U.S. GOVERNMENT GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management



FISCAL YEAR 2026

QUARTER 3 REPORT

April 1 – June 30, 2026

GHSD

U.S. DEPARTMENT *of* STATE

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Contract No. AID-OAA-I-15-00004

The U.S. Government Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project is funded under Contract No. AID-OAA-I-15-00004. GHSC-PSM connects technical solutions and proven commercial processes to promote efficient and cost-effective health supply chains worldwide. Our goal is to ensure uninterrupted supplies of health commodities to save lives and create a healthier future for all. The project purchases and delivers health commodities, offers comprehensive systems support to strengthen national supply chain systems and provides global supply chain leadership.

Chemonics International implements GHSC-PSM in collaboration with Akesis, Arbola Inc., Connexi, IDA Foundation, IBM, IntraHealth International, Kuehne + Nagel Inc., McKinsey & Company, Panagora Group, Population Services International, SGS Nederland B.V., and University Research Co., LLC. To learn more, visit ghsupplychain.org.

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ANNEX 31

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ACRONYMS

AL	artemether-lumefantrine
ARV	antiretroviral
CMS	Central Medical Stores
DRC	Democratic Republic of the Congo
EDI	electronic data interchange
EID	early infant diagnosis
eLMIS	electronic logistics management information system
FASP	forecasting and supply planning
FAST	freight invoice review system
FY	fiscal year
GHSC-PSM	U.S. Government Global Health Supply Chain Program-Procurement and Supply Management project
GHSD	Bureau of Global Health Security and Diplomacy
GS1	global supply chain standards
IDIQ	indefinite delivery, indefinite quantity
LLIN	long-lasting insecticide-treated net
LMD	last mile delivery
LMIS	logistics management information system
MCHN	maternal and child health and nutrition
MFT	multiple first-line therapy
MOH	ministry of health
MOU	memorandum of understanding
mRDT	malaria rapid diagnostic test
NMEP	national malaria elimination program
OTD	on time delivery
OTIF	on time, in full
pALD	pediatric abacavir/lamivudine/dolutegravir
QA	quality assurance
QAT	Quantification Analytics Tool
QTI	Qualifying, Testing, Issuing project
QC	quality control
RDC	regional distribution center
SDP	service delivery points
SMC	seasonal malaria chemoprevention
SPAQ	sulfadoxine-pyrimethamine + amodiaquine
SWO	stop work order
TLD	tenofovir/lamivudine/dolutegravir
TO1	HIV/AIDS task order
TO2	malaria task order
VL	viral load
VMS	vendor-managed solutions
USG	U.S. government
3PLs	third-party logistics providers

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EXECUTIVE SUMMARY

The U.S. Government Global Health Supply Chain Program-Procurement and Supply Management (GHSC-PSM) project, funded by the U.S. government (USG), presents this report summarizing work and performance for quarter 3 (Q3) of Fiscal Year 2026 (FY 2026). For ten years, GHSC-PSM has served as America's global health supply chain platform, procuring and delivering lifesaving medicines and health commodities at scale to support the USG's efforts to end AIDS and malaria, ensure safe childbirth, and help children survive and thrive.

In Q3, GHSC-PSM operated in a period of operational and programmatic change. While the project received a contract extension for task order (TO) 1 to November 28, 2027, and anticipates an extension for TO2 to the same date, the project simultaneously operated within an evolving funding and implementation environment characterized by financial constraints, delayed access to anticipated funds, and accelerated transition directives. At the same time, the U.S.-Iran conflict severely disrupted a major shipping route, threatened cargo in-transit, and trapped inventory in the Dubai regional distribution center (RDC). These conditions required the project to rapidly adapt procurement, logistics, and country support activities while continuing to safeguard commodity security and protect U.S. investments.

In early Q3, GHSC-PSM was directed by the Bureau of Global Health Security and Diplomacy (GHSD) to pause new orders and accelerate the transition of procurement activities by determining which commodities could be delivered by September 30, 2026, with limited exceptions. Simultaneously, GHSC-PSM was directed to plan to end technical implementation of in-country support for the majority of its country offices by September 30, 2026. Having previously planned for deliveries through August 2027, GHSC-PSM quickly adapted to this accelerated procurement transition while maintaining commodity security and continuity of supplies across supported programs. The project worked closely with suppliers, global partners, and country stakeholders to expedite deliveries where feasible, assess transition pathways for outstanding procurement requirements, and manage the orderly cancellation of orders that could not be fulfilled within the required timeframes. Throughout this process, GHSC-PSM focused on minimizing stockout risks, protecting U.S. investments, and supporting uninterrupted access to essential health commodities, while helping position countries and follow-on supply chain mechanisms for a successful transition.

The project also continued implementing its Clear Path to Delivery (CP2D) risk management approach to identify and resolve barriers affecting the receipt and delivery of commodities to recipient countries. Working in close partnership with GHSD and U.S. embassies, GHSC-PSM addressed critical risks related to customs clearance, warehousing, and commodity reception, maintaining a clear path to delivery in all countries by the end of the quarter. As transition planning activities intensified, the project enhanced this approach to focus on risks associated with commodity deliveries occurring after

project office closures, helping ensure continued readiness for commodity receipt and clearance during the transition period.

Amid significant global freight instability in the Middle East during this quarter, the project successfully mitigated supply chain risks and repositioned affected shipments from the region to maintain continuity of supply and uninterrupted access to lifesaving health commodities, reflecting the value of proactive planning, close stakeholder coordination, and disciplined supply chain management in a complex operating environment.

As GHSD continues to provide direction on transition and closeout activities, GHSC-PSM remains committed to executing a responsible transition that strives to preserve the substantial supply chain gains achieved over the life of the project. Through careful stewardship of resources and coordinated engagement with key stakeholders, the project continues to strengthen country readiness for post-closeout supply management, protect U.S. taxpayer investments, and support the continuity of critical health programs beyond project closeout.

GHSC-PSM Life of Project Fast Facts:

- Delivered $6.55 billion in drugs, diagnostics, and health commodities ($137 million in Q3 alone).
- Achieved more than $1.88 billion in commodity cost savings and $197.3 million in logistics cost savings.
- GHSC-PSM has delivered 39.7 million patient-years of antiretroviral (ARVs) drugs over the life of the project and over four million patient years of ARVs in the first half of FY 2026.[1]
- GHSC-PSM estimates that its procurement of lifesaving ARVs helped avert approximately 548,496 adult deaths and 19,994 child deaths, while preventing 1,006,191 adult HIV infections and 40,207 child HIV infections.
- Delivered over 698 million antimalarials to treat malaria infections.
- Delivered over 393 million long-lasting insecticide-treated nets (LLINs), potentially protecting over 786 million people from malaria.
- Achieved on-time delivery[2] of over 80 percent for 31 consecutive reported quarters.

PROJECT PERFORMANCE

In Q3, GHSC-PSM delivered more than $137 million in drugs, diagnostics, and health commodities.

[1] Number of ARVs and patient-years delivered are calculated on a semi-annual basis in Q2 and Q4.
[2] The project's delivery window is –14/+7 days. With this window, deliveries are considered on time if they are made within the period 14 days before or seven days after the agreed-to delivery date.

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Over the life of the project, GHSC-PSM has achieved more than $1.88 billion in commodity cost savings3 (see Exhibit 1) through careful negotiation of long-term contracts for major product groups, such as viral load (VL) and early infant diagnosis (EID) testing.

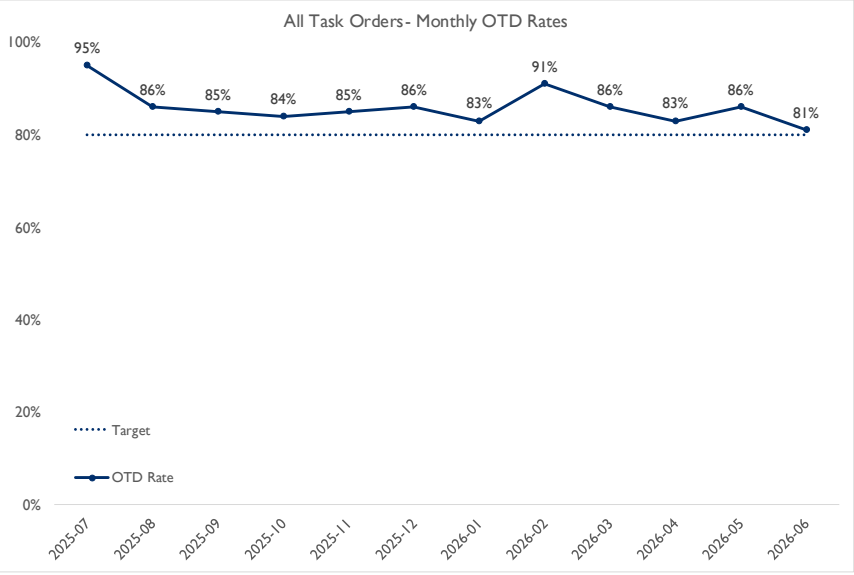
PROGRESS BY INDICATORS

In agreement with the USG, GHSC-PSM tracks a set of indicators that best reflect project global supply chain operations and in-country supply planning and management, including adherence to supply planning and understanding and reporting stockout rates, expiries, and product loss. These indicators are reported in detail in Annex B.[4]

Global Supply Chain Performance

In Q3, the project strived to ensure the timely delivery of lifesaving commodities, maintaining on time delivery (OTD) above the contractual target of 80 percent for the 31st consecutive reported quarter (see Exhibit 2). The project also maintained on time, in full (OTIF) delivery, a lagging indicator, above the contractual target of 80 percent (see Exhibit 3). This was achieved despite a number of underlying challenges, such as continued uncertainty in the funding environment and ongoing geopolitical conflicts, which will continue to impact global supply chains through FY 2026.

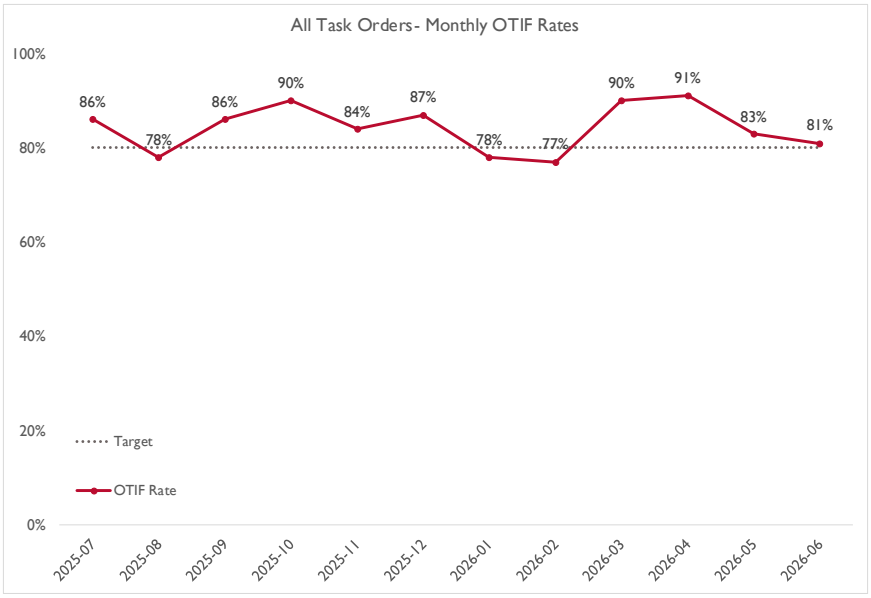
Exhibit 2. Monthly Indefinite Delivery, Indefinite Quantity (IDIQ) OTD[5] Rates



[3] Cost savings are typically calculated and reported in the Q2 and Q4 IDIQ reports.
[4] All indicators are presented in detail in Annex B: Performance on Project Indicators. Indicators B6, C7a, and C7b are dissected in detail in both the Country pages and the Global Supply Chain pages of Annex B while indicators B1, B2, and B3 are discussed in the Country Annex pages, and the aggregates are presented in the Key Performance Overview by Task Order Pages.
[5] GHSC-PSM routinely conducts root-cause analyses of late deliveries to refine procurement and supply chain processes and continuously improve performance.

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Exhibit 3. Monthly IDIQ OTIF Rates



Country Supply Chain Performance

At the country level, GHSC-PSM monitors stockout rates and stock availability according to plan at service delivery points (SDPs), including all commodities—those procured and delivered by GHSC-PSM and others (donors, host country governments, etc.). This data supports countries in updating their supply plans and informs emergency orders or the transfer of commodities between SDPs. To learn more about how GHSC-PSM worked with countries in Q3 to support supply chain continuity during this period, refer to Annex A: Country Stories. This annex also highlights efforts to mitigate stockouts through data-driven decision making and smart logistics coordination to ensure the availability of lifesaving commodities at SDPs. GHSC-PSM also monitors product loss due to damage, theft, or expiry. For more information and detailed results, see Annex B: Performance on Project Indicators.

PROGRESS BY OBJECTIVES

OBJECTIVE 1: IMPROVED AVAILABILITY OF HEALTH COMMODITIES (GLOBAL PROCUREMENT AND LOGISTICS)

Order Transition Management and Risk Mitigation

In Q3, GHSD mandated an accelerated wind down of global procurement and logistics activities. On March 25, GHSD directed GHSC-PSM to pause all new purchase orders (POs). On April 28, GHSD partially lifted the pause for POs that could be delivered by September 30, 2026, and directed GHSC-PSM to expedite orders to meet this revised delivery date. There were three exceptions: VL/EID commodities, for which the final delivery date was extended to December 31, 2026; vector control

commodities, for which the final delivery date was extended to March 31, 2027; and malaria commodities for the Gambia, for which the final delivery date was extended to December 31, 2026. GHSD further advised that orders unable to meet these revised delivery dates would need to be cancelled by GHSC-PSM and transitioned to a third-party procurement agent. GHSD also informed the project that the majority of country offices would stop all technical implementation by September 30, 2026, with some exceptions for a handful of countries continuing technical implementation to December 31, 2026, January 31, 2027, and March 31, 2027. These directives accelerated the transition and closeout of procurement deliveries and technical systems support through GHSC-PSM country offices. The country offices and the GHSC-PSM HQ team worked diligently to meet as much of the countries' planned supply as possible within the delivery deadlines, to minimize stockout risks while ensuring that ministries of health and U.S. embassy contacts are aware of identified risks related to the accelerated transitions.

Throughout May, GHSC-PSM accelerated procurement and logistics activities to meet the revised delivery dates while conducting detailed scenario analyses to identify orders unlikely to arrive within the required timeframes. The project evaluated manufacturing lead times, shipping schedules, and countries' ability to receive, store, and consume commodities within product shelf-life requirements. This work was undertaken in close coordination with GHSD and country stakeholders to support continuity of supply and responsible stewardship of U.S. taxpayer resources.

In early June, following an intensive period of expediting and analysis, GHSC-PSM met with GHSD to review the status of the remaining open order portfolio. Despite the intense efforts to expedite orders, more than 800 order lines valued at over $250 million remained unable to meet the revised delivery dates and were identified as candidates for cancellation or transition to third-party procurement agents. At the direction of GHSD, the team prioritized the review of HIV and malaria products to be procured through the Global Fund, and, with GHSD, jointly reviewed each order line against three criteria: (1) eligibility for transition and availability of Global Fund financing, (2) potential country-level stockout impacts, and (3) potential supplier financial exposure resulting from cancellation, including settlement claims. This analysis ensured that procurement decisions balanced commodity security, transition feasibility, and financial risk. The results of the review were shared with GHSD, which subsequently directed GHSC-PSM to cancel the 13 percent of order lines that passed all three criteria and could be cancelled without significant programmatic or financial risk.

In late Q3, GHSC-PSM stood up an order cancellation task force in response to GHSD's request for the project to prepare to cancel all remaining orders that could not meet the revised delivery dates, with the exception of vector control commodities (e.g., LLINs, spatial emanators, and topical repellents), maternal and child health and nutrition (MCHN) and VL/EID POs, pending further direction. These orders, totaling 574 order lines valued at $180,791,085, are expected to be cancelled in Q4 as part of the project's accelerated transition and closeout activities.

Throughout this process, GHSC-PSM worked closely with GHSD, suppliers and country stakeholders to attempt to minimize disruption to health programs, protect commodity availability, and support an

orderly transition of outstanding procurement requirements, while ensuring countries, embassies and GHSD were aware of potential stockouts and other risks.

Maintaining a Clear Path to Delivery

While the accelerated closeout process focused on determining which orders could be fulfilled within revised delivery timelines, GHSC-PSM continued to manage country-level risks affecting the receipt, clearance, and handover of commodities already in the pipeline.

Throughout FY 2026, the project conducted monthly Clear Path to Delivery risk assessments to identify and address country-level risks affecting the delivery of HIV/AIDS, malaria and MCHN commodities. The assessments focused on critical delivery requirements, including shipment consignees, import duty waivers, warehousing arrangements, and the transition of procurement responsibilities to U.S. embassies. Where risks were identified, the project applied targeted mitigation measures, adapting operational strategies and delivery pathways to maintain commodity flow and minimize disruption. Working closely with GHSD and U.S. embassies, GHSC-PSM resolved issues affecting commodity delivery and, by the end of Q3, all countries had a clear path to delivery.

Given the accelerated transition direction for procurement and country closeout, GHSC-PSM introduced CP2D 3.0, an enhanced risk management framework designed to assess delivery risks through the lens of project transition and country closeout. The updated approach expanded the analysis beyond traditional delivery risks to include factors affecting the importation, clearance, receipt, and storage of GHSC-PSM-procured commodities after project office closures. CP2D 3.0 provides GHSD and embassy teams with prioritized risks, mitigation actions, and decision points needed to support uninterrupted receipt of commodities during the transition period.

The first CP2D 3.0 assessment identified post-closeout waiver and customs clearance support as a key risk area for countries with shipments scheduled to arrive after in-country technical support end dates. In response, GHSD coordinated with U.S. embassies to identify points of contact and confirm waiver and clearance support arrangements in 100 percent of affected countries. Additional risk mitigation efforts are expected in Q4, including the identification of solutions for pay-to-receive warehousing requirements. GHSC-PSM will continue to provide biweekly analysis and reporting to support timely decision-making, facilitate commodity receipt, and maintain continuity of supply through project closeout and transition activities.

Strategic Sourcing and Market Shaping

GHSC-PSM has shaped global health markets by aggregating demand across more than 60 countries through pooled procurement and by creating predictable purchasing signals that drive supplier investment and healthy competition. This strategic sourcing model advances U.S. leadership in global health by promoting American economic benefit, leveraging private-sector innovation, and strengthening market efficiency. By coordinating large-scale, multi-country procurements, the project enhances value for money and contributes to more stable and resilient health supply markets globally.

Strategic Sourcing and Supplier Relationship Management: By Q3, GHSC-PSM had concluded all strategic sourcing activities, including annual commodity sourcing events and D-Term delivery arrangements. Throughout the life of the project, strategic sourcing and pooled procurement helped aggregate demand across countries, creating predictable purchasing signals that strengthened market stability and supply resilience. Complementing these efforts, vendor-managed solutions (VMS) programs enabled suppliers to pre-position inventory closer to demand, reducing lead times and mitigating stockout risks, while D-Term arrangements improved delivery efficiency through integrated transportation and downstream delivery solutions. As procurement activities wind down, the project's focus has shifted toward the transition of procurement and supply chain responsibilities in alignment with GHSD guidance regarding delivery timelines and available funding.

Throughout this period, GHSC-PSM maintained close engagement with its global supplier network, leveraging trusted relationships developed over nearly a decade of partnership to support transition objectives while safeguarding commodity security. Over the life of the project, suppliers evolved beyond traditional vendors to become strategic partners in addressing supply chain challenges and supporting continuity of supply across supported countries. During Q3, suppliers worked collaboratively with the project to assess open orders, advance production schedules where feasible, and accelerate deliveries to meet revised delivery requirements.

As well as mitigating, to the extent possible, transition-related stockouts, a key priority during Q3 was balancing continuity of supply with responsible stewardship of supplier relationships. In planning for the transition of procurement responsibilities to GHSD-designated third-party procurement agents, GHSC-PSM carefully evaluated actions to minimize country-level stockout risks while also limiting unnecessary financial impacts on suppliers resulting from order modifications, transfers, or cancellations. This approach reflected the project's longstanding commitment to partnership, transparency, and fair dealing across the global health marketplace.

The project also began the wind down of strategic sourcing mechanisms that have contributed to commodity security and supply chain resilience throughout its implementation. This included planning for the closure or transition of VMS and vendor-managed inventory arrangements, assessing inventory positions, and coordinating with suppliers and country stakeholders. The project also initiated planning for the closure of RDC operations, working closely with suppliers and logistics partners to manage inventory, fulfill remaining requirements, and support continuity of supply during the transition period. Notably, during this quarter the project cleared out all commodities stored in the RDC in Dubai and all shipments in transit in the Middle East, safeguarding $1.15 million of inventory stored and $6.25 million of ocean shipments moving through the region at the outbreak of the U.S.-Iran conflict. Additionally, the remaining quantities of SPAQ high dose stored in the RDC in Belgium were shipped and delivered in Q3 to Niger in support of its upcoming 2026 seasonal malaria chemoprevention (SMC) campaign.

Supplier Network Survey: At the request of GHSD, GHSC-PSM conducted an extensive survey on the in-country operational presence of key artemisinin-based combination therapy (ACT) and ARV suppliers across more than 40 PEPFAR- and PMI-supported countries. The survey gathered information on suppliers' local presence, including registered legal entities and local partners, regulatory status as well as warehousing, distribution, and delivery capabilities. Results, including high-level observations and detailed country-specific supplier footprints, were shared with GHSD in Q3. To support ongoing analysis and decision-making, the project also developed a Power BI-enabled dashboard that visualizes supplier presence and capabilities at the country level.

The survey provides valuable insights into the existing supplier landscape and may help inform future USG supply chain planning. Specifically, it highlights opportunities to leverage in-country supplier capabilities, support more decentralized procurement approaches led by national governments and local organizations, and strengthen direct engagement between manufacturers and the markets they serve. By providing greater visibility into supplier networks, the initiative contributes to a broader understanding of how global health supply chains can evolve to support long-term sustainability and country ownership.

HIV/AIDS

In Q3, GHSC-PSM placed its final orders for ARVs and essential medicines and began canceling those orders that cannot be delivered by the September 30, 2026, deadline. This drew to a close the reshaping of these markets through strategic sourcing, increased private-sector engagement and partnerships with suppliers to strengthen in-country supply chain performance. Through these efforts, GHSC-PSM has supported competitive tenofovir/lamivudine/dolutegravir (TLD) pricing, including a five percent year-over-year reduction that brings the annual cost of patient treatment to $34, and expanded private-sector participation in the delivery of lifesaving HIV commodities.

Antiretrovirals: In Q3, under the Southern Africa VMS program, private sector partners delivered 568,800 bottles of TLD to Angola and Mozambique. Through this program, three VMS suppliers are responsible for delivering ARVs that they preposition in quality-assured bonded warehouses in South Africa. Having stock pre-positioned on the continent enabled GHSC-PSM to quickly fill orders from countries in the region and better mitigate stock risks.

In Mozambique, VMS partners completed four deliveries of TLD to the three central warehouses (308,016 bottles) and three deliveries of TLD to three different downstream intermediary warehouses[6] (161,688 bottles). Direct delivery to intermediary warehouses represents a logistical cost saving to the country, while alleviating space constraints at the central level.

These ARV procurement strategies expanded private-sector participation in the delivery process and strengthened collaboration among suppliers, country stakeholders, and GHSC-PSM to address in-

[6] Chimoio, Maputo, and Xai-Xai.

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country supply chain challenges. By extending supplier engagement further downstream, the project continued to support more responsive and resilient supply chains.

Since 2024, GHSC-PSM has worked with 18 countries to transition to the optimal pediatric HIV treatment regimen of pediatric abacavir/lamivudine/dolutegravir (pALD) 5/60/30 mg. In Q3, the project completed an additional ten deliveries of 277,640 bottles of pALD to eight countries.[7]

In Q3, GHSC-PSM fully utilized the three pALD master orders established in Q1 by issuing purchase orders for Nigeria, Eswatini, and Mozambique. These orders totaled 199,016 bottles of pALD (180-count packs), including 161,712 bottles delivered to Mozambique during Q3.

Essential Medicines: GHSC-PSM also procured essential medicines for the treatment of cryptococcal meningitis, a severe opportunistic infection affecting people with advanced HIV disease. This work aligns with recent guidance recommending amphotericin B, including liposomal formulations, in combination with flucytosine, an approach increasingly adopted by low- and middle-income countries. A key Q3 tactical achievement was the qualification of an additional supply source for flucytosine, helping ease supply constraints for this priority Advanced HIV Disease commodity. The project also advanced contract negotiations with a second manufacturer to further diversify the supply base and improve procurement resilience. During the quarter, GHSC-PSM placed flucytosine orders for four countries.[8]

Viral Load/Early Infant Diagnosis: The project maintained the VL/EID all-inclusive service-level agreement (SLA) program which shifts the risk and responsibilities of long-term ownership and maintenance of expensive VL/EID testing instruments to the manufacturers while improving access to more reliable testing services. Under revised GHSD delivery timelines, VL/EID commodities were exempt from the September 30, 2026, final delivery date and are instead permitted to deliver through December 31, 2026.

In Q3, the project finalized pricing modifications that secured the prorated volume commitments to two manufacturers of HIV molecular reagents and consumables. Developed and proposed by GHSC-PSM, these pro-rated volume commitments secured the lowest available per test pricing despite GHSD only committing to half the regular annual volume. This provided stability to all countries and all procurement service agents who buy these products, given that GHSC-PSM negotiated prices are available to all global procurers.

In Q3, GHSC-PSM held quarterly business reviews with its three molecular SLA holders. Suppliers performed well against established key performance indicators and commodity security stabilized across the GHSC-PSM portfolio.

Tuberculosis Preventive Treatment: Tuberculosis (TB) remains a leading cause of morbidity among people living with HIV (PLHIV) and accounts for more than one-third of AIDS-related deaths. WHO

[7] Côte d'Ivoire, DRC, Eswatini, Haiti, Mozambique, Nigeria, Rwanda, and Togo.
[8] DRC, Kenya, Nigeria, and Tanzania.

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recommends tuberculosis preventive treatment (TPT) for PLHIV who are unlikely to have active TB as part of a comprehensive HIV care package, including pregnant women and individuals previously treated for TB, regardless of immunosuppression level and even when latent TB infection testing is unavailable. Completion of TPT for all eligible PLHIV, including eligible household contacts of PLHIV with TB disease, is also a PEPFAR Minimum Program Requirement.

Access to isoniazid and rifapentine (INH/RPT) combination tablet remains important to supporting TPT scale-up and delivery of the 3HP regimen, a shorter once-weekly course of isoniazid and rifapentine taken over three months. Availability of this product helps reduce treatment burden, improve completion of preventive therapy, and lower the risk of progression to active TB disease among eligible PLHIV and priority contacts. A key Q3 achievement was the addition of another qualified supply source for INH/RPT 150, which strengthened supply flexibility for the 3HP regimen.

Malaria

In Q3, GHSC-PSM placed its final orders for all malaria commodities, with the exception of LLINs, and began canceling those orders that could not be delivered by the September 30, 2026, deadline.

During Q3, the project was able to deliver urgent artemether-lumefantrine (AL) 6x1, 6x2, and 6x4 orders for five countries[9] from the two eligible suppliers contracted to fulfill orders through GHSC-PSM's vendor-stored inventory (VSI) strategy. The orders accounted for 73,604 packs of AL. Additionally, the remaining commodities procured for Burma, consisting of 22,000 malaria rapid diagnostic test (mRDT) kits and 3,600 blister packs of primaquine tablets, were delivered in Q3. GHSC-PSM held an in-person meeting with one mRDT supplier to exchange project and supplier updates. A key update from the supplier concerned changes to the kit components, which are now WHO-prequalified. Additionally, following the issuance of a notice of concern and the subsequent delisting of an mRDT supplier in Q2, GHSC-PSM provided countries that had received mRDTs prior to the supplier's delisting with certificates of conformance demonstrating that the mRDTs met established quality standards.

Maintaining quality assurance, quality control, and product reviews for malaria commodities

In Q3, the project successfully completed inspections, sampling, and laboratory testing for 43 health products across 132 POs in accordance with approved Quality Assurance (QA) Standard Operating Procedures (SOPs) and established lead times. These activities ensured that all procured products met USG and internationally recognized requirements for safety, efficacy, and quality prior to distribution to implementing countries.

The project also evaluated a new product category, spatial emanators, and successfully added this product to the procurement eligibility list.

[9] Ethiopia, Mozambique, Sierra Leone, Zambia, and Zimbabwe.

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The project continued to provide QA/quality control (QC) support to Rwanda Medical Supply Ltd. (RMS) by successfully conducting inspections and testing for three orders of antimalarial pharmaceutical products. Following successful evaluation, Certificates of Conformance were issued to RMS, confirming that the products met the project's QA/QC requirements and were suitable for release, distribution, and use.

The project also advanced several pharmaceutical product quality investigations during the quarter. Following review and assessment, the project recommended, and GHSD concurred with, the approval and/or release of the following products:

- Sulfadoxine/pyrimethamine (SP) 500/25 mg tablets following completion of the quality assessment and investigation.
- Sulfadoxine-pyrimethamine + amodiaquine (SPAQ) dispersible tablets used for SMC, following investigation of out-of-specification (OOS) assay results involving the amodiaquine active pharmaceutical ingredient. The project recommended release of batches that met all quality specifications and rejection of affected batches to prevent disruption of program implementation.
- Dual-active ingredient LLINs following investigation of an OOS result for elevated chlorfenapyr active ingredient content in one of six batches. Based on the investigation findings, the project recommended product release.

As part of its due diligence activities, the project also identified a packaging nonconformance during visual inspections of LLINs destined for Ethiopia. Specifically, approximately 1.8 million nets had been individually packaged in bags rather than packed in bulk as specified in the PO. This packaging configuration was not acceptable to the receiving country and the supplier has subsequently agreed to repack the nets in bulk and absorb the repackaging costs.

MCHN

In Q3, GHSC-PSM placed its final orders for MCHN products that could be delivered by the September 30, 2026, deadline and placed the remaining orders on hold. To help with the MCHN transition, GHSC-PSM hired three senior experts in maternal, newborn and compliance-related matters. The purpose of these consultancies is to bring in expertise to assist MCHN technical staff at GHSD, particularly due to increased MCHN procurement from GHSC-PSM and other partners. Consultant activities included: commodity reviews (for GHSC-PSM and other partners); MCHN compliance and policy analysis; engagement with donors and partners; clinical guidelines and/or technical considerations; development of materials to orient U.S. embassy staff on MCHN requirements and guidance; and other advisory and technical support.

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Nutrition Products

In Q3, leveraging long-term agreements established in Q1 with suppliers for nutrition products, GHSC-PSM processed nutrition requisition orders for four countries[10] and placed five POs for ready-to-use therapeutic food (RUTF) and therapeutic milks (100 calorie and 75 calorie formulations).

GHSC-PSM delivered 10,050 sachets of 100 g ready-to-use supplementary food (RUSF) paste to Ghana. In addition, GHSC-PSM's third-party logistics (3PL) partners picked up 2.5 million sachets of 92 g RUTF paste, 3,600 tins of Therapeutic Combined Mineral and Vitamin Powder for Reconstitution (800 g), 55,224 tins of Therapeutic Milk F-100 (100 kcal/100 ml, 400 g), and 13,824 tins of Therapeutic Milk F-75 (75 kcal/100 ml, 400 g) destined for Ghana, Malawi, and Mozambique. Delivery is expected in Q4.

Each nutrition order must pass pre-shipment QA analysis and testing before release for pickup. To minimize testing timelines and expedite shipments, the project coordinated closely with the Qualifying, Testing, Issuing (QTI) project, the QA sampling agent, nutrition suppliers, the testing laboratory and the project's 3PL partners. During the quarter, GHSC-PSM oversaw the sampling and delivery of 19 batches of nutrition products to QTI laboratories. Of these, 12 batches were cleared and released for shipment. Stakeholders continue to work collaboratively to resolve discrepancies between QA testing results and product specifications to facilitate the release and delivery of the remaining batches.

Maternal and Child Health Commodities (Essential Medicines)

In Q3, GHSC-PSM supported access to key maternal and child health (MCH) commodities, including multiple micronutrient supplementation (MMS) for pregnant and breastfeeding women, rehydration solutions for malnutrition, and heat-stable carbetocin (HSC). A key achievement in Q3 was the solicitation and award of HSC for Nigeria, with delivery expected in Q4. HSC is particularly important for low-resource settings because it supports the prevention of postpartum hemorrhage and remains stable without cold chain requirements, making it suitable for decentralized and hard-to-reach service delivery settings.

GHSC-PSM also advanced MMS sourcing through close collaboration with QTI, including engagement with a U.S.-based manufacturer to support direct procurement. In addition, the project initiated and completed sourcing events for priority MCH commodities for 10 countries,[11] many of which are currently out of stock or facing constrained availability.

Together, these activities had the potential to strengthen GHSC-PSM's ability to respond to country-level MCH needs by advancing awards, diversifying sourcing options, and supporting the availability of commodities critical to maternal and newborn health service delivery. However, due to the

[10] Ghana, Haiti, Mozambique, and Tajikistan.
[11] Burundi, Côte d'Ivoire, DRC, Ghana, Haiti, Mali, Nigeria, Senegal, Sierra Leone, and Uganda.

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accelerated last delivery date, the project has been directed to hold, and likely cancel, 80 percent of these orders.

Procurement and Delivery Highlights in Q3:

HIV/AIDS

GHSC-PSM has delivered more than $4.52 billion in HIV commodities over the life of the project.

- Delivered 240.4 million bottles of ARVs[12] while reducing HIV treatment costs to $34 per patient per year.
- Delivered 74.4 million adult VL tests and 3.3 million EID tests for a total of over 77.7 million VL/EID tests since the launch of the all-inclusive SLA program in 2020, generating savings of $375 million. Cumulative savings on all VL/EID orders for GHSC-PSM and other PEPFAR buyers since 2020 are more than $411 million with a total of 88.2 million VL/EID tests delivered.

In Q3, GHSC-PSM:

- Delivered more than $73 million in HIV commodities to 25 countries[13] and provided health supply chain operational support to 28 countries.[14]
- Delivered nearly 1.7 million TLD 90-count bottles to nine countries,[15] and 902,285 30-count bottles to El Salvador and Zambia.
- Continued to prioritize and deliver pediatric HIV treatment, including eight shipments totaling 242,640 180-count bottles of pALD tablets to six countries[16] and two shipments totaling 35,000 90-count bottles of pALD tablets to the Democratic Republic of the Congo (DRC) and Togo.
- Delivered 3.2 million adult VL tests and 42,144 EID tests for a total of over 3.2 million VL/EID tests, with cost savings of approximately $22.3 million.
- Delivered laboratory supplies to 20 countries.[17]
- Achieved 84 percent OTD and 87 percent OTIF for HIV/AIDS commodities.

[12] Number of ARVs delivered is calculated on a semi-annual basis in Q2 and Q4.
[13] Angola, Benin, Botswana, Burkina Faso, Burundi, Cameroon, Côte d'Ivoire, DRC, El Salvador, Eswatini, Ethiopia, Ghana, Guatemala, Haiti, Honduras, Kenya, Mali, Mozambique, Rwanda, Tanzania, Togo, Uganda, Ukraine, Zambia, and Zimbabwe.
[14] Angola, Benin, Botswana, Burkina Faso, Burma, Burundi, DRC, El Salvador, Eswatini, Ghana, Guatemala, Haiti, Honduras, Kenya, Lesotho, Liberia, Malawi, Mali, Mozambique, Namibia, Nigeria, Panama, Rwanda, Sierra Leone, Togo, Uganda, Zambia, and Zimbabwe.
[15] Côte d'Ivoire, Guatemala, Haiti, Kenya, Mozambique, Nigeria, Rwanda, Togo, and Ukraine.
[16] Côte d'Ivoire, Eswatini, Haiti, Mozambique, Nigeria, and Rwanda.
[17] Benin, Botswana, Burkina Faso, Burundi, Cameroon, Côte d'Ivoire, DRC, El Salvador, Eswatini, Ethiopia, Haiti, Honduras, Kenya, Mali, Mozambique, Nigeria, Tanzania, Uganda, Zambia, and Zimbabwe.

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Malaria

GHSC-PSM has delivered nearly $1.64 billion worth of malaria medicines and commodities to 33 countries[18] over the life of the project.

In Q3, GHSC-PSM:

- Delivered over $63 million in malaria commodities to 27 countries[19] and provided health supply chain strategic support to 22 countries.[20]
- Procured malaria commodities with a total value of nearly $11 million for 9 countries.[21]
- Delivered over 31 million mRDTs to eight countries.[22]
- Delivered over 14.2 million SP treatments to three countries.[23]
- Delivered nearly 24 million ACTs to 14 countries[24] (over 698 million over the life of the project).
- Delivered nearly 16 million LLINs to 13 countries[25] for distribution as a malaria prevention measure.
- Delivered the second round of orders of artesunate injectable single solvent to Benin and Zambia.
- Delivered 48,604 packs of AL-DT (artemether-lumefantrine dispersible tablets) to Ethiopia, Mozambique, Sierra Leone, and Zimbabwe, along with 25,000 packs of AL-HT (hard tablets) to Zambia from stock sourced from two vendor-stored inventory suppliers.
- Delivered SPAQ to Burkina Faso, Côte d'Ivoire, and Niger in advance of the upcoming 2026 SMC campaigns.
- Achieved 80 percent OTD and 80 percent OTIF for malaria commodities.

Procuring from U.S. Suppliers

As indicated in the Strategic Sourcing and Market Shaping section, GHSC-PSM has been leaning into the America First Global Health Strategy and proactively strives to procure lifesaving commodities

[18] Angola, Benin, Burkina Faso, Burma, Burundi, Cambodia, Cameroon, Côte d'Ivoire, DRC, Ethiopia, Gambia, Ghana, Guinea, Guyana, Kenya, Laos, Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, South Sudan, Tanzania, Thailand, Togo, Uganda, Zambia, and Zimbabwe.
[19] Angola, Benin, Burkina Faso, Burma, Cameroon, Côte d'Ivoire, DRC, Ethiopia, Gambia, Ghana, Guinea, Kenya, Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Nigeria, Rwanda, Sierra Leone, Tanzania, Thailand, Togo, Uganda, Zambia, and Zimbabwe.
[20] Angola, Benin, Burkina Faso, Burundi, Cambodia, DRC, Ghana, Guinea, Kenya, Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Nigeria, Rwanda, Sierra Leone, Togo, Uganda, Zambia, and Zimbabwe.
[21] Cambodia, Ethiopia, Gambia, Ghana, Kenya, Niger, Rwanda, Sierra Leone, and Uganda.
[22] Burma, Cameroon, DRC, Gambia, Madagascar, Mali, Nigeria, and Uganda.
[23] Cameroon, DRC, and Nigeria.
[24] Angola, Burkina Faso, DRC, Ethiopia, Liberia, Madagascar, Mozambique, Niger, Nigeria, Rwanda, Sierra Leone, Uganda, Zambia, and Zimbabwe.
[25] Angola, Benin, Côte d'Ivoire, DRC, Ethiopia, Ghana, Liberia, Madagascar, Mali, Nigeria, Sierra Leone, Tanzania, and Togo.

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from U.S. manufacturers where possible. This indicator will disaggregate procurement from U.S. manufacturers by:

- U.S.-headquartered companies with ongoing U.S.-based manufacturing
- U.S.-headquartered companies with international manufacturing
- International companies operating U.S.-based manufacturing

As of Q3, GHSC-PSM has procured roughly 38 percent (by value) (see Exhibit 4) of all commodities that are currently in scope through U.S.-connected manufacturing sites.

Exhibit 4. Life-of-Project Procurements through U.S.–Connected Manufacturing Sites

Procuring from U.S. Manufacturers						
Commodity Category	U.S. headquarters/ U.S. manufacturing site	U.S. headquarters/ International manufacturing site	International headquarters/ U.S. manufacturing site	International headquarters/ International manufacturing site	Total procurement value	Percent of total procurement value through U.S.-connected manufacturing sites
HIV - laboratory supplies	$554,126,872	$173,419,247	$439,126,681	$345,635,520	$1,512,308,319	77%
HIV - antiretroviral commodities	$182,100	$849,948,714	$823,974	$1,656,884,149	$2,507,838,937	34%
HIV - all other commodities	$7,813,569	$9,776,257	$135,929,269	$248,344,172	$401,863,267	38%
Malaria - rapid diagnostic tests	$15,411,249	$138,714,897	$0	$81,123,022	$235,249,167	66%
Malaria - all other commodities	$462,751	$427,909	$92,449	$1,511,417,087	$1,512,400,196	<1%
Total Procurement Value	$577,996,541	$1,172,287,024	$575,972,373	$3,843,403,949	$6,169,659,888	38%

Shipping via U.S.-based Third-party Logistics Providers

In line with the America First Global Health Strategy, GHSC-PSM strategically engages U.S.-based 3PL partners to manage international shipments. This approach supports American jobs, strengthens U.S. industry competitiveness, and reinforces accountability across the supply chain. As of Q3, U.S.-based 3PLs accounted for 87.39 percent of the project's total international logistics spend during this period. This alignment is reflected in shipment management during Q3, with U.S. 3PLs managing 86.9 percent of all 407 shipments booked in Q3, including 82.69 percent of air freight, 96.75 percent of ocean freight, and 100 percent of truck lanes delivering through first ports of entry in destination countries.

Furthermore, in Q3, the project continued to exceed U.S. Maritime Administration requirements, with 62 percent of shipments transported on U.S.-flag vessels—well above the 50 percent target. This underscores the project's commitment to supporting U.S. maritime industries while ensuring the timely and secure delivery of essential health commodities. Over the life of the project, GHSC-PSM has consistently maintained high engagement with U.S.-flag carriers, achieving 67 percent of total commodity weight, 66 percent by container count, 73 percent by overall spend, and 68 percent by number of shipments on U.S.-flag vessels.

Global Challenges in Freight and Logistics

Global logistics conditions remained highly volatile in Q3, shaped by continued instability across the Red Sea, Gulf of Aden, Strait of Hormuz, and broader Middle East trade corridors. Major carriers continued to adjust networks around security risks, war-risk insurance requirements, port congestion, equipment imbalances, and fuel volatility. Although freight systems remained operational, reliability,

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cost predictability, and routing flexibility remained constrained across ocean, air, and inland transport networks, increasing challenges to time-sensitive global health shipments. Of the 37 shipments that were impacted as a result of the crisis, 23 have been successfully delivered without incident and 14 shipments remain in transit to destination, having already left the Gulf Region.

Maritime Environment: Maritime security risks persisted across the Red Sea, Gulf of Aden, Persian Gulf, Gulf of Oman, and Strait of Hormuz during Q3. Continued carrier avoidance of the Red Sea/Suez corridor kept Cape of Good Hope routing embedded in many Asia-Europe and Asia-Africa services, extending transit times and absorbing effective vessel capacity. At the same time, uncertainty around Strait of Hormuz and Gulf operations increased exposure to war-risk premiums, carrier booking restrictions, and episodic service suspensions. Ocean freight rates remained sensitive to peak-season demand, port congestion, fuel costs, and security surcharges, while schedule reliability continued to be affected by longer rotations, blank sailings, and vessel bunching at key transshipment and African gateway ports.

Air Cargo: Air cargo markets remained tight in Q3 as Middle East airspace restrictions, longer routings, and reduced hub flexibility continued to affect Asia-Europe-Africa connectivity. Gulf carrier network adjustments and elevated fuel costs constrained available capacity on Africa- and Middle East-linked lanes, while ocean freight unreliability sustained demand for airfreight as a contingency mode for urgent commodities. These conditions kept spot rates elevated and required earlier booking, close coordination with forwarders, and careful prioritization of shipments based on commodity criticality, shelf life, temperature sensitivity, and country stockout risk.

Inland trucking: Fuel cost escalation became a direct pressure point for inland trucking in Q3, particularly in African markets where long-haul road transport is the primary link between ports and final delivery points. Higher diesel prices increase base trucking rates and trigger fuel surcharges, but the impact extends beyond the line-haul cost alone: delays at ports, borders, weighbridges, and consignee facilities also increase idling time, extend driver and equipment utilization, and raise demurrage, storage, and security-related costs. These pressures are especially acute for landlocked or corridor-dependent destinations where shipments must move long distances from coastal gateways through multiple checkpoints or border crossings before reaching the consignee.

Security risks are compounding these cost increases by reducing route flexibility and increasing the need for controlled movement planning. The most visible impacts are in parts of West Africa and the Sahel, where insecurity can affect road corridors serving Mali and Burkina Faso.

Africa Port Operations: African port operations remained under pressure in Q3 as Cape-diverted vessel flows, schedule bunching, weather events, equipment constraints, and inland transport limitations strained key gateways. Ports serving West, East, and Southern Africa experienced recurring congestion and variable berth productivity, with downstream impacts on container availability, demurrage exposure, and inland delivery planning. Congestion and inland transport constraints continued to create elevated risk for shipments into landlocked and complex operating environments,

including DRC, Mozambique, and Nigeria, where fuel volatility, road conditions, border processes, and limited surge capacity can compound port delays and increase last mile delivery challenges.

GHSC-PSM continued to operate within this high-risk logistics environment during Q3 by:

- Monitoring Red Sea, Gulf of Aden, Strait of Hormuz, and broader Middle East security developments and translating risk signals into routing and booking decisions.
- Actively monitoring U.S.-Iran conflict developments and associated maritime and airspace disruptions.
- Strengthening cost controls and budget monitoring to manage war-risk premiums, fuel volatility, emergency/security surcharges, storage, demurrage, and inland transport cost escalation.
- Working closely with U.S.-based 3PLs, freight forwarders, and carriers to preserve routing flexibility, secure capacity, and prioritize critical shipments.
- Applying multimodal strategies selectively to balance speed, cost, reliability, temperature-control needs, and country stockout risk.

These measures supported program continuity and risk mitigation despite sustained volatility across global transport networks during Q3.

Driving Supply Chain Excellence

Operational Excellence (OpEx): In Q3, GHSC-PSM continued strengthening operational efficiency and supply chain visibility. Key achievements included implementing the AI-enabled freight invoice review system (FAST) to streamline logistics payments and eliminate the need for a third-party invoice review service. Since its launch, FAST has already reduced payment processing by seven business days on average. In addition, OpEx supported GHSD in its joint line-by-line order reviews to produce definitive lists of orders staying with GHSC-PSM or transitioning to third-party procurement agents, based on more granular calculations of estimated delivery dates. The team also continued to update a global Order Management Dashboard that serves as a single source of truth for GHSC-PSM and U.S. Embassies on order status, and to provide a dedicated "Iran War Report" that tracks shipments affected by disruptions in the Strait of Hormuz.

Supply Chain Management Information: ARTMIS[26] continues to serve as the single source of truth for GHSC-PSM's supply chain information at the global level, enabling teams to segment orders, monitor and adjust order statuses, and manage holds and cancellations. In Q3, the project maintained and updated key system capabilities to support evolving operational needs.

[26] ARTMIS – developed by GHSC-PSM, the Automated Requisition Tracking Management Information System is a cloud-based procurement application used to manage and track shipments throughout the supply chain.

OBJECTIVE 2: STRENGTHENED IN-COUNTRY SUPPLY CHAIN SYSTEMS

GHSC-PSM works with partner countries to strengthen national supply chain systems, helping them achieve their health goals while advancing global health priorities. In Q3, GHSC-PSM implemented an accelerated transition of country-facing systems strengthening activities in parallel with the procurement and logistics transition and closeout activities described under Objective 1. Following direction from GHSD, the project supported the planned closeout of technical operations in 23 country offices by September 30, 2026, while continuing to prioritize commodity security, supply chain visibility, and continuity of essential health services.

GHSC-PSM intensified engagement with country teams to support transition planning and ensure alignment on implementation priorities during the phased closeout of technical operations. Over a three-week period in Q3, project HQ and country teams conducted 44 strategic planning calls to support each country's closeout and transition planning efforts. These collaborative sessions brought together representatives from GHSD, U.S. Embassy stakeholders, GHSC-PSM headquarters leadership, and country project office staff to ensure alignment on critical closeout actions, implementation gaps, transition priorities, and risks to supply chain continuity. These discussions provided a forum to identify and address operational challenges, clarify responsibilities, and support coordinated decision-making. GHSC-PSM also worked closely with U.S. embassies to communicate key supply chain priorities and considerations related to implementation plans, helping strengthen readiness for the transition period and support continuity of critical health programs.

While planning for transition during the quarter, GHSC-PSM country offices continued their ongoing activities in alignment with each country’s national strategies, providing tailored systems support that enhances local ownership, accountability, and supply chain performance—even in challenging operating environments shaped by factors such as extreme weather, infrastructure constraints, and insecurity. From forecasting and supply planning to procurement, warehousing, and last-mile delivery, the project works with ministries of health to make data-driven decisions that improve efficiency, reduce waste, and ensure lifesaving commodities reach those who need them most. These efforts contribute directly to the sustainability of national health programs and reflect the USG’s commitment to helping countries achieve self-sufficiency and long-term health security. Examples of these country-driven successes, from expanding HIV commodity visibility beyond the central warehouse in Burundi, to implementing data-driven distribution strategies for LLIN delivery in Liberia and strengthening pharmaceutical supply chain governance through capacity building in Benin, and more, are highlighted in Annex A: Country Stories.

Supply Chain Data Visibility and Commodity Security

GHSC-PSM works with country stakeholders to systematically assess stockout risks in the supply chain across all funding sources. During Q3, these analyses played a critical role in informing the

accelerated order transition and country closeout process. The project leveraged country-level supply planning, inventory, and stock status data to support line-by-line reviews of orders identified for expedition, transition to third-party procurement agents, or cancellation. GHSC-PSM continues to consolidate and analyze country-level data to support timely updates to supply plans, identify emerging risks, and engage with suppliers, ministry staff, U.S. embassies and other stakeholders to help ensure lifesaving commodities arrive when and where they are needed most.

Also, in Q3, at the request of GHSD, GHSC-PSM conducted an ad hoc focused analysis of potential stockout risks associated with transitioning orders from the project to the Global Fund. This analysis was distinct from the project's routine monthly HIV and malaria stockout risk reporting, as it was conducted at a macro level using Global Fund lead-time assumptions and country supply plan data, without the qualitative inputs and real-time updates normally provided by field offices and revised supply plans. Using the list of transitioning orders, country supply plans, and recalculated delivery dates based on published Global Fund lead times, the project reviewed 87 ARV product supply plans and identified 59 potential stockouts linked to the accelerated transition to third-party procurement agents. A review of 118 malaria product supply plans identified 33 additional potential stockouts. For each risk, GHSC-PSM recommended mitigation actions, including accelerating deliveries beyond standard Global Fund lead times where feasible, adding planned shipments to the USG–Global Fund portfolio, and ensuring deliveries occur within established lead times to avoid supply interruptions. This stockout risk analysis was also incorporated into the line-by-line order review that GHSC-PSM conducted with GHSD.

HIV/AIDS

GHSC-PSM improves data visibility and analysis of HIV commodity inventories at all levels of the supply chain. The project reviews national inventory data monthly, irrespective of funding source for that inventory, for more than 145 HIV medicines and commodities at the central, regional, and facility levels in 29 PEPFAR-supported countries to identify global stock imbalances. This routine monthly stockout risk reporting, namely Prostock and LabVis, is distinct from the ad hoc order transition analysis conducted during Q3.

This data assists GHSC-PSM in monitoring commodity stock risks and progress toward specific initiatives, such as the success of the TLD and multi-month dispensing transition, the transition to optimal TPT regimens, and the scale-up of VL/EID programs. The analyses help mitigate stock imbalances and avoid rationing and waste by raising awareness, identifying opportunities to shift GHSC-PSM shipments, and supporting redistribution within countries.

In Q3, GHSC-PSM’s routine monthly reviews identified 75 unique HIV commodity stockout risks across 25 countries. The most common causes of stockout risks were late order placement and delivery of Global Fund-funded orders, late order placement and delivery of host government-funded orders, expiries, and funding gaps. The products most reported as “at risk of stockout” were adult ARVs, HIV rapid test kits, VL/EID reagents, and TPT. Reported stockouts are typically resolved by deliveries

funded by the USG, Global Fund, or host governments. Most stockout risks were mitigated by coordinating with host country governments, donors, and suppliers, sharing bilateral data, expediting deliveries, resolving in-country stock imbalances through redistribution, and/or ensuring availability of alternative commodities.

As described under Order Transition Management and Risk Mitigation (under Objective 1), several ARV procurement requirements were transitioned to third-party procurement agents during Q3. While these actions are expected to support commodity continuity, the full impact on future stockout risks remains uncertain given the lead times associated with ARV procurement and delivery and the remaining buffer stocks that will be in place as of the end of September. In addition, with technical operations in most supported countries ending on September 30, 2026, GHSC-PSM's visibility into country-specific stockout risks and supply chain nuances will become increasingly limited, with future monitoring relying primarily on country-submitted supply plans through QAT. The project also noted increasing stockout risks for laboratory commodities, as several VL/EID requisition orders remained on hold due to funding constraints and delays in receiving obligation and reprogramming approvals. Resolution of these funding issues is anticipated in Q4 and will be critical to maintaining continuity of diagnostic services in affected countries.

Malaria

In Q3, GHSC-PSM conducted routine monthly reviews and reporting on 30 unique malaria commodity supply plans across 27 countries (all funding sources). Leveraging existing sourcing strategies and strong supplier relationships, the project continued to try to mitigate potential stockout risks and continued to engage with countries and suppliers to expedite delivery timelines in response to potential stockout risks and the requirement to ensure delivery of all orders within the specified project period of performance.

As of the end of Q3, the 12-month forecast horizon projection was maintained for stockout risk tracking. In Q3, GHSC-PSM modified the report to distinguish between GHSC-PSM shipments that had received approval and were expected to be delivered and those placed on hold following updated GHSD guidance related to the Period of Performance (POP) for GHSC-PSM procurements. Using this revised approach, the report indicated that up to five countries could face potential stockouts of AL 6x1-6x4, with approved GHSC-PSM shipments expected to mitigate shortages in only one country.

Projected stockouts were identified for mRDTs and artesunate 60 mg injections in four and seven countries, respectively, with no GHSC-PSM shipment interventions expected. SP was projected to run short in six countries, none of which have GHSC-PSM shipments scheduled. Similarly, for LLINs, none of the nine countries with projected stockouts are covered by approved GHSC-PSM shipments currently scheduled for delivery.

There is an increasing risk of stockouts in the coming months, with limited mitigation options available through GHSC-PSM, particularly given the pause on new orders and the accelerated last delivery

dates. This risk may be further exacerbated by a potential gap between the months of buffer stock that will be in place and the procurement lead times resulting from the anticipated transfer of paused USG orders to third-party procurement agents for execution and fulfillment. The project continues to work closely with GHSD to try to facilitate a smooth transition of the paused orders to third-party procurement agents while equipping host governments with information on potential stockouts so they can act accordingly.

GS1 Standards for Traceability

In Q3, GHSC-PSM continued implementation of GS1 XML electronic data interchange (EDI) and provided guidance to several countries regarding GS1 standards.

Country GS1 Support

The project reviewed and analyzed Mozambique's new non-GS1 labeling requirements and developed recommendations regarding implications for project suppliers that have already implemented GHSC-PSM's GS1 labeling requirements to assess whether they already meet the new labelling requirements. The project also supported Nigeria in identifying opportunities to enhance LLIN campaign management using GS1 standards. In addition, GHSC-PSM analyzed LLIN barcode readability issues, identified potential causes and mitigating actions, and strengthened barcode quality requirements. Updated requirements and related guidance on readability issues, root causes, and potential corrective actions were communicated to LLIN suppliers for implementation in Q4.

Supporting Data-driven, Evidence-based Decision Making

GHSC-PSM leverages data at every stage of the supply chain to inform strategic decisions, ensuring that USG resources are used efficiently and effectively. Through forecasting and supply planning, the project helps countries anticipate demand, prevent and mitigate stockouts, and reduce waste. By using data-driven insights to guide procurement and delivery, GHSC-PSM strengthens accountability, enhances performance, and maximizes impact for both U.S. taxpayers and partner governments.

Forecasting and Supply Planning

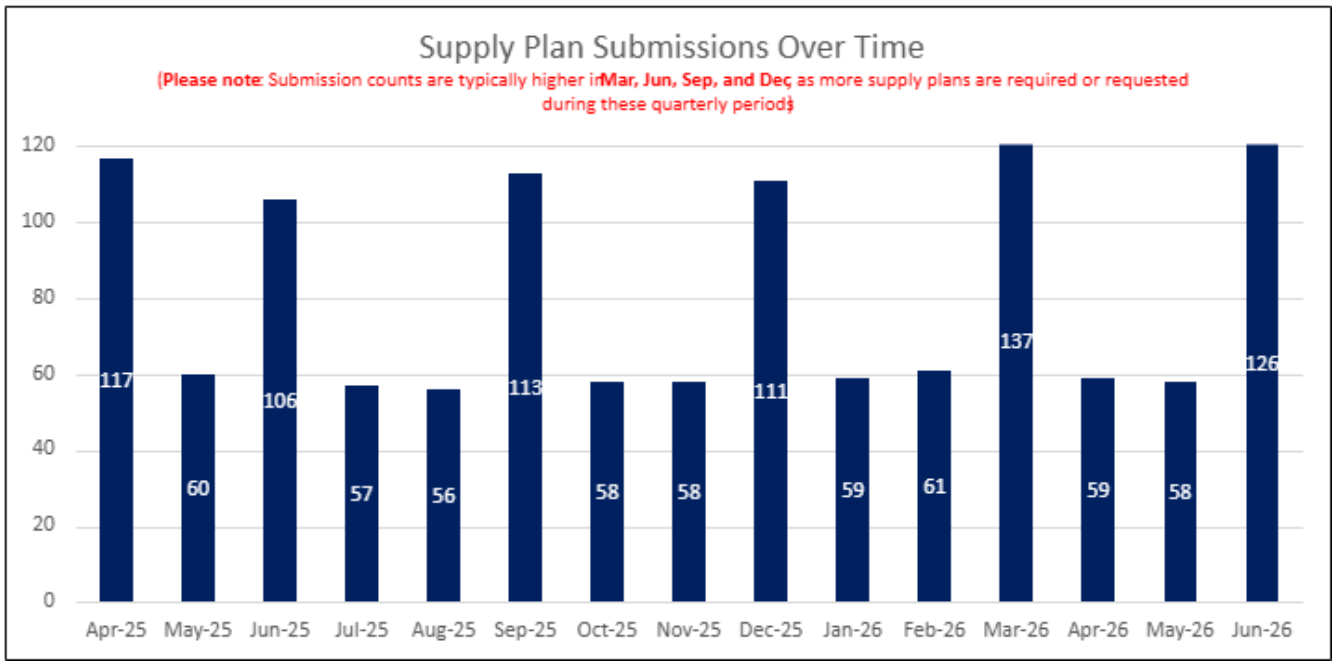
GHSC-PSM continues to support countries' use of the Quantification Analytics Tool (QAT), a country-led forecasting and supply planning (FASP) platform. In Q3, GHSC-PSM received 126 quarterly supply plan updates from 33 countries[27] through QAT (see Exhibit 5). The project conducted trainings on the QAT forecasting and/or supply planning module in Madagascar, The Gambia, Botswana, Kenya, and Niger, and supported the onboarding of QAT forecasts and/or supply plans for

[27] Angola, Benin, Botswana, Burkina Faso, Burundi, Cambodia, Cameroon, DRC, Eswatini, Ethiopia, The Gambia, Ghana, Guinea, Haiti, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, Togo, Uganda, Zambia, and Zimbabwe.

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Cameroon, The Gambia, Kenya, and Madagascar. To date, GHSC-PSM has trained 45 countries[28] on QAT, with 895 active users[29] worldwide.

Exhibit 5: Country Supply Plan Submissions Using QAT



In Q3, GHSC-PSM conducted the quarterly supply plan review for June 2026 supply plans, checking for adherence to the project's final order dates. In addition to the quarterly supply plan submissions, the project continues to support a subset of countries with USG-funded commodities and systems support to upload monthly supply plans via QAT (Exhibit 5). This more frequent reporting for high-priority programs improves visibility into supply chain dynamics, enabling the project to anticipate and mitigate disruptions and monitor stockout risks.

Following the launch of several QAT enhancements in Q2, the project focused on promoting and training users on these new capabilities through monthly QAT office hours. Sessions highlighted updated shipment and stock status reports, as well as the new Supply Plan Scorecard report (Exhibit 6), which enables supply planners to benchmark supply plan data quality and stock status.

Exhibit 6: Updates to QAT Features

[28] Angola, Benin, Botswana, Burkina Faso, Burma, Burundi, Cambodia, Cameroon, Côte d'Ivoire, DRC, El Salvador, Eswatini, Ethiopia, The Gambia, Ghana, Guatemala, Guinea, Haiti, Honduras, Kenya, Laos, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Namibia, Nepal, Niger, Nigeria, Pakistan, Panama, Rwanda, Senegal, Sierra Leone, Somalia, South Sudan, Tanzania, Thailand, Togo, Uganda, Zambia, and Zimbabwe.

[29] Active QAT users refer to those with an active status who have logged in within the last 12 months.

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In addition, the project responded to requests from the QAT Governance Council (see Objective 3: Global Collaboration).

Last Mile Delivery and Distribution Support

GHSC-PSM is responsible for the last mile delivery of lifesaving commodities across a handful of countries. This indicator captures data across all USG-funded last mile delivery (LMD) activities by task order and item tracer category. Each quarter,[30] GHSC-PSM will report this indicator by:

- Number of facilities receiving commodities through USG-funded last mile distribution (see Exhibit 7)
- Quantities of commodities[31] distributed via USG-funded last mile distribution services (see Exhibit 8)

In Q3, GHSC-PSM conducted last mile deliveries of lifesaving commodities in ten countries, delivering to the doorstep of 9,946 facilities.

Exhibit 7. Health Facilities receiving USG-funded last mile distribution support in Q3.

Number of facilities receiving commodities through USG-funded last mile distribution in Q3, by country											
Unique Facility Count	Angola	Congo DRC	Ghana	Haiti	Liberia	Malawi	Nigeria	Togo	Zambia	Zimbabwe	Q3 Total
HIV/AIDS	8	200	121	91			1,490	28	625	5	**2,568**
Malaria		2,393	373		91	700	4,133		764	12	**8,466**
Country Total	**8**	**2,403**	**380**	**91**	**91**	**700**	**5,257**	**28**	**976**	**12**	**9,946**

[30] Eligibility for inclusion of LMD data within this reporting is based on the date when GHSC-PSM confirmed the delivery occurred rather than the date when the physical delivery occurred. This means that some deliveries made at the end of the quarter will not be reported until the subsequent quarterly report. This methodology may differ from other reporting and as a result reported values may differ.

[31] Commodity totals will contain both USG-funded commodities and other entity-funded commodities.

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Exhibit 8. Quantities of commodities distributed via USG-funded last mile distribution services in Q3.

Quantity of health commodities distributed via USG-funded last mile distribution (LMD) services in Q3			
Health Program Area	Tracer Category	Quantity Delivered	Units
HIV/AIDS	Adult ARVs	390,804	Patient-Year Treatments
	Pediatric ARVs	25,292	Patient-Year Treatments
	HIV RTKs	9,005,798	Tests
Malaria	ACTs	4,600,169	Treatments
	LLINs	609,422	Nets
	mRDTs	8,670,195	Tests

LMD support under TO1

To protect continuity of lifesaving HIV treatment and ensure uninterrupted access to vital VL testing, GHSC-PSM supports LMD systems that keep essential commodities moving from central stores to the facilities where people rely on them. Working closely with national HIV programs, laboratories, and supply chain partners, the project strengthens in-country distribution, accelerates emergency deployments when risks emerge, and reinforces the data-driven systems that sustain consistent care for people living with HIV. In Haiti, the project pairs careful route planning with GPS tracking, geofencing, and electronic proof of delivery to follow lifesaving commodities from the warehouse to health facilities. This end-to-end visibility helps teams respond quickly to disruptions, confirm each delivery, and strengthen accountability across the last mile.

See Annex A: Country Stories for more examples from partner countries showing how coordinated last-mile delivery helps commodities reach patients efficiently and reliably.

LMD support under TO2

To ensure the uninterrupted availability of malaria commodities at health facilities and to support the achievement of national malaria program objectives, the project facilitates the distribution of these commodities to regional warehouses, districts, and LMD points across multiple countries. In collaboration with host governments and donors, the project has worked to integrate malaria commodity distribution systems, enhancing efficiency and optimizing the use of available resources.

Support for Routine LLIN Distribution: The project continues to advance USG malaria prevention objectives across multiple countries while strengthening supply chain visibility and accountability. In Mali, for example, GHSC-PSM designed and implemented an integrated digital logistics monitoring system for the routine distribution of LLINs, enabling real-time tracking of deliveries and monitoring of distribution activities. The system was tailored to address the country's unique logistical challenges, including vast distances, poor road conditions, and limited access to some health facilities, and delivered strong verification results:

SENSITIVE BUT UNCLASSIFIED

- 100 percent of GPS coordinates submitted by drivers and delivery agents matched the locations of the intended health districts.
- 100 percent of quantities dispatched matched quantities received, as verified through scanned Proofs of Delivery (PODs).

By leveraging these digital tools, GHSC-PSM enhanced transparency, strengthened accountability, and improved the efficiency of LLIN distribution nationwide. The success of this approach demonstrates a scalable, data-driven model for managing public health commodity distribution in challenging operating environments.

Support for Implementation of Multiple First-Line Therapy in National Malaria Programs: To mitigate risks associated with emerging antimalarial drug resistance, some countries are now implementing multiple first-line therapy (MFT), which involves the simultaneous use of two or more different ACTs for the treatment of uncomplicated malaria. This is an ongoing activity, with GHSC-PSM working with countries to support the transition to and implementation of the MFT strategy. In addition to providing forecasting and procurement technical support, GHSC-PSM also offers visibility into inventory levels and supply planning to help align malaria commodity availability with MFT requirements. An example of this was the central role GHSC-PSM played in collaborating with the Government of Rwanda and key stakeholders to address critical stock shortages of dihydroartemisinin-piperaquine and artesunate-pyronaridine resulting from procurement delays, which could have negatively affected the second phase of the MFT strategy. GHSC-PSM supported the timely procurement of these commodities and the planned development of distribution plans, thereby strengthening Rwanda's preparedness for the MFT transition and enhancing the resilience of the supply chain system. See Annex A: Country Stories to learn more.

OBJECTIVE 3: GLOBAL COLLABORATION

GHSC-PSM engages relevant global partners to ensure strategic coordination and appropriate use of market intelligence to drive supply chain success. In Q3, collaboration remained an essential part of maintaining a clear path to delivery. GHSC-PSM worked closely with other USG-funded supply chain partners to coordinate at the global and country levels to identify and mitigate supply chain risks. Both task orders worked closely with GHSD to ensure identified stockout risks were shared through them to the Global Fund, particularly as it relates to the transition to their third-party procurement agents. At a country level, both TOs continued to coordinate with government and Global Fund grant mechanisms, as well as other partners, to mitigate risks identified through routine review processes.

In Q3, GHSC-PSM shared Q3 ARV and advanced HIV disease order data to inform the regular ARV Procurement Working Group (APWG) monitoring and demand forecasting. This working group brings together HIV procurement agencies to coordinate procurement for low-volume ARVs, support

effective HIV treatment transitions, and improve collaboration and knowledge sharing on pediatric ARV market shaping innovations.

Additionally, in Q3, GHSC-PSM participated in an MCHN Technical Planning Meeting convened by GHSD in Washington, D.C. The meeting brought together GHSD, GHSC-PSM, and other USG implementing partners, including UNICEF, Jhpiego, JSI, Palladium, and FHI 360, to strengthen collaboration, share lessons learned, and support strategic planning for MCHN programming. Participants reviewed priority interventions, implementation experiences, and country-level perspectives, while identifying opportunities to enhance coordination, sustainability, and country ownership. Through facilitated discussions and working groups, attendees also developed high-level content and resources for upcoming embassy technical sessions to support transition planning and continued implementation of priority MCHN interventions.

GHSC-PSM participated in the LLIN Global Donor Coordination Call and Vector Control Taskforce Calls. During both meetings, the project shared order status updates, including supplier goods availability and estimated delivery dates, to help prioritize shipments based on country stockout risks. An emerging topic in the Vector Control Task Force has been the transition and closeout of the project, and how that impacts the broader upstream and downstream vector control supply chain. In the vector control space, GHSC-PSM collaborated closely with the Against Malaria Foundation (AMF) and the Global Fund to share real-time stock and order status updates, helping mitigate risks and ensure country stakeholders were informed of their upcoming delivery timelines. In addition, GHSC-PSM began coordinating with AMF on the delivery of AMF-procured campaign LLIN orders to the DRC and Nigeria through GHSC-PSM-managed quality testing and delivery. Also, GHSC-PSM supported the procurement transition of LLIN orders for Guinea, Malawi, and Senegal from the project to a third-party procurement agent by providing a process overview inclusive of procurement, QC testing, and logistics activities, as well as facilitating introductions between suppliers and the third-party procurement agent.

Furthermore, GHSC-PSM supported GHSD's engagement with the Supply Chain Funders Forum (SCFF) and the QAT Governance Council (a subset of SCFF members) to facilitate QAT becoming a shared platform across multiple global health stakeholders. This shared approach aims to preserve QAT as a single instance digital global public good, an open-source forecasting and supply planning tool that serves a broader public-interest purpose. It also positions QAT as a sustainable legacy platform that can continue supporting countries and partners in making data-driven supply chain decisions beyond the life of the GHSC-PSM project. During Q3, the project responded to data requests from the QAT Governance Council and also provided a demo overview of the QAT supply planning module. Anticipating additional support from the Governance Council to establish a dedicated QAT Management Team, GHSC-PSM began developing preliminary training materials and lesson plans to support onboarding of new staff.

ANNEX

Annex A: Country Stories

Annex B: Performance on Project Indicators

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Annex A

GHSC-PSM Q3 FY 2026 Report – Country Stories

GHSC-PSM is America's global health supply chain platform. Proven, efficient, and future-ready, the project delivers lifesaving commodities at scale while reinforcing U.S. leadership in global health and advancing the America First Global Health Strategy.

Persisting Under Pressure

Supply chains maintaining continuity during disruption, shortages, transition, or operational risk.

Burkina Faso: Reducing the Viral Load Testing Backlog by 38 Percent

Six of Burkina Faso's seven U.S. Government (USG)-supported viral load (VL) laboratories experienced stockouts of critical ancillary consumables by the end of March 2026, slowing sample processing. Although GHSC-PSM expedited an order of reagents and consumables, the primary reagents were rejected after a temperature excursion during transport, while the accompanying consumables remained usable. The project analyzed central medical store (CMS) reports and platform-specific data from 15 laboratories, identifying stock imbalances, limited testing capacity, and products at risk of expiry. Working with the HIV Program's Procurement and Stock Management Unit and laboratory managers, GHSC-PSM supported emergency supplies and transfers of reagents and consumables among a number of facilities. These actions maintained VL testing, prevented reagent expiry, and reduced the testing backlog by 38 percent, from 4,089 samples on April 26 to 2,550 on June 28, 2026.

> *"Thanks to GHSC-PSM's support in transferring consumables between laboratories, we were able to maintain sample testing activities in our laboratory and provide VL test results to clinicians within a reasonable timeframe."*- Ousmane Maiga, Biomedical Technologist, Head of VL Testing at the University Hospital Center, Bogodogo

Guatemala: Protecting Pediatric HIV Treatment Through Coordinated Action

Guatemala faced an imminent shortage of pediatric antiretrovirals (ARVs) in Q2, specifically zidovudine oral solution and other formulations used for children living with or exposed to HIV. Limited national availability, procurement lead times, and the specialized nature of pediatric products increased the risk of treatment and prophylaxis interruptions. GHSC-PSM worked with the National AIDS Program, Ministry of Health (MOH) logistics and procurement units, health facilities, and regional partners to review inventories, consumption, months of stock, procurement status, and projected requirements. The project developed updated supply projections and explored donations, emergency procurement, redistribution, and treatment optimization options. Following the arrival and authorization of donated zidovudine oral solution, GHSC-PSM supported its release and distribution ensuring nationwide availability and successful distribution in early Q3 while continuing to monitor lamivudine oral solution and abacavir/lamivudine dispersible tablets. The intervention reduced the immediate risk of pediatric treatment disruptions, improved national and facility-level visibility, and established a more proactive approach to managing low-volume, lifesaving pediatric HIV commodities.

"Through coordinated inventory monitoring and timely logistical action, we were able to protect the continuity of pediatric HIV treatment while longer-term procurement solutions were being addressed." — Hibeb Silvestre, Coordinator, National AIDS Program, MOH, Guatemala

Honduras: Coordinating an Interagency Plan for Viral Load Test Supplies

Honduras's national HIV program faced a high risk of VL testing supply shortages because inventories were declining and the MOH did not yet have an active procurement process to replenish them. The situation threatened continued sample processing and timely patient monitoring nationwide. In May 2026, GHSC-PSM led the development of an interinstitutional supply plan with the MOH, the USG, and implementing partners. The project assessed inventories of reagents and consumables, analyzed how long available supplies would last, and identified potential gaps. Based on the findings, three USG-funded partners committed to local procurement to address immediate needs, while GHSC-PSM coordinated international procurement of 218 VL kits, equivalent to 20,928 tests, to strengthen medium-term availability. The coordinated strategy reduced the risk of another national testing interruption and helped maintain continuous VL monitoring for 14,462 people with HIV receiving care across Honduras.

Honduras: Restoring National Viral Load Testing Capacity

Honduras's national HIV program experienced a major disruption in VL testing from December 2025 through April 2026 because laboratories lacked essential consumables. The shortage delayed sample processing and threatened timely monitoring for people with HIV. In April 2026, GHSC-PSM supported the procurement and delivery of critical supplies to the MOH, allowing laboratories to resume processing both newly collected and previously stored samples. At the time, 14,462 people were receiving HIV care, and approximately 5,251 samples collected between January and March 2026 were awaiting testing. With the new consumables available, the laboratory increased processing from one to two VL kits per day, equivalent to about 186 tests daily excluding quality controls. This higher capacity accelerated backlog reduction while maintaining routine testing. The intervention also enabled available reagents nearing expiration to be used in time, restoring national VL testing capacity, supporting clinical decision-making, and preventing avoidable losses to the health system.

Mali: Early Delivery Protects Viral Load Testing for 14,400 People

Routine VL testing is essential to determine whether ARV treatment is working and help people living with HIV achieve and maintain viral suppression. In early 2026, USG-supported health facilities in Mali faced an imminent risk of running out of VL testing reagents. Although a shipment was scheduled for July 2026, it would have arrived too late to prevent stockouts. GHSC-PSM worked with technical and logistics partners to accelerate delivery to April, three months ahead of schedule. The project also analyzed stock levels and consumption trends, prioritized high-volume and high-risk laboratories, and developed a distribution plan to move reagents rapidly to facilities most at risk. End-to-end monitoring continued until supplies reached laboratory benches. The response prevented stockouts across USG-supported facilities in Bamako, Ségou, and Sikasso, maintained timely clinical monitoring, and protected uninterrupted VL testing for approximately 14,400 people living with HIV.

"Anticipating the delivery of these reagents was critical to preventing stockouts that could have severely disrupted patient monitoring. Thanks to the rapid coordination and responsiveness of the supply chain teams, our laboratories maintained uninterrupted VL testing services, ensuring that people living with HIV continued to receive the care they need without interruption."
— Dr Oumar Dolo, HIV Program Laboratory Manager, Sectorial Unit for the fight against HIV, TB and hepatitis (CSLS-TBH)

Rwanda: Strengthening Supply Planning to Sustain HIV and Malaria Services

Rwanda's HIV and malaria programs faced recurring risks of essential commodity stockouts caused by procurement delays, funding constraints, manufacturing challenges, minimum order quantity requirements, and other supply disruptions. Low-volume products, including certain ARVs, were especially difficult to procure because national demand did not meet manufacturers' minimum production thresholds. GHSC-PSM worked with the MOH, Rwanda Biomedical Centre, and Rwanda Medical Supply Ltd to conduct quarterly supply plan reviews, reassess forecasting assumptions, revise national supply plans, and adjust delivery schedules. Using the Quantification Analytics Tool (QAT), stakeholders analyzed consumption trends, monitored pipelines, identified supply gaps, and developed mitigation measures, including product substitutions, redistribution, and pooled procurement. The reviews improved quantification and delivery planning, informed procurement and funding decisions, and reduced the risk of shortages at service delivery points. They also strengthened government leadership of supply planning, helping sustain HIV and malaria testing and treatment while building a more resilient, country-owned supply chain.

Togo: Closing the LLIN Gap for the 2026 Malaria Campaign

Ahead of Togo's 2026 national long-lasting insecticidal net (LLIN) campaign, the National Malaria Control Program (NMCP) identified a critical shortfall despite earlier USG support for 1,328,350 nets. Long procurement lead times, funding uncertainty, and the transition from GHSC-TA-Francophone to GHSC-PSM increased the risk that the remaining gap would reduce campaign coverage. The newly established project team in Togo conducted a forecasting and budget review that identified available funds for an additional order. The project then coordinated with all stakeholders and suppliers to procure 330,000 additional LLINs and accelerate production and delivery. The shipment arrived in late Q3, in just 33 weeks, well ahead of the standard 58-week procurement timeline. The nets were delivered in time for the campaign and are expected to protect approximately 660,000 additional people, closing a critical gap and strengthening Togo's malaria prevention efforts.

> *"This additional order that has just arrived is a great relief for us, as it will help fill the deficit identified during the initial planning of the 2026 campaign. We express our gratitude to the GHSC-PSM project team for the effort made, which enabled these LLINs to be made available in a timely manner. Thanks to this delivery, we are strengthening our capacity to protect more populations against malaria."* – Mr. Georges Agnandom, NMCP.

Uganda: Maintaining Viral Load Testing Despite Global Flight Disruptions

Uganda's National Health Laboratory and Diagnostic Services (NHLDS) processes VL and early infant diagnosis samples from facilities across 146 districts, relying on a steady supply of imported testing kits and reagents. That supply was threatened when conflict in the Middle East caused flight cancellations, route restrictions, reduced cargo capacity, and higher fuel costs. To prevent delays, GHSC-PSM identified alternative airlines still serving Entebbe, rerouted shipments through available corridors, and used freight buffers already built into requisition orders to absorb surcharges. For a limited number of high-priority orders, the project also sought approval for additional freight costs rather than allowing shipments to stall. Continuous risk monitoring and coordination with freight partners gave the team visibility to intervene quickly when shipments were at risk. During the disruption, GHSC-PSM delivered enough VL reagents to support 161,974 tests, while service delivery points reported zero stockouts of critical HIV testing commodities, maintaining uninterrupted testing and preventing laboratory backlogs.

"We are grateful to GHSC-PSM for ensuring an uninterrupted supply of VL reagents, which has enabled us to continue serving the population without any disruption to VL testing services." Dianah Nassimbwa – lab scientist from NHLDS

Data-Driven Decisions That Strengthen Supply Chains

Data visibility, forecasting, analytics, interoperability, and performance management supporting stronger supply chain decision-making.

Botswana: Expanding QAT Use to Essential Medicines and Laboratory Products

Botswana's CMS had been quantifying essential medicines and laboratory commodities using a non-standard Microsoft Excel-based tool, limiting consistency across forecasting and supply planning processes. During the reporting period, GHSC-PSM provided operational and systems support to CMS and MOH programs to apply QAT to these broader commodity categories. Over three days, 65 participants from CMS and health areas prioritized by the Botswana government, worked together to develop a three-year forecast and a two-year supply plan for essential medicines and laboratory commodities. CMS staff who had recently been trained on QAT led the data-entry exercise, demonstrating growing national capacity to manage the tool. The activity expanded the use of established ARV quantification practices beyond HIV commodities and strengthened Botswana's ability to plan future commodity needs through a more standardized, country-led process.

Burundi: Building Commodity Security Through Long-Term Forecasts

Burundi needed reliable forecasts for HIV/AIDS, malaria, and TB commodity requirements for the 2027–2029 Global Fund Cycle 8 funding request. The process was complicated by changing program targets, the introduction of new medicines and more effective but more expensive diagnostic tests, and the need to harmonize data and assumptions across programs and partners. At the request of the MOH, GHSC-PSM provided technical and financial support for a workshop where key stakeholders developed forecasting assumptions and gathered missing data. The project then participated in a follow-up workshop to validate those assumptions, update program targets, and develop product forecasts in QAT. By the end of the exercise, Burundi had finalized its projected HIV/AIDS, malaria, and TB commodity needs for 2027–2029. The forecasts were ready for integration into the country's funding request for submission to the Global Fund, providing an agreed evidence base for future commodity planning and financing.

Burundi: Expanding HIV Commodity Visibility Beyond the Central Warehouse

For years, Burundi's monitoring of HIV commodity stocks relied mainly on central-level inventory data because reporting from lower levels was incomplete and inconsistent. Supply planning and procurement timing were therefore based on central warehouse stocks, while quarterly distributions to district pharmacies served as a proxy for consumption. This limited visibility made it difficult to identify shortages, overstocks, and distribution challenges below the national level. GHSC-PSM worked with the MOH's newly established supply chain department and the HIV program to create a system for collecting monthly stock-on-hand and distribution data directly from district pharmacies through phone calls and messages. The approach built on a similar system previously used with the malaria program. By combining central warehouse and district pharmacy inventories, and using monthly distribution data from districts to service delivery points, Burundi now has a clearer picture of HIV commodity availability and consumption patterns, supporting informed supply planning and earlier identification of stock risks.

El Salvador: A New Inventory Tool Improves ARV Control and Data Accuracy

El Salvador's Hospital Central HIV Clinic was not yet integrated into the MOH's formal dispensing and inventory management systems and relied on manual records to track ARV dispensing and stock levels. This limited data accuracy and visibility, weakening the information used for reporting, forecasting, and resupply decisions. GHSC-PSM provided technical assistance to the Transition Clinic to design and implement a daily dispensing and inventory control tool. The intervention standardized data recording, strengthened inventory management practices, and improved the quality of logistics information used for monthly ARV reporting and requisitions. The tool also enabled clinic staff to monitor stock levels more reliably and make evidence-based supply decisions. As a result, the clinic achieved 100 percent inventory accuracy and strengthened its capacity to manage ARV commodities independently. These improvements support uninterrupted treatment for 1,500 people living with HIV, increase operational efficiency, and contribute to more sustainable medicine availability.

El Salvador: Using Supply Reviews to Protect Future ARV Availability

Potential shortages of key ARV drugs, evolving treatment needs, and increasing regimen transitions placed pressure on procurement planning within the Salvadoran Social Security Institute (ISSS). Maintaining uninterrupted treatment for people living with HIV requires timely forecasting, coordinated decisions, and early identification of supply risks. GHSC-PSM convened a quarterly supply planning review with representatives from infectious diseases, epidemiology, health management, hospital administration, pharmacy, health technology, planning, and international cooperation. Participants analyzed ARV consumption trends, assessed products at risk of shortage, identified items requiring immediate action, and agreed to activate emergency procurement mechanisms where necessary. The team also updated procurement forecasts for 2027 and identified the need for a comprehensive strategy to manage regimen transitions and their effect on future demand. The review strengthened coordination across ISSS departments, improved visibility of upcoming ARV needs, and supported timely procurement decisions, enhancing the institution's ability to maintain uninterrupted HIV treatment services and use available resources efficiently.

Eswatini: Strengthening Supply Chain Visibility Through eLMIS

Eswatini's paper-based logistics management information system (LMIS) created an approximate one-month delay between health facility reporting and the availability of commodity data in national systems, limiting timely visibility of stock levels, consumption trends, redistribution opportunities, and procurement needs. To address this gap, the MOH, with support from GHSC-PSM, introduced the electronic logistics management information system (eLMIS). During the quarter, two project regional logistics officers provided hands-on user support, troubleshooting, and escalation of unresolved system issues. eLMIS has now reached 93 of 106 targeted facilities. Of these, 79 began using the system during the quarter, 132 staff received orientation, 64 facilities received follow-up support, and 45 clinical mentors were trained to provide first-tier assistance. These efforts strengthened system adoption and user confidence, while making facility-level supply chain data increasingly available in real time to support faster, more informed commodity security decisions.

Eswatini: Using QAT to Improve Supply Chain Planning and Ownership

Before QAT, Eswatini relied on separate forecasting, pipeline monitoring, and spreadsheet-based tools, limiting real-time visibility and making it difficult for stakeholders to work from a single source of data. GHSC-PSM supported the introduction and institutionalization of QAT as the primary

platform for forecasting, supply planning, and stock status monitoring. From 2022 to 2026, the project strengthened government and partner capacity in data collection, data quality review, forecast development, supply planning, scenario modelling, and stock risk analysis, gradually shifting from intensive hands-on assistance to remote mentorship. By Q3, QAT was being used across 23 pharmaceutical and laboratory product categories, including all HIV commodities. During the transition of procurement responsibilities to the third-party procurement agent, stakeholders used QAT's scenario-planning and stock-status features to estimate how long remaining GHSC-PSM shipments would last, identify future gaps, and alert the MOH to commodities requiring priority action. MOH teams now increasingly lead QAT-based analyses and quantification discussions with minimal external support, strengthening national ownership and positioning Eswatini to sustain more resilient, data-driven supply planning.

Ghana: Strengthening HIV Commodity Planning for the Next Global Fund Cycle

As Ghana prepared for the Global Fund Grant Cycle 8 period from 2027 to 2029, the National AIDS/STI Control Programme (NACP) needed reliable projections for ARV drugs and related HIV commodities. Forecasting had to account for changing regimen use, planned procurement shifts, and recent program performance. In June 2026, GHSC-PSM supported NACP to conduct a commodity quantification review and develop assumptions for the upcoming grant period. The review used both service and consumption data, including historical performance from 2024, 2025, and the first quarter of 2026. The Cycle 8 Target Sheet served as the primary data source for projections, while QAT consumption data was used to analyze historical trends, together informing relevant decision-making. Stakeholders also incorporated planned changes to the commodity basket, including the phaseout of tenofovir/lamivudine/dolutegravir (TLD)-180 packs and revised proportions for pediatric efavirenz-based regimens. The exercise established commodity assumptions and regimen and pack-size adjustments for 2027–2029, laying the groundwork for finalized forecasting, supply planning, and a comprehensive technical report.

Guinea: eLMIS Revolutionizes Malaria Commodity Management

Guinea is transforming malaria supply chain management by digitizing the management and validation of internal supply requests for malaria commodities through the eLMIS platform. Led by the NMCP with technical support from GHSC-PSM, this initiative has strengthened data visibility, improved reporting, and enhanced distribution system performance nationwide. In less than two years, order accuracy increased from 22 to 86 percent, while reporting timeliness and completeness reached 100 percent. The digital system also eliminated delays in transmitting distribution plans and delivering commodities, reducing the distribution cycle from two months to just one calendar month. With greater stock visibility and data-driven decision-making, Guinea has significantly improved the availability of malaria commodities across the health system. Stockout rates have consistently remained below 4 percent, reaching a low of 1.9 percent in Q3. By ensuring the continuous availability of essential malaria prevention, diagnosis, and treatment commodities at health facilities, the eLMIS is helping strengthen Guinea's capacity to deliver uninterrupted, lifesaving malaria services to communities across the country.

> *The activation of ordering through eLMIS has enabled us to move from a fragmented and largely manual system to an integrated, faster, more reliable process driven by real-time data. Today, we are better equipped to anticipate the needs of health facilities and ensure the continuous availability of malaria commodities for the populations we serve.* - Dr. Pythagore Lama, Supply Chain Management Officer, Guinea

Honduras: Strengthening ARV Procurement Planning for 2027

Honduras' MOH needed an updated estimate of ARV drug requirements for 2027 to guide procurement planning and protect continuity of treatment nationwide. Without current projections, the country faced a greater risk of ordering too little or too much medicine, potentially leading to stockouts or overstocking. In June 2026, GHSC-PSM provided technical assistance to develop the 2027 ARV needs estimate. The project supported data quality checks, analysis of programmatic and logistics information, and use of estimation tools to project medicine requirements. GHSC-PSM also facilitated joint working sessions with national HIV program stakeholders to validate assumptions, review available data, and consolidate results. The completed estimate projected treatment coverage needs for 14,462 people living with HIV and provided the MOH with reliable technical inputs for procurement. The process strengthened stakeholder alignment, improved use of available data, and reduced supply risks while supporting uninterrupted access to HIV treatment.

Malawi: Integrating Laboratory Commodities into OpenLMIS

Malawi's MOH has used OpenLMIS for nine years to manage inventory, report stock status, and place orders for 3,046 essential medicines and medical supplies across more than 862 health facilities. However, more than 840 laboratory products remained outside the electronic system, requiring time-consuming paper-based reporting that weakened data quality and delayed forecasting, ordering, and distribution decisions. In early 2026, the MOH and its implementing partners started to integrate laboratory commodities into OpenLMIS. In Q3, GHSC-PSM supported the addition of all 840 lab products, enabling facility-level tracking and reporting for the first time. Initial rollout will cover central, district, and selected Christian Health Association of Malawi hospitals, as well as semi-private laboratories at primary, secondary, tertiary, and reference levels, with plans for further expansion. The integration is expected to provide more timely and accurate data, strengthen forecasting and ordering, and support the efficient distribution and availability of lifesaving laboratory commodities across Malawi.

"This expansion will improve efficiency in laboratory service delivery across the health system in Malawi and ensure adequate availability of and access to lifesaving health supplies." - Lloyd Nyangulu, Laboratory Supply Chain Specialist, GHSC-PSM.

Mali: Coordinated Quantification Strengthens Planning and Resource Mobilization

Mali continues to face major public health challenges, with malaria remaining a leading cause of illness and death and HIV and maternal and child health indicators still below national and global targets. To strengthen planning and financing for lifesaving commodities, GHSC-PSM led a national quantification exercise covering malaria, HIV, and maternal and child health needs for 2026–2030. Working with the MOH and Social Development, national programs, the USG, the Global Fund, UMRSS, UNFPA, and other partners, the project analyzed consumption, epidemiological trends, demographic projections, treatment guidelines, and procurement data. Using QAT, and other complementary forecasting tools, stakeholders validated forecasts and 18-month supply plans. Estimated needs totaled USD 160 million for malaria, USD 29.5 million for HIV, and USD 254 million for maternal and child health. For malaria, the July 2026–December 2027 plan identified USD 14.8 million in needs and a funding gap exceeding USD 9.2 million, strengthening evidence-based resource mobilization.

Mozambique: Transforming Supply Chain Data into Business Intelligence

Mozambique's public health supply chain generates large volumes of logistics data through the Central Medical Stores' (CMAM) warehouse management system and nSIMAM, Mozambique's

eLMIS, but stakeholders often relied on manual extractions, spreadsheets, and static reports to assess stock availability, reporting performance, expiries, and distribution needs. As CMAM prepares to assume greater ownership of key information systems, staff need practical tools to independently visualize, analyze, and use data. GHSC-PSM worked with CMAM to transform Ferramenta Central, a centralized web database and data-management platform operated by CMAM, from a national logistics data system into a business intelligence platform, launching CMAM's first dashboards and analytical reports in Q3. Interactive visualizations, filters, automated reporting, and self-service analytics now support operational and strategic decisions. The platform has strengthened CMAM's ability to monitor supply chain performance, reduce manual data processing, automate reporting, and build a more sustainable, nationally owned logistics information system.

> *"The integration of Metabase into Ferramenta Central is a significant step toward data-driven decision-making. We are transforming logistics data into actionable intelligence that helps CMAM manage the health supply chain more efficiently and sustainably." Isidro Nhathumbo, Central Tool/MIS Advisor, GHSC-PSM Mozambique*

Mozambique: Using QAT to Strengthen Procurement, Financing, and Transition Planning

Between March and May 2026, Mozambique reviewed forecasts, quantification analyses, and supply plans for HIV, malaria, TB, and maternal and child health and nutrition (MCHN) commodities. The exercise would inform the Global Fund Grant Cycle 8 funding request and align program requirements with commitments under the Memorandum of Understanding between the USG and the Government of Mozambique. GHSC-PSM coordinated the quantification process and provided systems support to CMAM, national programs, and the Global Fund team. The project reviewed assumptions, consumption trends, treatment protocols, program performance, operational capacity, implementation scenarios, and future commodity and financing needs. Stakeholders also updated program targets and supply plans while strengthening CMAM and national program capacity to use QAT. The review produced validated forecasts, updated supply plans, and procurement plans for all four health areas, providing an evidence base for the Cycle 8 request and helping stakeholders align procurement, financing, implementation responsibilities, and transition planning beyond GHSC-PSM.

Panama: Improving Automated HIV Logistics Reporting

Technical issues prevented automated backups of consumption and inventory data in 20 health facilities from being properly reflected in Panama's HIV Logistics Data Integrator (IDL-HIV), limiting the availability and reliability of information used for decision making. To address the problem, GHSC-PSM conducted a comprehensive audit of all 20 connected facilities and held technical sessions with facility focal points. The project identified equipment, connectivity, and backup configuration issues and implemented corrective actions to improve system stability and automated data flows. By the end of Q3, all 20 facilities were successfully completing consumption and inventory backups, achieving 100 percent backup execution. Eighteen facilities, or 90 percent, were also uploading data correctly into IDL-HIV. These improvements strengthened information automation, increased reporting consistency, and expanded the availability of timely logistics data to support national HIV program management and more reliable supply chain decisions across Panama.

Smart Logistics and Operational Coordination

Operational execution, warehousing, distribution, and coordinated logistics systems that improve delivery and accountability.

Ghana: School-Based Net Distribution Expands Malaria Protection

Ghana continues to face a heavy malaria burden, accounting for an estimated 2.4 percent of global cases and 1.9 percent of global deaths, according to the 2025 World Malaria Report. Children and pregnant women remain especially vulnerable. To support the National Malaria Elimination Strategic Plan 2024–2028, GHSC-PSM collaborated with the National Malaria Elimination Programme (NMEP) and Ghana Education Service (GES) to procure and distribute more than 1.4 million LLINs to students in grades two and six. The distribution reached more than 23,000 schools across 14 regions, excluding areas implementing indoor residual spraying. Advance planning and logistics coordination moved the nets from the central warehouse to district education stores and onward to schools, despite difficult roads and rainy conditions. End-to-end monitoring helped the NMEP, GES, and the project identify and resolve bottlenecks quickly. The school-based distribution provided nets directly to students and is estimated to protect 2.8 million people by extending coverage to their households and families.

Haiti: End-to-End Visibility Strengthens Last-Mile Delivery

In Haiti, delivering lifesaving health commodities from warehouse to patient requires careful coordination across changing road access, security conditions, and multiple modes of transport. To strengthen visibility and respond quickly when conditions shift, GHSC-PSM built its distribution process around end-to-end tracking. Before departure, teams plan each route, stop, delivery, truck load, commodity value, destination, and driver responsibility. Once trucks leave the warehouse, GPS tracking provides real-time visibility into delays, route changes, and security threats. Predefined geofences act as digital checkpoints, automatically notifying teams as vehicles move along planned routes. Drivers also document each delivery with photographs, GPS coordinates, and electronic proof of delivery. In Q3, these systems supported the safe delivery of 229 cubic meters of lifesaving commodities valued at more than $3.3 million. By following every box from warehouse to health facility, the project helps solve problems earlier, confirm deliveries, and build a more reliable supply chain for patients across Haiti.

From Warehouse to Patient

- **8:00 a.m. | Warehouse loading and verification:** At the Fleuriot warehouse in Port-au-Prince, the GHSC-PSM team confirms the shipment details. A truck driven by Ulysse is loaded with 524 boxes of HIV commodities for nine health facilities in Haiti's Grand Nord. The shipment has a volume of 19.86 cubic meters and a value of $272,531.
- **11:00 a.m. and beyond | Multimodal transport begins:** Ulysse travels to the port to catch the barge before continuing by road. The team can see his location in real time, confirm that he is following the planned route, and respond quickly if conditions change.

- **2:00 p.m. | Route monitoring:** As the truck moves, predefined geofences serve as digital checkpoints. Each crossing automatically notifies the team and provides real-time visibility into the shipment's progress.
- **4:00 p.m. | Electronic delivery confirmation:** Ulysse checks in electronically at each delivery location. Photographs, GPS coordinates, and electronic proof of delivery confirm that the commodities reached the intended health facilities.
- **The impact:** Following the shipment from warehouse to final delivery helps the project identify problems early, maintain accountability, and protect the reliable supply of HIV commodities for patients who depend on continued treatment.

Liberia: Using Data to Deliver LLINs Nationwide

Malaria remains a major public health threat in Liberia, particularly for pregnant women, lactating mothers, and children under five. Maintaining a reliable supply of LLINs is challenging because of poor transportation infrastructure, long travel distances, seasonal weather conditions, and the remoteness of many communities. GHSC-PSM worked with the NMCP to implement a data-driven distribution strategy using eLMIS data. The project reviewed facility stock reports, analyzed consumption trends, and identified locations with the highest demand and greatest risk of stockout. GHSC-PSM then coordinated with the NMCP, county health teams, and third-party logistics providers to deliver nets to county depots and public health facilities across all 15 counties. Between April and June 2026, the project distributed 155,050 LLINs, preventing stockouts and maintaining access for vulnerable populations, including those in remote areas. The effort also strengthened supply chain visibility, improved forecasting and allocation decisions, and increased preparedness for future distribution challenges.

> *"Working with GHSC-PSM ensured timely, data-driven LLIN distribution across all fifteen counties. This prevented stockouts and safeguarded access for pregnant women, mothers, and children under five—strengthening malaria prevention and reinforcing Liberia's health supply chain."* - Winston Sumo, NMCP, Liberia.

Mali: Digitalizing LLIN Distribution and Delivery Monitoring

Malaria remains one of Mali's leading public health challenges, particularly for children under five and pregnant women. Until recently, routine distribution of LLINs lacked a digital system for tracking deliveries in real time, making oversight difficult across Mali's vast geography, poor roads, and hard-to-reach health facilities. In Q2, GHSC-PSM designed and began implementing an integrated digital monitoring system, with implementation continuing through Q3. Mobile data collection tools captured driver and vehicle registration, shipment movements, and electronic delivery confirmation. Automated dashboards displayed shipment status, delivery performance, and key logistics indicators, while digital mapping tools showed delivery locations and GPS coordinates for remote supervision. The system strengthened visibility, accountability, and decision-making throughout distribution. All GPS coordinates submitted matched the intended health districts, and 100 percent of quantities dispatched matched quantities received, as verified through scanned proofs of delivery. The approach improved LLIN distribution efficiency and offers a scalable model for future commodity campaigns.

Supporting Country Ownership and Sustainable Systems

Strengthening country-led systems, institutional capacity, and long-term data-informed supply chain management.

Benin: Strengthening Pharmaceutical Supply Chain Governance

As Benin strengthens pharmaceutical governance and expands its use of digital logistics systems, key stakeholders need the knowledge and practical skills to manage the pharmaceutical supply chain effectively. At the request of the President of the Supervisory Council of the Pharmaceutical Sub-Sector (CS-SSP) within the Health Sector Regulatory Authority (ARS Benin), GHSC-PSM organized a three-day capacity-building workshop for council members, MOH representatives, and newly graduated pharmacists. The training covered pharmaceutical supply chain organization, national pharmaceutical policies, quantification and supply planning, LMIS, performance monitoring, and risk management. Participants also received practical orientation on national digital logistics and supply chain management systems, DHIS2, QAT, and key logistics performance indicators. The workshop strengthened technical knowledge and collaboration among ARS Benin, the MOH, and private-sector pharmacists. By helping stakeholders interpret logistics data, monitor performance, and apply national regulations, the project supported stronger pharmaceutical governance and a more resilient supply chain capable of maintaining the availability of quality health commodities across Benin.

> *"This training has strengthened our understanding of pharmaceutical supply chain management and the digital tools that support better decision-making. It will help us contribute more effectively to ensuring the availability of quality medicines across Benin." - Dr. Nathalie Migan Diogo, President of CS-SSP, ARS Benin*

Botswana: Decentralizing Logistics Reporting Oversight to Districts

The MOH, through the CMS, traditionally coordinated LMIS activities in Botswana. However, the transfer of primary health care services from the MOH to the Ministry of Local Government and Traditional Affairs created a need to decentralize oversight of LMIS reporting and the uploading of data into DHIS2. This shift was necessary to align supply chain reporting responsibilities with the transition of primary health care services and support the long-term sustainability of LMIS processes. Following district training on validating monthly LMIS reports and uploading them directly to the DHIS2 Supply Chain dashboard, GHSC-PSM provided continued virtual support and follow-up on-the-job training. The project focused on report validation, resolving data queries, and practical guidance for direct dashboard uploads. As a result, nine of the 14 trained districts can now independently upload validated reports, increasing district ownership and use of supply chain data while improving data quality.

El Salvador: Building Stronger ARV Logistics Skills Nationwide

Reliable logistics data and strong supply chain practices are essential to keeping ARVs available at MOH clinics implementing the Sentinel Surveillance of Sexually Transmitted Infections strategy (VICITS), as well as at Friendly Clinics across El Salvador. Incomplete or delayed records can weaken forecasting, create inventory discrepancies, and increase the risk of stockouts or overstocking. To strengthen clinic-level capacity, GHSC-PSM conducted ARV logistics workshops for staff from VICITS and Friendly Clinics in the Eastern and Central health regions. The sessions reinforced logistics management practices, improved use of information systems, and strengthened the quality of inventory and service delivery records. The workshops reached 100 percent of VICITS and Friendly Clinics nationwide, completing the planned capacity-building cycle. Staff are now better

equipped to monitor stock levels, forecast needs, and support timely resupply decisions. By improving data quality and building sustainable, country-led logistics capacity, the activity supports uninterrupted access to ARVs while reducing reliance on external technical assistance and strengthening the long-term value of USG investments.

Eswatini: Modernizing the Central Medical Stores ERP System

In Eswatini, the CMS has relied on a legacy enterprise resource planning (ERP) system for warehouse, inventory, and related supply chain management functions, but the platform no longer fully meets the organization's operational and reporting needs. It has also reached the end of mainstream support, limiting future updates and enhancements. To support modernization, the MOH, with Global Fund financing and technical assistance from GHSC-PSM, gathered user requirements and developed solicitation documents for an upgraded ERP system. During Q3, a certified provider was selected, an ERP requirements verification workshop was conducted, and a detailed fit-gap analysis of CMS business processes was completed. Vendor procurement, project initiation, and governance arrangements were also finalized with key stakeholders, including the incoming Eswatini Medical Supplies Agencies Board. The initiative is now positioned to move into future-state process design, master data standardization, system configuration, and deployment, laying the foundation for more efficient, integrated, and data-driven management of health commodities nationwide.

Lesotho: Finalizing National Quantification Guidelines

Lesotho conducts annual national quantification exercises to forecast health commodity needs and guide supply and procurement planning. However, the country lacked a documented guide to help new members of the national quantification team consistently carry out forecasting, supply planning, quantification reviews, and procurement planning. GHSC-PSM supported the MOH Supply Chain Management Directorate to develop national quantification guidelines covering each stage of the process. The guidelines were finalized during the quarter and will be used in future annual quantification exercises. By documenting agreed procedures and providing a common reference for current and future team members, the guidelines are expected to strengthen consistency, build institutional knowledge, and support greater national ownership of quantification and procurement planning.

Panama: Building National Capacity for 2027 HIV Commodity Planning

Panama's MOH relied heavily on external technical assistance to quantify and plan procurement for strategic HIV commodities, creating risks to long-term sustainability and data-driven decision-making. In May and June 2026, GHSC-PSM and MINSA co-led two national workshops to develop the 2027 forecast and procurement plan for ARVs, diagnostic and monitoring tests, and other key HIV commodities. Participants validated data sources, reviewed forecasting methods and tools, analyzed supply risks, and gained hands-on experience using QAT. They also defined key indicators and responsibilities and developed an action plan to integrate quantification and procurement planning into routine program management. The workshops produced a completed and validated 2027 procurement plan, supported by updated quantification tools and procurement documentation. Ministry staff also strengthened their ability to lead forecasting, monitor supplies, and analyze risks, advancing national ownership and the long-term sustainability of HIV commodity planning.

Rwanda: Advancing Regulatory Reliance to Improve Access to Priority Health Products

Rwanda is working to accelerate the registration of priority medical products while maintaining strong national regulatory oversight. In collaboration with the Rwanda Food and Drugs Authority

(FDA) and the U.S. Food and Drug Administration (FDA), GHSC-PSM supported efforts to advance products through Rwanda's regulatory reliance framework. The Rwanda FDA identified several products already approved by the U.S. FDA as candidates for reliance-based assessment and asked the project to help facilitate communication with manufacturers and marketing authorization holders. By drawing on trusted regulatory decisions and strengthening coordination among national and international partners, this approach has the potential to shorten registration timelines and improve access to priority health products. The collaboration also reinforces the Rwanda FDA's leadership and supports a more efficient, country-owned regulatory system.

Sierra Leone: Bringing Open mSupply to 104 Primary Health Units in Port Loko

In 2026, Sierra Leone began rolling out Open mSupply across all 104 Primary Health Units (PHUs) in Port Loko District, but unreliable electricity and internet, limited digital experience, and difficult terrain threatened timely adoption. GHSC-PSM partnered with the Directorate of Pharmaceutical Services, National Medical Supplies Agency, and Port Loko District Health Management Team to develop a phased rollout. The team assessed facility readiness, deployed preconfigured tablets, trained district master trainers and frontline health workers, and provided on-site support for inventory counts, opening balance migration, and live transactions using facility data. Staff received guidance until they could independently record receipts and issues, maintain accurate stock records, and submit internal orders. Within weeks, all 104 PHUs were onboarded, creating one of Sierra Leone's first fully digitized district-level primary healthcare supply chain networks. Facilities can now submit electronic requisitions and monitor stock in near real time, strengthening accountability, forecasting, and visibility while providing a scalable model for national expansion.

Sierra Leone: One-on-One Coaching Builds Confidence in Open mSupply

When Open mSupply was introduced across Pujehun District, many health workers lacked the confidence and practical skills to use the new interface, complete inventory counts, submit internal orders, and maintain accurate electronic records. Early in implementation, only about 42 percent of health facilities were using the system consistently, and many continued to rely on paper records or incomplete entries. With technical support from GHSC-PSM, the district team introduced one-on-one coaching visits, allowing staff to practice real tasks in their own facilities while receiving immediate guidance and feedback. The personalized approach helped workers understand dashboards, update stock balances, remove expired commodities, and manage orders independently. Within a short period, accurate Open mSupply use increased to more than 90 percent of facilities. Better data also enabled redistribution of overstocked commodities to facilities facing shortages, reducing waste and preventing stockouts. Many staff now use the system independently and mentor colleagues, strengthening local ownership and the availability of essential medicines.

Zimbabwe: Strengthening Supply Chain Planning for the Global Fund Cycle 8 Request

Zimbabwe continues to face a significant burden of HIV, TB, and malaria amid declining global health financing and the approaching closeout of GHSC-PSM. With Global Fund Grant Cycle 8 expected to be the country's final funding cycle, Zimbabwe needed to ensure that supply chain priorities were fully represented in plans for 2027–2029. GHSC-PSM participated in national quantification exercises using updated consumption data, morbidity forecasts, program targets, stock on hand, pipeline commitments, and procurement lead times. The project helped identify commodity requirements, funding gaps, and procurement priorities and developed a costed, integrated procurement and supply management plan aligned with implementation timelines and available

resources. The plan prioritized stronger forecasting, inventory management, data visibility, warehousing, distribution, laboratory commodity management, and logistics information systems. The Cycle 8 process produced an evidence-based supply chain investment plan designed to support continued access to quality-assured HIV, TB, and malaria medicines, diagnostics, and other essential health commodities beyond GHSC-PSM.

Enabling New Treatment Strategies and Health Innovation

Supply chains operationalizing new treatment approaches, technologies, diagnostics, and standards of care.

Ghana: Expanding Malaria Diagnostic Capacity

As Ghana moves from malaria control toward elimination, accurate diagnosis is increasingly important because every detected case can help prevent further transmission. Although malaria rapid diagnostic tests are widely used, microscopy remains the gold standard for parasite detection, species identification, and quantification. While the National Malaria Elimination Strategic Plan's goal is to equip all of Ghana's nearly 1,000 health centers with microscopy services, only about 40 percent of malaria testing in Ghana used microscopy as of January 2026. To support progress towards this goal, GHSC-PSM procured 250 binocular microscopes for planned distribution to 211 health facilities and 25 advanced trinocular microscopes for training and research institutions, complementing 40 previously provided. The US$668,400 investment also supports distribution, installation, monitoring, and capacity-building. The project trained 42 participants, including 23 microscopists and 19 clinical engineers, on equipment use, calibration, and preventive maintenance. Four of eight damaged microscopes brought to the training were restored and returned to service. Once deployed, the new equipment is expected to expand reliable malaria diagnosis while strengthening the pipeline of skilled laboratory professionals.

> *"Your support will significantly enhance our laboratory services, which will directly improve patient care for our university community and the general public." - Prof. Richard Ohene Asiedu, Pro Vice Chancellor, Koforidua Technical University*

Mozambique: Delivering the First Lenacapavir Shipment for HIV Prevention

Mozambique needed to receive and distribute its first shipment of lenacapavir, approximately 17,200 doses, while maintaining the required temperature range of 20°C to 25°C. The MOH required support to move the product from the Zimpeto Regional Warehouse to Maputo City, Maputo Province, and intermediate warehouses in Zambézia so it could reach approximately 55 health facilities safely and on time. GHSC-PSM supported the MOH by coordinating distribution using four 20-ton trucks equipped with temperature-control systems. The product was loaded at the Zimpeto Regional Warehouse and transported to the planned destinations, with continuous temperature monitoring used to protect product quality and meet storage requirements. The project successfully delivered all 17,200 doses without compromising product integrity. The shipment marked an important milestone in Mozambique's HIV prevention response and strengthened the country's ability to use outsourced transport for temperature-sensitive commodities within the public health supply chain.

Rwanda: Preparing Malaria Commodities for the MFT Transition

In preparation for Rwanda's second phase of Multiple First-Line Therapy (MFT) implementation in August and September 2026, GHSC-PSM worked to ensure the timely availability of malaria commodities needed to support the rollout. The project procured artemether-lumefantrine (AL), dihydroartemisinin-piperaquine, and artesunate-pyronaridine, and also supported the Malaria Technical Working Group meeting held in Q3, providing inventory and supply planning information to align commodity availability with MFT requirements. Purchase orders were established, with shipments expected by the end of Q4. GHSC-PSM also planned to support distribution and reverse logistics in August so health facilities could receive the appropriate first-line treatment. These coordinated efforts strengthened Rwanda's readiness across forecasting, procurement, inventory management, and distribution, helping reduce future supply risks and support access to lifesaving malaria treatment during the MFT rollout.

Current Reporting Period

2026-Q3

ANNEX B

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

Global Supply Chain M&E Indicator Performance

FY2026 Quarter 3, April - June 2026

Delivery Impact to Date

Number of ACT treatments delivered

698,603,915

Person-years of triple-fixed-dose adult ARV treatment delivered

33,987,025

Delivery (OTIF, OTD)

Supply Plan Submissions

Product Loss

HIV/AIDS Complete Quarterly Results

Malaria Complete Quarterly Results

MCH&N Complete Quarterly Results

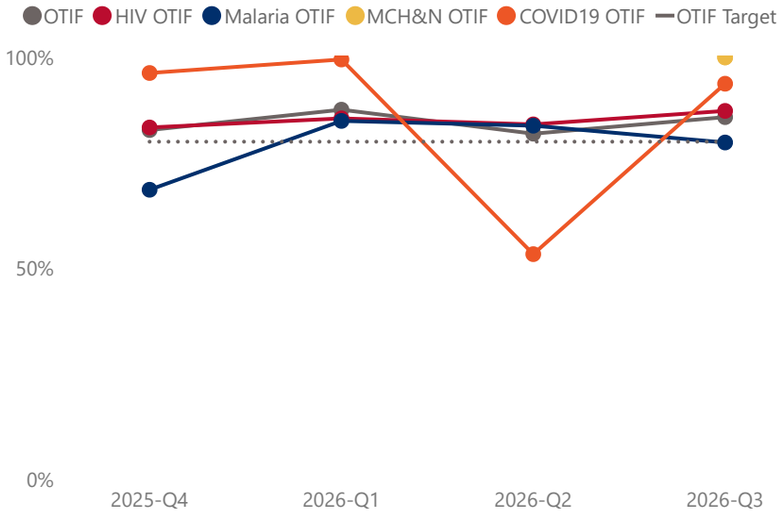
Overall Delivery Performance

Health Area: All

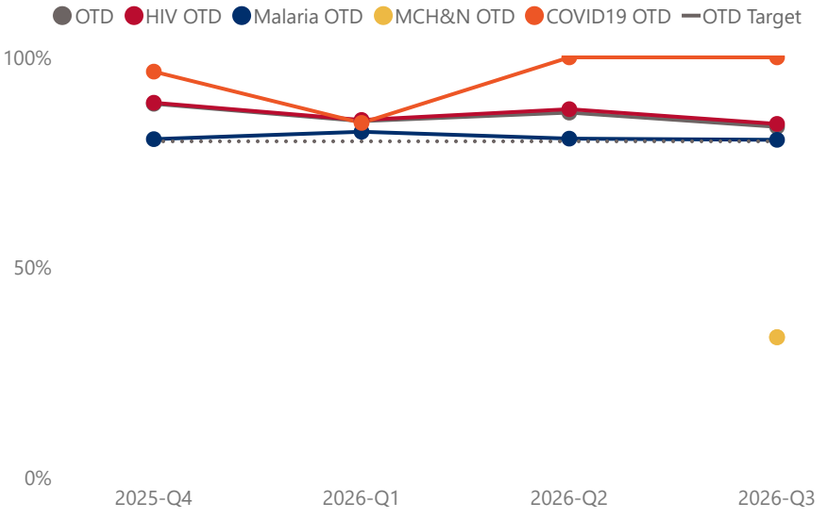
Product Category: All

Current Reporting Period: 2026-Q3

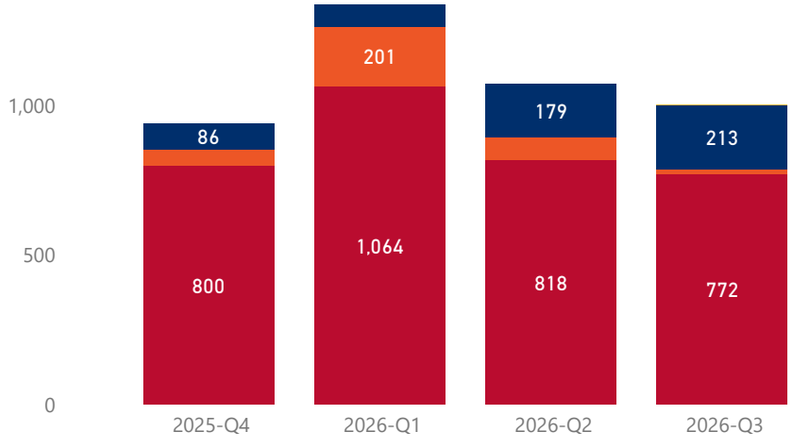
A1a. On-time, in-full delivery rate (OTIF)



A1b. On-time delivery rate (OTD)



Total number of line items delivered



Data notes

- Line items are considered on time if they are delivered between 14 calendar days before and up to 7 calendar days after the agreed delivery date.
- Quarterly indicator targets are effective beginning FY2018 Q4.
- See "Indicator Details" pages in this report for more information.
- Tracer product disaggregations for these indicators are available in the "Complete Quarterly Results" pages of this Annex.

Analysis

Overall delivery performance remained strong this quarter, at 83 percent OTD for cumulative products, while OTIF stood at 86 percent. HIV/AIDS products had an OTIF rate of 87 percent, and an OTD rate of 84 percent in FY2026 Q3. Malaria products had OTIF and OTD rates of 80 percent. COVID-19 products, while generally a smaller category and more volatile, had an OTD rate of 100 percent, and an OTIF rate of 94 percent. MCH & N deliveries are included in the OTIF and OTD scores for the first time this quarter, but is an extremely small category, and do not change the project-wide score. MCH & N products had an OTIF rate of 100 percent, but an OTD rate of 33 percent, with 2 of 3 line items not meeting the OTD requirements. Because there are so few MCH & N deliveries, each impacts the health area OTIF and OTD score greatly, but makes little to no impact on the project-wide scores. The majority of line items delivered this quarter were HIV/AIDS commodities, which accounted for 772 of the 1002 line items delivered. Malaria products had 213 line items delivered, COVID-19 products had 16 this quarter, and MCH & N had 1. Therefore, the project-wide OTD and OTIF scores are most impacted by HIV/AIDS commodities. The largest product group impacting the HIV/AIDS scores is the laboratory commodities, which had an OTIF score of 89 percent, and OTD score of 84 percent, and accounted for over 650 of the line items delivered in FY2026 Q3. For more information on the OTD and OTIF calculations, see the following pages detailing each product category, as well as the “Indicator Details” pages in this report.

Delivery Performance - HIV/AIDS

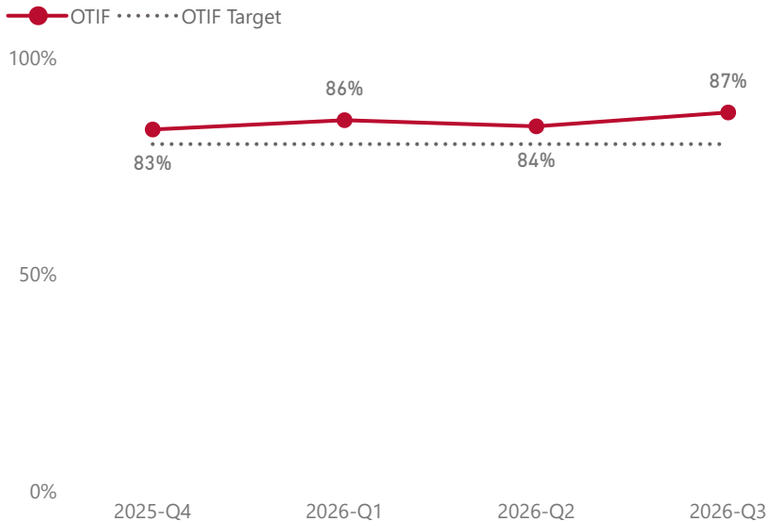
Product Category

All

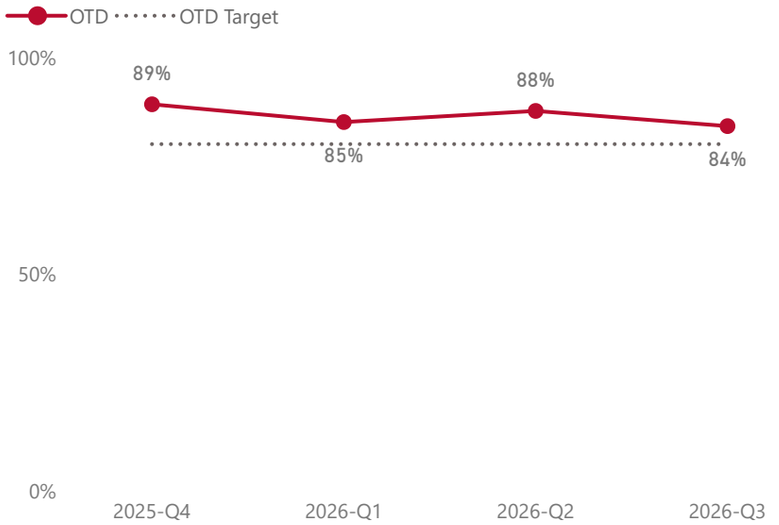
Current Reporting Period

2026-Q3

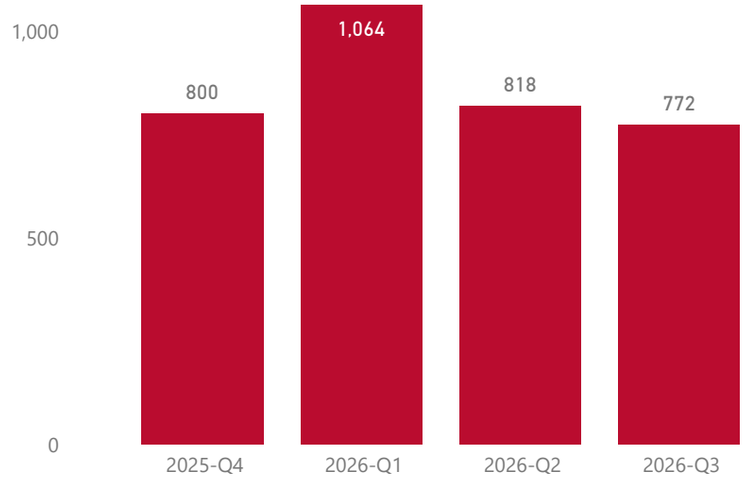
A1a. On-time, in-full delivery rate (OTIF)



A1b. On-time delivery rate (OTD)



Total number of line items delivered



Data notes

- Line items are considered on time if they are delivered between 14 calendar days before and up to 7 calendar days after the agreed delivery date.
- Quarterly indicator targets are effective beginning FY2018 Q4.
- See "Indicator Details" pages in this report for more information.
- Tracer product disaggregations for these indicators are available in the "Complete Quarterly Results" pages of this Annex.

Analysis

OTIF and OTD for HIV/AIDS commodities remained above the target of 80 percent this quarter. In FY2026 Q3, OTIF and OTD stood at 87 and 84 percent, respectively. All products, with the exception of the one Food and WASH OTD line, had 70 percent or higher for both OTIF and OTD. The largest product category, laboratory, accounted for over 650 lines of the total 772, and had an OTIF of 89 percent and an OTD of 84 percent, greatly impacting the overall HIV/AIDS rates. For more information on the OTD and OTIF calculations, see the “Indicator Details” pages in this report.

Delivery Performance - Malaria

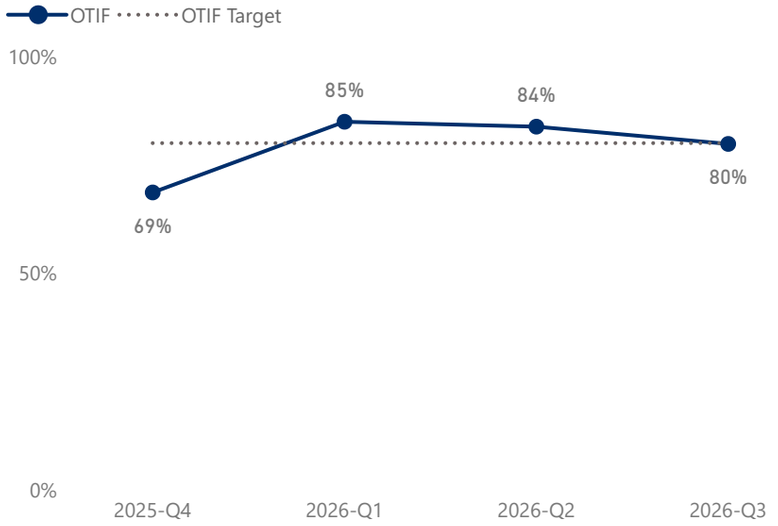
Product Category

All

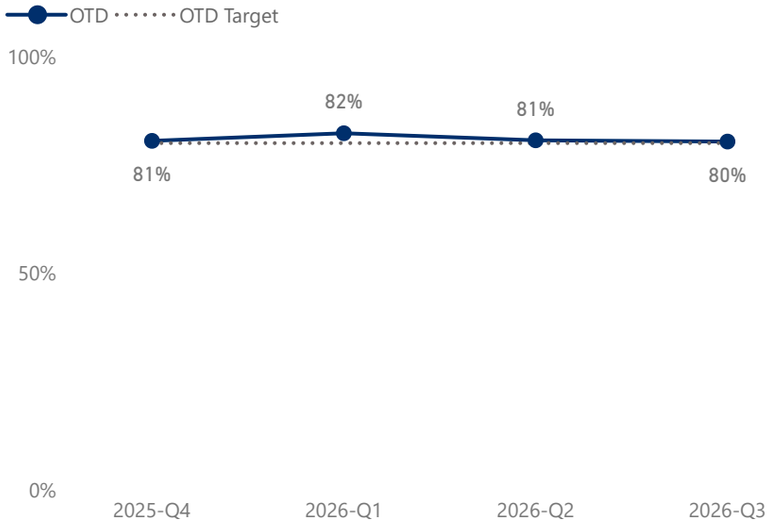
Current Reporting Period

2026-Q3

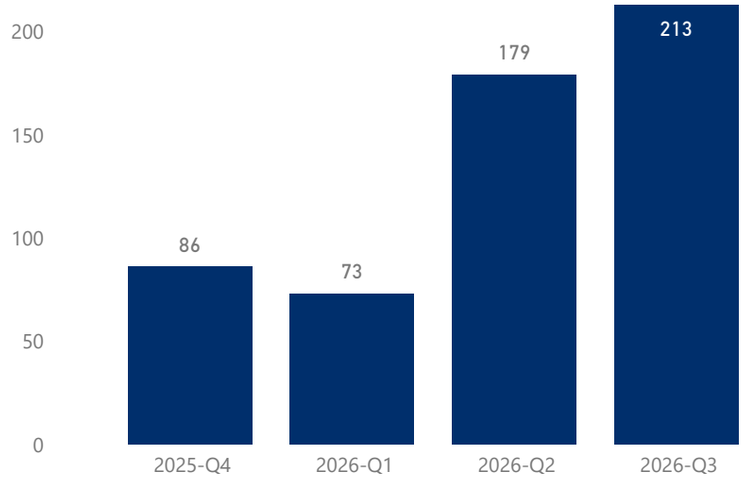
A1a. On-time, in-full delivery rate (OTIF)



A1b. On-time delivery rate (OTD)



Total number of line items delivered



Data notes

- Line items are considered on time if they are delivered between 14 calendar days before and up to 7 calendar days after the agreed delivery date.
- Quarterly indicator targets are effective beginning FY2018 Q4.
- See "Indicator Details" pages in this report for more information.
- Tracer product disaggregations for these indicators are available in the "Complete Quarterly Results" pages of this Annex.

Analysis

OTD and OTIF for malaria commodities remained at the target of 80 percent. In FY2026 Q3, OTD and OTIF both stood at 80 percent. The largest product category this quarter, ACTs, had OTD and OTIF rates of 83 percent and 77 percent, respectively, having the greatest impact on the overall malaria OTD and OTIF scores. LLINs, the second largest product category had OTD and OTIF rates of 80 percent and 73 percent, respectively. Only laboratory products, other non-pharma, and SMC had any score below 70 percent, while accounting for only 10, 2, and 8 line items, respectively, out of the 213 total line items. The delivery volume of malaria products was larger this quarter, at 213 line items, so each individual delivery impacts the overall OTIF and OTD scores this quarter less than they have in previous quarters with smaller delivery volumes. For more information on the OTD and OTIF calculations, see the “Indicator Details” pages in this report.

Delivery Performance - MCH & N

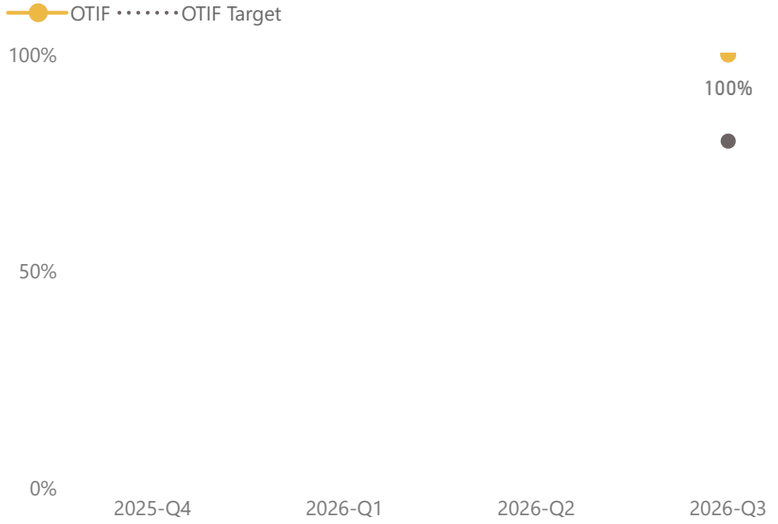
Product Category

All

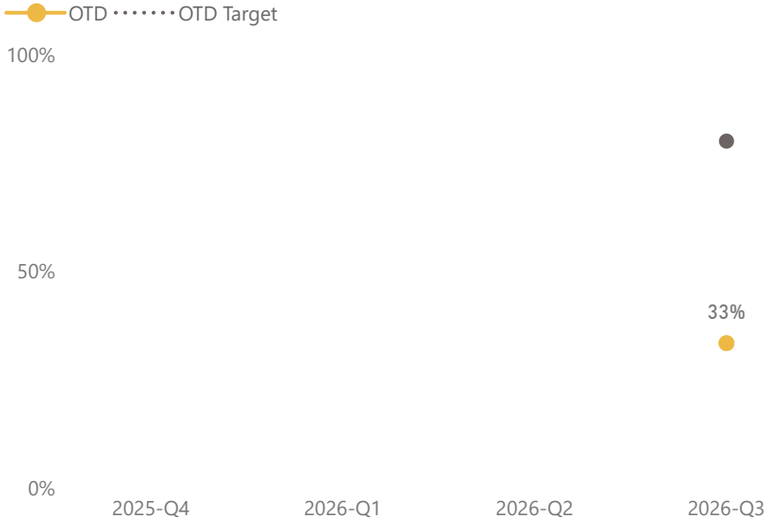
Current Reporting Period

2026-Q3

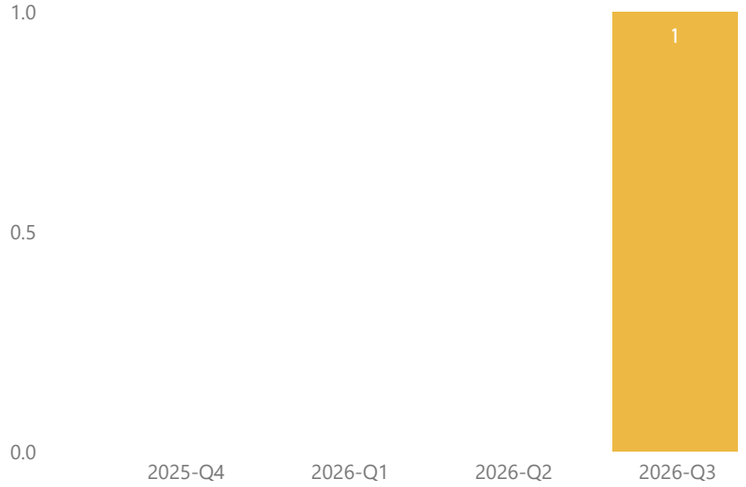
A1a. On-time, in-full delivery rate (OTIF)



A1b. On-time delivery rate (OTD)



Total number of line items delivered



Data notes

- Line items are considered on time if they are delivered between 14 calendar days before and up to 7 calendar days after the agreed delivery date.
- Quarterly indicator targets are effective beginning FY2018 Q4.
- See "Indicator Details" pages in this report for more information.
- Tracer product disaggregations for these indicators are available in the "Complete Quarterly Results" pages of this Annex.

Analysis

For the first time, MCH & N deliveries have been made in FY 2026 Q3. With only one line item delivered, the OTIF rate was 100 percent. The OTD denominator, however, includes all line items with (adjusted) delivery dates within the quarter, for a total of 3 line items and a score of 33 percent, falling below the project-wide OTD goal of 80 percent. Because there are so few MCH & N deliveries, each impacts the health area OTIF and OTD score greatly, but makes little to no impact on the project-wide scores. For more information on the OTD and OTIF calculations, see the "Indicator Details" pages in this report.

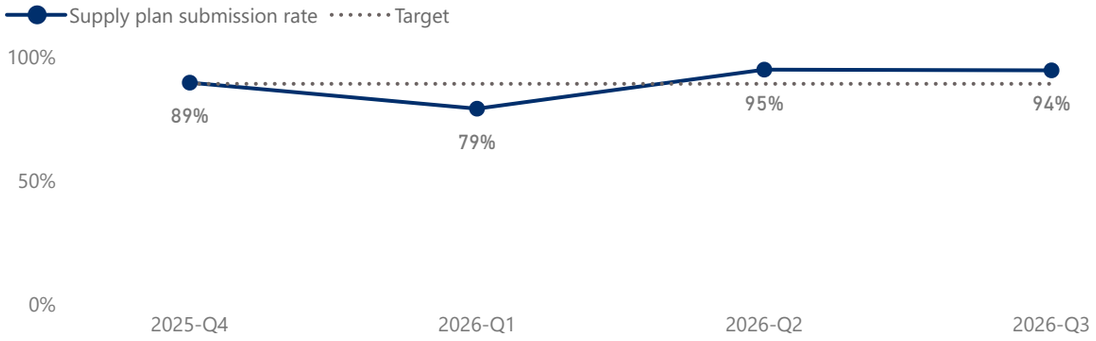
Supply Plan Submission - HIV/AIDS

Current Reporting Period

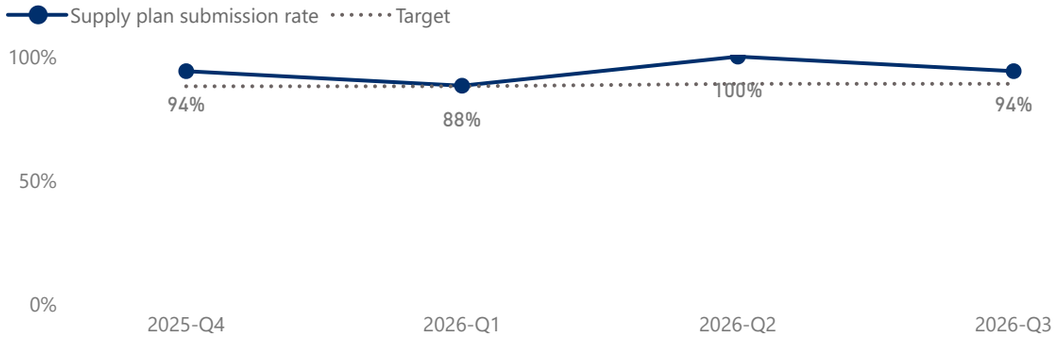
2026-Q3

B6. Quarterly supply plan submission rate to GHSC-PSM HQ

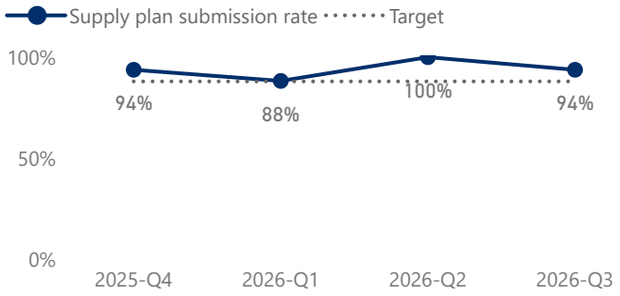
ARVs



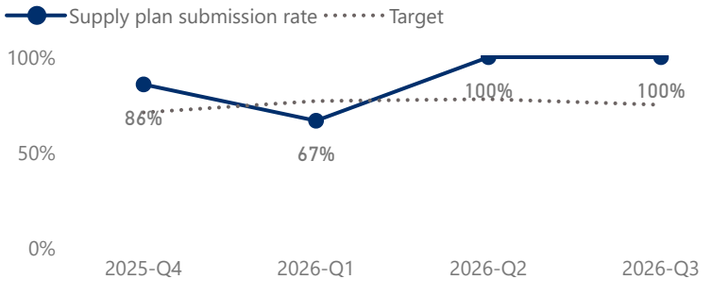
Lab (HIV diagnostics)



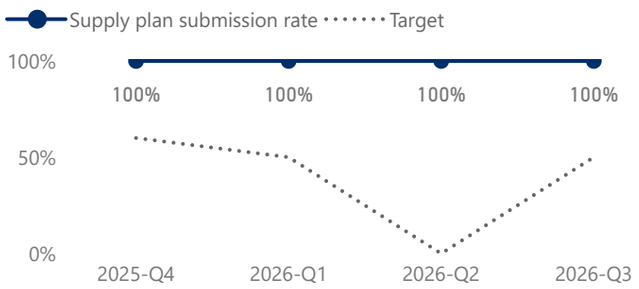
RTKs



Tuberculosis Preventive Treatment (TPT)



Essential Medicines



Analysis

Tanzania missed submissions for ARV, RTKs, and laboratory products this quarter. All other supply plan submission requirements were met.

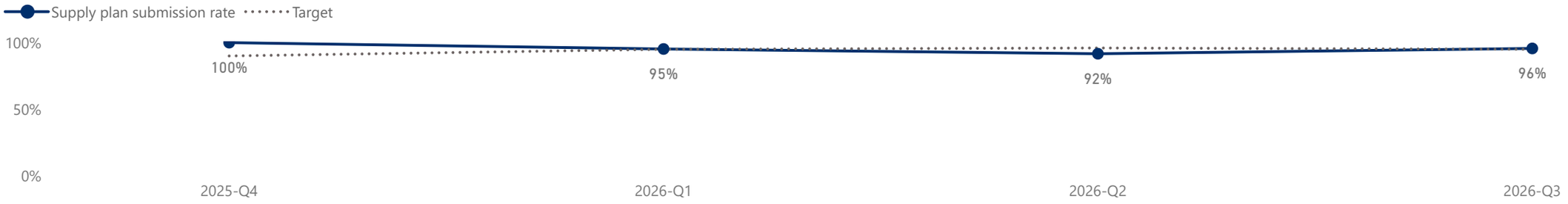
Supply Plan Submissions - Malaria and Nutrition

Current Reporting Period

2026-Q3

B6. Quarterly supply plan submission rate to GHSC-PSM HQ

Malaria commodities



Nutrition commodities



MCH commodities



Analysis

Only one country missed the malaria supply plan submission this quarter, Tanzania.

For the first time, nutrition supply plans have been designated as Priority 1 for one country this quarter, Malawi. The country submitted the plan on time for a 100 percent submission rate. There are no targets set for nutrition supply plan submissions. Malawi also submitted the one required MCH commodities supply plan for this quarter for a 100 percent submission rate.

Product Loss

Current Reporting Period

2026-Q3

C7a. Product losses due to expiry in GHSC-PSM-controlled warehouses (Current Quarter)

Reporting Period	Health Area	Product Group	Loss Value	% Loss
2026-Q3	TO1 - HIV	NA	$0	0.00%
2026-Q3	TO2 - Malaria	NA	$0	0.00%

C7b. Product loss due to theft, damage and other causes while in GHSC-PSM control (Current Quarter)

Health Area	Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
TO1 - HIV	Nepal	Damage	Infant Warmers (COVID-19)	$4,662	$72,326,445	0.01%
TO1 - HIV	Nigeria	Missing product	Reagents	$870	$72,326,445	0.00%
TO2 - Malaria	Cameroon	Missing product	Artesunate Injectable	$675	$63,958,585	0.00%

Data note for C7a: Average inventory balance is calculated using the closing balance at the end of each month.

Ref	Analysis
C07a	There were no expiries of HIV/AIDS products in GHSC-PSM's RDC inventory this quarter.
C07a	There were no expiries of malaria products in GHSC-PSM's RDC inventory this quarter.

Ref	Analysis
C07b	There were three loss incidents this quarter that occurred in the global supply chain: one damaged shipment to Nepal, one case of a missing product to Cameroon, and one incorrect quantity of products to Nigeria. In Nepal, two cartons of HIV/AIDS health area-funded infant warmers were damaged for the loss of $4,662. In Cameroon, 5 boxes or 500 units of artesunate injectable was found to be missing upon delivery, for a loss of $675. In Nigeria, one line item of WASH reagents had been noted as missing upon delivery, and the vendor is working to correct the error. The loss for this incident is $870.

Complete Quarterly Results (HIV/AIDS)

Reporting Period

2026-Q3

A1a. OTIF rate / A1b. OTD rate

Health Area	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter
TO1 - HIV	**87%**	**772**	**84%**	**852**
Adult ARV	71%	38	79%	38
Food and WASH			0%	1
Laboratory	89%	657	84%	740
Other Non-Pharma	73%	15	85%	13
Other Pharma	93%	15	100%	16
Other RTK	70%	10	88%	8
Pediatric ARV	82%	34	85%	33
TB HIV	100%	3	100%	3
TO1 - COVID19	**94%**	**16**	**100%**	**15**
COVID19	94%	16	100%	15
Total	**87%**	**788**	**84%**	**867**

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
ARVs	94%	18
Essential Medicines	100%	4
Lab (HIV diagnostics)	94%	17
RTKs	94%	16
TPT	100%	8

C7a and C7b. Product loss due to expiry, theft, damage, and other causes

Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
Nepal	Damage	Infant Warmers (COVID-19)	$4,662	$72,326,445	0.01%
Nigeria	Missing product	Reagents	$870	$72,326,445	0.00%
RDC	Expiry	NA	$0	$632,915	0.00%

Complete Quarterly Results (Malaria)

Reporting Period

2026-Q3

A1a. OTIF rate / A1b. OTD rate

Health Area	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter
TO2 - Malaria	**80%**	**213**	**80%**	**224**
ACTs	77%	71	83%	71
Laboratory	40%	10	25%	16
LLINs	73%	45	80%	41
mRDTs	96%	23	96%	24
Other Non-Pharma	50%	2	50%	2
Other Pharma	75%	4	100%	3
Severe Malaria Meds	89%	36	89%	37
SMC	100%	8	67%	15
SP	86%	14	93%	15
Total	**80%**	**213**	**80%**	**224**

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
Malaria commodities	95%	22

C7a and C7b. Product loss due to expiry, theft, damage, and other causes

Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
RDC	Expiry	NA	$0	$72,436	0.00%
Cameroon	Missing product	Artesunate Injectable	$675	$63,958,585	0.00%

Complete Quarterly Results (MCH & N)

Reporting Period

2026-Q3

A1a. OTIF rate / A1b. OTD rate

Health Area	OTIF	Total # of Line Items Delivered	OTD	Total # of Line Items with ADDs in the quarter
MCHN	**100%**	**1**	**33%**	**3**
Food and WASH	100%	1	50%	2
Other Pharma			0%	1
Total	**100%**	**1**	**33%**	**3**

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
MCH commodities	100%	1
Nutrition	100%	1

Indicator Details

Check out the GHSC-PSM IDIQ M&E Plan for complete details on all our indicators.

Delivery Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
A01a	On Time, In Full Delivery (OTIF) - Percentage of line items delivered on time and in full, within the minimum delivery window (within -14/+7 calendar days of the agreed delivery date (ADD))	Number of line items delivered to the recipient on time and in full during the quarter	Total number of line items delivered to the recipient during the quarter	ARTMIS	Quarterly	Lines items are considered on-time and in-full if the full ordered quantity of the line item is delivered to the recipient within the -14/+7 day delivery window. If the line item is partially delivered within the window, it may be considered on-time but not in-full.
A01b	On Time Delivery (OTD) — Percentage of line items delivered on time, within the minimum delivery window (within -14/+7 calendar days of the agreed delivery date (ADD))	Number of line items with an ADD during the quarter that were delivered to the recipient on time	Total number of line items with an ADD during the quarter	ARTMIS	Quarterly	

Product Loss Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
C07a	Percentage of product lost due to expiry while under GHSC-PSM control (product loss percentage)	Total value of product lost due to expiry during the quarter	Average inventory balance (in USD) during the quarter	Inventory reports	Quarterly	Expiries from the Regional Distribution Centers (RDCS) are presented in the GSC section of this report. Expiries that occur in warehouses that GHSC-PSM manages in countries are reported in the country-specific sections of this report.
C07b	Percentage of product lost due to theft, damage, or other causes, while under GHSC-PSM control (product loss percentage)	Total value of product lost due to theft, damage, or other causes during the quarter	For losses in transit: Total value (in USD) of product delivered during the quarter For losses in storage: Average inventory balance (in USD) during the quarter	GHSC-PSM Continual Improvement system reports	Quarterly	Product losses due to incidents are reported only after the actual value of the loss has been determined, which may be later than the quarter in which the incident took place or was first reported to GHSC-PSM Continual Improvement.

Indicator Details

Check out the GHSC-PSM IDIQ M&E Plan for complete details on all our indicators.

Delivery Impact Indicators

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
NA	Number of ACT treatments delivered	Sum of ACT treatments delivered to countries, where a treatment is equal to one blister strip		ARTMIS	Quarterly	Includes malaria treatments delivered over the life of the project, with "full dose" based on WHO-recommended treatment guidelines. Specific medicines counted are limited to those used only for treatments, and not primarily as prophylaxis. Specifically, it includes Artemether/Lumefantrine, Artesunate/Amodiaquine, Artenimol/Piperaquine, and Artesunate/Pyronaridine formulations.
NA	Person-years of triple-fixed-dose adult ARV treatment delivered	Sum of the monthly treatment units of adult first-line ARV treatments delivered to countries , divided by 12		ARTMIS	Quarterly	This report only includes Adult Efavirenz/Lamivudine/Tenofovir (TLE), Nevirapine/Lamivudine/Zidovudine (NLZ), Piperaquine/Dihydroartemisinin (DHA-PPQ), and Dolutegravir/Lamivudine/Tenofovir (TLD). Doses for calculating treatments are based on World Health Organization (WHO)-recommended guidelines. The calculation of patient-years allows GHSC-PSM to monitor effectiveness and efficiency by a standard unit.

Key Performance Overview - IDIQ

		FY 2025 Q4	FY 2026 Q1	FY 2026 Q2	FY 2026 Q3	FY 2026
Reporting Period (Quarter) Start Date		07/01/25	10/01/25	01/01/26	04/01/26	10/01/25
Reporting Period (Quarter) End Date		09/30/25	12/31/25	03/31/26	06/30/26	09/30/26
Global Supply Chain						
A1a.	Percentage of line items delivered on time and in full, within the minimum delivery window	83%	88%	82%	86%	NA
A1b.	Percentage of line items delivered on time, within the minimum delivery window	89%	85%	87%	83%	NA

Important: Key performance metrics on this page are intended to provide an overall snapshot of the project's performance. They may conceal nuances of TO and/or country performance and must be interpreted in light of individual TO and/or country performance of more granular data.

Key Performance Overview - IDIQ

		FY 2025 Q4	FY 2026 Q1	FY 2026 Q2	FY 2026 Q3	FY 2026
Reporting Period (Quarter) Start Date		07/01/25	10/01/25	01/01/26	04/01/26	10/01/25
Reporting Period (Quarter) End Date		09/30/25	12/31/25	03/31/26	06/30/26	09/30/26
In-Country						
B1.	Stockout rate at SDPs	30%	25%	27%	33%	NA
B2.	Percentage of stock status observations in storage sites where commodities are stocked according to plan, by level in supply system	24%	20%	22%	22%	NA
B3.	SDP reporting rate to the logistics management information system (LMIS)	88%	89%	89%	92%	NA

Important: Key performance metrics on this page are intended to provide an overall snapshot of the project's performance. They may conceal nuances of TO and/or country performance and must be interpreted in light of individual TO and/or country performance of more granular data.

Key Performance Overview By Health Area

Indicator		HIV/AIDS					Malaria				
		Target	2025 Q4	2026 Q1	2026 Q2	2026 Q3	Target	2025 Q4	2026 Q1	2026 Q2	2026 Q3
A1a	Percentage of line items delivered on time and in full, within the minimum delivery window (*Total number of line items delivered*)	80%	83% (800)	86% (1064)	84% (818)	87% (772)	80%	69% (86)	85% (73)	84% (179)	80% (213)
A1b	Percentage of line items delivered on time within the minimum delivery window (*Total number of ADDs in the quarter*)	80%	89% (796)	85% (1100)	88% (770)	84% (852)	80%	81% (77)	82% (79)	81% (186)	80% (224)

Key Performance Overview By Health Area

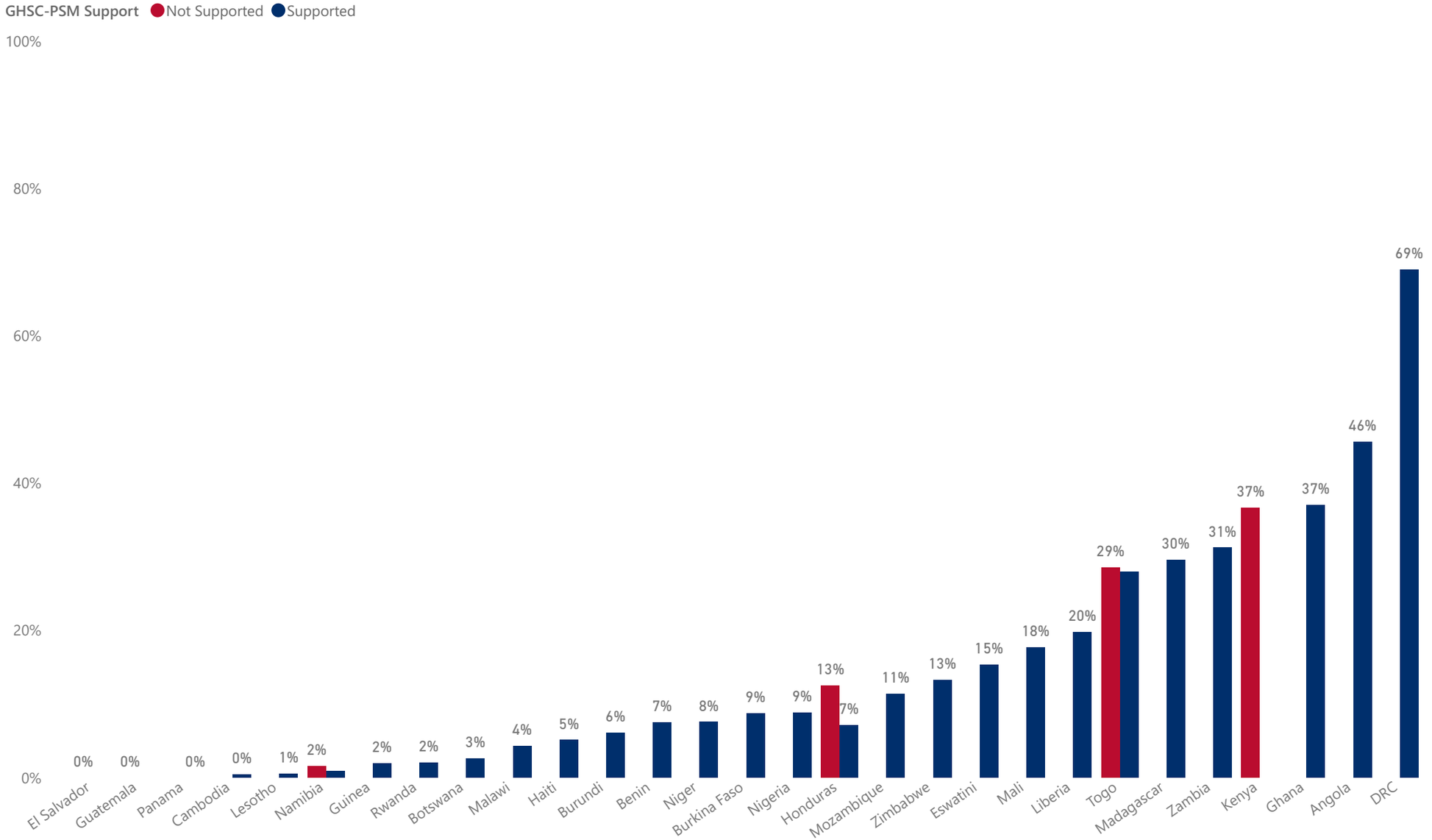
Indicator		HIV/AIDS					Malaria				
			2025 Q4	2026 Q1	2026 Q2	2026 Q3		2025 Q4	2026 Q1	2026 Q2	2026 Q3
In-country Context, Performance, and Sustainability											
B1	Stockout rate at SDPs		11%	10%	9%	24%		34%	28%	31%	36%
B2	Percentage of stock status observations in storage sites where commodities are stocked according to plan, by level in supply system		23%	26%	29%	27%		24%	17%	17%	18%
B3	SDP reporting rate to the logistics management information system (LMIS)		89%	90%	91%	92%		87%	89%	88%	92%
C7a	Percentage of product lost due to expiry while under GHSC-PSM control	*See Product Loss and country-specific indicator pages for detailed data for this indicator.*									
C7b	Percentage of product lost due to theft, damage, or other causes while under GHSC-PSM control	*See Product Loss and country-specific indicators pages for detailed data for this indicator.*									

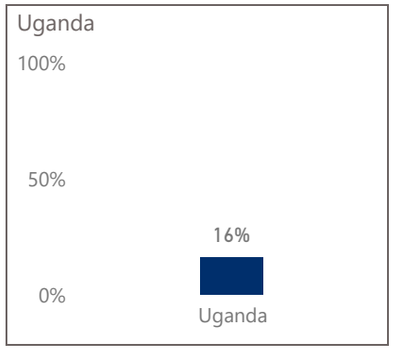
SDP Stockout Rates by Country

Health Area: All

Tracer Product: All

Current Quarter: 2026-Q3





Data Notes

Results shown here are weighted averages of product-level stockout rates in each country. Composite stockout rates, including AL inability to treat stockout rates, are excluded to prevent double-counting within the overall rates. See malaria and family planning stockout data on the following pages for more detail.

Uganda is reported separately because its overall result includes a composite stockout rate (AL inability to treat). See the malaria stockout page for more detail.

Bangladesh does not report (on any indicators) given the country's unique scope of work and shortened closeout timeline.

SDP Stockout Rates by Country - HIV/AIDS

Current Quarter

2026-Q3

GHSC-PSM Supported Health Area	Angola	Benin	Botswana	Burkina Faso	Burundi	DRC	El Salvador	Eswatini	Ghana	Guatemala	Haiti	Honduras	Lesotho	Liberia	Malawi	Mali	Mozambique	Namibia	Nigeria	Panama	Rwanda	Togo	Uganda	Zambia	Zimbabwe
HIV/AIDS	**9.3%**	**0.0%**	**2.6%**	**1.5%**	**4.3%**	**28.1%**	**0.0%**	**15.3%**	**28.7%**	**0.0%**	**5.1%**	**7.1%**	**0.5%**	**10.8%**	**6.2%**	**30.1%**	**8.5%**	**0.9%**	**3.3%**	**0.0%**	**2.6%**	**0.0%**	**22.3**	**10.6%**	**11.0%**
1st line adult ARV	27.3%	0.0%	0.0%	0.0%	2.2%	12.6%	0.0%	0.8%	14.1%	0.0%	1.4%	10.7%	0.0%	4.2%	4.6%	16.3%	1.4%	5.6%	1.1%	0.0%	1.7%	0.0%	3.6%	1.5%	0.2%
2nd line adult ARV	0.0%	0.0%		0.0%	4.3%	12.9%	0.0%	4.4%	54.6%	0.0%	19.7%	5.6%	0.0%		0.6%		0.7%	0.0%	2.7%	0.0%	2.5%	0.0%	42.4%	35.5%	4.6%
Pediatric ARV	0.0%	0.0%	0.0%	0.0%		59.1%	0.0%	3.0%	2.1%	0.0%	0.0%	0.0%	0.0%	33.3%	1.8%	22.4%	0.9%	0.0%	2.8%	0.0%	3.5%	0.0%	24.5%	32.5%	8.0%
First RTK	0.0%	0.0%	5.9%	6.3%	15.5%	30.4%	0.0%	20.9%	42.3%		1.4%		0.0%	4.2%	7.9%	38.4%	10.2%	0.0%	9.3%		4.2%	0.0%	11.2	6.7%	14.1%
Second RTK	18.2%	0.0%	0.0%	0.0%				28.1%	36.9%		2.9%		0.0%	4.2%	12.3%	44.7%	29.0%	0.0%	5.5%		2.9%	0.0%	22.3	11.2%	20.1%
Tie-breaker RTK						25.7%		15.1%						8.3%				0.0%	14.6%				38.8%		13.9%
Viral load reagent		0.0%	28.6%	0.0%			0.0%	0.0%					11.4%				0.0%		0.0%		0.0%	0.0%		0.0%	90.6%
Viral load consumable			0.0%	14.3%				0.0%											0.0%		0.0%				
EID reagent			0.0%	0.0%				50.0%					2.3%				0.0%		5.9%		0.0%	0.0%		0.0%	14.1%
EID consumable			0.0%	0.0%				50.0%													0.0%				
Most used 3rd line ARV										0.0%															

SDP Stockout Rates by Country - HIV/AIDS, cont.

Current Quarter

2026-Q3

GHSC-PSM Support	Not Supported				
Health Area	El Salvador	Guatemala	Honduras	Kenya	Namibia
HIV/AIDS	**0.0%**	**0.0%**	**12.5%**	**47.0%**	**1.6%**
1st line adult ARV	0.0%	0.0%	13.6%	14.9%	0.0%
2nd line adult ARV	0.0%	0.0%	0.0%	98.5%	0.0%
Pediatric ARV		0.0%	33.3%	20.5%	0.0%
First RTK	0.0%			27.0%	0.0%
Second RTK					2.4%
Tie-breaker RTK					7.1%
Viral load reagent	0.0%			25.0%	
Viral load consumable				66.1%	
EID reagent				0.0%	
EID consumable				68.7%	
Most used 3rd line ARV		0.0%			

SDP Stockout Rates by Country - Malaria

Current Quarter

2026-Q3

Table 1. Overall malaria stockout rates with product breakdown

GHSC-PSM Support	Not Supported		Supported																	
Health Area	Kenya	Togo	Angola	Benin	Burkina Faso	Burundi	Cambodia	DRC	Ghana	Guinea	Liberia	Madagascar	Malawi	Mali	Mozambique	Niger	Nigeria	Rwanda	Togo	Zambia	Zimbabwe
Malaria	**12.4%**	**28.5%**	**46.1%**	**7.6%**	**8.8%**	**6.3%**	**0.4%**	**70.1%**	**38.1%**	**1.9%**	**20.0%**	**29.6%**	**3.2%**	**17.2%**	**13.6%**	**7.5%**	**9.8%**	**1.5%**	**28.5%**	**42.2%**	**15.8%**
AL 6x1	6.1%	7.9%	84.1%	18.6%	6.2%	4.6%		78.9%		2.8%	14.3%		1.5%	9.3%	10.4%	6.2%	7.8%	0.0%	7.9%	54.1%	25.1%
AL 6x2	7.6%	8.3%	77.4%	8.2%	6.0%	4.2%		71.1%	42.6%	2.6%	16.8%		2.7%	13.5%	13.9%	4.0%	6.5%	0.0%	8.3%	43.4%	14.3%
AL 6x3	7.5%	19.6%	84.0%	7.0%	6.3%	5.3%		70.7%		1.7%	21.1%		2.3%	30.0%	20.7%	11.1%	7.5%	3.8%	19.6%	58.4%	13.2%
AL 6x4	20.6%	12.5%	72.4%	8.0%	23.1%	5.4%		70.7%	35.4%	1.3%	37.4%		2.4%	10.1%	14.2%	5.4%	8.7%	1.3%	12.5%	23.7%	18.1%
AS/AQ 100/270mgx3			30.0%					82.1%				35.8%									
AS/AQ 100/270mgx6			16.6%					80.5%	48.0%			30.1%									
AS/AQ 25/67.5mg			23.6%					81.9%	45.0%			52.5%									
AS/AQ 50/135mg			25.1%					82.1%	45.6%			26.0%									
ASPY 180/60mg, 9 tabs					1.6%		0.1%											0.0%			
ASPY 60/20mg, 3 sachets					0.5%													0.6%			
DHA-PPQ 20mg/160mg 3 tabs					17.0%													4.7%			
DHA-PPQ 40mg/320mg 3 tabs																		1.1%			
DHA-PPQ 40mg/320mg 6 tabs		72.9%																	72.9%		
DHA-PPQ 40mg/320mg 9 tabs		81.6%			5.1%														81.6%		
LLINs		19.8%			8.3%	9.0%		66.9%			19.2%		2.9%	21.2%	29.6%	19.6%	30.4%		19.8%		4.3%
Rapid diagnostic test for malaria	11.6%	9.8%	10.1%	1.3%	4.8%	7.5%	0.7%	41.0%	25.8%	0.8%	14.0%	12.8%	2.7%	19.7%	4.7%	3.6%	5.8%	2.7%	9.8%	31.2%	13.0%
Sulphadoxine-pyrimethamine	18.4%	26.1%	26.4%	2.8%	13.9%	11.0%		45.3%	31.1%	2.3%	17.4%	20.2%	8.5%	16.4%	11.2%	4.0%	21.7%		26.1%	43.5%	8.0%

Data Notes

Table 1: Overall malaria stockout rates are calculated as an aggregation of stock observations across all malaria products. AL inability to treat is excluded from the overall result, as AL presentations are already factored in individually.

SDP Stockout Rates by Country - Malaria, cont.

Current Quarter

2026-Q3

Table 2. Inability to treat with AL (Composite stockout rate of four AL presentations)

GHSC-PSM Support	Supported																
Health Area	Angola	Benin	Burkina Faso	Burundi	DRC	Ghana	Guinea	Liberia	Malawi	Mali	Mozambique	Niger	Nigeria	Rwanda	Togo	Uganda	Zambia	Zimbabwe
Malaria																		
AL inability to treat	5.1%	0.0%	2.6%	2.2%	60.9%	20.6%	0.5%	8.7%	0.4%	1.5%	4.1%	0.2%	3.1%	0.0%	3.5%	4.0%	10.6%	3.2%

Table 3. Malaria stockout rates for Uganda

GHSC-PSM Support	Supported
Health Area	Uganda
Malaria	**5.8%**
AL inability to treat	4.0%
Rapid diagnostic test for malaria	7.6%

Data Notes

Table 2: AL inability to treat is presented for each country that uses AL, separately from the overall results in Table 1.

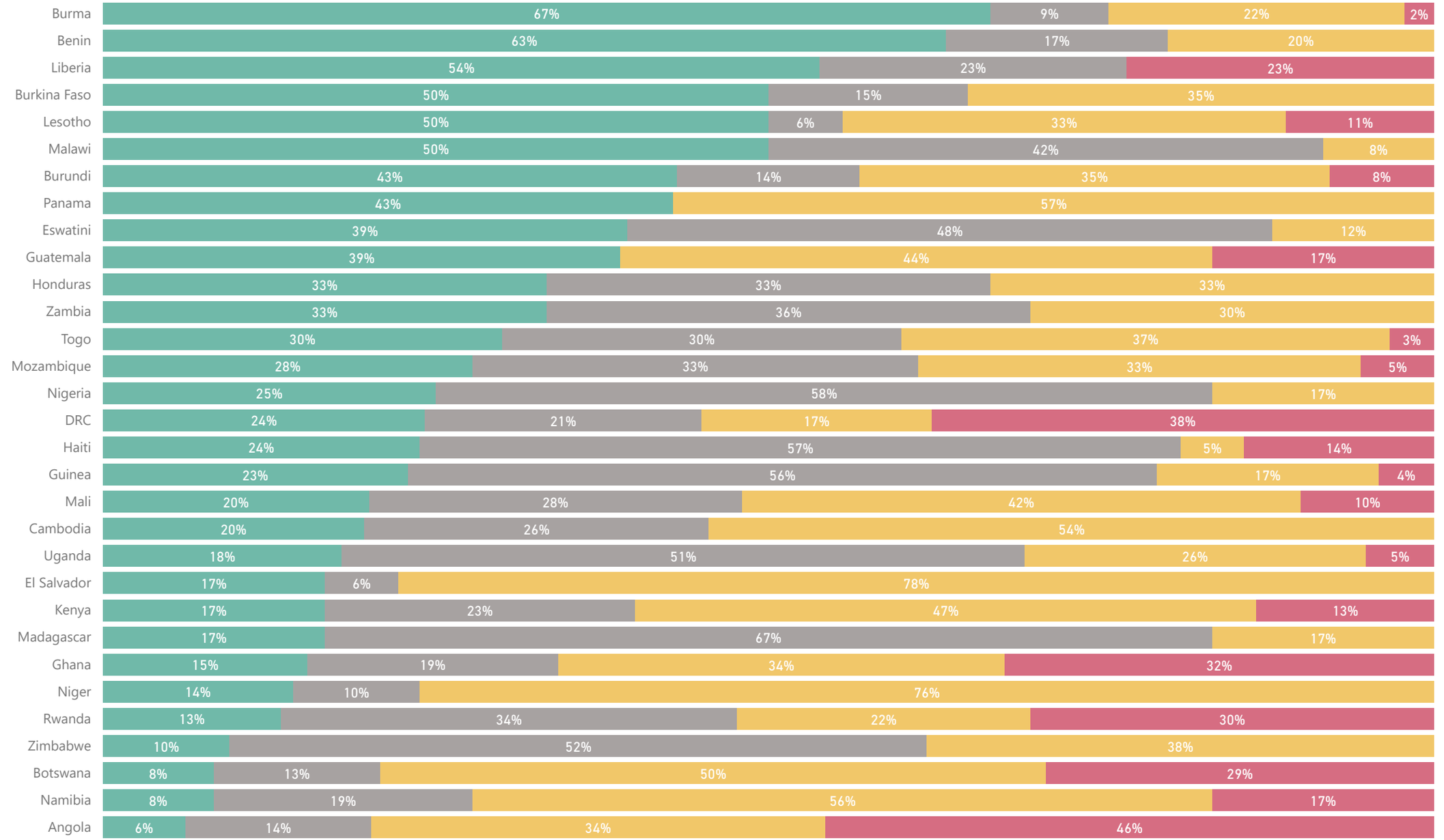
Table 3: In Uganda, health facilities report on all presentations of AL as a single item, equivalent to AL inability to treat. Stockout data is not available by individual presentation. As a result, GHSC-PSM incorporates AL inability to treat into Uganda's overall stockout rate to ensure that these essential products are represented.

Stocked According to Plan Rates by Country

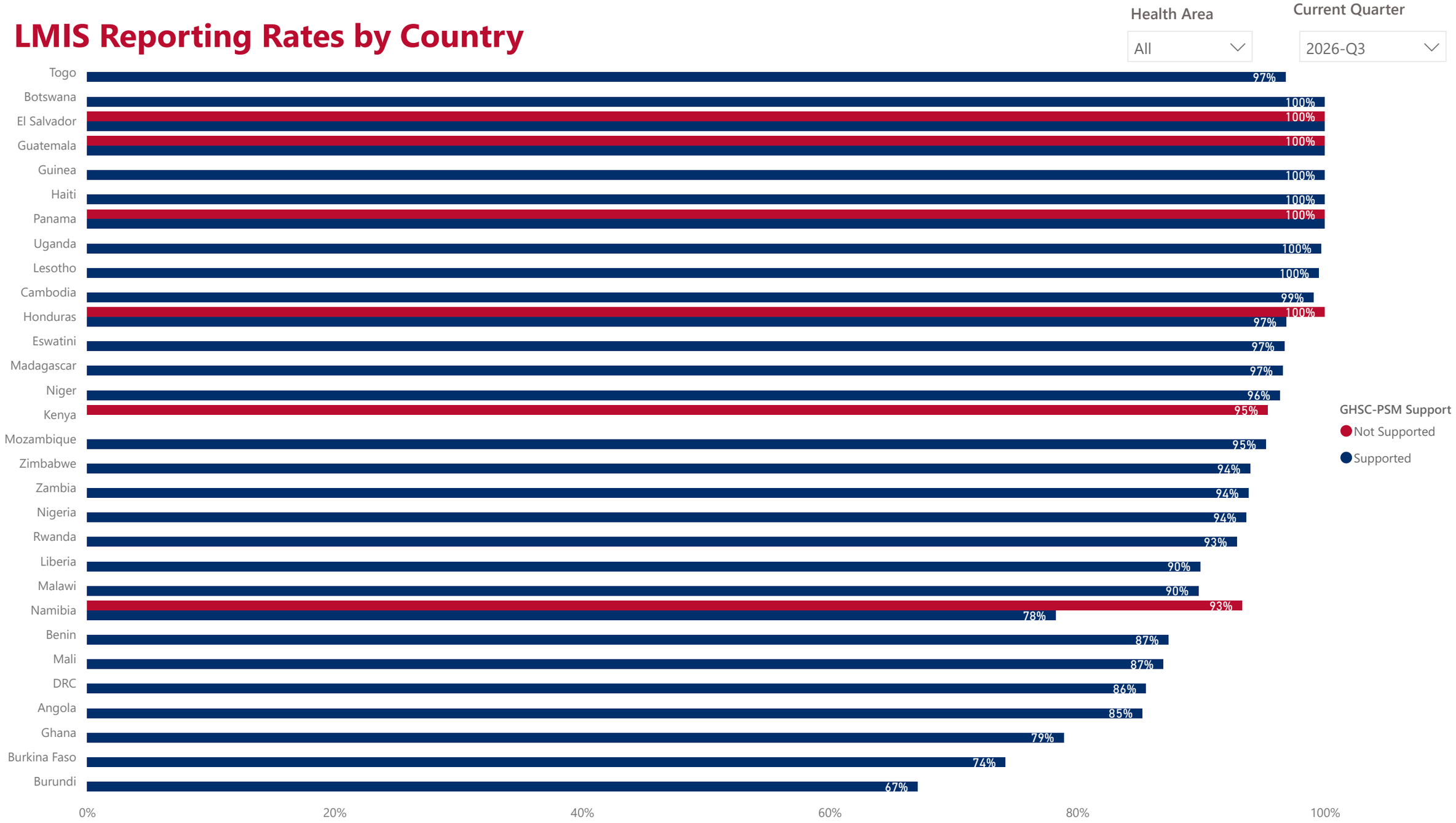
Current Quarter

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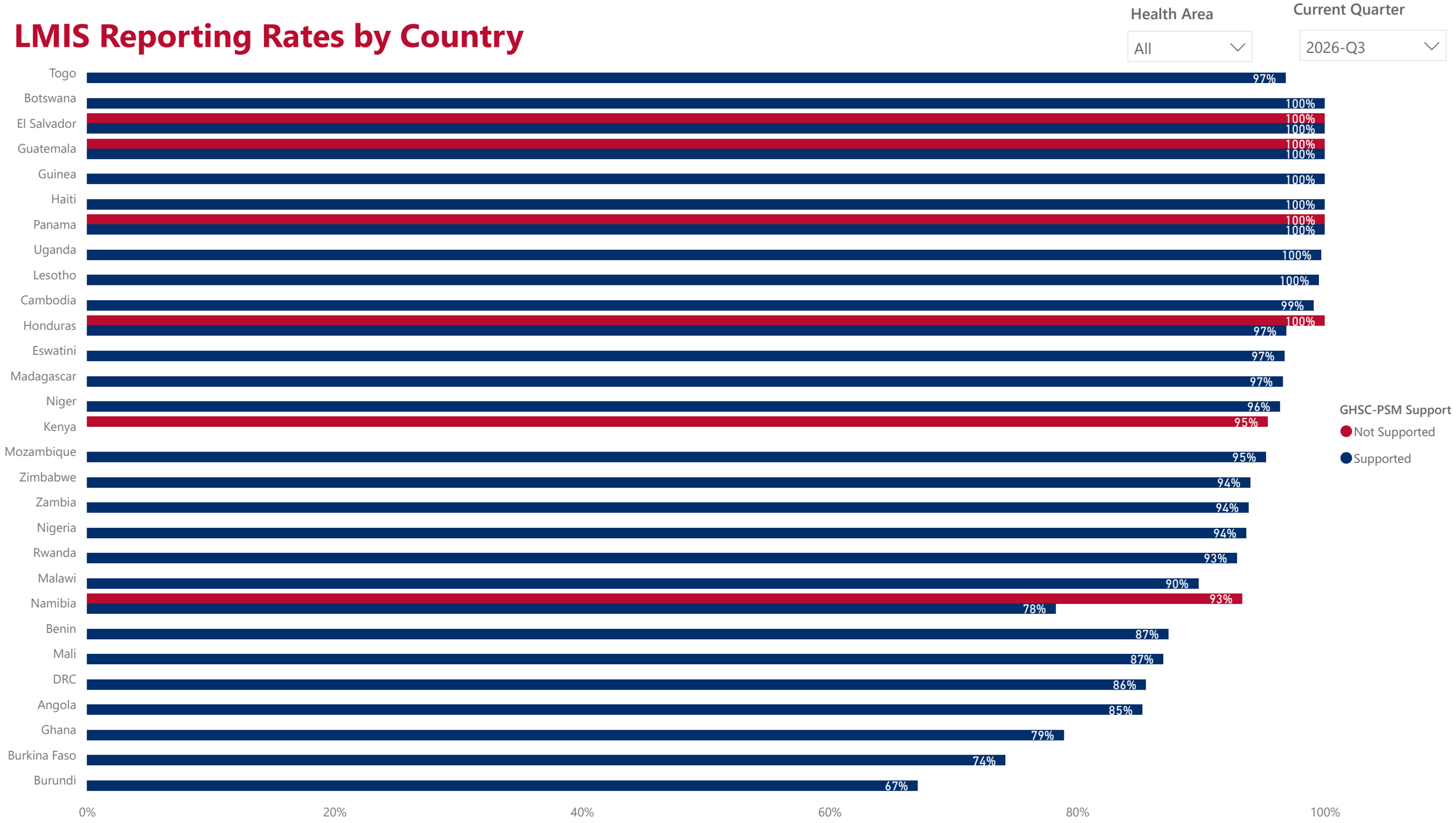
Below data shows observations from the central and first subnational storage levels for which data is available in each country. Data on individual country pages may include additional supply chain levels. Results are aggregated across health areas.



LMIS Reporting Rates by Country



LMIS Reporting Rates by Country



Quarterly Indicator Details

Check out the GHSC-PSM IDIQ M&E Plan for complete details on all our indicators.

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
B01	Stockout rate at SDPs	Number of SDPs that were stocked out of a specific tracer product according to the ending balance of the most recent logistics report (or on the day of site visit)	Total number of SDPs that reported/were visited in GHSC-PSM-supported countries that offer the tracer product	LMIS reports, End User Verification surveys, other country-specific stock data sources	Quarterly	Stockout rates are provide for all tracer products for which data is available, regardless of whether GHSC-PSM procures or delivers the product. Data is provided for the ending balance of the middle month of each quarter for most countries. "Composite stockouts" are presented for select malaria commodities, indicating where SDPs are stocked out of all products they offer within the same product type. At the health area level, aggregated stockout rates are calculated based on all SDP stock observations summed across all tracer products for that health area. Health area-level denominators will therefore be greater than the number of SDPs that reported in that health area.
B02	Percentage of stock status observations in storage sites, where commodities are stocked according to plan, by level in supply system	Number of stock status observations for a tracer product that are within the designated minimum and maximum quantities at storage sites	Total number of stock status observations for a tracer product at storage sites	Warehouse management information systems, partner stock reports	Quarterly	Stocked according to plan rates are provided for all tracer products for which data is available, regardless of whether GHSC-PSM procures, delivers, or manages inventory for the product. Stock "observations" are typically based on inventory reports and will include as many observations (monthly, quarterly) from as many storage locations as are available at the time of reporting.
B03	SDP reporting rate to the LMIS	Number of SDPs whose LMIS report(s) or order form(s) were received at the central level within 30 days of the specified in-country deadline	The total number of SDPs in country that are required to report	LMIS reports, other country-specific stock data sources	Quarterly	All sites that have submitted reports within 30 days of the country-specified deadline are considered "reporting" for this indicator. Some countries have limited access to SDP-level data and are reporting rates from a small number of sites. Number of sites reporting for each country is listed on the "Complete Results" page for each country.
B06	Percentage of required supply plans submitted to GHSC-PSM during the quarter	Number of required supply plans that were submitted to GHSC-PSM in the quarter	Total number of required supply plans	Country supply plans, FASP tracker	Quarterly	Supply plan submission expectations are determined in consultation with USAID, headquarters FASP team, and field office technical leads. Submission rates are only calculated for prioritized submissions. Additional supply plans beyond the requirements are often submitted to GHSC-PSM headquarters.

Quarterly Indicator Details

Check out the GHSC-PSM IDIQ M&E Plan for complete details on all our indicators.

Indicator Code	Name	Numerator	Denominator	Data Source(s)	Reporting frequency	Other Info
C07a	Percentage of product lost due to expiry while under GHSC-PSM control (product loss percentage)	Total value of product lost due to expiry during the quarter	Average inventory balance (in USD) during the quarter	Inventory reports	Quarterly	Expiries from the Regional Distribution Centers (RDCS) are presented in the GSC section of this report. Expiries that occur in warehouses that GHSC-PSM manages in countries are reported in the country-specific sections of this report.
C07b	Percentage of product lost due to theft, damage, or other causes, while under GHSC-PSM control (product loss percentage)	Total value of product lost due to theft, damage, or other causes during the quarter	For losses in transit: Total value (in USD) of product delivered during the quarter For losses in storage: Average inventory balance (in USD) during the quarter	GHSC-PSM Continual Improvement system reports	Quarterly	Product losses due to incidents are reported only after the actual value of the loss has been determined, which may be later than the quarter in which the incident took place or was first reported to GHSC-PSM Continual Improvement.

Data Note: **Bangladesh** does not report (on any indicators) given the country's unique scope of work and shortened closeout timeline.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

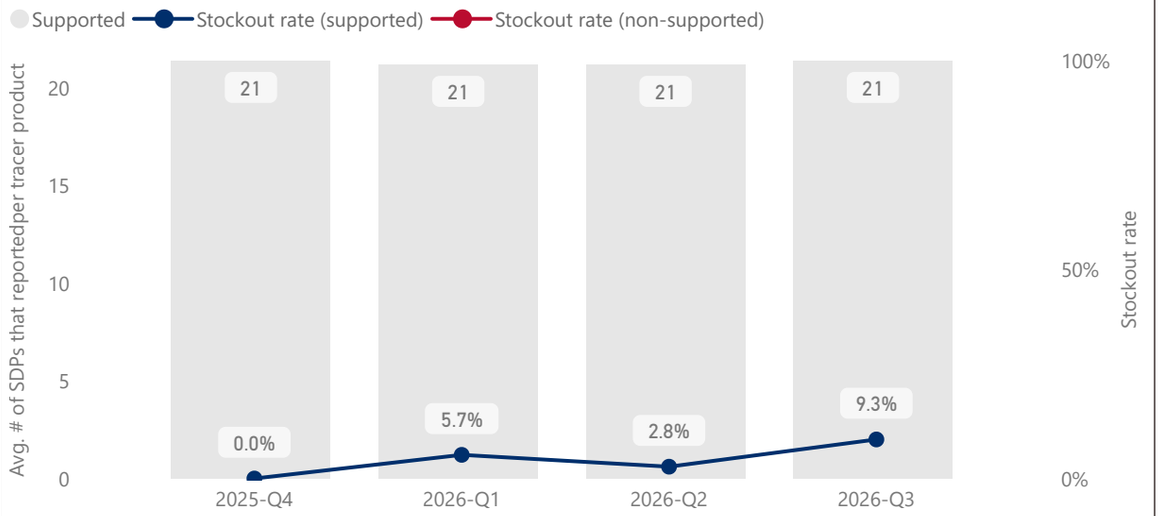
Country

Angola

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Angola | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



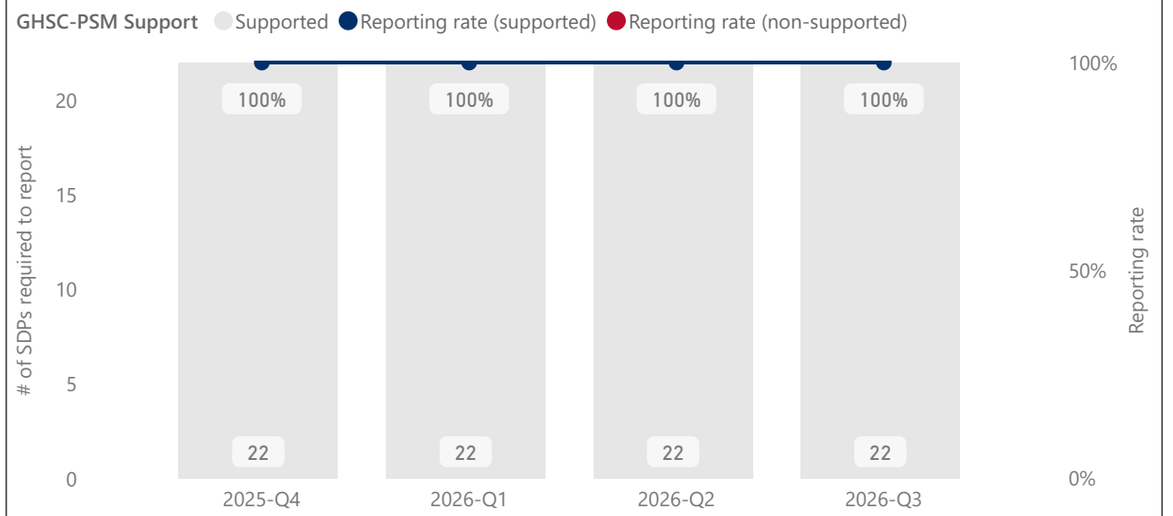
Data source

LMIS June 2026

Analysis

The overall stockout rate increased from 2.8 percent in the previous quarter to 9.3 percent in the current quarter, FY 2026 Q3. Stockouts were only reported for two HIV/AIDS products; there was a 27 percentage point increase in the stockout rate of 1st line adult ARVs from the previous quarter and a 9 percentage point increase in the stockout rate of 2nd RTKs. The reported stockouts occurred entirely in the province of Benguela, where GHSC-PSM support is limited and no operational support is provided as directed by GHSD to avoid duplication of ongoing work being implemented by the Global Fund.

B3. LMIS reporting rate



B3. Data Source (denominator)

LMIS June 2026

B3. Data Source (numerator)

LMIS June 2026

Analysis

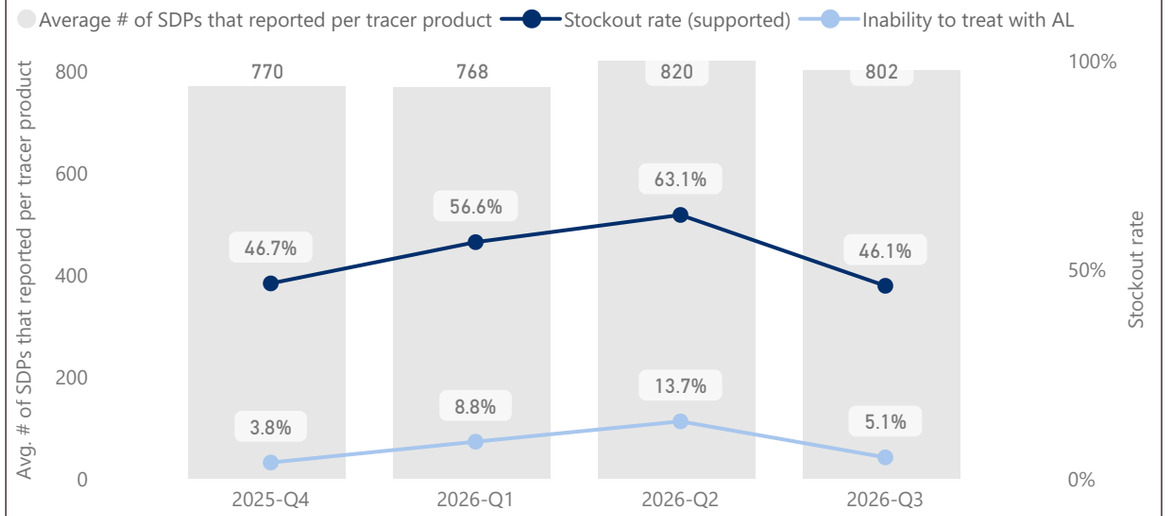
The reporting rate for facilities offering HIV/AIDS commodities remained at 100 percent this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Angola | Current Quarter: 2026-Q3 | Tracer Product: All

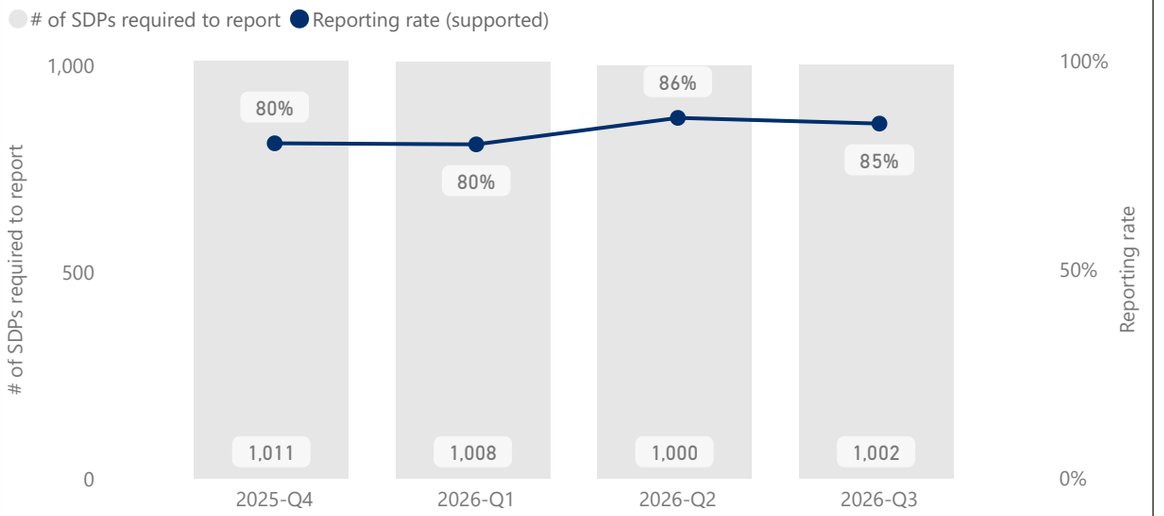
B1. Stockout rate at service delivery points



Data source

LMIS May 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

LMIS May 2026

B3. Data Source (numerator)

LMIS May 2026

Analysis

The stockout rate for supported facilities decreased from 63.1 percent in FY 2026 Q2 to 46.1 percent in FY 2026 Q3. Large reductions in stockout rates were observed for all presentations of AS/AQ, and fewer stockouts of mRDTs were reported. The effectiveness of GHSC-PSM support for the procurement and distribution of AS/AQ is further reflected in the low 5.1 percent rate of facilities reporting an inability to treat due to an AL stockout, despite large stockout rates of AL which GHSC-PSM does not procure. Stockout rates for SP continue to increase and should be monitored closely.

Analysis

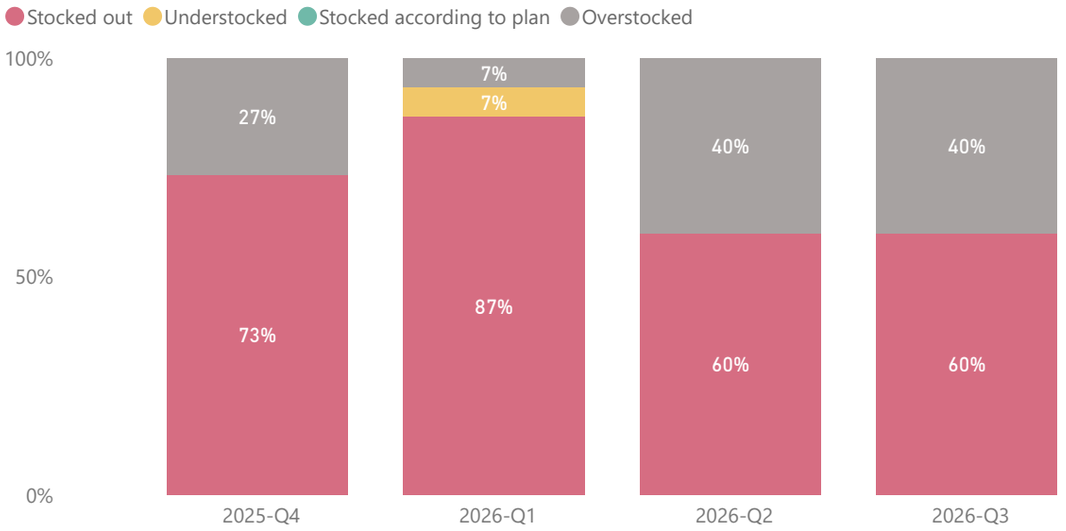
SDP reporting rate remains consistent at 85 percent, only a 1 percentage point decrease from the previous quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

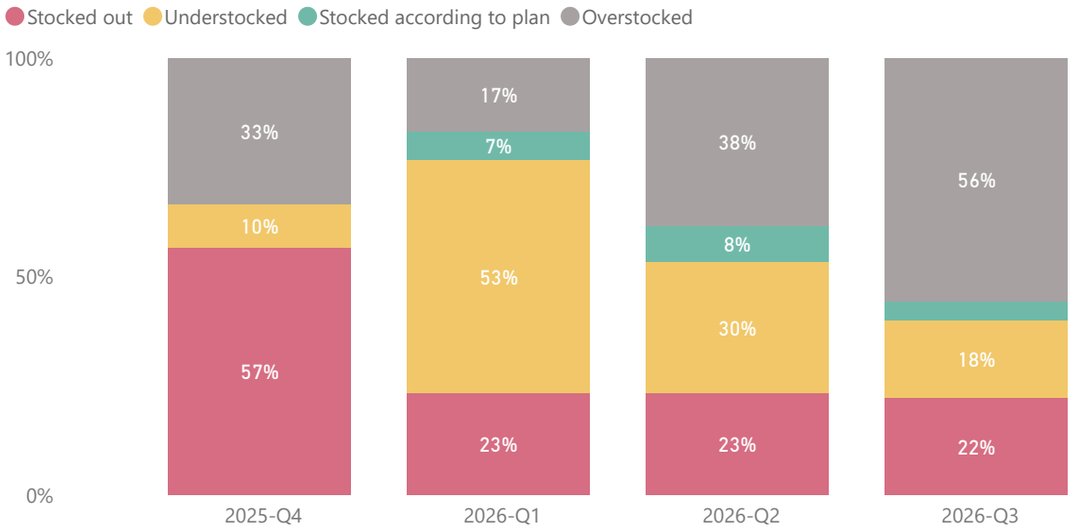
Country: Angola | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	LMIS April, May, June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	LMIS April, May, June 2026

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

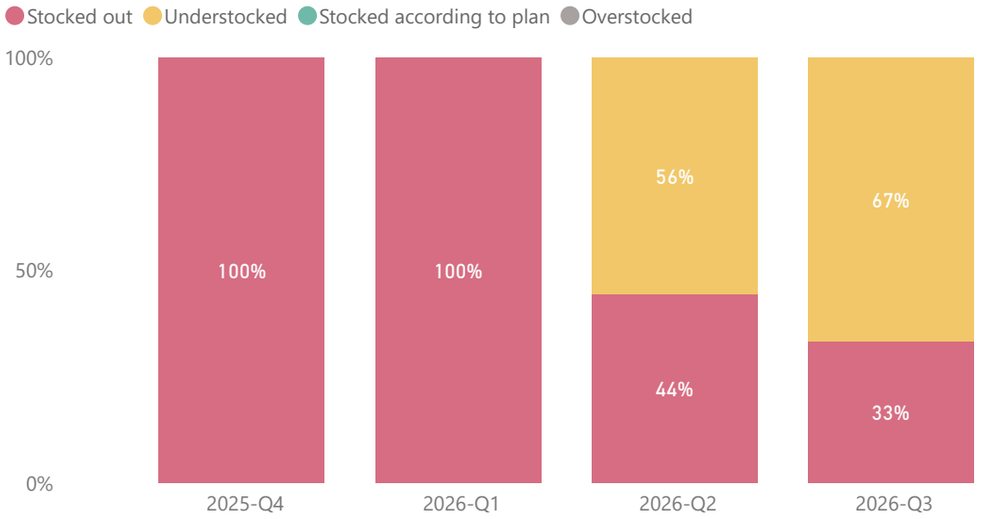
Ref	Analysis
B2	There were no changes in the stock status observations at the central level since the previous quarter, but stockout rates continue to remain high due to PEPFAR guidelines to prioritize distribution of resources to the implementation site level to reduce storage costs at 3PL warehouses. At the subnational level, observations for most products shifted to being overstocked. One province, Benguela, is not reported on this quarter because products are being mainly distributed directly to the health facilities by other partners.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

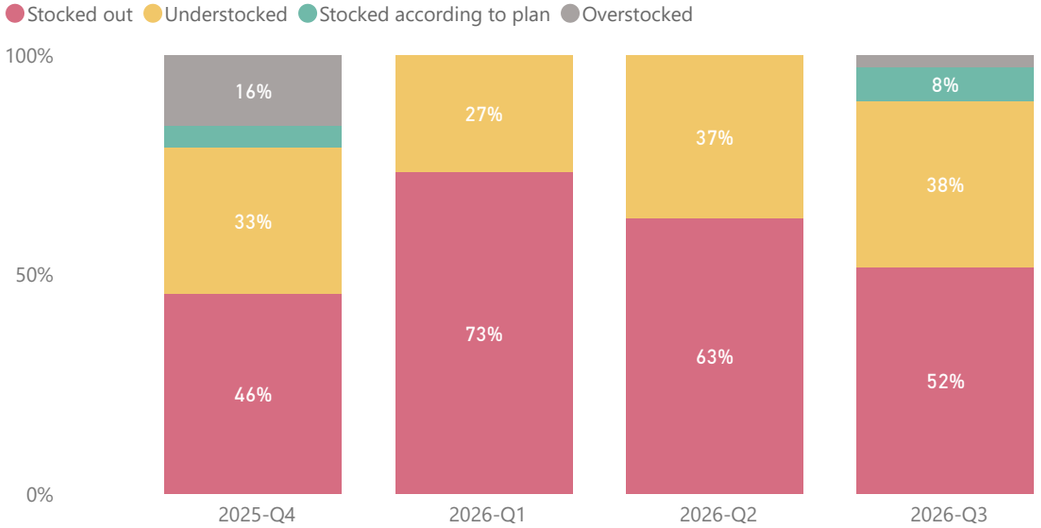
Country: Angola | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	LMIS April, May, June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	LMIS April, May, June 2026

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
C7	There were no product losses in GHSC-PSM custody to report this quarter.
B2	At the central level, all observations for AS/AQ 25/67.5 mg and SP were stocked out. There were fewer stockouts reported this quarter for AS/AQ 100/270 mg and AS/AQ 50/35, however, all observations still indicated the products were understocked. All observations for mRDTs remain understocked. At the subnational level, across all AS/AQ products, stockout observations decreased from 51 percent in the previous quarter to 21 percent in the current. Most observations for AL products remain mostly stocked out.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Angola

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet
2nd line adult ARV	Dolutegravir 50 mg Tablet
Pediatric ARV	Abacavir/Lamivudine 120/60 mg Scored Dispersible Tablet
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	Not reported
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All three (3) required supply plans were submitted to GHSC-PSM HQ.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Angola

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**9.3%**	**107**
HIV-First RTK	0.0%	22
HIV-Most used 1st line ARV	27.3%	22
HIV-Most used 1st line pediatric ARV	0.0%	20
HIV-Most used 2nd line ARV	0.0%	21
HIV-Second RTK	18.2%	22
Malaria	**46.1%**	**8,019**
Malaria-First line ACT (AL 6x1)	84.1%	851
Malaria-First line ACT (AL 6x2)	77.4%	851
Malaria-First line ACT (AL 6x3)	84.0%	851
Malaria-First line ACT (AL 6x4)	72.4%	851
Malaria-First line ACT (AS/AQ 100/270mgx3)	30.0%	851
Malaria-First line ACT (AS/AQ 100/270mgx6)	16.6%	851
Malaria-First line ACT (AS/AQ 25/67.5mg)	23.6%	851
Malaria-First line ACT (AS/AQ 50/135mg)	25.1%	851
Malaria-Rapid diagnostic test for malaria	10.1%	851
Malaria-Sulphadoxine-pyrimethamine	26.4%	360
Overall	**45.6%**	**8,126**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	5.1%	851

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	22
Malaria	85%	1002

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**0%**	**18%**	**36%**	**45%**	**33**
HIV/AIDS	0%	40%	0%	60%	15
Malaria	0%	0%	67%	33%	18
Subnational level 1	**7%**	**13%**	**34%**	**46%**	**225**
HIV/AIDS	4%	56%	18%	22%	45
Malaria	8%	3%	38%	52%	180
Overall	**6%**	**14%**	**34%**	**46%**	**258**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Malaria commodities	1	1
RTKs	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

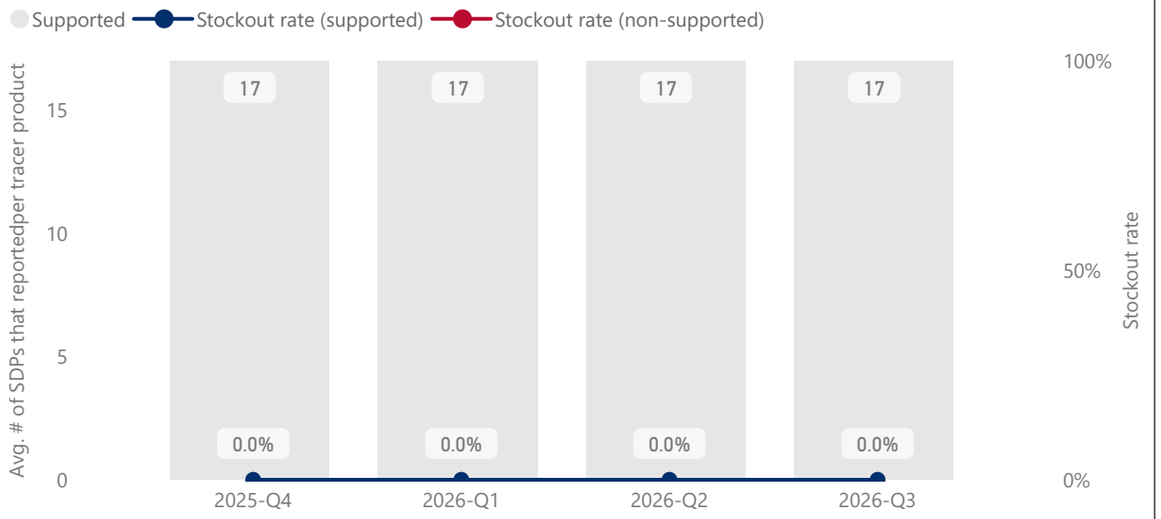
Country

Benin

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Benin | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



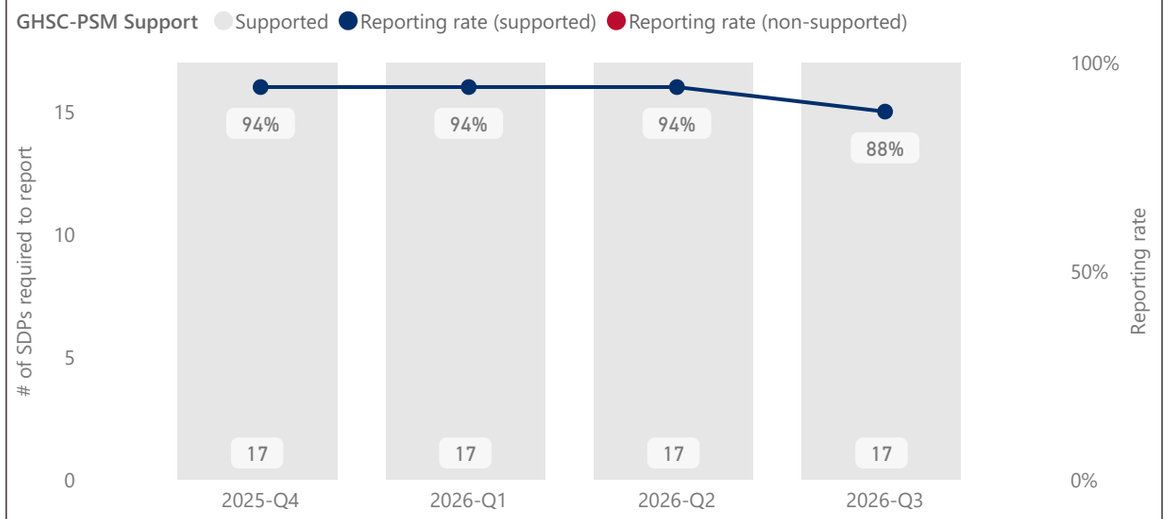
Data source

SVDL/eDisp Mai 26

Analysis

Similar to FY 2026 Q2 performance, no stockouts of HIV/AIDS commodities monitored by the project were recorded in FY 2026 Q3. As in the previous quarter, first-line adult ARVs, second-line adult ARVs, pediatric first-line ARVs, first and second RTKs, and viral load reagents remained available at all reporting sites. This continued availability is a result of strong planning mechanisms, dependable partner funding, and a well-functioning procurement and distribution system for HIV/AIDS commodities. Regular stock monitoring through the LMIS and timely adjustments based on consumption trends continue to support uninterrupted product availability at SDPs.

B3. LMIS reporting rate



B3. Data Source (denominator)

SVDL/Edisp Mai 26

B3. Data Source (numerator)

SVDL/Edisp Mai 26

Analysis

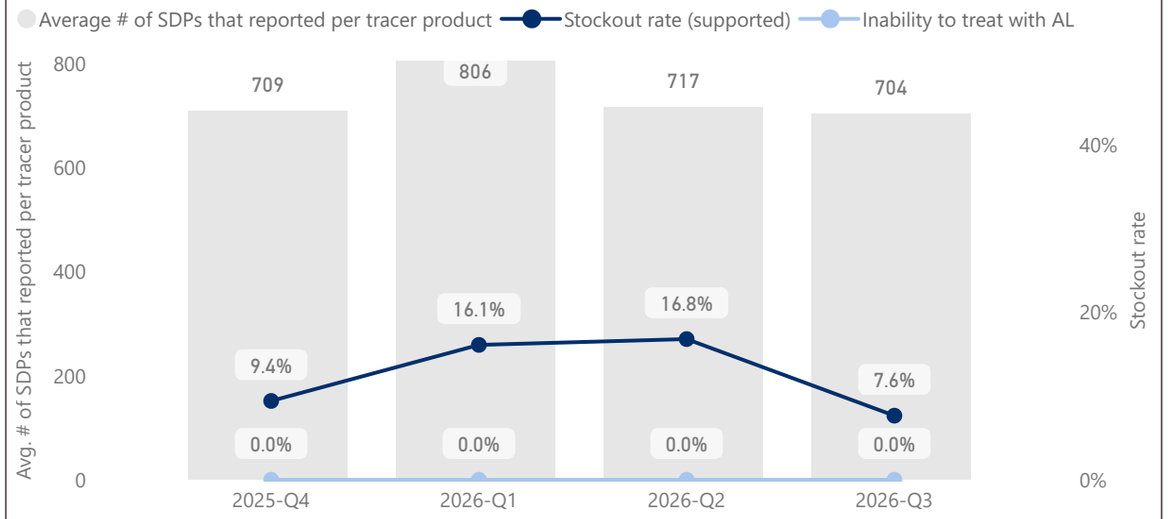
Fifteen out of 17 reporting sites submitted data in FY 2026 Q3, resulting in a reporting rate of 88 percent, compared with 94 percent in FY 2026 Q2. The decline in reporting performance was due to technical challenges affecting two reporting sites. GHSC-PSM and the MoH are working with the affected facilities to address these issues and restore reporting completeness.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Benin | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



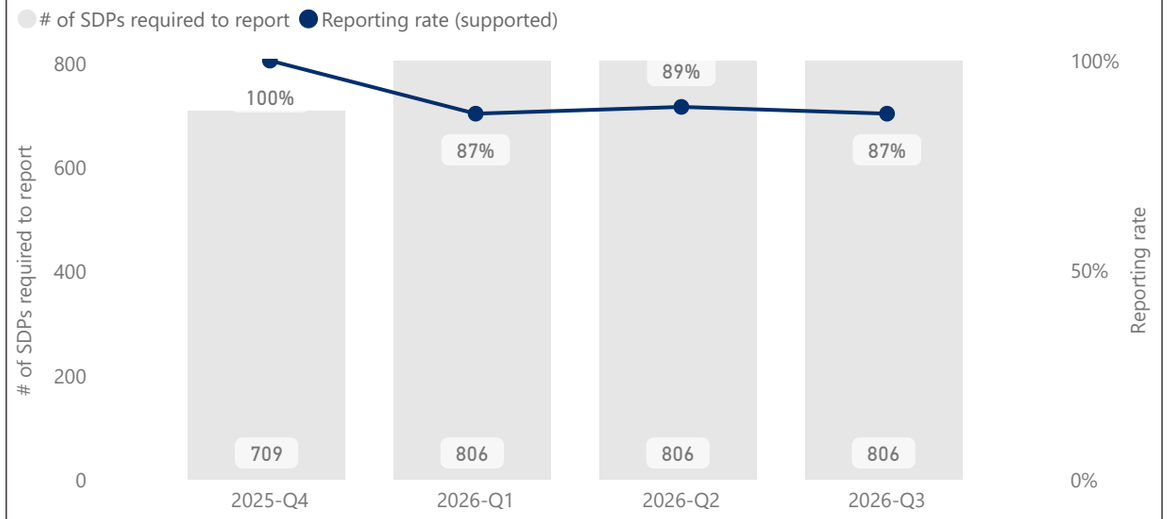
Data source

SVDL/Esigl Mai 26

Analysis

In FY 2026 Q3, stockout rates for AL formulations at SDPs decreased to 7.6 percent from 16.8 percent in FY 2026 Q2. The inability to treat malaria with AL remained at zero percent, indicating continued treatment availability at health facilities. Treatment access continued to benefit from the availability of artesunate-pyronaridine (ASPY) as an alternative first-line treatment across all age groups. Malaria RDT and sulphadoxine-pyrimethamine stockout rates remained low at 1 percent and 3 percent, respectively. The project will continue to work with the NMCP to strengthen commodity distribution and supervision activities while supporting updates to LMIS reporting tools to incorporate ASPY consumption and stock data.

B3. LMIS reporting rate



B3. Data Source (denominator)

SVDL/Esigl Mai 26

B3. Data Source (numerator)

SVDL/Esigl Mai 26

Analysis

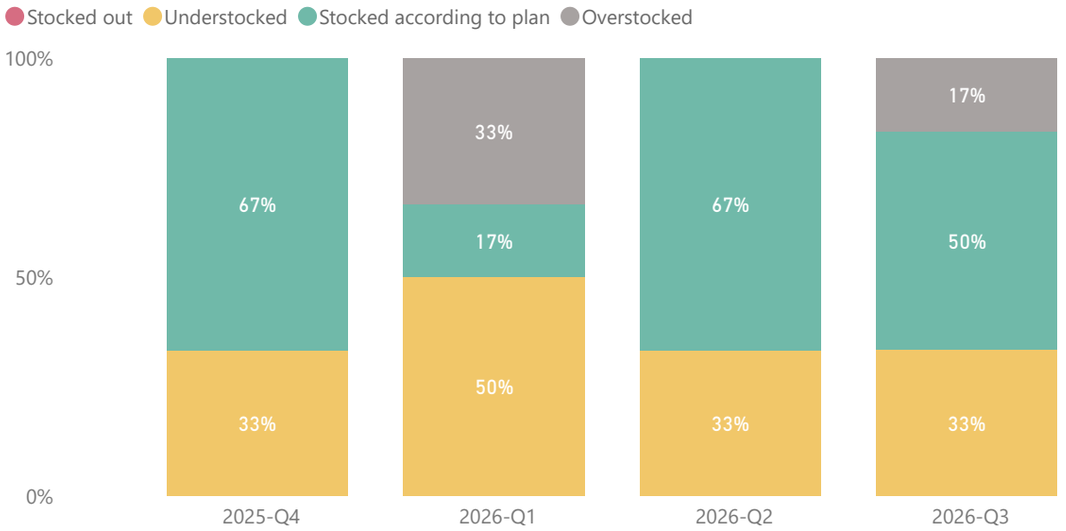
In FY 2026 Q3, the reporting rate for malaria commodities from SDPs was 87 percent (704 of 806 sites), compared with 89 percent in FY 2026 Q2. GHSC-PSM, through its regional logistics officers, will continue providing supervision and follow-up support to improve reporting rates and strengthen LMIS performance.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Benin | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Rapport Mensuel SOBAPS/Mai 26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

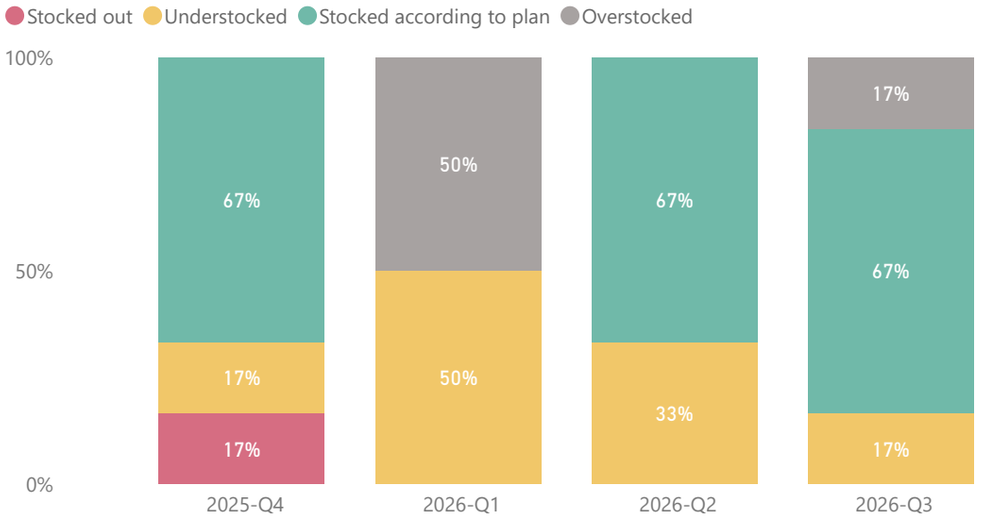
Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	For HIV/AIDS tracer commodities, the proportion stocked according to plan decreased from 67 percent in FY 2026 Q2 to 50 percent in FY 2026 Q3. The most used first-line adult ARV, the most used second-line ARV, and HIV laboratory commodities were stocked according to plan. However, the most used first-line pediatric ARV was overstocked, while first-line RTKs remained understocked. RTK shipments expected in FY 2026 Q4 are anticipated to address the current understock situation, while stock levels of pediatric ARVs will continue to be monitored to minimize the risk of expiry. Overall, the HIV supply chain remains responsive, with measures in place to support uninterrupted service delivery.
C7	GHSC-PSM does not report on this indicator because the warehousing and distribution of HIV/AIDS commodities are managed by the government.

Warehouse stock status and product losses
Malaria

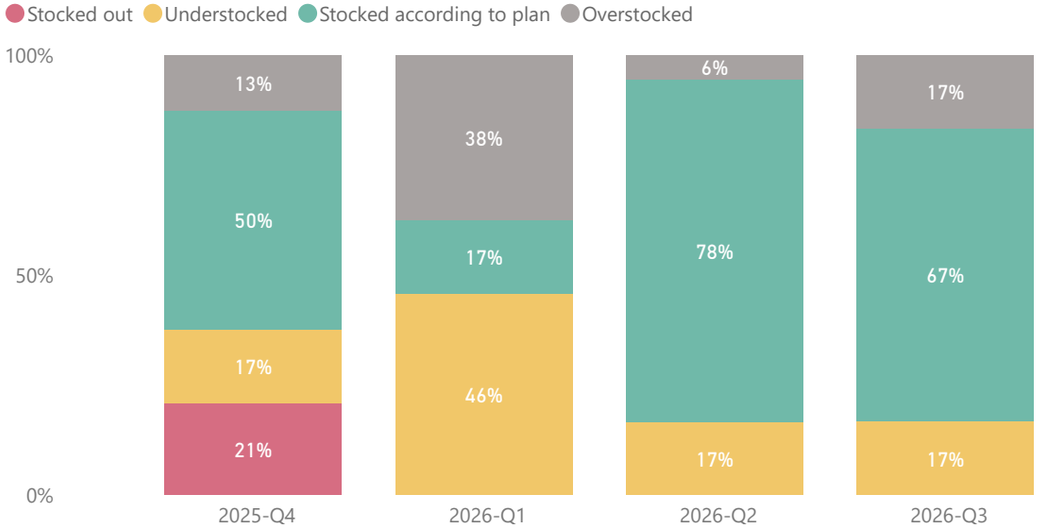
Country: Benin | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Rapport Mensuel SOBAPS/Mai 26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	Rapport Mensuel SOBAPS Mai 26/Subnational 1

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	At the central level, the proportion of malaria commodities stocked according to plan remained at 67 percent between FY 2026 Q2 and FY 2026 Q3. In FY 2026 Q3, 17 percent of commodities were overstocked, while another 17 percent were understocked. At the regional level, 67 percent of products were stocked according to plan in FY 2026 Q3, while the proportions of understocked and overstocked commodities were both 17 percent. Overall, all ACT formulations were stocked according to plan across warehouses at the central and regional levels. The project will continue working with the NMCP to monitor stock levels and support updates to LMIS reporting tools to reflect ASPY data.
C7	GHSC-PSM does not report on this indicator because warehousing and distribution of malaria commodities are managed by the government, with the exception of seasonal malaria chemoprophylaxis commodities.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Benin

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30 tablets]
2nd line adult ARV	Abacavir/Lamivudine 600/300 mg (30 tablets)
Pediatric ARV	Dolutegravir 10 mg (90 tablets)
First RTK	Determine Early Detect (100 tests)
Second RTK	First Response (30 tests)
Tie-breaker RTK	One step hiv 1/2 whole blood/serum/plasma (25 tests)
Viral load reagent	COBAS 5800/6800/8800 HIV-1 Quantitative Amplification Reagent, (192 Tests)
EID reagent	COBAS 5800/6800/8800 HIV-1/HIV-2 Qualitative Amplification Reagents, IVD 192 Tests, 1 Kit

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All required supply plans for ARVs, HIV diagnostics, RTKs, and malaria commodities for FY 2026 Q3 were reviewed, updated, and submitted to the GHSC-PSM headquarters FASP team. This continued performance reflects strong planning practices and regular updates of supply planning assumptions.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Benin

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.0%**	**102**
HIV-First RTK	0.0%	17
HIV-Most used 1st line ARV	0.0%	17
HIV-Most used 1st line pediatric ARV	0.0%	17
HIV-Most used 2nd line ARV	0.0%	17
HIV-Second RTK	0.0%	17
HIV-Viral load reagent	0.0%	17
Malaria	**7.6%**	**4,224**
Malaria-First line ACT (AL 6x1)	18.6%	704
Malaria-First line ACT (AL 6x2)	8.2%	704
Malaria-First line ACT (AL 6x3)	7.0%	704
Malaria-First line ACT (AL 6x4)	8.0%	704
Malaria-Rapid diagnostic test for malaria	1.3%	704
Malaria-Sulphadoxine-pyrimethamine	2.8%	704
Overall	**7.5%**	**4,326**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.0%	704

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	88%	17
Malaria	87%	806

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**58%**	**17%**	**25%**		**12**
HIV/AIDS	50%	17%	33%		6
Malaria	67%	17%	17%		6
Subnational level 1	**67%**	**17%**	**17%**		**18**
Malaria	67%	17%	17%		18
Overall	**63%**	**17%**	**20%**		**30**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

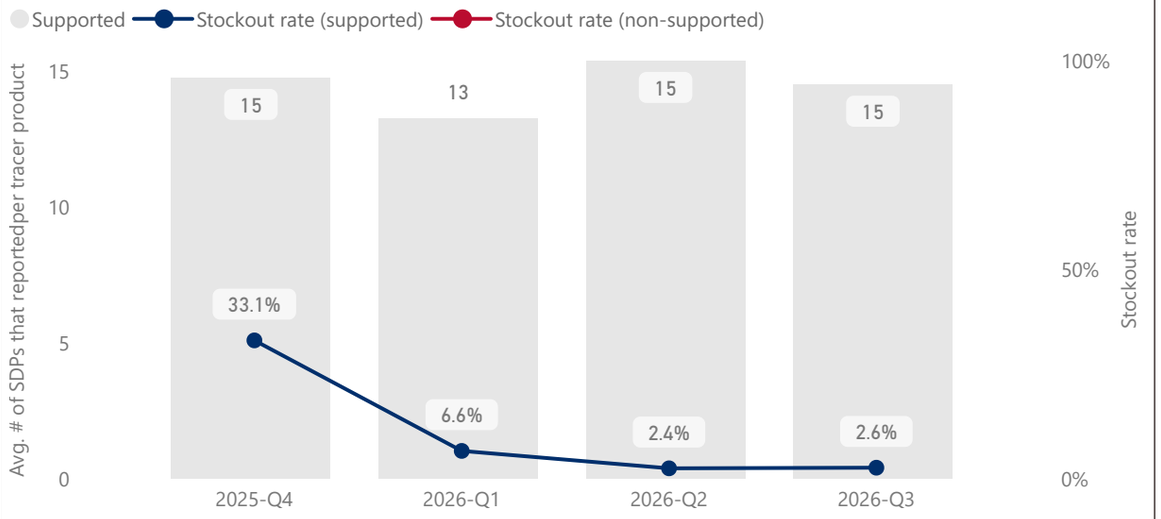
Country

Botswana

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Botswana | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



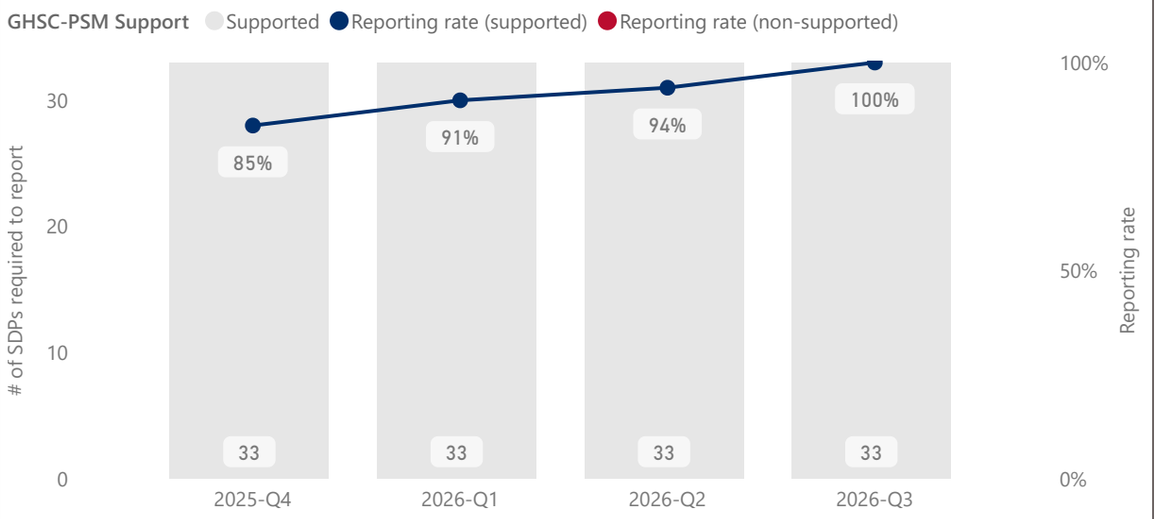
Data source

Data source
ARV LMIS Report May'26
LAB LMIS Report May'26

Analysis

Stockout rates at SDPs remained approximately the same compared to the previous quarter, at 2.6 percent. For at least the second quarter in a row, no stockouts were reported for 1st line adult ARVs, pediatric ARVs, 2nd RTKs, and both VL and EID consumables. The stockout rate of EID reagent reduced from 100 percent in FY 2026 Q2 to 0 percent in FY 2026 Q3. Shipments of both ARVs and EID reagent were received during FY 2026 Q3. The reported stockout rate of 1st RTK slightly increased to 5.9 percent, a 1.6 percentage-point increase from the previous quarter. There is a shipment of 6 months of RTK stock expected to arrive by August 2026. There was a larger increase in the stockout rate of VL reagents from 14.3 percent to 28.6 percent, a result of product stockout at the central level.

B3. LMIS reporting rate



B3. Data Source (denominator)	B3. Data Source (numerator)
LMIS Report May'26	LMIS Report May'26

Analysis

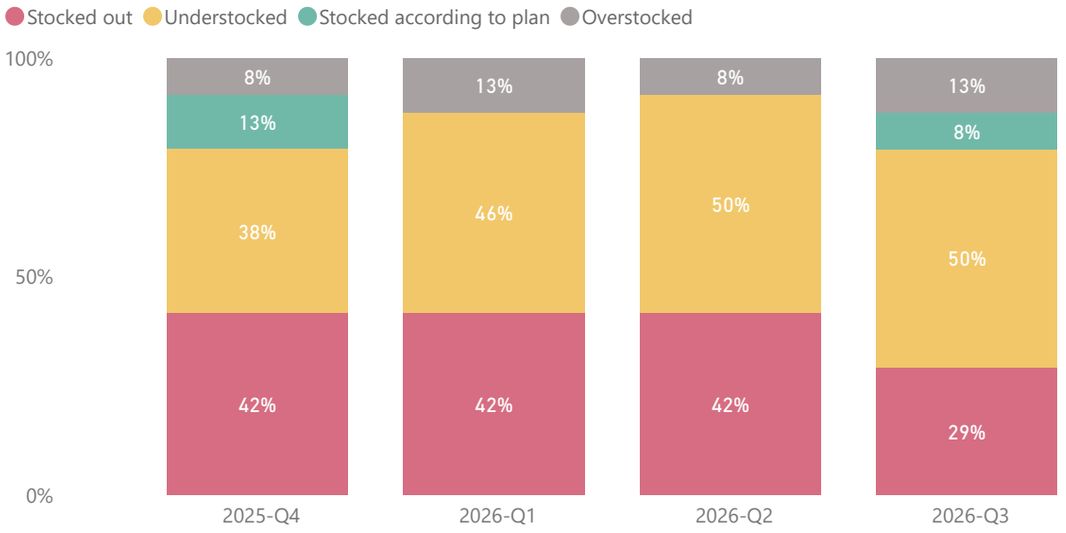
The reporting rate increased to 100 percent in FY 2026 Q3. A majority of reports were submitted by the deadline (91 percent) with the remaining reports being submitted within the following two weeks. This is an improvement in reporting rates because of ongoing follow-ups and support given to facilities on LMIS reporting and direct uploading on to DHIS2. GHSC-PSM continues to provide technical assistance to the CMS through its technical team and a seconded LMIS Officer to closely follow up and support logistics management activities and data quality assessments which help to improve and maintain a good reporting rate.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Botswana | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	CMS Pharmacy StockSituation Report June'26
Central	CMS Lab StockSituation Report June'26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	At the central level, the overall stockout observations decreased from 42 percent to 29 percent in FY 2026 Q3, while the proportions of observations that were stocked according to plan and overstocked both increased. The decrease in stockout observations is driven by improved stock statuses for EID reagent and 2nd RTKs. Both first and second line adult ARVs remain understocked for all observations, and stock levels were maintained due to an order received at the end of March 2026. Stock availability for 1st RTKs has declined since the previous quarter and VL reagent remains fully stocked out, both due to financial constraints that CMS has been experiencing.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Botswana

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	TAF-ED (Tenofovir alafenamide, Emitrictabine, Dolutegravir)
2nd line adult ARV	Not reported
Pediatric ARV	Dolutegravir 10 mg Scored Dispersible Tablet
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	Not reported
Viral load reagent	Hologic APTIMA HIV Viral Load Main Assay Kit, 100 tests [PRD-03000]
Viral load consumable	Aptima HIV-1 Controls kit ,5x1.5ml,PRD-03002
EID reagent	Kit Cobas 6800/8800 HIV-1/HIV-2 Qual 192T CE-IVD
EID consumable	Cobas NHP Negative Control Kit

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

There are no supply plans required to submit to GHSC-PSM HQ.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2026-Q1
ARVs	✓
RTKs	✓
TPT	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Botswana

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**2.6%**	**116**
HIV-EID consumable	0.0%	2
HIV-EID reagent	0.0%	2
HIV-First RTK	5.9%	17
HIV-Most used 1st line ARV	0.0%	33
HIV-Most used 1st line pediatric ARV	0.0%	31
HIV-Second RTK	0.0%	17
HIV-Viral load consumable	0.0%	7
HIV-Viral load reagent	28.6%	7
Overall	**2.6%**	**116**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	33

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**8%**	**13%**	**50%**	**29%**	**24**
HIV/AIDS	8%	13%	50%	29%	24
Overall	**8%**	**13%**	**50%**	**29%**	**24**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

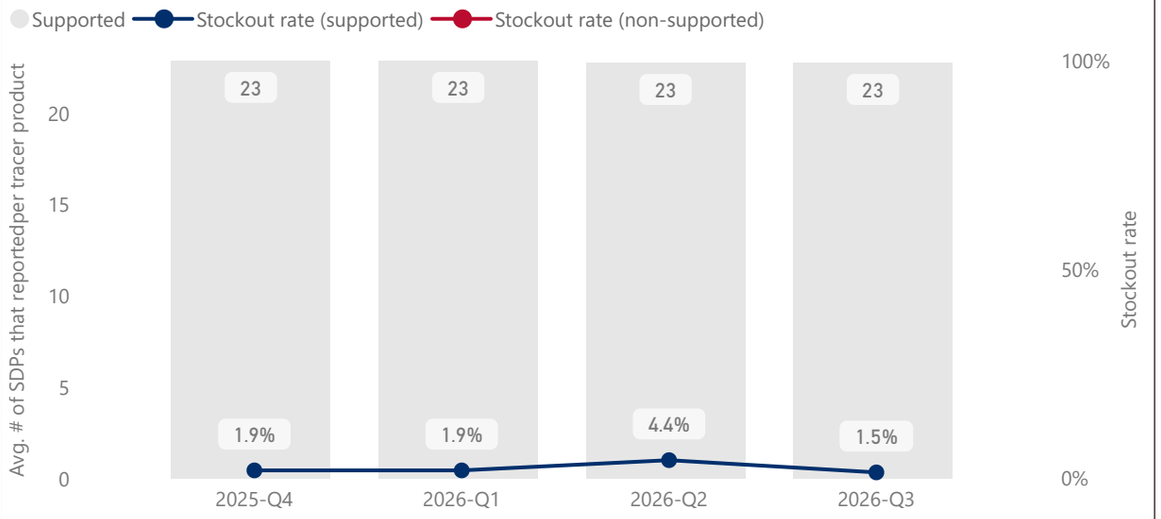
Country

Burkina Faso

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Burkina Faso | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



Data source

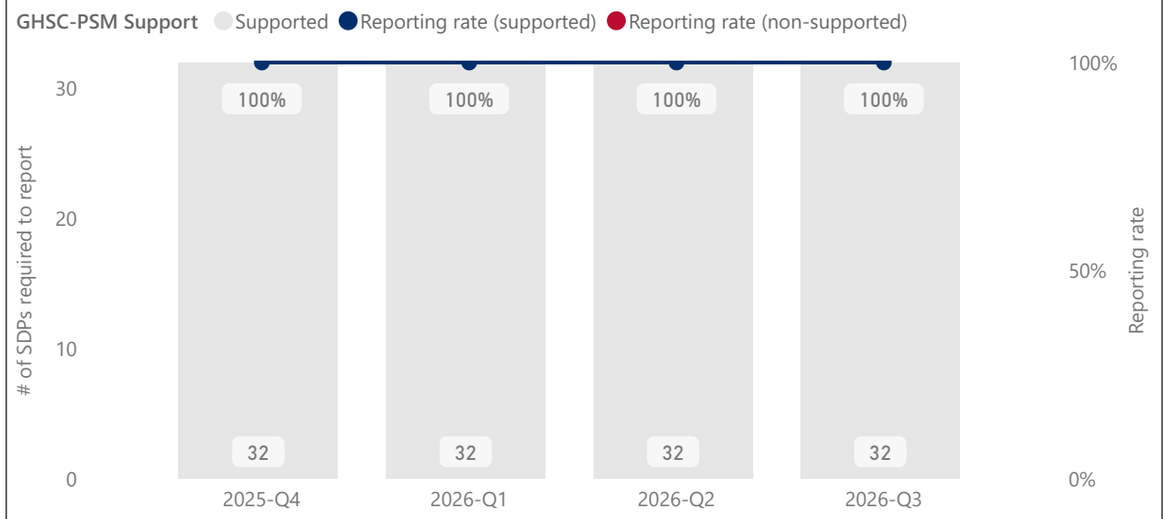
PEPFAR Sites Logistics Data Collection canvas, May 2026

Weekly surveillance data from viral load platform, May 2026

Analysis

The stockout rate for HIV/AIDS tracer products at USG supported sites decreased from 4.4 percent in FY 2026 Q2 to 1.5 percent in FY 2026 Q3. Stockouts were only reported for two (2) HIV/AIDS tracer products: two (2) facilities reported a stockout of the 1st RTK and one (1)facility reported a stockout of the viral load consumable. The situation is expected to improve further in the coming months following the deployment and implementation of Cobas 5800 platforms in the four laboratories that previously did not have them.

B3. LMIS reporting rate



B3. Data Source (denominator)

PEPFAR Sites Logistics Data Collection canvas, May 2026

B3. Data Source (numerator)

PEPFAR Sites Logistics Data Collection canvas, May 2026

Analysis

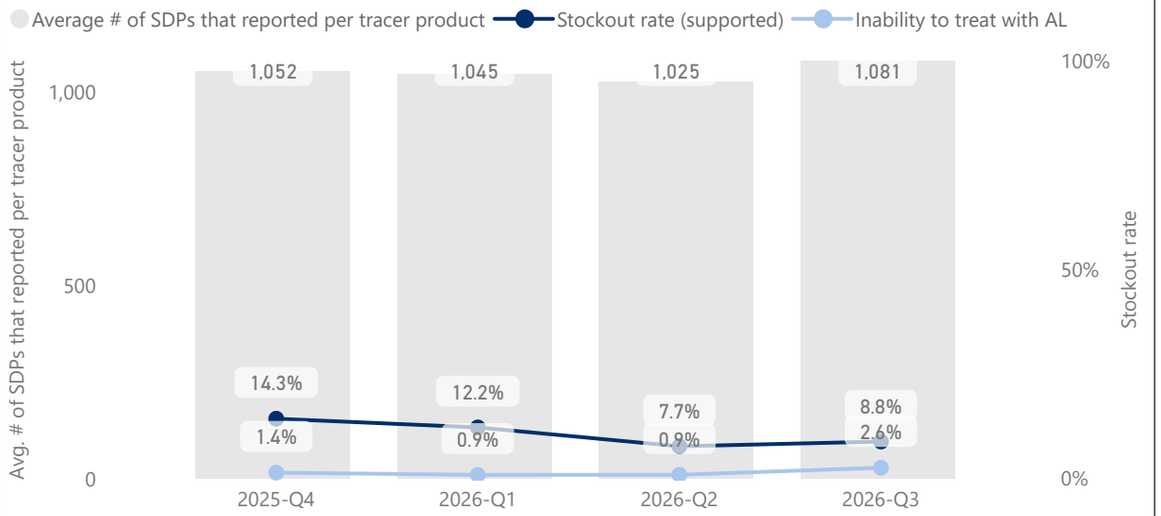
As in previous quarters, supported HIV/AIDS sites maintained a 100 percent reporting rate in FY 2026 Q3. The project continues to provide support to improve data quality and timeliness of reports.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

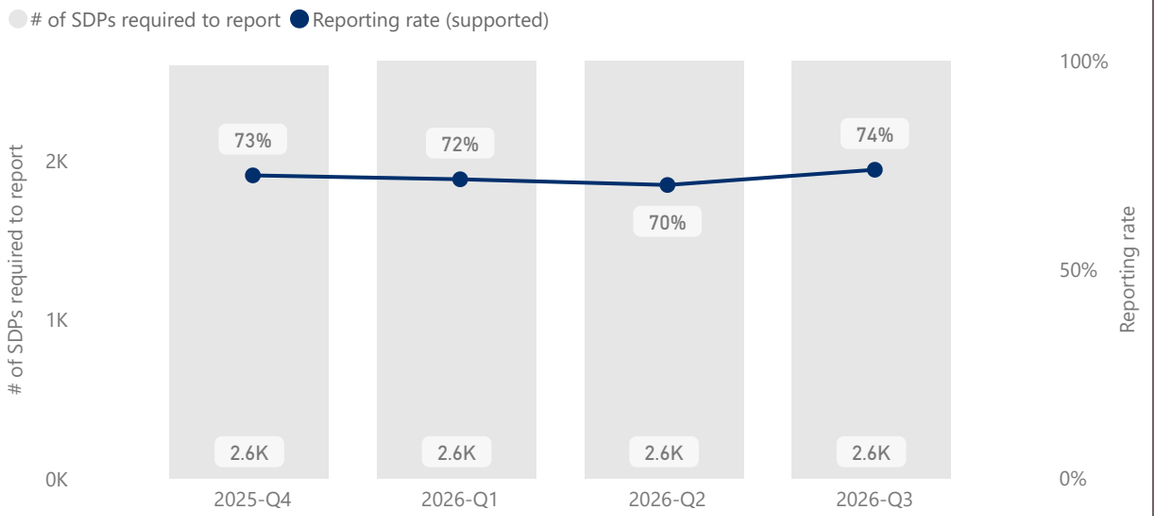
Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Burkina Faso | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source

Endos-BF (DHIS2), May 2026

B3. Data Source (denominator)

Endos-BF (DHIS2), May 2026

B3. Data Source (numerator)

Endos-BF (DHIS2), May 2026

Analysis

The overall stockout rate for malaria tracer commodities increased from 7.7 percent in FY 2026 Q2 to 8.8 percent in FY 2026 Q3, while the inability to treat malaria with an AL formulation also slightly increased from 0.9 percent to 2.6 percent over the same period. The most notable change is a 6 percentage-point increase in the stockout rate for AL 6x4; there was, however, a distribution of 300,000 treatments in April 2026. For all other tracer products, reported stockout rates changed by only 3 percentage-points or fewer compared to the previous quarter. Distributions of SP and ACTs also occurred during FY 2026 Q3.

Analysis

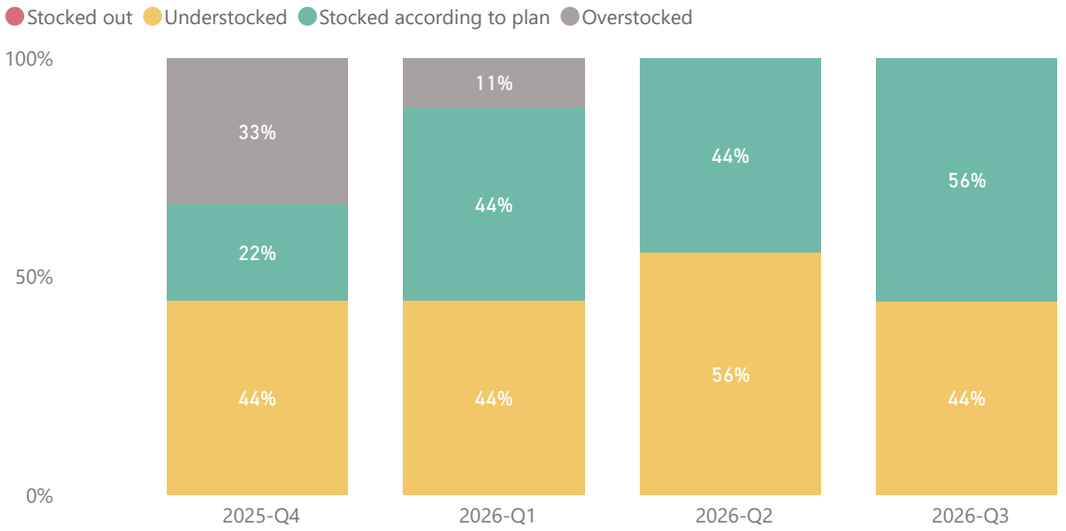
The reporting rate for malaria tracer products into the DHIS2 platform, Endos-BF in FY 2026 Q3 was 74 percent, a 4 percentage-point increase from FY 2026 Q2.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Burkina Faso | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	PipeLine and CAMEG, May 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

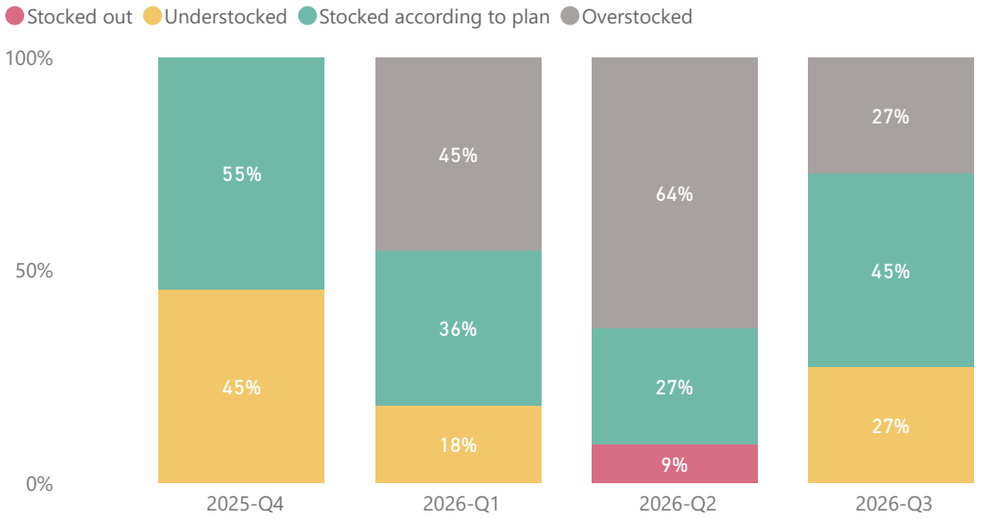
Ref	Analysis
B2	In FY 2026 Q3, the only change in reported stock status observations was that 1st RTK was stocked according to plan in all observations, resulting in an overall shift from 44 percent of observations being stocked according to plan in FY 2026 Q2 to 56 percent in FY 2026 Q3. Shipments of new stock received during FY 2026 Q3 include 2nd line adult ARVs, pediatric ARVs, 1st RTKs, and EID reagent. The tracer products for 1st line adult ARVs, 2nd RTKs, and viral load commodities were observed to be understocked, however, shipments of ARVs and viral load commodities are expected to arrive in country during FY 2026 Q4.
C7	GHSC-PSM does not report on this indicator in Burkina Faso.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

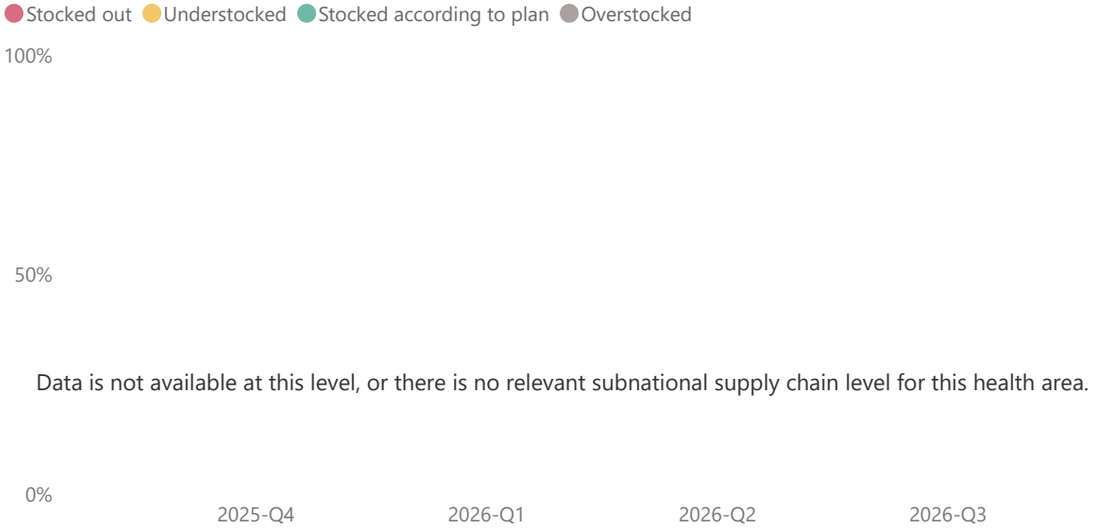
Country: Burkina Faso | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	PipeLine and CAMEG, May 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
C7	GHSC-PSM does not report on this indicator in Burkina Faso.
B2	In FY 2026 Q3, there were no stockout observations reported for any malaria tracer products, an improvement from FY 2026 Q2. The increase in the percentage of adequately stored commodities is linked to adherence to delivery schedules and reduced consumption due to the low malaria transmission season. The few products with reported understocked observations include AL 6x2, AL 6x4, and DHA-PPQ 20 mg/160 mg (3 tablets).

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Burkina Faso

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30 tablets]
2nd line adult ARV	Abacavir/Lamivudine 600/300 mg Tablet
Pediatric ARV	Dolutegravir 10 mg Scored Dispersible Tablet
First RTK	Determine HIV 1/2
Second RTK	Immunoflow HIV1 HIV2
Tie-breaker RTK	Not reported
Viral load reagent	KIT COBAS 4800 HIV-1 120T CE-IVD
Viral load consumable	Vacutainer EDTA vial 4.5 ml
EID reagent	Xpert HIV 1 Qual Assay
EID consumable	DBS kit

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All required supply plans were submitted to GHSC-PSM HQ. GHSC-PSM supported the technical committees for quarterly review of the procurement plan for malaria, ARV and RTK commodities held from May 8 to 12, 2026. In addition, the GHSC-PSM assisted the MoH quantifying the commodities to be purchased through the Global Fund from June 4 to 14, 2026.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Burkina Faso

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**1.5%**	**205**
HIV-EID consumable	0.0%	24
HIV-EID reagent	0.0%	7
HIV-First RTK	6.3%	32
HIV-Most used 1st line ARV	0.0%	32
HIV-Most used 1st line pediatric ARV	0.0%	32
HIV-Most used 2nd line ARV	0.0%	32
HIV-Second RTK	0.0%	32
HIV-Viral load consumable	14.3%	7
HIV-Viral load reagent	0.0%	7
Malaria	**8.8%**	**11,886**
Malaria-First line ACT (AL 6x1)	6.2%	1,083
Malaria-First line ACT (AL 6x2)	6.0%	1,083
Malaria-First line ACT (AL 6x3)	6.3%	1,083
Malaria-First line ACT (AL 6x4)	23.1%	1,083
Malaria-First line ACT (ASPY 180/60mg, 9 tabs)	1.6%	567
Malaria-First line ACT (ASPY 60/20mg, 3 sachets)	0.5%	567
Malaria-First line ACT (DHA-PPQ 20mg/160mg 3 tabs)	17.0%	294
Malaria-First line ACT (DHA-PPQ 40mg/320mg 9 tabs)	5.1%	294
Malaria-LLINs	8.3%	1,944
Malaria-Rapid diagnostic test for malaria	4.8%	1,944
Malaria-Sulphadoxine-pyrimethamine	13.9%	1,944
Overall	**8.7%**	**12,091**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	2.6%	1,083

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	32
Malaria	74%	2631

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**50%**	**15%**	**35%**		**20**
HIV/AIDS	56%		44%		9
Malaria	45%	27%	27%		11
Overall	**50%**	**15%**	**35%**		**20**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

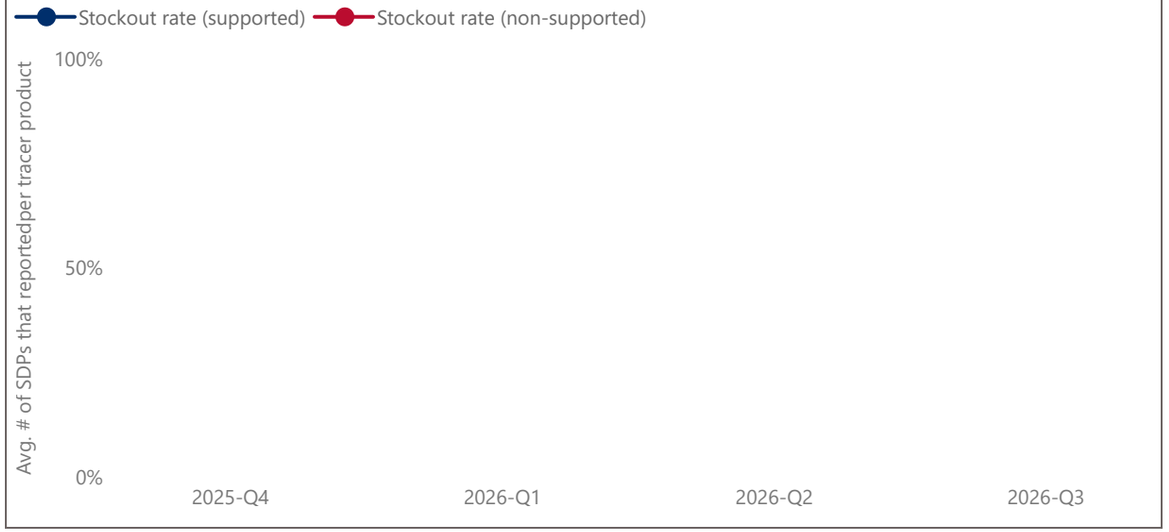
Country

Burma

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

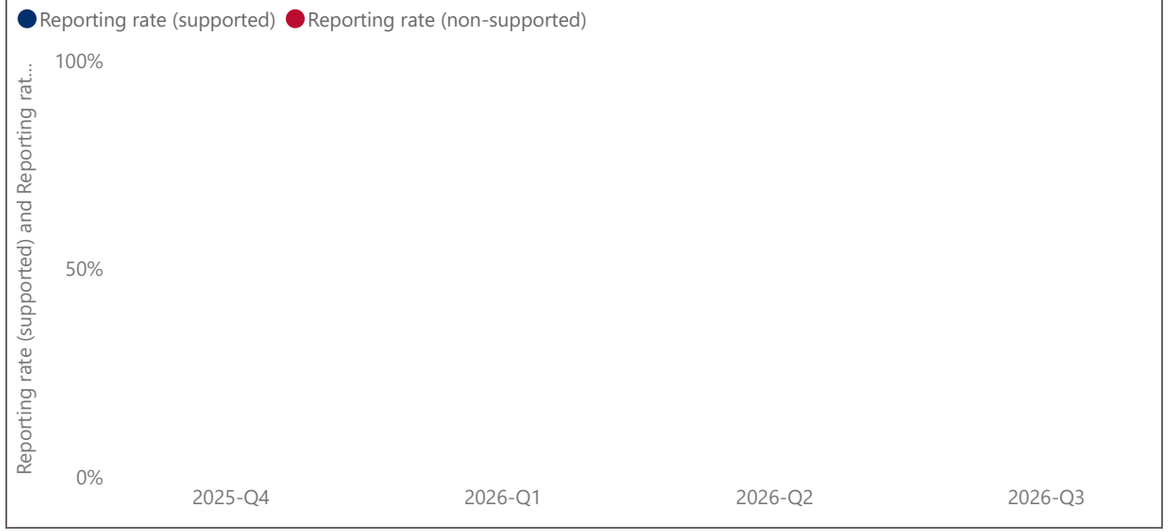
Country: Burma | Current Quarter: 2026-Q3 | Tracer Product: 1st line adult ARV

B1. Stockout rate at service delivery points



Data source

B3. LMIS reporting rate



B3. Data Source (denominator)

B3. Data Source (numerator)

Analysis

Due to ongoing political instability, the project has had challenges being able to report stock availability from HIV sites. Compounding this issue now, an eLMIS architecture re-structure has removed visibility down to the SDP level. Therefore GHSC-PSM in Burma will not be able to report on this indicator moving forward.

Analysis

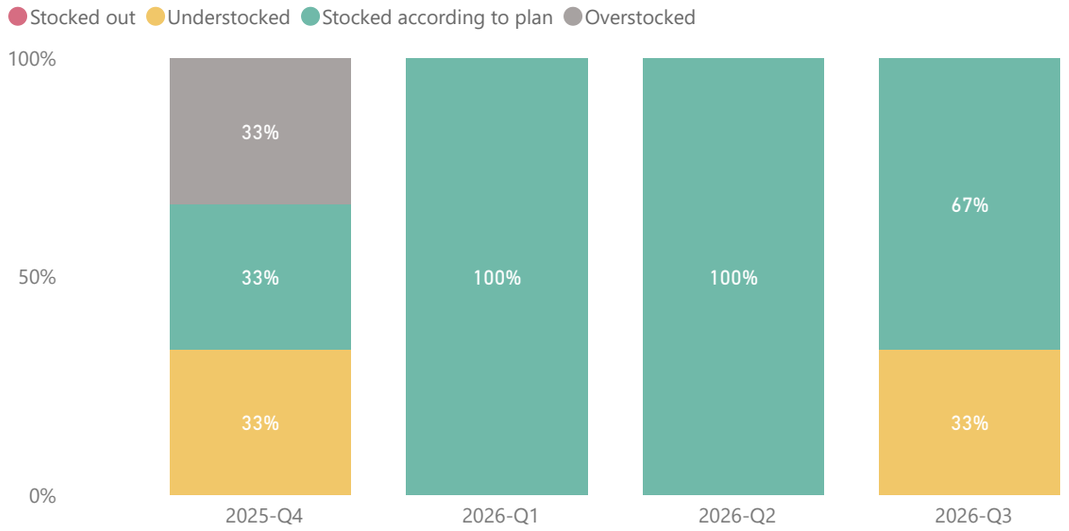
Due to ongoing political instability, the project has had challenges being able to report stock availability from HIV sites. Compounding this issue now, an eLMIS architecture re-structure has removed visibility down to the SDP level. Therefore GHSC-PSM in Burma will not be able to report on this indicator moving forward.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

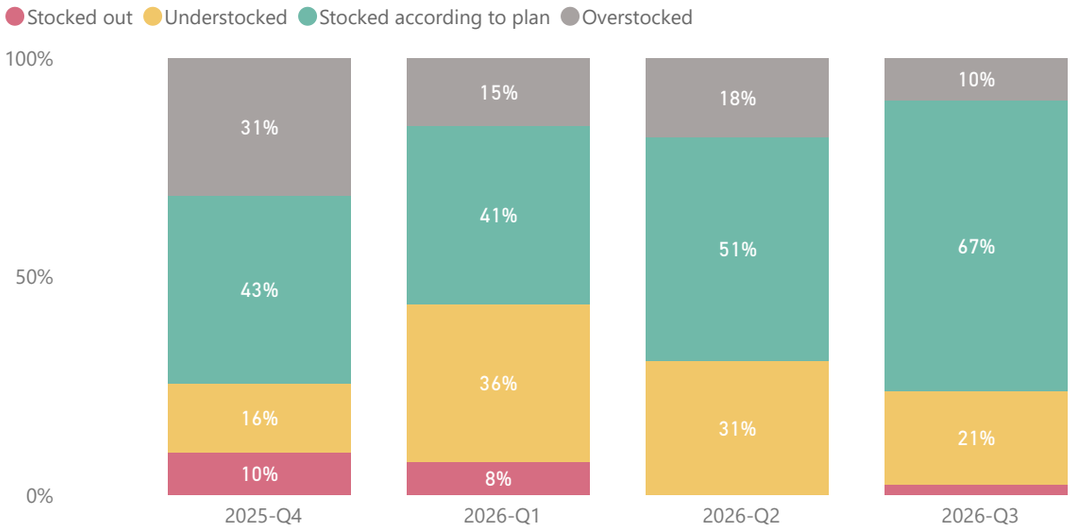
Country: Burma | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	National AIDS Program (June 2026)

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	Regional government warehouses (June 2026)

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	This quarter, the overall HIV stocked according to plan rate at the central level decreased from the previous quarter at 100 percent, down to 67 percent this quarter. The shift can be attributed to first line adult ARVs, which were reported as understocked. Despite this, central level stock situation continues to remain optimal. At the subnational level, the stock situation has improved with an increase in the stocked according to plan rate from 51 percent in the previous quarter to 67 percent this quarter. Desite the overall improvement in the stock situation a the subnational level, there were some observations for first line pediatric ARVs that shifted from understocked to stocked out.
C7	GHSC-PSM in Burma does not report on this indicator.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Burma

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg Tablet
Pediatric ARV	Abacavir/Lamivudine 60/30 mg Scored Dispersible Tablet
First RTK	Not reported
Second RTK	Not reported
Tie-breaker RTK	Not reported
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

There are no required supply plans to submit for Burma.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Burma

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
Overall		

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**67%**		**33%**		**3**
HIV/AIDS	67%		33%		3
Subnational level 1	**67%**	**10%**	**21%**	**2%**	**42**
HIV/AIDS	67%	10%	21%	2%	42
Overall	**67%**	**9%**	**22%**	**2%**	**45**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

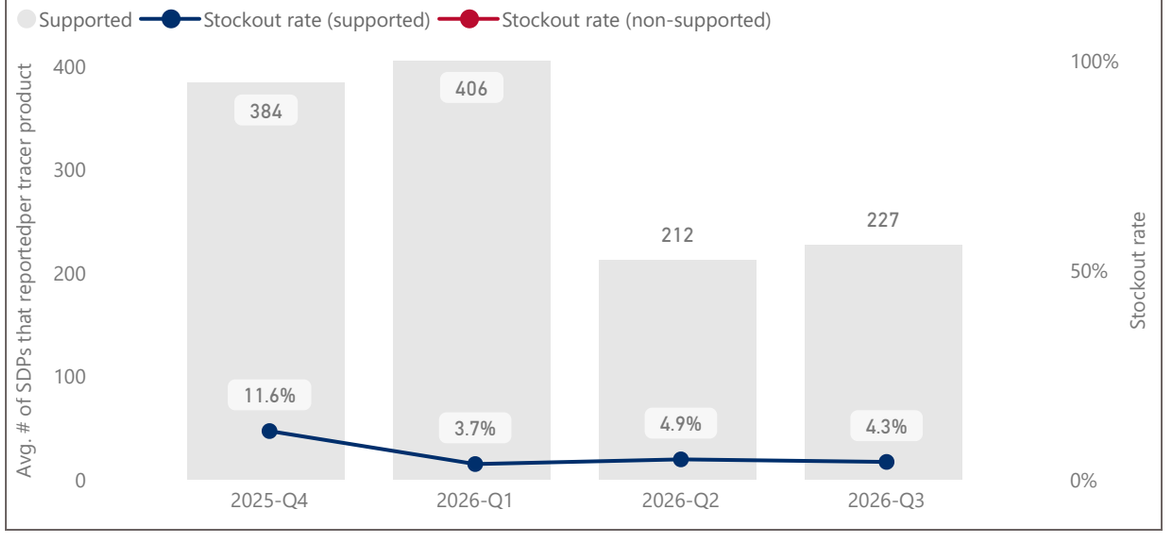
Country

Burundi

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Burundi | Current Quarter: 2026-Q3 | Tracer Product: All

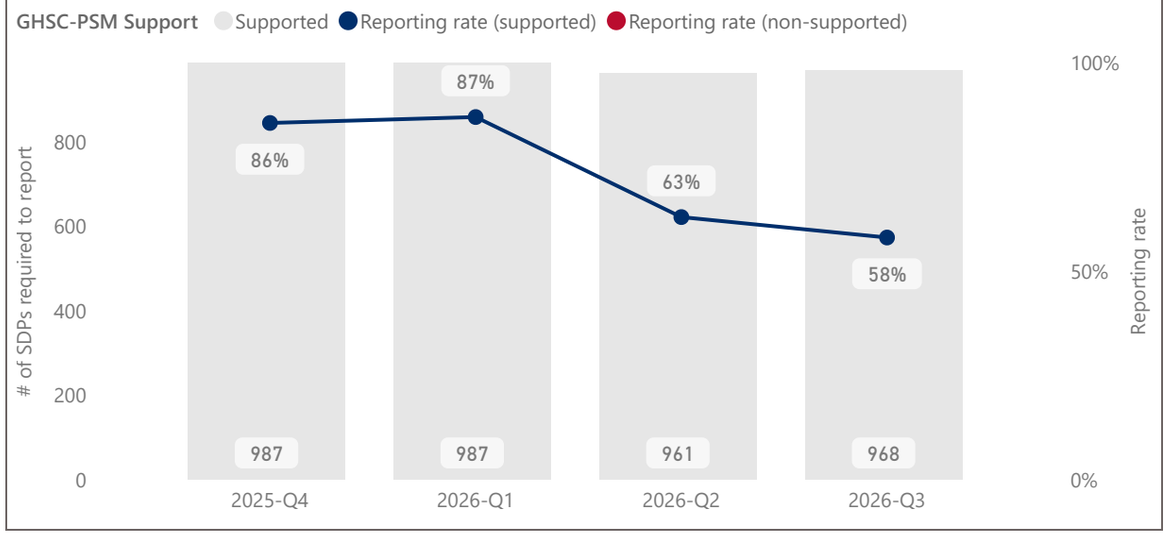
B1. Stockout rate at service delivery points



Data source

DHIS2, May 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

DHIS2 May 2026

B3. Data Source (numerator)

DHIS2 May 2026

Analysis

The stockout rate for HIV/AIDS tracer products decreased slightly from 4.9 percent in FY 2026 Q2 to 4.3 percent in FY 2026 Q3. This improvement is attributable to enhanced product availability at the central level and across health districts, resulting in fewer stock-out incidents throughout the reporting period.

Analysis

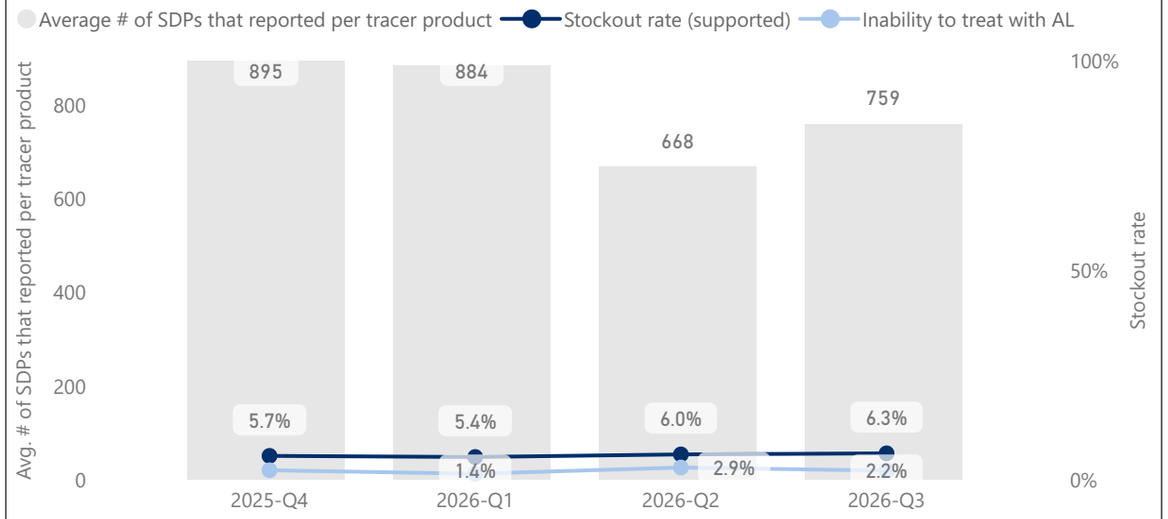
The reporting rate for HIV/AIDS commodity sites decreased from 63 percent in FY 2026 Q2 to 58 percent in FY 2026 Q3. This decline is largely attributable to changes in two tracer products: the first-line product was replaced from Abacavir/Lamivudine 120/60 mg dispersible tablets to Pediatric Abacavir/Lamivudine/Dolutegravir (pALD), and the second HIV rapid test was changed from BIOLINE HIV 1/2 3.0 to UNIGOLD HIV 1/2 Rapid Test. Because these newly introduced products have not yet been configured in the DHIS2 system, data on their availability and use are not currently being captured through DHIS2, contributing to the lower reporting rate.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Burundi | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



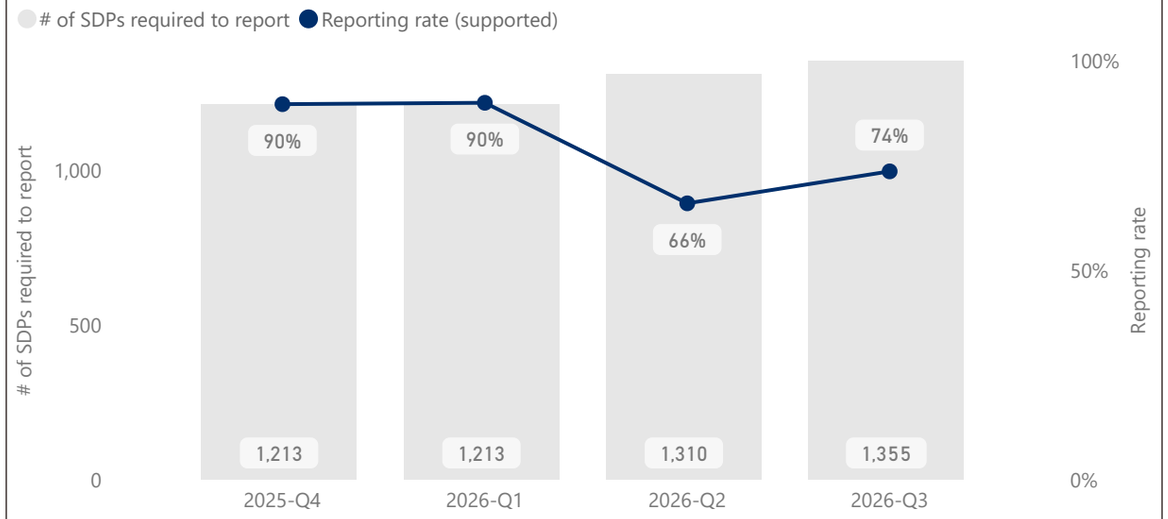
Data source

DHIS2, May 2026

Analysis

The stockout rate for malaria commodities increased slightly from 6.0 percent in FY 2026 Q2 to 6.3 percent in FY 2026 Q3, while the percentage of facilities unable to treat malaria with an ACT formulation decreased from 2.9 percent to 2.2 percent. The increase in stock-outs was driven by low stock levels of AL 6x4 and a stock-out of AL 6x3 at the central level, leading the National Malaria Control Program (NMCP) to ration distributions to districts, compounded by delays in PMI-supported and Global Fund shipments. However, two USG-supported shipments of AL 6x4 and AL 6x3, previously on hold pending tax exemptions, are expected before the end of July 2026, along with Global Fund emergency shipments, which should improve product availability.

B3. LMIS reporting rate



B3. Data Source (denominator)

DHIS2 May 2026

B3. Data Source (numerator)

DHIS2 May 2026

Analysis

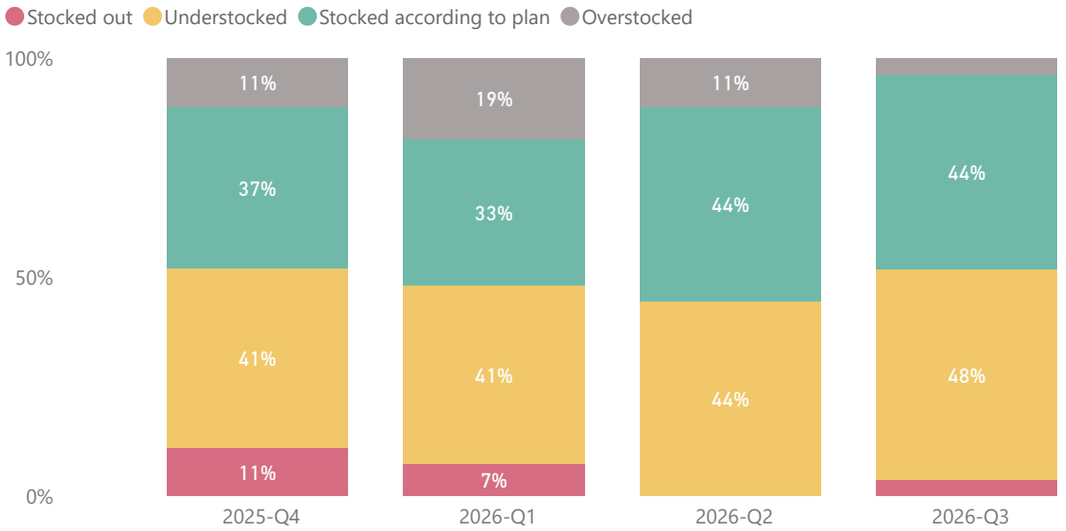
The reporting rate for malaria commodity sites increased from 66 percent to 74 percent between FY 2026 Q2 and FY 2026 Q3, although it remained below the target. This improvement reflects ongoing efforts to encourage healthcare facility managers to resume entering logistics data into DHIS2 following the discontinuation of interoperability between Medexis and DHIS2 in January 2026, which had initially disrupted routine reporting.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Burundi | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Rapport CAMEBU

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

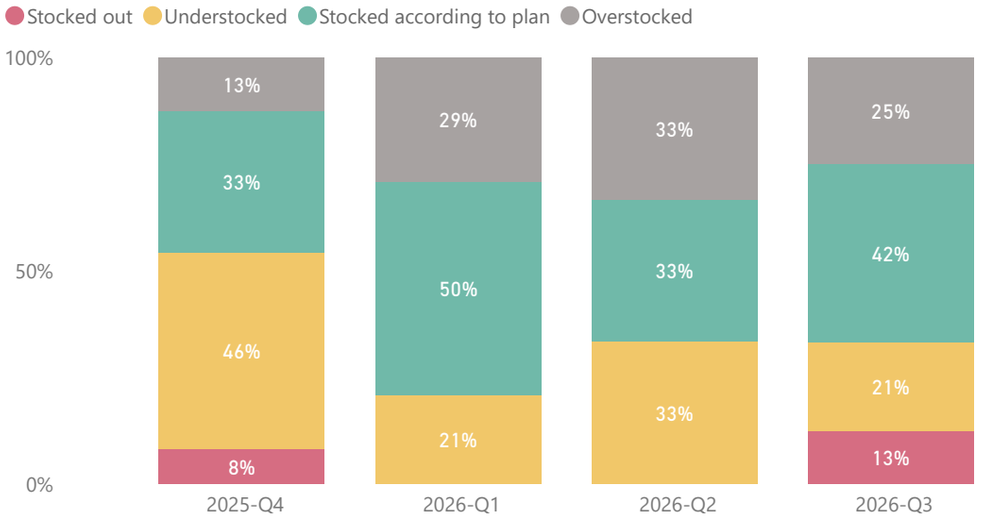
Ref	Analysis
B2	At the central level, the proportion of HIV/AIDS commodities stocked according to plan remained unchanged at 44 percent in FY 2026 Q3 compared with FY 2026 Q2. The proportion of commodities that were understocked increased from 44 percent to 48 percent over the same period, while the stock-out rate rose from 0 percent to 4 percent. Laboratory commodities were understocked during April and May; however, stock levels improved following replenishment deliveries received in June. The stock-out rate recorded in FY 2026 Q3 was primarily driven by the unavailability of the most widely used first-line pediatric ARV at the central level. Despite this central-level stock-out, the product remained available at SDPs.
C7	There was no product loss to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

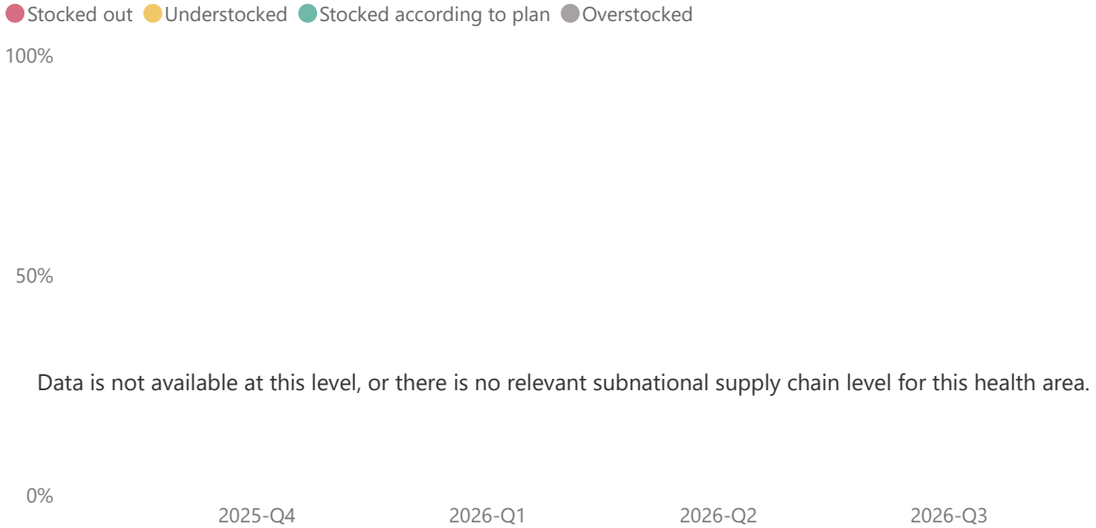
Country: Burundi | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Rapport CAMEBU

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)

Data is not available at this level, or there is no relevant subnational supply chain level for this health area.

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref Analysis

Ref	Analysis
B2	For malaria commodities at the central warehouses, the proportion of products stocked according to plan increased from 33 percent in FY 2026 Q2 to 42 percent in FY 2026 Q3, driven by AL 6x1, SP, and LLINs moving from overstocked to optimal stock levels. Over the same period, the proportion of understocked commodities decreased from 33 percent to 21 percent, reflecting improved inventory management. However, the proportion of products that were stocked out increased to 13 percent in FY 2026 Q3, indicating persistent supply challenges for a subset of key malaria commodities.
C7	There was no product loss to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Burundi

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [90 tablets]
2nd line adult ARV	Abacavir/Lamivudine 600/300 mg Tablet
Pediatric ARV	Abacavir/Lamivudine 120/60 mg Scored Dispersible Tablet
First RTK	Determine
Second RTK	SD BIOLINE HIV 1/2-3.0, Kit/25 tests
Tie-breaker RTK	Not reported
Viral load reagent	Saarstedt 5 mL Reaction Vessels
Viral load consumable	Abbott Real time HIV amplification reagent kit
EID reagent	Abbot m2000 sp reagent vessel 200ml
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All required commodity supply plans for HIV/AIDS and malaria commodities were updated and submitted to GHSC-PSM HQ this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
TPT	✓	✓	✓	✓
Essential Medicines	✓	✓		✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Burundi

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**4.3%**	**681**
HIV-First RTK	15.5%	84
HIV-Most used 1st line ARV	2.2%	459
HIV-Most used 2nd line ARV	4.3%	138
Malaria	**6.3%**	**5,316**
Malaria-First line ACT (AL 6x1)	4.6%	857
Malaria-First line ACT (AL 6x2)	4.2%	855
Malaria-First line ACT (AL 6x3)	5.3%	853
Malaria-First line ACT (AL 6x4)	5.4%	910
Malaria-LLINs	9.0%	610
Malaria-Rapid diagnostic test for malaria	7.5%	702
Malaria-Sulphadoxine-pyrimethamine	11.0%	529
Overall	**6.1%**	**5,997**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	2.2%	920

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	58%	968
Malaria	74%	1355

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**43%**	**14%**	**35%**	**8%**	**51**
HIV/AIDS	44%	4%	48%	4%	27
Malaria	42%	25%	21%	13%	24
Overall	**43%**	**14%**	**35%**	**8%**	**51**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Essential Medicines	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

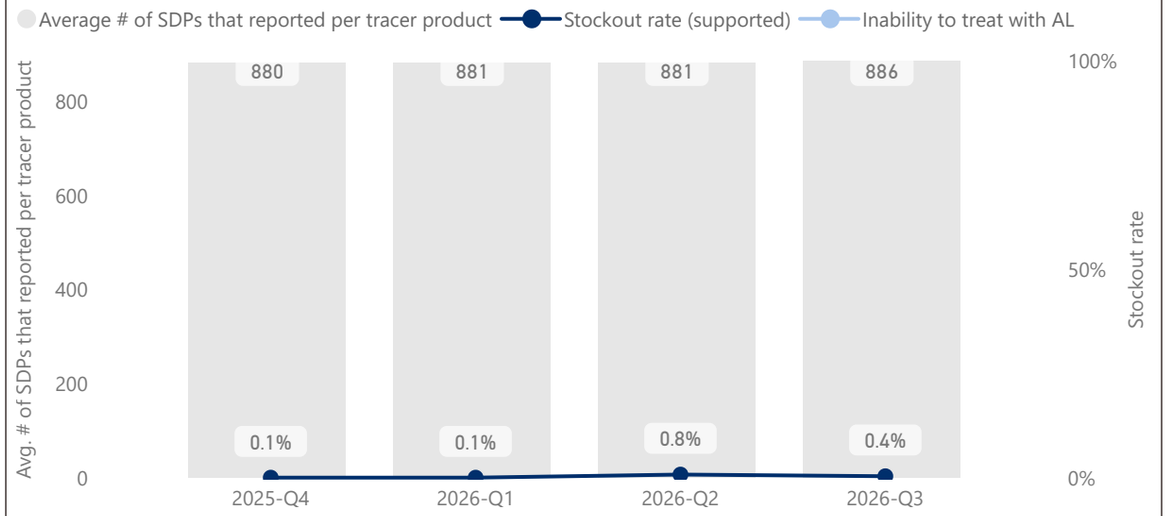
Country

Cambodia

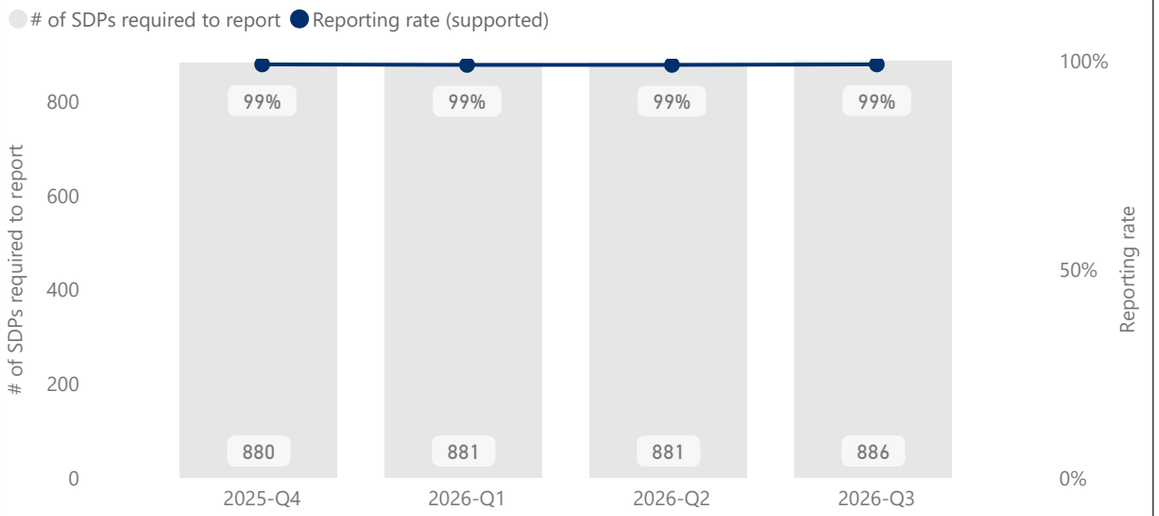
Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Cambodia | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source

CNM MIS, Stock out rate at HF (ACT)_2026_May
CNM MIS, Stock out rate at HF (RDT)_2026_May

B3. Data Source (denominator)

CNM MIS-HF Stock Data - 2026 May

B3. Data Source (numerator)

CNM MIS-HF Stock Data - 2026 May

Analysis

The tracer products being reported for malaria are RDT and ASPY 180mg/60mg FDC 9 tabs from CNM Malaria Information System (MIS). This quarter, the stockout rate for these tracer products decreased slightly from 0.8 percent in the previous period to 0.4 percent. The low stockout rate indicates sufficient product stock at all health facilities. The decrease in overall stockouts is due to the successful completion of the RDT transition. Any stockout issues have already been addressed by the ODs/HFs with close monitoring and coordination from CNM, IPs and CSOs.

Analysis

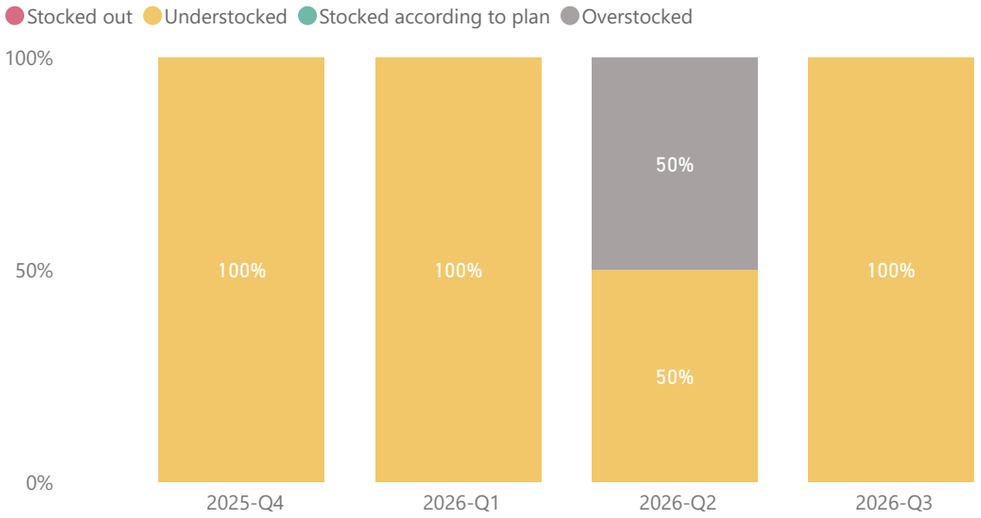
The LMIS reporting rate for malaria commodities remained consistent at 99 percent this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

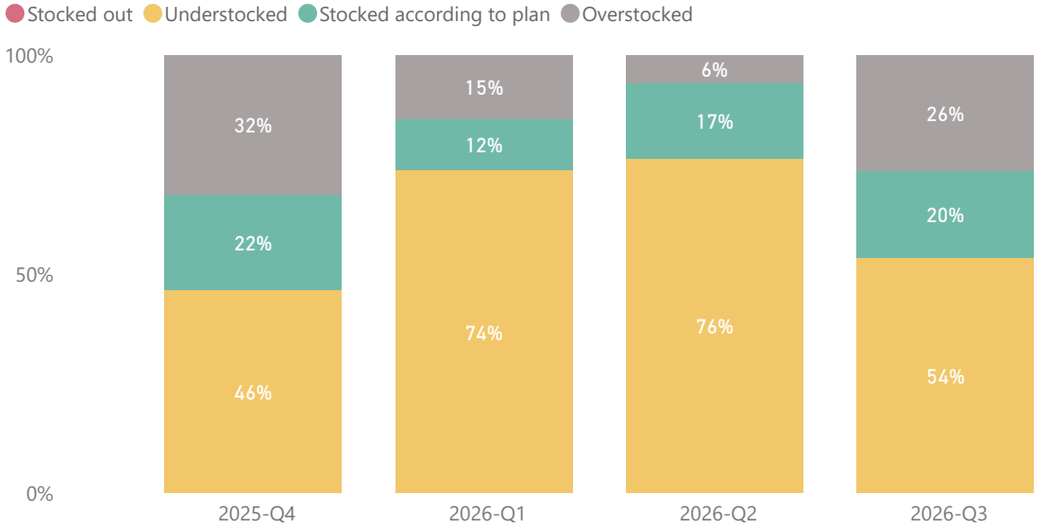
Country: Cambodia | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	CMS Report_30 Jun 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	Operational District Stock Data_May 2026

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	Stocked according to plan rates are reported for both the central and subnational level 1 for the malaria commodities of mRDTs and ASPY. At the central level, both products were entirely understocked. There were no observations for stockouts, overstocks, or stocking according to plan. At the subnational level, stock observations shifted to being more overstocked this quarter than previously, at 26 percent, with the majority of products remaining understocked, at 54 percent, and some products being stocked according to plan, at 20 percent. The understock of mRDTs resulted from the large distribution from CMS to health facilities for the transition. The stock status will be resolved by shipment delivery in mid-July 2026. The transition from Pf/Pv to Pf/Pan mRDT in the country has been successfully completed. The LMIS report will need more logistics data of the new mRDT product for at least 6 months to provide an accurate stock status indicator.
C7	There were no product losses to report this quarter.

HIV Tracer Products and Supply Planning

Country: Cambodia

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

The required supply plan was submitted this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
Malaria commodities	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Cambodia

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
Malaria	**0.4%**	**1,772**
Malaria-First line ACT (ASPY 180/60mg, 9 tabs)	0.1%	886
Malaria-Rapid diagnostic test for malaria	0.7%	886
Overall	**0.4%**	**1,772**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
Malaria	99%	886

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central			**100%**		**2**
Malaria			100%		2
Subnational level 1	**20%**	**26%**	**54%**		**110**
Malaria	20%	26%	54%		110
Overall	**20%**	**26%**	**54%**		**112**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

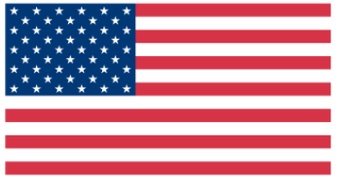
Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

Country

DRC

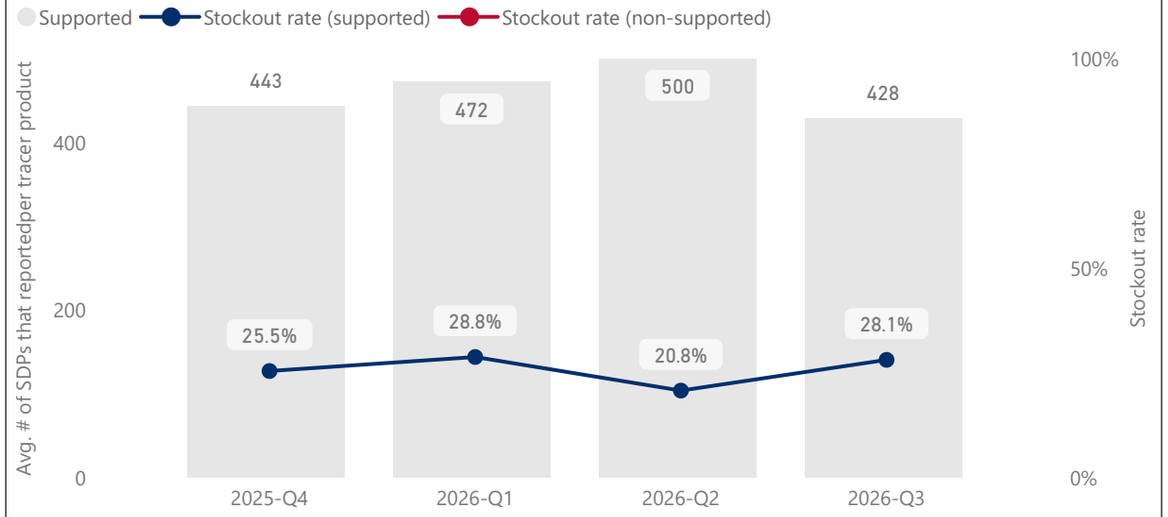




Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: DRC | Current Quarter: 2026-Q3 | Tracer Product: All

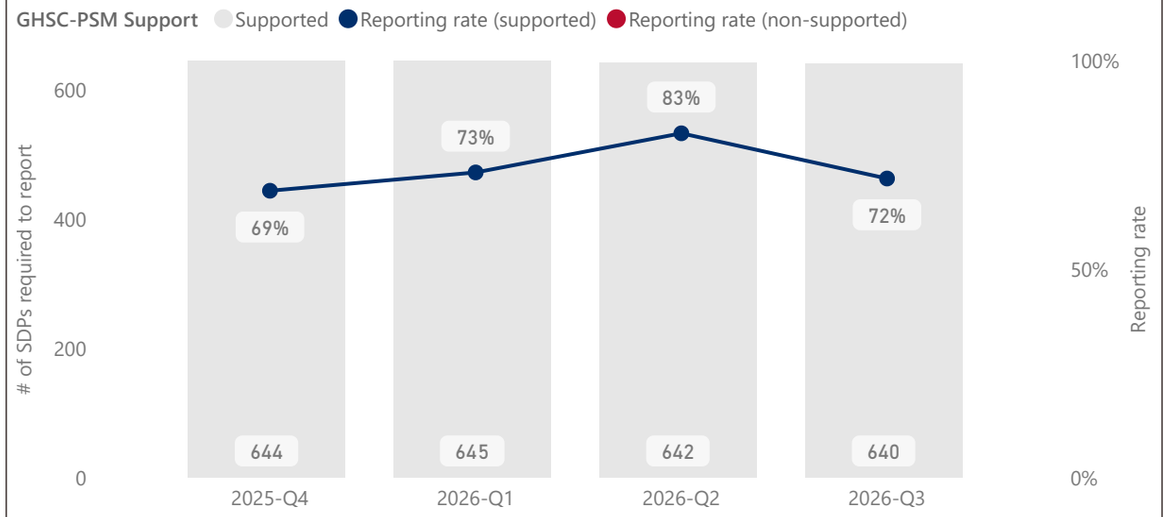
B1. Stockout rate at service delivery points



Data source

Infomed

B3. LMIS reporting rate



B3. Data Source (denominator)

Infomed

B3. Data Source (numerator)

Infomed

Analysis

The average stockout rate for HIV/AIDS tracer commodities increased from 20.8 percent in FY 2026 Q2 to 28.1 percent in FY 2026 Q3. This increase between the two quarters is attributable to reduced ordering of second-line ARVs by SDPs due to low patient volumes, limited distribution of pediatric ARVs to facilities, and the ongoing transition of pediatric formulations from ABC/3TC to pALD. The project is strengthening support to provincial and zonal stakeholders to improve LMIS reporting completeness and revising tracer commodities to ensure alignment with evolving treatment protocols and consumption patterns.

Analysis

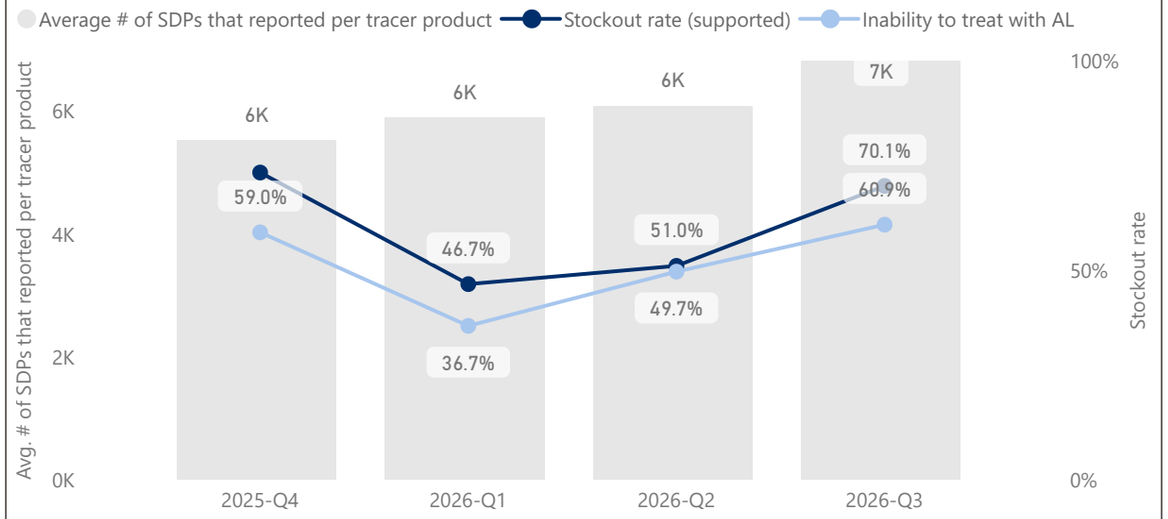
In FY 2026 Q3, 459 out of 640 sites submitted data. The overall reporting rate for HIV/AIDS reporting sites declined from 83 percent in FY 2026 Q2 to 72 percent in FY 2026 Q3. Lower reporting rates were observed at the primary and secondary levels. To improve reporting performance, GHSC-PSM is supporting targeted coaching for new LMIS users, promoting the use of electronic tablets for reporting, and planning joint supervisory visits to low-performing sites, particularly in Kinshasa Province, to strengthen reporting completeness and timelines.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: DRC | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



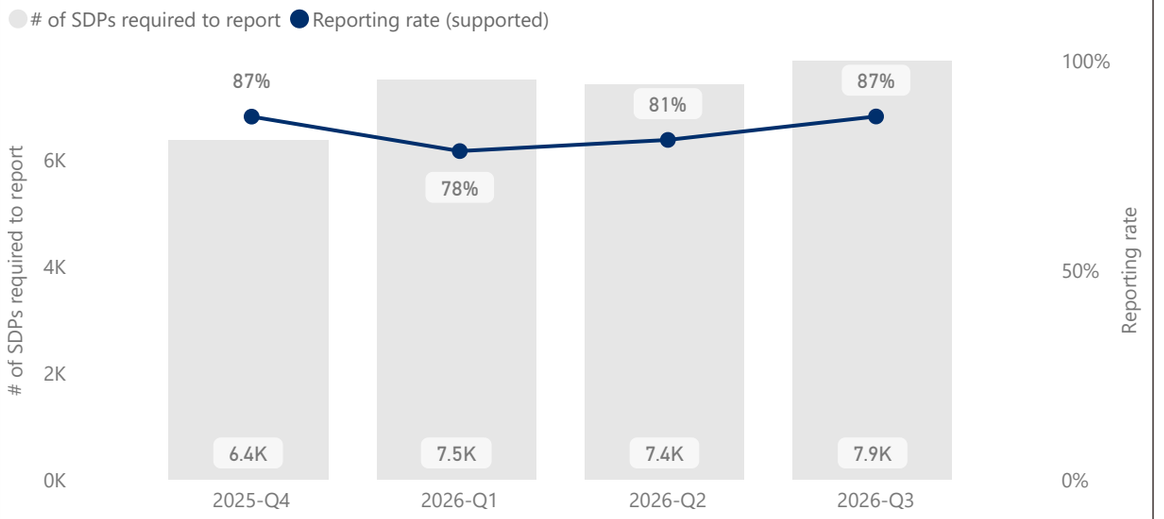
Data source

Infomed

Analysis

The stockout rate for tracer malaria commodities increased from 51 percent in FY 2026 Q2 to 70.1 percent in FY 2026 Q3. This increase reflects delays in last-mile distribution during the quarter due to the late arrival of ASAQ and other antimalarial commodities through international shipments. The project is working with national-level stakeholders to expedite commodity deliveries and complete distributions to improve product availability at SDPs.

B3. LMIS reporting rate



B3. Data Source (denominator)

Infomed

B3. Data Source (numerator)

Infomed

Analysis

In FY 2026 Q3, the overall reporting rate for sites stocking malaria commodities was 87 percent, based on 7,872 expected reports. Reporting rates were 87 percent at the primary level, 84 percent at the secondary level, and 100 percent at the tertiary level. This represents an improvement from the 81 percent reported in FY 2026 Q2. However, further improvement is required to meet the national benchmark of 90 percent.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: DRC | Current Quarter: 2026-Q3 | Tracer Product: All

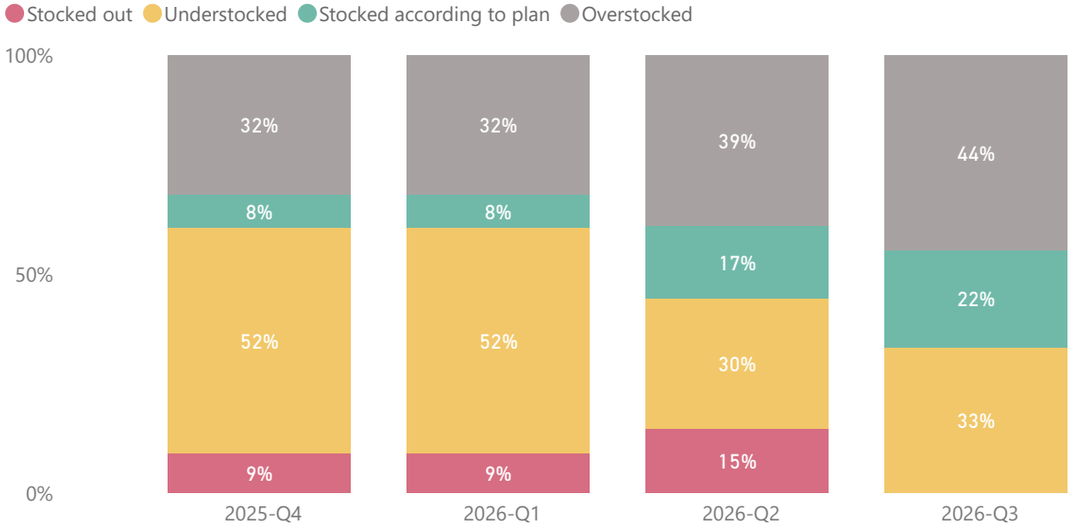
B2. Stocked according to plan - Central level



Data is not available at this level, or there is no relevant national supply chain level for this health area.

Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant national supply chain level for this health area.	

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	DISMED

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Subnational Level 1	Storage	Expiry	HIV/AIDS commodities	$1,468,899	$23,156,128	6.34%

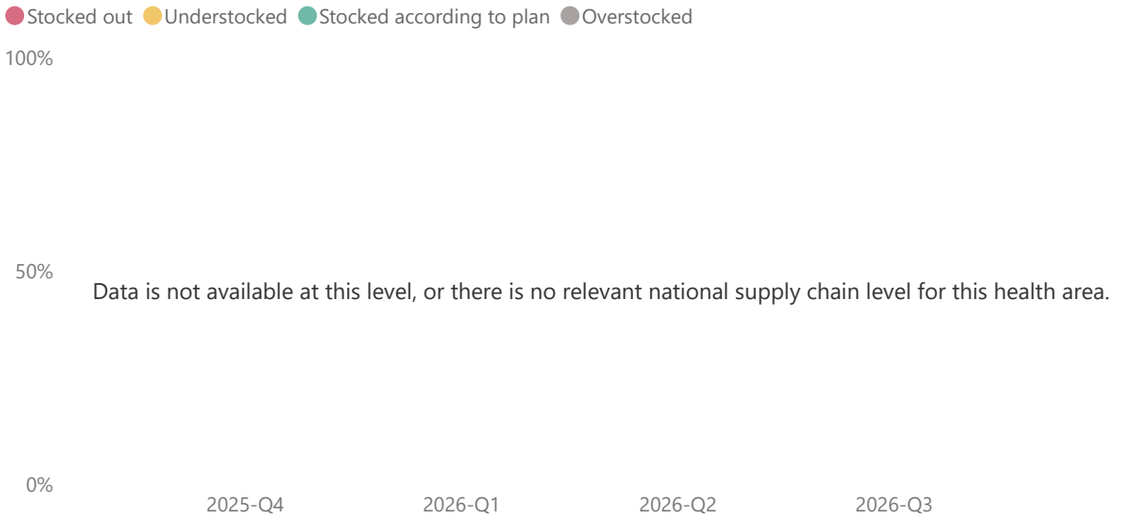
Ref	Analysis
B2	The percentage of HIV/AIDS commodities at regional warehouses that were stocked according to plan increased from 17 percent in FY 2026 Q2 to 22 percent in FY 2026 Q3. In addition, no regional warehouse experienced stockouts during the reporting period, compared with 15 percent in FY 2026 Q2. However, 44 percent of commodities were overstocked, primarily first-line ARVs, while 33 percent were understocked. To address these stock imbalances, GHSC-PSM and its stakeholders are strengthening redistribution across regional warehouses, accelerating pipeline deliveries, and enhancing monitoring of products at risk of expiry to improve overall stock balances.
C7	HIV commodities valued at USD 1,468,899 were lost to expiry during the quarter. This represents an expiry rate of 6.3 percent against an average stock value of USD 23,156,128. The project is strengthening forecasting, stock monitoring, and redistribution practices to reduce future commodity losses.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

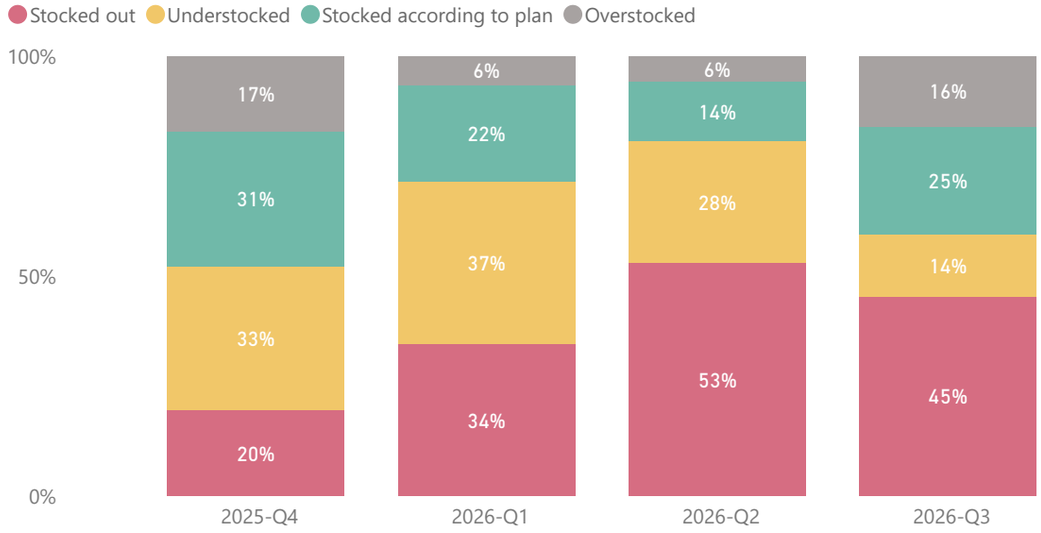
Country: DRC | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant national supply chain level for this health area.	

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	DISMED

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Subnational Level 1	Storage	Expiry	Malaria commodities	$117,491	$6,521,220	1.80%

Ref Analysis

Ref	Analysis
B2	At regional warehouses, 25 percent of tracer malaria commodities were stocked according to plan, 16 percent were overstocked, 14 percent were understocked, and 45 percent were stocked out in FY 2026 Q3. These stock observations reflect continued imbalances in the availability of malaria commodities, particularly ACTs, due to the delayed arrival of international shipments and high consumption levels during the quarter. The recent receipt of ASAQ formulations in-country is expected to improve availability as distributions are completed. To address the observed stock imbalances, GHSC-PSM and its stakeholders will continue to prioritize pipeline deliveries, while closely monitoring products at risk of expiry to improve availability at the regional warehouses
C7	Malaria commodities valued at USD 117,491 were lost to expiry out of an average inventory value of USD 6,521,220. This corresponds to an expiry rate of 1.8 percent. Continued monitoring of stock levels, redistribution of products where appropriate, and improvements in forecasting are expected to help mitigate future commodity losses.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: DRC

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [90 tablets]
2nd line adult ARV	Lamivudine 150mg + Zidovudine 300mg, Tab, 60, Vrac
Pediatric ARV	Abacavir/Lamivudine 120/60mg, Dispersible tablets (60 Tablets)
First RTK	Determine HIV 1/2, Test (Kit de 100 tests)
Second RTK	HIV-1/2 RTK, STAT-PAK Assay, 20 Tests
Tie-breaker RTK	Uni-Gold HIV, Test (Kit de 20 tests)
Viral load reagent	Cobas 4800 HIV-1 QT-QL CE-1VD, 120 Test
Viral load consumable	Cobas 4800, System Lysis Kit 2 CE-IUD, 960 Tests
EID reagent	m 2000 HIV-1 Qualitative Amplification (0466-090)
EID consumable	Cobas 4800, System Lysis Kit 2 CE-IUD, 960 Tests

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

Supply plans for five product groups (malaria, ARVs, TPT, laboratory commodities, and RTKs) were reviewed, updated, and submitted to the GHSC-PSM FASP team. These supply plans are expected to align procurement, address stock imbalances, and promote availability across the supply chain.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
Malaria commodities	✓	✓	✓	✓
ARVs	✓	○	✓	✓
Lab (HIV diagnostics)	✓	○	✓	✓
RTKs		○	✓	✓
TPT		○	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: DRC

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**28.1%**	**2,140**
HIV-"Tie-breaker" RTK	25.7%	428
HIV-First RTK	30.4%	428
HIV-Most used 1st line ARV	12.6%	428
HIV-Most used 1st line pediatric ARV	59.1%	428
HIV-Most used 2nd line ARV	12.9%	428
Malaria	**70.1%**	**75,042**
Malaria-First line ACT (AL 6x1)	78.9%	6,822
Malaria-First line ACT (AL 6x2)	71.1%	6,822
Malaria-First line ACT (AL 6x3)	70.7%	6,822
Malaria-First line ACT (AL 6x4)	70.7%	6,822
Malaria-First line ACT (AS/AQ 100/270mgx3)	82.1%	6,822
Malaria-First line ACT (AS/AQ 100/270mgx6)	80.5%	6,822
Malaria-First line ACT (AS/AQ 25/67.5mg)	81.9%	6,822
Malaria-First line ACT (AS/AQ 50/135mg)	82.1%	6,822
Malaria-LLINs	66.9%	6,822
Malaria-Rapid diagnostic test for malaria	41.0%	6,822
Malaria-Sulphadoxine-pyrimethamine	45.3%	6,822
Overall	**68.9%**	**77,182**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	60.9%	6,822

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	72%	640
Malaria	87%	7872

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Subnational level 1	**24%**	**21%**	**17%**	**38%**	**318**
HIV/AIDS	22%	44%	33%	0%	54
Malaria	25%	16%	14%	45%	264
Overall	**24%**	**21%**	**17%**	**38%**	**318**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

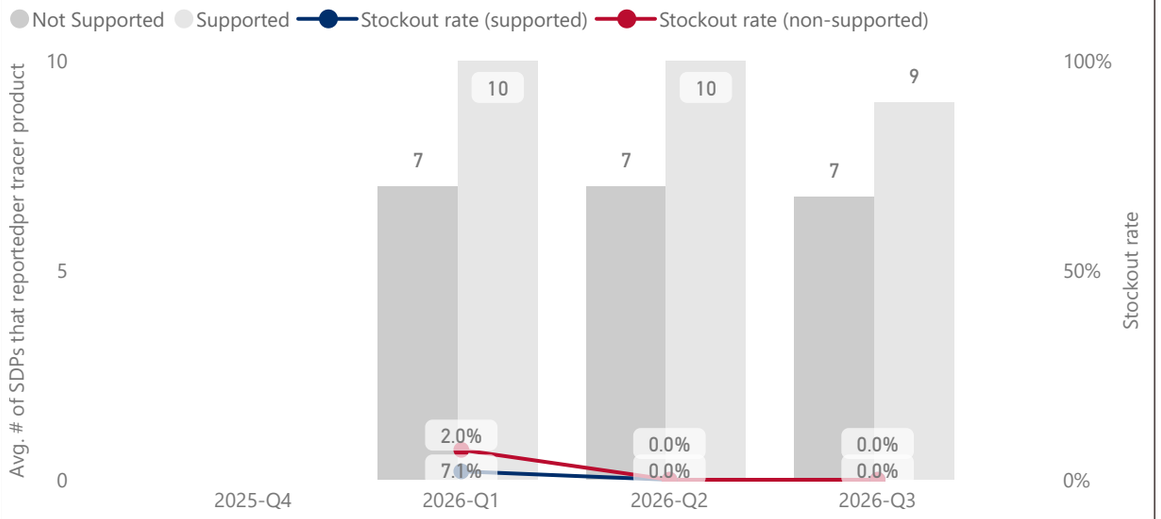
Country

El Salvador

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: El Salvador | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



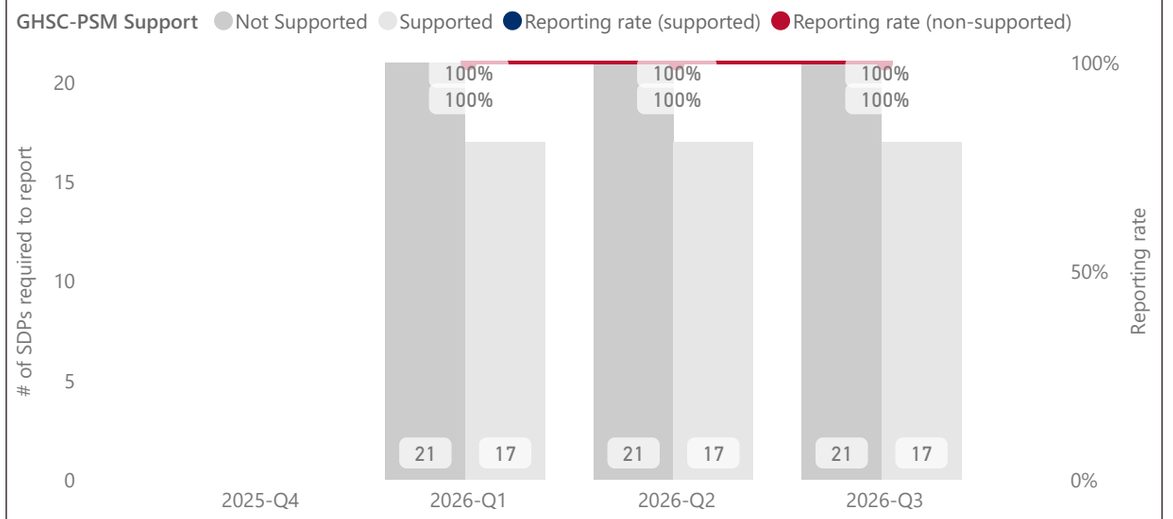
Data source

SUMEVE (Single System for Monitoring and Evaluation of HIV Epidemiological Surveillance),SINAB(National Supply System) AND SIS (Health Information System) Period base May 2026

Analysis

The stockout rate for HIV/AIDS tracer products at both supported and non-supported SDPs this quarter was 0 percent, with no facilities reporting any stockouts. GHSC-PSM continues to monitor the supply plan on a monthly basis and advocate for the Ministry of Health to expedite procurement processes and prevent supply issues, as there are other medications facing critical supply shortages (notably non-tracer products), as well. Donations of critical medicines have arrived this quarter.

B3. LMIS reporting rate



B3. Data Source (denominator)

SUMEVE (Single System for Monitoring and Evaluation of HIV Epidemiological Surveillance),SINAB(National Supply System) AND SIS (Health Information System)

B3. Data Source (numerator)

SUMEVE (Single System for Monitoring and Evaluation of HIV Epidemiological Surveillance),SINAB(National Supply System) AND SIS (Health Information System)

Analysis

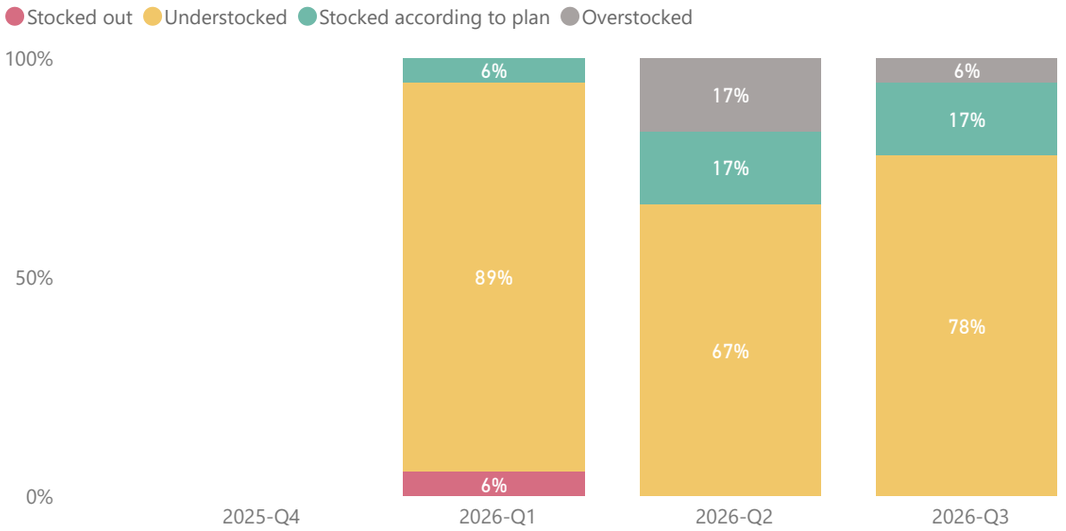
All SDPs (supported and non-supported) reported consumption through the MOH's electronic systems at 100 percent, as well as utilizing inventories that have transactional systems that allow inventory balances to be kept up to date for all sites.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: El Salvador | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Central	SINAB (National Supply System)

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Central	Storage	Expiry	Adult ARVs and Pediatric ARVs	$3,416	$963,376	0.35%

Ref	Analysis
B2	Tracer products at the central level in El Salvador in FY2026 Q3 remain primarily understocked, at 78 percent, with observations having shifted even further into understocks this quarter. Products stocked according to plan have remained consistent at 17 percent, and overstocked products have decreased to 6 percent. As with the previous quarter, there were no stockout observations. First line adult ARV was mostly understocked, while pediatric ARV, first RTK, and viral load reagent were entirely understocked. However, the second line adult ARV was mostly stocked according to plan, with some overstock observations. At the central level, there is a critical shortage of the first line adult ARV in the 30-tablet package; a purchase is currently in progress, but there is the option to switch to the 90-tablet package if necessary. However, stocks are available at the SDP level for both the first line adult ARV and pediatric ARV. The GHSC-PSM project continues to monitor the plan and advocate for the MOH to streamline its procurement processes.
C7	During this period, less than one percent of average value of the shares expired at the central level ($3,416). The expired products are antiretroviral medications for adults and medications for exposed children.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: El Salvador

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir+Lamivudina+Tenofo, (50+300+300) mg, Frasco 30/90 tabletas
2nd line adult ARV	Ritonavir, 100 mg, Frasco por 100, protegido de la luz
Pediatric ARV	Dolutegravir, 10 mg, Frasco 90 tabletas
First RTK	Prueba Rápida Cualitativa para la Detección de anticuerpos anti VIH A1
Viral load reagent	Prueba para determinación molecular de Carga Viral del virus de VIH

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

El Salvador has no Priority 1 supply plan submissions due to GHSC-PSM HQ, and therefore does not report on this indicator.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: El Salvador

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.0%**	**45**
HIV-First RTK	0.0%	16
HIV-Most used 1st line ARV	0.0%	17
HIV-Most used 1st line pediatric ARV	0.0%	2
HIV-Most used 2nd line ARV	0.0%	5
HIV-Viral load reagent	0.0%	5
Overall	**0.0%**	**45**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	17

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**17%**	**6%**	**78%**		**18**
HIV/AIDS	17%	6%	78%		18
Overall	**17%**	**6%**	**78%**		**18**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

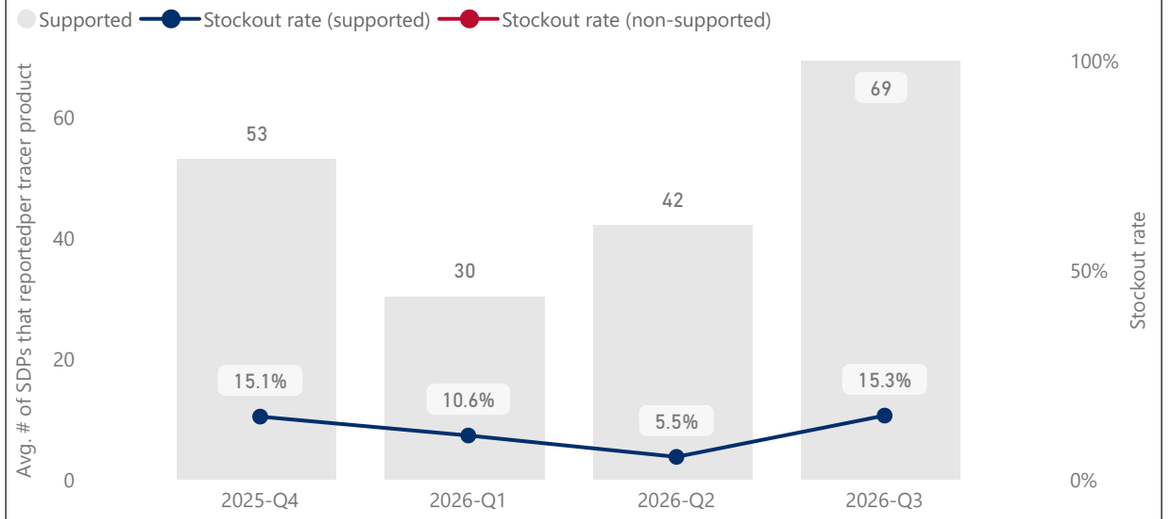
Country

Eswatini

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Eswatini | Current Quarter: 2026-Q3 | Tracer Product: All

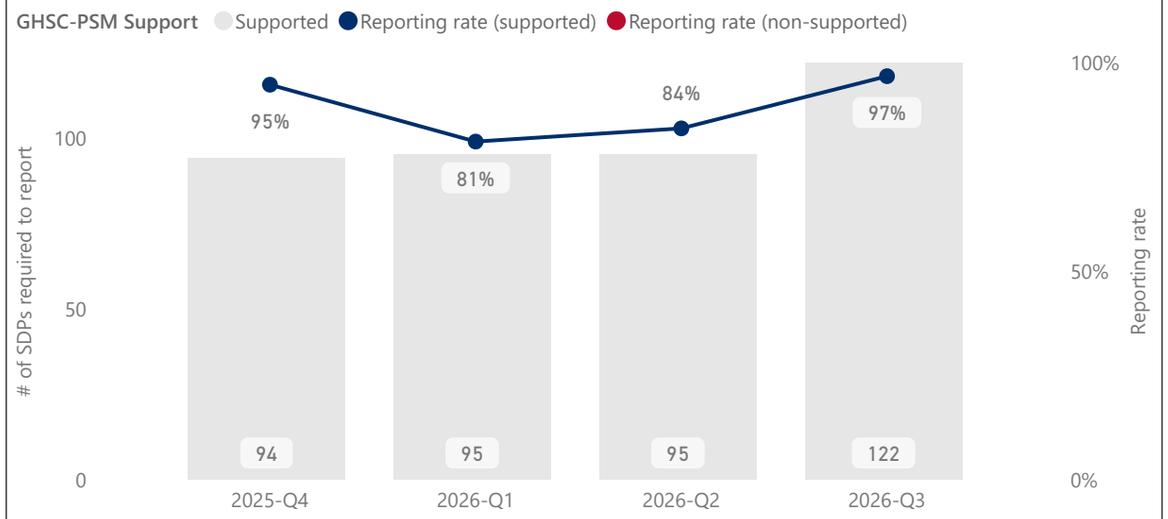
B1. Stockout rate at service delivery points



Data source

CTS

B3. LMIS reporting rate



B3. Data Source (denominator)

CTS

B3. Data Source (numerator)

CTS

Analysis

The overall SDP-level stockout rate for Eswatini HIV/AIDS tracer products during FY2026 Q3 was 15.3 percent, an increase from last quarter. RTKs faced higher stockouts this quarter, with first RTK having a stockout rate of 20 percent, second RTK having a stockout rate of 28 percent, and tie-breaker RTK having a stockout rate of 15 percent. All other products had very low or no stockouts. The HIV second RTK stockout was driven by the rationed distribution of limited government-procured stock that was delivered to CMS in March 2026 before sufficient USG procured stock arrived at the end of March 2026 just before the CMS closed for the annual stock take. Meanwhile, HIV first RTK stockouts occurred because facilities placed orders using an incorrect issue unit, assuming supplies would be issued in packs of 10, whereas deliveries were made as single units. As a result, the quantities received were significantly lower than the quantities anticipated. The tie-breaker RTK stockout was caused by a government procurement that had been planned for delivery in March 2026 but did not materialize. The order was subsequently cancelled at the close of the government financial year, resulting in insufficient stock availability at the service delivery points. Expedited and interfacility redistributions were made to avert further stockouts.

Analysis

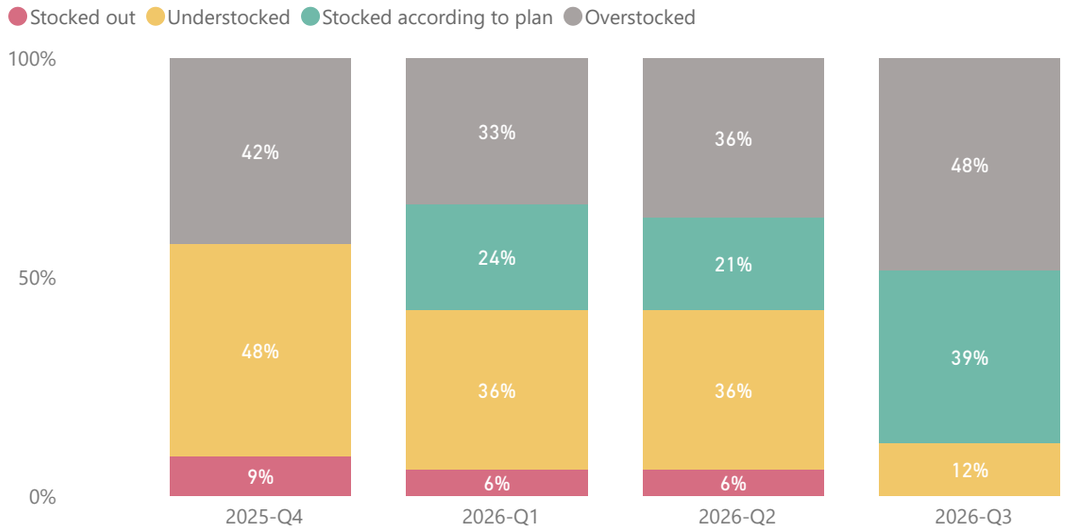
The LMIS reporting rate into the Commodity Tracking System (CTS) for this quarter was 97 percent, representing an increase from 84 percent last quarter. During the reporting period, the number of facilities expected to report on HIV-Most used 1st line ARV increased from 95 to 122 facilities due to the ongoing accreditation of additional ART service delivery points. Despite the expanded reporting base, reporting completeness improved, demonstrating strengthened LMIS compliance and increased visibility of commodity availability across the HIV program.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Eswatini | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	NAV

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	GHSC-PSM reports stocked according to plan data only at the central level using a minimum of four and a maximum of seven months of stock (MOS) to determine compliance. In FY2026 Q3, the stocked according to plan rate increased to 39 percent of tracer products, while most products were overstocked (48 percent). Understocks accounted for the remaining 12 percent of products this quarter, as there were no stockouts. Most of the RTK observations were overstocked, due to orders being delivered mid-quarter without the products moving down the supply chain yet. The facility-level (B1) stockouts should decrease next quarter. The product accounting for the understocks is RUTF, which was driven by increased demand creation and accelerated distributions to ensure existing batch that expires in June 2026 is not wasted. Most used first line ARV was stocked according to plan in two observations. These improvements were achieved through expedited deliveries implemented to mitigate stock-out risks identified during Q2, following the release of previously delayed bridge funding commitments.
C7	GHSC-PSM does not have custody of any products in Eswatini and therefore does not report on product losses.

HIV Tracer Products and Supply Planning

Country: Eswatini

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir (300/300/50mg)
2nd line adult ARV	Atazanavir/Ritonavir (300/100mg)
Pediatric ARV	Dolutegravir 10mg
First RTK	OraQuick Self-Test
Second RTK	HIV ½ Determine
Tie-breaker RTK	HIV ½ Uni-Gold
Viral load reagent	COBAS 5800/6800/8800 HIV-1 Quantitative Amplification Reagent 192 T
Viral load consumable	Kit Cobas HBV/HCV/HIV-1 Control CE-IVD (1x8 set)
EID reagent	COBAS 5800/6800/8800 HIV-1/HIV-2 Qualitative Amplification Reagents IVD 192 T
EID consumable	Cobas HIV-1/HIV-2 Positive Control 8T

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

Both supply plans were updated and submitted to GHSC-PSM HQ.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Eswatini

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**15.3%**	**764**
HIV-"Tie-breaker" RTK	15.1%	166
HIV-EID consumable	50.0%	4
HIV-EID reagent	50.0%	4
HIV-First RTK	20.9%	153
HIV-Most used 1st line ARV	0.8%	118
HIV-Most used 1st line pediatric ARV	3.0%	67
HIV-Most used 2nd line ARV	4.4%	68
HIV-RUTF		0
HIV-Second RTK	28.1%	178
HIV-Viral load consumable	0.0%	3
HIV-Viral load reagent	0.0%	3
Overall	**15.3%**	**764**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	97%	122

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**39%**	**48%**	**12%**	**0%**	**33**
HIV/AIDS	39%	48%	12%	0%	33
Overall	**39%**	**48%**	**12%**	**0%**	**33**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

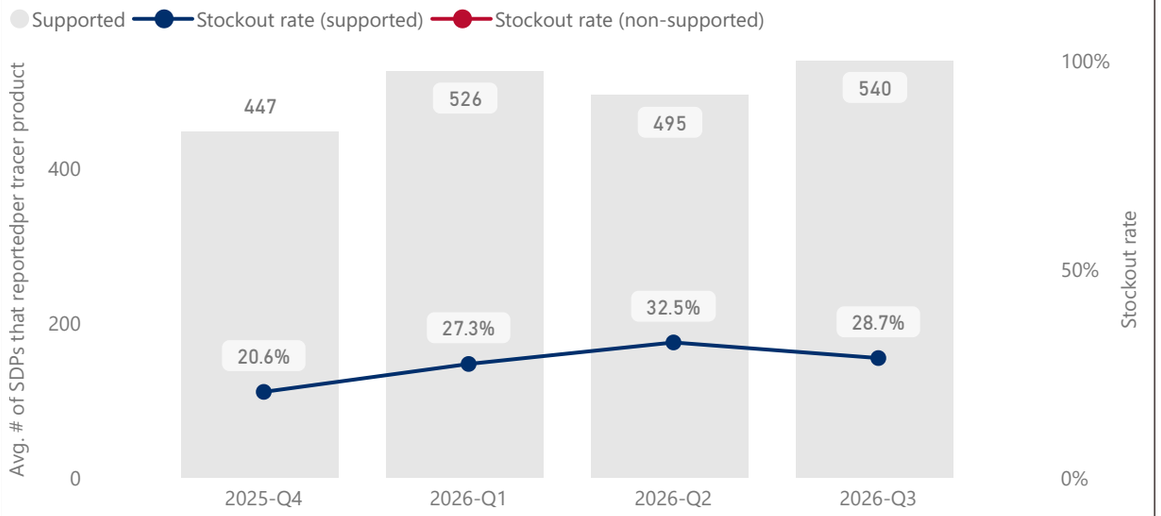
Country

Ghana

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Ghana | Current Quarter: 2026-Q3 | Tracer Product: All

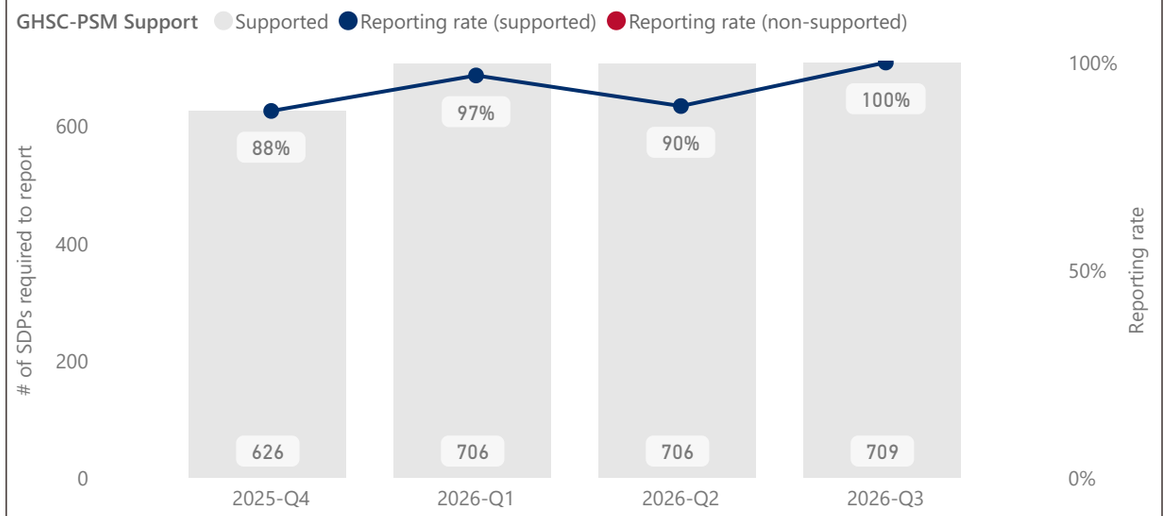
B1. Stockout rate at service delivery points



Data source

HIV LMIS Report for May 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

HIV LMIS Report for May 2026

B3. Data Source (numerator)

HIV LMIS Report for May 2026

Analysis

During Q3 FY2026, Ghana transitioned HIV rapid test kit (RTK) reporting from the First Response RTK to the newly introduced STANDARD Q HIV 1/2 Ab 3-Line Test Kit. Overall facility-level stockout rates for HIV commodities improved, declining from 32.5 percent in Q2 to 28.7 percent in Q3, largely due to a significant reduction in stockouts of the most-used first-line pediatric ARV, which fell from 11.8 percent to 2.1 percent. The new HIV RTK recorded a stockout rate of 42.3 percent, substantially lower than the 62.5 percent reported for the discontinued test kit in Q2, reflecting the impact of sustained last-mile distribution efforts. Despite these gains, continued focus is needed to strengthen integration and uptake of the STANDARD Q HIV 1/2 Ab 3-Line Test Kit across health facilities and improve availability of the most-used second-line ARV, which recorded persistently high stockout rates of 53.1 percent in Q1 and 54.6 percent in Q2 FY2026, to ensure treatment continuity and preparedness for clients requiring regimen changes.

Analysis

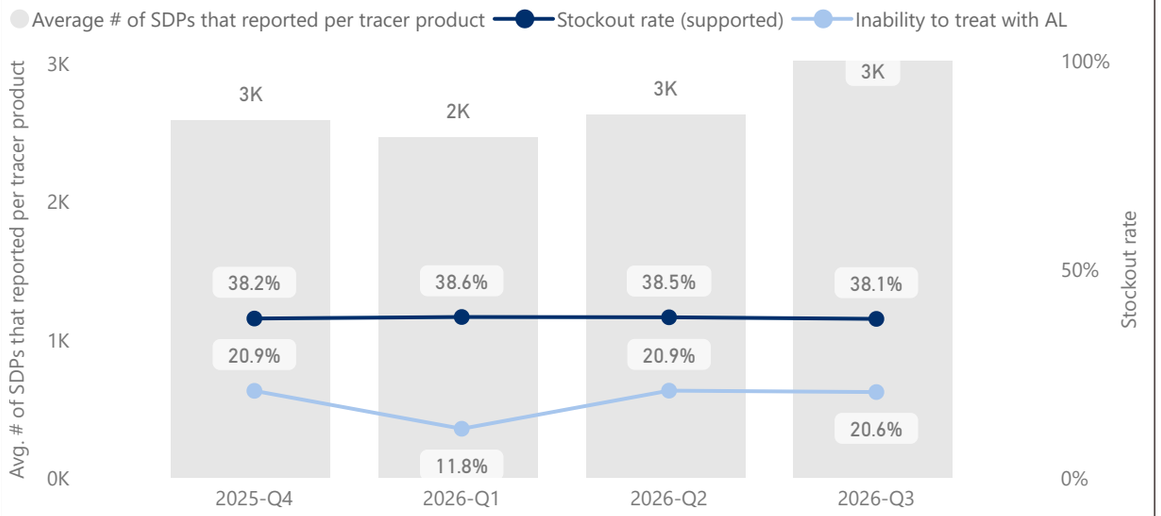
The HIV LMIS reporting rate increased from 90 percent in Q2 FY2026 to 100 percent in Q3 FY2026. This improvement reflects targeted follow-up with non-reporting facilities by the National AIDS/STI Control Programme (NACP) to ensure compliance with reporting requirements.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

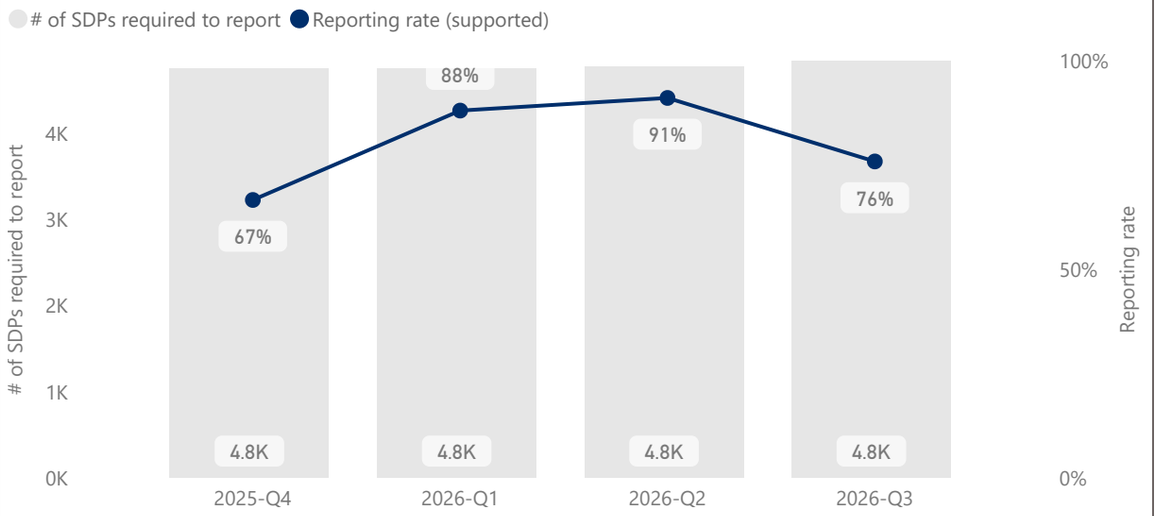
Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Ghana | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source

GhiLMIS End May 2026

B3. Data Source (denominator)

GhiLMIS End May 2026

B3. Data Source (numerator)

GhiLMIS End May 2026

Analysis

The facility-level stockout rate for malaria commodities remained high but stable, at 38.1 percent in Q3 FY2026 compared with 38.5 percent in Q2 FY2026. This was driven by widespread stockouts across artemisinin-based combination therapy (ACT) presentations, which ranged from 35.4 percent to 48.0 percent due to inadequate stocks at regional warehouses. Despite these challenges, 79.4 percent of health facilities maintained the ability to treat malaria across all age groups through the availability of at least one Artemether/Lumefantrine (AL) formulation. Malaria rapid diagnostic test (mRDT) stockouts reached 25.8 percent, largely due to delays in releasing more than four million newly received test kits that remained under quarantine pending quality testing. In collaboration with the National Malaria Elimination Programme (NMEP), the project will continue monitoring stock levels and implementing targeted redistributions to address supply gaps.

Analysis

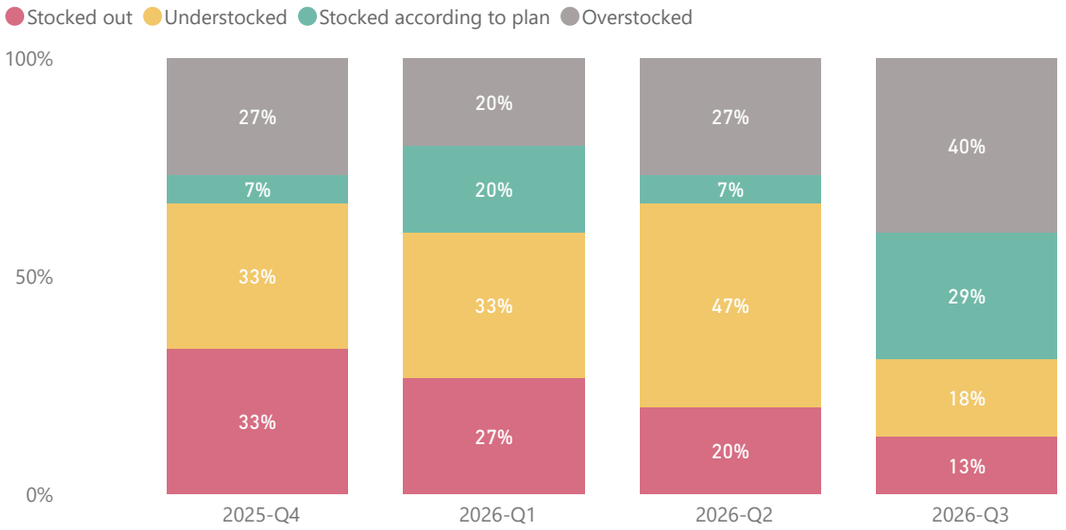
The malaria LMIS reporting rate declined from 91 percent in Q2 FY2026 to 76 percent in Q3 FY2026. This reduction is attributable to GhiLMIS utilization challenges at some onboarded health facilities, arising from staff transfers and the absence of a standardized mechanism for building the capacity of newly posted staff.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

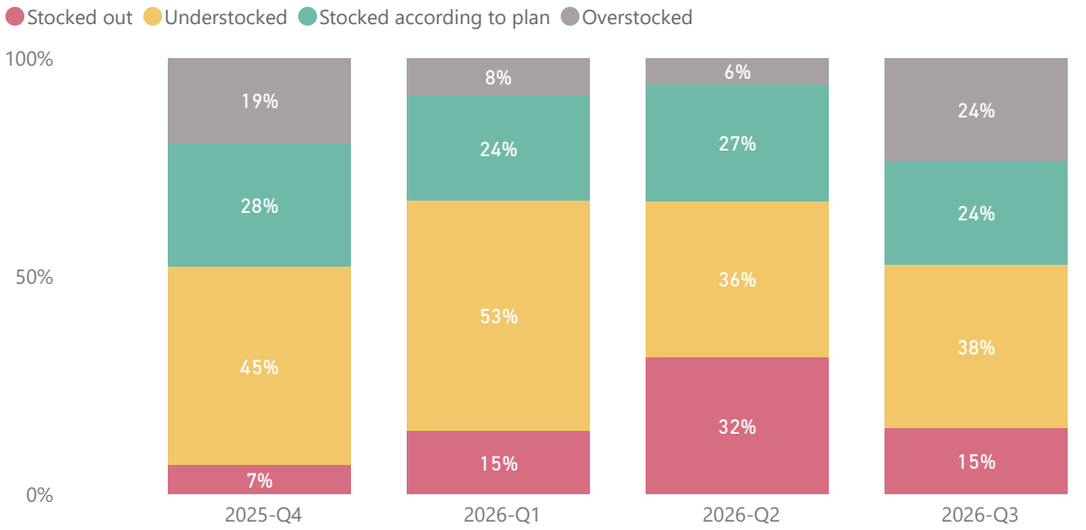
Country: Ghana | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	CMS Stock Status Report for April 2026, May 2026, June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	RMS Stock Status Report for April 2026, May 2026, June 2026

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

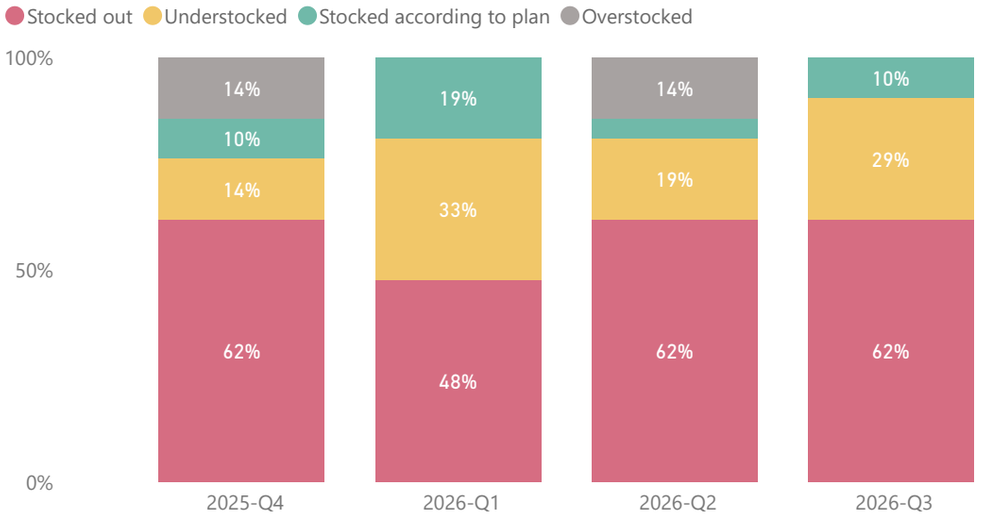
Ref	Analysis
B2	At the central level, supply performance improved between Q2 FY2026 and Q3 FY2026, with the proportion of products stocked according to plan increasing from 7 percent to 29 percent and stockouts declining from 20 percent to 13 percent. Overstocking rose from 27 percent to 40 percent, driven by high inventory levels of the most-used first-line ARV and the receipt of the most-used second-line ARV in June 2026. At the regional level, stockouts improved markedly from 32 percent in Q2 FY2026 to 15 percent in Q3 FY2026 following replenishment through central-level distribution activities, although the proportion of products stocked according to plan declined slightly from 27 percent to 24 percent.
C7	No product losses were recorded for HIV commodities.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

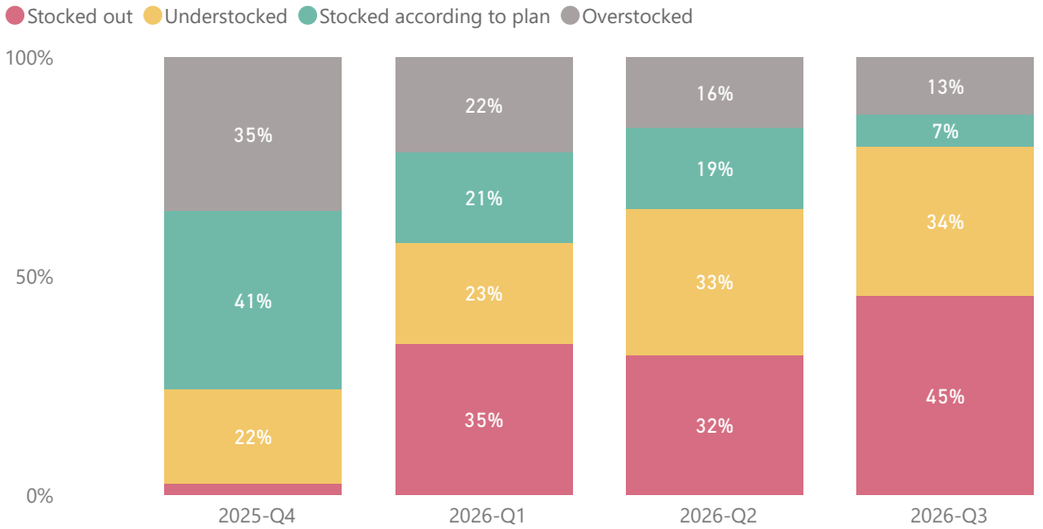
Country: Ghana | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	CMS Stock Status Report for April 2026, May 2026, June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	RMS Stock Status Report for April 2026, May 2026, June 2026

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	At the central level, the proportion of malaria products stocked according to plan improved from 5 percent in Q2 FY2026 to 10 percent in Q3 FY2026, while overstocking declined from 14 percent to 0 percent following the distribution of SP to regional warehouses. However, the central-level stockout rate remained unchanged at 62 percent. At the regional level, supply performance deteriorated between Q2 FY2026 and Q3 FY2026, with the proportion of products stocked according to plan declining from 19 percent to 7 percent and stockouts increasing from 32 percent to 45 percent, largely due to shortages of ACTs. Limited ACT availability at the central warehouse constrained replenishment to regional warehouses, although anticipated ACT shipments are expected to strengthen stock levels and improve supply across the network.
C7	No product losses were recorded for malaria commodities.

HIV Tracer Products and Supply Planning

Country: Ghana

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30 Tablets, 90 Tablets, 180 Tablets]
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg
Pediatric ARV	Abacavir 120 mg/Lamivudine 60mg Dispersible Tablet
First RTK	First Response
Second RTK	OraQuick
Tie-breaker RTK	Genscreen (ELISA test)
Viral load reagent	CAP/CTM HIV v2.0, Quantitative, 48 Tests
Viral load consumable	Not reported
EID reagent	CAP CTM HIV Qual 48 tests
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All required quarterly supply plan updates were submitted. Although, supply plans for ARVs and RTKs have been tracked in the past, they are not at the priority level to be reported within this report.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
Malaria commodities	✓	✓	✓	✓
ARVs	✓			
RTKs	✓			

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Ghana

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**28.7%**	**2,699**
HIV-First RTK	42.3%	707
HIV-Most used 1st line ARV	14.1%	707
HIV-Most used 1st line pediatric ARV	2.1%	382
HIV-Most used 2nd line ARV	54.6%	196
HIV-Second RTK	36.9%	707
Malaria	**38.1%**	**21,160**
Malaria-First line ACT (AL 6x2)	42.6%	2,956
Malaria-First line ACT (AL 6x4)	35.4%	3,501
Malaria-First line ACT (AS/AQ 100/270mgx6)	48.0%	2,575
Malaria-First line ACT (AS/AQ 25/67.5mg)	45.0%	2,605
Malaria-First line ACT (AS/AQ 50/135mg)	45.6%	2,668
Malaria-Rapid diagnostic test for malaria	25.8%	3,579
Malaria-Sulphadoxine-pyrimethamine	31.1%	3,276
Overall	**37.0%**	**23,859**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	20.6%	3,593

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	709
Malaria	76%	4846

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**23%**	**27%**	**21%**	**29%**	**66**
HIV/AIDS	29%	40%	18%	13%	45
Malaria	10%	0%	29%	62%	21
Subnational level 1	**14%**	**17%**	**36%**	**33%**	**396**
HIV/AIDS	24%	24%	38%	15%	165
Malaria	7%	13%	34%	45%	231
Overall	**15%**	**19%**	**34%**	**32%**	**462**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

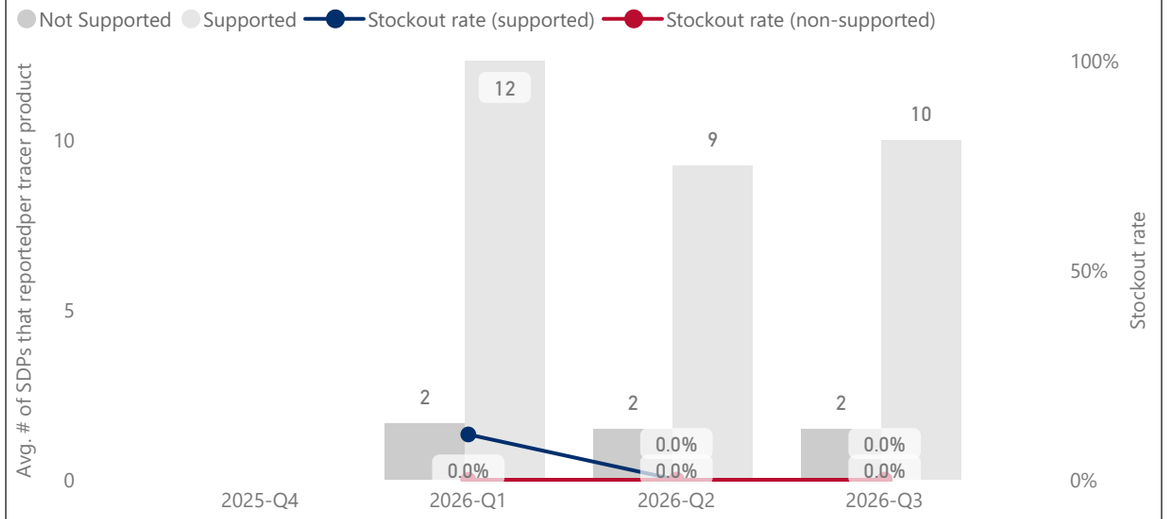
Country

Guatemala

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Guatemala | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



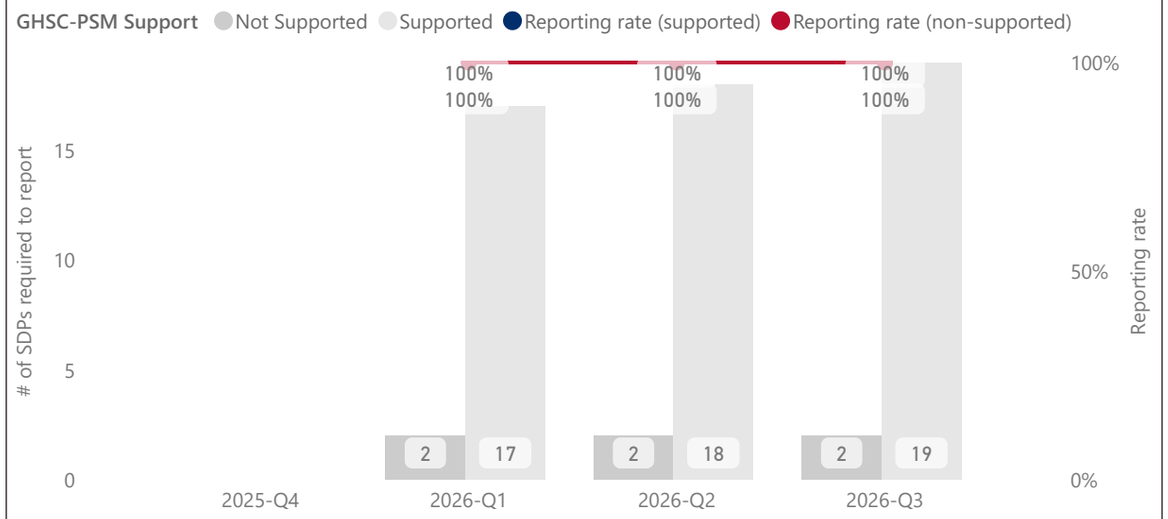
Data source

BRES (Balance, requisition, and distribution of supplies), February 2026

Analysis

None of the SDPs reported stockouts of the most used 1st line ARV, most used 2nd line ARV, or most used 1st line pediatric ARV at supported or non-supported sites.

B3. LMIS reporting rate



B3. Data Source (denominator)

BRES

B3. Data Source (numerator)

BRES

Analysis

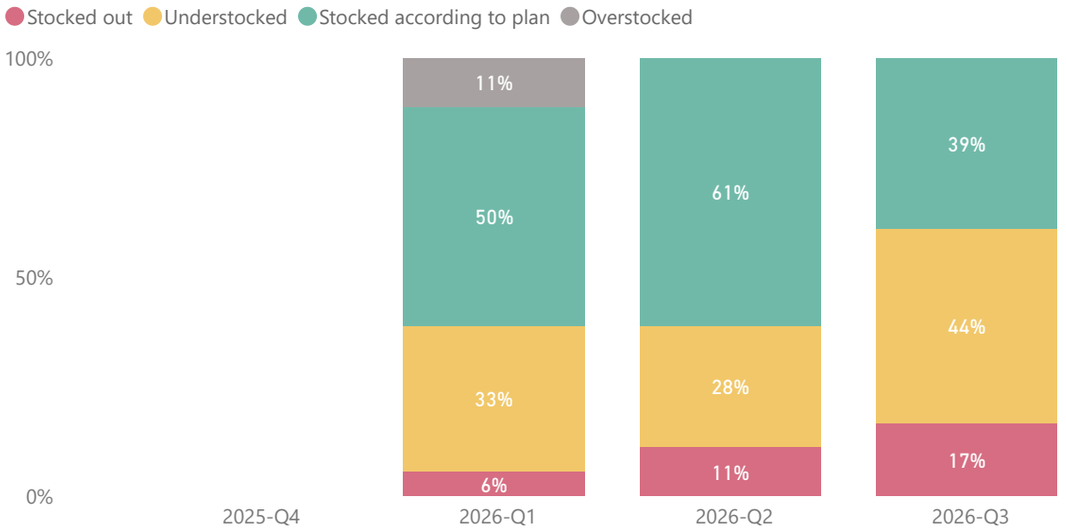
The LMIS reporting rate was 100 percent in FY2026 Q3 for both supported and non-supported sites. All SDPs report consumption through the MOH's electronic systems (BRES and auxiliar Kardex) that allow for inventory balances to be kept up to date for all facilities. GHSC-PSM will continue monitoring inventories and consumption through the timely receipt of reports from the MOH, performing validations and quality controls on the information to ensure accuracy at the SDP and central level systems.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Guatemala | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Auxiliary KARDEX

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	In FY2026 Q3, the central level stocked according to plan rate decreased to 39 percent, while the understock and stockout rates both increased, to 44 and 17 percent respectively. There were no overstocked products this quarter. Second RTK was the only product stocked out for the entire quarter, because the product is purchased locally and has had difficulties getting approvals on orders. All ARV tracers were mostly stocked according to plan or, in the case of pediatric ARVs, entirely stocked according to plan. Due to administrative processes and changes in authorities, the MOH purchase plan has been delayed, and PAHO's receipts are expected by the end of 2026 or early 2027. This could lead to a national shortage of ARVs, viral load tests, and RTKs.
C7	There was no product loss to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Guatemala

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Emtricitabina/Tenofovir alafenamida, Tableta recubierta, 50mg/200mg/25mg, Frasco
2nd line adult ARV	Darunavir, Tableta recubierta, 600mg, Frasco 60 tabletas recubiertas
Pediatric ARV	Dolutegravir, Tableta dispersable, 10mg, Frasco de 90 tabletas dispersables
First RTK	Pruebas Determine HIV 1/2 SERUM / PLASMA (pruebas VIH).
Second RTK	Prueba Rapida para Determinación de VIH 1/2 (segunda prueba)
Viral load reagent	Carga Viral (COBAS HIV-1 QUANTITATIVE NUCLEIC ACID TEST, 192T/KIT)

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

Guatemala has no Priority 1 supply plans due this quarter to GHSC-PSM HQ, and therefore does not report on this indicator.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Guatemala

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.0%**	**38**
HIV-Most used 1st line ARV	0.0%	18
HIV-Most used 1st line pediatric ARV	0.0%	14
HIV-Most used 2nd line ARV	0.0%	6
Overall	**0.0%**	**38**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	19

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**39%**		**44%**	**17%**	**18**
HIV/AIDS	39%		44%	17%	18
Overall	**39%**		**44%**	**17%**	**18**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

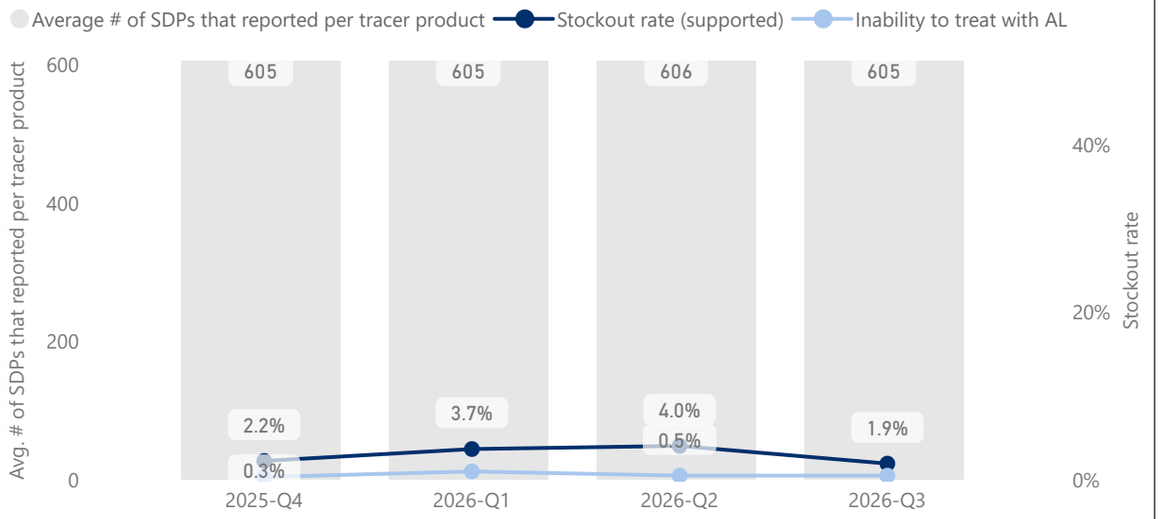
Country

Guinea

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Guinea | Current Quarter: 2026-Q3 | Tracer Product: All

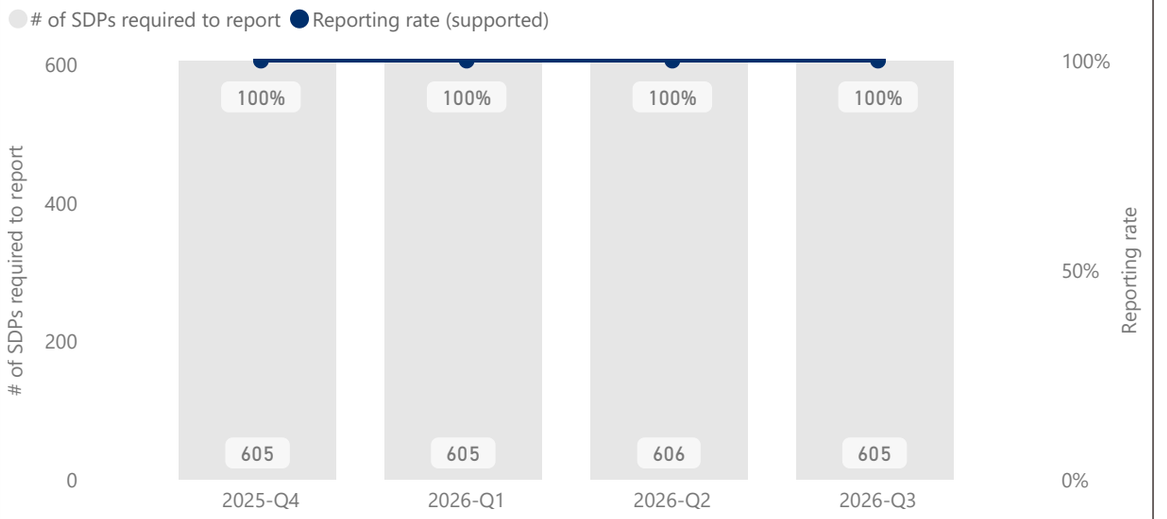
B1. Stockout rate at service delivery points



Data source

LMIS, May 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

LMIS, May 2026

B3. Data Source (numerator)

LMIS, May 2026

Analysis

The stockout rate for tracer malaria products decreased from 4 percent in FY 2026 Q2 to 1.9 percent in FY 2026 Q3, and the inability to treat malaria with an AL formulation remained at 0.5 percent between the two quarters. This improvement in product availability reflects the continued use of consumption-based ordering by SDPs, regular stock monitoring by district teams, and the maintenance of adequate stock levels of tracer commodities at central and regional warehouses. GHSC-PSM will continue to work with the National Malaria Control Program and the Guinea Central Pharmacy to monitor stock levels, ensure the timely submission of orders by SDPs, and maintain adequate commodity stock levels for distribution to SDPs.

Analysis

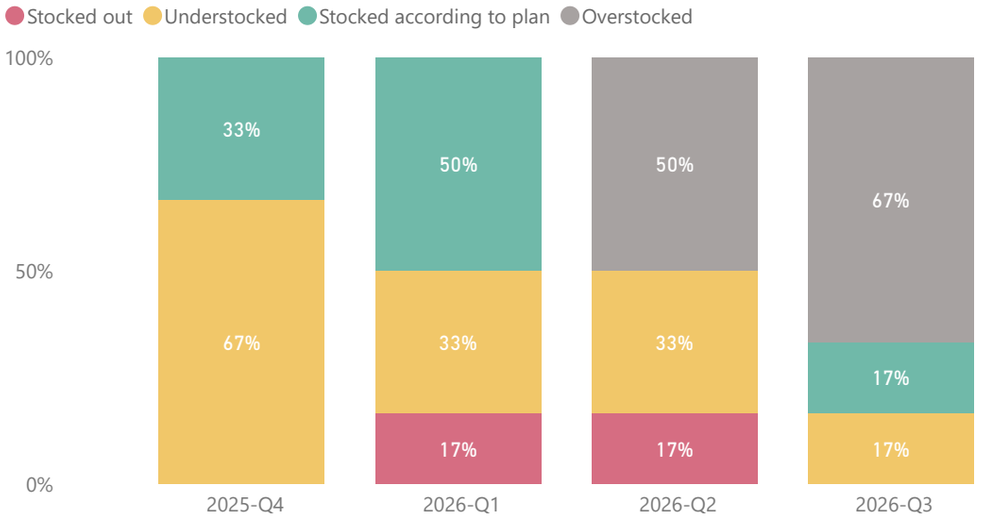
In FY 2026 Q3, the LMIS reporting rate for health facilities stocking malaria commodities remained consistent with previous quarters, achieving a 100 percent submission rate. This sustained performance provides a reliable basis for commodity management and decision-making. District teams will continue monitoring SDP reporting performance to maintain this level of reporting completeness.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

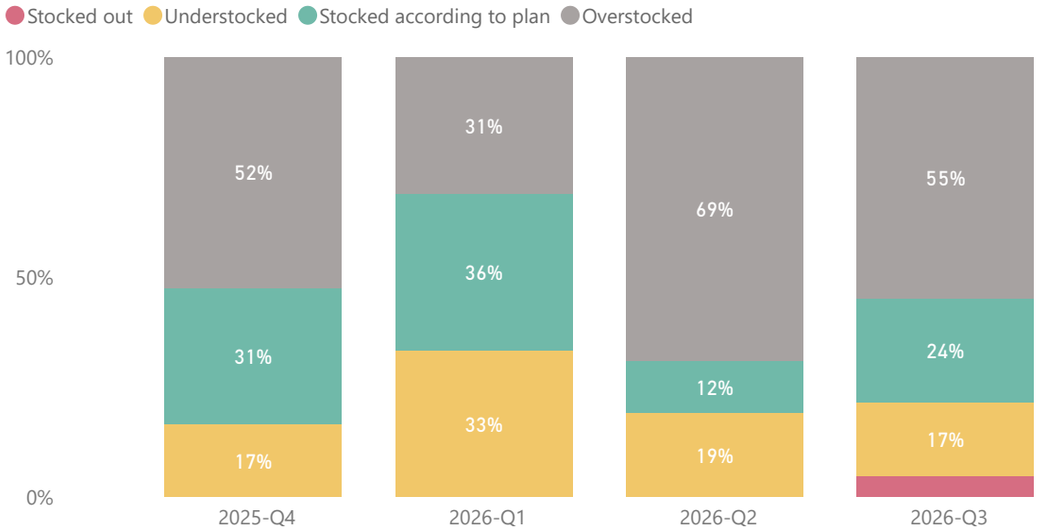
Country: Guinea | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Inventory PCG, May 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	Inventory PCG, May 2026

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	The proportion of malaria tracer products stocked according to plan at the central level improved from zero percent in FY 2026 Q2 to 17 percent in FY 2026 Q3, however, overstocking remained high, increasing from 50 percent in FY 2026 Q2 to 67 percent in FY 2026 Q3. At regional warehouses, the proportion of products stocked according to plan increased from 12 percent in FY 2026 Q2 to 24 percent in FY 2026 Q3. In the current quarter, 55 percent of products were overstocked, 17 percent were understocked, and 5 percent were out of stock at the regional level. These stock imbalances highlight the need for continued monitoring and regular updates to supply plans to better align stock levels with delivery schedules. GHSC-PSM and the Guinea Central Pharmacy will continue strengthening stock monitoring and replenishment planning to improve stock balance and product availability across the supply chain.
C7	There were no product losses to report during FY 2026 Q3.

HIV Tracer Products and Supply Planning

Country: Guinea

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

GHSC-PSM reviewed, updated, and submitted the malaria commodity supply plan in FY 2026 Q3 to the GHSC-PSM FASP team through QAT.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
Malaria commodities	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Guinea

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
Malaria	**1.9%**	**3,630**
Malaria-First line ACT (AL 6x1)	2.8%	605
Malaria-First line ACT (AL 6x2)	2.6%	605
Malaria-First line ACT (AL 6x3)	1.7%	605
Malaria-First line ACT (AL 6x4)	1.3%	605
Malaria-Rapid diagnostic test for malaria	0.8%	605
Malaria-Sulphadoxine-pyrimethamine	2.3%	605
Overall	**1.9%**	**3,630**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.5%	605

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
Malaria	100%	605

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**17%**	**67%**	**17%**		**6**
Malaria	17%	67%	17%		6
Subnational level 1	**24%**	**55%**	**17%**	**5%**	**42**
Malaria	24%	55%	17%	5%	42
Overall	**23%**	**56%**	**17%**	**4%**	**48**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

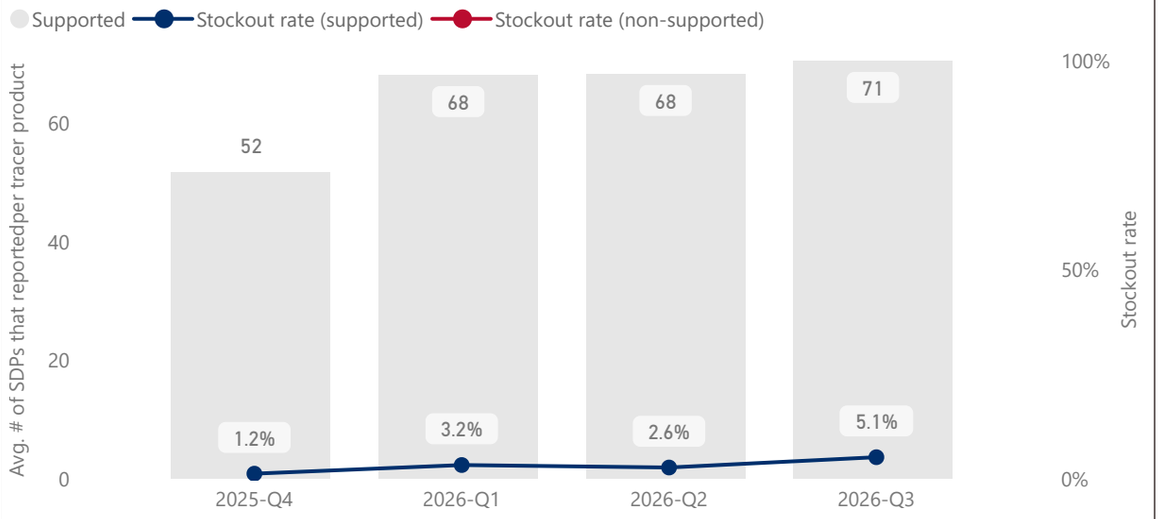
Country

Haiti

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Haiti | Current Quarter: 2026-Q3 | Tracer Product: All

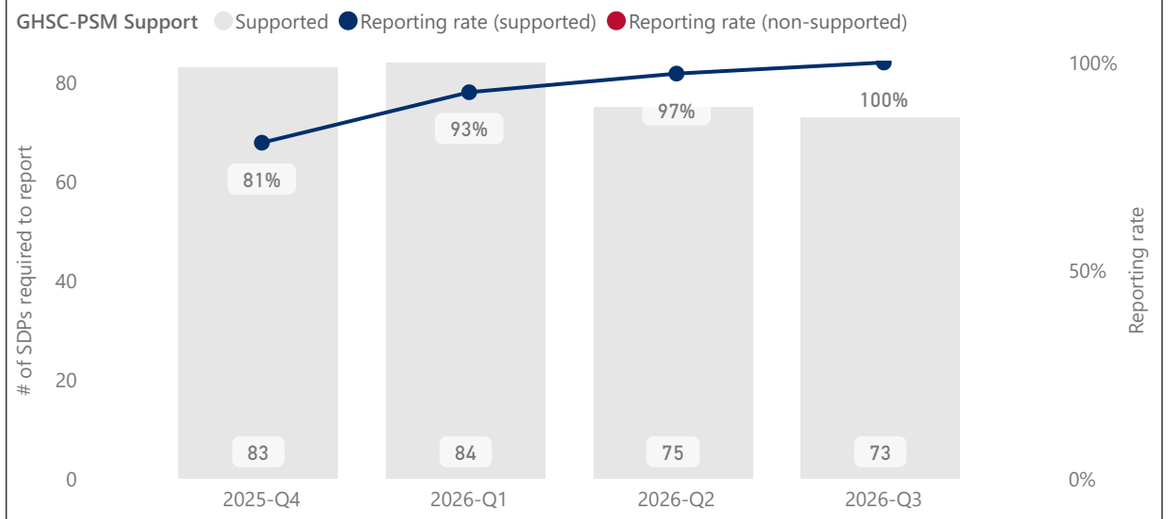
B1. Stockout rate at service delivery points



Data source

SYGDOCC (an internal data management system), May 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

SYGDOCC (an internal data management system), May 2026

B3. Data Source (numerator)

SYGDOCC (an internal data management system), May 2026

Analysis

The average stockout rate for HIV/AIDS tracer products increased from 2.6 percent in FY 2026 Q2 to 5.1 percent in FY 2026 Q3. During FY 26026 Q3, 14 of the 71 supported HIV service delivery points (19.7 percent) reported at least one stock-out event involving HIV tracer commodities. A total of 18 stock-out cases were recorded across four tracer products monitored under the GHSC-PSM project. The increased average stockout rate is primarily a result of an 18 percentage-point increase in reported stockout rate of 2nd line adult ARVs. The stockout cases observed during the quarter were mostly attributable to commodity expiry at service delivery points and to unexpected increases in consumption that were not communicated in advance, leading to an underestimation of commodity requirements during replenishment estimation and distribution planning.

Analysis

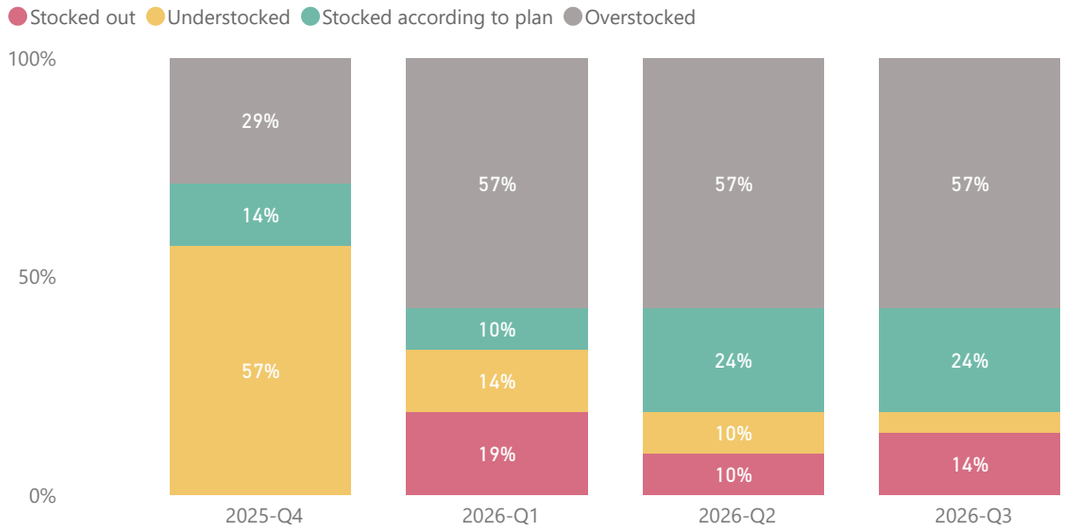
In FY 2026 Q3, the reporting rate for HIV/AIDS commodities increased to 100 percent, up from 97 percent in FY 2026 Q2, reflecting continued improvements in logistics data reporting and site engagement. During the quarter, the reporting denominator decreased from 75 to 73 sites following the net transition of project supported sites to World Vision. This sustained improvement, observed since the end of FY 2025, demonstrates strengthened reporting compliance, improved data completeness, and continued adherence to routine logistics reporting requirements across supported facilities.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

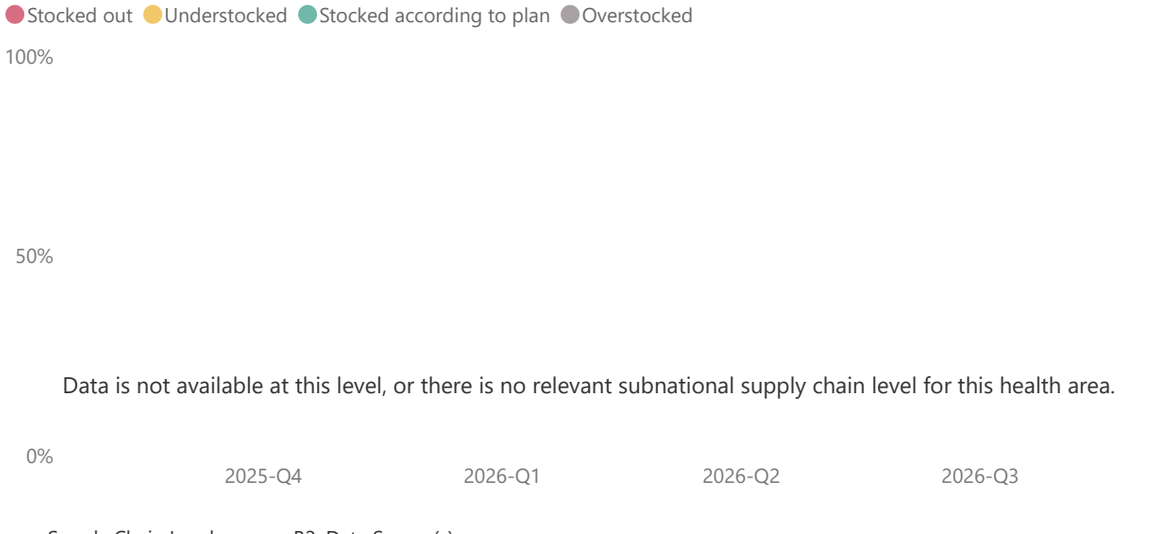
Country: Haiti | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Warehouse management system: April to June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Central	Storage	Expiry	HIV/AIDS commodities	$84,825	$4,759,316	1.98%

Ref	Analysis
B2	At the central level, among all stock observations, 24 percent were stocked in accordance with the supply plan, unchanged from FY 2026 Q2. Although stock level compliance remained stable, fewer than one-quarter of the products assessed met the target inventory levels. The percentage of stock status observations that were stocked out increased from 10 percent in FY 2026 Q2 to 14 percent in FY 2026 Q3. This increase is due to all observations of EID reagent being stocked out. The only understock observed involved TLD, whose stock level declined following product issues during the May–June 2026 distribution cycle. This situation is currently being resolved through two incoming shipments. The overstock observations were attributed to 2nd line adult ARVs, pediatric ARVs, and RTKs. The overstock of 2nd line adult ARVs resulted from excessive stock coverage combined with a fluctuating but overall declining consumption trend, and the overstock of pediatric ARVs was primarily attributable to the early receipt of shipments.
C7	In FY 2026 Q3, the total value of losses due to product expiration under GHSC-PSM project control was estimated at USD 84,825, out of an average inventory value of USD 4,759,316.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Haiti

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30-tablet and 90-tablet bottles]
2nd line adult ARV	Dolutegravir 50 mg Tablet
Pediatric ARV	Abacavir/Lamivudine 120/60 mg Scored Dispersible Tablet
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	Not reported
Viral load reagent	Molecular, m2000 RT PCR, VL Plasma Quantitative amplification kit
Viral load consumable	Not reported
EID reagent	Molecular, m2000 RT PCR, EID Qualitative amplification kit
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

In FY 2026 Q3, all required HIV/AIDS were submitted in a timely manner to the GHSC-PSM HQ team. This result reflects timely scheduling and effective coordination between the technical and logistics teams to ensure the continuity of the procurement process.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
TPT	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Haiti

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**5.1%**	**353**
HIV-First RTK	1.4%	70
HIV-Most used 1st line ARV	1.4%	71
HIV-Most used 1st line pediatric ARV	0.0%	71
HIV-Most used 2nd line ARV	19.7%	71
HIV-Second RTK	2.9%	70
Overall	**5.1%**	**353**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	73

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**24%**	**57%**	**5%**	**14%**	**21**
HIV/AIDS	24%	57%	5%	14%	21
Overall	**24%**	**57%**	**5%**	**14%**	**21**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

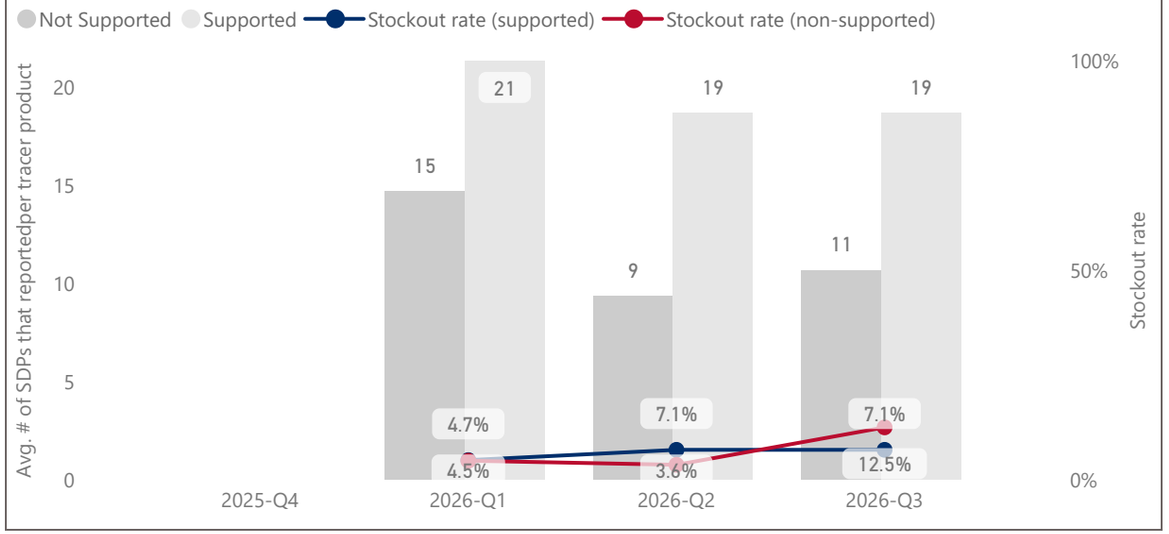
Country

Honduras

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Honduras | Current Quarter: 2026-Q3 | Tracer Product: All

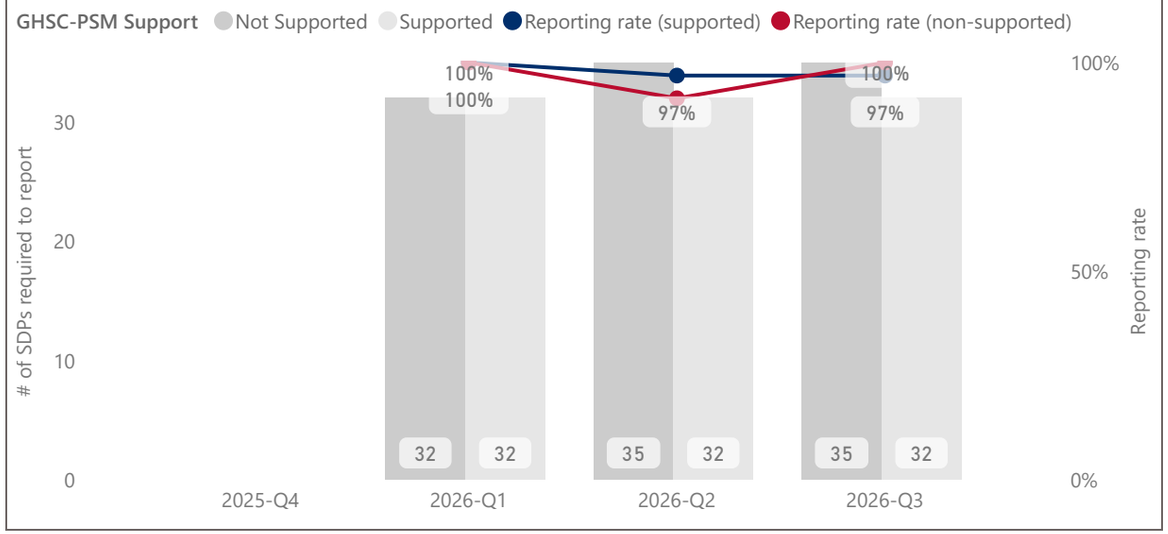
B1. Stockout rate at service delivery points



Data source

BIOS-APRIL 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

BIOS - April 2026

B3. Data Source (numerator)

BIOS-APRIL 2026

Analysis

The stockout rate at SDPs in FY 2026 Q3 remained consistent at 7.1 percent, while the stockout rate for non-supported sites increased to 12.5 percent. 67 SDPs were considered, of which 32 receive support from GHSC-PSM. The number of SDPs that reported per product ranged widely, accounting for the 11 and 19 SDP averages. At supported sites, no more than three facilities reported stockouts of any tracer commodities. GHSC-PSM conducts continuous monitoring of antiretroviral (ARV) and opportunistic infection medicine stocks, in coordination with the national warehouse and prioritized health facilities, implementing early warning alerts for potential stockout risks, with an emphasis on first-line medicines. It should be noted that performance was affected by political instability in Honduras and the suspension of procurement processes previously managed by the Ministry of Health which have yet to be reactivated.

Analysis

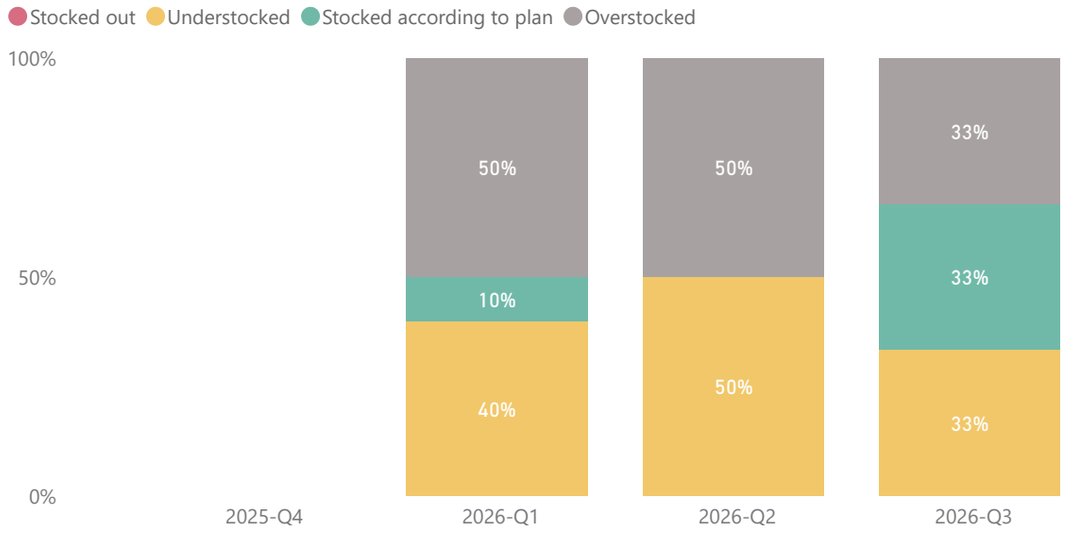
In FY 2026 Q3, all 67 facilities reported into the LMIS systems, 32 supported and 35 non-supported. However, one supported site reported over a month after the deadline, which is considered late by this indicator; therefore, the LMIS reporting rate for Honduras this quarter is 97 percent for supported sites and 100 percent for non-supported sites. The project continuously conducts supply analyses and inventory supervision exercises to ensure the availability of supplies.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Honduras | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	SALMI- April 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	In FY 2026 Q3, the HIV/AIDS tracer products were equally split between overstocked, understocked, and stocked according to plan at 33 percent respectively, after product stock shifted more toward being stocked according to plan this quarter. First line adult ARV was entirely understocked, while second line adult ARV was stocked according to plan, and the pediatric ARV was entirely overstocked. To abate the risk of stockout, a delivery of first line ARVs is expected this quarter. The project will continue providing support to the Ministry of Health in the implementation of corrective and preventive actions to improve ARV inventory balance. Periodic reviews of stock levels will be conducted to timely identify risks of stockouts and overstock situations, promoting redistribution actions when necessary. Additionally, follow-up will be conducted on the arrival of the first line ARV shipment, as well as on the inventory levels of pediatric medicines, to support timely replenishment and reduce the risk of supply interruptions.
C7	No losses of antiretroviral (ARV) medicines were reported at the central warehouse managed by the Ministry of Health.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Honduras

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir 300mg+Lamivudina 300mg+Dolutegravir 50mg (30 TAB and 90 TAB)
2nd line adult ARV	Atazanavir + ritonavir 300 mg + 100 mg
Pediatric ARV	Dolutegravir 10 mg 90 TAB

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

Honduras has no Priority 1 supply plans required for submission to GHSC-PSM HQ and does not report on this indicator. However, within the framework of Q3 activities and as part of supply planning efforts, the project, in coordination with the Ministry of Health team, initiated the estimation process in April 2026 to support the development and update of the supply plan.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Honduras

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**7.1%**	**56**
HIV-Most used 1st line ARV	10.7%	28
HIV-Most used 1st line pediatric ARV	0.0%	10
HIV-Most used 2nd line ARV	5.6%	18
Overall	**7.1%**	**56**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	97%	32

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**33%**	**33%**	**33%**		**3**
HIV/AIDS	33%	33%	33%		3
Overall	**33%**	**33%**	**33%**		**3**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

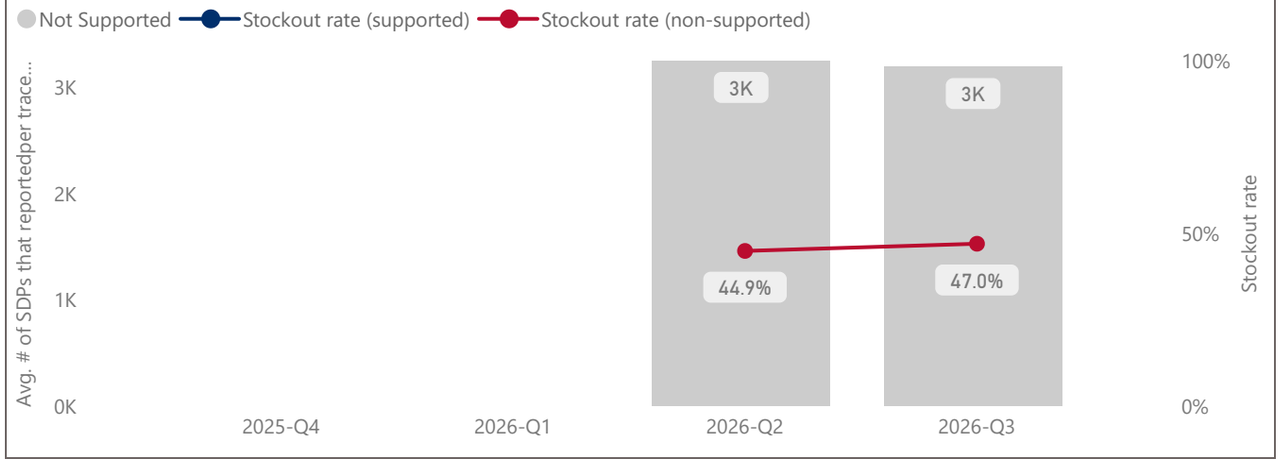
Country

Kenya

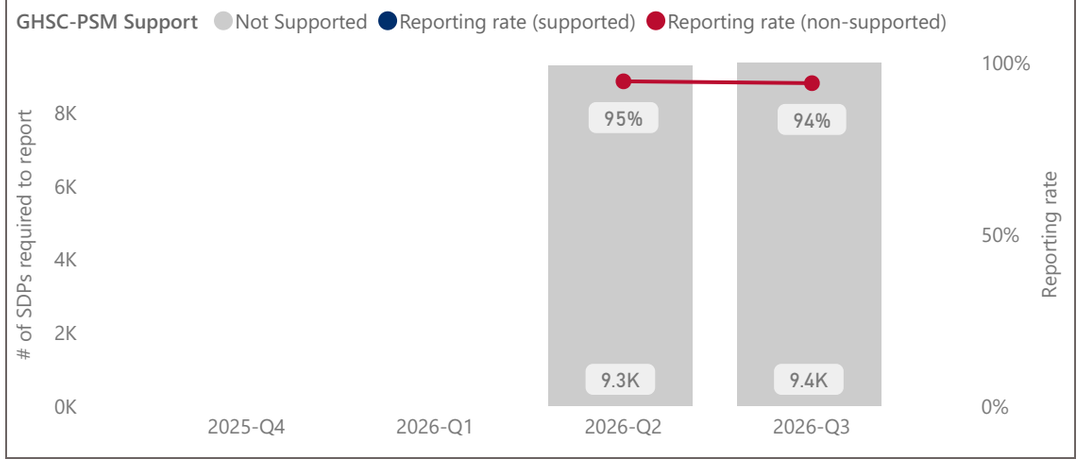
Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Kenya | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source
KHIS MOH 643B
KHIS MOH 730B
NHRL Lab Report from 16 labs

B3. Data Source (denominator)	B3. Data Source (numerator)
HIS-MOH643B & KHIS 730B	HIS-MOH643B & KHIS 730B
NHRL Reports	NHRL Reports

Analysis

In Kenya, GHSC-PSM provides systems support only at the central level; therefore, all SDPs are classified as unsupported. In FY 2026 Q3, the overall stockout rate was 47.0 percent, up 2.1 percentage points from the previous quarter. To address historical instability in first-line adult ARV supply and prevent future stockouts, the National Order Management Team expedited order allocations to stabilize stock levels. Second-line ARVs recorded a 98.5 percent stockout rate, reflecting low demand relative to facility reporting requirements. To address uneven facility-level stocking during the regimen transition, new clinical guidelines and intensive healthcare worker training were implemented to support transition to the preferred second-line regimen. The pediatric ARV stockout rate was 20.5 percent, improving from 28.5 percent in the previous quarter. Because pALD is limited to designated facilities, using all adult ARV facilities as the denominator created an artificial performance gap; reporting was therefore adjusted to include only authorized pALD sites. RTK stockouts increased by 6.4 percentage points to 27.0 percent. Laboratory commodities also showed high stockout rates, with 66 percent and 69 percent of facilities reporting VL and EID consumable stockouts, respectively, largely due to short expiry periods and just-in-time ordering practices. A county-based distribution model for PPTs and DBS has improved availability, and NOMT will continue monitoring performance as reporting expands. At regional laboratories, VL reagent stockout rates remained stable at 25 percent, while EID consumable stockouts declined from 20 percent to 0 percent. To reduce storage and expiry risks, laboratories use a monthly resupply model supported by multiple testing platforms and improved reagent visibility through monthly reporting.

Analysis

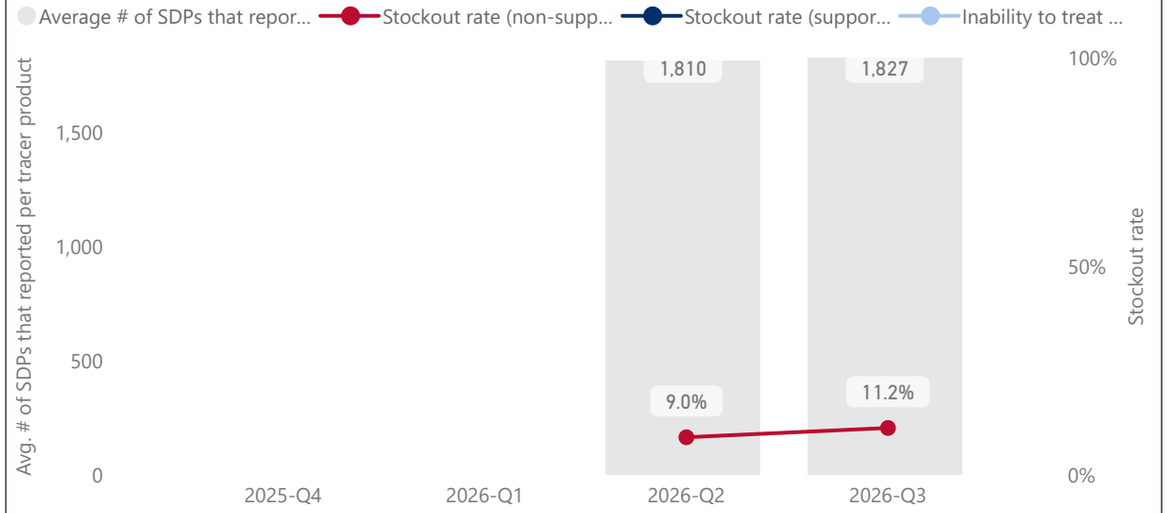
The reporting rate for SDPs was 94 percent. The commodity security team and NOMT follow up with counties and coordinators to implementing partners to ensure facilities submit reports. Additionally, the NOMT continues to enforce the practice where allocation and resupply of commodities is tied to compliance by health facilities to submit their monthly reports.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Kenya | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



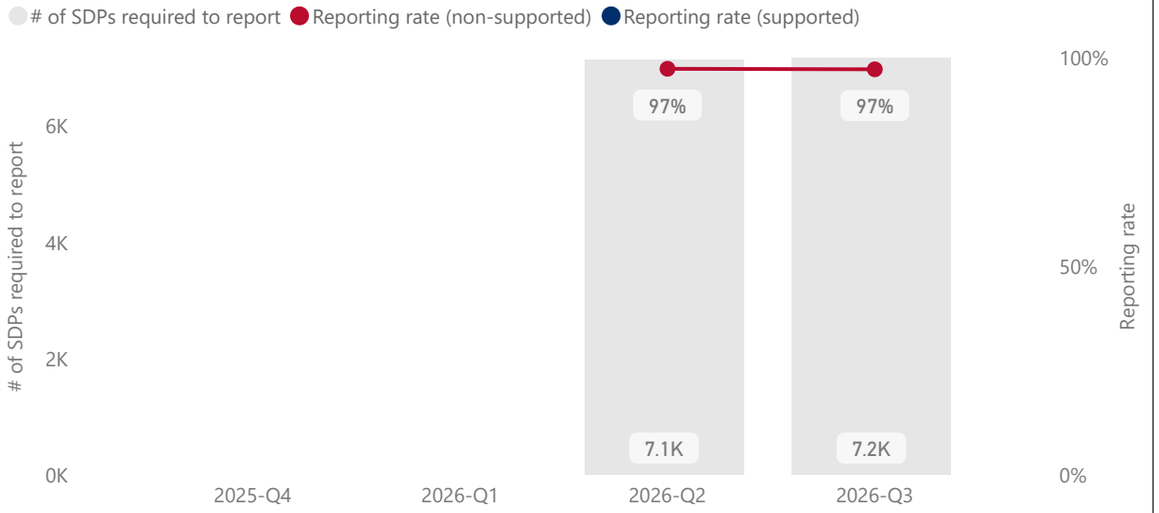
Data source

KHIS

Analysis

The overall stockout rate across tracer products was 11.2 percent in FY 2026 Q3, only a 2.2 percentage-point increase. This increase in reported stockout rates is primarily driven by the approximately 16 percentage-point increase for AL 6x4 resulting in a 20.6 percent stockout rate. For all other tracer products, the reported stockout rates only varied by 4 percentage-points or fewer compared to the previous quarter.

B3. LMIS reporting rate



B3. Data Source (denominator)

KHIS-MOH743

B3. Data Source (numerator)

KHIS-MOH743

Analysis

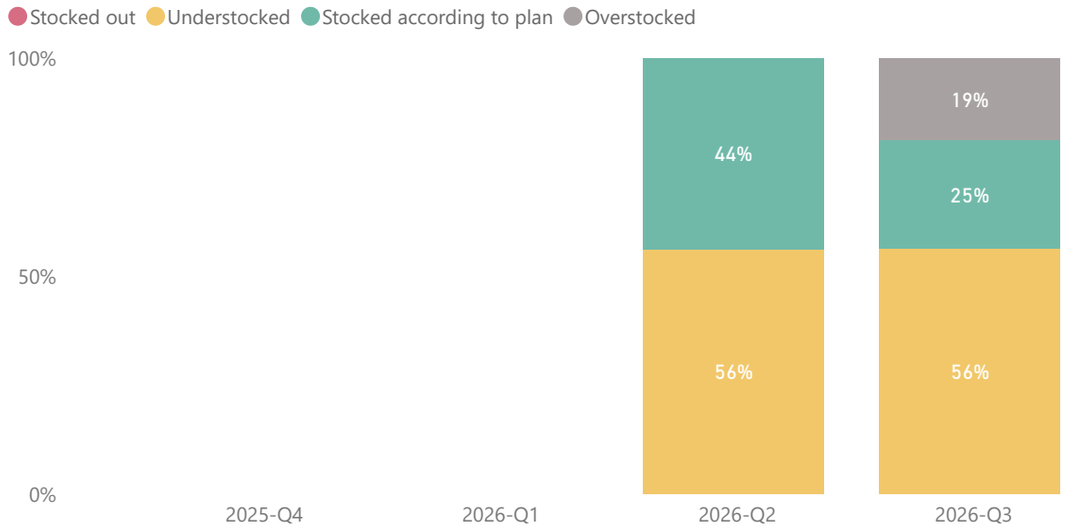
The reporting rate for SDPs remained at 97 percent. There are continued efforts between GHSC-PSM, the national malaria program, and the commodity security technical working group to maintain high reporting rates.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Kenya | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	NHRL reports, Warehouse Reports
Central	KHIS, Warehouse reports
Central	KHIS MOH730B, Supply plan tracker, 2pager
Central	KHIS MOH 643B

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

B2. Stocked according to plan - Subnational level(s)



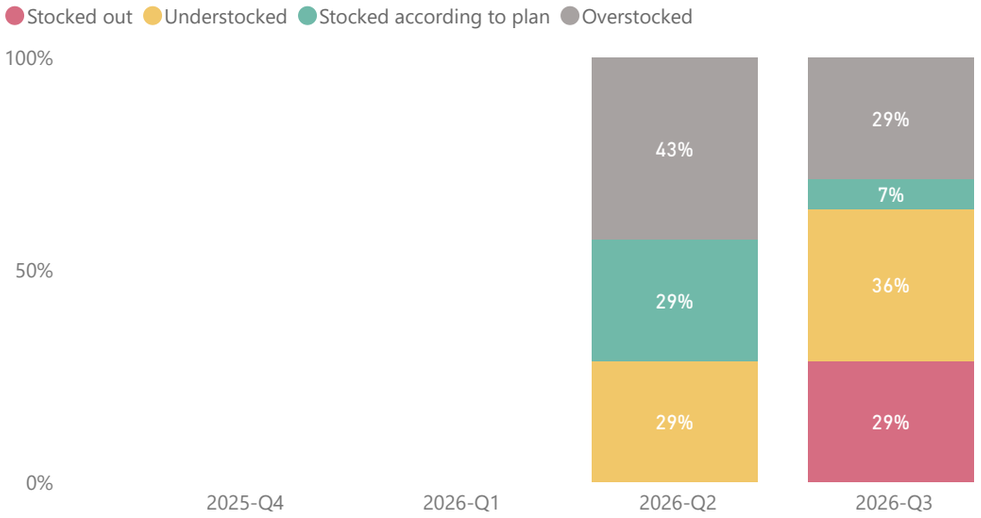
Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

Ref	Analysis
B2	At central level, across all tracer products, 56 percent of stock status observations were understocked, 25 percent were stocked according to plan, and 19 percent were over stocked. All observations for pediatric ARVs remained stocked according to plan. The stock availability improved for both 2nd line adult ARVs and EID reagent. Conversely, stock availability declined for 1st line adult ARVs and EID consumables, will all observations being understocked. Viral load tracer product stock observations all remained understocked; current national stock levels are intentionally maintained at lean parameters as a preventive strategy against expiry wastage of short-shelf-life PPT commodities. RTK observations indicated that the product is overstocked; to protect this balanced stock status and prevent overstocking at central storage sites, the incoming shipment pipeline is being deferred, including the pushback of 3 million tests to next year, ensuring current in-country inventory is fully consumed before new stock arrives.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Warehouse stock status and product losses
Malaria

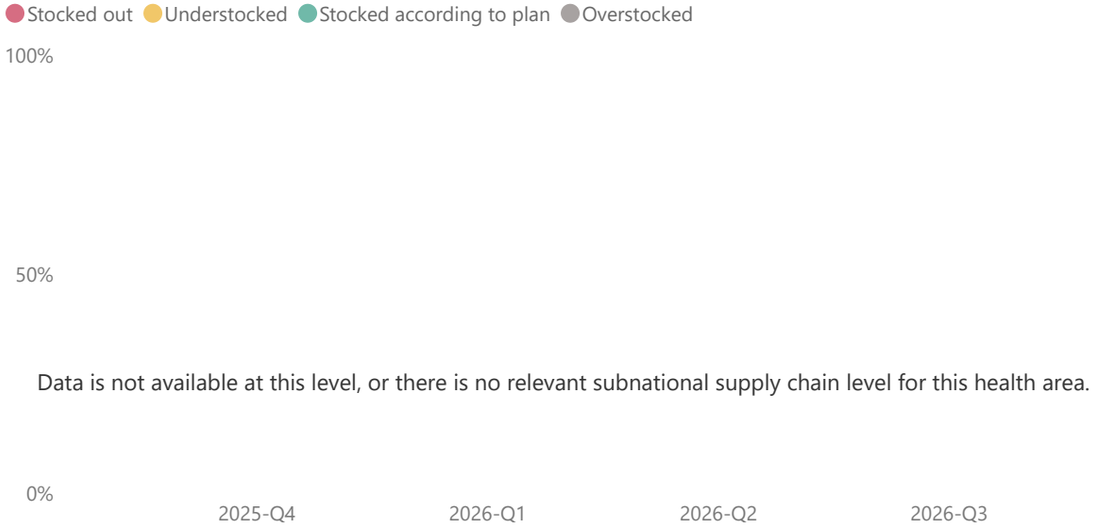
Country: Kenya | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Warehouse report, malaria pipeline monitor

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
C7	There were no product losses in GHSC-PSM custody to report this quarter.
B2	To address missed summaries from NMCP for April and May 2026, the team extracted data from two warehouse reports to construct the public-sector pipeline monitor, restoring stock visibility. During this exercise, a data entry error (confusion between packs and single units affecting ALs and mRDTs) was identified and reconciled. The pipeline monitor revealed central-level stock variances, notably a stockout of AL 6x4 which is causing compensatory over-consumption and substitution among other AL formulations (AL 6x1, 6x2, 6x3). While central levels face understocking and stockouts for SP, mRDTs, and LLINs, triangulation data confirms that health facility-level stocks remain insulated and stable. As a preventive measure to bring storage sites back according to plan, GHSC-PSM will maintain continuous monitoring of the pipeline to manage incoming shipments and prevent facility-level stock depletion.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Kenya

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir Disoproxil Fumarate/Lamivudine/Dolutegravir (TLD), 90-count bottles
2nd line adult ARV	Darunavir/Ritonavir 400mg/50mg, 60's tablets
Pediatric ARV	Abacavir/Lamivudine/Dolutegravir 60/30/5 mg (pALD), 90 tablets
First RTK	TrinScreen
Second RTK	Not reported
Tie-breaker RTK	Not reported
Viral load reagent	COBAS 5800/6800/8800 HIV-1 Quantitative Amplification Reagent, 192 Tests, 1 Kit
Viral load consumable	Plasma Preparation Tube (PPT), K2-EDTA, 5 mL, Plastic, White Top, 1000 Tubes
EID reagent	COBAS 6800/8800 HIV-1/HIV-2 Qualitative Amplification Reagent IVD, 192 Tests, 1 Kit
EID consumable	Dried Blood Spot Collection Kit, TFN Cards, without Capillary Tubes, 20 Tests

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

There are no supply plans required to submit to GHSC-PSM HQ.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Kenya

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
Overall		

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**17%**	**23%**	**47%**	**13%**	**30**
HIV/AIDS	25%	19%	56%		16
Malaria	7%	29%	36%	29%	14
Overall	**17%**	**23%**	**47%**	**13%**	**30**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

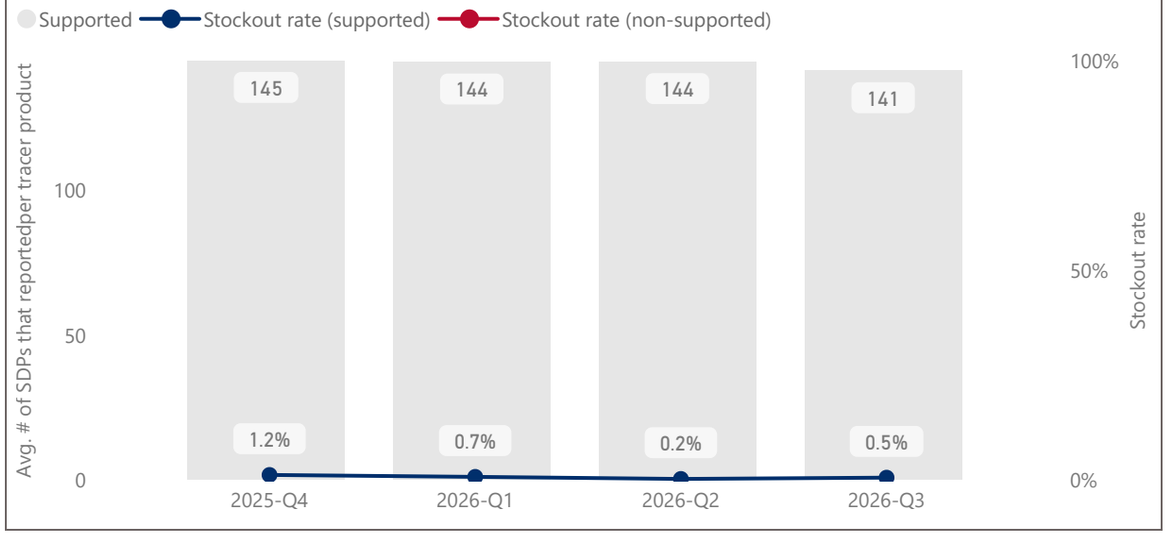
Country

Lesotho

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Lesotho | Current Quarter: 2026-Q3 | Tracer Product: All

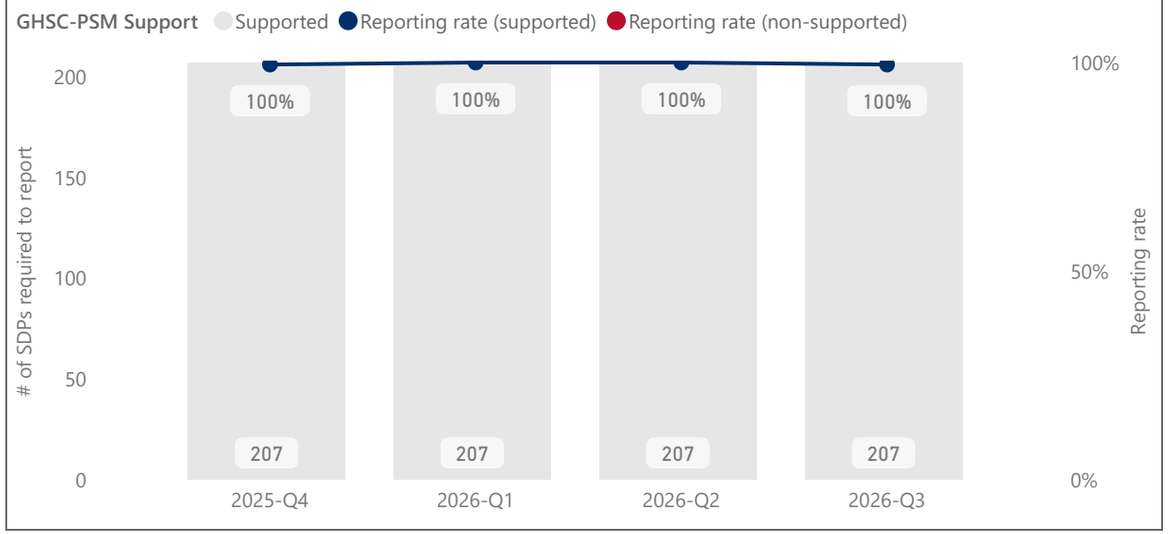
B1. Stockout rate at service delivery points



Data source

Informed Push, May 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

Informed Push, May 2026

B3. Data Source (numerator)

Informed Push, May 2026

Analysis

Lesotho saw a slight increase in the stockout rate, from 0.2 percent to 0.5 percent in FY 2026 Q3. Of all tracer commodities, there was only one incident of stockout, for the product EID reagent, and four incidents of stockouts of the viral load reagents. The underlying cause of stockout for these products was their unavailability at Central Medical Stores (CMS), which in turn affected the resupply to the health facilities. To avoid service interruption, National Reference Lab EID samples were tested at health facilities that are equipped with point-of-care (POC) EID platforms. Additionally, for POC viral load testing, samples from affected facilities were referred to nearby laboratories for testing to ensure continuity of diagnostic services. All other products had a stockout rate of 0 percent.

Analysis

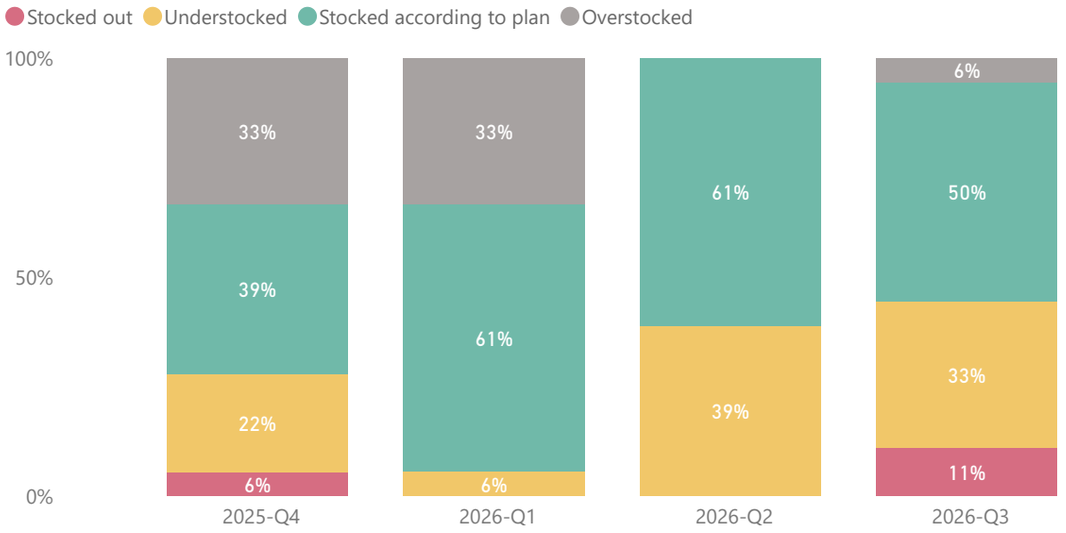
206 of 207 facilities reported on time this quarter, for a rounded result of 100 percent. One health facility stopped reporting in March 2026 due to the absence of personnel trained in the Informed Push reporting system. While the facility remains operational, the proprietor has not yet nominated replacement staff for training, despite ongoing engagement by the District Health Management Team (DHMT).

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Lesotho | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Stock Status Report, April to June

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	This quarter, HIV/AIDs products stocked according to plan decreased to 50 percent, and understocks decreased to 33 percent, while stockouts and overstocks increased to 11 and 6 percent, respectively. The increase in stockouts can be attributed to a central level stockout of viral load reagent. There is a delay in the procurement of this product due to an expired waiver. The new waiver application has been submitted to the Procurement Committee for approval, however there was no service interruption since the samples are taken to districts labs which use different testing platforms. Increased overstocks are due to a central level overstock of EID reagent, after a shipment was received in May. The pediatric ARV also shifted this quarter, to being primarily understocked, due to a phasing out of the product to introduce pALD starting in November.
C7	There were no losses to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Lesotho

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir 300/300/50 mg Tablet
2nd line adult ARV	Ritonavir/Lopinavir 200/50 mg Tablet
Pediatric ARV	Abacavir/Lamivudine 120/60 mg Tablet
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	Not reported
Viral load reagent	COBAS C4800 HIV-1 120 tests, COBAS C6800 HIV-1 96 tests, Hologic APTIMA HIV Viral Load Assay Kit Reagent 100 tests, GeneXpert Quant
Viral load consumable	Not reported
EID reagent	COBAS C6800 HIV-1 Qual 96 tests, GeneXpert Qual, Alere-q mPIMA
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

Lesotho has no Priority 1 supply plans, and does not report on this indicator.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Lesotho

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.5%**	**989**
HIV-EID reagent	2.3%	43
HIV-First RTK	0.0%	206
HIV-Most used 1st line ARV	0.0%	206
HIV-Most used 1st line pediatric ARV	0.0%	176
HIV-Most used 2nd line ARV	0.0%	117
HIV-Second RTK	0.0%	206
HIV-Viral load reagent	11.4%	35
Overall	**0.5%**	**989**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	207

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**50%**	**6%**	**33%**	**11%**	**18**
HIV/AIDS	50%	6%	33%	11%	18
Overall	**50%**	**6%**	**33%**	**11%**	**18**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

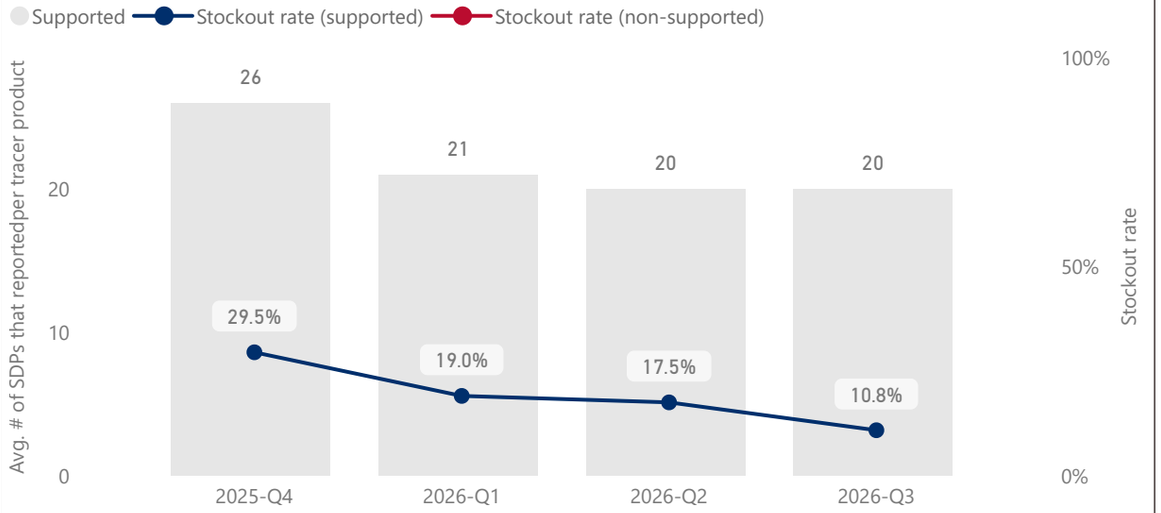
Country

Liberia

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Liberia | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



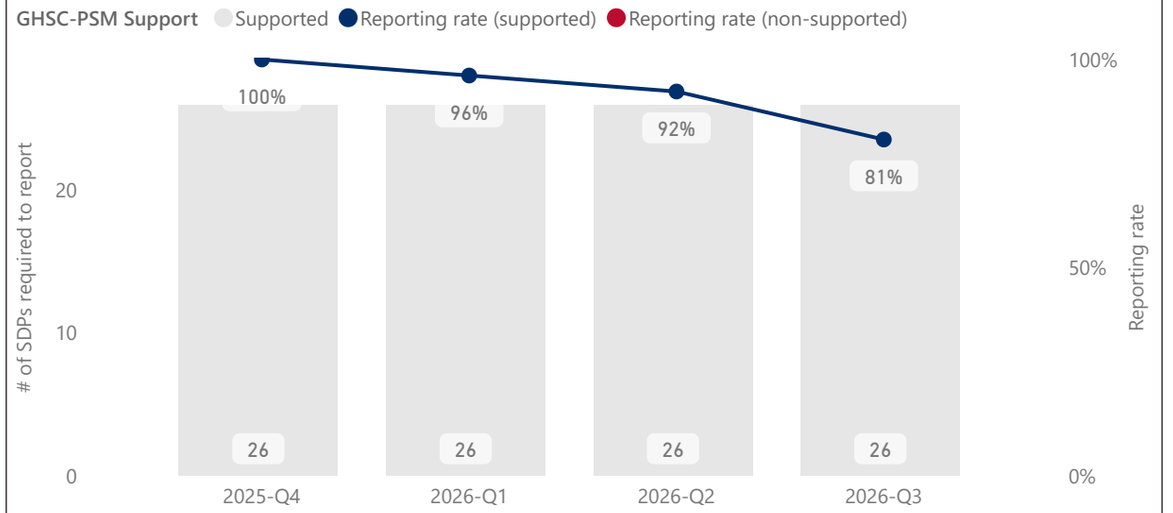
Data source

High Burden Facilities Stock Status Report end June' 2026

Analysis

The stockout rate for HIV/AIDS commodities decreased to 10.8 percent this quarter, down from 17.5 percent in the previous quarter. This improvement was driven largely by a reduction in stockouts of pediatric HIV ARVs, which fell to 33.3 percent from 54.2 percent last quarter. Stockouts of first-line HIV ARVs also declined, decreasing from 8.3 percent to 4.2 percent. Among HIV rapid test kits (RTKs), stockout rates for both first and second RTKs decreased from 8.3 percent to 4.2 percent, while stockouts of HIV "tie-breaker" RTKs remained unchanged at 8.3 percent.

B3. LMIS reporting rate



B3. Data Source (denominator)

High Burden Facilities Stock Status Report end June' 2026

B3. Data Source (numerator)

High Burden Facilities Stock Status Report end June' 2026

Analysis

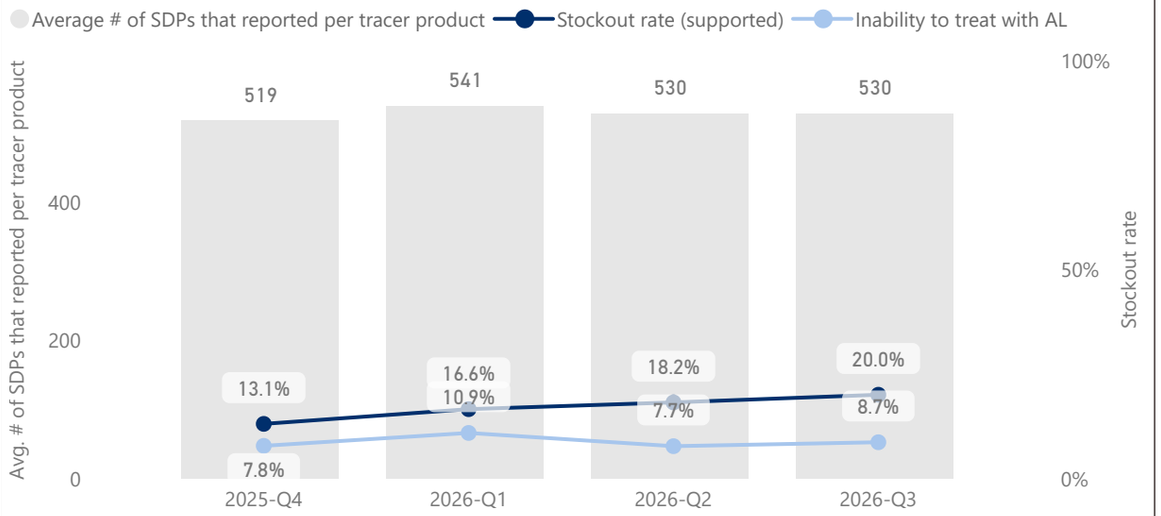
The reporting rate declined to 81 percent, compared with 92 percent in the previous quarter. This decrease is primarily attributable to data quality issues, reporting delays, and programmatic challenges. Specifically, the Ministry of Health (MOH), through the National HIV/AIDS Control Program, has experienced difficulties collecting and verifying data from the 26 high-burden facilities. Several facilities have not reported consistently, while others have submitted incomplete datasets, affecting overall reporting performance.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Liberia | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



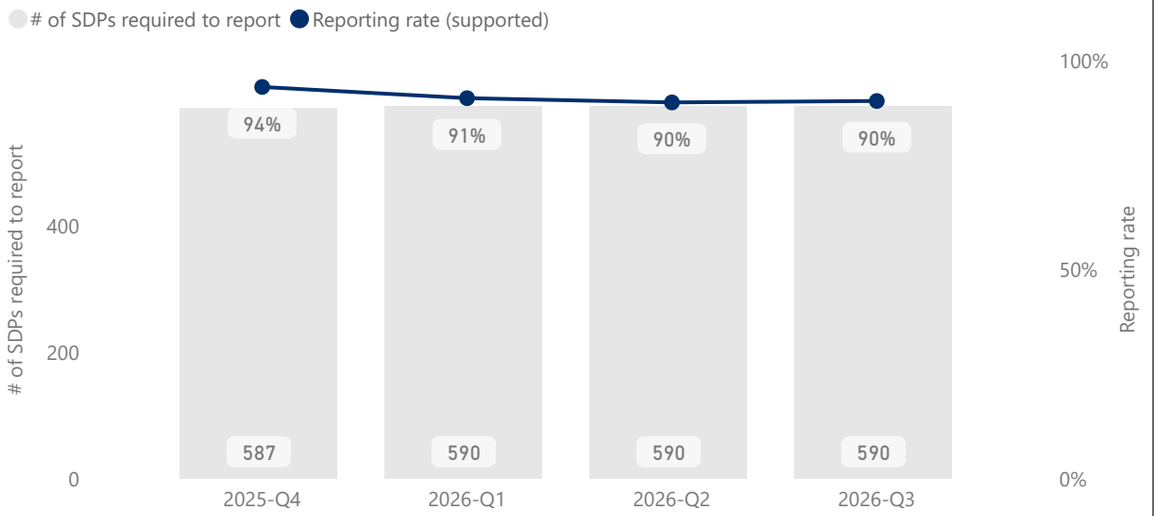
Data source

e_LMIS stock status report end June' 2026

Analysis

The stockout rate for malaria commodities increased slightly this quarter to 20.0 percent, up from 18.2 percent in the previous quarter. Across artemether-lumefantrine (AL) formulations, stockout rates rose for all pack sizes: AL 6x1 increased from 12.3 percent to 14.3 percent, AL 6x2 from 10.9 percent to 16.8 percent, AL 6x3 from 20.4 percent to 21.1 percent, and AL 6x4 from 31.3 percent to 37.4 percent, representing the largest increase. Despite these rising stockout rates, the inability to treat malaria with AL remained relatively low at 8.7 percent in Q1 FY2026. Stockouts of sulfadoxine-pyrimethamine (SP) also increased, reaching 17.4 percent compared to 15.2 percent last quarter, while malaria rapid diagnostic test (RDT) stockouts rose to 14.0 percent from 9.8 percent. In contrast, long-lasting insecticidal net (LLIN) stockouts improved, declining to 19.2 percent from 27.5 percent in the previous quarter.

B3. LMIS reporting rate



B3. Data Source (denominator)

e_LMIS stock status report end June' 2026

B3. Data Source (numerator)

e_LMIS stock status report end June' 2026

Analysis

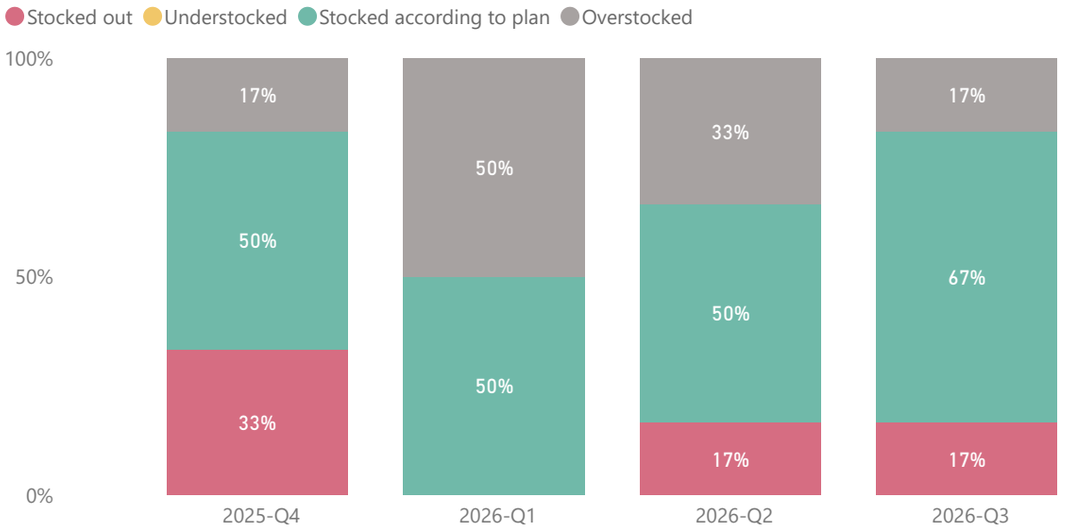
The reporting rate remained stable at 90 percent this quarter, maintaining the strong performance observed in the previous quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Liberia | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	June 2026 QAT

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

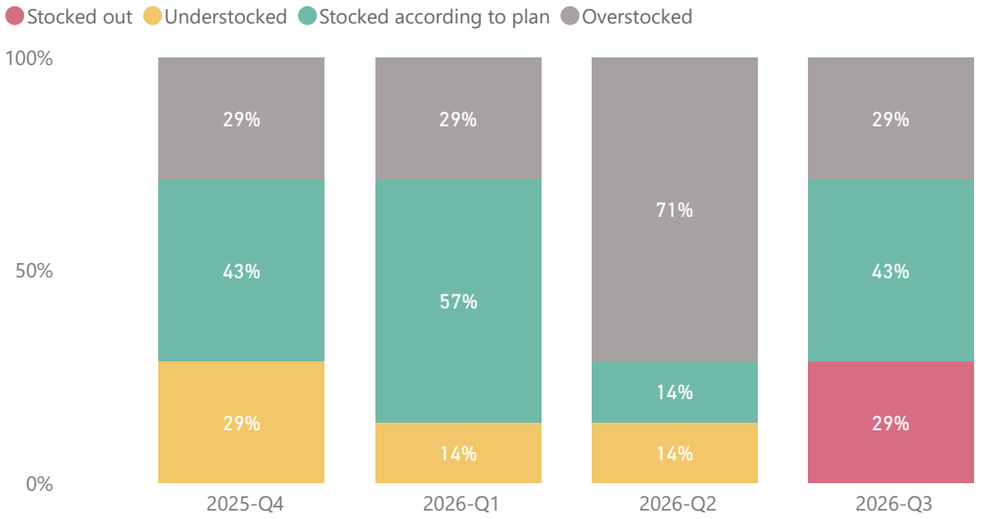
Ref	Analysis
B2	Overall, the proportion of HIV commodities stocked according to plan increased to 67 percent, up from 50 percent in the previous quarter, while the proportion of overstocked commodities declined to 17 percent from 33 percent. The stockout rate remained unchanged at 17 percent. The improvement in commodities stocked according to plan was driven primarily by first-line adult ARVs, which shifted from an overstocked status in the previous quarter to being stocked according to plan this quarter. Inventory status for all other HIV commodities remained largely unchanged.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

Country: Liberia | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	June 2026 QAT

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)

Data is not available at this level, or there is no relevant subnational supply chain level for this health area.

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	Overall, the proportion of commodities stocked according to plan increased markedly to 43 percent, up from 14 percent in the previous quarter, while the proportion of overstocked commodities declined to 29 percent from 71 percent. This improvement was driven primarily by AL 6x1 and AL 6x2, which shifted from overstocked status to being stocked according to plan. In contrast, AL 6x3 moved from overstocked to stocked out during the quarter. As a result, the proportion of stocked-out commodities increased to 29 percent, compared to 0 percent in the previous quarter.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Liberia

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30-tabs, 90-tabs, 180-tabs]
2nd line adult ARV	Abacavir/Lamivudine 600/300 mg
Pediatric ARV	Dolutegravir 10 mg Scored Dispersible Tablet
First RTK	HIV-1/2 Determine Rapid Test Kit
Second RTK	HIV-1/2, Bioline 3.0
Tie-breaker RTK	HIV-1/2 Uni-Gold Rapid Test Kit
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

Malaria supply plans are the only required supply plans to be submitted to GHSC-PSM, and it was successfully submitted in FY2026 Q3.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q2	2026-Q3
Malaria commodities	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Liberia

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**10.8%**	**120**
HIV-"Tie-breaker" RTK	8.3%	24
HIV-First RTK	4.2%	24
HIV-Most used 1st line ARV	4.2%	24
HIV-Most used 1st line pediatric ARV	33.3%	24
HIV-Most used 2nd line ARV		0
HIV-Second RTK	4.2%	24
Malaria	**20.0%**	**3,707**
Malaria-First line ACT (AL 6x1)	14.3%	530
Malaria-First line ACT (AL 6x2)	16.8%	531
Malaria-First line ACT (AL 6x3)	21.1%	530
Malaria-First line ACT (AL 6x4)	37.4%	530
Malaria-LLINs	19.2%	530
Malaria-Rapid diagnostic test for malaria	14.0%	528
Malaria-Sulphadoxine-pyrimethamine	17.4%	528
Overall	**19.8%**	**3,827**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	8.7%	530

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	81%	26
Malaria	90%	590

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**54%**	**23%**		**23%**	**13**
HIV/AIDS	67%	17%		17%	6
Malaria	43%	29%		29%	7
Overall	**54%**	**23%**		**23%**	**13**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

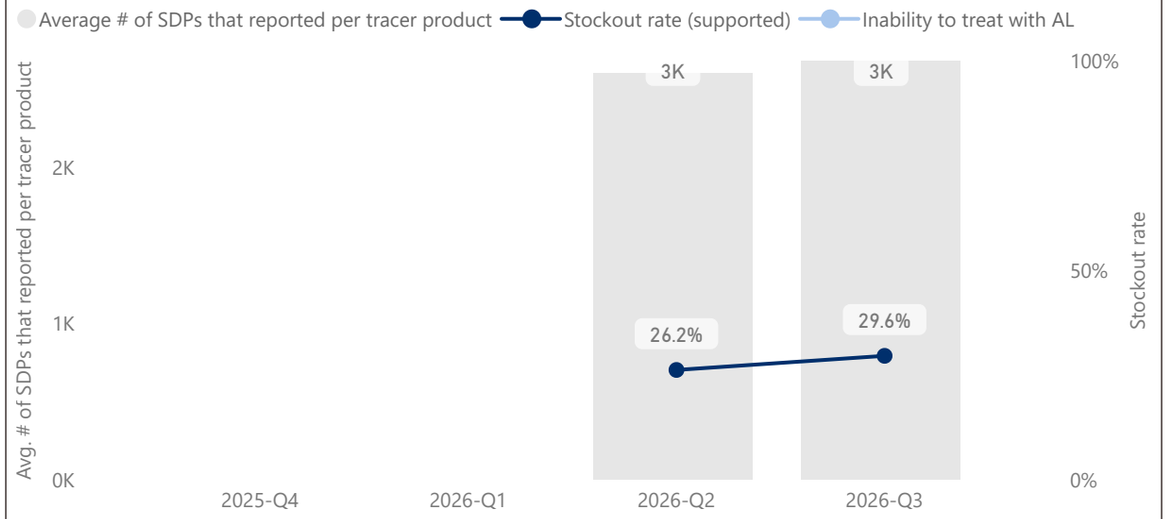
Country

Madagascar

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Madagascar | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



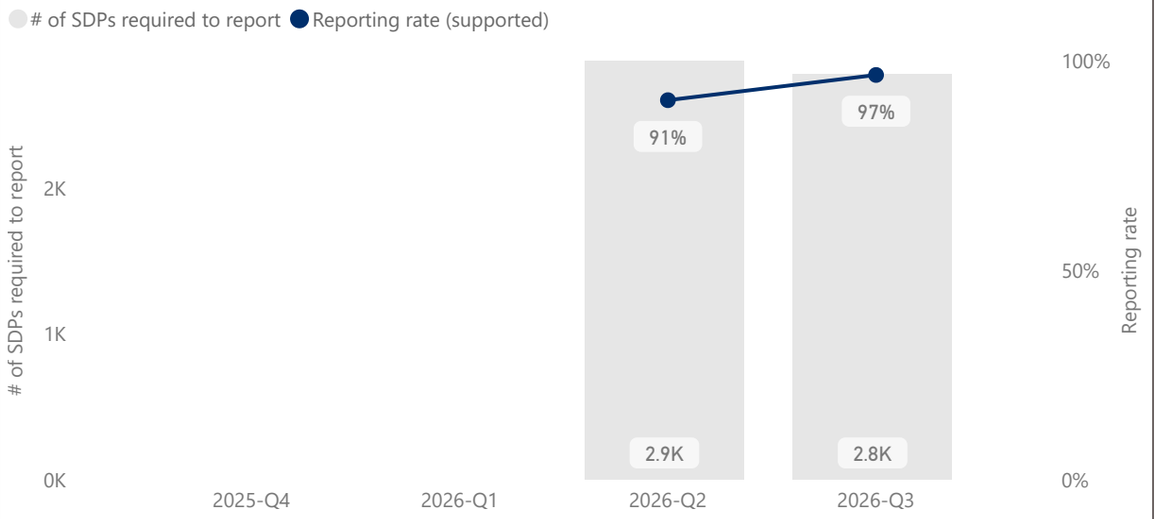
Data source

DHIS2, SoH as of June 30, 2026, collected on July 29, 2026

Analysis

The overall stockout rate of malaria tracer commodities increased from 26.2 percent in FY 2026 Q2 to 29.6 percent in FY 2026 Q3. Despite the observed increase in the average stockout rate, the ongoing distribution of malaria commodities procured through USG and Global Fund financing to peripheral levels is expected to improve product availability in the next quarter. Product distribution has reached 33 percent of districts (38 of 115 districts) at the time of reporting, and improvements in product availability are expected as commodities reach the remaining districts and health facilities.

B3. LMIS reporting rate



B3. Data Source (denominator)

DHIS2

B3. Data Source (numerator)

DHIS2, collected on July 29, 2026

Analysis

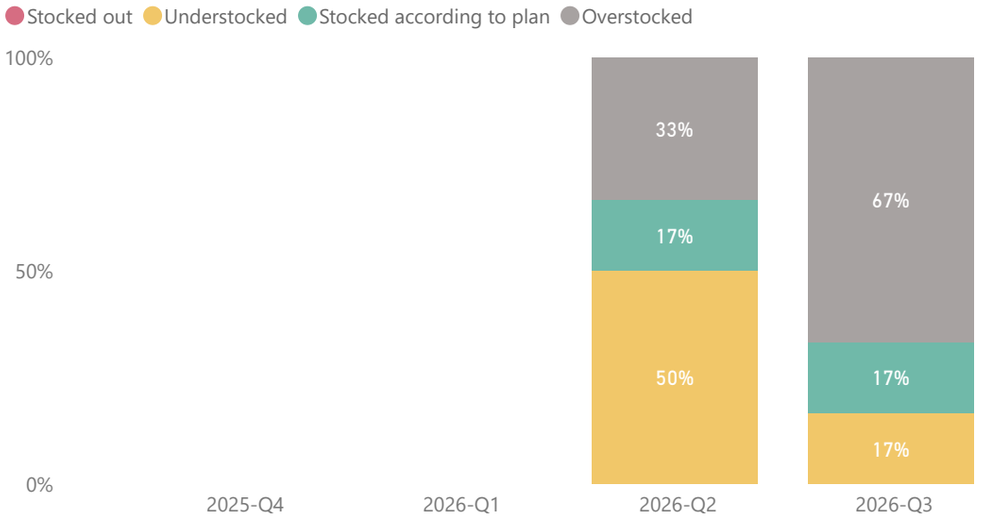
The SDP logistics reporting rate increased from 91 percent in FY 2026 Q2 to 97 percent in FY 2026 Q3. This result indicates improved reporting completeness and availability of logistics data through DHIS2. The high reporting rate strengthens the reliability of supply chain information for monitoring commodity availability and programmatic decision-making.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

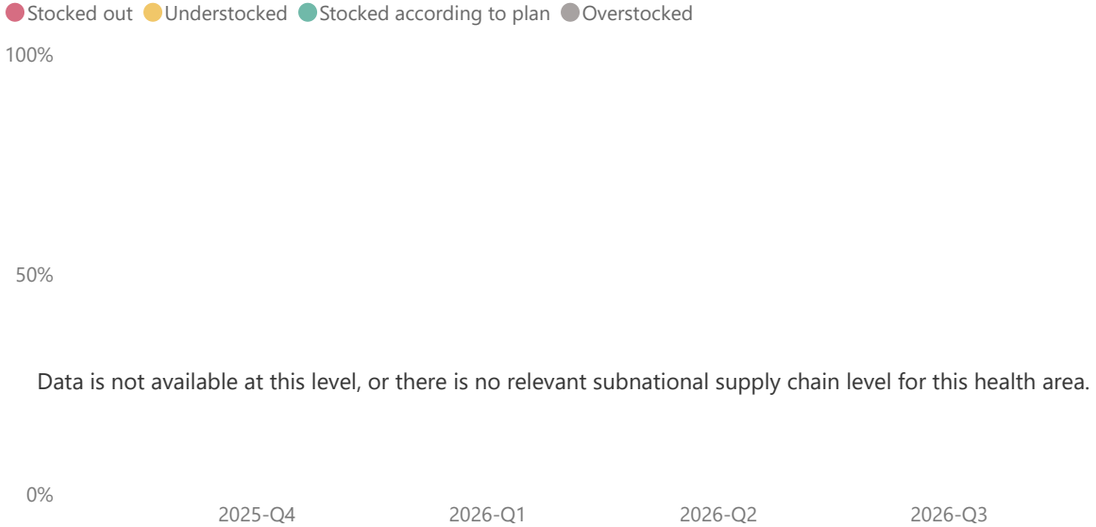
Country: Madagascar | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Central warehouse inventory report on Jun 30, 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	As of FY 2026 Q3, 67 percent of malaria tracer commodities at the central warehouse level were understocked, 17 percent were stocked according to plan, and 17 percent were overstocked. In contrast, in FY 2026 Q2, 50 percent of commodities were understocked, 17 percent were stocked according to plan, and 33 percent were overstocked. These changes reflect the receipt of malaria commodities during the quarter and continued efforts to restore stock levels following previous supply disruptions. The project will continue to support the Ministry of Health in monitoring inventory status and implementing supply planning activities to improve stock availability throughout the supply chain.
C7	No malaria commodity losses due to expiry, theft, damage, or other causes were reported while under GHSC-PSM custody during FY 2026 Q3.

HIV Tracer Products and Supply Planning

Country: Madagascar

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

An updated malaria commodity supply plan was submitted for FY 2026 Q3 as required. The National Malaria Control Program team continues to lead the routine review and updating of the supply plan to ensure that procurement and supply decisions are based on the most current consumption, stock status, and pipeline information.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2026-Q2	2026-Q3
Malaria commodities	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Madagascar

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
Malaria	**29.6%**	**16,092**
Malaria-First line ACT (AS/AQ 100/270mgx3)	35.8%	2,682
Malaria-First line ACT (AS/AQ 100/270mgx6)	30.1%	2,682
Malaria-First line ACT (AS/AQ 25/67.5mg)	52.5%	2,682
Malaria-First line ACT (AS/AQ 50/135mg)	26.0%	2,682
Malaria-Rapid diagnostic test for malaria	12.8%	2,682
Malaria-Sulphadoxine-pyrimethamine	20.2%	2,682
Overall	**29.6%**	**16,092**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
Malaria	97%	2777

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**17%**	**67%**	**17%**		**6**
Malaria	17%	67%	17%		6
Overall	**17%**	**67%**	**17%**		**6**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

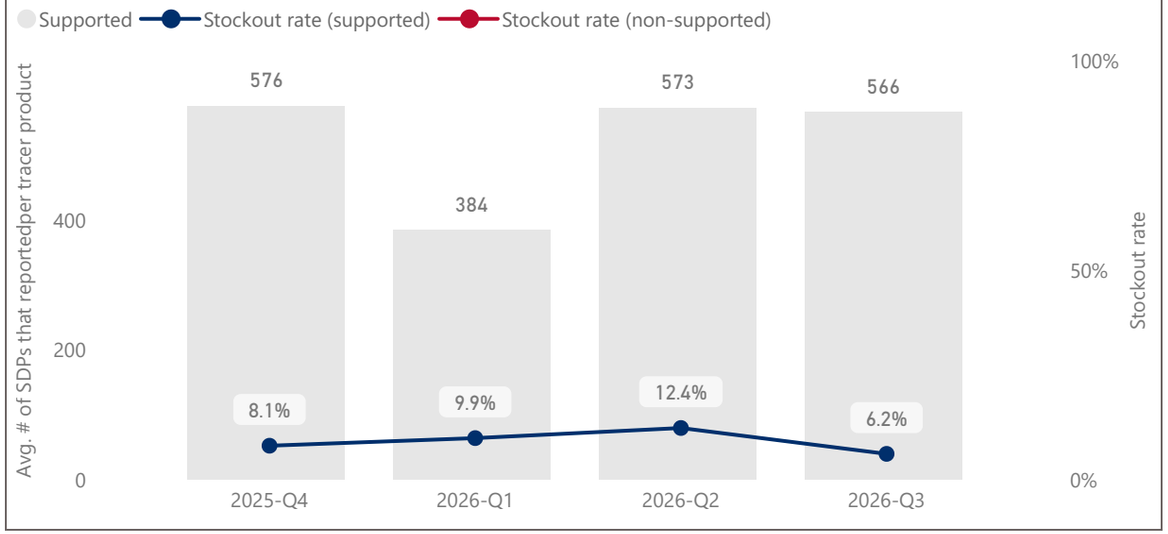
Country

Malawi

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Malawi | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



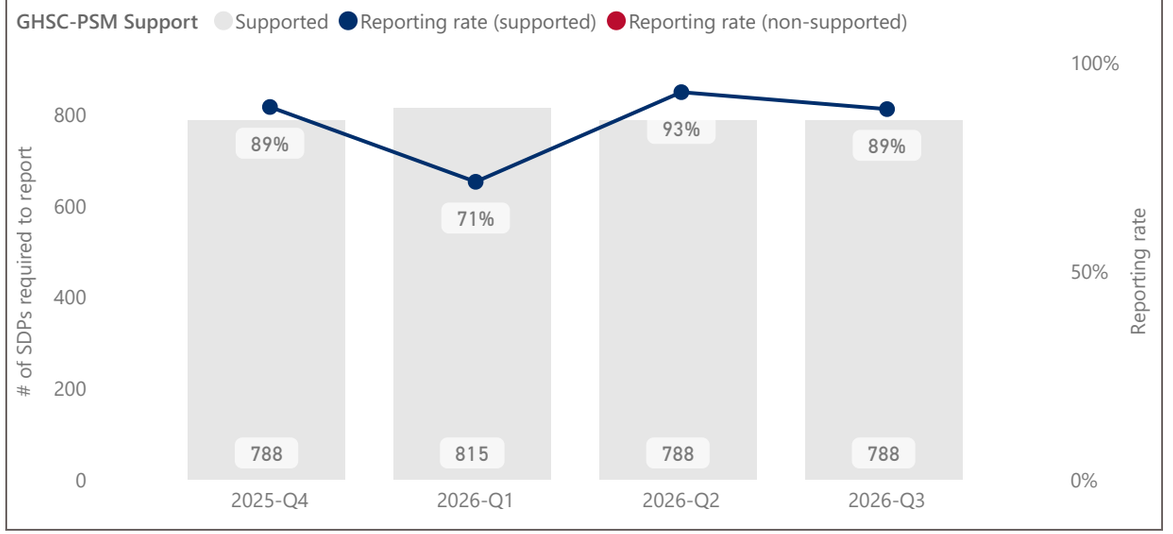
Data source

Monthly LMIS Report, May 2026

Analysis

The stockout rate for HIV/AIDS commodities decreased to 6.2 percent this quarter, driven by reductions in stockouts across all HIV/AIDS commodity categories except first-line adult ARVs, which experienced an increase from 2.5 percent to 4.6 percent in Q3 FY2026. GHSC-PSM continues to support the Ministry of Health in strengthening commodity security through monthly stock analyses, distribution planning for HIV laboratory commodities, and broader health systems strengthening efforts. GHSC-PSM will also continue working closely with the Ministry of Health to follow up with facilities and facilitate commodity redistributions to help prevent and mitigate stockouts.

B3. LMIS reporting rate



B3. Data Source (denominator)

Monthly LMIS Report, May 2026

B3. Data Source (numerator)

Monthly LMIS Report, May 2026

Analysis

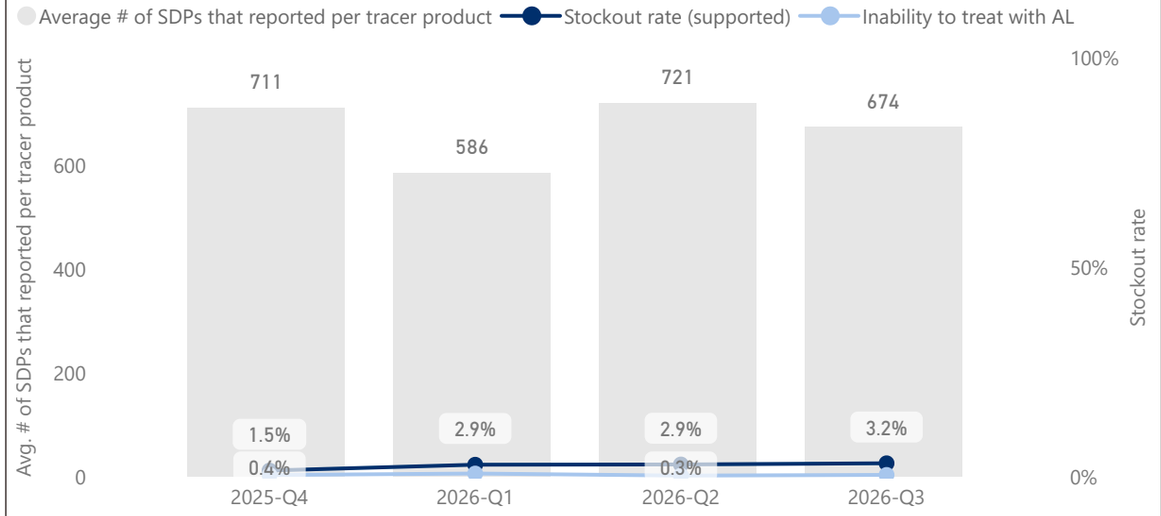
The HIV/AIDS reporting rate declined to 89 percent this quarter, down from 93 percent in Q2 FY2026. GHSC-PSM continued to provide both remote and on-site OpenLMIS support to facilities across the country, helping to sustain strong reporting performance and improve health supply chain data management. However, limited district- and facility-level follow-up, largely due to insufficient on-site systems support, continued to adversely affect reporting rates.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Malawi | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



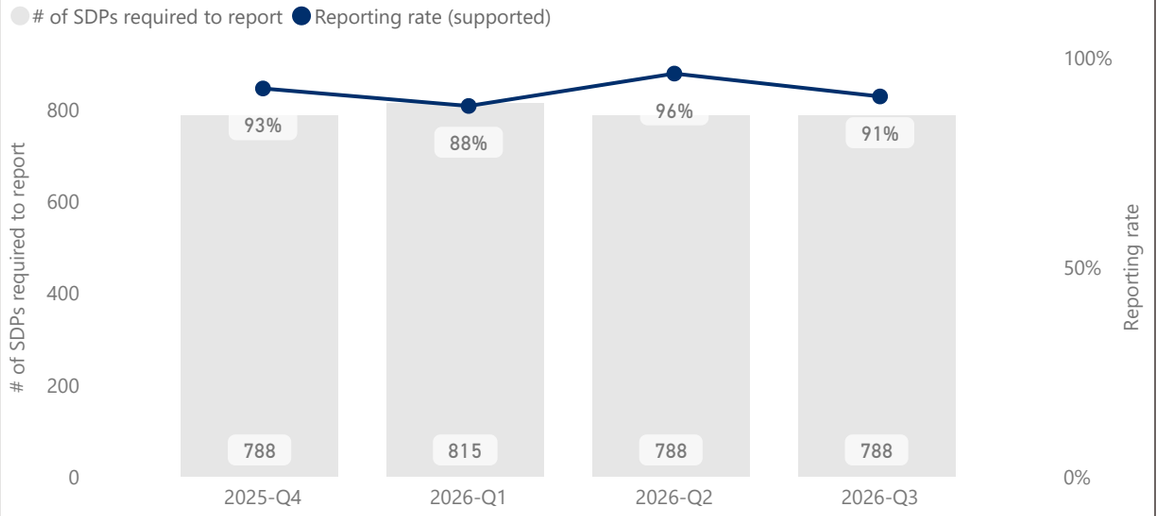
Data source

Monthly LMIS Report, May 2026

Analysis

The stockout rate for malaria commodities increased slightly to 3.2 percent this quarter, up from 2.9 percent in the previous quarter. Despite this increase, the AL inability-to-treat score remained very low at 0.4 percent, indicating that nearly all facilities had sufficient supplies to treat malaria using first-line regimens. GHSC-PSM continues to support the Ministry of Health in strengthening commodity security through monthly supply plan updates, routine commodity stock analyses, distribution planning and coordination, and broader systems-strengthening activities. GHSC-PSM will also continue supporting districts in monitoring facility stock levels and facilitating commodity redistributions to help prevent and reduce stockouts.

B3. LMIS reporting rate



B3. Data Source (denominator)

Monthly LMIS Report, May 2026

B3. Data Source (numerator)

Monthly LMIS Report, May 2026

Analysis

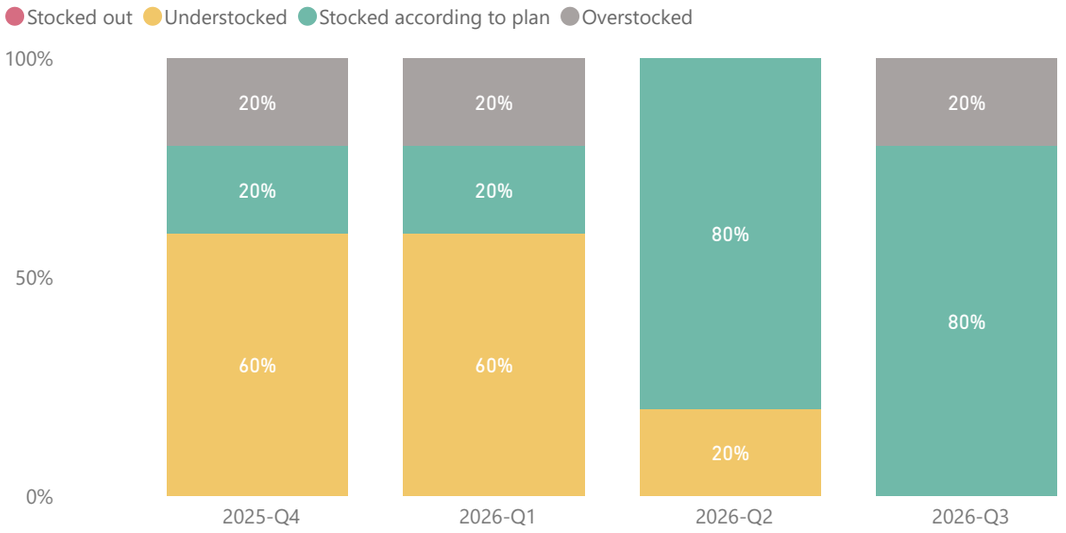
The malaria reporting rate declined to 91 percent this quarter, down from 96 percent in Q2 FY2026. GHSC-PSM continued to provide both remote and on-site OpenLMIS support to facilities across the country, helping to sustain strong reporting performance and improve health supply chain data management. However, limited district- and facility-level follow-up, largely due to insufficient on-site systems support, continued to adversely affect reporting rates.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

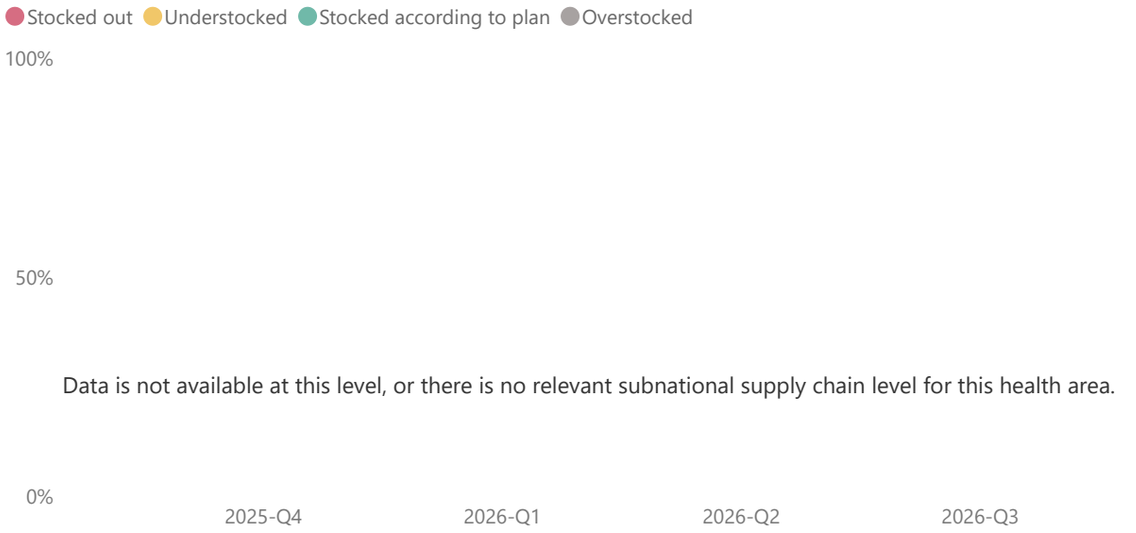
Country: Malawi | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	HIV Stock Status Report

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Central	Transit	Damage	LLIN	$1,089	$728,400	0.15%

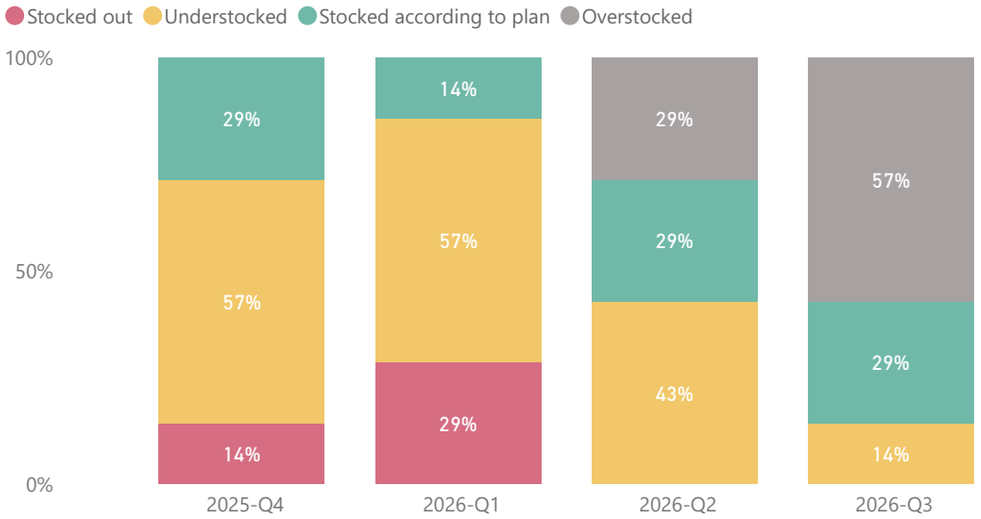
Ref	Analysis
B2	In Q3 FY2026, 80 percent of HIV/AIDS commodities were stocked according to plan. First-line RTKs improved from understocked to stocked according to plan, while second-line adult ARVs shifted from stocked according to plan to overstocked, increasing the overstocked rate to 20 percent. No central-level stockouts were reported during the quarter, and overall stock status remained strong. GHSC-PSM continues to support commodity security by updating the HIV laboratory commodity supply plans and facilitate inclusion of the commodities in OpenLMIS, placing orders for understocked products, and using data analysis to support the Ministry of Health's procurement, advocacy, and resource mobilization efforts.
C7	No losses to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

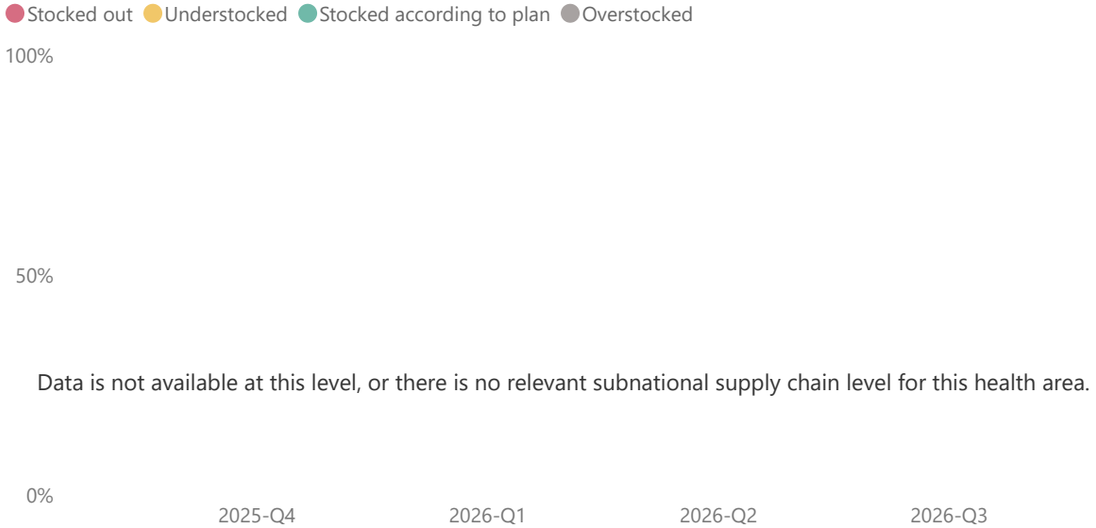
Country: Malawi | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Malaria Stock Status Report

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)

Data is not available at this level, or there is no relevant subnational supply chain level for this health area.

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Central	Transit	Damage	LLIN	$1,089	$728,400	0.15%

Ref	Analysis
B2	In Q3 FY2026, 29 percent of malaria commodities were stocked according to plan. The proportion of understocked commodities declined to 14 percent, driven by mRDTs and SP moving from understocked to stocked according to plan, while the overstocked rate increased to 57 percent as AL 6x2 and AL 6x4 shifted from stocked according to plan to overstocked. No stockouts were reported during the quarter. GHSC-PSM continues to support commodity security by updating supply plans in QAT, placing orders for understocked products, and using data analysis to inform Ministry of Health decision-making and advocacy for additional commodity procurement.
C7	As the warehouse was receiving a consignment of bales of 50 LLINs it was observed that 9 bales were wet with rust present on the outer packaging. Physical inspection confirmed that the moisture had penetrated the tertiary, secondary, and primary packaging, with the nets themselves feeling damp and heavy. The affected bales have been put on quarantine at the 3PL (CML) warehouse awaiting QA determination.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Malawi

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir 300/300/50mg
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg
Pediatric ARV	Abacavir/Lamivudine 120/60 mg Scored Dispersible Tablet
First RTK	HIV-1/2 Determine, 100 Tests
Second RTK	Unigold HIV test kit, Pack of 20 tests
Tie-breaker RTK	Not reported
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

GHSC-PSM submitted all required supply plans this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
Malaria commodities	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	
MCH commodities				✓
Nutrition				✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Malawi

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**6.2%**	**2,832**
HIV-First RTK	7.9%	699
HIV-Most used 1st line ARV	4.6%	700
HIV-Most used 1st line pediatric ARV	1.8%	651
HIV-Most used 2nd line ARV	0.6%	174
HIV-Second RTK	12.3%	608
Malaria	**3.2%**	**4,720**
Malaria-First line ACT (AL 6x1)	1.5%	675
Malaria-First line ACT (AL 6x2)	2.7%	675
Malaria-First line ACT (AL 6x3)	2.3%	664
Malaria-First line ACT (AL 6x4)	2.4%	666
Malaria-LLINs	2.9%	686
Malaria-Rapid diagnostic test for malaria	2.7%	715
Malaria-Sulphadoxine-pyrimethamine	8.5%	639
Overall	**4.3%**	**7,552**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.4%	675

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	89%	788
Malaria	91%	788

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**50%**	**42%**	**8%**		**24**
HIV/AIDS	80%	20%			10
Malaria	29%	57%	14%		14
Overall	**50%**	**42%**	**8%**		**24**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1
MCH commodities	1	1
Nutrition	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

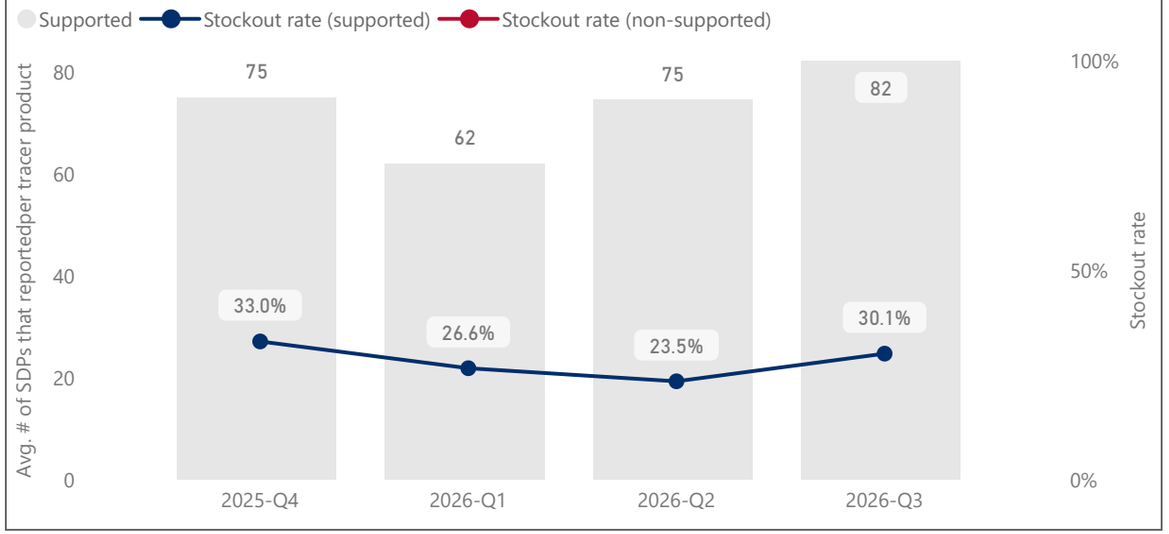
Country

Mali

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Mali | Current Quarter: 2026-Q3 | Tracer Product: All

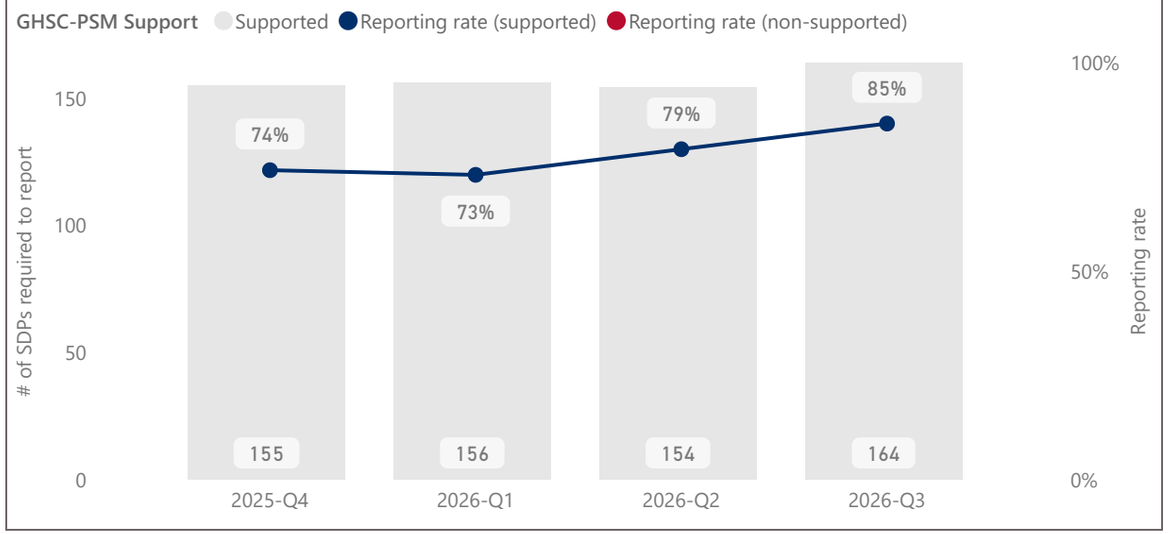
B1. Stockout rate at service delivery points



Data source

OSPSANTE (Mai 2026)

B3. LMIS reporting rate



B3. Data Source (denominator)

OSPSANTE (Mai 2026)

B3. Data Source (numerator)

OSPSANTE (Mai 2026)

Analysis

The average stockout rate of HIV/AIDS tracer commodities increased from 23.5 percent in FY 2026 Q2 to 30.1 percent in FY 2026 Q3. This increase was primarily driven by higher stockout rates of first and second RTKs, which were stocked out in 38.4 percent and 44.7 percent of SDPs, respectively. Although stockouts of HIV testing kits were reported in pharmacy stores, they are more likely to be available in the laboratories and clinics, allowing continuity of HIV testing services.

Analysis

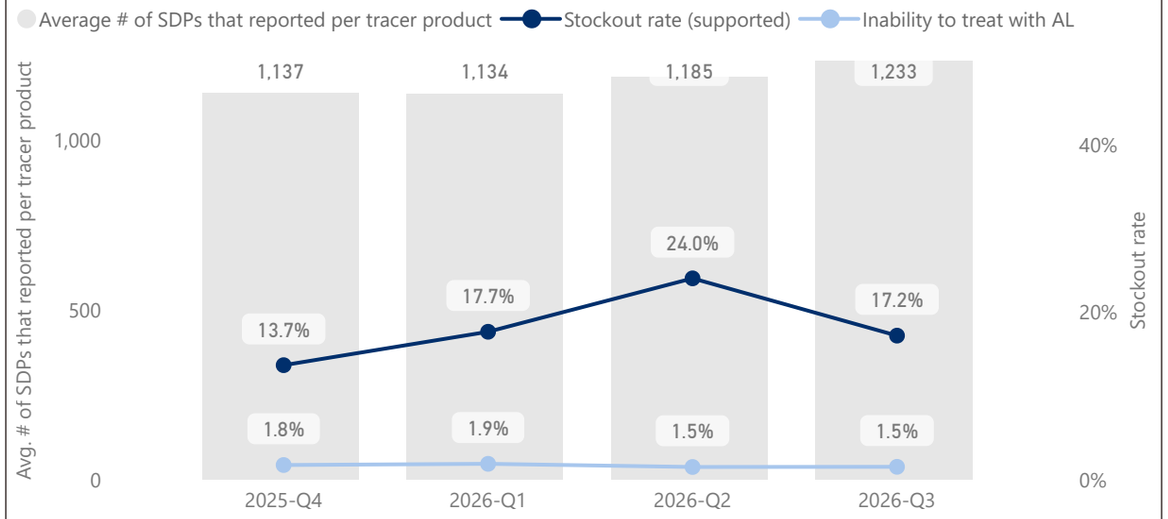
The reporting rate for HIV/AIDS commodity sites increased from 79 percent in FY 2026 Q2 to 85 percent in FY 2026 Q3. During the quarter, the number of reporting sites on the OSPSANTE platform increased from 154 to 164. The project continues to collaborate with the Directorate of Pharmacy and Medicines (DPM) to promote timely and complete reporting of logistics data.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Mali | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



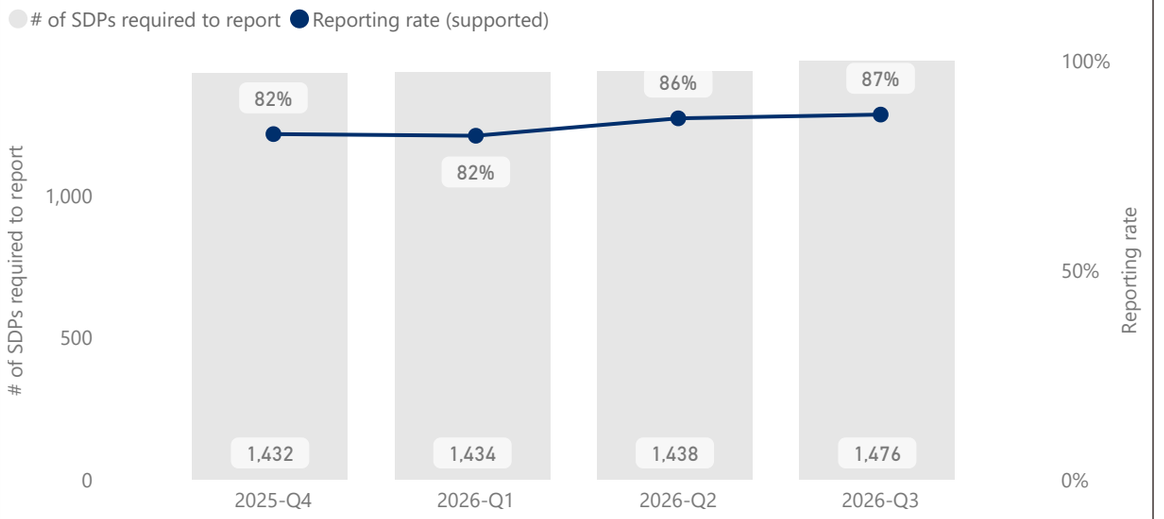
Data source

OSPSANTE (Mai 2026)

Analysis

The average stockout rate for malaria tracer commodities declined from 24.0 percent in FY 2026 Q2 to 17.2 percent in FY 2026 Q3, and the inability to treat malaria with a formulation remained at 1.5 percent between the two quarters. The reduction in the average stockout rate reflects greater adherence to the distribution schedule established by the National Malaria Control Program (NMCP) in preparation for the high transmission season. In addition, LLIN stockout rates decreased from 51.5 percent in FY 2026 Q2 to 21.2 percent in FY 2026 Q3 following product distributions supported by GHSC-PSM.

B3. LMIS reporting rate



B3. Data Source (denominator)

OSPSANTE (Mai 2026)

B3. Data Source (numerator)

OSPSANTE (Mai 2026)

Analysis

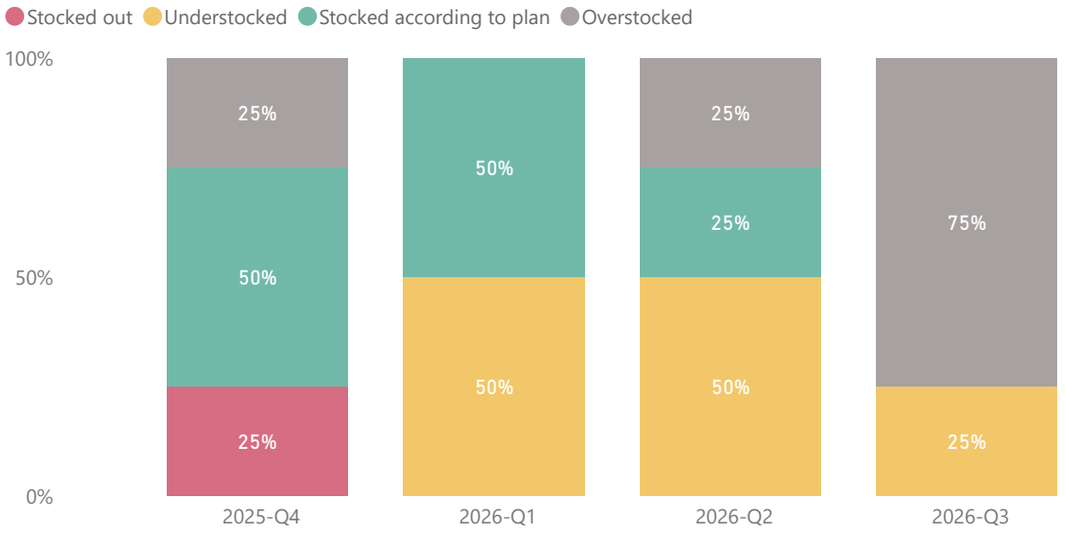
The reporting rate for malaria commodity sites increased from 86 percent in FY 2026 Q2 to 87 percent in FY 2026 Q3. The number of reporting SDPs increased from 1,438 to 1,476 during the quarter. The project continues to work with the DPM to strengthen reporting performance and support timely submission of logistics data through DHIS2.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

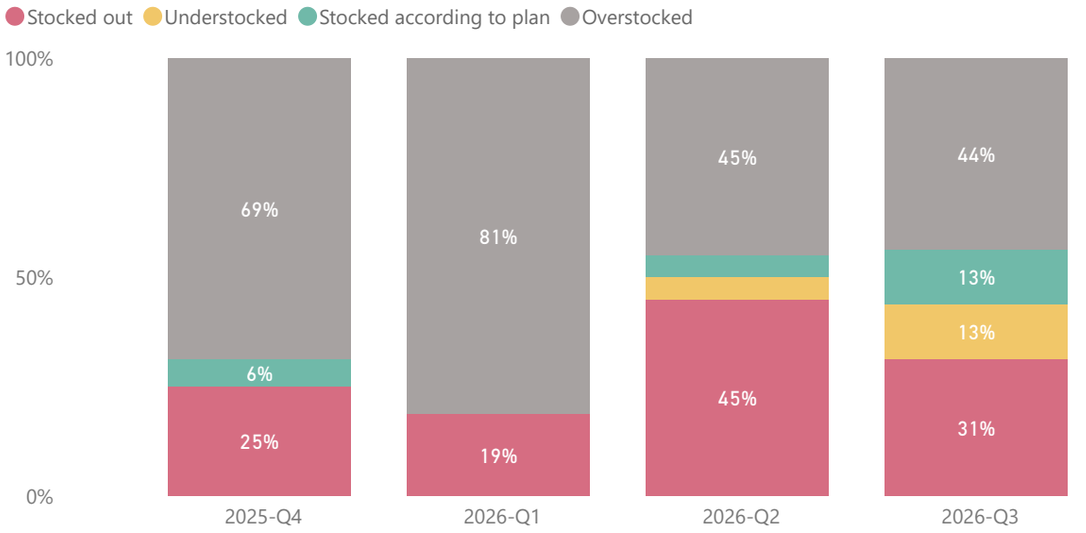
Country: Mali | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	PPM Central, OSPSANTE (Mai 2026)

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	OSPSANTE (Mai 2026)

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

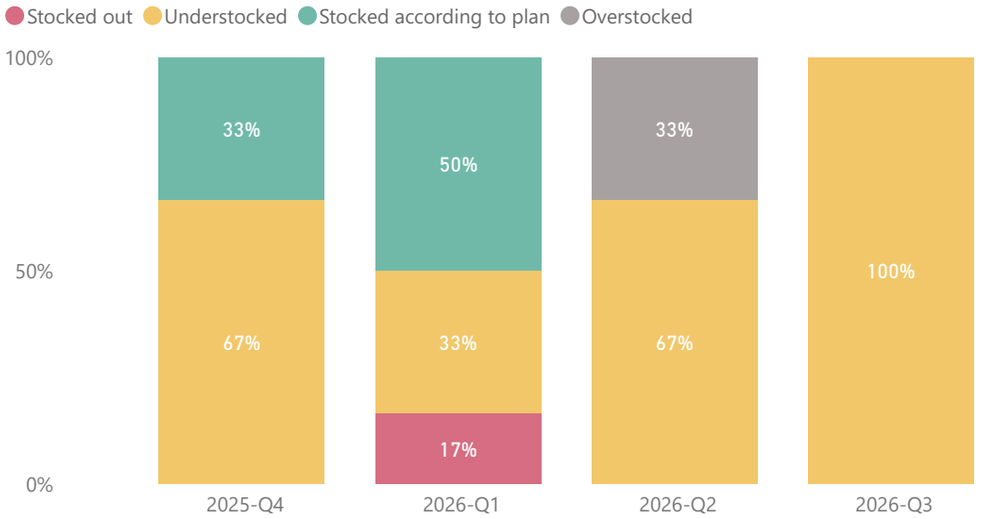
Ref	Analysis
B2	At the central level, no HIV/AIDS tracer products were stocked out in FY 2026 Q3. However, 75 percent of products were overstocked, while 25 percent were understocked. At the regional level, the proportion of products stocked out declined from 45 percent in FY 2026 Q2 to 31 percent in FY 2026 Q3, while only 13 percent of products were stocked according to plan. These variations in stock levels at the central and regional levels reflect ongoing challenges in the distribution system that impede the ability of the warehouses to maintain stock within the established minimum and maximum thresholds.
C7	The project does not report on this indicator in Mali.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

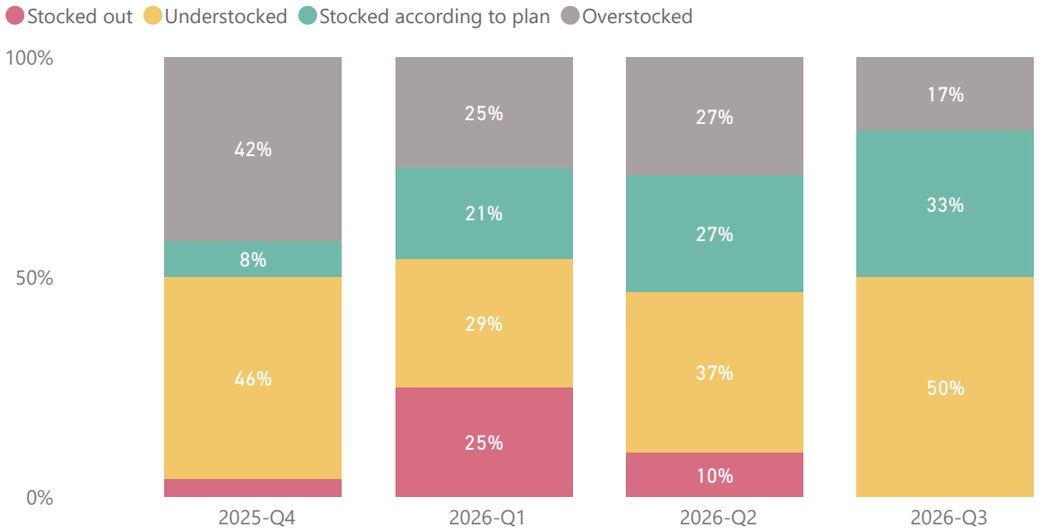
Country: Mali | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	PPM Central, OSPSANTE (Mai 2026)

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	OSPSANTE (Mai 2026)

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	At the central level, no malaria tracer commodities were stocked according to plan in FY 2026 Q3, while the proportion of understocked products increased from 67 percent in FY 2026 Q2 to 100 percent in FY 2026 Q3. At the regional level, the proportion of products stocked according to plan increased from 27 percent in FY 2026 Q2 to 33 percent in FY 2026 Q3, while the proportion of understocked products increased from 37 percent to 50 percent. These stock variations reflect ongoing distribution challenges between regional warehouses and district stores, as well as delays in replenishment from central-level stocks.
C7	The project does not report on this indicator in Mali.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Mali

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30 tablets]
2nd line adult ARV	Lopinavir/Ritonavir 200/50 mg Tablet
Pediatric ARV	Abacavir/Lamivudine 60/30 mg Scored Dispersible Tablet
First RTK	Alere
Second RTK	Bioline
Tie-breaker RTK	First Response
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

GHSC-PSM supported the DPM and partners to conduct the annual quantification exercise for HIV/AIDS and malaria commodities covering the 2026-2030 period, as well as the quarterly review of national supply plans. Updated HIV/AIDS and malaria supply plans were reviewed and submitted to the GHSC-PSM FASP team. .

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
ARVs	✓	○	✓	✓
Lab (HIV diagnostics)			✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Mali

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**30.1%**	**329**
HIV-First RTK	38.4%	73
HIV-Most used 1st line ARV	16.3%	86
HIV-Most used 1st line pediatric ARV	22.4%	85
HIV-Second RTK	44.7%	85
Malaria	**17.2%**	**8,631**
Malaria-First line ACT (AL 6x1)	9.3%	1,233
Malaria-First line ACT (AL 6x2)	13.5%	1,233
Malaria-First line ACT (AL 6x3)	30.0%	1,233
Malaria-First line ACT (AL 6x4)	10.1%	1,233
Malaria-LLINs	21.2%	1,233
Malaria-Rapid diagnostic test for malaria	19.7%	1,233
Malaria-Sulphadoxine-pyrimethamine	16.4%	1,233
Overall	**17.7%**	**8,960**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	1.5%	1,424

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	85%	164
Malaria	87%	1476

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central		**30%**	**70%**		**10**
HIV/AIDS		75%	25%		4
Malaria			100%		6
Subnational level 1	**25%**	**28%**	**35%**	**13%**	**40**
HIV/AIDS	13%	44%	13%	31%	16
Malaria	33%	17%	50%	0%	24
Overall	**20%**	**28%**	**42%**	**10%**	**50**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

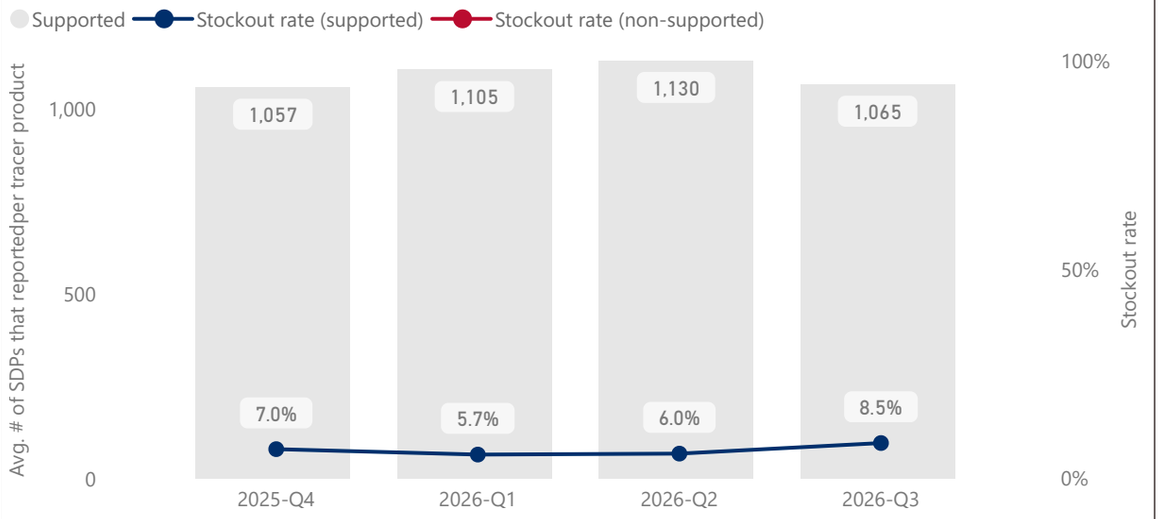
Country

Mozambique

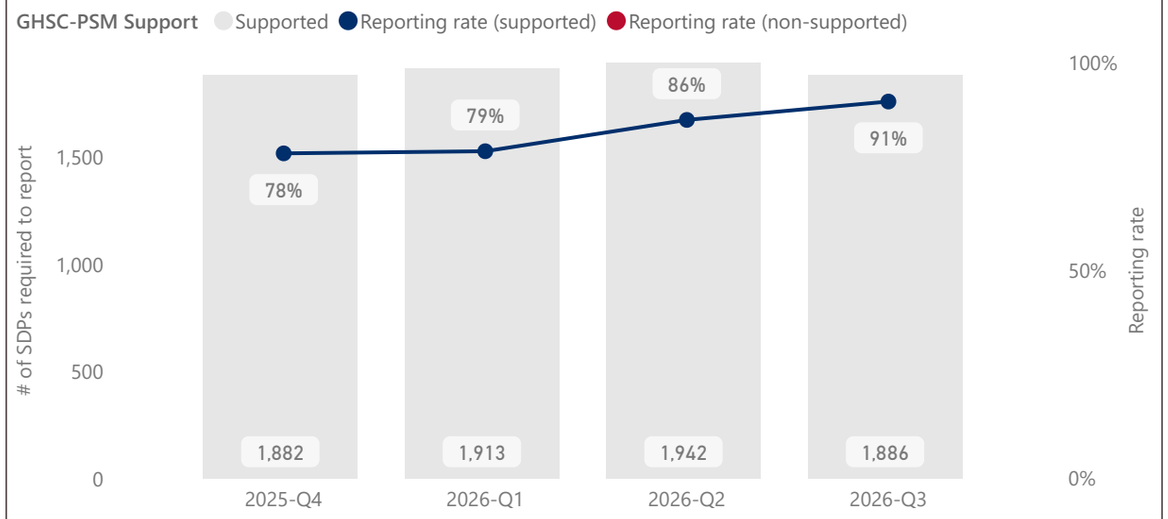
Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Mozambique | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source
FC Jun'26
LMIS

B3. Data Source (denominator)	B3. Data Source (numerator)
FC, Jun'2026	RRF, 30th June'26
RRF, 30th Jun'26	FC, Jun'2026

Analysis

The stockout rate for HIV/AIDS products increased to 8.5 percent this quarter, indicating a decline in commodity availability compared with the previous quarter. HIV rapid test kits (RTKs) showed mixed performance during the reporting period. The stockout rate for the First RTK increased slightly from 8.8 percent to 10.2 percent, while the Second RTK experienced a more substantial increase from 16.8 percent to 29.0 percent. The sharp rise in stockouts of the Second RTK suggests ongoing supply chain challenges affecting confirmatory HIV testing commodities. This trend warrants close monitoring and targeted interventions to strengthen commodity availability and prevent disruptions to HIV testing services.

Analysis

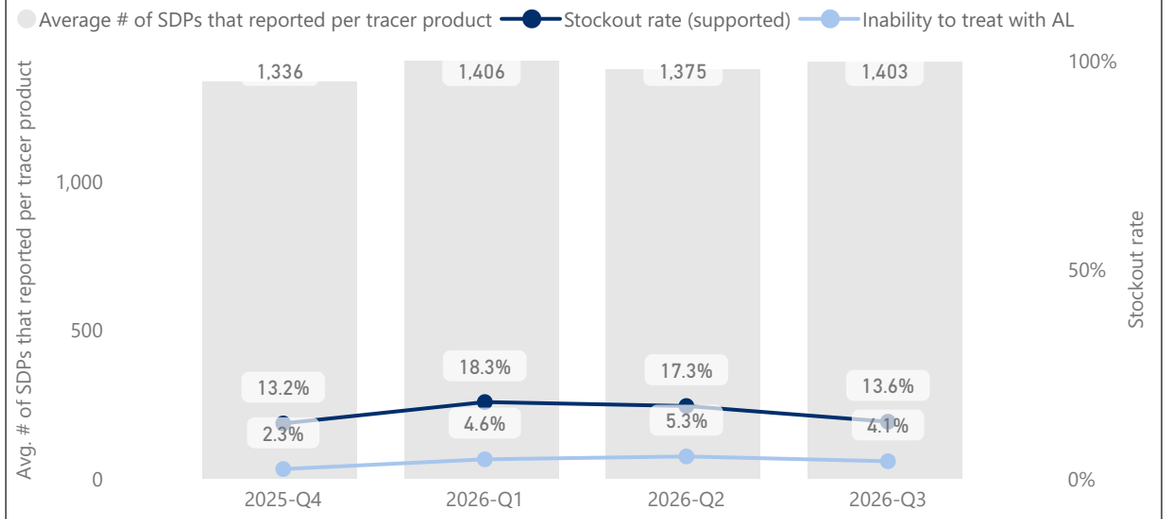
During Q3 FY2026, the overall reporting rate for SDPs under HIV/AIDS increased to 91 percent, compared to 86 percent in Q2 FY2026. SDPs maintained strong performance, suggesting that the reporting challenges were concentrated at the lower service delivery tiers.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

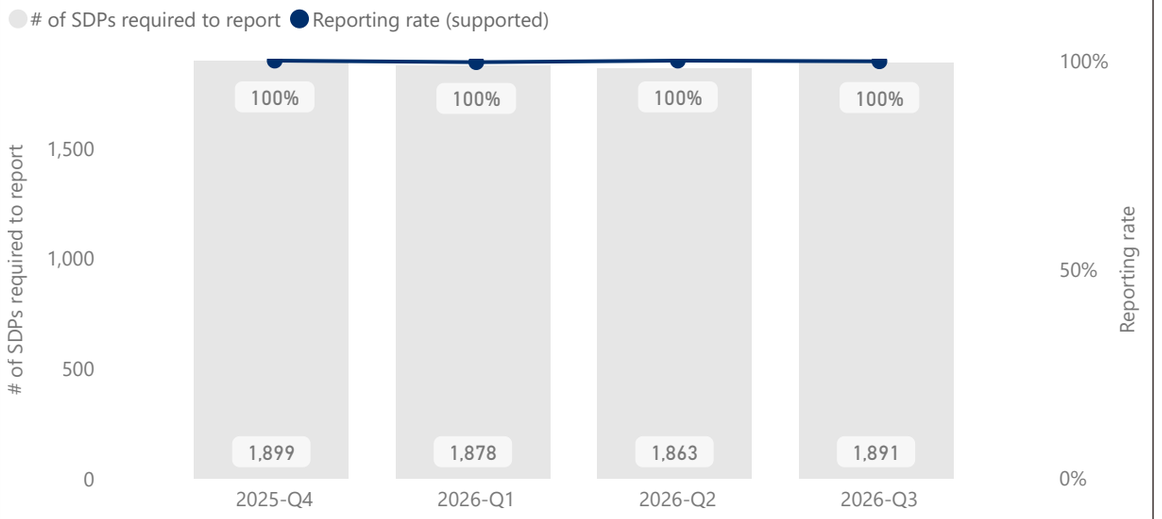
Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Mozambique | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source

FC Jun'26

B3. Data Source (denominator)

SIGLUS April'26,May'26,Jun'26

B3. Data Source (numerator)

SIGLUS April'26,May'26,Jue'26

Analysis

The stockout rate for malaria commodities decreased to 13.6 percent in Q3 FY2026, down from 17.3 percent in the previous quarter, reflecting improved product availability across service delivery points. All malaria commodities recorded declines in stockout rates during the quarter. The inability-to-treat rate of 4.1 percent indicates that artemether-lumefantrine (AL) was available at the vast majority of facilities. The most significant improvement was observed for AL 6x4, which experienced a 10 percentage-point reduction in stockouts, followed by malaria rapid diagnostic tests (RDTs), which recorded a 6 percentage-point decline. These findings suggest strengthened commodity availability and improved supply chain performance for key malaria products during the reporting period.

Analysis

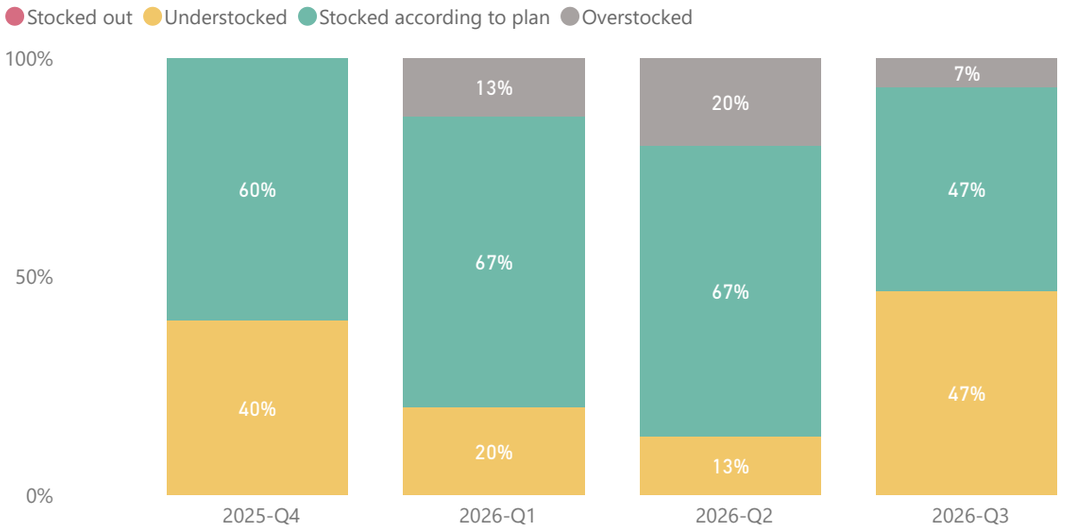
The malaria reporting rate remained at 100 percent this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

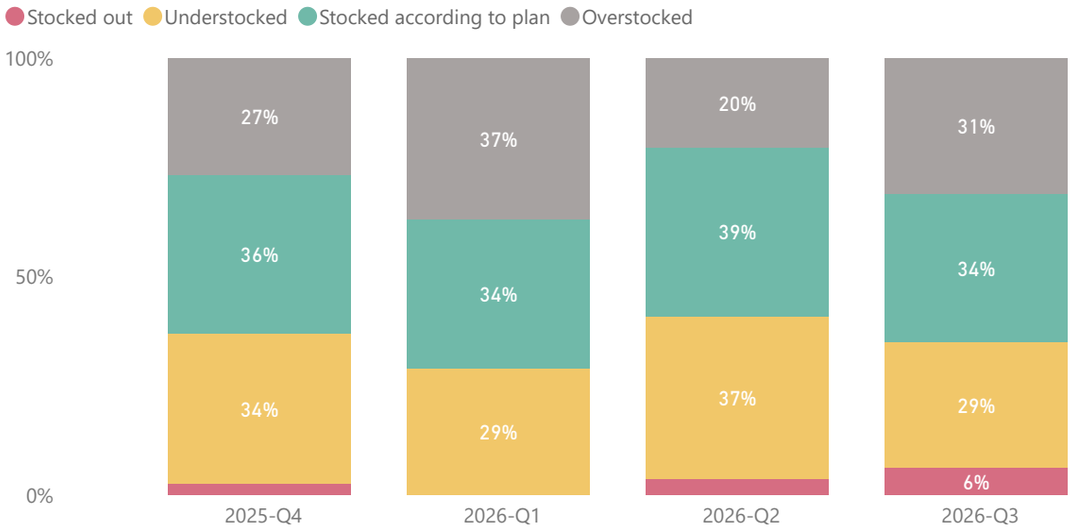
Country: Mozambique | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	FC April'26, May'26, Jun'26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	FC April'26, May'26, Jun'26

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

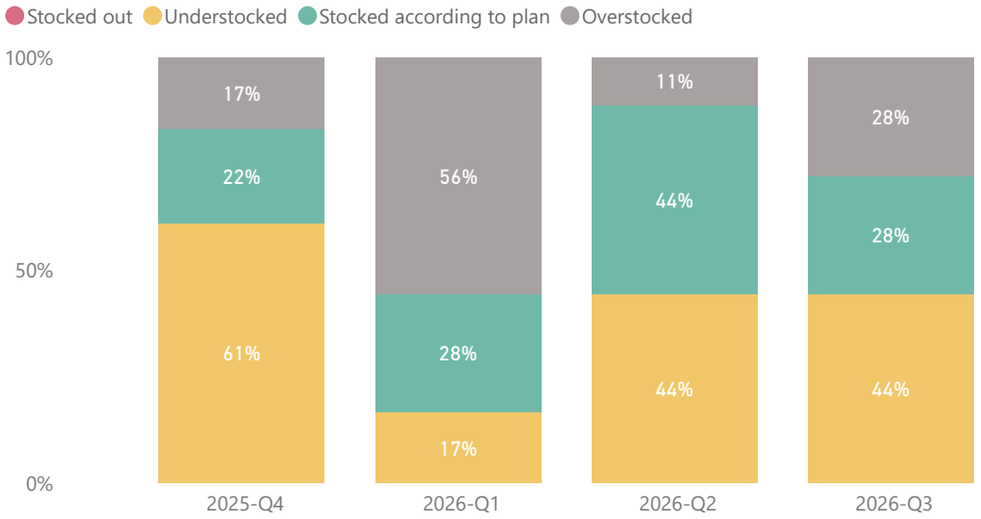
Ref	Analysis
B2	At the central level, the stocked according to plan rate for HIV/AIDS commodities decreased from 67 percent in Q2 FY2026 to 47 percent in Q3 FY2026, while the understocked percentage increased from 13 percent to 47 percent, largely driven by ARVs shifting from stocked according to plan to understocked status. Meanwhile, the overstocked percentage decreased from 20 percent to 7 percent. At the subnational level, the stocked according to plan rate decreased from 39 percent to 34 percent. The understocked percentage also declined from 37 percent to 29 percent, while the overstocked percentage increased from 20 percent to 31 percent, suggesting a shift from understocked to overstocked status for some commodities. The stocked-out percentage increased slightly from 4 percent to 6 percent.
C7	No losses to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

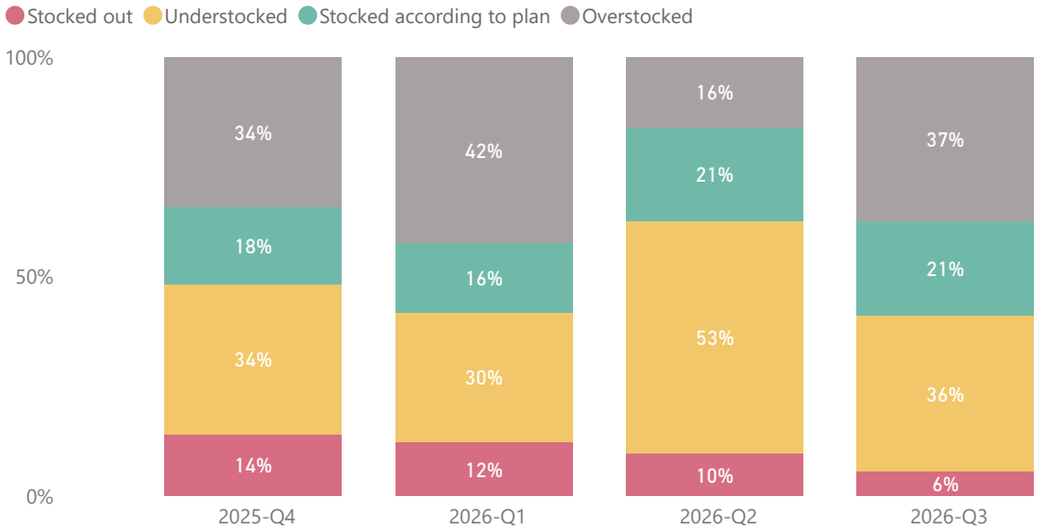
Country: Mozambique | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	FC April'26, May'26, Jun'26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	FC April'26, May'26, Jun'26

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref Analysis

Ref	Analysis
B2	At the central level, the proportion of malaria commodities stocked according to plan decreased from 44 percent in Q2 FY2026 to 28 percent in Q3 FY2026. At the same time, the understocked percentage remained unchanged at 44 percent, while the overstocked percentage increased from 11 percent to 28 percent. No commodities were reported as stocked out at the central level during either quarter. At the subnational level, the proportion of commodities stocked according to plan remained stable at 21 percent between Q2 and Q3 FY2026. The understocked percentage decreased from 53 percent to 36 percent, while the overstocked percentage increased substantially from 16 percent to 37 percent, indicating a shift in inventory distribution across products. The stocked-out percentage decreased from 10 percent to 6 percent, suggesting improved product availability at subnational warehouses.
C7	No losses to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Mozambique

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30 Tablets, 90 Tablets, 180 Tablets]
2nd line adult ARV	Atazanavir/Ritonavir (300/100mg)
Pediatric ARV	Dolutegravir 10 mg Scored Dispersible Tablet
First RTK	Determine Kit 100 Tests
Second RTK	Uni-Gold Kit 20 tests
Tie-breaker RTK	Not reported
Viral load reagent	Abbot RealTime HIV-1 Aplification Reagent Kit Quant, 4 x 24 tests, and Roche products (CAP/CTM and Cobas 6800)
Viral load consumable	Not reported
EID reagent	KIT CAP-G/CTM HIV-QUAL 48T CE IVD
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

GHSC-PSM submitted all required supply plans this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
TPT	○	○	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Mozambique

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**8.5%**	**7,458**
HIV-EID reagent	0.0%	14
HIV-First RTK	10.2%	1,535
HIV-Most used 1st line ARV	1.4%	1,756
HIV-Most used 1st line pediatric ARV	0.9%	1,108
HIV-Most used 2nd line ARV	0.7%	1,519
HIV-Second RTK	29.0%	1,484
HIV-Viral load reagent	0.0%	42
Malaria	**13.6%**	**9,819**
Malaria-First line ACT (AL 6x1)	10.4%	1,573
Malaria-First line ACT (AL 6x2)	13.9%	1,551
Malaria-First line ACT (AL 6x3)	20.7%	1,489
Malaria-First line ACT (AL 6x4)	14.2%	1,589
Malaria-LLINs	29.6%	638
Malaria-Rapid diagnostic test for malaria	4.7%	1,543
Malaria-Sulphadoxine-pyrimethamine	11.2%	1,436
Overall	**11.4%**	**17,277**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	4.1%	1,647

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	91%	1886
Malaria	100%	1891

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**36%**	**18%**	**45%**	**0%**	**33**
HIV/AIDS	47%	7%	47%	0%	15
Malaria	28%	28%	44%	0%	18
Subnational level 1	**27%**	**34%**	**32%**	**6%**	**496**
HIV/AIDS	34%	31%	29%	6%	226
Malaria	21%	37%	36%	6%	270
Overall	**28%**	**33%**	**33%**	**5%**	**529**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

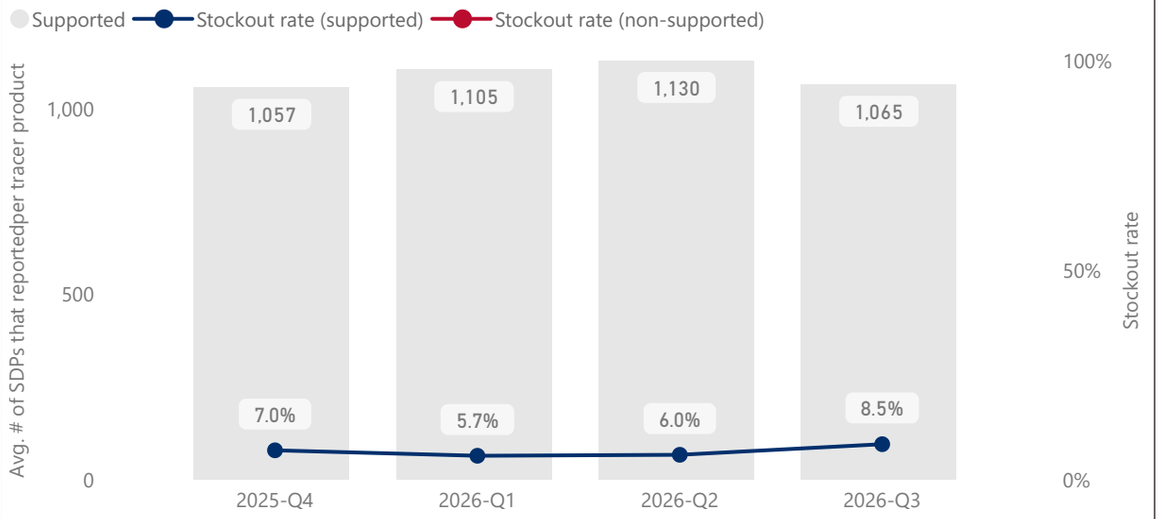
Country

Mozambique

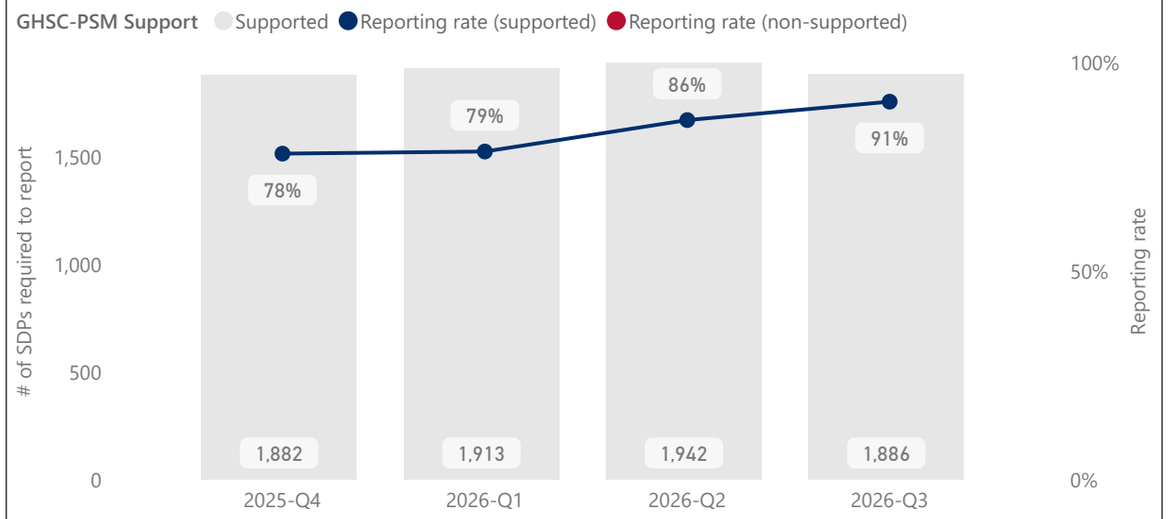
Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Mozambique | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source
FC Jun'26
LMIS

B3. Data Source (denominator)	B3. Data Source (numerator)
FC, Jun'2026	RRF, 30th June'26
RRF, 30th Jun'26	FC, Jun'2026

Analysis

The stockout rate for HIV/AIDS products increased to 8.5 percent this quarter, indicating a decline in commodity availability compared with the previous quarter. HIV rapid test kits (RTKs) showed mixed performance during the reporting period. The stockout rate for the First RTK increased slightly from 8.8 percent to 10.2 percent, while the Second RTK experienced a more substantial increase from 16.8 percent to 29.0 percent. The sharp rise in stockouts of the Second RTK suggests ongoing supply chain challenges affecting confirmatory HIV testing commodities. This trend warrants close monitoring and targeted interventions to strengthen commodity availability and prevent disruptions to HIV testing services.

Analysis

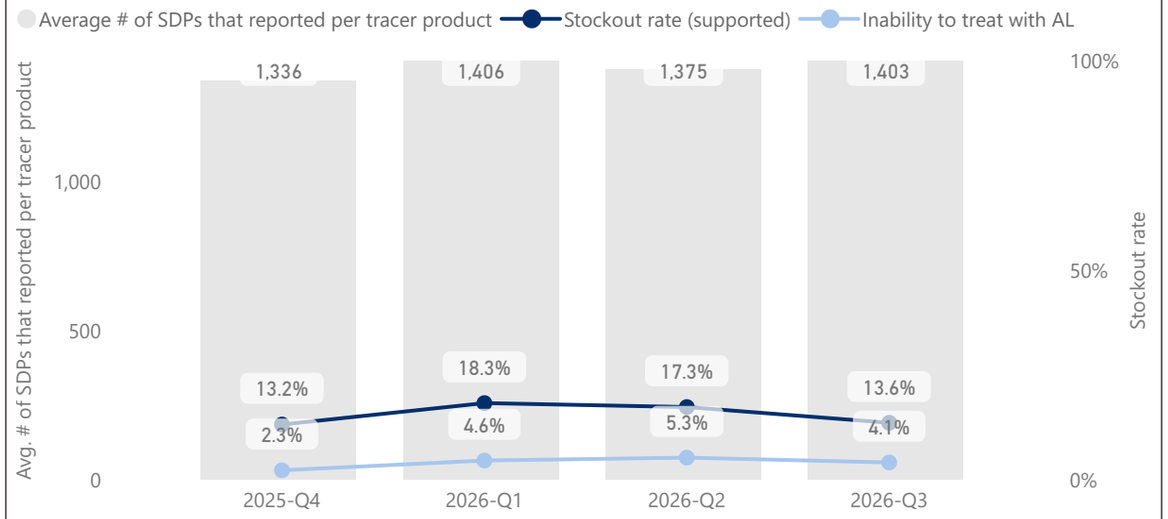
During Q3 FY2026, the overall reporting rate for SDPs under HIV/AIDS increased to 91 percent, compared to 86 percent in Q2 FY2026. SDPs maintained strong performance, suggesting that the reporting challenges were concentrated at the lower service delivery tiers.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Mozambique | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



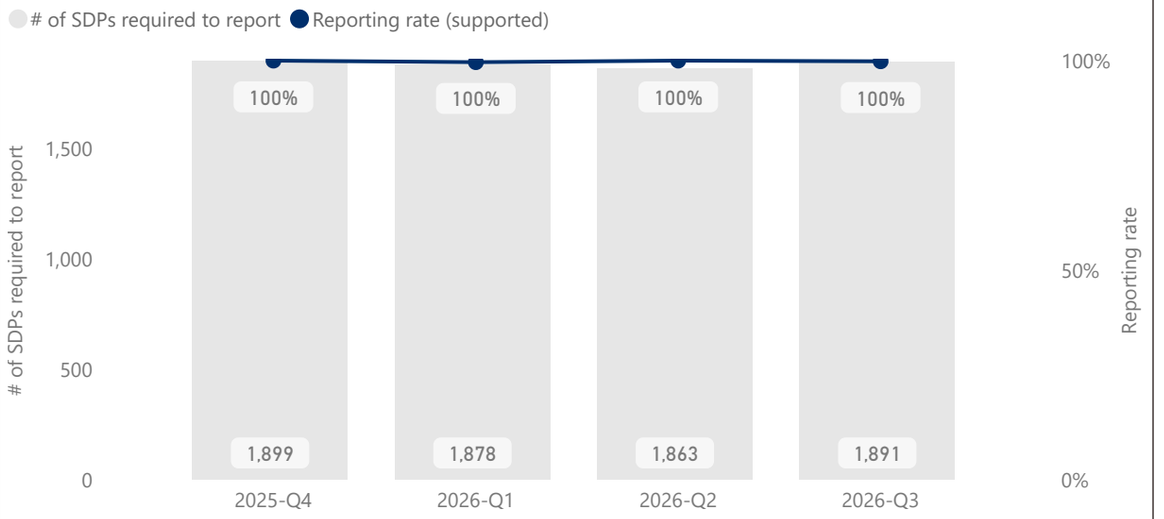
Data source

FC Jun'26

Analysis

The stockout rate for malaria commodities decreased to 13.6 percent in Q3 FY2026, down from 17.3 percent in the previous quarter, reflecting improved product availability across service delivery points. All TO2 malaria commodities recorded declines in stockout rates during the quarter. The inability-to-treat rate of 4.1 percent indicates that artemether-lumefantrine (AL) was available at the vast majority of facilities. The most significant improvement was observed for AL 6x4, which experienced a 10 percentage-point reduction in stockouts, followed by malaria rapid diagnostic tests (RDTs), which recorded a 6 percentage-point decline. These findings suggest strengthened commodity availability and improved supply chain performance for key malaria products during the reporting period.

B3. LMIS reporting rate



B3. Data Source (denominator)

SIGLUS April'26,May'26,Jun'26

B3. Data Source (numerator)

SIGLUS April'26,May'26,Jue'26

Analysis

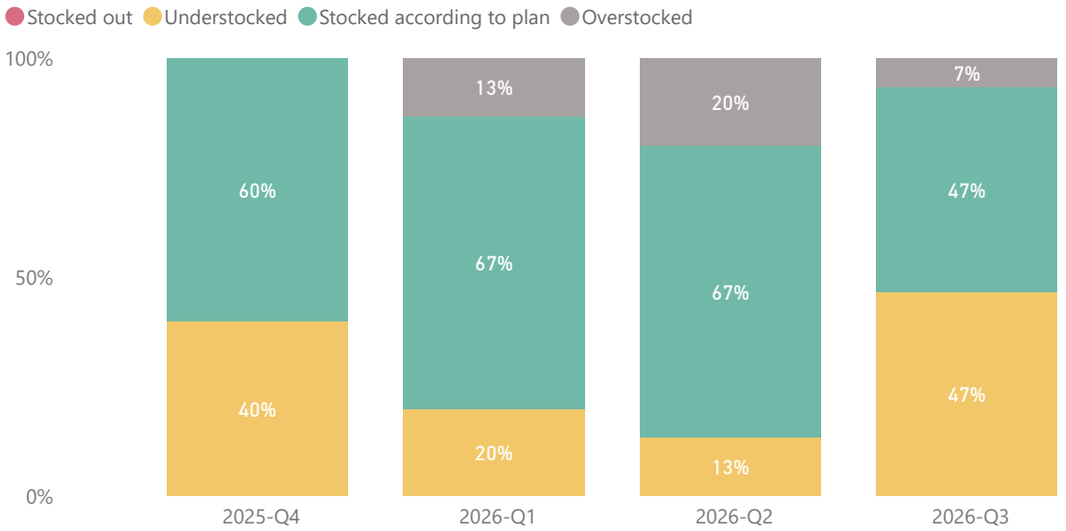
The malaria reporting rate remained at 100 percent this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

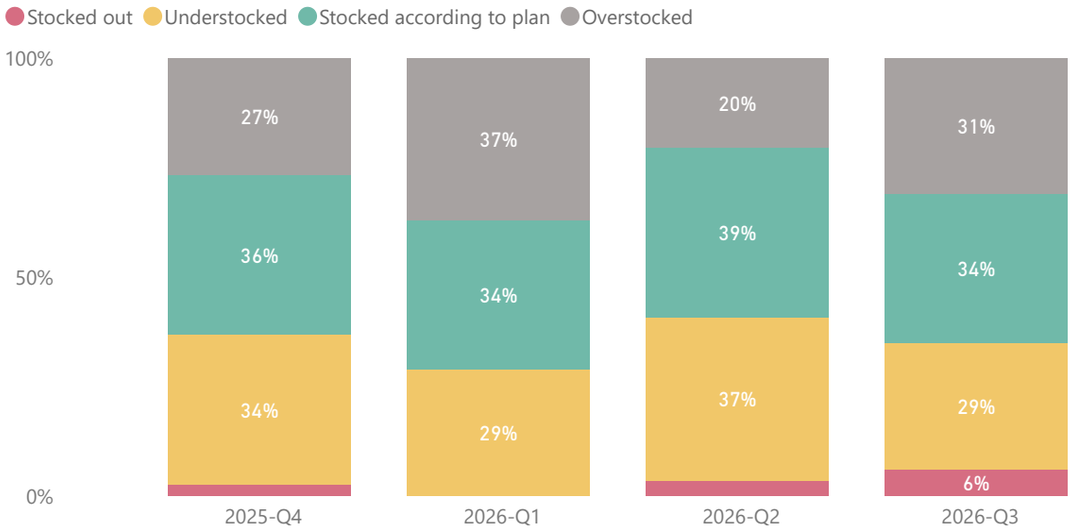
Country: Mozambique | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	FC April'26, May'26, Jun'26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	FC April'26, May'26, Jun'26

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

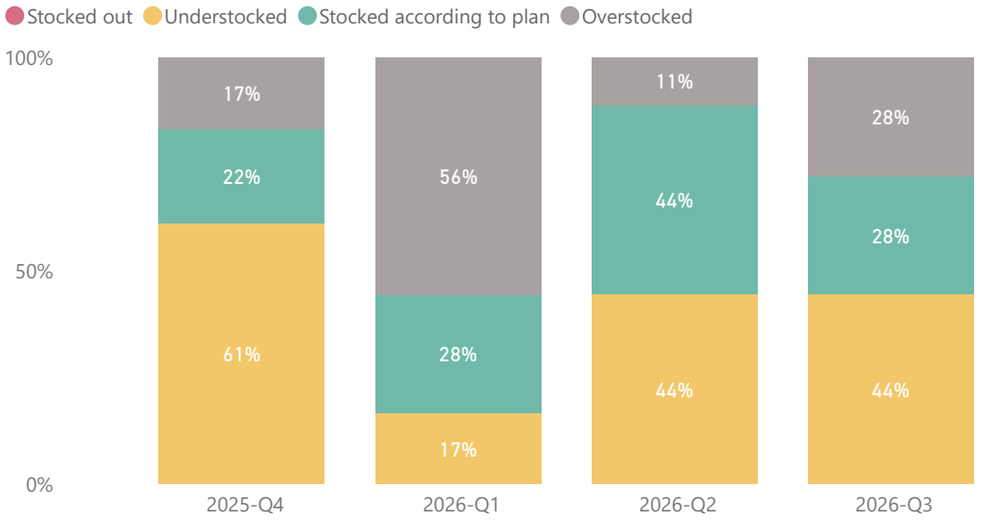
Ref	Analysis
B2	At the central level, the stocked according to plan rate for HIV/AIDS commodities decreased from 67 percent in Q2 FY2026 to 47 percent in Q3 FY2026, while the understocked percentage increased from 13 percent to 47 percent, largely driven by ARVs shifting from stocked according to plan to understocked status. Meanwhile, the overstocked percentage decreased from 20 percent to 7 percent. At the subnational level, the stocked according to plan rate decreased from 39 percent to 34 percent. The understocked percentage also declined from 37 percent to 29 percent, while the overstocked percentage increased from 20 percent to 31 percent, suggesting a shift from understocked to overstocked status for some commodities. The stocked-out percentage increased slightly from 4 percent to 6 percent.
C7	No losses to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

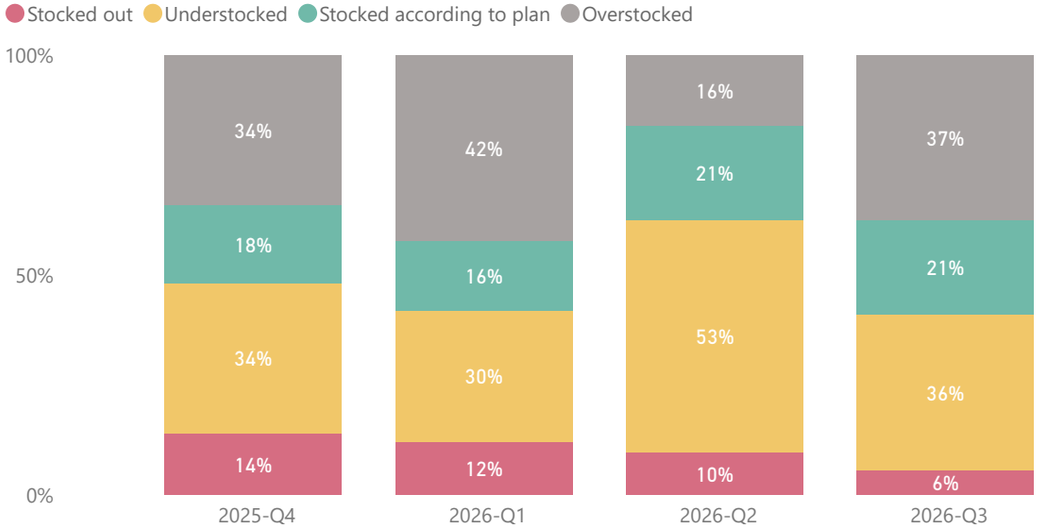
Country: Mozambique | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	FC April'26, May'26, Jun'26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	FC April'26, May'26, Jun'26

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	At the central level, the proportion of malaria commodities stocked according to plan decreased from 44 percent in Q2 FY2026 to 28 percent in Q3 FY2026. At the same time, the understocked percentage remained unchanged at 44 percent, while the overstocked percentage increased from 11 percent to 28 percent. No commodities were reported as stocked out at the central level during either quarter. At the subnational level, the proportion of commodities stocked according to plan remained stable at 21 percent between Q2 and Q3 FY2026. The understocked percentage decreased from 53 percent to 36 percent, while the overstocked percentage increased substantially from 16 percent to 37 percent, indicating a shift in inventory distribution across products. The stocked-out percentage decreased from 10 percent to 6 percent, suggesting improved product availability at subnational warehouses.
C7	No losses to report this quarter.

HIV Tracer Products and Supply Planning

Country: Mozambique

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30 Tablets, 90 Tablets, 180 Tablets]
2nd line adult ARV	Atazanavir/Ritonavir (300/100mg)
Pediatric ARV	Dolutegravir 10 mg Scored Dispersible Tablet
First RTK	Determine Kit 100 Tests
Second RTK	Uni-Gold Kit 20 tests
Tie-breaker RTK	Not reported
Viral load reagent	Abbot RealTime HIV-1 Aplification Reagent Kit Quant, 4 x 24 tests, and Roche products (CAP/CTM and Cobas 6800)
Viral load consumable	Not reported
EID reagent	KIT CAP-G/CTM HIV-QUAL 48T CE IVD
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

GHSC-PSM submitted all required supply plans this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
TPT	○	○	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Mozambique

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**8.5%**	**7,458**
HIV-EID reagent	0.0%	14
HIV-First RTK	10.2%	1,535
HIV-Most used 1st line ARV	1.4%	1,756
HIV-Most used 1st line pediatric ARV	0.9%	1,108
HIV-Most used 2nd line ARV	0.7%	1,519
HIV-Second RTK	29.0%	1,484
HIV-Viral load reagent	0.0%	42
Malaria	**13.6%**	**9,819**
Malaria-First line ACT (AL 6x1)	10.4%	1,573
Malaria-First line ACT (AL 6x2)	13.9%	1,551
Malaria-First line ACT (AL 6x3)	20.7%	1,489
Malaria-First line ACT (AL 6x4)	14.2%	1,589
Malaria-LLINs	29.6%	638
Malaria-Rapid diagnostic test for malaria	4.7%	1,543
Malaria-Sulphadoxine-pyrimethamine	11.2%	1,436
Overall	**11.4%**	**17,277**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	4.1%	1,647

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	91%	1886
Malaria	100%	1891

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**36%**	**18%**	**45%**	**0%**	**33**
HIV/AIDS	47%	7%	47%	0%	15
Malaria	28%	28%	44%	0%	18
Subnational level 1	**27%**	**34%**	**32%**	**6%**	**496**
HIV/AIDS	34%	31%	29%	6%	226
Malaria	21%	37%	36%	6%	270
Overall	**28%**	**33%**	**33%**	**5%**	**529**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

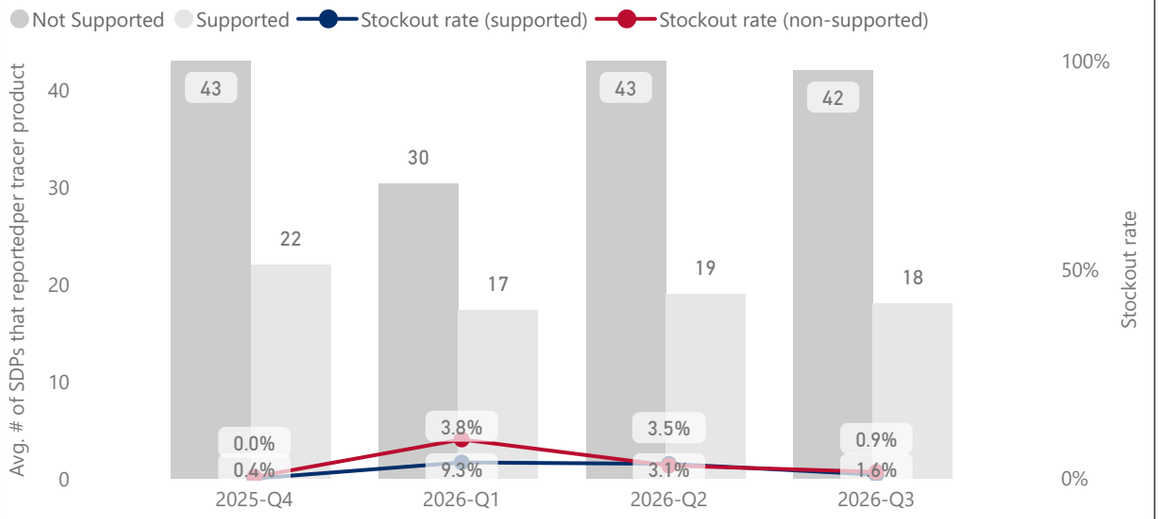
Country

Namibia

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Namibia | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



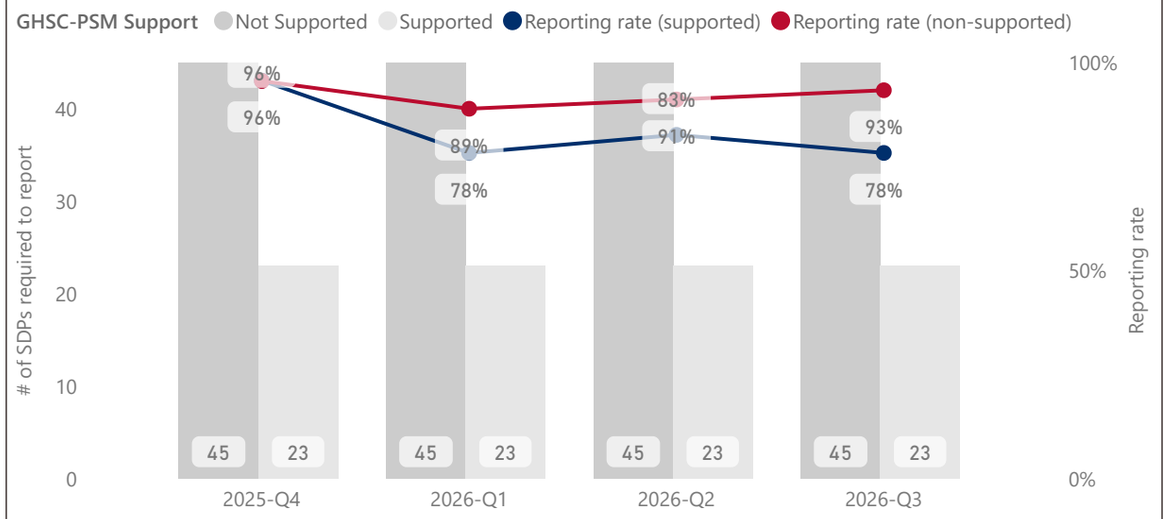
Data source

MoHSS Pharmaceutical Management Information System Dashboard

Analysis

Stockout rates decreased in both supported and non-supported facilities in FY 2026 Q3, continuing a trend from the previous quarter, FY 2026 Q2. Only one (1) stockout was reported among supported facilities and it was for 1st line adult ARV. One (1) non-supported facility reported a stockout of 2nd line adult ARVs, an improvement since FY 2026 Q2. Three non-supported facilities reported stockouts of the tie-breaker RTKs, the same number as the previous quarter. The RTK stockouts continue to reflect procurement challenges and this will be resolved in the FY 2026 Q4 according to the schedule of delivery of current procurements.

B3. LMIS reporting rate



B3. Data Source (denominator)

MoHSS Pharmaceutical Management Information System Dashboard

B3. Data Source (numerator)

MoHSS Pharmaceutical Management Information System Dashboard

Analysis

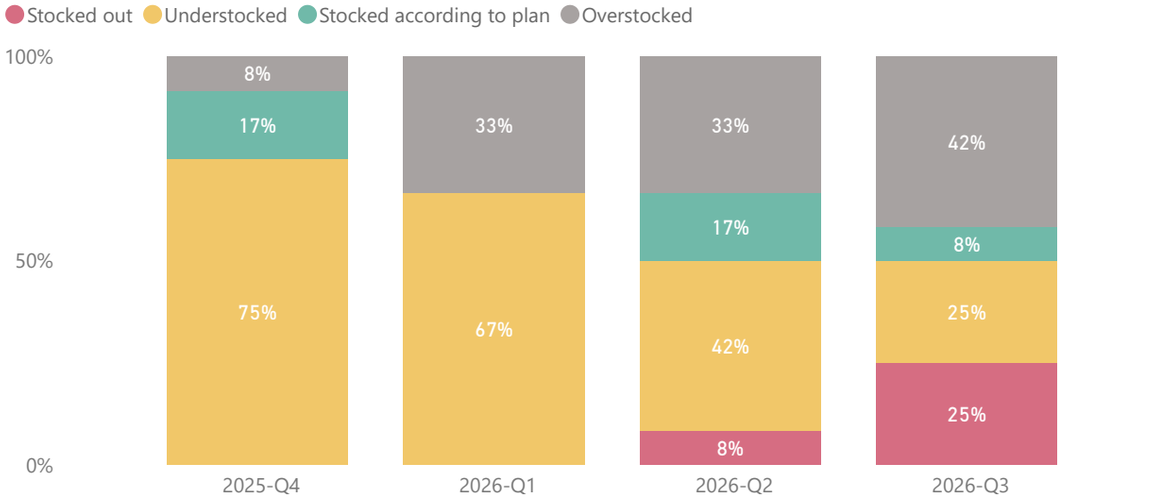
Reporting rates increased for non-supported facilities (91 percent) but decreased for facilities (78 percent). The challenge with reporting timeliness is attributed to loss of pharmacy human resources especially at small clinics with reduced donor support for staffing. GHSC-PSM will follow up with the 8 non-reporting facilities to identify barriers to LMIS submission and will continue to provide support to upload reports and technical support to facilities to ensure timely and accurate reporting.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

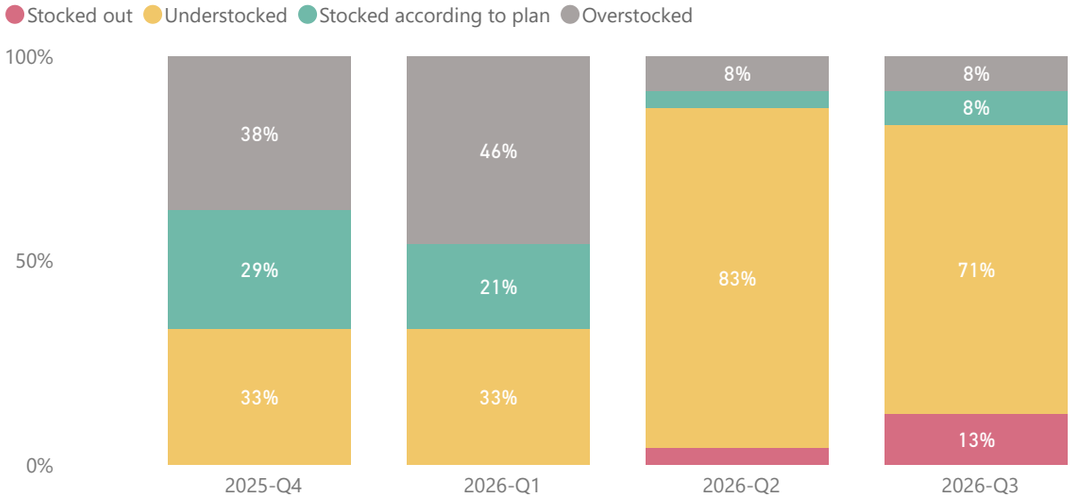
Country: Namibia | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	MoHSS Pharmaceutical Management Information System Dashboard

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	MoHSS Pharmaceutical Management Information System Dashboard

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	Compared to FY 2026 Q2, at the central level there has been a 17 percentage point increase in stockout observations and a 9 percentage point decrease in the stocked according to plan observations. Contributing to these shifts, there was increased tie-breaker RTK stock available and both 1st line adult ARVs and 2nd RTKs were overstocked in FY 2026 Q3. One of the largest shifts from the previous quarter was all observations of 2nd line adult ARV changing from being overstocked to stocked out, along with one 1st RTK stock status observation also being stocked out. Pediatric ARVs remain understocked. At the subnational level, most observations indicate that tracer products are understocked or stocked out. Half of the observations for tie-breaker RTK were stocked according to plan and half of the observations for 2nd line adult ARV were overstocked. These observations continue to reflect challenges encountered in procurement to re-stock ART testing kits as well as timely restocking for all affected products to adequate levels with significant levels of understocked items. GHSC-PSM will continue to compile the monthly commodity risk report with recommendations for restocking commodities at risk, with particular attention to the rise in stocked-out and understocked observations this quarter.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

HIV Tracer Products and Supply Planning

Country: Namibia

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30 Tablets, 90 Tablets, 180 Tablets]
2nd line adult ARV	Lamivudine/Zidovudine 150/300 mg Tablet
Pediatric ARV	Abacavir/Lamivudine 120/60 mg Scored Dispersible Tablet
First RTK	Colloidal Gold Device HIV 1 /2
Second RTK	Uni-Gold HIV 1 /2
Tie-breaker RTK	Sure Check HIV 1 /2
Viral load reagent	Not reported
Viral load consumable	Not reported
EID reagent	Not reported
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

GHSC-PSM does not report on this indicator in Namibia.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Namibia

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.9%**	**108**
HIV-"Tie-breaker" RTK	0.0%	18
HIV-First RTK	0.0%	18
HIV-Most used 1st line ARV	5.6%	18
HIV-Most used 1st line pediatric ARV	0.0%	18
HIV-Most used 2nd line ARV	0.0%	18
HIV-Second RTK	0.0%	18
Overall	**0.9%**	**108**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	78%	23

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**8%**	**42%**	**25%**	**25%**	**12**
HIV/AIDS	8%	42%	25%	25%	12
Subnational level 1	**8%**	**8%**	**71%**	**13%**	**24**
HIV/AIDS	8%	8%	71%	13%	24
Overall	**8%**	**19%**	**56%**	**17%**	**36**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

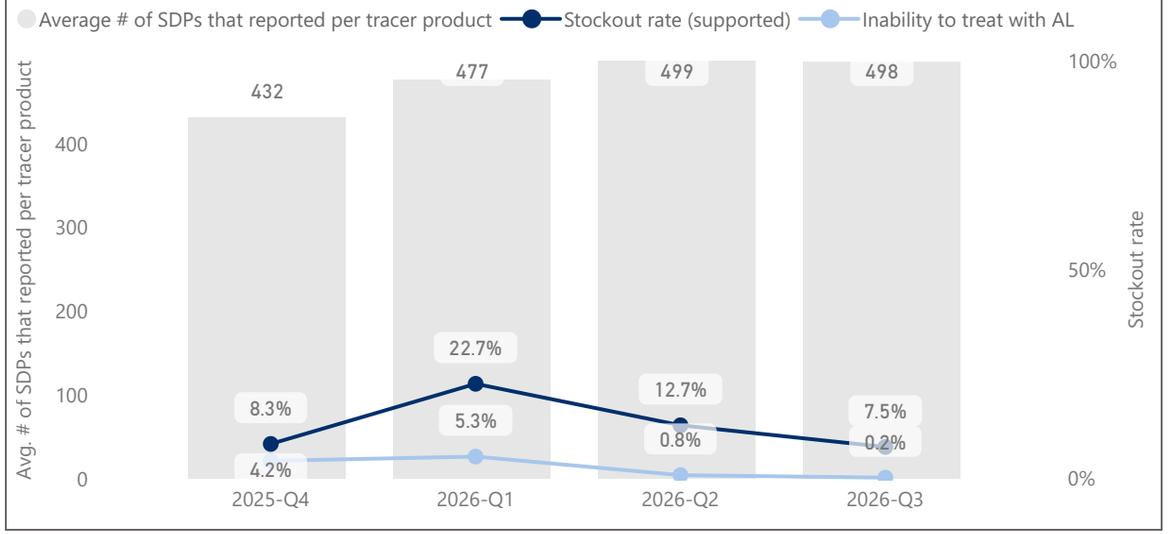
Country

Niger

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Niger | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



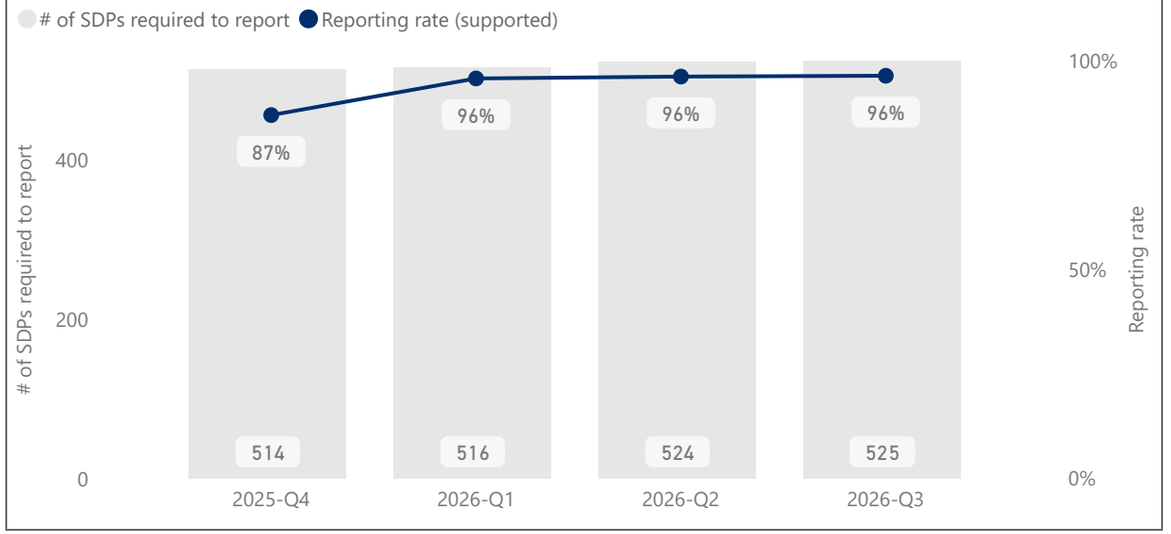
Data source

DHIS2 May 2026

Analysis

The April to June 2026 reporting period coincided with the end of the low malaria transmission season, when demand for malaria commodities is typically lower. This analysis is based on DHIS2 data for May 2026.
ACT availability improved during the quarter, with the AL inability to treat metric declining from 0.8 percent in FY26 Q2 to 0.2 percent in FY26 Q3. This improvement was driven by strengthened logistics oversight in the 12 GHSC-PSM-supported districts, including routine DHIS2 data reviews, commodity redistribution, facility order validation, additional NMCP allocations, and emergency orders ahead of the high transmission season.
In contrast, stockout rates for malaria rapid diagnostic tests (RDTs) and long-lasting insecticidal nets (LLINs) increased due to temporary supply shortages at the central level that reduced allocations to districts and service delivery points. Planned NMCP distributions and incoming shipments are expected to improve availability next quarter.

B3. LMIS reporting rate



B3. Data Source (denominator)

DHIS2 May 2026

B3. Data Source (numerator)

DHIS2 May 2026

Analysis

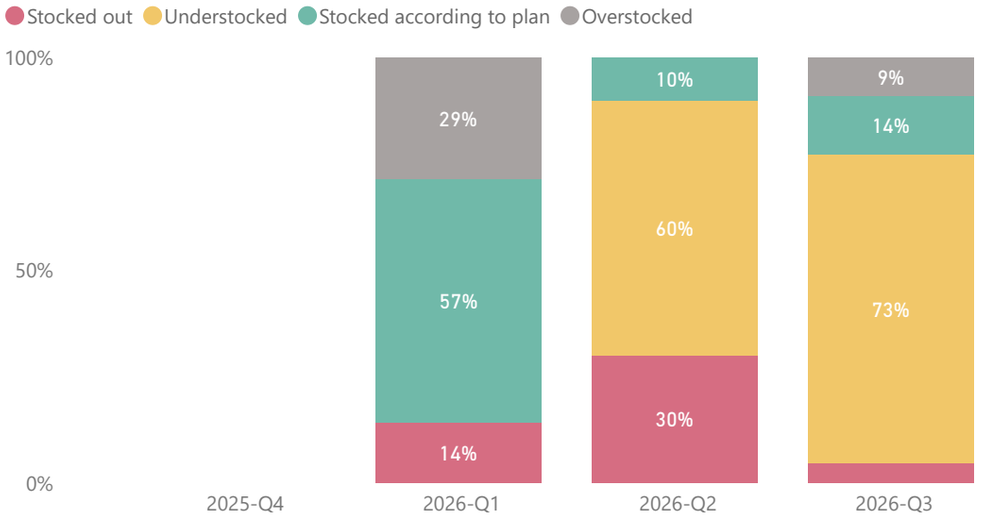
Out of 525 expected service delivery points, 506 submitted LMIS reports through DHIS2, yielding a reporting rate of 96 percent, unchanged from the previous quarter. The sustained 96 percent reporting rate reflects continued implementation of routine reporting follow-up by the 12 GHSC-PSM district logistics officers. Through regular engagement with health facilities, these officers support timely report submission and reporting completeness.The small number of missing reports was primarily due to security-related access constraints and connectivity challenges rather than weaknesses in the reporting system.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

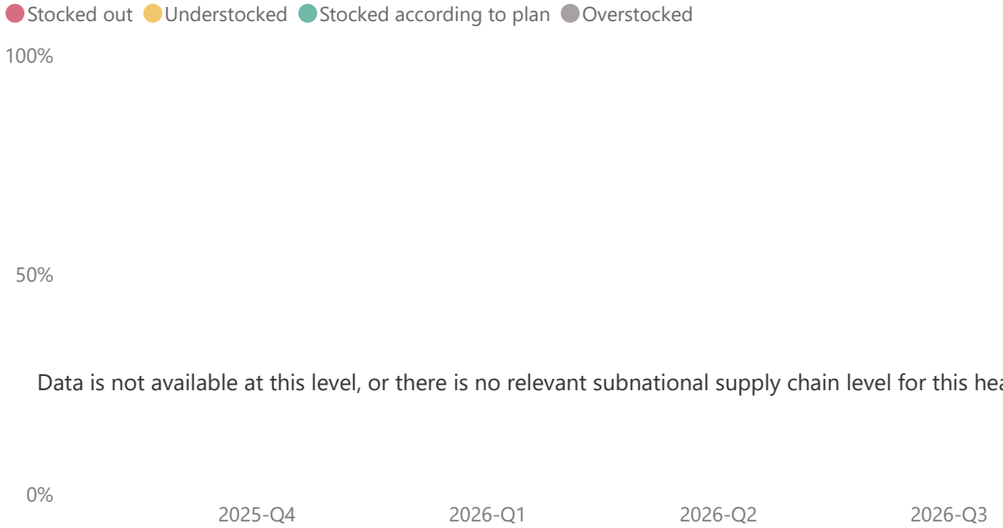
Country: Niger | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Central warehouse

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)

Data is not available at this level, or there is no relevant subnational supply chain level for this health area.

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis

Ref	
B2	The widespread understocking of malaria tracer commodities during most of the quarter was expected and reflected planned depletion of central warehouse stocks following major distributions to district warehouses. Stock availability improved in June 2026 after multiple commodity deliveries were received in preparation for the upcoming high malaria transmission season. By the end of the quarter, stock levels for AL 6x2 (11.7 months), AL 6x4 (11.5 months), and malaria rapid diagnostic tests (RDTs) (4.7 months) were within approved supply plan ranges. Temporary overstocking was observed for AL 6x1 (13.8 months) and AL 6x3 (12.7 months) following concurrent commodity deliveries ahead of the high transmission season. In contrast, sulfadoxine-pyrimethamine (SP) and long-lasting insecticidal nets (LLINs) remained critically understocked throughout the quarter.
C7	There were no malaria product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Niger

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

GHSC-PSM reviewed, updated, and submitted the malaria commodity supply plans in FY 2026 Q3 to the headquarters FASP team within the required timeline. The project will continue to support the NMCP in harmonizing quantifications and ensuring the timely submission of supply plans and quarterly commodity allocations for distribution.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
Malaria commodities	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Niger

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
Malaria	**7.5%**	**3,484**
Malaria-First line ACT (AL 6x1)	6.2%	501
Malaria-First line ACT (AL 6x2)	4.0%	505
Malaria-First line ACT (AL 6x3)	11.1%	504
Malaria-First line ACT (AL 6x4)	5.4%	504
Malaria-LLINs	19.6%	465
Malaria-Rapid diagnostic test for malaria	3.6%	504
Malaria-Sulphadoxine-pyrimethamine	4.0%	501
Overall	**7.5%**	**3,484**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.2%	499

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
Malaria	96%	525

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**14%**	**9%**	**73%**	**5%**	**22**
Malaria	14%	9%	73%	5%	22
Overall	**14%**	**9%**	**73%**	**5%**	**22**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

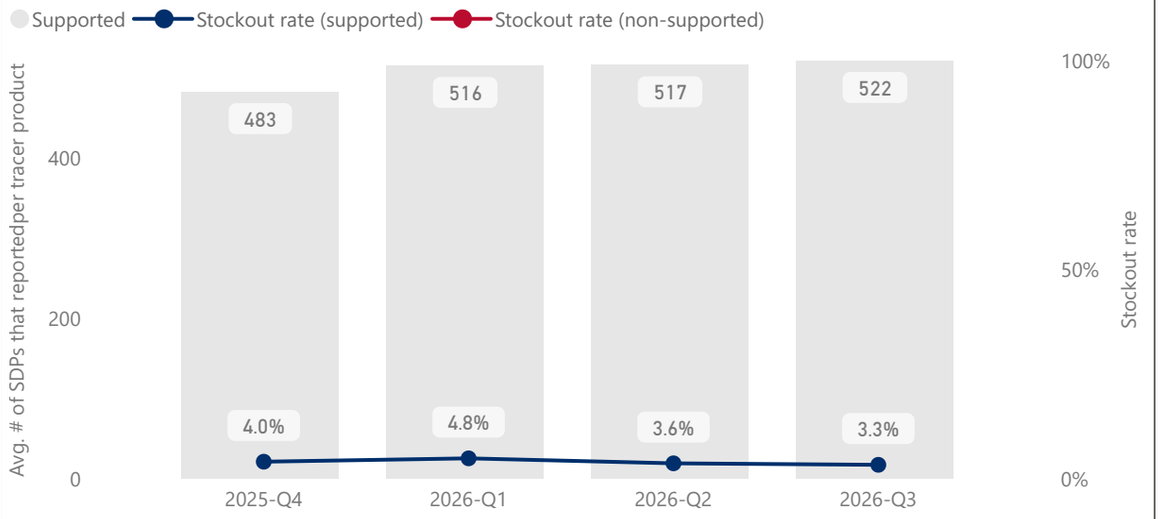
Country

Nigeria

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Nigeria | Current Quarter: 2026-Q3 | Tracer Product: All

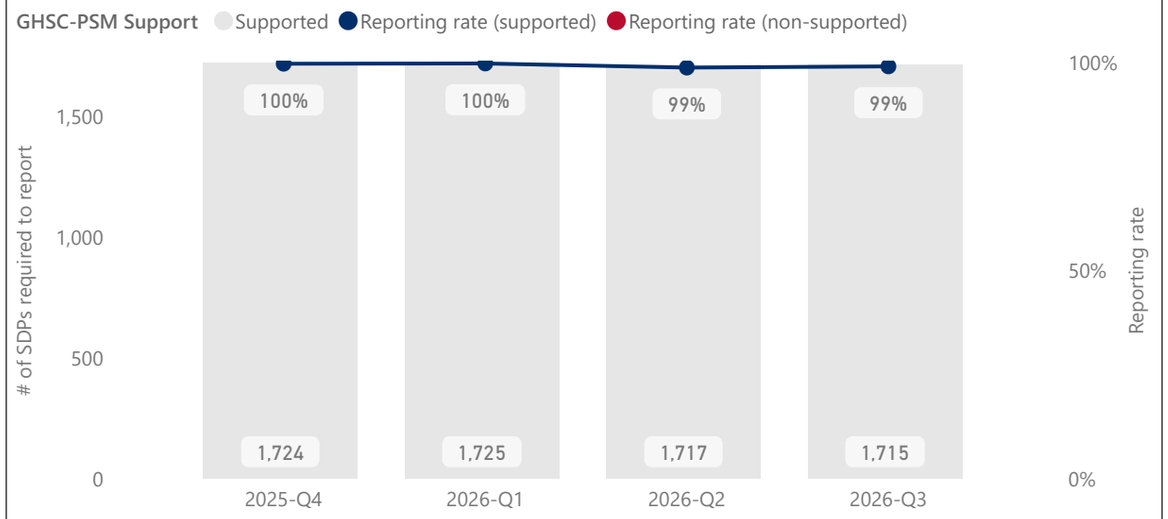
B1. Stockout rate at service delivery points



Data source

NHLMIS

B3. LMIS reporting rate



B3. Data Source (denominator)

NHLMIS

B3. Data Source (numerator)

NHLMIS

Analysis

Stockout rates for HIV/AIDS commodities declined modestly this quarter to 3.3 percent. This overall improvement was driven by reductions in stockout rates for the most commonly used first line adult and pediatric ARVs, as well as second line ARVs, which declined from a range of 2.9 percent to 2.0 percent. Overall, these trends indicate sustained stability in ARV supply chains and continued reliable access to treatment for clients. However, stockout rates for HIV rapid test kits (RTKs) remain above the acceptable threshold, at 9.3 percent for the First RTK and 14.6 percent for the Tiebreaker RTK. These ongoing availability challenges may be attributed to the fact that these commodities are supplied based on facility targets rather than actual consumption data.

Analysis

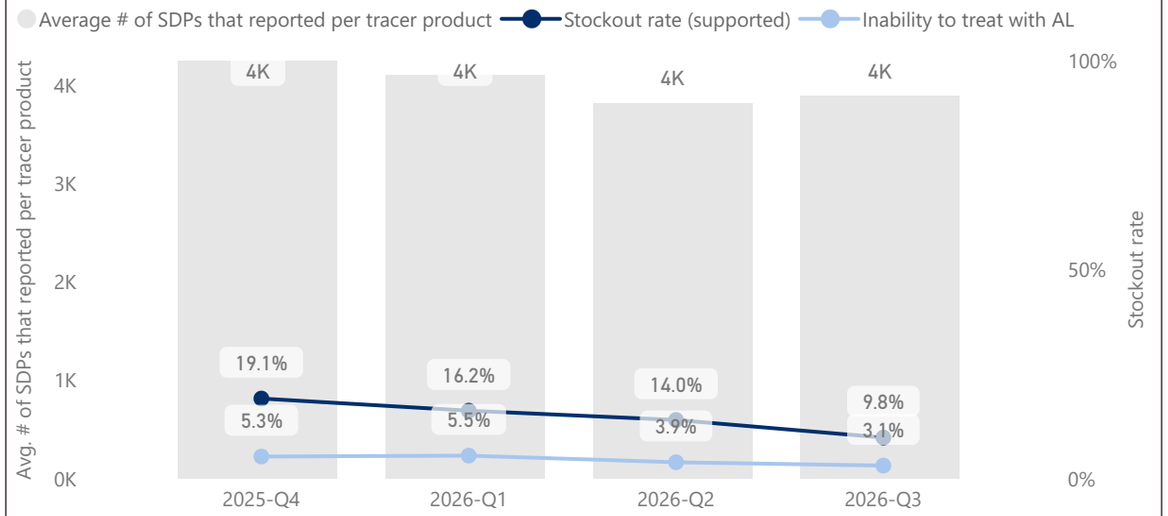
The project maintained high reporting compliance throughout the reporting period, with HIV/AIDS reporting rates of 99 percent this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Nigeria | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



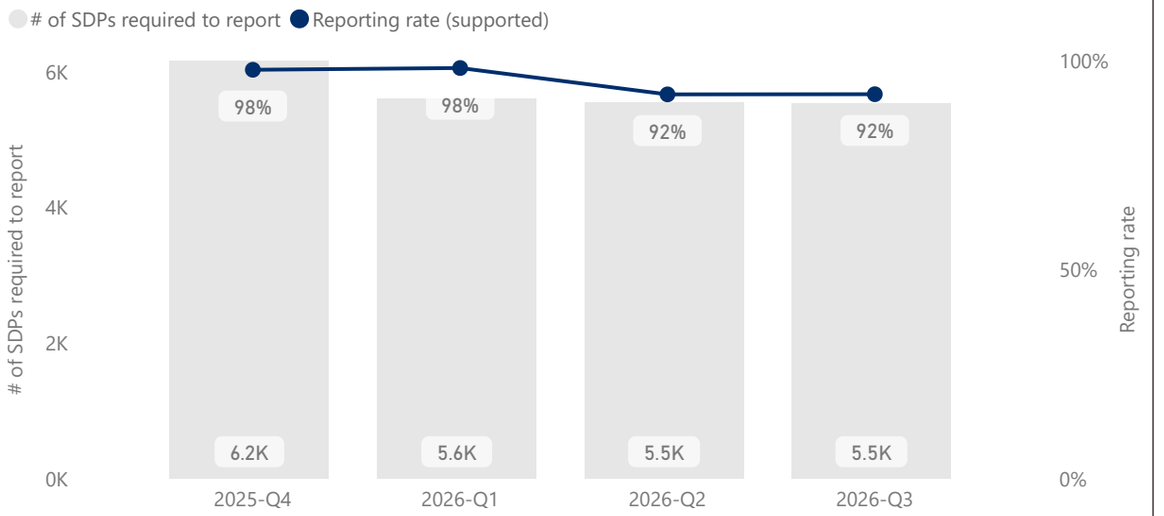
Data source

NHLMIS

Analysis

This quarter saw a decrease in the facility stockout rate for malaria commodities from 14.0 percent to 9.8 percent, while the rate of "inability to treat" declined to 3.1 percent. Six of the eight tracer commodities recorded reductions in stockout rates, with the most substantial improvement observed for the AL 6x4 formulation, whose stockout rate fell from 31.4 percent to 8.7 percent. In contrast, stockout rates increased for LLINs and SP, commodities that are not routinely supplied through the standard distribution system. The availability of LLINs at health facilities depends largely on residual stocks from mass distribution campaigns, while SP procurement and supply remain the responsibility of the Government of Nigeria. These supply arrangements likely contributed to the higher stockout rates observed for both commodities during the quarter.

B3. LMIS reporting rate



B3. Data Source (denominator)

NHLMIS

B3. Data Source (numerator)

NHLMIS

Analysis

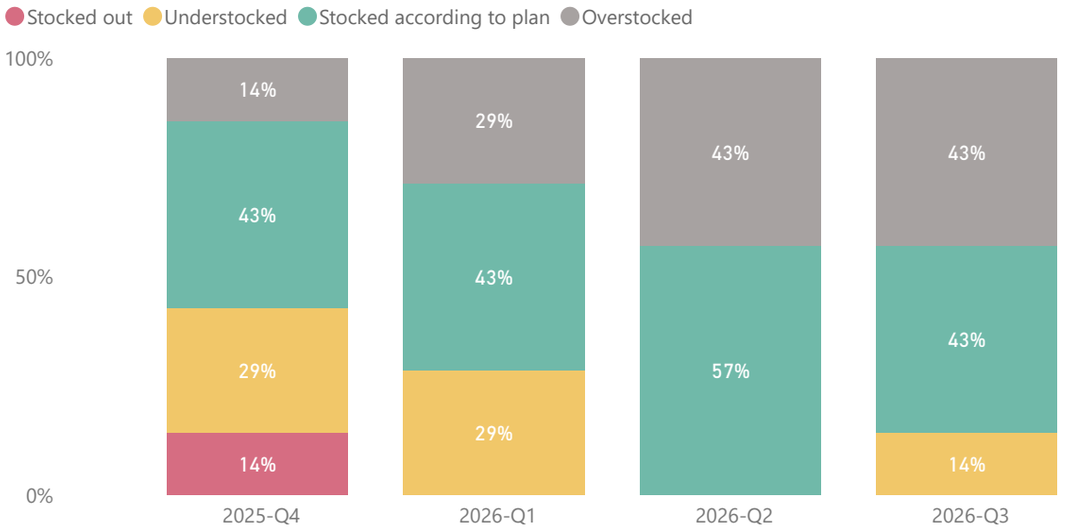
The project maintained high reporting compliance throughout the reporting period, with malaria reporting rates of 92 percent this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Nigeria | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Central Level stock and NHLMIS Data

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Central	Storage	Expiry	HIV/AIDS commodities	$14,354	$20,756,203	0.07%

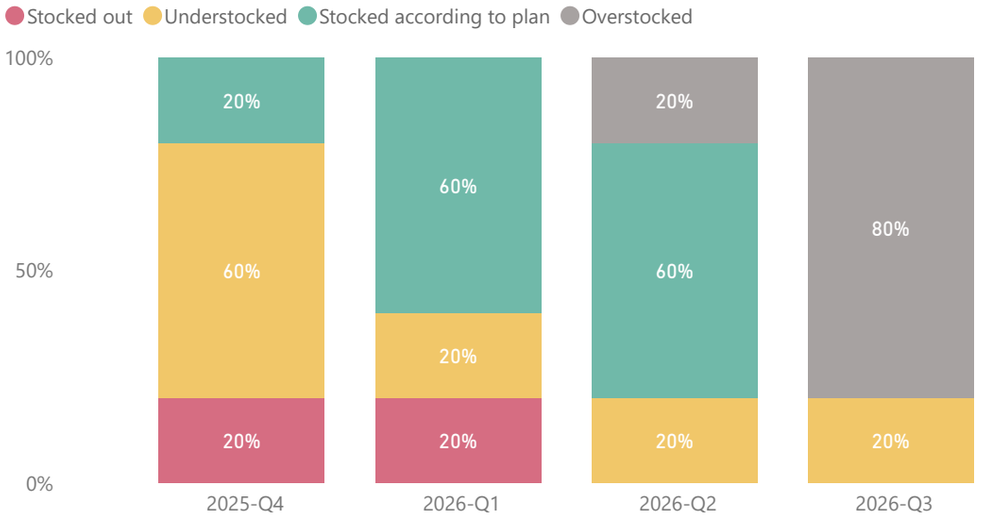
Ref	Analysis
B2	Stocks of HIV/AIDS commodities at the central warehouse stabilized slightly this quarter, with no warehouses reporting stockouts. However, the proportion of items stocked according to plan declined to 43 percent, while the proportion of overstocked items remained unchanged at 43 percent. The proportion of understocked items increased to 14 percent, primarily due to HIV first RTKs shifting from the stocked according to plan category to the understocked category.
C7	This quarter, a central warehouse in Abuja had $14,354 worth of expiries.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

Country: Nigeria | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Central Level stock and NHLMIS Data

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Central	Storage	Damage	Laboratory Reagents	$1,037	$7,896,569	0.01%

Ref	Analysis
B2	In Q2 FY2026, 60 percent of commodities were stocked according to plan, 20 percent were understocked, and 20 percent were overstocked, with no stockouts recorded. By Q3 FY2026, the proportion of commodities stocked according to plan had fallen to zero, while overstocked commodities increased substantially from 20 percent to 80 percent due primarily to AL 6x1, AL 6x2, and mRDTs moving from stocked according to plan to overstocked. The proportion of understocked commodities remained unchanged at 20 percent, and stockouts continued to be absent.
C7	This quarter reports $1,037 in damages for laboratory reagents. The observed damage was either due to defective secondary packaging or was present at the time of receipt and was dented or damaged. The project will sustain vigilance during commodity receipt at the warehouses.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Nigeria

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [90 tablets]
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg Tablet
Pediatric ARV	ABC/3TC/DTG (60/30/5 mg)
First RTK	Determine
Second RTK	Uni-Gold
Tie-breaker RTK	STAT-PAK
Viral load reagent	COBAS 5800/ 6800/8800 HIV -1 Quantitative Amplification Reagent (192 tests, 1 kit) Alinity m HIV-1 AMP Kit (CE) [08N45-090] (192 tests) HIV Viral Load Assay, APTIMA, 100-test, CE IVD (1 assay box)
Viral load consumable	Roche Cobas omni Processing Plate (1x32) Mega Lab Alinity m Sample Preparation Kit 2 (CE) [09N12-01], 1 pack Assay fluids x 3
EID reagent	GeneXpert HIV-1 Qual CE-IVD, 1x10 test [Cepheid]
EID consumable	N/A

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All six required commodity supply plans were updated and submitted to GHSC-PSM HQ this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
TPT	✓	✓	✓	✓
Essential Medicines	✓	✓		✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Nigeria

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**3.3%**	**4,700**
HIV-"Tie-breaker" RTK	14.6%	226
HIV-EID reagent	5.9%	119
HIV-First RTK	9.3%	258
HIV-Most used 1st line ARV	1.1%	1,711
HIV-Most used 1st line pediatric ARV	2.8%	1,365
HIV-Most used 2nd line ARV	2.7%	747
HIV-Second RTK	5.5%	256
HIV-Viral load consumable	0.0%	7
HIV-Viral load reagent	0.0%	11
Malaria	**9.8%**	**27,277**
Malaria-First line ACT (AL 6x1)	7.8%	4,589
Malaria-First line ACT (AL 6x2)	6.5%	4,678
Malaria-First line ACT (AL 6x3)	7.5%	4,597
Malaria-First line ACT (AL 6x4)	8.7%	4,477
Malaria-LLINs	30.4%	1,234
Malaria-Rapid diagnostic test for malaria	5.8%	4,858
Malaria-Sulphadoxine-pyrimethamine	21.7%	2,844
Overall	**8.8%**	**31,977**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	3.1%	4,787

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	99%	1715
Malaria	92%	5537

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**25%**	**58%**	**17%**		**12**
HIV/AIDS	43%	43%	14%		7
Malaria		80%	20%		5
Overall	**25%**	**58%**	**17%**		**12**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Essential Medicines	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

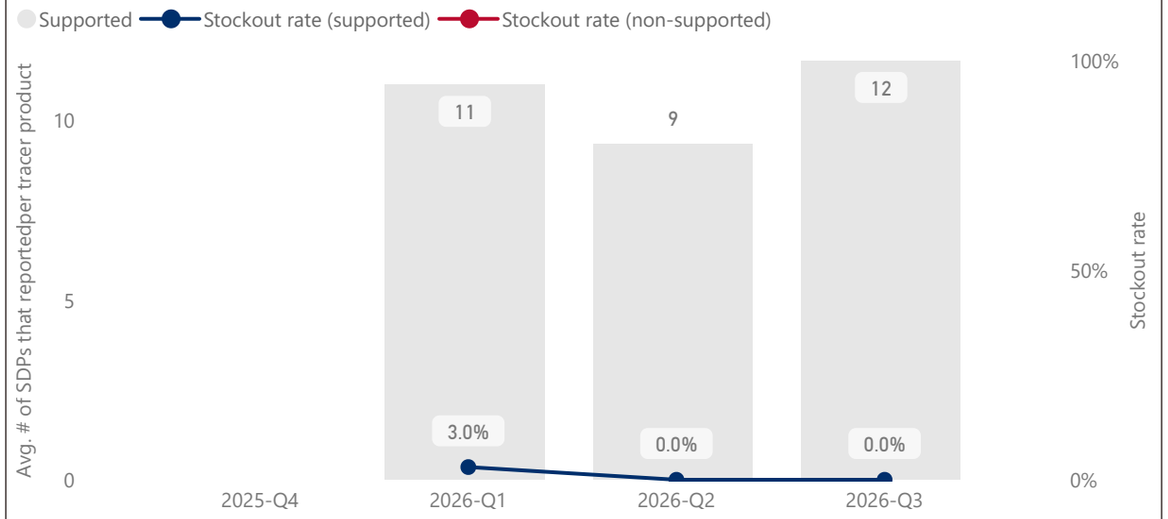
Country

Panama

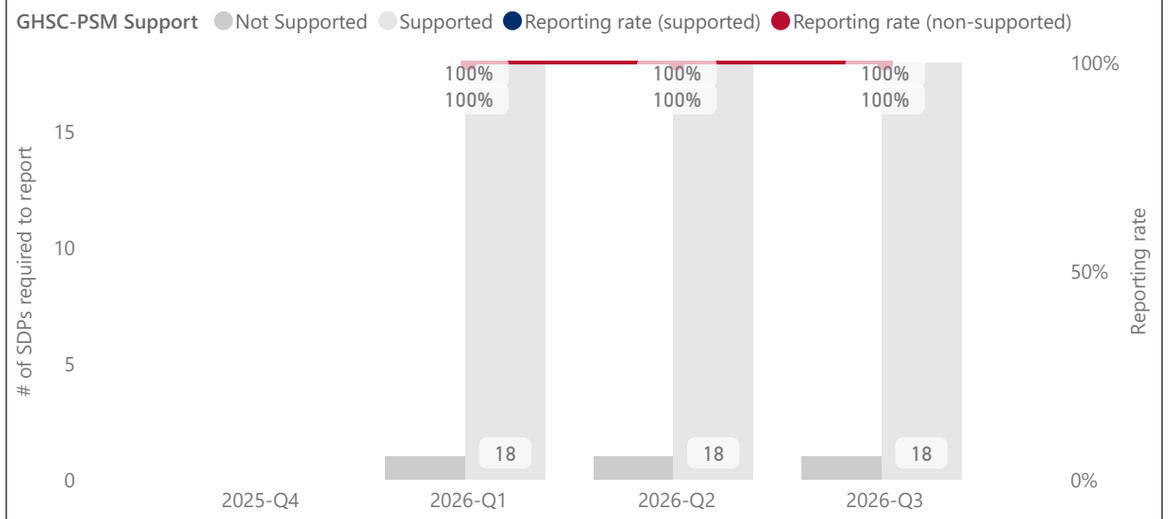
Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Panama | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source

IDL - (Logistics Data Integrator) Mayo

B3. Data Source (denominator)

SDP Lists

B3. Data Source (numerator)

SDP Lists

Analysis

The stockout rate for FY2026 Q3 was 0 percent across an average of 12 facilities reporting per product. Although there have been no reported cases of shortages of tracer products, in the case of antiretrovirals, there are other medications with critically low supply levels; GHSC-PSM has been monitoring coverage and issuing risk alerts, while advocating for the management of in-transit purchases. In the case of viral load testing, a donation of 10,000 tests was secured which arrived in June and will provide coverage for an additional four months.

Analysis

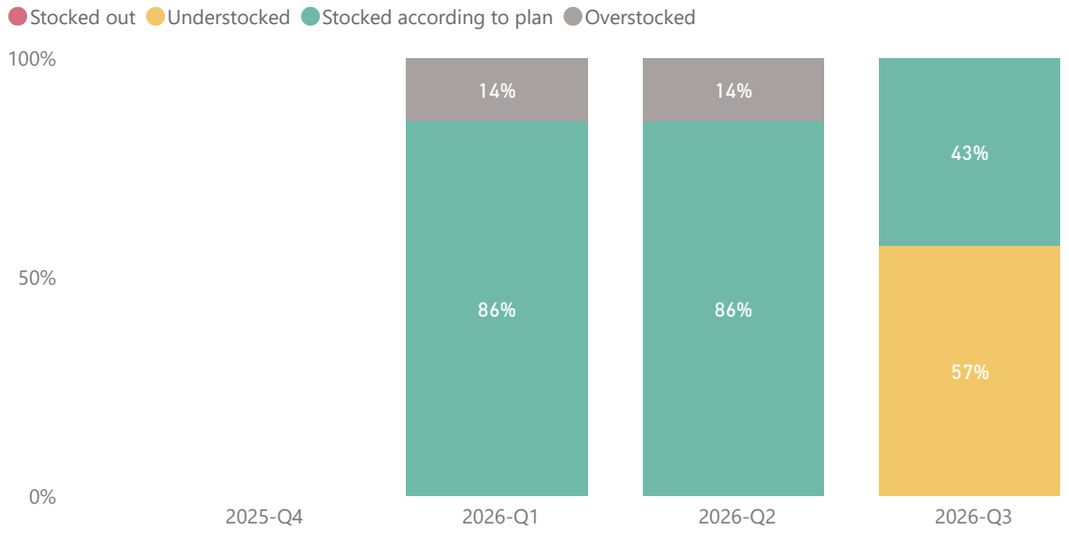
In total, there are 19 SDPs in Panama, 18 of which GHSC-PSM supports. Technical assistance was provided to ART clinics experiencing connectivity issues with the IDL platform (Logistics Data Integrator). As a result of these interventions, connectivity problems were successfully resolved in 18 out of 18 supported service delivery points. GHSC-PSM will continue providing targeted technical support and routine follow-up to ensure sustained reporting performance and timely submission of logistics data through the IDL system.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Panama | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	IDL - (Logistics Data Integrator) Mayo

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %
Central	Storage	Expiry	Adult ARVs	$3,772	$2,004,261	0.19%

Ref	Analysis
B2	The stocked according to plan rate in FY2026 Q3 decreased to 43 percent, with a shift toward understocking, which is at 57 percent. During the reporting period, four commodities were identified as having low stock levels. Despite these temporary stock constraints, procurement actions were promptly initiated, and replenishment orders are currently in process to restore optimal inventory levels. Inventory performance will continue to be closely monitored through regular reviews of consumption trends and stock levels to ensure uninterrupted service delivery, optimize inventory management, and minimize the risk of future stock shortages.
C7	There is one expired product of adult ARVs in this period for a loss of less than 1 percent. The central warehouse is MOH managed and products are not under GHSC-PSM control.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Panama

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir 50mg + lamivudina 300mg + tenofovir 300mg, (30, 90 tabs)
2nd line adult ARV	Darunavir 600 mg, comprimido recubierto
Pediatric ARV	Dolutegravir 10 mg, comprimido dispersable
First RTK	Hiv 1/2 - inmunocromatografia
Viral load reagent	Carga viral hiv GenXpert/M2000

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

Panama has no Priority 1 supply plans, so GHSC-PSM does not report on this indicator.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Panama

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.0%**	**35**
HIV-Most used 1st line ARV	0.0%	18
HIV-Most used 1st line pediatric ARV	0.0%	7
HIV-Most used 2nd line ARV	0.0%	10
Overall	**0.0%**	**35**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	18

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**43%**		**57%**		**7**
HIV/AIDS	43%		57%		7
Overall	**43%**		**57%**		**7**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

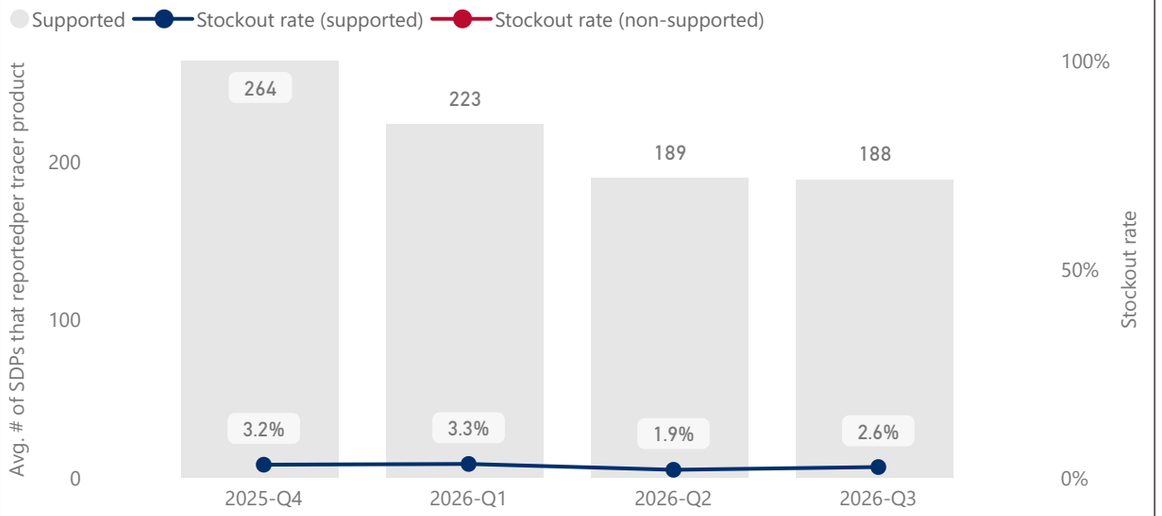
Country

Rwanda

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Rwanda | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



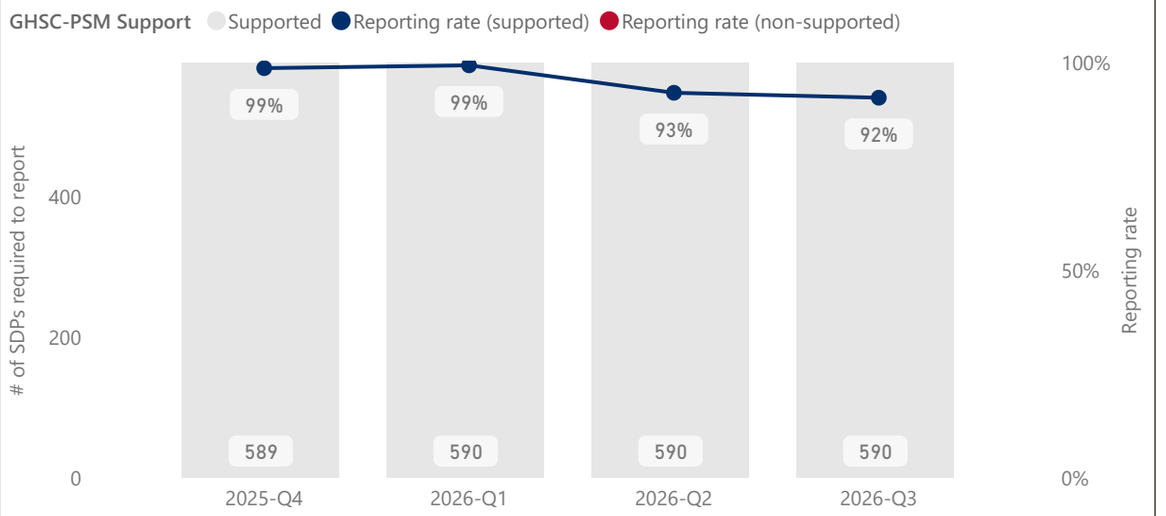
Data source

eLMIS

Analysis

The stockout rate for HIV/AIDS products increased slightly to 2.6 percent, up from 1.9 percent in the previous quarter. All tracer products had a stockout rate of less than 5 percent, with first RTK having the highest stockout rate at 4.2 percent. The new RMS central policy to push stock to regional warehouses to optimize storage space contributed to increased overstocks. GHSC-PSM continuously engages stakeholders to secure funding and exploring options to cover the gap for any unfunded shipments. Generally, most tracer products were stocked at most facilities.

B3. LMIS reporting rate



B3. Data Source (denominator)

eLMIS

B3. Data Source (numerator)

eLMIS

Analysis

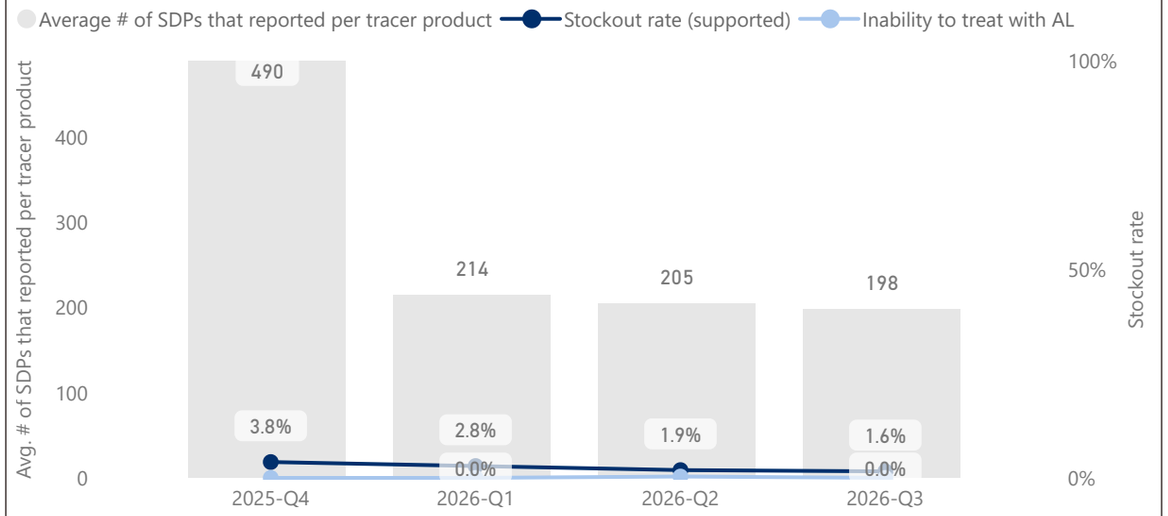
The average reporting rate for SDPs to e-LMIS has remained relatively consistent at 92 percent this quarter. As of last quarter, there has been a decrease in the number of facilities reporting this quarter, on average, primarily due to reporting challenges that have emerged due to SDPs transitioning from e-LMIS to e-Buzima.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Rwanda | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



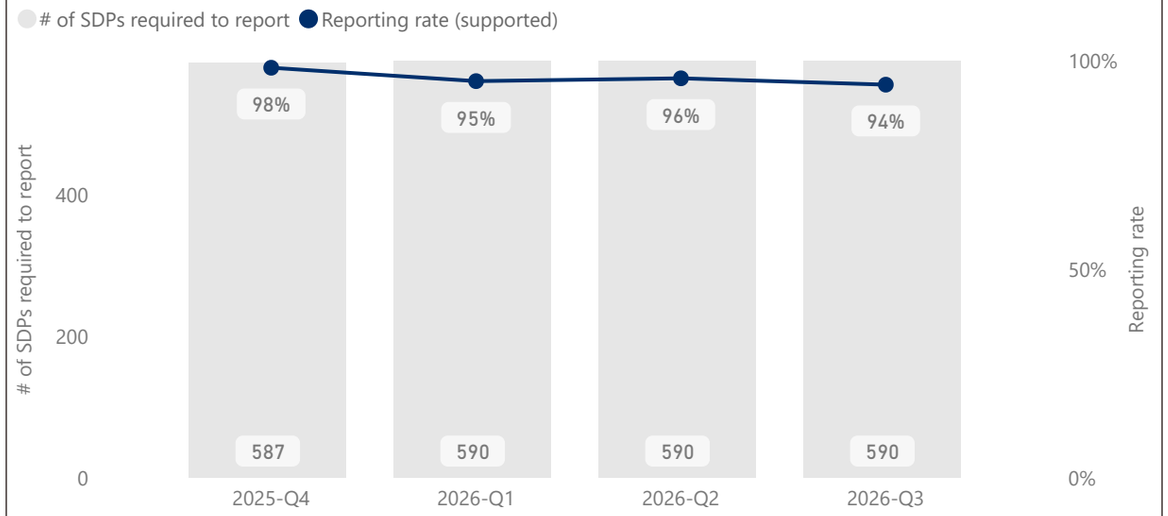
Data source

eLMIS

Analysis

The stockout rate for malaria products decreased slightly from 1.9 percent in the previous quarter to 1.6 percent in the current quarter. All first line ACT presentations had a stockout rate of less than 5 percent, with the AL inability to treat rate at 0 percent, meaning all facilities had at least one pack size. The new RMS central policy to push stock to regional warehouses to optimize storage space contributed to increased overstocks. GHSC-PSM continuously engages stakeholders to secure funding and exploring options to cover the gap for any unfunded shipments. Generally, most tracer products were stocked at most facilities.

B3. LMIS reporting rate



B3. Data Source (denominator)

eLMIS

B3. Data Source (numerator)

eLMIS

Analysis

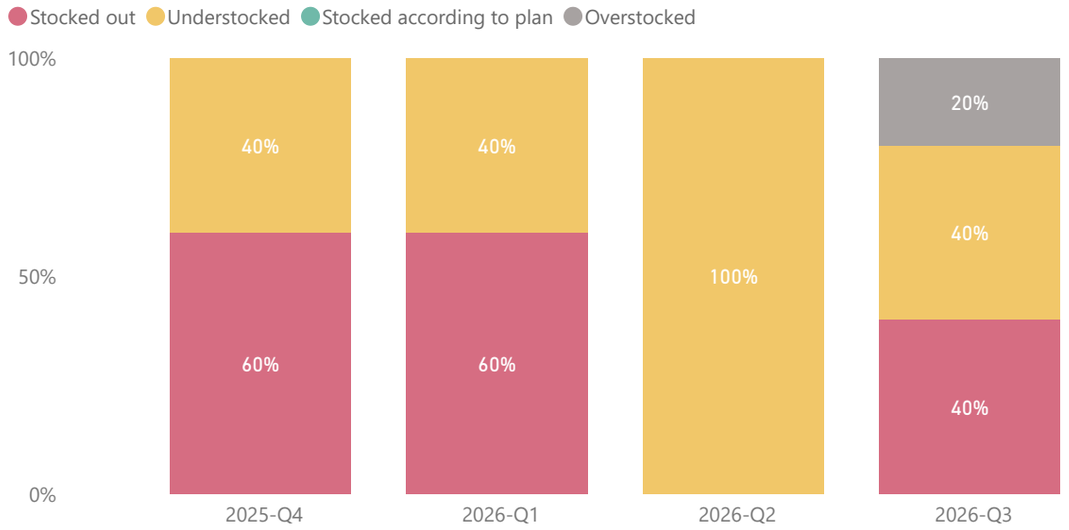
The average reporting rate for malaria products decreased slightly to 94 percent from 96 percent in the previous quarter. Reporting rates for malaria products have been stable over the preceding three quarters.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

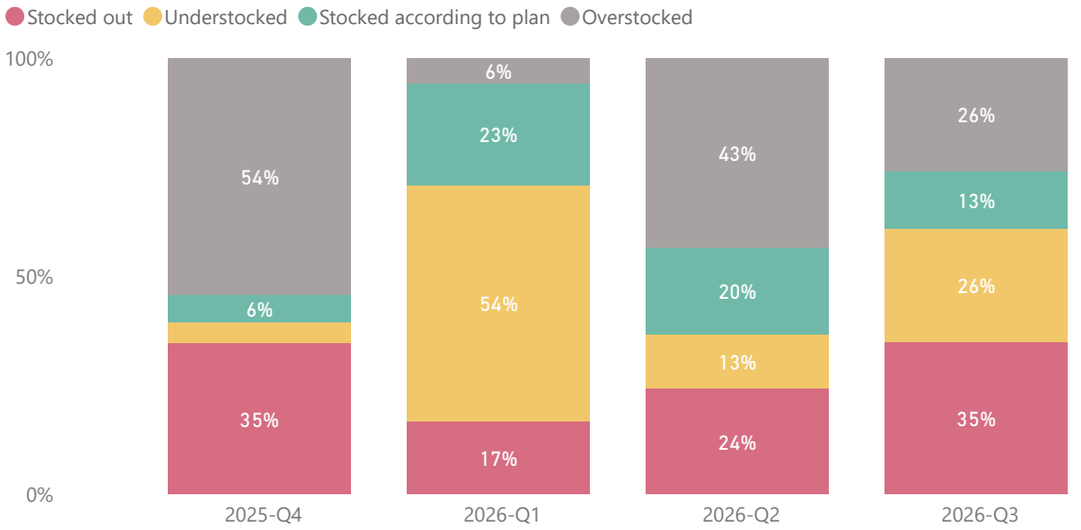
Country: Rwanda | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Monthly Stock Status

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	SAP/ERP

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

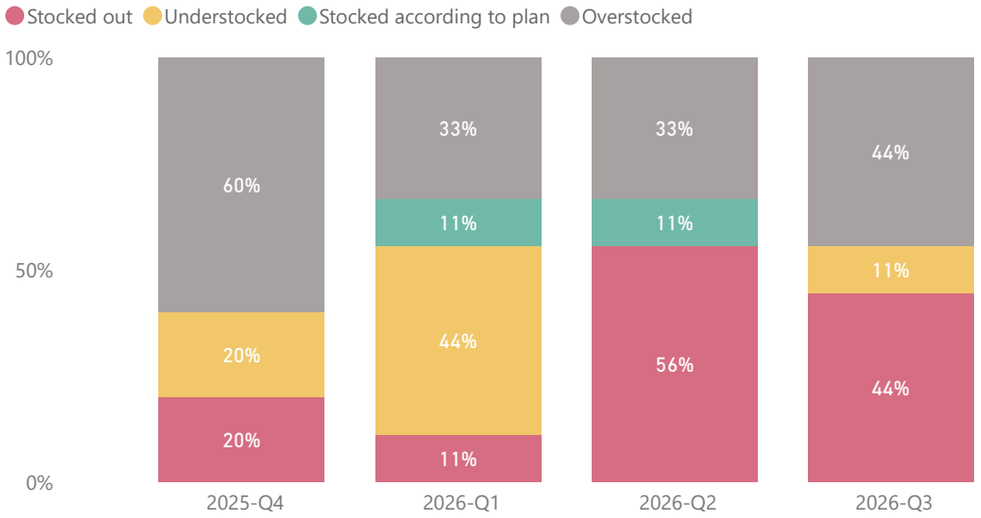
Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	The stock status at the central level for HIV/AIDS products shifted more towards stockouts this quarter, with a 40 percent stockout rate. 40 percent of tracer products were understocked, and 20 percent were overstocked. There were no observations of products being stocked according to plan at the central level. At the subnational level, stockouts also increased, to 35 percent, and understocks increased to 26 percent, while products stocked according to plan decreased to 13 percent and overstocks decreased to 26 percent. The primary challenge contributing to these stock levels is limited funding for commodity procurement. In addition, the RMS central warehouse is implementing a policy to push stock to regional warehouses to optimize storage space, which contributed to increased overstock observations in some of the subnational branches and understock and stockout observations at the central level. GHSC-PSM continuously engages stakeholders to secure funding mobilization and conducts continuous stock monitoring.
C7	There was no product loss to report this quarter.

Warehouse stock status and product losses
Malaria

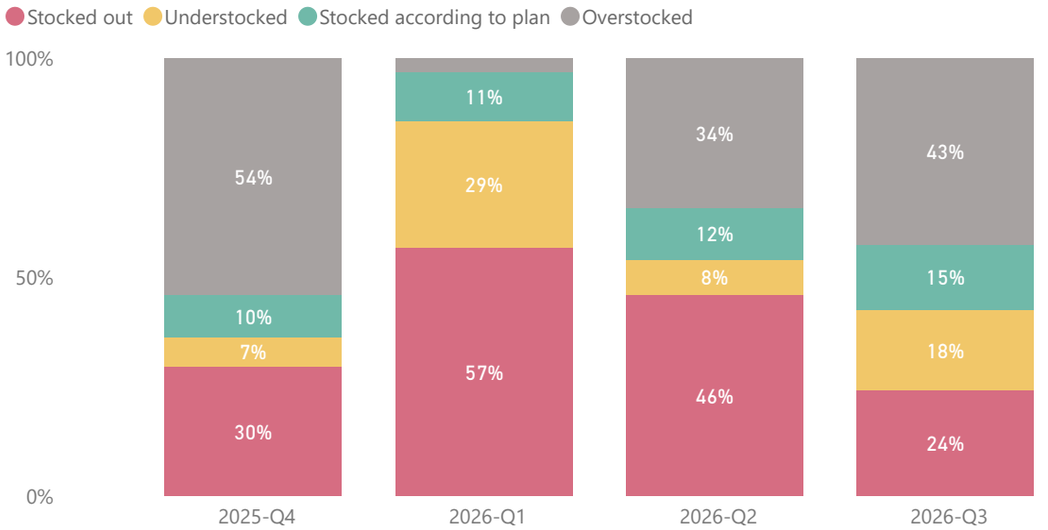
Country: Rwanda | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Monthly Stock Status

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	SAP/ERP

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	During FY26 Q3, the central level stocked according to plan rate for malaria commodities decreased to 0 percent, from 11 percent in Q2. However, the stockout rate also decreased to 44 percent, from 56 percent in Q2. Understocks and overstocks increased to 11 percent and 44 percent respectively. At the subnational level, stock statuses also shifted more toward overstocking, at 43 percent, with slight increases in the stocked according to plan rate and understock rate, to 15 percent and 18 percent respectively. The stockout rate at the subnational level decreased to 24 percent. AL 6x3 has the highest stockout rates of any product, being 100 percent stocked out centrally and 73 percent stocked out subnationally. However, other pack sizes have availability. The primary challenge contributing to these stock levels is limited funding for commodity procurement. In addition, the RMS central warehouse is implementing a policy to push stock to regional warehouses to optimize storage space, which contributed to increased overstock observations in some of the subnational branches and understock and stockout observations at the central level. GHSC-PSM continuously engages stakeholders to secure funding mobilization and conducts continuous stock monitoring.
C7	There was no product loss to report this quarter.

HIV Tracer Products and Supply Planning

Country: Rwanda

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir /Lamivudine/Tenofovir 300/300/50 mg Tablet
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg Tablet
Pediatric ARV	Abacavir/Lamivudine 120/60 mg + Dolutegravir 10 mg
First RTK	Determine
Second RTK	STAT-PAK
Tie-breaker RTK	Not reported
Viral load reagent	KIT COBAS 4800 HIV-120 TCE-IVD
Viral load consumable	TIP HIGH VOL, 1ml with filter, COBAS 4800
EID reagent	Xpert HIV- Qualitative
EID consumable	Cobas AmpliPrep/TaqMan Specimen Pre-Extraction (SPEX) reagent,5x78 mL

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All required supply plans were updated and submitted to GHSC-PSM this quarter.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
ARVs	✓	◯	✓	✓
TPT	✓	◯	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Rwanda

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**2.6%**	**1,695**
HIV-EID consumable	0.0%	48
HIV-EID reagent	0.0%	48
HIV-First RTK	4.2%	333
HIV-Most used 1st line ARV	1.7%	473
HIV-Most used 1st line pediatric ARV	3.5%	200
HIV-Most used 2nd line ARV	2.5%	355
HIV-Second RTK	2.9%	210
HIV-Viral load consumable	0.0%	14
HIV-Viral load reagent	0.0%	14
Malaria	**1.5%**	**2,021**
Malaria-First line ACT (AL 6x1)	0.0%	210
Malaria-First line ACT (AL 6x2)	0.0%	267
Malaria-First line ACT (AL 6x3)	3.8%	238
Malaria-First line ACT (AL 6x4)	1.3%	309
Malaria-First line ACT (ASPY 180/60mg, 9 tabs)	0.0%	197
Malaria-First line ACT (ASPY 60/20mg, 3 sachets)	0.6%	171
Malaria-First line ACT (DHA-PPQ 20mg/160mg 3 tabs)	4.7%	86
Malaria-First line ACT (DHA-PPQ 40mg/320mg 3 tabs)	1.1%	94
Malaria-Rapid diagnostic test for malaria	2.7%	449
Overall	**2.0%**	**3,716**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.0%	376

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	92%	590
Malaria	94%	590

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central		**36%**	**21%**	**43%**	**14**
HIV/AIDS		20%	40%	40%	5
Malaria		44%	11%	44%	9
Subnational level 1	**14%**	**34%**	**22%**	**30%**	**240**
HIV/AIDS	13%	26%	26%	35%	120
Malaria	15%	43%	18%	24%	120
Overall	**13%**	**34%**	**22%**	**30%**	**254**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

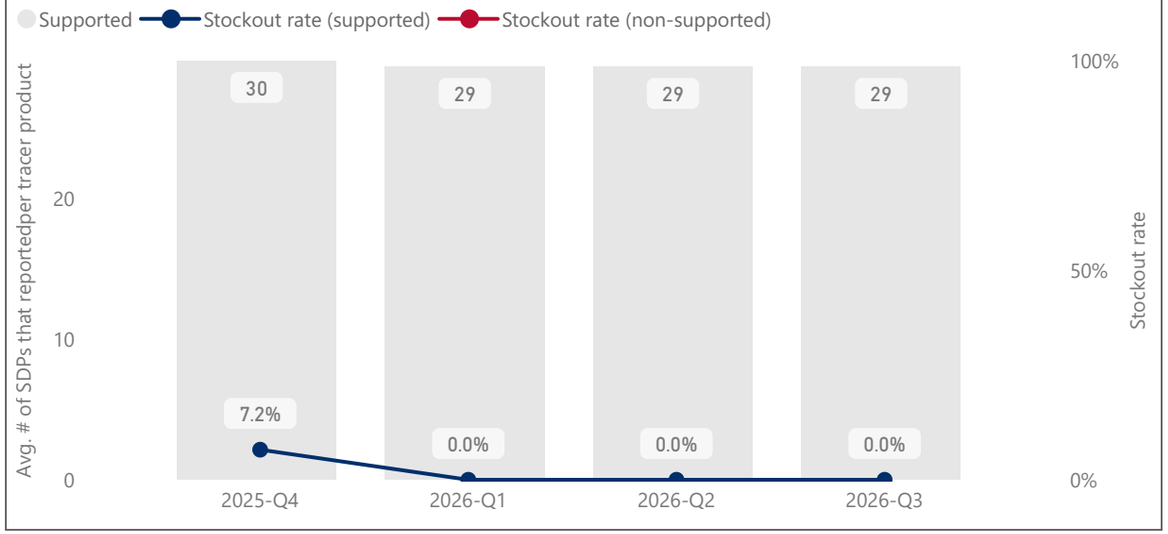
Country

Togo

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Togo | Current Quarter: 2026-Q3 | Tracer Product: All

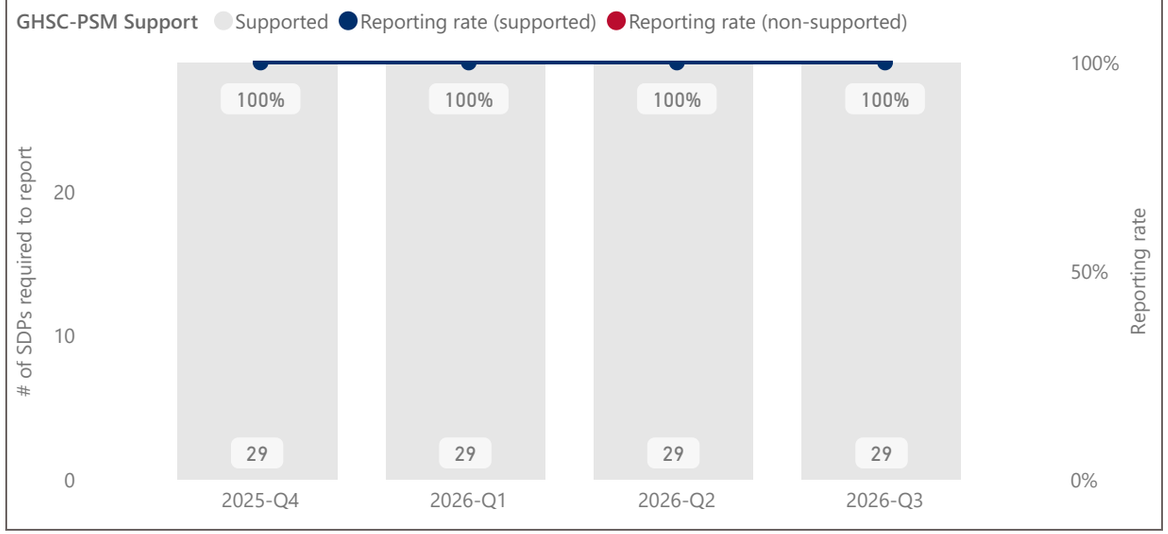
B1. Stockout rate at service delivery points



Data source

Stock monitoring Dashboard

B3. LMIS reporting rate



B3. Data Source (denominator)

Stock monitoring dashboard

B3. Data Source (numerator)

Stock monitoring dashboard

Analysis

In FY 2026 Q3, the stockout rate at the SDP level for HIV/AIDS tracer commodities remained at 0 percent, unchanged from FY 2026 Q2. As a result, patients continue to have access to lifesaving commodities when needed, ensuring uninterrupted healthcare services. The strong performance reflects well-planned and timely commodity distributions by the central medical store (CAMEG) and the private warehouse. The project continues to support PNLS-HV-IST in monitoring commodity availability at the SDP level and overseeing the monthly distribution of commodities by CAMEG and TEDIS.

Analysis

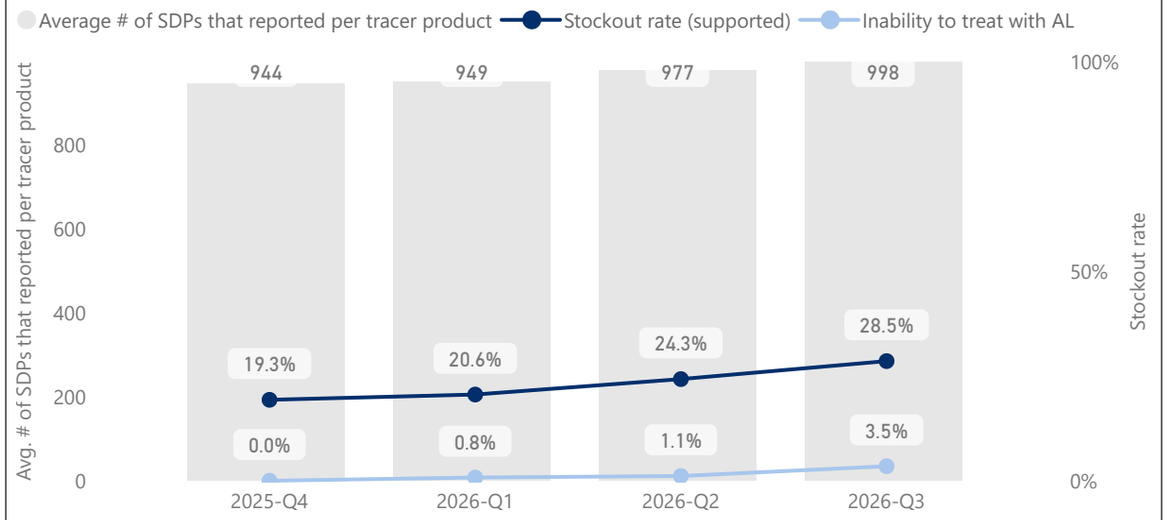
In FY 2026 Q3, the SDP reporting rate to the LMIS for HIV/AIDS program remained at 100 percent. This sustained performance reflects strong coordination among reporting entities, contributing to improved visibility of stock at the SDP level.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Togo | Current Quarter: 2026-Q3 | Tracer Product: All

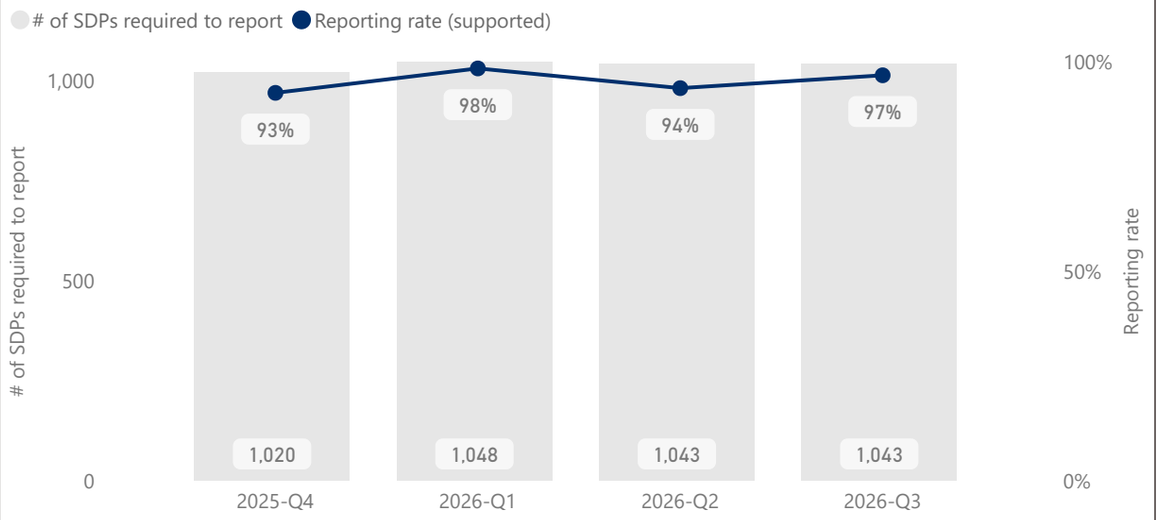
B1. Stockout rate at service delivery points



Data source

logistics data report

B3. LMIS reporting rate



B3. Data Source (denominator)

Logistics data report

B3. Data Source (numerator)

Logistics data report

Analysis

The overall stockout rate slightly increased from 24.3 percent in FY 2026 Q2 to 28.5 percent in FY 2026 Q3. The stockout rate increase is primarily driven by DHA/PPQ (6 tablet), DHA/PPQ (9 tablet), and SP; the stock statuses of DHA/PPQ remain particularly high at a combined stockout rate of 77 percent. Stockout rates also increased slightly for both AL 6x3, LLINs, and mRDTs. Stockout rates remained approximately the same for all other products compared to the previous quarter. These stockouts appear to have been primarily driven by commodity rationing practices. Unlike HIV/AIDS, the project does not support distribution planning or last mile delivery for the malaria program. Consequently, the project has limited influence over commodity allocation and replenishment decisions at the SDP level. The situation is expected to improve following the arrival of FY 2026 malaria commodity orders during Q4.

Analysis

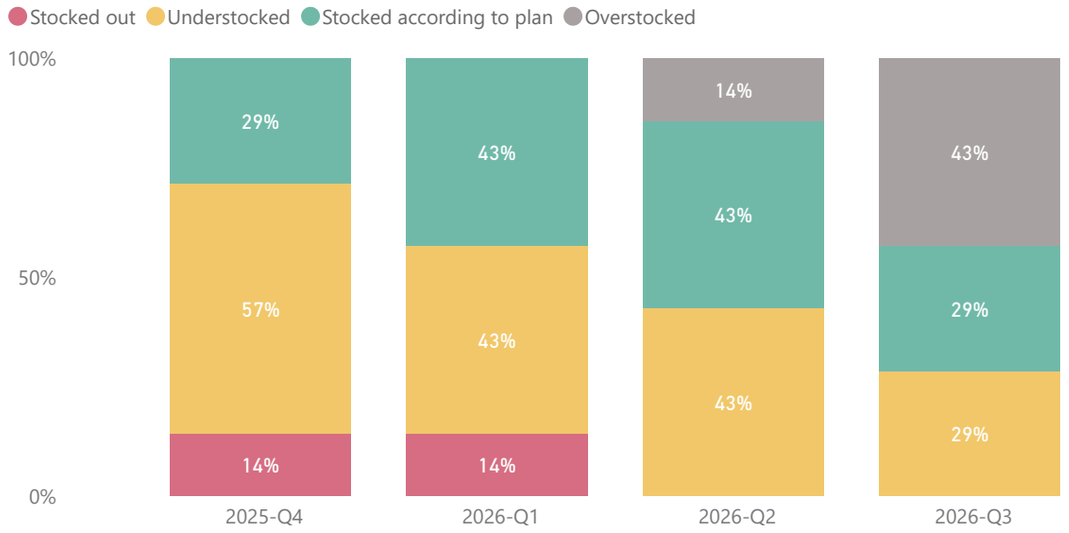
In FY 2026 Q3, the SDP reporting rate to the LMIS for the malaria program increased to 97 percent. This improvement was driven by enhanced monitoring and coordination efforts conducted jointly by the project and PNLP.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

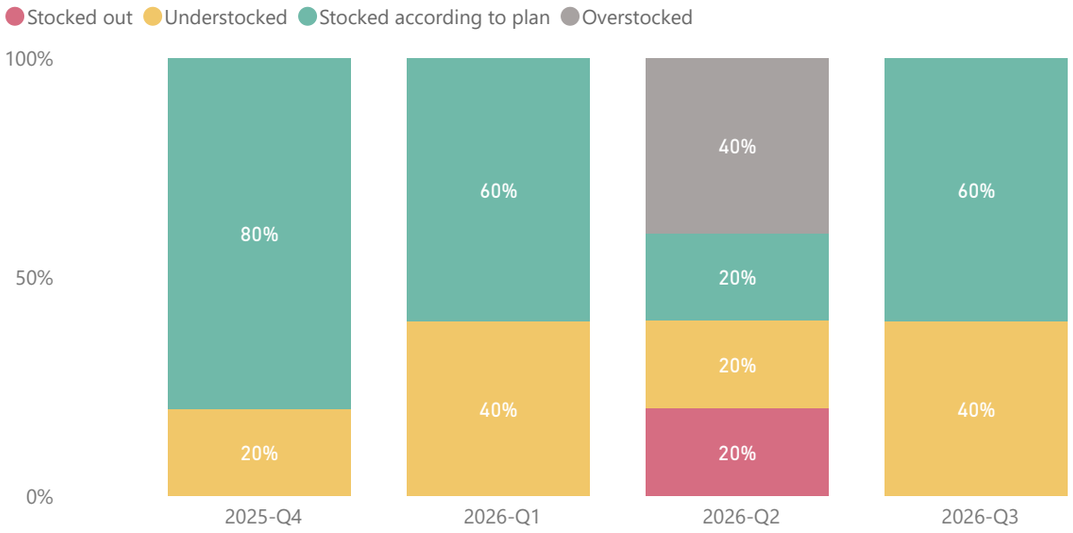
Country: Togo | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	logistics data report

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	logistics data report

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

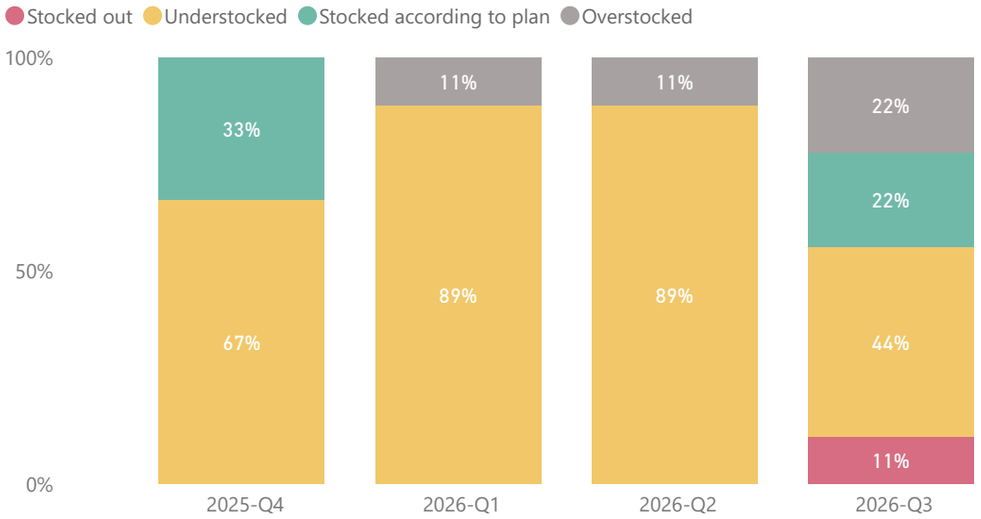
Ref	Analysis
B2	At the central level, stock status observations in FY 2026 Q3 indicate more available stock compared to the previous quarter. Viral load reagents remain stocked according to plan and the observation for 2nd RTKs improved from understocked to stocked according to plan. Pediatric ARVs, 2nd adult ARV, and EID reagent observations were all overstocked. First RTK and 1st adult ARV remain understocked. At the subnational level, observations for 1st RTK and 1st adult ARV shifted to understocked. Observations for all other tracer products were stocked according to plan. Through continued support to PNLS-HV-IST in supply planning and commodity distribution, the project is working to improve the availability of HIV commodities at regional levels.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

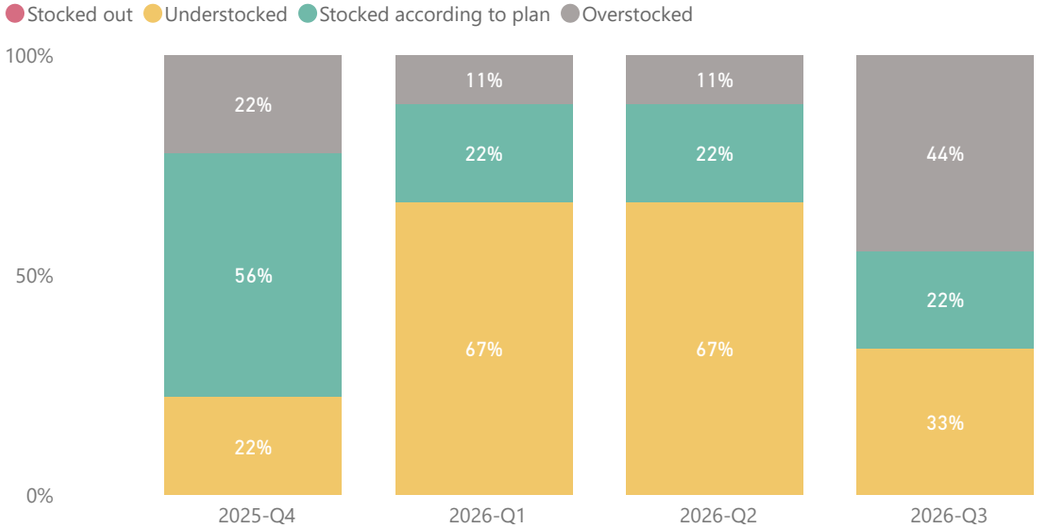
Country: Togo | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	logistics data report

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Subnational level 1	logistics data report

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	At the central level, the stock availability increased with observations for AL 6x3 and 6x4 shifting to overstocked and AL 6x1 and LLINs shifting to stocked according to plan. The stock status observation of DHA-PPQ 40/320 mg (6 tablets) was stocked out. All other products remain understocked. The overall stock status is expected to improve further following the delivery of the remaining malaria commodity shipments scheduled for FY 2026 Q3 and delayed for FY 2026 Q4. At the subnational level, stock status observations only changed for AL 6x1, 6x2, and 6x3 from understocked to overstocked.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Togo

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [180 Tablets]
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg
Pediatric ARV	Dolutegravir 10 mg
First RTK	Determine HIV 1/2
Second RTK	First Response
Viral load reagent	COBAS 6800/8800 HIV-1 Quantitative Amplification Reagent, 96 Tests, 1 Kit
EID reagent	GeneXpert Qual

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All four (4) required supply plans were submitted to GHSC-PSM HQ.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Togo

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.0%**	**206**
HIV-EID reagent	0.0%	51
HIV-First RTK	0.0%	29
HIV-Most used 1st line ARV	0.0%	29
HIV-Most used 1st line pediatric ARV	0.0%	29
HIV-Most used 2nd line ARV	0.0%	29
HIV-Second RTK	0.0%	29
HIV-Viral load reagent	0.0%	10
Malaria	**28.5%**	**8,981**
Malaria-First line ACT (AL 6x1)	7.9%	1,003
Malaria-First line ACT (AL 6x2)	8.3%	1,003
Malaria-First line ACT (AL 6x3)	19.6%	1,006
Malaria-First line ACT (AL 6x4)	12.5%	1,009
Malaria-First line ACT (DHA-PPQ 40mg/320mg 6 tabs)	72.9%	988
Malaria-First line ACT (DHA-PPQ 40mg/320mg 9 tabs)	81.6%	988
Malaria-LLINs	19.8%	988
Malaria-Rapid diagnostic test for malaria	9.8%	1,009
Malaria-Sulphadoxine-pyrimethamine	26.1%	987
Overall	**27.9%**	**9,187**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	3.5%	1,009

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	29
Malaria	97%	1043

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**25%**	**31%**	**38%**	**6%**	**16**
HIV/AIDS	29%	43%	29%		7
Malaria	22%	22%	44%	11%	9
Subnational level 1	**36%**	**29%**	**36%**		**14**
HIV/AIDS	60%		40%		5
Malaria	22%	44%	33%		9
Overall	**30%**	**30%**	**37%**	**3%**	**30**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

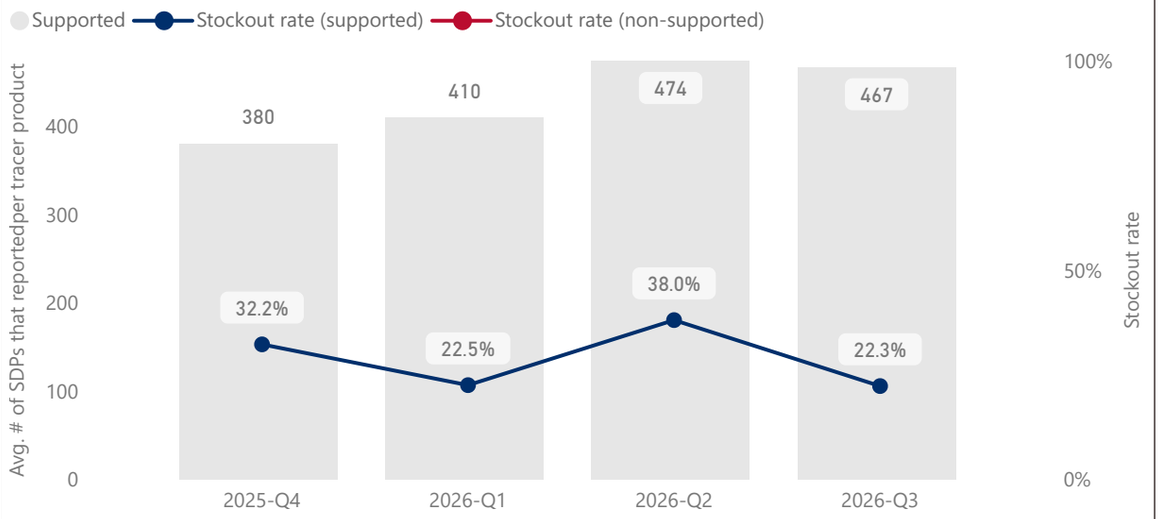
Country

Uganda

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Uganda | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



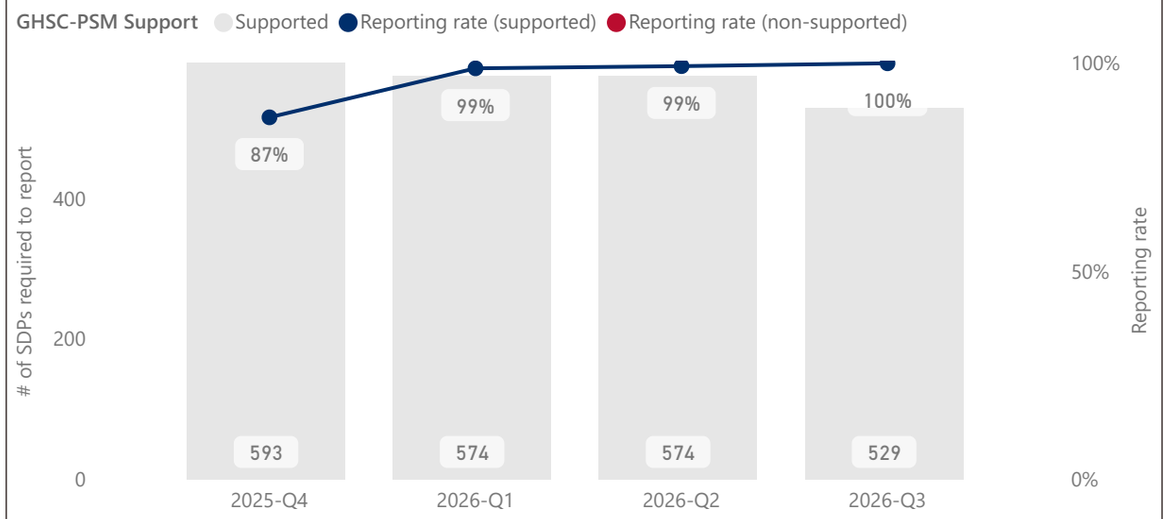
Data source

JMS Electronic Logistic Management Information System, Cycle-3

Analysis

In FY26 Q3, the overall stockout rate for HIV/AIDS commodities decreased to 22 percent, from 38 percent in FY26 Q2. The increase can be primarily attributed to first-line RTKs, second-line RTKs, and tie-breaker RTKs, which improved in availability after the latest distribution round. Slight increases in the stockout rate were reported for first-line adult ARVs and second-line adult ARVs. RTK availability continues to do be an issue but recent procurement funding releases and RTK procurements have improved availability. GHSC-PSM will continue to support through sub-national level reviews of health facility orders to identify facilities which are overstocked along with those which are stocked out. This data shall be shared with the regional implementing partners to guide redistribution of the commodities.

B3. LMIS reporting rate



B3. Data Source (denominator)

JMS Electronic Logistic Management Information System, Cycle-3

B3. Data Source (numerator)

JMS Electronic Logistic Management Information System, Cycle-3

Analysis

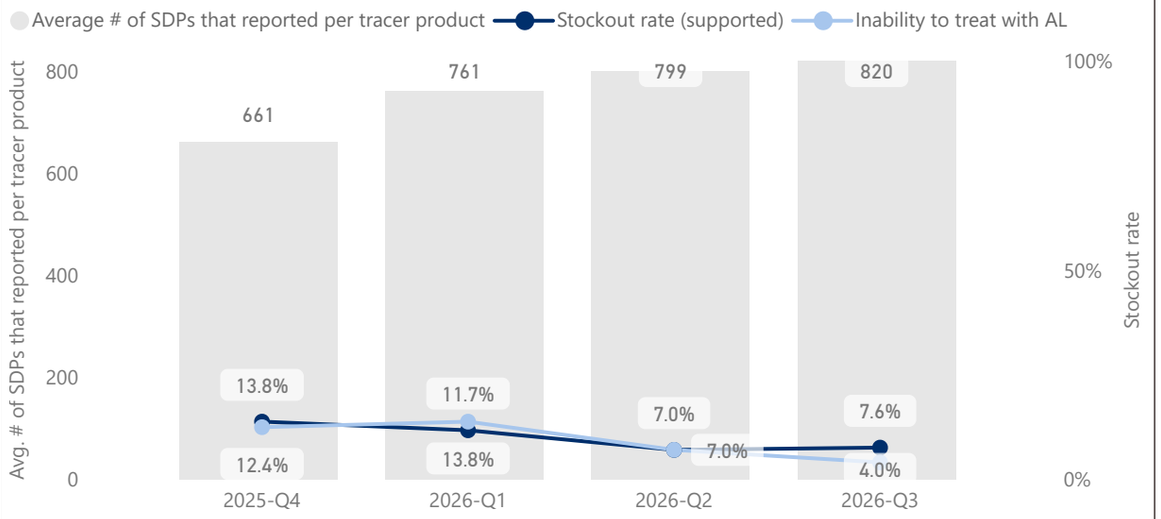
In FY26 Q3, the LMIS reporting rate for HIV/AIDS commodities improved to 100 percent, from 99 percent the previous quarter. This sustained high performance is attributable to coordinated follow-up and order tracking efforts, including GHSC-PSM's focused support in tracking facility orders and providing timely feedback, as well as active engagement by JMS Customer Care teams and regional technical representatives, who followed up with non-reporting facilities to improve submission compliance.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Uganda | Current Quarter: 2026-Q3 | Tracer Product: All

B1. Stockout rate at service delivery points



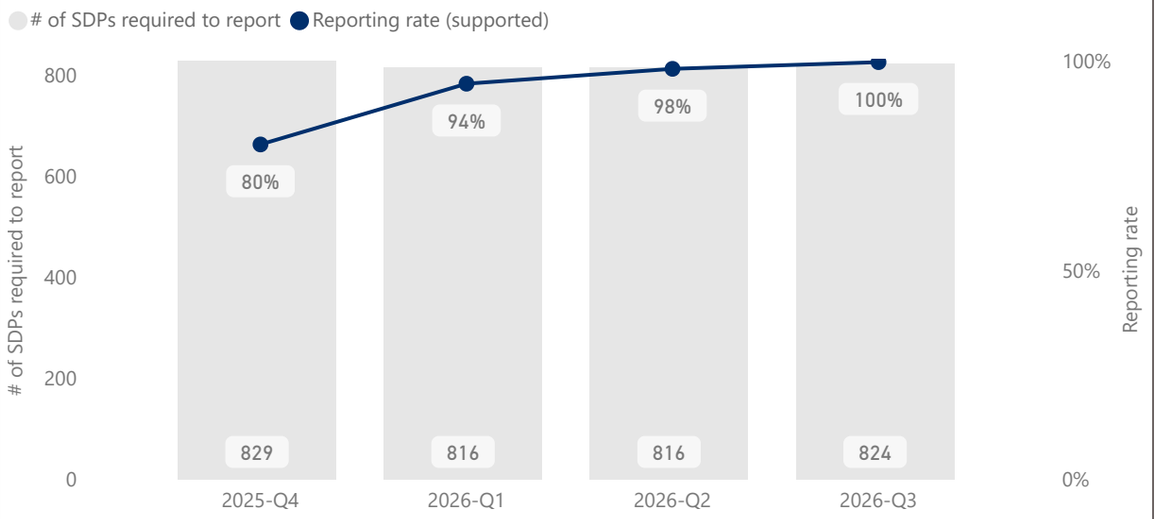
Data source

JMS Electronic Logistic Management Information System, Cycle-3

Analysis

Stockout rates for first-line malaria ACTs decreased from 7 percent in FY26 Q2 to 4 percent in FY26 Q3, while stockout rates for mRDTs increased slightly from 7 percent to 7.6 percent over the same period. The improvement in ACTs availability reflects strengthened stock levels at central level and an improved order fill rate to health facilities during the quarter, enabling more consistent supply of malaria commodities at service delivery points. Continued monitoring of orders in the pipeline will ensure ongoing commodity availability in health facilities.

B3. LMIS reporting rate



B3. Data Source (denominator)

JMS Electronic Logistic Management Information System, Cycle-3

B3. Data Source (numerator)

JMS Electronic Logistic Management Information System, Cycle-3

Analysis

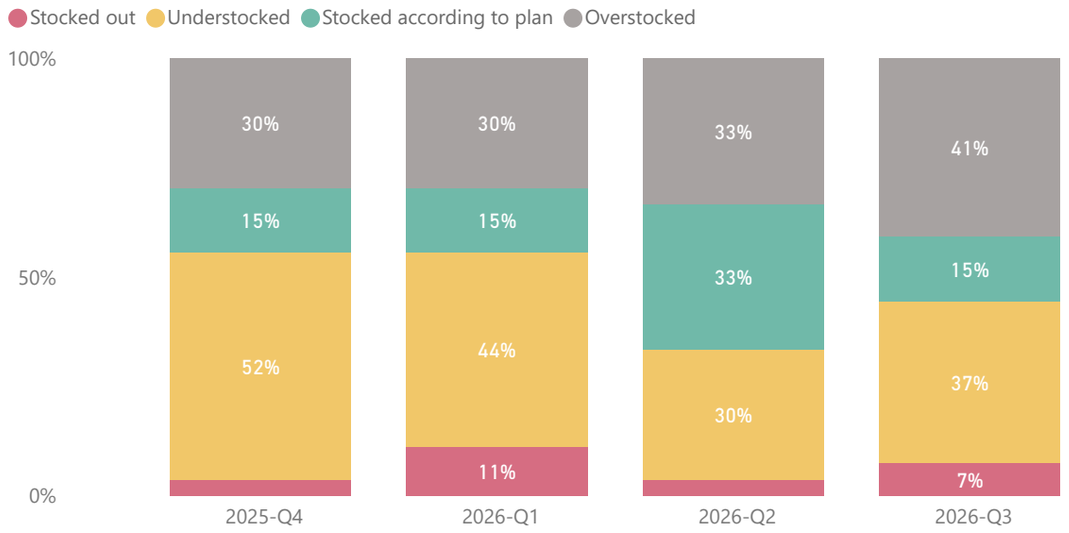
The reporting rate for malaria commodities improved by 2 percentage points from 98 percent in FY26 Q2 to 100 percent in FY26 Q3. This improvement is attributable to coordinated follow-up and order tracking efforts, including GHSC-PSM's focused support in tracking facility orders and providing timely feedback, as well as active engagement by JMS Customer Care teams and regional technical representatives, who followed up with non-reporting facilities to improve submission compliance.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Uganda | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	JMS end of month stock status report - April 2026, May 2026, June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

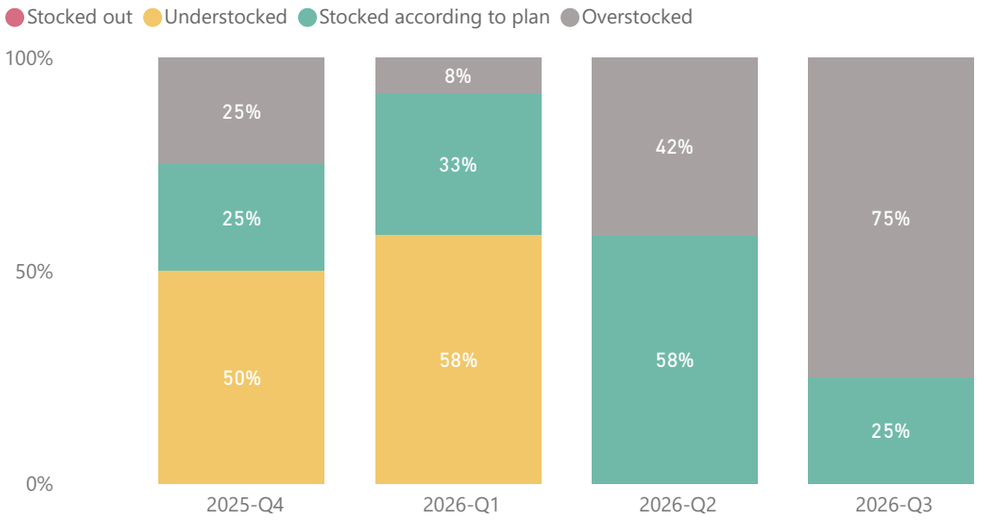
Ref	Analysis
B2	The overall stocked according to plan rate at central level for HIV/AIDS commodities decreased significantly to 15 percent from 33 percent in the previous quarter. The understocked rate increased to 37 percent, up from 30 percent in the previous quarter. The stockout rate at central level increased to 7 percent, from 4 percent in the previous quarter. This stockout decrease is entirely attributable to all three RTKs, which all shifted from stocked according to plan to understocked and a few to stocked out. The most used first-line ARVs, the most used second-line ARVs, and most used first-line pediatric ARVs all had observations shifted into stocked according to plan.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

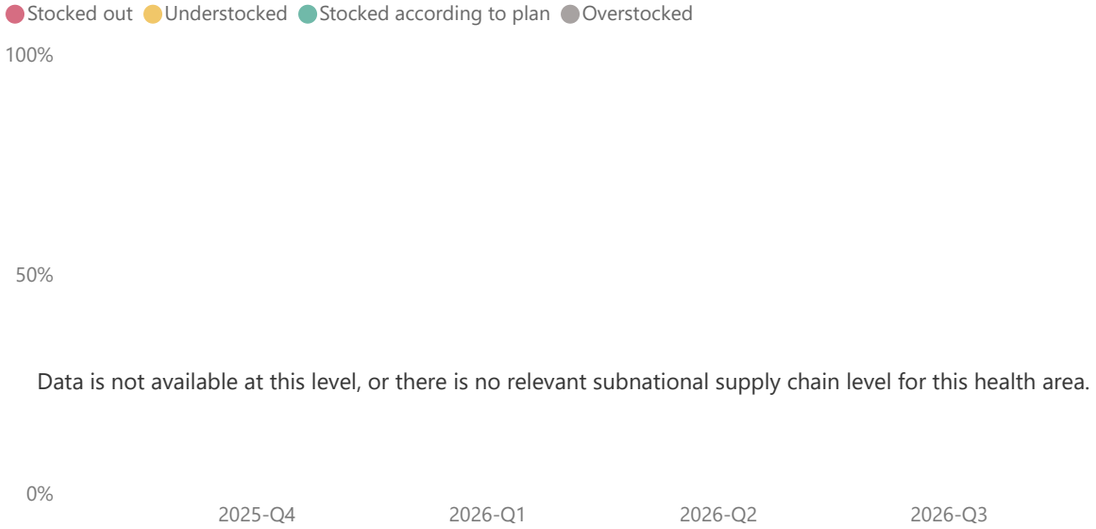
Country: Uganda | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	JMS end of month stock status report - April 2026, May 2026, June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	For malaria commodities, the overall stocked according to plan rate at central level decreased significantly to 25 percent, down from 58 percent in the previous quarter. Both AL 6x1 and AL 6x4 reported observations shifting into overstocked, which drove the observed overall change. Overstocked rates also increased during the quarter for mRDTs while LLINs partially shifted down into stocked according to plan. The improvement in stock status observed during the quarter is largely attributable to proactive interventions by the GHSC-PSM team in close collaboration with key supply chain stakeholders, including central warehouses, the Ministry of Health, funding agencies, and procurement service agencies. Regular monthly stock status review meetings enabled timely, data-driven decisions such as inter-warehouse stock rebalancing and expedited shipments. Based on current stock levels, there is no projected risk of expiry, and the team will continue to closely monitor consumption trends and provide guidance on appropriate mitigation actions to ensure optimal stock utilization.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Uganda

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Tenofovir/Lamivudine/Dolutegravir 300/300/50mg, 90 tablet
2nd line adult ARV	Lamivudine/Zidovudine 150/300 mg Tablet
Pediatric ARV	Abacavir/Lamivudine/Dolutegravir (ABC/3TC/DTG) 60/30/5 mg, Pack of 180
First RTK	HIV-1/2 Determine Complete Kit, 100 Tests
Second RTK	HIV, Stat-Pak HIV 1 / 2 Kit, 20 Tests
Tie-breaker RTK	Bioline
Viral load reagent	COBAS 5800/6800/8800 HIV-1 Quantitative Amplification Reagent (192 Tests, 1 Kit)
Viral load consumable	Plasma Collection Tube, K2-EDTA + PPT Polymer Gel, 5 mL, Plastic, Pearl White Top, Sterile
EID reagent	COBAS 5800/6800/8800 HIV-1/HIV-2 Qualitative Amplification Reagent (192 Tests, 1 Kit)
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All eight required supply plans were submitted to GHSC-PSM HQ. Uganda submits two versions of the ARV and Lab-RTK supply plans: one for the private-not-for-profit sector (JMS) and one for the public sector (NMS).

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✅	✅	✅	✅
Lab (HIV diagnostics)	✅	✅	✅	✅
RTKs	✅	✅	✅	✅
Essential Medicines	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Uganda

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**22.3%**	**2,803**
HIV-"Tie-breaker" RTK	38.8%	394
HIV-First RTK	11.2%	528
HIV-Most used 1st line ARV	3.6%	527
HIV-Most used 1st line pediatric ARV	24.5%	425
HIV-Most used 2nd line ARV	42.4%	408
HIV-Second RTK	22.3%	521
Malaria	**7.6%**	**820**
Malaria-Rapid diagnostic test for malaria	7.6%	820
Overall	**18.9%**	**3,623**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	4.0%	819

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	100%	529
Malaria	100%	824

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**18%**	**51%**	**26%**	**5%**	**39**
HIV/AIDS	15%	41%	37%	7%	27
Malaria	25%	75%			12
Overall	**18%**	**51%**	**26%**	**5%**	**39**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	2	2
Lab (HIV diagnostics)	2	2
RTKs	2	2
Essential Medicines	1	1
Malaria commodities	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

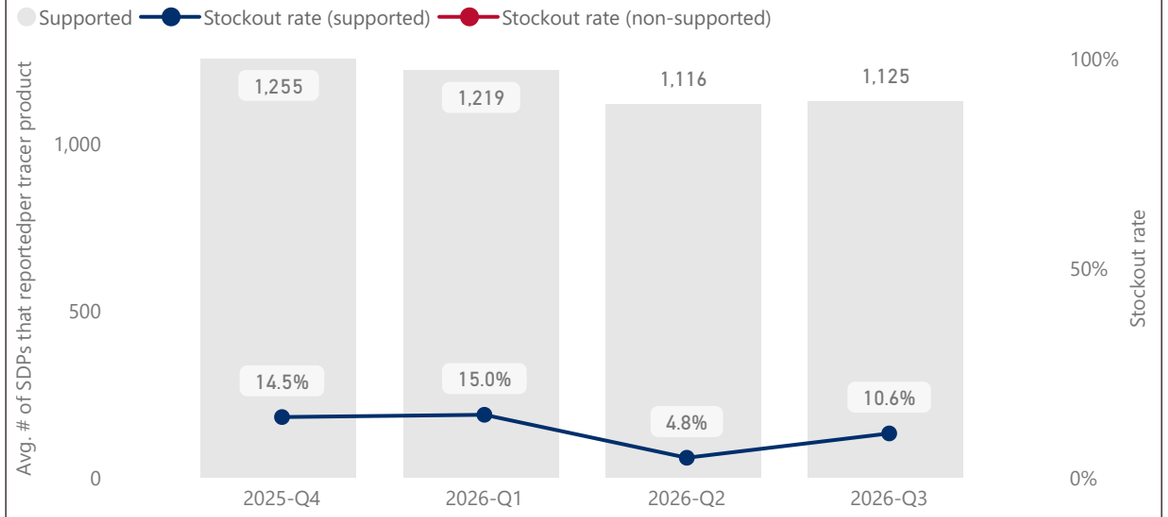
Country

Zambia

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Zambia | Current Quarter: 2026-Q3 | Tracer Product: All

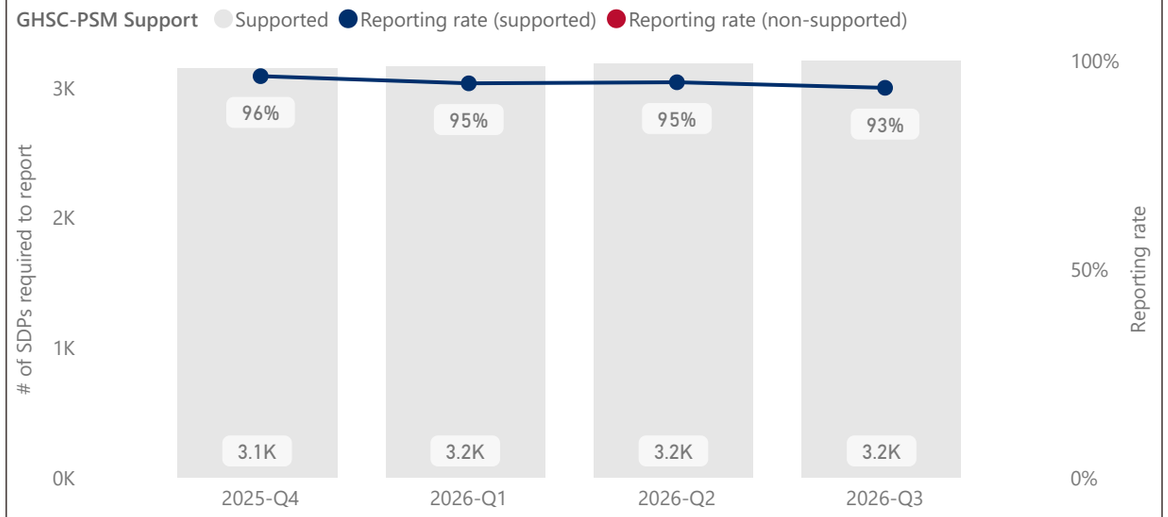
B1. Stockout rate at service delivery points



Data source

eLMIS report for May 2026 data

B3. LMIS reporting rate



B3. Data Source (denominator)

eLMIS report for May 2026 data

B3. Data Source (numerator)

eLMIS report for May 2026 data

Analysis

The stockout rate for HIV/AIDS commodities averaged 10.6 percent in FY2026 Q3, an increase from Q2's 4.8 percent. The increase can primarily be attributed to an increase in the stockout rate of the pediatric ARV tracer product, with all other products having nearly the same stockout rate as last quarter. The 32 percent SDP stockout rate for pALD, the most-used first-line pediatric ARV, was due to DHOs not delivering the commodity on time due to transport/communication constraints. As eligible pediatric clients are transitioned to pALD, pDTG-10 in in the process of being phased out in-country. Also of note, 2nd line adult ARVs had a consistently high stockout rate of 35.5 percent this quarter, due to ZAMMSA's inability to deliver orders despite facilities having placed resupply orders. However, most eligible patients have transitioned to first-line regimens, while clients with advanced HIV disease have been transitioned to a different second-line regimen.

Analysis

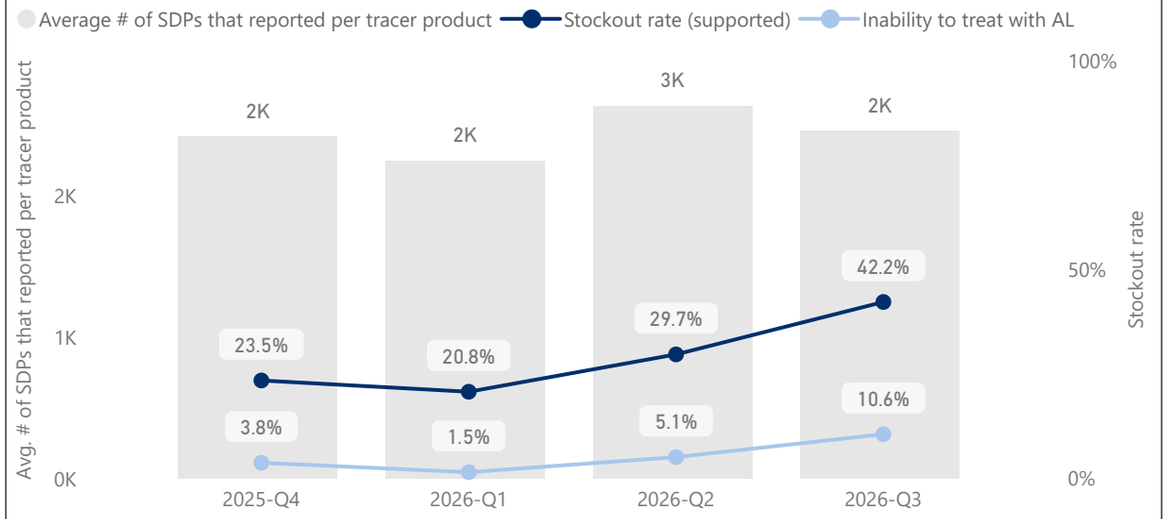
Zambia has consistently maintained high reporting rates, achieving 93 percent in FY2026 Q3. The slight decline was largely due to competing priorities among facility staff, including their participation in the Novel Oral Polio Vaccination campaign, which affected reporting timeliness. GHSC-PSM supported the national supply chain reporting process by providing continuous technical and operational support for the electronic Logistics Management Information System (eLMIS) at service delivery points (SDPs). These efforts strengthened system functionality, improved reporting efficiency, and promoted adherence to reporting timelines despite competing priorities that affected overall reporting performance.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Zambia | Current Quarter: 2026-Q3 | Tracer Product: All

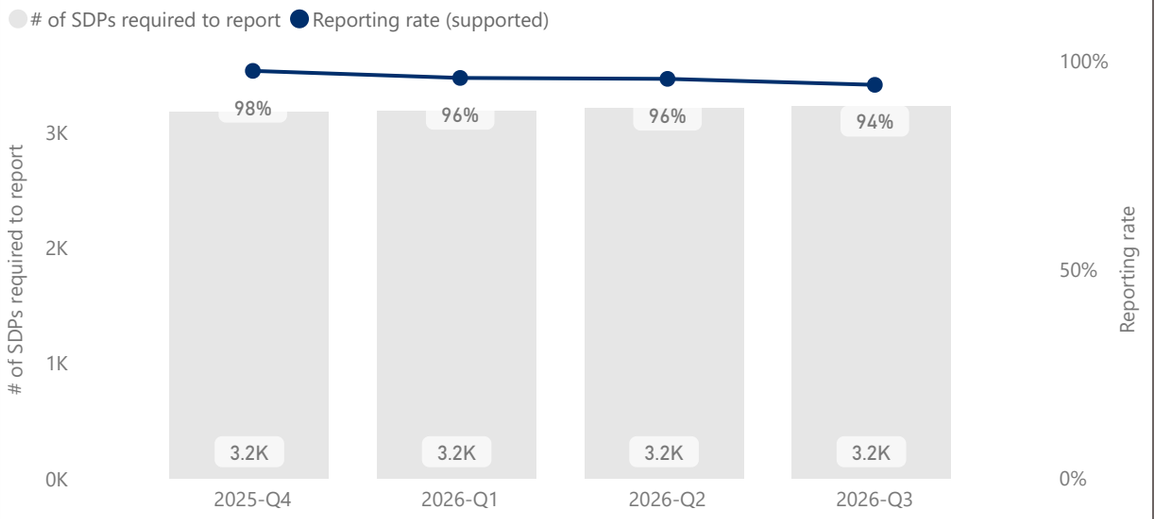
B1. Stockout rate at service delivery points



Data source

eLMIS report for May 2026 data

B3. LMIS reporting rate



B3. Data Source (denominator)

eLMIS report for May 2026 data

B3. Data Source (numerator)

eLMIS report for May 2026 data

Analysis

The stockout rate for malaria commodities increased in FY2026 Q3, to 42.2 percent from Q2's 29.7 percent. This increase in stockouts can be partially attributed to two products that are being phased out in-country: AL 6x1 and AL 6x3. Both of these products had stockout rates of over 50 percent. However, the stockouts at SDPs were largely due to increased demand following increased malaria cases, which exceeded projected stock-on-hand and the supply plan, rather than the phase-out itself. The patient requirements previously covered by AL 6x1 and AL 6x3 continue to be accounted for under the corresponding pack sizes of AL 6x2 and AL 6x4, respectively. AL 6x2 also had a higher stockout rate this quarter, at 43 percent, and AL 6x4 had a stockout rate of 24 percent. However, the inability to treat rate was 10.6 percent, meaning over 89 percent of facilities had some first line treatment in various alternative pack sizes. SP also saw a higher stockout this quarter, at 43 percent. SDP stockouts for SP were due to the delayed delivery of the commodity by ZAMMSA and DHOs despite facilities having submitted resupply orders. However alternative pack sizes for SP were available. To mitigate commodity stockouts, the project implemented several measures. Sites with low stock levels were advised to obtain supplies from other adequately stocked sites or procure locally if the central level was out of stock. Redistribution efforts were supported using the Stock Redistribution Tool and remote coordination. Additionally, the project shared monthly stock status updates with key partners to keep them informed of stock, shipment, funding gaps, and supply plan statuses for supply chain decision-making.

Analysis

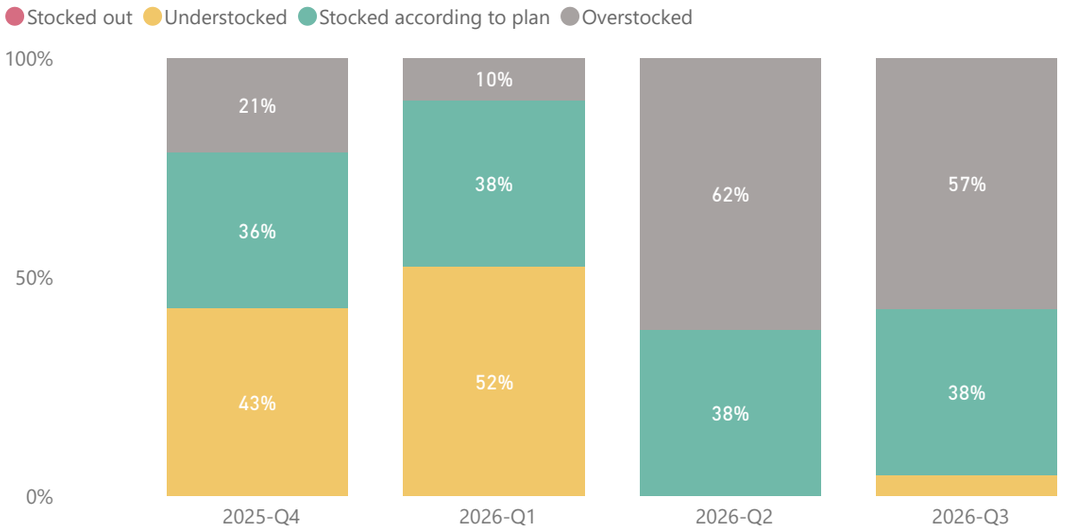
Zambia has consistently maintained high reporting rates, achieving 94 percent in FY2026 Q3. The slight decline was largely due to competing priorities among facility staff, including their participation in the Novel Oral Polio Vaccination campaign, which affected reporting timeliness. GHSC-PSM supported the national supply chain reporting process by providing continuous technical and operational support for the electronic Logistics Management Information System (eLMIS) at service delivery points (SDPs). These efforts strengthened system functionality, improved reporting efficiency, and promoted adherence to reporting timelines despite competing priorities that affected overall reporting performance.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Zambia | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	QAT report for Apr' 26, May' 26, Jun' 26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

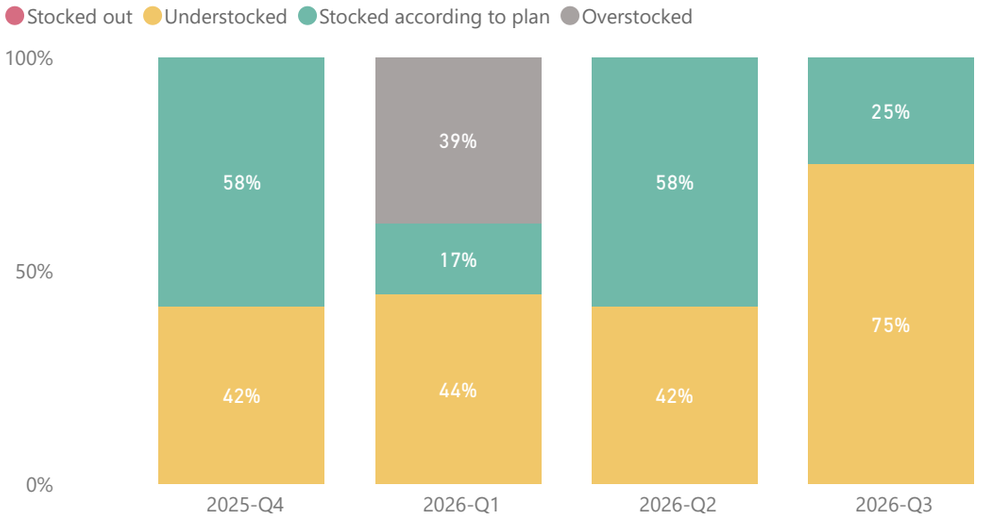
Ref	Analysis
B2	The overall stock status for HIV/AIDS commodities at the central level remained relatively consistent this quarter, with a slight shift away from overstocking and to understocking. Products stocked according to plan remained at 38 percent. There were no stockout observations. First line adult ARV was the product with understock observations this quarter, and a shipment of the product was delivered in June. For overstocked products, risk of expiry is being closely monitored and does not pose an immediate concern.
C7	There was no loss to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

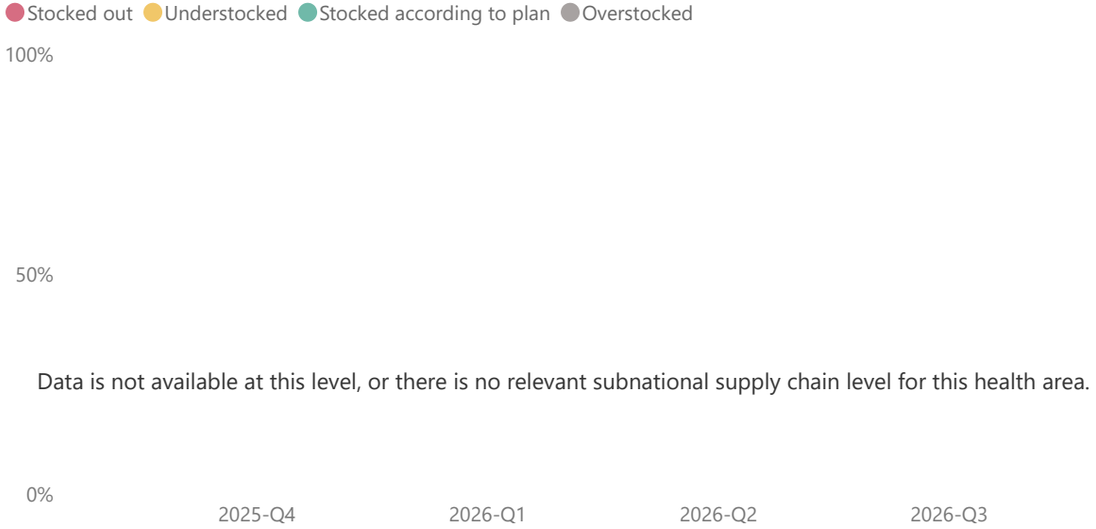
Country: Zambia | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	QAT report for Apr' 26, May' 26, Jun' 26

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
C7	There was no loss to report this quarter.
B2	The overall stock status for malaria commodities at the central level shifted more toward being understocked, at 75 percent this quarter, with products stocked according to plan accounting for the remaining 25 percent. No overstock or stockout observations were made. AL 6x1 and AL 6x3 are no longer included in this indicator as they have been phased out of central storage as of December 2025. AL 6x2 was entirely understocked, and AL 6x4 was mostly understocked, with one observation of being stocked according to plan. Shipments for these ALs were delivered near the end of the quarter to mitigate any risk of stockouts. MRDTs were also entirely understocked, while SP was mostly stocked according to plan. A shipment of mRDTs is currently in transit.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Zambia

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir 50/300/300 mg Tablet
2nd line adult ARV	Darunavir/Ritonavir 400/50mg
Pediatric ARV	pALD
First RTK	Determine
Second RTK	SD Bioline HIV - 1/2,3.0 Test Each
Tie-breaker RTK	Not reported
Viral load reagent	Cobas 4800 HIV-1 CE IVD (Quantitative)
Viral load consumable	Not reported
EID reagent	Hologic Panther
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All targeted supply plans were updated and shared with GHSC-PSM headquarters.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Essential Medicines	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
TPT	✓	✓	✓	✓

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Zambia

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**10.6%**	**7,875**
HIV-EID reagent	0.0%	15
HIV-First RTK	6.7%	2,707
HIV-Most used 1st line ARV	1.5%	1,434
HIV-Most used 1st line pediatric ARV	32.5%	924
HIV-Most used 2nd line ARV	35.5%	76
HIV-Second RTK	11.2%	2,705
HIV-Viral load reagent	0.0%	14
Malaria	**42.2%**	**14,741**
Malaria-First line ACT (AL 6x1)	54.1%	2,477
Malaria-First line ACT (AL 6x2)	43.4%	2,477
Malaria-First line ACT (AL 6x3)	58.4%	2,495
Malaria-First line ACT (AL 6x4)	23.7%	2,537
Malaria-Rapid diagnostic test for malaria	31.2%	2,536
Malaria-Sulphadoxine-pyrimethamine	43.5%	2,219
Overall	**31.2%**	**22,616**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	10.6%	2,593

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	93%	3209
Malaria	94%	3227

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**33%**	**36%**	**30%**		**33**
HIV/AIDS	38%	57%	5%		21
Malaria	25%		75%		12
Overall	**33%**	**36%**	**30%**		**33**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Essential Medicines	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 3
April - June 2026

Country M&E Indicator Performance

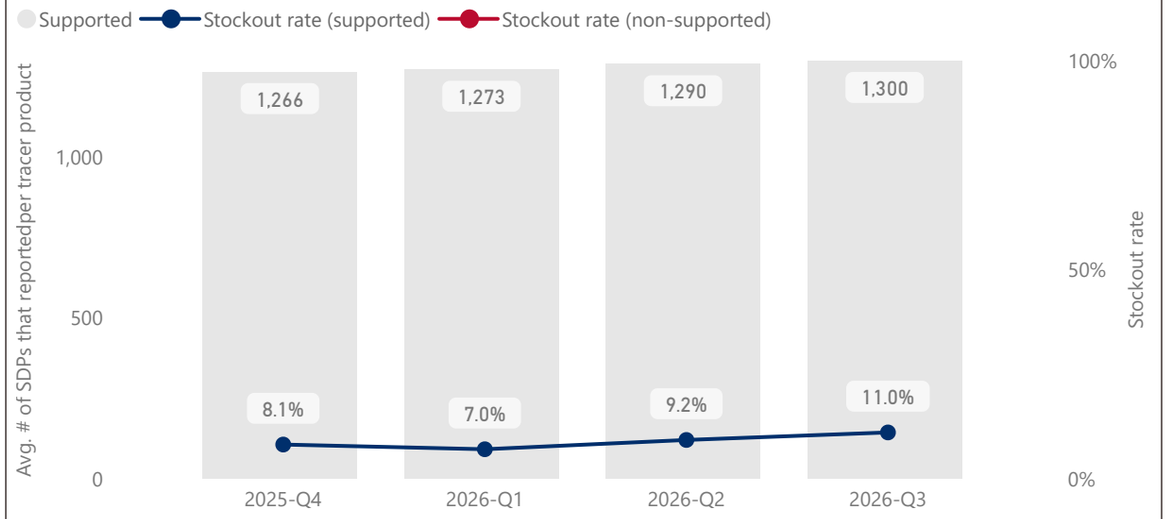
Country

Zimbabwe

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Zimbabwe | Current Quarter: 2026-Q3 | Tracer Product: All

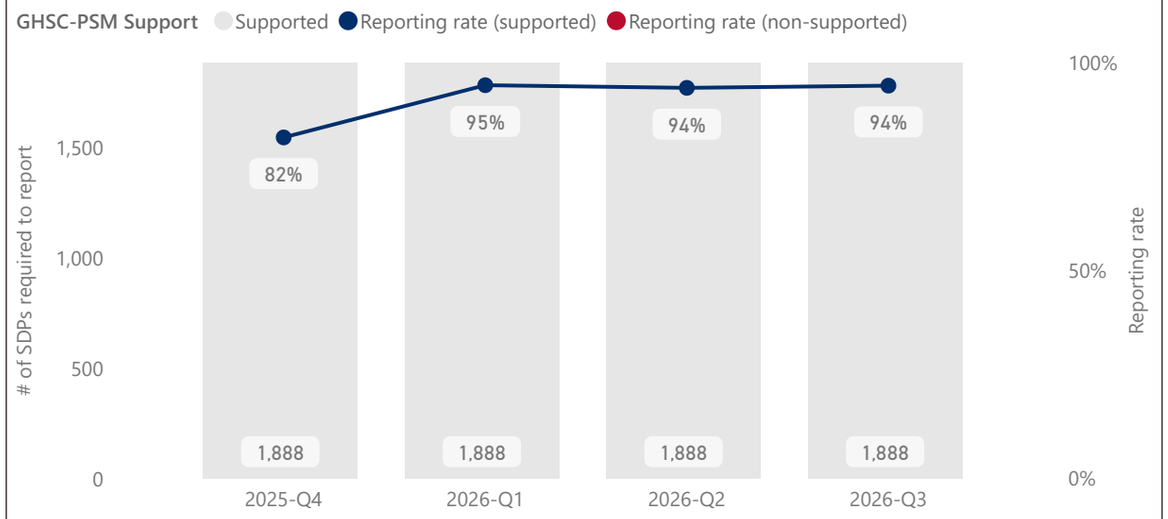
B1. Stockout rate at service delivery points



Data source

Top Up, June 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

Top Up, June 2026

B3. Data Source (numerator)

Top Up, June 2026

Analysis

The overall stockout rate at SDPs has slightly increased, from 9.2 percent in FY 2026 Q2 to 11.0 percent in FY 2026 Q3. The combined stockout rate for 1st and 2nd line RTKs increased by approximately 11 percentage points, however, there was a shipment received at the end of June 2026. There was also an 85 percentage point increase in the reported stockout rate for viral load reagent for the GeneXpert platform; this platform is reserved for priority populations and conventional viral load testing platforms were adequately stocked with no service interruption. There were also notable reductions in the stockout rates of 1st line pediatric ARVs and tie-breaker RTKs, and stockout rates for adult ARVs remained very low.

Analysis

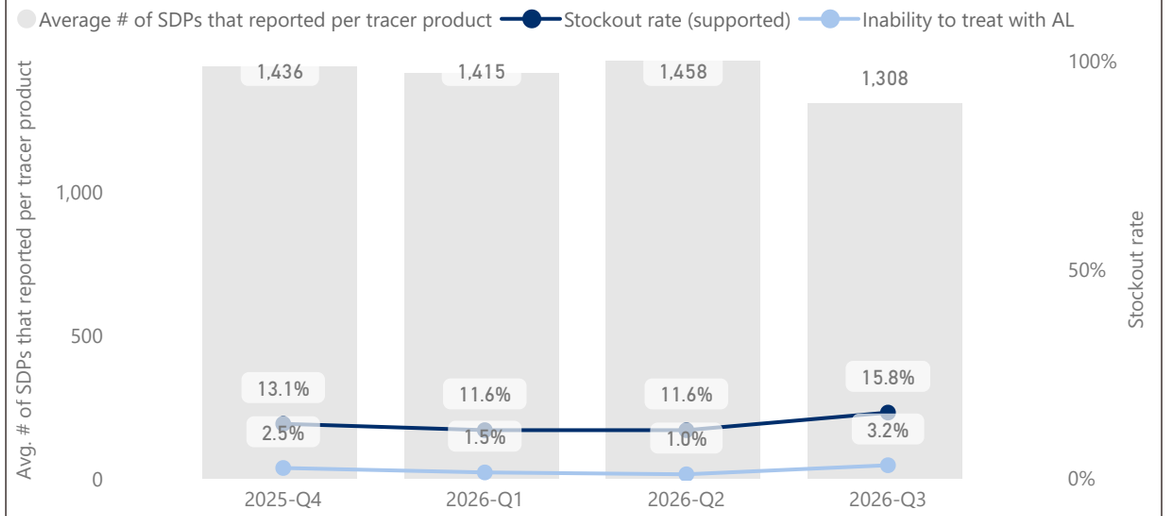
The SDP report submission rate remains high at 94 percent. There was a large improvement in the timeliness of reporting in FY 2026 Q3 with 79 percent of reports being submitted by or within 1 week of the deadline.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Zimbabwe | Current Quarter: 2026-Q3 | Tracer Product: All

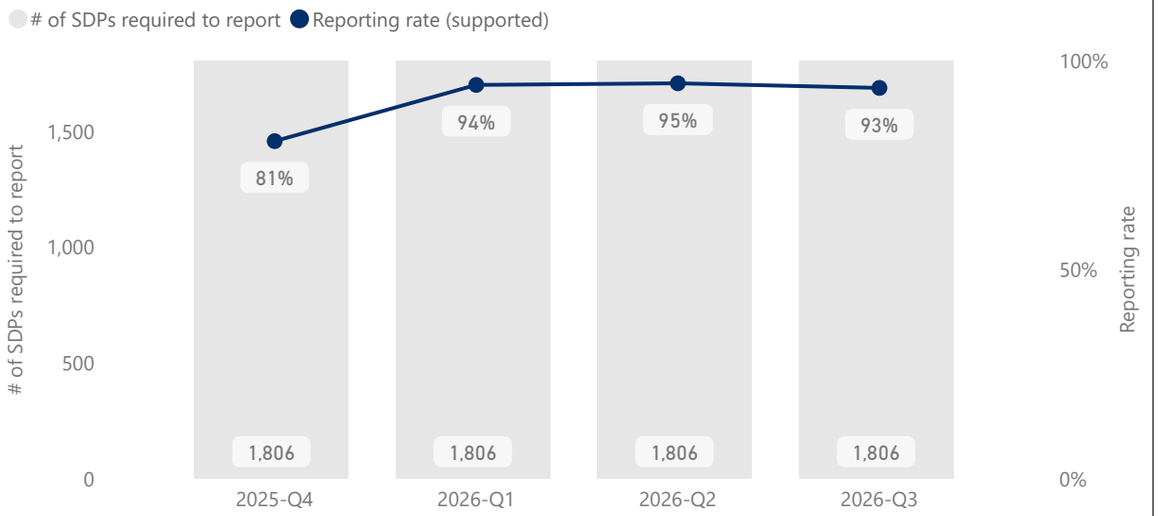
B1. Stockout rate at service delivery points



Data source

Top Up, June 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

Top Up, June 2026

B3. Data Source (numerator)

Top Up, June 2026

Analysis

The overall stockout rate slightly increased from 11.6 percent in FY 2026 Q2 to 15.8 percent in FY 2026 Q3. The stockout rates for most tracer products remain stable compared to FY 2026 Q2. There was a reported 14 percentage point increase in the stockout rate of AL 6x4 due to batch expiry in May, but the MOHCC sought a shelf-life extension which was granted. There was also a 6 percentage point increase in the stockout rate for mRDTs.

Analysis

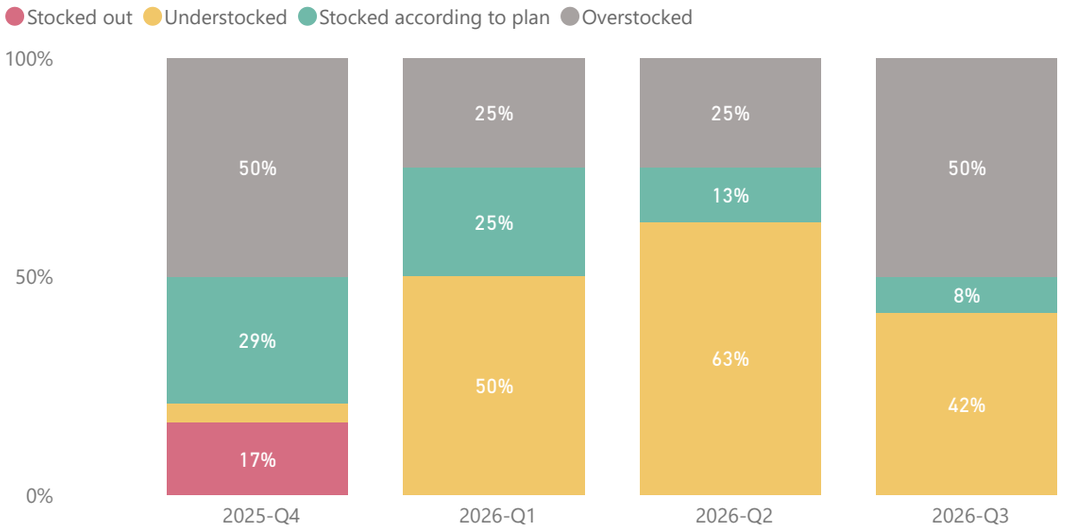
The SDP report submission rate remains high at 93 percent. There was a large improvement in the timeliness of reporting in FY 2026 Q3 with 78 percent of reports being submitted by or within 1 week of the deadline.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
HIV/AIDS

Country: Zimbabwe | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Top Up, Navision Reports June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

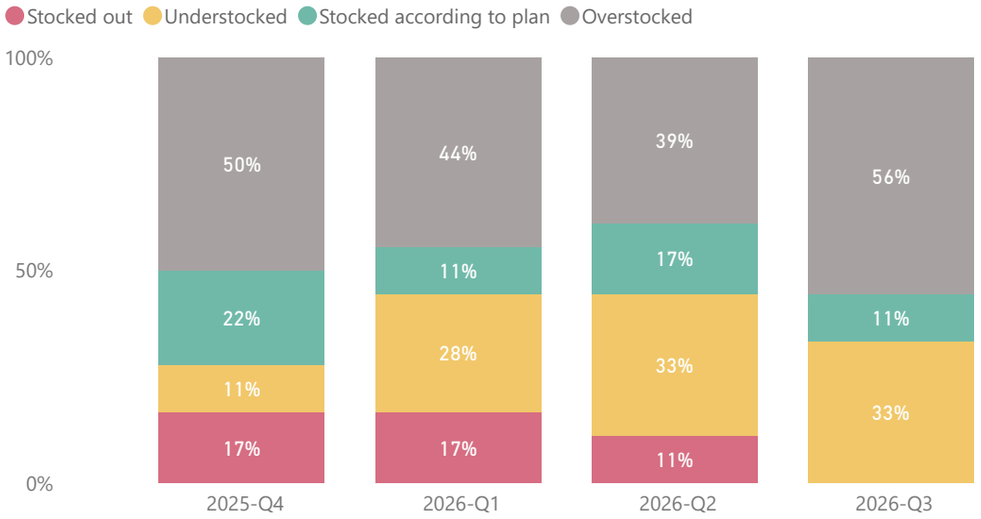
Ref	Analysis
B2	There were no observed stockouts at the central level for HIV/AIDS tracer products. There was, however, a shift to more overstocked observations, with the stocked according to plan rate decreasing from FY 2026 Q2. Products with only understocked observations include 1st line adult ARVs, 1st RTKs, and EID reagent; significantly low stock levels were reported for 1st RTKs, however, a new shipment was received at the end of June 2026.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Warehouse stock status and product losses
Malaria

Country: Zimbabwe | Current Quarter: 2026-Q3 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Top Up, Navision Reports June 2026

B2. Stocked according to plan - Subnational level(s)



Supply Chain Level	B2. Data Source(s)
Data is not available at this level, or there is no relevant subnational supply chain level for this health area.	

C7a. and C7b. Product loss due to expiry, damage, theft, and other causes while in GHSC-PSM custody

Level	Site of Loss	Type of Loss	Product Type	Loss Value	Loss Denominator	Loss %

Ref	Analysis
B2	There were no observed stockouts at the central level for malaria tracer products. There was, however, a shift to more overstocked observations, with the stocked according to plan rate decreasing from FY 2026 Q2. Large overstock observations were reported for both AL 6x1 (a result of a duplicate GF shipment) and AL 6x4 (due to batch shelf-life extension and return to central level in June 2026). All observations for AL 6x3 were understocked as a result of a shipment rescheduled from June to November 2026.
C7	There were no product losses in GHSC-PSM custody to report this quarter.

Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

HIV Tracer Products and Supply Planning

Country: Zimbabwe

Current Quarter: 2026-Q3

HIV Tracer Products

Tracer Product	Exact Product Name
1st line adult ARV	Dolutegravir/Lamivudine/Tenofovir DF 50/300/300 mg Tablet [30 Tablets, 90 Tablets, 180 Tablets]
2nd line adult ARV	Atazanavir/Ritonavir 300/100 mg Tablet
Pediatric ARV	Dolutegravir/Abacavir/Lamivudine 5/60/30 mg Dispersible Tablet
First RTK	Determine
Second RTK	Chembio
Tie-breaker RTK	INSTI
Viral load reagent	Alinity m HIV-1 AMP Kit 192 Test, Aptima HIV-1 Quant Dx Assay CE IVD, COBAS 5800/6800/8800 HIV-1 Quantitative Amplification Reagent, GeneXpert HIV-1/VL Assay
Viral load consumable	Not reported
EID reagent	COBAS 5800/6800/8800 HIV-1/HIV-2 Qualitative Amplification Reagents, GeneXpert HIV-1 Qual Cartridges with Sample Reagent, m-Pima HIV-1/2 Detect
EID consumable	Not reported

HIV tracer products are selected based on the most-used commodities in each country. These products can change from quarter to quarter as products transition and consumption changes. The items listed here will refer to the products used as tracers for the current quarter. Data presented for previous reporting periods will refer to the most-used products *at that time*, which may differ from the current tracer item.

Supply planning

Analysis

All five (5) required supply plans were submitted to GHSC-PSM HQ.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q4	2026-Q1	2026-Q2	2026-Q3
ARVs	✓	✓	✓	✓
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
RTKs	✓	✓	✓	✓
TPT	✓	✓	✓	✓
Essential Medicines	✓			

A green circle with a white check indicates that two (2) supply plans were required and submitted.
A green check indicates that a supply plan was required and submitted.
A white circle indicates that a plan was required but not submitted.
A blank space indicates that a plan was not required.

Complete Results and Denominators

Country: Zimbabwe

Current Quarter: 2026-Q3

B1. Stockout rate at service delivery points (GHSC-PSM-supported regions)

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**11.0%**	**10,403**
HIV-"Tie-breaker" RTK	13.9%	1,824
HIV-EID reagent	14.1%	64
HIV-First RTK	14.1%	1,896
HIV-Most used 1st line ARV	0.2%	1,807
HIV-Most used 1st line pediatric ARV	8.0%	1,368
HIV-Most used 2nd line ARV	4.6%	1,518
HIV-Second RTK	20.1%	1,862
HIV-Viral load reagent	90.6%	64
Malaria	**15.8%**	**9,157**
Malaria-First line ACT (AL 6x1)	25.1%	1,607
Malaria-First line ACT (AL 6x2)	14.3%	1,494
Malaria-First line ACT (AL 6x3)	13.2%	1,508
Malaria-First line ACT (AL 6x4)	18.1%	1,782
Malaria-LLINs	4.3%	186
Malaria-Rapid diagnostic test for malaria	13.0%	1,809
Malaria-Sulphadoxine-pyrimethamine	8.0%	771
Overall	**13.3%**	**19,560**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	3.2%	1,827

See "Indicator Details" for B01 at the end of this annex for more detail about composite stockouts.

B3. SDP reporting rate to LMIS (GHSC-PSM-supported regions)

Health Area	Reporting rate	Total # of SDPs required to report
HIV/AIDS	94%	1888
Malaria	93%	1806

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**10%**	**52%**	**38%**	**0%**	**42**
HIV/AIDS	8%	50%	42%	0%	24
Malaria	11%	56%	33%	0%	18
Overall	**10%**	**52%**	**38%**	**0%**	**42**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
ARVs	1	1
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
RTKs	1	1
TPT	1	1

For complete results on product losses (C7a and C7b), please see the specific pages for those indicators.