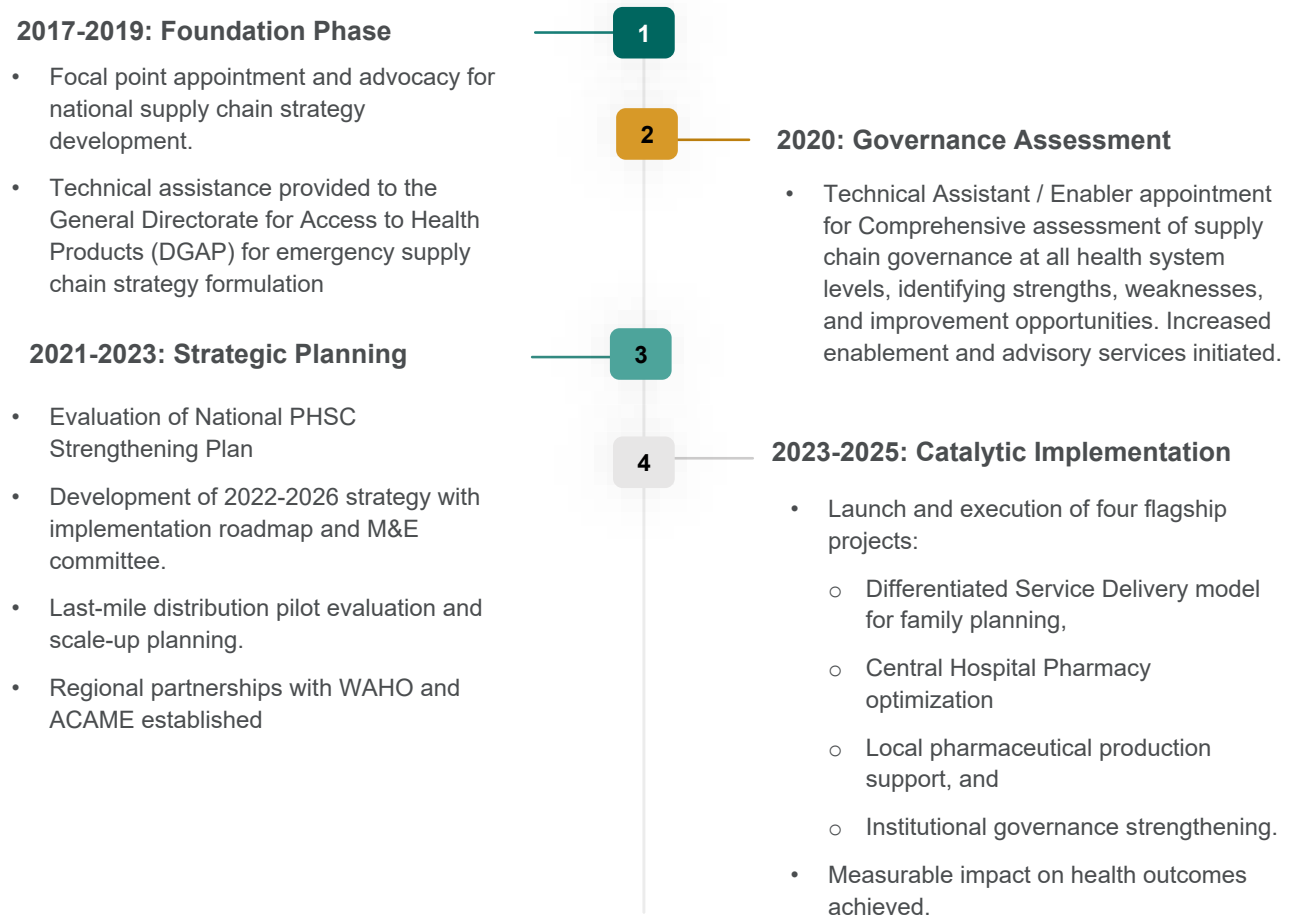


Figure 3 2021-2025 Results Summary in Burkina Faso

STRATEGIC ENGAGEMENTS AND PARTNERSHIPS

Government Engagement

In Burkina Faso, ARC is providing strategic advisory services to the Ministry of health to strengthen the public health supply chain. ARC is also supporting the implementation of catalytic projects for the improvement of health products availability. The activities are executed based on formal requests or authorizations provided by the Ministry of health.

ARC is positioned at the Ministry of Health, especially at the General Directorate for Access to Health Products (DGAP). Technical assistance in tactical areas is provided to:



- DCAPS (Health Products Supply Chain Management Directorate) on Supply chain strengthening Supply Chain (SC) through strategy development and review, Supply chain data analysis
- DPP (Pharmaceutical Policy Directorate) on local pharmaceutical development
- DPH (Hospital Pharmacy Directorate) on strengthening supply planning for operationalization of Central Hospital Pharmacy
- CAMEG (Central Medical Store) through operationalization of Central Hospital Pharmacy
- DSF (Family Health Directorate) on DMPA-SC self-injection project
- DSC (Community Health Directorate) on community health workers capacity strengthening on DMPA-SC

Summary of key activities includes a workshop with MoH stakeholders to discuss the 2025 action plan implementation, focusing on priorities and funding needs. Involvement in the follow-up Committee aims to monitor last-mile distribution strategies, particularly in hard-to-reach zones. Strategic meetings with DSF and DSC undertaken to finalize the DMPA-SC self-injection expansion plan. Collaboration on various project initiatives has been established with DGAP, DCAPS, DPH, and CAMEG. Additionally, the integration of the DSD model is being advanced through a ministerial decree to ensure institutional ownership.



Picture 1 Engagement the Secretary General of the Ministry of Health 2025



Partners Engagement

ARC is member of the Health Partners' Group led by UNFPA in 2025 and is member of the Sub-Groups on Health products and health financing. Engagement with partners include regular participation in monthly Health Financial and Technical partners' meetings in Burkina Faso. The engagement extends to working sessions with Thinkwell and the World Health Organization (WHO) to study supply chain financing. Additionally, complemented by partnerships with regional organizations such as WAHO and ACAME.

Private Sector Engagement

In 2023, CAMEG Burkina Faso benefited from technical support from MSD in the design of the central warehouse for priority programs to inform the investment file to mobilize resources for construction. The private sector engagement is key element of ARC enablement approach.



Picture 2 MSD Technical support to CAMEG, 2023



KEY RESULTS AND ACHIEVEMENTS

Country Maturity using ARC Supply Chain Sustainability Model

ARC's strategic focus in Burkina Faso centres on strengthening the national supply chain strategy while improving availability and accessibility of essential medicines through innovative last-mile delivery initiatives. The overarching goal aligns with Universal Health Coverage objectives and national health policies, with particular emphasis on maternal and child health services and family planning.

The graph below shows the assessment of Burkina Faso progress as per ARC supply Chain sustainability model.

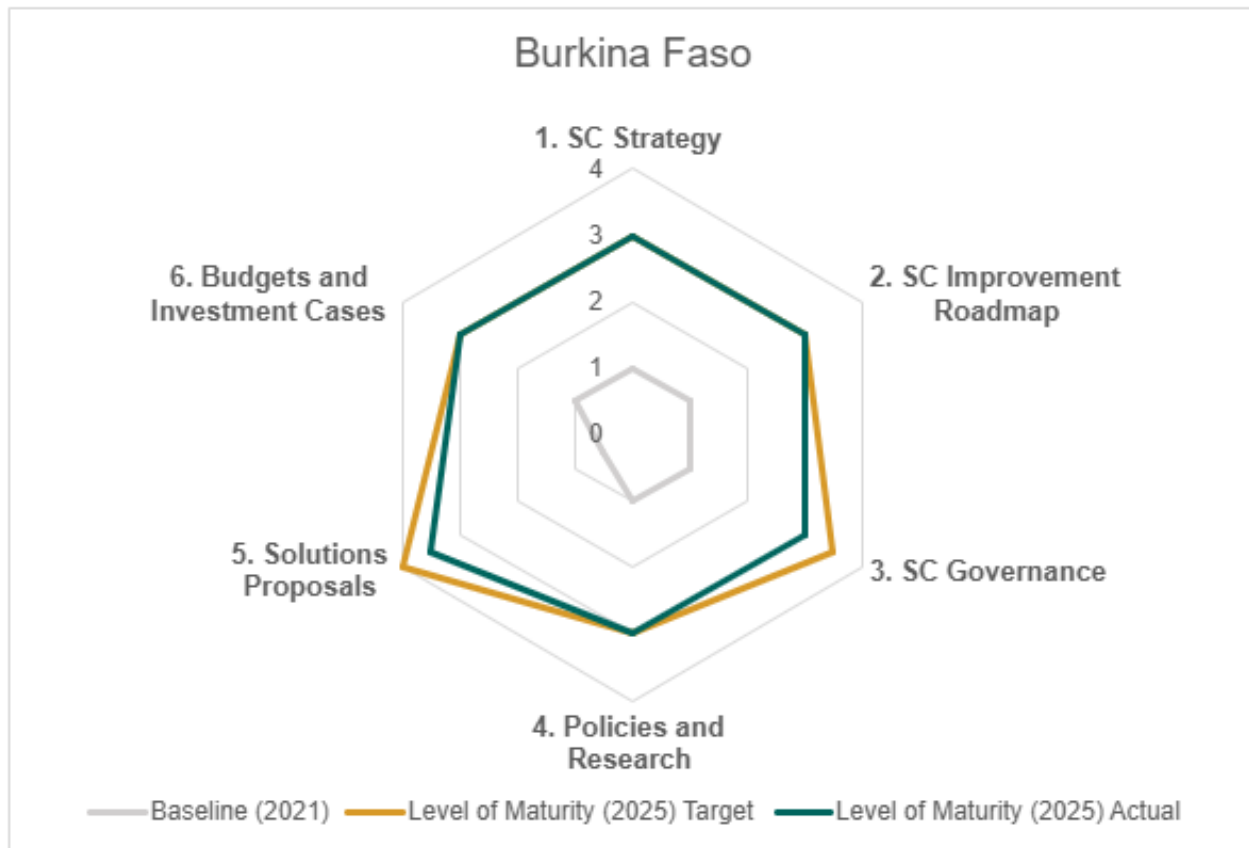


Figure 4 Burkina Faso Supply Chain Sustainability status – 2025

The strategic maturity assessment reveals significant progress in conceptualizing and implementing catalytic projects. The differentiated service delivery model based on DMPA-SC self-injection under community health worker supervision represents a breakthrough innovation that has been successfully institutionalized and integrated into the broader Community Health Workers (CHW) framework. This achievement demonstrates Burkina Faso's growing capacity for sustainable, locally driven health system innovations.



ARC has also enhanced supply chain governance through implementation and monitoring of the supply chain strategy, including a budgeted roadmap that ensures accountability and measurable progress. The establishment of robust Monitoring & Evaluation (M&E) frameworks enables data-driven decision-making and continuous improvement across all intervention areas.

SUPPLY CHAIN STRATEGY & IMPROVEMENT ROADMAP - SUPPLY CHAIN STRATEGY: BUILDING THE FOUNDATION FOR PHARMACEUTICAL SOVEREIGNTY

Burkina Faso, Local Manufacturing Strengthening Plan

The development of a comprehensive strengthening plan for local manufacturing positions Burkina Faso to reduce dependency on imported pharmaceuticals. This project focuses on enhancing local production capacity, enabling the country to improve accessibility and availability of essential medicines while contributing to Universal Health Coverage objectives.

The validated plan includes clear vision, policies, strategies on local production development, a budgeted roadmap amounting to \$ 334 million and a monitoring and evaluation framework. This comprehensive approach ensures that production capacity increases systematically, with measurable milestones and accountability mechanisms that drive sustained progress toward pharmaceutical independence and sovereignty.

KEY OUTPUTS & OUTCOMES:

- *Clear vision, policies and strategies on local production development, including a budgeted roadmap and an M&E framework, to increase pharmaceutical production capacity.*

\$ 334m

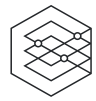
Local Manufacturing Budget

Burkina Faso Local Manufacturing Strengthening Plan amounts to \$ 334 million

GOVERNANCE: COORDINATION FOR COLLECTIVE ACTION

Central Hospital Pharmacy Enhancement through Integrated Planning

The optimization of demand and supply planning processes at the Central Hospital Pharmacy (PCH) represents a critical governance intervention aimed at improving access and affordability of pharmaceutical products across Burkina Faso's hospital network. This project addresses systemic inefficiencies in pharmaceutical management by establishing collaborative planning frameworks, implementing traceability systems, and defining clear performance indicators.



The quantification exercise primarily serves to harmonize quantification practices around a common framework with clear performance metrics, improve hospital pharmaceutical governance and visibility, and guarantee patients' safe and continuous access to specific vital medicines.

A total of 374 vital medicines were identified with total needs estimated at \$ 44.1 million for the 7 University Hospital Centres (CHU) and the 10 Regional Hospital Centres (CHR).



Picture 3 Workshop for the validation of the Central Hospital Key Performance Indicators, 2025

Institutional Governance Strengthening for Supply Chain Transformation

The institutional support project for supply chain transformation through governance strengthening represents ARC's most comprehensive intervention, addressing systemic challenges across the entire health supply chain. This project aims to strengthen institutional support for the Ministry of Health in consolidating public health supply chain transformation through capacity building, governance reinforcement, and strategic planning.

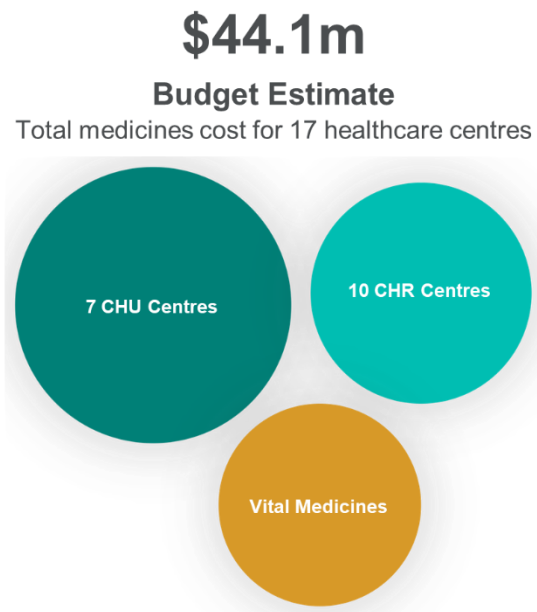
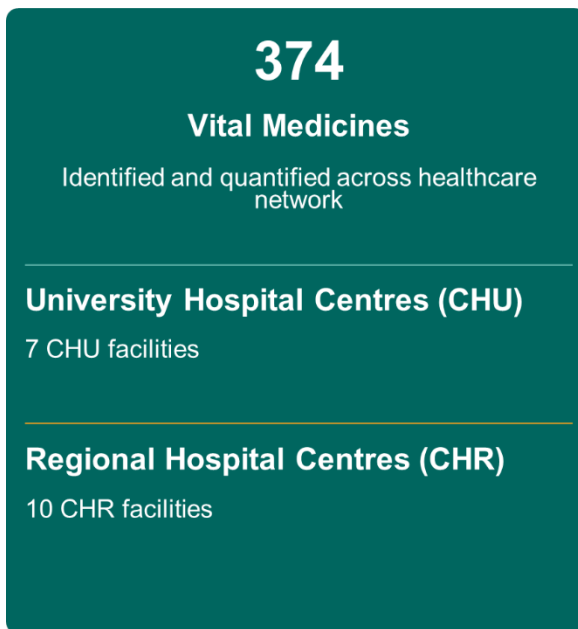
Activities being carried out and to be completed in 2026 include:

- **The supply chain maturity assessment:** a Comprehensive evaluation of Sexual and Reproductive Health (SRH) supply chain maturity using ASCM model, identifying gaps and opportunities across all system levels
- **Planning improvement for SRH products:** Development of validated SRH supply chain strengthening plan based on assessment results, with clear priorities and timelines
- **Data Quality Enhancement:** Quarterly analysis of completeness, timeliness, and accuracy to improve data-driven decision-making for SRH products.



KEY OUTPUTS & OUTCOMES:

- *Improved demand and supply planning at Central Hospital Pharmacy level for better visibility of demand and accurate planning*
- *Clearly defined KPIs to improve the tracking and monitoring of PHC products across the supply chain for better visibility on stock levels, deliveries and dispensations*
- *Established performance management framework for the regular assessment of KPIs and processes to identify opportunities for improvement and address challenges*
- *Strengthened evidence-based policymaking by ensuring reliable information flows across the supply chain.*
- *Expected to create accountability mechanisms that ensure sustained progress and expansion over time, beyond ARC's direct involvement.*
- *Expected improvement in supply chain efficiency and resilience, continuous improvement in operations, and increased visibility of key performance indicators that strengthen evidence-based policymaking.*



SOLUTIONS PROPOSAL

Community-based DMPA-SC Self-Injection Distribution Model

ARC's flagship DSD model enables women to self-administer DMPA-SC contraceptive injections under community health worker supervision. From 2023 to 2025, the project evolved from pilot assessment through scale-up implementation to full institutionalization.

Integration of the DSD model into national community health strategies ensures long-term sustainability beyond project timelines. ARC is currently supporting the deployment and scale up,

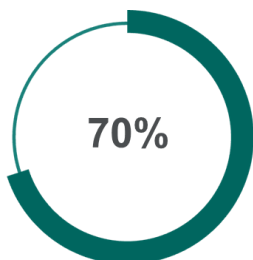


expanding the model in seven additional health districts in Dedougou, Toma, Koudougou, Reo, Sabou, Tenado and Nanoro. The training of 2,360 community health workers creates a substantial cadre capable of delivering services at scale. Regional executive training ensures supervision and quality assurance systems support consistent implementation.

The project's impact has been extraordinary. In Yako Health District, 336 new users were recruited against a target of 100—a remarkable 336% achievement rate. In Boromo, community health workers contributed 53.6% of all new self-injection clients, demonstrating the power of community-based approaches. More than 70% of newly informed women agreed to try self-injection, while approximately 50% of confirmed injectable contraceptive users chose to migrate to DMPA-SC, indicating strong acceptance and satisfaction with the method.

KEY OUTPUTS & OUTCOMES:

- *Better understanding of the quality and effectiveness of the implementation of the pilot model, documented best practices and lessons learned, and identified challenges and opportunities for improvement to inform scale-up*
- *Institutionalisation of the strategy across the country: Well-defined strategic vision for scaling up plan sustainability*
- *Improvement in availability of quality medicines and reduction of shortages at health facility and CHWs level*
- *Reduced accidents and complications due to self-injection and improved quality of DMPA-SC services*



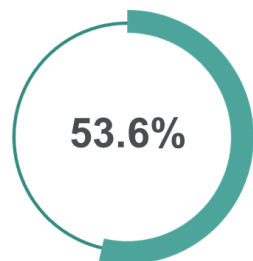
Acceptance Rate

Newly informed women agreeing to try self-injection method



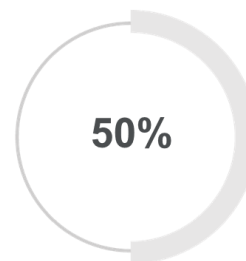
New Users

Women recruited through innovative community-based delivery model



CHW Enrolment

Proportion of new users recruited through community health worker initiatives in Boromo District



DMPA-SC Migration

Confirmed injectable contraceptive users choosing to migrate to DMPA-SC



Picture 4 Workshop for the presentation of the DSD evaluation results



Picture 5 Workshop for the development of the DMPA SC self-injection pilot model extension, 2025

CAPACITY BUILDING & KNOWLEDGE SHARING

Capacity building represents the cornerstone of ARC's approach to supply chain strengthening, ensuring that improvements are sustainable and that local institutions can continue advancing without external support. The comprehensive training programs implemented across Burkina Faso have created a cadre of skilled professionals capable of managing and improving health supply chains.

Community Health Workers: 2,360 CHWs trained on DMPA-SC self-injection supervision, waste management, client counselling, and community mobilization techniques



Health Facility Staff: Nurses, midwives, and facility managers trained on DSD model implementation, supply management, and supervision protocols

Regional Executives: MOH regional leadership trained on strategic oversight, coordination mechanisms, and performance monitoring for scaled interventions

Technical Teams: Cross-functional teams developed for collaborative planning, quantification exercises, and data quality analysis

The capacity building approach extends beyond technical skills to include governance competencies, strategic planning capabilities, and data-driven decision-making. By building these foundational capacities, ARC ensures that Burkina Faso's health system can continue evolving and improving long after specific projects conclude. The emphasis on institutional capacity, rather than individual skills alone, creates resilient systems that can adapt to changing circumstances and emerging challenges.

KEY OUTPUTS & OUTCOMES:

- Ensured the training of key supply chain and community health stakeholders in DMPA-SC self-injection DSD model
- Facilitated, in collaboration with PATH, the participation of a community health worker at the International Conference for Family Planning to share experiences with other countries such as Madagascar, the Democratic Republic of the Congo, Rwanda and global experts.



2,360
CHWs Trained
 Community health workers equipped with skills for DMPA-SC self-injection supervision



300
Participants Reached
 In training and knowledge sharing sessions led and supported by ARC






Picture 6 Engagement with stakeholders, particularly the Directorate of Family Health of Burkina Faso, 2025



IMPACT ON STRATEGIC AREAS

 <p>Accessibility Improved proximity-based access</p>	 <p>Family Planning Strengthened service delivery</p>	 <p>Capacity Building Sustainable frameworks</p>	 <p>Governance Robust systems established</p>
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 <p>DMPA-SC Access Women obtain and administer contraceptives without travelling long distances, eliminating geographic barriers.</p>	 <p>Rural Reach Proximity-based model particularly benefits rural areas and regions affected by insecurity.</p>	 <p>Overcoming Barriers Differentiated approach overcomes security and geographic barriers that previously limited access.</p>
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Universal Health Coverage

ARC's interventions have generated measurable impact across critical dimensions of Universal Health Coverage, improving accessibility, strengthening family planning services, building sustainable capacity, and establishing robust governance frameworks. These outcomes demonstrate how strategic supply chain strengthening directly translates into improved health service delivery.


The differentiated approach significantly improved accessibility by enabling women to obtain and administer DMPA-SC without traveling long distances. Rural areas and regions affected by insecurity have particularly benefited from this proximity-based model, overcoming geographic and security barriers that previously limited contraceptive access.

TESTIMONIALS



"Honestly, this method came to save us. Before, I had to hide to go see the head of the health facility so that he could give me my injection. Often you meet someone from your family, and they ask you if you are sick or what you came to do at the CSPS. It's difficult. But now I'm doing well. Since the community-based health worker lives with us here, I can run into him anywhere, I talk to him, and we arrange for him to give me the product. It's easy to do, and I do it alone when I know there's no one nearby. I like it, it's very good."

— Client, Burkina Faso DSD Program



"In the field there are CHWs who have a quality to congratulate. They have a perfect mastery of the strategy. They have had a three-day training course but, in the field, we notice that most CHWs teach clients to inject themselves subcutaneously. So, they have competence for the implementation of this method"

— Healthcare Provider, Burkina Faso



WHAT NEXT?

As ARC concludes this phase of engagement in Burkina Faso, strategic recommendations ensure that momentum is maintained and that the foundations laid continue generating impact. These recommendations reflect lessons learned and position the country for continued progress toward Universal Health Coverage and pharmaceutical sovereignty.



Continue Catalytic Projects

Maintain implementation of impacting catalytic projects to strengthen the public health system and supply chain. Build on successes of DSD model, PCH optimization, and governance initiatives to expand impact to additional health areas and geographic regions



Early Planning Alignment

Start planning processes early to align with Ministry of Health calendar, ensuring coordination with country priorities and avoiding misalignment and duplications. Integrate ARC support into national planning cycles



Secure Sustainable Funding

Secure funding to allow sustainability of interventions and long-term impact consolidation. Diversify funding sources including government budget allocation, development partner support, and innovative financing mechanisms to ensure continuity beyond project timelines.



Scale Proven Innovations

Expand DSD model and other proven innovations to additional districts and health areas. Use evidence from pilot implementations to advocate for national scale-up with appropriate resource allocation and institutional support.



Strengthen M&E Systems

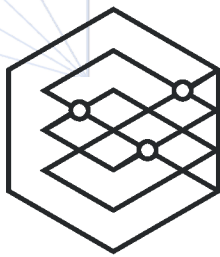
Continue enhancing monitoring and evaluation frameworks to enable data-driven decision-making. Invest in data quality, visibility, and utilization to support continuous improvement and evidence-based policymaking.



Deepen Partnerships

Strengthen collaboration with government entities, development partners, and regional organizations. Leverage partnerships to maximize impact, avoid duplication, and ensure alignment with broader health system strengthening efforts.

As Burkina Faso transitions beyond this intensive period of ARC support, the vision for the future builds on the strong foundations established over the past five years. The country is positioned to continue advancing toward Universal Health Coverage, pharmaceutical sovereignty, and resilient health supply chains that serve all citizens, regardless of geography or circumstance.



ARC

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Celebrating our 10 years!

Ten Years Serving the Transformation of Africa's
Health Logistics Supply Chain Towards Sovereignty!

