



Project
Last Mile



Partnering for Health



A model for leveraging global
businesses to support and strengthen
public health systems across Africa.

Global partners



**“An innovative
model where each
partner brings their
unique skills to the table
to make a difference.”**

The Coca-Cola Company





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FOREWORD FROM THE GLOBAL FUND



We need the collective power of public, private and civil society partnerships more than ever

The Global Fund was created as a public, private and civil society partnership, and over the last 20 years, we have shown how powerful such an inclusive partnership can be by saving over 44 million lives. Meeting the Sustainable Development Goal target of ending HIV, tuberculosis (TB) and malaria by 2030 while building sustainable and resilient systems for health capable of preventing, detecting and responding to future pandemic threats will require us to mobilize resources, capabilities, and assets from multiple diverse actors.

Project Last Mile was formed 10 years ago based on a simple thought: that we should be able to get essential medicines to people as effectively and efficiently as the private sector gets consumer products to them. Ten years later, it is a superb example of how a committed partnership can operate at scale, work across many countries, and deliver significant impact by driving sustained improvements in access to life-saving products.

In the current global context, with COVID-19, conflicts, and climate change creating an array of overlapping challenges, we need such innovative and resilient partnerships more than ever. After two decades of remarkable progress against HIV, TB, and malaria, the COVID-19 pandemic has undone years of hard-won progress. Conflicts such as the war in Ukraine always fuel infectious disease, with refugees and displaced people particularly vulnerable to highly contagious diseases like TB. Extreme weather events as a result of climate change drive surges in malaria.

As this compendium demonstrates, partnerships that leverage private sector skills and expertise for public health purposes can make a huge difference in areas like accelerating the deployment of new technologies, building more effective supply chains, and enhancing the effectiveness of behavior change interventions. Project Last Mile is a model of private sector engagement that can be replicated and scaled

in other arenas, for example, in digital health. It provides a proven framework for multisector partnerships that connect global and local capacities to solve critical challenges in health system performance.

To achieve our goals for 2030, building stronger and more resilient health systems that can protect everyone, everywhere from the deadliest infectious diseases – both those we face now and those that will inevitably emerge in the future – we need to intensify and scale up such partnerships with the private sector.

I hope this compendium will inspire other private sector leaders to join us in building partnerships and platforms to deploy their funding and capacities to deliver better health for all. This is the right thing to do to save lives and tackle health inequities. It is also the right thing to do from a purely business perspective: with global economic losses measured in the trillions of dollars, COVID-19 has dramatically demonstrated the immense damage an infectious disease can do to businesses and the economy. On the plus side, healthy individuals are more productive, and healthy communities create an environment in which businesses can thrive.

Making everyone in the world safer from the deadliest infectious diseases will only be achieved if we forge committed partnerships that combine the strengths of governments, civil society, and the private sector. In the fight against diseases as formidable as HIV, TB and malaria, and now COVID-19, no one is truly safe until everyone is safe.

Peter Sands
Executive Director
The Global Fund

The **Global Fund to Fight AIDS, Tuberculosis and Malaria** is a partnership designed to accelerate the end of AIDS, tuberculosis and malaria as epidemics. As an international organization, the Global Fund mobilizes and invests more than US\$4 billion a year to support programs run by local experts in more than 100 countries. In partnership with governments, civil society, technical agencies, the private sector and people affected by the diseases, we are challenging barriers and embracing innovation.

FOREWORD FROM THE COCA-COLA COMPANY



An innovative model where each partner brings their unique skills to the table to make a difference

Our journey started in 2009 when a delegation from The Global Fund to Fight AIDS, Tuberculosis and Malaria and The Bill and Melinda Gates Foundation approached us with a simple yet powerful premise: How can the private sector, and The Coca-Cola Company in particular, share its supply chain and distribution expertise to help ensure life-saving medicines reach communities that need them most – those in the last mile.

Thus 'Project Last Mile' was born. In the ensuing years, we were pleased that the United States Agency for International Development and The President's Emergency Plan for AIDS Relief also joined as partners in this innovative initiative. Over the last decade, working in partnership with local governments and these donors, Project Last Mile has delivered 35 projects across 12 African countries, reaching over 35 million people. This includes, over recent years, support for COVID-19 response initiatives and vaccine rollout.

The strength of Project Last Mile lies in the fact that it is collectively owned and driven by all partners. Each brings to the table their core competencies and strengths. In the case of the Coca-Cola system, this has focused on our supply chain, distribution, and communications capabilities, as well as leveraging support from a strong network of partners in our value chain.

Our people are passionate about this program. The commitment is deep and heartfelt, and it can be seen in the results. I hope this compendium will serve as inspiration for many more partners from the private and public sector to similarly share their unique capabilities in support of The Global Fund's work.

As we work together to create a better shared future, we are fully committed to continuing to work with partners to support resilient systems across Africa, to make a difference.

James Quincey
Chairman and Chief Executive Officer
The Coca-Cola Company

The Coca-Cola Company (NYSE: KO) is a total beverage company with products sold in more than 200 countries and territories. Our company's purpose is to refresh the world and make a difference. We seek to positively impact people's lives, communities and the planet through water replenishment, packaging recycling, sustainable sourcing practices and carbon emissions reductions across our value chain. Together with our bottling partners, we employ more than 700,000 people, helping bring economic opportunity to local communities worldwide.

**FOREWORD FROM
KINGDOM OF ESWATINI
MINISTRY OF HEALTH**

**Bringing private
sector innovation
to the public
sector**

There is a general agreement that ministries of health in Africa face complex challenges in fighting not only malaria, AIDS, and tuberculosis but in providing healthcare to all the people we serve. In the Kingdom of Eswatini, for nearly 50 years, we have served our nation by striving to deliver health services when and where patients need them. In our attempts to achieve this, we have recognized that we need to look beyond the public sector solutions. However, establishing effective public-private partnerships is not that simple. We were, therefore, very pleased when in 2017, we were introduced to Project Last Mile through the facilitation of our long-term supporter, The Global Fund. The fact that the Coca-Cola system was also involved made sense to us given the success of Coca-Cola in reaching its consumers for decades in Africa. The Coca-Cola Company, together with its bottling partner, is also a significant contributor to the economy of the Kingdom of Eswatini. So, this partnership seemed like a natural fit of organizations, all with a long-term commitment to our country.

When we first engaged with Project Last Mile in 2017, together with The Global Fund, we asked them to support us in developing a strategic marketing campaign to reach adolescent girls and young women in Eswatini at the greatest risk of HIV infection. We also asked them to work with the relevant staff to build our capacity to develop future campaigns. Project Last Mile introduced us to the Coca-Cola way of marketing and applied that to our public health context. When COVID-19 began,



Project Last Mile quickly adapted its existing plans and supported us with public health messaging. Since then, our work with them has expanded to include Project Last Mile's other service lines of route-to-market and cold chain equipment maintenance.

This partnership with Project Last Mile has shown us a new way of undertaking public-private partnerships. This new approach involves sharing knowledge, networks, and processes. It is valuable because we wouldn't have access to this type of private-sector know-how without Project Last Mile. While there have been previous public-private partnerships, these have generally focused on providing financing and not sharing knowledge. Other quality initiatives have not sufficiently addressed critical capacity-building issues for the sustainability of the existing health system. This partnership has shown us how we need to provide innovative solutions to the challenges we face as a ministry of health in Africa.

We hope that the journey we've been on with Project Last Mile will influence the creation and development of more public-private partnerships that harness the power of a global business to create solutions to the most significant problems the world is facing.

Muhle Dlamini
Program Manager
Eswatini National AIDS Programme



INTRODUCTION

The COVID-19 pandemic brought to the forefront the need for multi-sector partnerships to meet the public health needs of the most vulnerable communities. It has never been clearer that no one organization or sector can solve the most pressing global health challenges. As a result, ministries of health are increasingly seeking innovative, multi-sector partnerships to leverage comparative advantages and strengthen capacity for public health. Although there are many examples of innovative multi-sector partnerships in health, real success stories of sustainable, replicable, and scalable partnerships can be challenging to find.

This compendium of case studies from the experiences of Project Last Mile is designed for government officials, business leaders, and development partners striving for high-impact, sustainable, and scalable partnerships.

INTRODUCTION

PROJECT LAST MILE



Project Last Mile is a multi-sector partnership pioneering a scalable model for health systems strengthening through transferring the business and technical expertise of the Coca-Cola system to ministries of health in 12 African countries. This partnership leverages the unparalleled reach of the Coca-Cola business system, including the Company, its Foundation, and a global network of bottlers, suppliers, and vendors.

The partnership brings together The Global Fund to Fight AIDS, Tuberculosis and Malaria (Global Fund), the President's Emergency Plan for AIDS Relief (PEPFAR), the United States Agency for International Development (USAID), The Bill & Melinda Gates Foundation, The Coca-Cola Company, and The Coca-Cola Foundation.

The World Health Organization estimates that millions of people in Africa lack access to essential healthcare and medicines.

Despite donors investing billions of dollars to strengthen health systems in Africa, private sector benchmarks for supply chain performance are often out of reach for ministries of health grappling to deliver to the last mile. Thus, in 2009, a delegation from The Global Fund and the Bill & Melinda Gates Foundation approached The Coca-Cola Company to discover how its strengths might be leveraged to improve distribution of life-saving medicines in hard-to-reach places.

The Coca-Cola system is widely recognized for unparalleled expertise in supply chain management and strategic marketing.

In response, The Coca-Cola Company and its Foundation partnered with The Global Fund and The Bill & Melinda Gates Foundation to form Project Last Mile. USAID and PEPFAR joined the multi-sector partnership in 2014 and 2020, respectively.

As a multi-sector partnership, Project Last Mile shares and applies the supply chain expertise and marketing knowledge of the Coca-Cola system with ministries of health to improve the availability of lifesaving medicines and strengthen systems and the demand for health services.

Project Last Mile has three main aims:



Improve the availability of medicines, vaccines, and other health products through building capacity in supply chain management and efficient distribution



Translate strategic marketing practices to expand reach and amplify key messaging to improve the uptake of public health services



Inspire broader private sector involvement to solve many of the world's health challenges through a multi-sector partnership model of knowledge exchange



Project Last Mile key achievements since 2010

- Supported the strengthening of government health systems by launching over 35 projects in 12 African countries by:
 - Improving the availability of medicines, vaccines, and other health products through strengthening supply chain management for efficient and effective distribution in nine countries
 - Applying strategic marketing process to understand and speak to people, expand reach, and amplify key messaging to improve the uptake of public health services in five countries
- Pioneered a scalable model for multi-sector partnerships leveraging business solutions, facilitating access to skills and intellectual property from one of the world's largest and most successful business systems, and inspired a movement of skills-based public-private partnerships in Africa
- Raised over \$30 million in partner investment for tailored health system solutions across Africa, helping to enable return on investment for donor partners on billions invested in life-saving medicines and vaccines in sub-Saharan Africa

EXAMPLES OF ACHIEVEMENTS IN THE HIGHLIGHTED COUNTRIES



Optimizing delivery routes for over **3,500** health facilities in Tanzania and Mozambique, reducing delivery costs and increasing stock reliability



Developing proactive maintenance and repair systems for over **359** vaccine refrigeration units in Lagos, Nigeria



Supporting direct delivery of medications to over 4.7 million people with chronic disease in South Africa through more than **2,800** pick-up points



Activating a national media campaign in South Africa, enabling NDoH to reach over **22 million** people with key COVID-19 messaging



Tested a digital last mile inventory management system in Sierra Leone to strengthen the supply of family planning and reproductive health commodities, improving reporting rates and reducing out-of-stocks by up to **48%** in three months in pilot facilities

INTRODUCTION



WHY THE COCA-COLA COMPANY?



The Coca-Cola Company is a total beverage company with products sold in more than 200 countries and territories. The business achieves its reach and demand through proven supply chain and strategic marketing practices. Project Last Mile leverages these strengths to support capacity-building in public health systems in Africa.

The Coca-Cola Company's extensive footprint across Sub-Saharan Africa is made possible by the commitment, passion and hard work of its bottling partners who manufacture, sell, and distribute their products. To their credit, The Coca-Cola system has strong distribution across Africa, including the most remote parts of the continent.

- Over 90 years of successful operations in Africa
- 22 bottling partners and over 125 bottling plants across the continent
- A portfolio of over 30 brands sold across Africa
- **As a business system, it employs more than 50,000 people, helping bring economic opportunity to local communities across Africa**

GOALS FOR THIS COMPENDIUM

The Global Fund asked Project Last Mile to answer the question:

“What does it take to build and scale a partnership that translates private sector strengths into the public health system for global good?”

To inspire action, Project Last Mile aimed to identify keys to success that could be used by ministries of health, development partners, and the private sector to create more effective knowledge transfer partnerships.

IDENTIFYING KEYS TO SUCCESS

The case descriptions presented are based on a five-year evaluation of Project Last Mile led by the Yale Global Health Leadership Initiative (GHLI). Yale used a mixed-methods approach that is based on principles of participatory evaluation, integrated into phases of program implementation to measure progress toward expected outcomes and distill lessons learned across country settings. GHLI worked closely with Project Last Mile Country Leads and the Project Management Office to develop and manage country-specific evaluation plans to quantify project inputs, outputs, outcomes, and impact. Deep dives were held in-country to contextualize metrics, capture impact beyond the numbers, and characterize dynamics and processes that were foundational for “real world” delivery of complex partnerships.

The case studies come from diverse countries (Tanzania, Eswatini, Mozambique, Nigeria, and South Africa) where Project Last Mile works.

From July 2015 to June 2020, GHLI researchers conducted nine field visits, including 175 confidential, in-depth interviews with diverse stakeholders from the countries featured in this case report. The team reviewed the results of in-depth evaluation reports from each country setting over the years and identified five keys to success featured in this case compendium. These keys were validated with stakeholders in the Project Last Mile partnership and developed into narrative format. The illustrative quotes included throughout are derived from the full qualitative dataset.

The compendium is not a complete account of all the work Project Last Mile has undertaken. However, the case studies provide comprehensive examples of how multi-sector knowledge transfer partnerships can more effectively contribute to the delivery of life-saving medicines and the uptake of health services in African countries.

A GLOBAL PARTNERSHIP MODEL

The success of Project Last Mile in each country context is supported by a global partnership model that is characterized by:

1. A coalition of champions
2. A flexible global management office
3. A strategic mix of core and project-specific funding
4. Pursuit of mutual benefit to partners

1 COALITION OF CHAMPIONS

Project Last Mile has thrived based on sustained endorsement and advocacy by champions within each global partner organization. These individuals support the growth and evolution of the Project Last Mile approach and open doors to country-level engagement. This model enables Project Last Mile to operate as a neutral advisory platform and partner to governments with the collective endorsement of four of the leading global health agencies. In this model, the ministries of health, not funders or development partners, are the clients at the center of the solution design and delivery process.

The continuity of champions stewarding and supporting the initiative has also been critical. Since 2009, The Coca-Cola Company provided a dedicated Project Director. Key supporters from The Global Fund, The Bill & Melinda Gates Foundation, USAID and The Coca-Cola Foundation have been part of Project Last Mile's governance structure for multiple years. The central management partner, the Global Environment and Technology Foundation (GETF), has been fundamental to the administration and execution of the project since 2014.

2 FLEXIBLE GLOBAL HUB

In 2014, global partners signed a Memorandum of Understanding to support Project Last Mile's mandate and create a platform for shared investment. The global partners engaged GETF to manage the effort, with attention to governance, strategy and design, fiscal stewardship, and project management, and engaged GHFI to support evaluation and learning at global and country levels.

As a neutral backbone organization, GETF supports the partners and partnership to raise and administer funding; contract and manage vendors, partners, and subject matter experts; advise on cross-sector partnership strategy and execution; and coordinate, integrate and deploy contributions from each global partner (e.g., advocacy, funding, intellectual property, networks, tools) to efficiently deliver Project Last Mile results on the ground. This hub also provides a common space for all partners to collaborate both directly and indirectly.

3 STRATEGIC MIX OF FUNDING

As described in the cases that follow, Tanzania served as a learning lab for Project Last Mile, revealing the value of investing in time and space for the partnership to evolve. Core funding provided by The Coca-Cola Foundation and USAID, and the political will that it reflected, has allowed for flexible investment in the development of trusted relationships, the testing of promising new ideas, and a commitment to monitoring, evaluation, and learning.

This core funding has been leveraged to mobilize country-specific funds for concrete action aligned to government priorities. This strategic mix of funding is essential for Project Last Mile's deliberate (and often lengthy) approach to engaging with ministries of health to scope, design and initiate the fit-for-context programs reflected in each case in this compendium.

4 DERIVING MUTUAL BENEFIT

Mutual benefit drives partnerships to be sustainable in the long term. Project Last Mile has grown into a mutually engaging collaboration, not just a one-way transfer of private sector expertise. Project Last Mile’s global partners – including The Global Fund, USAID, PEPFAR, and The Bill & Melinda Gates Foundation – play a critical role in advising Project Last Mile on where its support will be most valuable and facilitating linkages with ministries of health based on their local needs, demand, and alignment with financing. As an initiative for global good, Coca-Cola does not receive a direct commercial benefit from this work. However, representatives from the Coca-Cola system describe tangible benefits from their participation at both global and country levels. For example, local bottlers describe how country-level interactions have supported critical reflection and process improvement:

“We actually are so used to our processes that we don’t even know how to sell the benefits of what we do. I told [my staff] you have to go back to the drawing table and rethink about how to market the benefits of the processes that we have put in place. We don’t talk about all the mess that we have gone through, the background, and what we have saved and not saved the company from, and so we have been thinking about how to package our reports differently.”

Coca-Cola Beverages Africa Manager
(CCBA, Tanzania)

Representatives from across the Coca-Cola system also consistently describe the sense of motivation and satisfaction that comes from the collaboration.

“There’s been a motivational element, positive outcome, from a Coke system point of view. Even from those of us from a more corporate point of view, there’s no doubt there’s a sense of personal fulfillment of being able to contribute on something which has such a positive outcome – of disease being prevented and lives being potentially saved.”

Representative from The Coca-Cola Company

For Project Last Mile’s global donor partners and in-country government partners, demonstrating the value of private sector engagement and the benefits of knowledge transfer partnerships has been crucial. The impact generated by Project Last Mile through access to best-in-class skills and capabilities is evident in the case studies that follow.

Project Last Mile has successfully demonstrated the power of effective collaboration and strategic contributions from private sector partners toward social impact goals.

Global partners





5

KEYS TO SUCCESS

Through systematic review of Project Last Mile experiences across diverse countries, five keys to success consistently emerged. These keys can serve as guideposts for governments, business leaders, and development partners committed to multi-sectoral partnerships. The cases that follow reflect how these keys were brought to life in each context.

1

Connect global capacities to meet local priorities

Strategic alignment among partners is essential. Project Last Mile's work in each country is prefaced by an Engage and Align phase to find a close fit between three components: Project Last Mile's core business strengths, the investment priorities of an anchor donor partner, and the development priorities of the host government agency. This three-way alignment promotes ownership by the host agency, prevents duplication and overlap, and complements existing investments for sustainability. As you will see in the cases that follow, introduction by an anchor development partner and alignment with a national strategic plan or flagship reform partner enable Project Last Mile to connect its global capacity with local priorities.

2

Establish good governance for shared ownership

Investment in a steering or working committee chaired by the host government helps bridge public- and private-sector perspectives, enables troubleshooting, and promotes shared accountability for results. Project Last Mile does not just import technical solutions in supply chain management or strategic marketing. Instead, it is committed to integrating these efforts with local initiatives, so they are owned by country government agencies and inclusive of other development partners, with an eye toward sustainability. The Steering Committee approach in Mozambique is the most mature case example.

3

Adapt private sector capacity for public good

Successful partnerships will leverage multiple strengths of the private sector partners. Project Last Mile's global partnership model has played a central role in adapting private sector capacity for the public health sector. In most country settings, country program leads translate long careers from the Coca-Cola system into every aspect of the project. In some countries, local Coca-Cola bottlers freely share their expertise and business intelligence with their peers in the public sector. In other countries, Project Last Mile taps into world-class analytic and design expertise from the agencies with which Coca-Cola contracts on a regular basis. Local coordinators based in-country facilitate knowledge exchange and implementation, so there is a consistent touchpoint for the partnership. Over the past 10 years, Project Last Mile has become adept at leveraging this capacity and translating it to fit the operating realities of public health agencies.

Coca-Cola key inputs

Country program lead with deep Coca-Cola system experience



Adaptations of global Coca-Cola business models



Local business intelligence and relationships



Access to preferred agencies and suppliers of record

4

Ensure transparent and strategic use of data for decision-making

Across country settings, transparent and strategic use of data for decision-making emerged as a prerequisite for success. As illustrated in the cases that follow, each country engagement started with focused analysis. From formative market research in Eswatini to detailed geomapping in South Africa and Mozambique, this data was shared openly with host agencies and development partners as the foundation for shared problem solving and onward performance monitoring.

5

Commit to a proactive, client-centered culture

Translation of private sector capacity goes well beyond transfer of concrete tools and expertise. GLHI discovered that as Project Last Mile moves toward maturity in each country's market, it catalyzes a shift in business culture to reflect more proactive, client-centered approaches, such as a maintenance mindset in Nigeria, and increasing reliance on data for business planning and advocacy in South Africa. Project Last Mile's donor partners – including The Global Fund, USAID, PEPFAR and The Bill & Melinda Gates Foundation – enable the systemic shifts through aligned engagement and funding.



TANZANIA

An enduring partnership model

As demonstrated throughout this case compendium, Project Last Mile has adapted private sector solutions to a diverse set of public health challenges.

But what remains once the technical solutions and business intelligence has been shared? Can a mutually beneficial collaboration endure? Project Last Mile’s work in Tanzania represents its most enduring collaboration, grown for more than a decade from where the partnership model was initially conceptualized and tested.



THE START OF THE PROJECT LAST MILE MODEL JOURNEY

At the 2009 World Economic Forum Annual Meeting, Muhtar Kent, former CEO and Chairman of The Coca-Cola Company, conveyed ongoing commitment to the United Nations Global Compact. But how could this high-level commitment be transformed into action?

Thanks to some creative and innovative thinking, representatives from The Global Fund identified Tanzania as a potential learning lab for innovation in supply chain partnerships. In what was later described as “a bit of a chicken and egg situation”, representatives from Coca-Cola came to Tanzania to understand the needs on the ground before offering any specifics of what they could provide, and government stakeholders tried to understand what Coca-Cola was offering. Champions within each organization committed to “learning as we go,” bringing skeptics along for the ride.

As a result of this open-minded exploration, The Coca-Cola Company and CCBA Tanzania – a subsidiary of CCBA – launched a partnership with the government’s Medical Stores Department (MSD) to support distribution route optimization, improve proactive logistics planning and procurement, and strengthen talent management.

The 2010-2013 effort was supported by funding from The Global Fund, advocacy by The Bill & Melinda Gates Foundation, and project management support from Accenture Development Partnerships.

The lessons learned, documented in the peer-reviewed scientific literature, have been built into subsequent Project Last Mile endeavors, as reflected in this compendium.

Today, the Project Last Mile model includes time and space to adapt each partnership to local priorities (Key to success 1: connecting global capacities to meet local priorities), investment in local relationships to maintain momentum (Key to success 2: good governance for shared ownership), and careful adaptation of private sector tools and approaches (Key to success 3: engaging and adapting private sector capacity for public good). Similar to Project Last Mile experiences in other settings, MSD officials engaged in the project during these early phases described more proactive demand planning and supply chain monitoring (Key to success 4: transparent and strategic use of data for decision-making), enhanced collaboration and communication across departments, and greater attention to employee performance management. Even in a relatively short period of time, stakeholders perceived important shifts in business culture at MSD (Key to success 5: developing a proactive, client-centered culture).





REMAINING RESPONSIVE

In 2017, Project Last Mile was engaged by The Global Fund to reengage with MSD for a targeted, one-year collaboration, this time in partnership with John Snow Inc (JSI, a global health consulting firm) and Llamasoft (a business analytics firm). The goal of this partnership was to optimize medical supply delivery routes for health facilities in four geographic zones, and to build modeling capacity within MSD.

The optimized routes covered nearly 2,000 facilities with projected savings of 36% in distribution costs based on similar activities in nearby geographies.

Project Last Mile's history of successful collaboration in Tanzania provided fertile ground for this targeted, tangible work. Trust between partners allowed for rapid collaboration. MSD staff reconnected with their peers at CCBA Tanzania for site visits, skills exchange, and critical review of organizational and analytic approaches to route-to-market, warehouse practices, and fleet management; and stakeholders described Project Last Mile efforts as being seamlessly aligned with the work of MSD.

“Everyone was eager to see [Project Last Mile] bringing sustainable changes. Everyone was like, “Yes. They are back here. Let us finalize so that these changes can continue.”

MSD HQ Representative



DEMONSTRATING LASTING IMPACT

The engagement of Project Last Mile in 2017-2018 also afforded the opportunity to check in on the gains achieved five years earlier. Between 2010-2013, Project Last Mile's talent management workstream (referenced earlier) catalyzed DRIVE, an MSD-branded program for talent and performance management that included key performance indicators for employee performance, strengthened training and supervisory cycles, and performance-based compensation.

As of 2018, the DRIVE program had endured. MSD had also maintained strategic management meetings that had been introduced by Project Last Mile to monitor, anticipate, and solve challenges. Zonal staff engaged in earlier rounds of route optimization had advanced in their careers and described how they continued to apply the lessons they had learned from Project Last Mile into their supply chain operations.

The following three years saw Project Last Mile continue its work in Tanzania. In 2019, Project Last Mile also worked with MSD to launch a new phase to develop a customer service strategy to improve servicing of different health facility segments. In 2020, Project Last Mile completed a comprehensive situational analysis and developed a business plan to help Mission for Essential Medical Supplies, a faith-based not-for-profit, move towards its core mandate to provide effective, efficient, and reliable health commodities distribution to 900 health facilities. Most recently, since 2021, Project Last Mile has been supporting the COVID-19 vaccine roll-out in Tanzania with last mile distribution, cold chain, and demand creation strategies. Through this project, Project Last Mile has supported the Mission for Essential Medical Supplies to improve distribution planning, cold storage, and uptake of COVID-19 vaccines for up to 150 vaccination centers serviced by faith-based organizations. The long-term partnership enables agile response to emerging needs on the ground, which has proved vital during the COVID-19 pandemic.

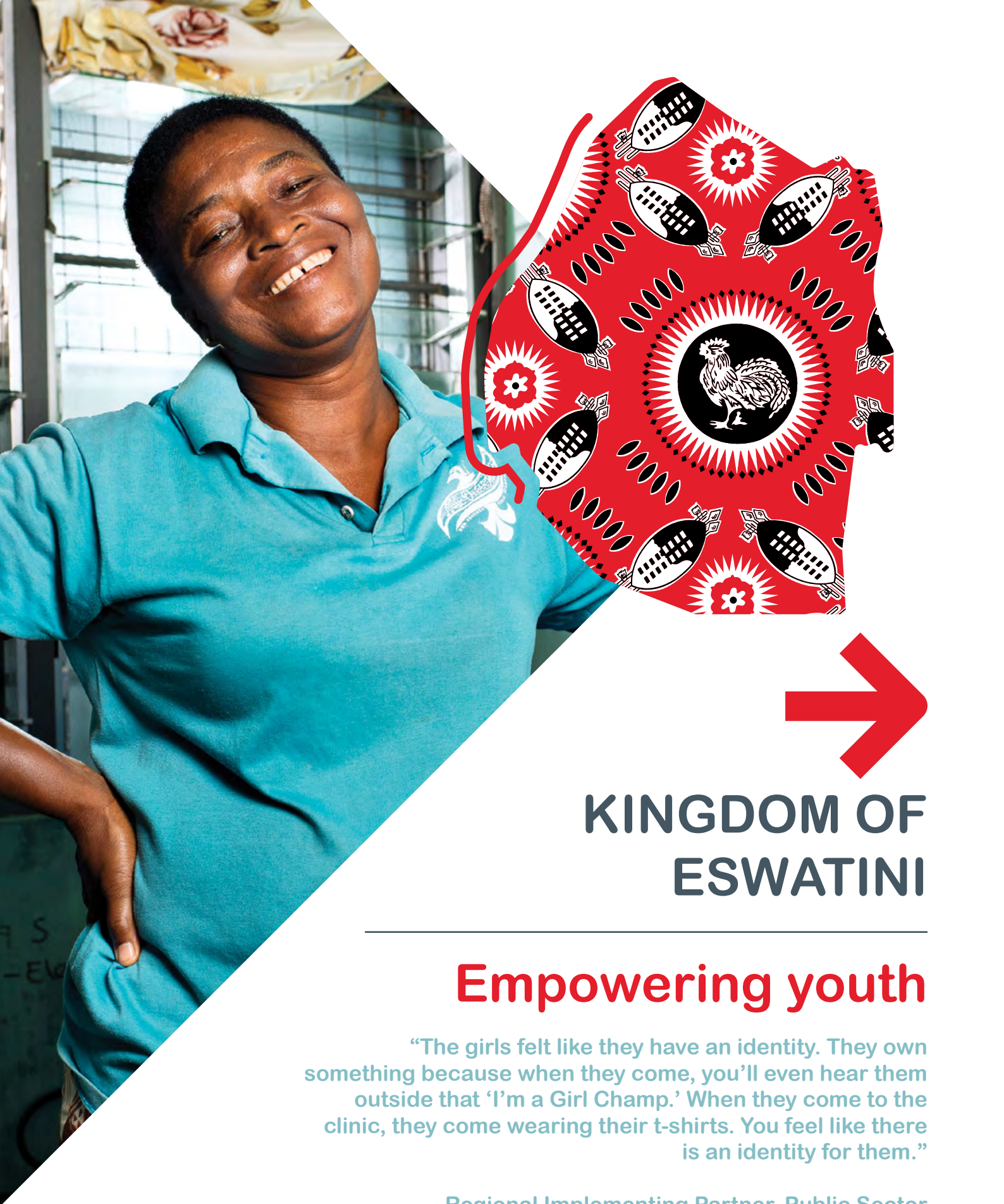


35 PROJECTS IN 12 COUNTRIES IN AFRICA

Since Project Last Mile's first pilot in Tanzania, the partnership has scaled to over 35 projects in 12 countries in Africa. The remaining case studies show that, while Project Last Mile's core mission has remained the same, the model and approach to project delivery has continued to evolve as Project Last Mile learned more about what works and what doesn't in context.

Key to this successful journey has been the long-term commitment and advocacy of The Coca-Cola Company, The Coca-Cola Foundation, The Global Fund, USAID, PEPFAR, and The Bill & Melinda Gates Foundation, Project Last Mile's ability to adapt and flex to meet local needs, and the fundamental approach of collaboration and integration to amplify impact.





KINGDOM OF ESWATINI

Empowering youth

“The girls felt like they have an identity. They own something because when they come, you’ll even hear them outside that ‘I’m a Girl Champ.’ When they come to the clinic, they come wearing their t-shirts. You feel like there is an identity for them.”

Regional Implementing Partner, Public Sector



INTRODUCTION

Challenge

In the Kingdom of Eswatini, adolescent girls and young women (AGYW) are up to five times more likely to be living with HIV than their male peers. Efforts to expand sexual and reproductive services among AGYW have been hindered by limited awareness of available services, stigma associated with sexual and reproductive health, and negative experiences with healthcare providers.

Notably, there is a lack of targeted health communication to address these demand-side barriers and speak to AGYW to protect their health and safeguard their future.



SHARED SOLUTION

Applying proven strategic marketing principles, processes and agencies used in the Coca-Cola system, Project Last Mile engaged the Ministry of Health in developing and implementing a targeted health communications campaign to encourage AGYW to access health services. The result was **Girl Champ**, an aspirational brand that draws AGYW to clinics for services and support through wellness events and community mobilization. An accompanying **COACH** curriculum was developed to inspire healthcare workers to see themselves in a new way when delivering youth-friendly services, consistent with the **Girl Champ** brand.



Supported by The Global Fund, Project Last Mile partnered with the Ministry of Health, its Health Promotion Unit (HPU), the National Emergency Response Council on HIV and AIDS (NERCHA) and the Eswatini National AIDS Program (eNAP).

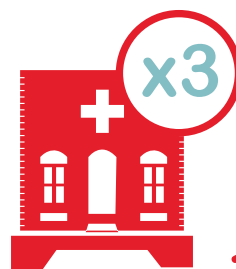
Based on recommendations from the Coca-Cola Africa Marketing team, Project Last Mile also enlisted Olson Zaltman, a research consulting firm, to conduct foundational market research, and engaged FCB Africa, a full-service creative agency, to develop the innovative **Girl Champ** brand strategy, assets, and plans.



Results



Through **active community engagement** and with endorsement from local leaders...



Project Last Mile piloted Girl Champ in three healthcare facilities, resulting in **1,722 AGYW** registering for future health services.

Young women came from far and wide to participate in day-long events that featured local entertainment, fitness and wellness activities, testimonials from healthcare professionals, and onsite health services. There was a statistically significant increase in the proportion of young girls visiting health clinics for HIV counseling and testing after Girl Champ activations (30% pre-activations vs 36.8% post-activations), a 6% increase within four months of the events.

“From the research that was done by Project Last Mile, the young women and girls still see health workers as a preferred source of information. They still see a health facility as the preferred source of where they can go for help. It demystified the health facility, for some who were really scared to go there.”

Public Sector Partner

Stakeholders and the girls themselves voiced overwhelming support for the brand, which was endorsed by NERCHA as a key brand for AGYW and has since been leveraged to support broader health communications, including COVID-19 awareness, with young people.



KEYS FOR SUCCESS

1 CONNECTING GLOBAL CAPACITIES TO MEET LOCAL PRIORITIES

The Global Fund had long supported investments in HIV testing and treatment for resource-limited settings, but not everyone was being reached with these critical services. In Eswatini, the focus became not just about getting the services to those in need but, getting those in need to the services available.

Segmentation is a critical first step in strategic marketing to ensure that the target audience is reached with communication that resonates. Project Last Mile engaged with NERCHA, which coordinates all HIV prevention activities outside of the Ministry of Health, and the Ministry of Health through the Eswatini National AIDS Program to collectively decide which population group should be targeted with health communications.

In 2017, the Project Last Mile team based its market segmentation process on data from the Swaziland HIV Incidence Measurement Survey, which demonstrated that young women aged 15-24 years old were two- to five- times more likely to be living with HIV than their male peers.

2 GOOD GOVERNANCE FOR SHARED OWNERSHIP

In Eswatini, Project Last Mile encountered a crowded stakeholder landscape that needed to be consulted for outreach activities with AGYW. In response, Project Last Mile assembled a Technical Working Group of key stakeholders, which included the Ministry of Health, the Eswatini National AIDS Program (SNAP), HPU, and NERCHA. This inclusive structure of governance promoted collective engagement and buy-in to the strategic marketing process and resulting strategy.

The Project Last Mile Technical Working Group met regularly throughout the partnership to identify the target population, advise on market research findings and creative design, and support implementation of the pilot through traditional community structures and the existing health system. These wide-step consultations led to co-creation of the Girl Champ brand and shared accountability in the response.

Project Last Mile consulted with multiple stakeholders, assessed levels of engagement with the Technical Working Group, and identified a public sector champion who could effectively bring the right people to the table and 'sell-in' the approach to public sector partners for sustainable impact. Through this work, it became clear that ownership would sit within NERCHA and SNAP, which worked closely with partners and agencies to deliver HIV/ AIDS communications at a national level.

3 ENGAGING AND ADAPTING PRIVATE SECTOR CAPACITY FOR PUBLIC GOOD



Country program lead from the Coca-Cola ecosystem:

Across all Project Last Mile programs, projects are led by subject matter experts with years of experience in the Coca-Cola system, who can translate private sector core competencies into public sector solutions and aspirations. The country program lead was supported by a proactive in-country coordinator who was familiar with the local context and the stakeholder landscape.

Early on, stakeholders in Eswatini expressed ambivalence as to how a private sector partnership like this could positively influence health promotion. Addressing this head-on, the country program lead and local Project Last Mile team worked to directly translate understanding of strategic marketing principles and processes for consumer products to demand generation for health services. Their ability to engage with both private sector agencies and public sector stakeholders was critical for project momentum and to align on vision.

Engagement of Coca-Cola agencies:

Private sector approaches to strategic marketing rely on a dynamic state of the science, where new methods and technologies are used to reach consumers in innovative and ground-breaking ways. Tapping into this intelligence is often out of reach for public sector health agencies. In Eswatini, Project Last Mile closed this gap, working with Coca-Cola

Marketing Africa to engage two world-class strategic marketing agencies.

From the Coca-Cola network, Project Last Mile engaged Olson Zaltman to conduct foundational market research and FCB Africa to develop the innovative communications strategy, Girl Champ. These market research and creative agencies had experience with developing campaigns across Africa, and the rich market research insights were quickly converted into the highly resonant Girl Champ brand strategy.

“ In my usual work, it’s mostly a campaign selling a product. This is more of a great initiative that you want to get involved with. There’s a lot of passion that resonates with the other people that I thoroughly enjoy, and there’s a lot that I’ve learned.”

Private Sector Partner





4 TRANSPARENT AND STRATEGIC USE OF DATA FOR DECISION-MAKING

The Technical Working Group came together to make decisions based on data, ranging from use of epidemiologic data to inform market segmentation to the use of market research data to shape the brand strategy.

The stories and images that participants shared painted a vivid picture of the lives of young girls in Eswatini. It became clear that young women aspired to be informed about their health, to protect their future, and to defend themselves against life's pressures.

This market research opened the eyes of partners, laid the groundwork for the creative agency to develop a powerful campaign, and ignited passion and urgency for the work at hand across the partner landscape.



5 DEVELOPING A PROACTIVE, CLIENT-CENTERED CULTURE

The private sector strategic marketing approaches used in Eswatini put the client – AGYWs – at the center of the strategy from start to finish. Once the market research was complete, and as the Girl Champ brand was about to be launched, Project Last Mile worked at grassroots level with clinics, schools, parents, and communities to inform stakeholders about the campaign events. The stakeholders then endorsed attendance for young women. Such buy-in was critical to ensure that the young women would attend freely.

As they came to the events and shared their stories, AGYW became visible – they were being reached as a collective in a girls-only space they could call their own, free to ask questions and access support where their needs were being heard.

Such a spotlight also paved the way for the stakeholders to consider how other segments of the population could be targeted with health communications, including adolescent boys and young men.



MOZAMBIQUE

Shared commitment

“I think this is the kind of partnership that we can keep. They are passing on their skills to us. They are training people here and implementing things. There is a feeling of ownership by CMAM.”

Public Sector Partner



INTRODUCTION

Challenge

Mozambique is a vast country with challenging terrain and heavy seasonal rains. The suboptimal supply chain management infrastructure has placed strain on the public health system, leading to stockouts of essential medications in facilities, particularly in remote areas. By contrast, Coca-Cola Beverages Africa (CCBA), based in Maputo, consistently reaches remote areas with a robust and efficient distribution system.



SHARED SOLUTION

In support of Mozambique's Strategic Plan for Pharmaceutical Logistics (PELF), Project Last Mile adapted CCBA business practices to improve delivery of medicines to health facilities in remote areas. Project Last Mile used private sector approaches, such as drive-time analysis, for route optimization to transform the delivery system from 148 district warehouses to 30 intermediary warehouses. Routes were also contextualized to the local fleet and accounted for seasonal variation and road conditions. Central de Medicamentos e Artigos Médicos (CMAM) staff were also trained in warehouse processes, outsourced distribution contracting and how to update optimal routes, all based on CCBA's business practices.

Partners

Since June 2016, Project Last Mile has directly partnered with CMAM or central medical stores for Mozambique. With support from The Global Fund, Project Last Mile brought together CMAM, Frontline Market Research (an agency with deep experience in Mozambique that conducts geospatial analyses for Coca-Cola bottlers across country settings), CCBA, and in-country supply chain management partners, including VillageReach and Chemonics.

Results

**Covered
80,000km**



In total, the team covered 80,000km from the start in 2017 to the end of 2020.

**11
provinces reached**



They reached 11 provinces with 93% of facilities and associated route conditions mapped and analyzed.

In some provinces, optimized distribution models projected savings of almost 50% compared with the current model.

KEYS FOR SUCCESS

1 CONNECTING GLOBAL CAPACITIES TO MEET LOCAL PRIORITIES

The Global Fund has made significant investments in commodities and programs to end HIV, tuberculosis, and malaria in Mozambique, and sought to improve the return on those investments through strategic support to the supply chain system. At the invitation of The Global Fund, Project Last Mile reviewed Mozambique's PELF and CMAM's strategic goals for autonomy as guiding documents to identify concrete aspects for strategic support, fill gaps among current development partners, and align with Project Last Mile comparative strengths and private sector expertise.

Over time, this process ultimately returned a solution that is 'owned' by the in-country stakeholders.

2 GOOD GOVERNANCE FOR SHARED OWNERSHIP

Project Last Mile assembled a Steering Committee, which emerged as the pivotal convening body for a diverse and complicated stakeholder landscape, and an exemplary practice to be replicated.

Chaired by CMAM and facilitated by the Project Last Mile country program lead, the Steering Committee was comprised of CMAM representatives, donors, others in the supply chain management landscape (implementing partners), and CCBA. Membership includes: CMAM Director, Chair and Deputy

Directors; Coordinator of Management Unit for The Global Fund and Mozambique Ministry of Health (MISAU); Senior Health Commodities Advisor for USAID; Country Directors for Project Last Mile, VillageReach and Procurement Supply Management (Chemonics); Human Resources Director for CCBA; and Director of Project Last Mile.

The Steering Committee received a detailed quarterly report by the Project Last Mile team, prepared in English and Portuguese, and met in person every six to eight weeks to review results, make decisions and discuss concerns. Stakeholders described ways in which this committee fostered shared accountability, transparent use of data and project momentum. It played a vital role in galvanizing the diverse stakeholder group, each with their own area of prioritization to support common goals for CMAM.

Between steering meetings, a local coordinator fostered connection and communication.





3 ENGAGING AND ADAPTING PRIVATE SECTOR CAPACITY FOR PUBLIC GOOD

Coca-Cola key inputs



Led by system expert



Adapted business models



Utilized insight and relationships



Accessed vendors

“The main difference is that Project Last Mile basically are people with deep knowledge in the work they do. They know the routes, how they work.”

Public Sector Partner

The idea of translating capabilities from the private sector was initially met with some resistance, particularly due to perceptions that the private sector is highly resourced, and that the supply chain management requirements for beverages are much less complex than essential medicines (cold chain needs, number of items, etc.).

The country program lead served as a bridge between sectors to manage expectations and ensure that the solutions offered to CMAM could be readily adapted and integrated into the public sector response.

- **Country program lead from the Coca-Cola system:** Stakeholders consistently attributed success of the partnership to the Project Last Mile dynamic country program lead, who served as a boundary spanner

across organizations and sectors. He had vast experience within the Coca-Cola system, including having served in leadership roles in the establishment of CCBA in Mozambique. Enlisting the right person as the face of Project Last Mile in-country is a consistent hallmark of the partnership approach.

- **Engagement of Coca-Cola agencies and suppliers:** Project Last Mile engaged the expertise and experience of Frontline Market Research for route optimization data collection and modeling using drive-time analysis.
- **In-kind contributions from Coca-Cola bottling partner:** Project Last Mile negotiated specific in-kind contributions from CCBA, the local bottler. This included physical assets (i.e., the vehicle to conduct drive time analysis), time from senior staff, and technical tools including warehouse management processes, templates for outsourced contracting, and lists and rates of transport suppliers. This core business expertise was directly translated into CMAM operations.



4 TRANSPARENT AND STRATEGIC USE OF DATA FOR DECISION-MAKING

Throughout the partnership, Project Last Mile engaged CMAM on a collaborative learning journey to understand how the data and metrics being collected and used to inform the optimized routes could be adopted within CMAM on an ongoing basis.

The value of the partnership became clear when the first detailed analyses were presented to the Steering Committee. Specifically, Project Last Mile shared the maps, which documented the optimized routes, as well as the fleet specifications needed to manage distribution – both from their current delivery model (district medical stores to facilities) to the proposed delivery model (direct distribution from 30 strategically placed intermediary warehouses throughout the country). The new routes were able to take into account the seasonal variation of road conditions in Mozambique, as well as efficient configurations that enabled routing across provincial borders.

Sharing these data generated momentum and enthusiasm for continued partnership and was a foundation for trust in Project Last Mile's commitment and capability.

Notably, these data were shared widely and not considered proprietary. They were used by other supply chain management partners and also consulted in disaster responses after cyclone Idai.

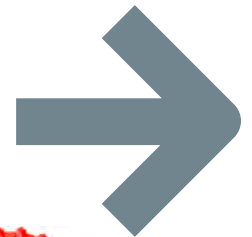
“I was really impressed. We normally do ad hoc planning because we don't have that basic information available. So now we have no excuse for miss-planning because we already own the information, we know the warehouse locations, we know what type and how many vehicles we need. So now we can make the medicine distribution system more effective and distribute in a timely manner. We can do it.”

Supply Chain Support Partner

5 DEVELOPING A PROACTIVE, CLIENT-CENTERED CULTURE

The Project Last Mile partnership succeeded in not only helping to develop a more proactive business culture within CMAM, but also ignited a new type of social responsibility culture within CCBA.

These signals are encouraging, as this becomes the basis for future collaboration and sustainable contributions for the partnership beyond Project Last Mile. There was acknowledgment from CMAM that their aspiration to become autonomous was within reach because of the data and tools now at their disposal from the partnership with Project Last Mile, which instilled a new level of confidence in implementing their strategic plans (PELF).



Nigerian Bottling Company Ltd. RC 902
(A member of Coca-Cola Hellenic Group)

NIGERIA

Keeping vaccines cold

“Equipment were fixed and functional, so that translates to more vaccines being stored at the facility, which translates to more children getting immunized. That is the success of the pilot.”

Public Sector Partner

INTRODUCTION

Challenge

In Nigeria, only one out of four children (23%) is fully immunized by two years of age. Poor cold chain (refrigeration) infrastructure is a limiting factor in the country's efforts to ensure vaccine availability and potency. In Nigeria, cold chain equipment (CCE) for vaccine storage is threatened by a harsh operating environment, including unreliable power supply and dusty conditions, as well as limited technical expertise and funding within the public sector to maintain and repair these units. In a 2018 review, nearly 41% of wards in Lagos, Nigeria's most populous state, did not have adequate CCE. An estimated 30% of CCE was considered obsolete and 30% of CCE was non-functional. Further, the average time to repair CCE ranged from two months to two years.



SHARED SOLUTION

The Nigerian Bottling Company, Coca-Cola's local bottler, contracts with Frigoglass, a CCE service supplier, to provide repair and maintenance to 77,000 refrigerators and coolers in shops throughout Nigeria, achieving 99.5% uptime on average over the pilot.

Project Last Mile delivered a six-month pilot in Lagos to understand whether it would be feasible, effective, and cost-efficient to use this same outsourced maintenance and repair approach for cold chain units in the public health sector, with the goal of improving vaccine availability and potency.

Partners

With funding from The Coca-Cola Foundation, Project Last Mile partnered with the National Primary Health Care Development Agency, Nigerian Bottling Company, and Coca-Cola Nigeria Limited to craft a solution that would allow for outsourced preventive maintenance and repair. They navigated public and private sector ways of working to engage the Nigerian Bottling Company and Frigoglass to maintain and repair the public cold chain assets used to protect vaccines in Lagos State. The Clinton Health Access Initiative (CHAI) provided essential coordination on the ground.

Results

At the beginning of the pilot, over a third (34%) of 362 CCE evaluated for service in Lagos was found to be non-functional. Detailed cost estimates for repairs and maintenance were developed to inform future procurement. Preventative maintenance estimates were far below the cost of replacing non-functioning equipment.



Maintenance mindset to protect and safeguard

Public sector cold chain technicians and frontline healthcare workers learned from their Frigoglass counterparts during onsite technical visits and began to demonstrate an emerging 'maintenance mindset' to protect public assets and safeguard vaccines.

99% coverage of equipment

Frigoglass provided preventative maintenance and repair services for 359 out of 362 units (99% coverage) and returned 134 non-functional units to operation.



“When we visited some of the primary health centers, I saw that leaders of tomorrow are living in poverty and that challenged me. I saw it as an opportunity to make sure that the cold chain equipment is maintained properly, to ensure that the vaccines we give are the correct ones, so that the children can live healthy lives.”

Private Sector Partner



KEYS FOR SUCCESS

1 CONNECTING GLOBAL CAPACITIES TO MEET LOCAL PRIORITIES

The development community has made significant investments in CCE to protect vaccines and ensure consistent access to effective immunizations in resource-limited settings across the globe, but the return on these investments is threatened as equipment falls out of service.

The Coca-Cola system has developed a sophisticated set of best practices in maintaining its refrigeration equipment in all environments – including use of outsourced maintenance contracts to reach small shops and kiosks spread across hard-to-reach areas.

Sharing both global and Nigeria-specific processes and brokering access to Coca-Cola system suppliers for outsourced maintenance helped demonstrate what was possible.

At first, the National Primary Health Care Development Agency struggled to link the strategic value of functional CCE with improving vaccine coverage, a national health priority. By the end of the pilot, however, frontline workers were excited about the connection.

2 GOOD GOVERNANCE FOR SHARED OWNERSHIP

Although a formal governance structure was not introduced given the short duration of the pilot, stakeholders noted that Project Last Mile and Frigoglass were responsive in a dynamic environment.

Notably, CHAI routinely monitored all cold chain for primary care in Lagos State and was engaged, in addition to a local coordinator from Project Last Mile, to foster engagement across diverse stakeholders.

Gaining buy-in at the frontlines:

Early public sector hesitancy to engage the private service provider transformed into high demand at the frontlines, where healthcare workers and cold chain officers came to rely on the maintenance service provided by Frigoglass.

During maintenance technician visits, public sector cold chain officers and other frontline workers interacted with the service technicians, asking questions, taking notes and pictures as they conducted repairs, suggesting that these visits were also a learning opportunity for them.

Understanding governmental mechanisms:

The contracting and funding mechanisms available to the local government were not structured to enable direct support for the outsourced preventive maintenance. To circumvent this, Project Last Mile set up and funded the pilot as a proof-of-concept. The extensive negotiation between Project Last Mile and key stakeholders served as a reminder that technical solutions from the private sector must be adapted for context, and that contractual and funding mechanisms may need to be refined and adapted for a more sustained approach to outsourced maintenance and repair for CCE.

“We try to build the relationship between the State and Project Last Mile. At first it was the primary healthcare board who got comfortable with the contract. Then we went to deliver to the Minister of Health, then to the Minister of Justice.”

Public Sector Partner





3 ENGAGING AND ADAPTING PRIVATE SECTOR CAPACITY FOR PUBLIC GOOD



Project Last Mile in Nigeria was led by a subject matter expert with deep experience in the Nigerian Bottling Company who could help both the private sector and public sector partners negotiate and manage the outsourced contract with Frigoglass, sharing deep expertise on everything from competitive local rates to processes for supplier performance management.

Access to trusted, local service providers from the Coca-Cola network has emerged as a key differentiator for Project Last Mile across country settings. This partnership directly contracted with proven service provider Frigoglass, leveraging its extensive service network and accumulated intelligence working in local cold chain space for the public sector.

Frigoglass has 44 technicians working from five service centers throughout the country, backed by an extensive set of systems to promote timely customer service. Additionally, the team established a service hotline via WhatsApp to allow cold chain officers and health facility staff to contact Frigoglass technicians when CCE needed to be serviced. This tool was quickly adopted, and frontline workers particularly appreciated the fast response times. Frigoglass serviced CCE within 48 hours, and frontline workers were confident that the equipment would be fully functional following the visit.

Unlocking Frigoglass expertise, infrastructure, and local intelligence to protect cold chain assets

in the public sector required careful attention to translation between sectors. For example, early misalignment about operational definitions for performance was resolved over the course of the pilot through communication and collaboration with CHAI, a development partner active in the vaccine management space.

Initially, Frigoglass utilized onetime onsite evaluation of CCE temperature changes to determine functionality, instead of repeat verification to ensure equipment maintained an adequate temperature range of 2 to 8°C as required by public sector and WHO standards. Feedback from the National Primary Health Care Development Agency and CHAI enabled Project Last Mile to “course correct” in their approach for verifying functionality.

“Frigoglass was extremely flexible and responsive in adapting their operations and their reporting to the needs of Lagos State. And through the course of the project, we were able to kind of adapt the way Frigoglass reporting, what they were doing and get that to be more in line with Lagos State’s priorities.”

Project Last Mile



4 TRANSPARENT AND STRATEGIC USE OF DATA FOR DECISION-MAKING

In addition to repairs and maintenance, the pilot also provided critical data on equipment failure rates and cost of maintenance that can be used for more cost-effective procurement decisions in future.

Data derived from the pilot on failure rates, availability of spare parts, and service costs could inform future procurement decisions and reduce the lifetime cost of the government's CCE inventory. Using results from the six-month pilot, Project Last Mile projected the costs of maintenance and repairs at \$24,056 annually if Lagos State maintained 500 CCE units without warranty per year, estimating an average equipment failure rate of 37% (as seen in the pilot).

For 500 new CCE units with a warranty, outsourced maintenance would cost Lagos State \$4,520 for total annual preventative maintenance. This is far below the costs of replacing the non-functional equipment and more affordable than the projected costs for maintenance and repairs without a warranty.

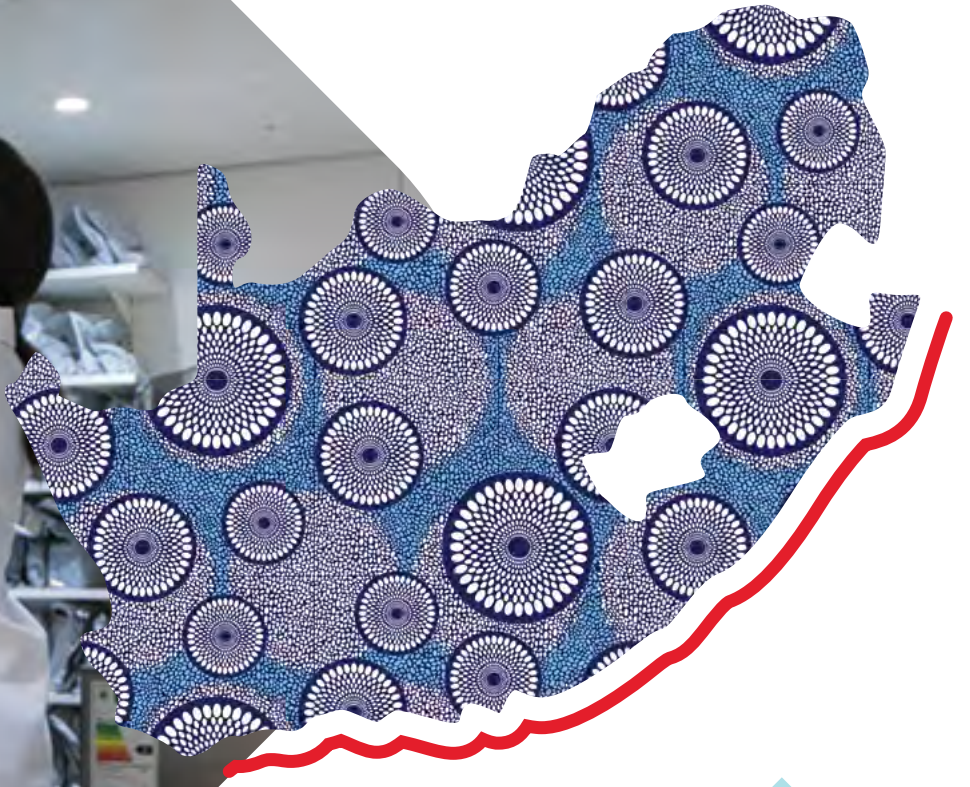
5 DEVELOPING A PROACTIVE, CLIENT-CENTERED CULTURE

In addition to the positive impact of having access to functional equipment and cost-efficiency projections, the pilot helped frontline workers begin to understand the importance of regular maintenance of CCE, suggesting the emergence of what private sector stakeholders termed a "maintenance mindset," or a culture of maintenance. As one public health sector official noted, healthcare workers realized that without maintenance, CCE would likely have problems.

“I think it’s a question of people having the mindset about maintenance, having a sense of ownership. Understanding that though this is a public asset, it serves me as an individual because it serves my family members, it serves my community members, it serves people who are related to me in diverse ways, and being able to take ownership of the equipment and manage them like the ones they have in their personal homes... I think it’s about having the same mindset when it comes to public assets.”

Private Sector Partner

Through its partnership with The Coca-Cola Company, Project Last Mile was able to leverage its longstanding corporate relationship with the Nigerian Bottling Company and accumulated intelligence from a sole source CCE provider to prove that outsourced maintenance with the private sector can be adapted for public good.



SOUTH AFRICA

Patient-focused innovation

“We’ve got all of these clinics being decongested; we have health workers now being able to focus on the more clinical side. And we’re creating more entry points for public healthcare. And that is a big part of universal health coverage. So, working with Project Last Mile, it’s not just benefiting us as a company in getting more patients into our pharmacies, but it’s also benefiting our communities.”

Private Sector Representative

INTRODUCTION

Challenge

South Africa is home to 7.7 million people living with HIV, including 4.8 million on daily antiretroviral therapy. Noncommunicable diseases are also on the rise, placing a strain on limited resources and healthcare facilities.

Patients had to collect routine medication refills from primary care clinics, often traveling far distances and foregoing a day of work or school to pick up these essential medicines. In response, the National Department of Health (NDoH) launched the Central Chronic Medicines Dispensing and Distribution (CCMDD) program to improve access to chronic medicines through convenient pick-up points, including independent pharmacies, supermarkets, and retail outlets.

Beyond the benefits to people living with stable chronic disease, the program also decongests crowded public health facilities.



SHARED SOLUTION

In 2016, Project Last Mile was invited to partner with the NDoH to help the program reach national scale. Project Last Mile drew on route-to-market experience and longstanding engagement with private sector to:

1. Craft a value proposition and franchise model to attract retail chains to participate in the program.
2. Apply geospatial intelligence to strategically place pick-up points based on retail footprints and patient volumes.
3. Develop a business case for the NDoH to finance the program at national level.
4. Engage the private sector to catalyze innovative pick-up points in areas that lack brick and mortar solutions.

Partners

Project Last Mile in South Africa is supported by PEPFAR and the USAID South Africa mission. The CCMDD program is supported by multiple partners at the national, provincial and district level, including two service providers that are responsible for packaging and distributing medications for dispensation at point of care.

Results

From 2016 (when the Project Last Mile partnership began) to September 2021, the CCMDD program has enrolled over **4.7 million** patients. All 46 districts within the eight participating provinces are now active on CCMDD, with 95% of primary care facilities offering this critical service.

Over 2,000 external pick-up points have been contracted →

A 10-fold increase in pick-up points since the partnership began – with strong relationships with national brands including MediRite, Spar, DisChem and Clicks, which dispense medications.

Project Last Mile has also supported the scale-up of innovative pick-up point modalities, including container solutions and smart lockers where patients can collect their medications in busy taxi ranks or rural outposts.

Nearly 60% of patients collect medications from external pick-up points. →



This improves the patient experience and fully unburdens healthcare facilities to focus on those with acute needs.

Based on these successes, Project Last Mile is now also leveraging Coca-Cola's strategic marketing expertise to rebrand CCMDD and drive demand for HIV services among young men.



KEYS FOR SUCCESS

1 CONNECTING GLOBAL CAPACITIES TO MEET LOCAL PRIORITIES

In 2015, the UN renewed the 90-90-90 targets for HIV testing and treatment, compelling global actors to think differently about how to reach patients to meet these ambitious goals.

These targets became an essential component of national strategies to address HIV and sparked public sector commitment for universal testing and treatment. To meet this rapidly rising demand, the USAID South Africa mission engaged Project Last Mile to help the NDoH address the challenges they were facing in scaling up this innovative CCMDD program.

Project Last Mile became a bridge between private sector ways of working and public sector aspirations, spanning the divide between sectors to find feasible solutions.

“There’s always been a distrust between the public sector and the private sector. It was on that premise that I brought Project Last Mile on board. How could we create systems and business models that work whereby I can contract the private sector, but still achieve my public health imperatives?”

Public Sector Representative

2 GOOD GOVERNANCE FOR SHARED OWNERSHIP

In South Africa, Project Last Mile became embedded in the governance structures of the CCMDD program, participating in district, provincial and national level meetings with public and private sector stakeholders. The country program lead and local coordinators participated in regular meetings, and prepared presentations based on detailed data analysis. Project Last Mile maintained an office at the NDoH and was in close contact with CCMDD program staff to influence day-to-day operations and provide strategic support to partners.

By fully integrating into the local governance structure, rather than establishing a parallel governance mechanism, Project Last Mile became the touchstone for the CCMDD program, serving a vital coordinating function for the program and its vast partner landscape.



3 ENGAGING AND ADAPTING PRIVATE SECTOR CAPACITY FOR PUBLIC GOOD

Through the engagement of a country program lead with extensive experience within the Coca-Cola system, Project Last Mile amplified CCMDD operations with private-sector practices, and facilitated effective communication between the NDoH, district and provincial support partners, service providers, and retailers.

The country program lead was often credited as being able to span boundaries, bridging the divide between public and private sector ways of working, to articulate the value proposition of CCMDD to private sector pick-up points and innovators.

“ Basically, he’s understood from the private sector’s perspective their business model and spent a lot of time getting his head around what our business model has been. What he’s managed to do is create a narrative or a discourse that had taken us from the private sector being fairly cautious about interacting with governments in the activity to a point where at the moment we’re having to slow down involvement of pick-up points.”

Public Sector Representative

The Project Last Mile team was credited with listening to diverse stakeholders with open communication and elevating perspectives from the frontlines to ensure their needs were met with the CCMDD program.

They developed a business case for CCMDD, which continues to be updated and disseminated to sustain buy-in and financial support to the CCMDD program among key stakeholders, as well as a presentation of

the CCMDD business case that is user-friendly and can be circulated to relevant parties identified by the NDoH as needed.

Retailers also generated analyses on secondary spend (additional purchases that patients made in retail stores when picking up their CCMDD medications) that were valuable in continuing their participation.

Project Last Mile also helped unlock opportunities to integrate innovations to address barriers to CCMDD uptake, particularly in hard-to-reach areas.

Examples of innovative solutions include supporting NDoH and a partner to integrate shipping container health facility solutions into CCMDD and optimize the placement thereof; and supporting an implementation partner in integrating smart lockers into CCMDD pick-up points.

Project Last Mile is also working with Pharmacy Direct to launch its Medicine in Motion initiative, with bicycle couriers who dispense medications to home-bound patients.





4 TRANSPARENT AND STRATEGIC USE OF DATA FOR DECISION-MAKING

Project Last Mile transformed the performance of CCMDD by relying on the strategic use of data to inform program targets, placement of pick-up points, and fiscal planning. The geomapping intelligence used to map health facilities and potential pick-up point locations enabled the NDoH to focus on areas of need, to ensure targets were met and pick-up points were prioritized, particularly in areas with high patient density and limited access to health services.

Over the course of the partnership, geomapping emerged as the bedrock for driving strategic expansion of CCMDD nationally, with Project Last Mile developing critical targets, potential pickup-points, and scale-up plans to districts based on geospatial analysis.

Project Last Mile was credited with standardization in data reporting requirements, as well as fostering a culture of data use within the NDoH to drive CCMDD performance.

“Project Last Mile definitely helped with getting the National Department of Health to a more mature level in terms of analyzing the data and then making decisions based on the data. That definitely has evolved over time. Initially, there was no standardization in the reporting. So, I think definitely from that perspective, they’ve assisted greatly.”

Private Sector Partner in CCMDD program



5 DEVELOPING A PROACTIVE, CLIENT-CENTERED CULTURE

Project Last Mile was focused on keeping the patient at the center during its negotiations with the private sector. This became the common ground that stakeholders could align around in persisting for the greater good, particularly during financial uncertainty and bureaucratic hiccups.

With the patient at the center, the private sector retailers were able to see an alignment between their corporate social responsibility goals and their bottom line. They expressed a commitment to sticking with the partnership through challenging times, including delays in government payments that might have threatened traditional contracts.

“Look, with a normal vendor we’ll close the cart, we’ll stop trading. But that’s not the spirit of this arrangement. The spirit is to get medicines to underserved communities and so we’ll carry on while they sort out the hiccups.”

Private Sector Partner in CCMDD program

The Project Last Mile partnership in South Africa has significantly evolved since 2016, and the success of the CCMDD program and Project Last Mile have been viewed as inextricably linked.

Now, furthering their commitment to put the patient at the center, Project Last Mile and the NDoH have launched a strategic marketing effort to reach men living with HIV between 20-34 years of age who are often left behind in the HIV care cascade (the *MINA. For Men. For Health.* campaign), and to rebrand the CCMDD program as a national resource for all people living with stable chronic disease, not just those living with HIV (the *Dablapmeds* campaign).



CONCLUSION

Reaching the Sustainable Development Goals in 2030 will require partners from all sectors to accelerate achievement through collaboration.

Project Last Mile, an innovative model of private sector engagement for global health, leverages the unparalleled reach of the Coca-Cola business system, including the Company, its Foundation, and a global network of bottlers, agencies, and suppliers, to improve the availability of medicines, vaccines, and other health products; improve the uptake of health services; and inspire broader private sector involvement to solve many of the world's public health challenges.

Based on the successes of Project Last Mile in 12 African countries, this compendium sought to answer the question,

“What does it take to build and scale a partnership that translates private sector strengths into the public health system for global good?”



BASED ON OVER FIVE YEARS OF SYSTEMATIC EVALUATION OF THE PARTNERSHIP, THE FOLLOWING PRINCIPLES HAVE EMERGED:

At the global level, Project Last Mile is supported by an operating model that is characterized by:

1. A coalition of champions from each global partner
2. A flexible global management hub
3. A strategic mix of core and country-specific funding
4. Pursuit of mutual benefit to partners

The case descriptions presented in this compendium draw from Project Last Mile experiences in diverse countries – Tanzania, Kingdom of Eswatini, Mozambique, Nigeria, and South Africa – to provide robust examples of five keys to success at the country level:

1. Connect global capacities to meet local priorities
2. Establish good governance for shared ownership
3. Adapt private sector capacity for public good
4. Ensure transparent and strategic use of data for decision-making
5. Commit to a proactive, client-centered culture

We believe that these keys to success can be replicated and adapted by development partners, government agencies and business leaders to drive continued innovation in private sector engagement for global health.

We hope you will join us.



ACKNOWLEDGMENTS

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