

Project Last Mile

The Coca-Cola Company



The challenge

Across Africa, governments and donors are investing billions of dollars to strengthen health systems and make affordable medicines available. However, government supply chains often struggle to get medicines and supplies to the health facilities and people who need them most. In other situations, health ministries may provide good health services but are not able to attract patients who use these services.

Health supply chain challenges in low- and middle-income countries include poor information systems, shortage of trained personnel, lack of appropriate equipment to store medicines, and poor roads and infrastructure leading to inadequate transport between central warehouses and local distribution points. There is also low engagement with private sector entities to strengthen supply chains, learn from private sector best practices, increase collaboration and savings on distribution costs and develop innovative ways of working.

Project Last Mile

Project Last Mile was created in 2010 to leverage and share core private sector expertise to improve health systems across Africa in a sustainable way. To do this, Project Last Mile leverages logistical, supply chain and marketing expertise of the Coca-Cola system to improve the reach and uptake of lifesaving medicines, including HIV medicines, and health services in Africa.

Project Last Mile partners include the Global Fund, the Bill & Melinda Gates Foundation, United States Agency for International Development (USAID), The Coca-Cola Company and Coca-Cola Foundation, local implementing partners and health ministries.

Project Last Mile is currently working in ten countries.

Monitoring & evaluation

The Yale Global Health Leadership Initiative (GHLI) serves as Project Last Mile's monitoring and evaluation partner. GHLI measures the program's investment, progress toward deliverables and impact over time in all participating countries.

The Global Fund / Nicholas Peart



Celestine Haule (left) and Shedrack Bambaganya (right) of the Medical Stores Department in their central warehouse in Dar es Salaam, Tanzania, discussing how the support from the Global Fund and Project Last Mile has helped MSD modernize and better respond to its customers' needs. Bambaganya said that MSD was able to purchase more trucks, reducing maintenance costs, and accelerate the delivery of medicines, particularly in hard-to-reach areas, through route optimization.

Q&A with Adrian Ristow, Project Director, Project Last Mile

1 How did Project Last Mile's partnership with the Global Fund come about?

The Global Fund and the Bill & Melinda Gates Foundation approached The Coca-Cola Company in 2009 to seek out new and innovative ways for the private sector to provide experience and skills to address bottlenecks that affect the availability of medicines at remote health facilities, or "the last mile." At the time, the Global Fund was particularly interested in addressing some bottlenecks in the medicine supply chain that had been identified in Tanzania. Given that Coca-Cola is widely seen as one of the best distributors of products across Africa, the Global Fund saw the potential to learn from Coca-Cola's business models through a pilot in Tanzania. A commitment was made to develop this partnership, which became known as Project Last Mile in 2014. At that time, USAID joined the partnership and a commitment was made to scale and replicate Project Last Mile to 10 countries by 2020. The scope was also broadened to include other aspects of Coca-Cola's expertise, such as marketing.

2 How has Project Last Mile improved the delivery of medicines in Africa?

Project Last Mile brings a unique lens to the ongoing challenge of ensuring consistent availability of the right medicines. A major differentiator is that any solutions are derived from and benchmarked against proven models that have been refined over many years in the Coca-Cola system. Coca-Cola is able to bring and share global best practices, together with local insights, to ensure effective problem-solving and then assist in developing the best solutions possible. We also believe that Project Last Mile has modeled a new way of public-private partnering that is focused on tapping into the business capabilities of the private sector in a structured and facilitated manner. This builds capability within the public health sector to carry out its mandate more effectively. Other partnerships have now started to replicate the Project Last Mile model as a result.

3 What are some of the lessons learned?

From the start of the partnership, Project Last Mile engaged the Yale GHLI as a research and monitoring and evaluation partner to track learnings. One of the greatest lessons learned has been ensuring that Project Last Mile identifies the best people in each country that can leverage Coca-Cola's logistical and supply chain expertise to improve the delivery of medicines by the health ministry. A important second learning is allowing an innovative idea the time to develop into a workable partnership model. The two early pilots in Tanzania and Ghana were vital to developing the Project Last Mile working model. Effective and ongoing stakeholder engagement to build deep understanding and trust can also not be over-emphasized.

4 Do you have plans to expand Project Last Mile to other countries?

Our mandate is to build deep and sustainable solutions. A key principle of our model is to be demand-driven and we rely heavily on our development partners to identify countries with both a need and the desire and commitment to make changes. Therefore, while we continue to explore new country opportunities, in the future we are not going to put a specific number as a target because we are also highly committed to deepening and strengthening the engagement and support in our current countries. This allows us to continue to develop models for other private sector partners to become involved.

We are extremely excited and committed to continue to expand the impact of Project Last Mile together with the Global Fund and our other partners.

The impact

Project Last Mile is designed to bring focused private sector expertise to complement the work of larger public health initiatives. It transfers the skills and knowledge from the Coca-Cola network to the health ministry partners and customizes solutions. The inputs create changes in systems that can have sustained impact, ensuring that people can access crucial medicines when needed. Some examples are given below:

Tanzania

Project Last Mile was piloted with the Medical Stores Department (MSD) of Tanzania in 2010 and has helped transform the delivery of medicines from 130 regional hubs to over 5,700 health facilities, including those in hard-to-reach areas. The Coca-Cola bottler shared best practices with MSD staff on route optimization to increase the efficiency of deliveries and save fuel. Skills-building workshops were also organized with 11 MSD to strengthen supply chain management. In 2018, Project Last Mile helped strengthen medicine distribution in four of Tanzania's 31 regions through in-depth data collection and route optimization analytics.

Mozambique

In Mozambique, Project Last Mile supported the Central de Medicamentos e Artigos Médicos / Central storage of medicines and medical supplies (CMAM) and local partners to design and pilot supply chain solutions. Project Last Mile has applied best practices in route-to-market and logistics based on what Coca-Cola would use to map distribution for a Coca-Cola product.

Project Last Mile's activities have contributed to savings in distribution

costs of medicines and improved routing for vehicles according to seasonal needs. In-depth GPS data was collected to determine the optimal location for intermediary warehouses and ideal routes for vehicles and deliveries. As of June 2019, route verification has been completed in nine provinces and is in progress in a further two provinces. Project Last Mile's support to CMAM has helped reshape the delivery of medicines across the country.

South Africa

Project Last Mile has supported South Africa's health department in delivering medicines to almost 2 million people living with HIV across the country.

Since 2016, Project Last Mile has supported the Department of Health's Central Chronic Medicine Dispensing and Distribution (CCMDD) program to improve access to antiretrovirals for people living with HIV. CCMDD enables patients to pick up medicines in convenient locations in the communities, which include private pharmacies, grocery stores, and retail outlets. The number of pick-up points across the country has dramatically increased since 2016, from 180 to 1,020 in January 2019.

Byekwaso B. Tabura

Acting Director of Logistics,
Medical Stores Department

"Project Last Mile has been a big transformation for MSD. Initially we were delivering medicines at a rate of four times per year, but now we are moving to six times per year thanks to Project Last Mile, which has helped us optimize our distribution schedules."

Sako Mwakalobo

Director of Finance and Planning,
Medical Stores Department

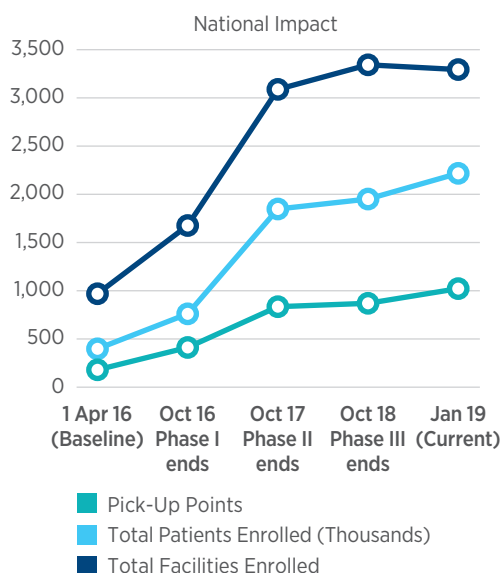
"With the support of the Global Fund and Coca-Cola, we have seen that even the public sector, given the opportunity, can deliver the expected results to all stakeholders."

José Neves

Country Lead, Project Last Mile,
Mozambique

"By analyzing the routes used for distribution of medicines in seven of the 11 provinces in Mozambique with geospatial software, we have developed a new, more efficient and cost-effective model that CMAM can use to improve the delivery of medicines to the last mile. This includes supporting the implementation of the intermediary warehouse model with optimized routing and vehicles for deliveries. Project Last Mile is committed to building CMAM's capacity in a sustainable way through skill-building initiatives and equipping them with the necessary tools and software to strengthen their supply chain management."

Expansion of CCMDD over time



Overall, Project Last Mile's support has catalyzed stronger collaboration and communication across public and private sectors, contributed to increased savings on distribution costs, and more timely and efficient deliveries of medicines. It has also developed innovative ways of working, including strategic use of data, and creative problem-solving to better serve patient needs and expand access to lifesaving medicines.

Girl Champ in Eswatini

Tapping into The Coca-Cola Company's network of creative marketing and consumer insight capacities, Project Last Mile began working in 2017 with the Global Fund and Eswatini's Health Promotion Unit to develop the strategic marketing concept known as Girl Champ. It is an innovative concept rooted in human-centered design research to better understand why HIV is an epidemic among young girls in Eswatini.

Girl Champ enables adolescent and young girls to become informed and empowered to consider their future and protect their health. It sets up safe spaces for youth-centered dialogue on pressing health issues in a girls-only health club. The events are designed as a fun boxercise and fitness program.

Through the metaphor of boxing smart, Girl Champ coaches speak to girls about sexual health. The Ministry of Health in Eswatini has partnered with Girl Champ to build the capacity of targeted interventions for girls. More than 2,000 girls have registered for health services through Girl Champ events.



Girl Champ Coach Sister Gumede addresses a crowd of adolescent girls at a Girl Champ event at Zombodze Lamvelase Clinic in Eswatini in December 2018.

Lessons learned

Project Last Mile's 10-year journey has generated several lessons on creating effective public-private partnerships. These include:

- 1 Commit human resources to drive the initiative and facilitate the knowledge transfer process between the Coca-Cola system, the health ministry and local bottlers to ensure a successful introduction and scale-up of the project.**
- 2 Focus on engagement and alignment to create a "fit" with government partners and existing initiatives, and promote buy-in.**
- 3 Achieve mutual trust through transparent communications, data sharing, and delivering concrete results.**
- 4 Engage credible and dynamic team leaders to foster camaraderie and teamwork.**

STEP UP THE FIGHT

Ending the epidemics of HIV, TB and malaria by 2030 is within reach, but not yet firmly in our grasp. After years of remarkable progress, new threats such as stalled funding and growing drug resistance have pushed us off track. We now face a decisive moment. Do we step up the fight, or do we allow ourselves to slip back? The Global Fund's fundraising target for the next three-year cycle is at least US\$14 billion. The Global Fund is calling on the private sector to mobilize at least US\$1 billion. These funds will help save 16 million lives and cut the mortality rate from HIV, TB and malaria in half by 2023, while building stronger systems for health that will enable the achievement of universal health coverage. It is time to step up the fight.

About the Global Fund

The Global Fund 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.