U.S. GOVERNMENT GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management



FISCAL YEAR 2026

QUARTER 2 REPORT

January 1 – March 31, 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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ACRONYMS

AL	artemether-lumefantrine
ARV	antiretroviral
CMS	Central Medial 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
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
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 2 (Q2) of Fiscal Year 2026 (FY 2026). For nine 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 Q2, GHSC-PSM sustained strong performance while navigating a period of transition and a challenging global operating environment by applying continuous improvement and embedding crisis management practices. Through monthly "Clear Path to Delivery" risk assessments conducted with the Bureau of Global Health Security and Diplomacy (GHSD) and U.S. Embassies, the project resolved key risks related to contracting, importation, warehousing, and country readiness for receipt of commodities.

Amid a deteriorating global freight environment driven by the war in Iran, GHSC-PSM maintained delivery performance by adapting to maritime and airspace disruptions, rising costs, and congestion through active risk management and flexible routing strategies. In alignment with the America First Global Health Strategy, the project also prioritized U.S.-based logistics providers and initiated updates to branding and marking to enhance visibility of USG-funded activities.

GHSC-PSM advanced the reactivation of GS1 global standards by restarting electronic data interchange (EDI) activities, re-engaging suppliers and country stakeholders, and supporting countries to prepare for traceability commitments under emerging MOUs. The project also continued to provide strategic and operational support to strengthen country supply chains through data-driven planning, stock monitoring, and improved commodity flow to service delivery points, thereby protecting U.S. investments in lifesaving programs.

As GHSD provides transition direction, GHSC-PSM remains committed to a responsible handover that aims to preserve gains achieved over the life of the project and positions future implementers, including country partners, to build on a strong foundation. The project continues to execute with excellence and urgency, protecting U.S. investments and ensuring uninterrupted delivery of lifesaving commodities to the people who need them most.

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GHSC-PSM Life of Project Fast Facts:

- Delivered $6.4 billion in drugs, diagnostics, and health commodities ($189 million in Q2 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.
- 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 nearly 674 million antimalarials to treat malaria infections.
- Delivered over 377 million long-lasting insecticide-treated nets (LLINs), potentially protecting over 754 million people from malaria.
- Achieved on-time delivery[1] of over 80 percent for 30 consecutive reported quarters.

PROJECT PERFORMANCE

In Q2, GHSC-PSM delivered more than $189 million in drugs, diagnostics, and health commodities.

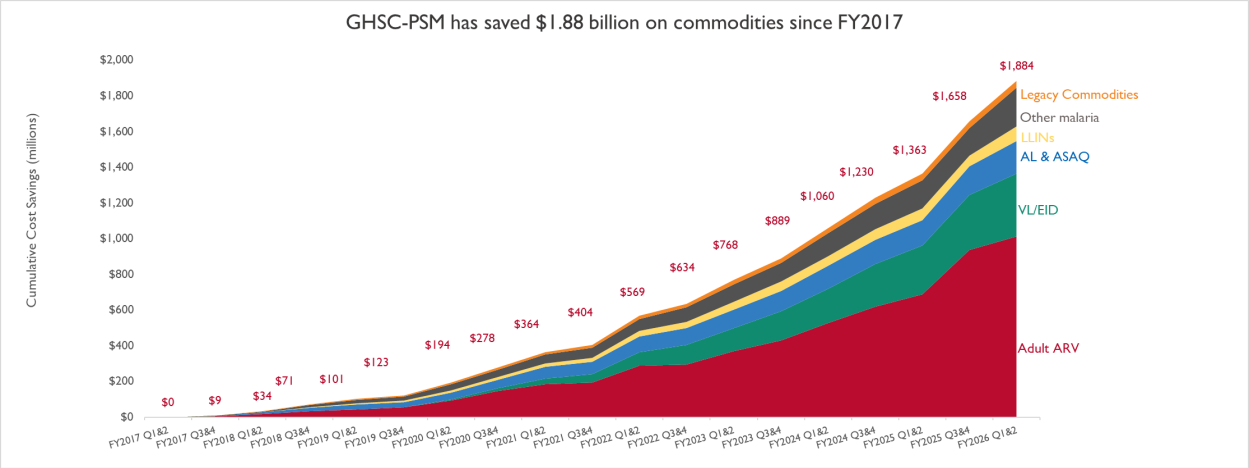
Over the life of the project, GHSC-PSM has achieved more than $1.88 billion in commodity cost savings[2] (see Exhibit 1) through careful negotiation of long-term contracts for major product groups, such as viral load (VL) and early infant diagnosis (EID) testing. The project has also achieved $197.3 million in logistics cost savings, reinforcing U.S. leadership in advancing global health outcomes through smarter, more strategic procurement and logistics practices. See Annex A: Health Commodity and Logistics Cost Savings for more details.

Exhibit 1. Life-of-Project Savings on Medicines and Health Commodities

[1] 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 deliver date

[2] Cost savings are typically calculated and reported in the Q2 and Q4 IDIQ reports.

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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 C.[3]

Global Supply Chain Performance

In Q2, the project strived to ensure the timely delivery of lifesaving commodities, maintaining OTD above the contractual target of 80 percent for the 30th consecutive reported quarter (see Exhibit 2). The project also maintained OTIF, 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[4] Rates

[3] All indicators are presented in detail in Annex C: 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 C 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.
[4] 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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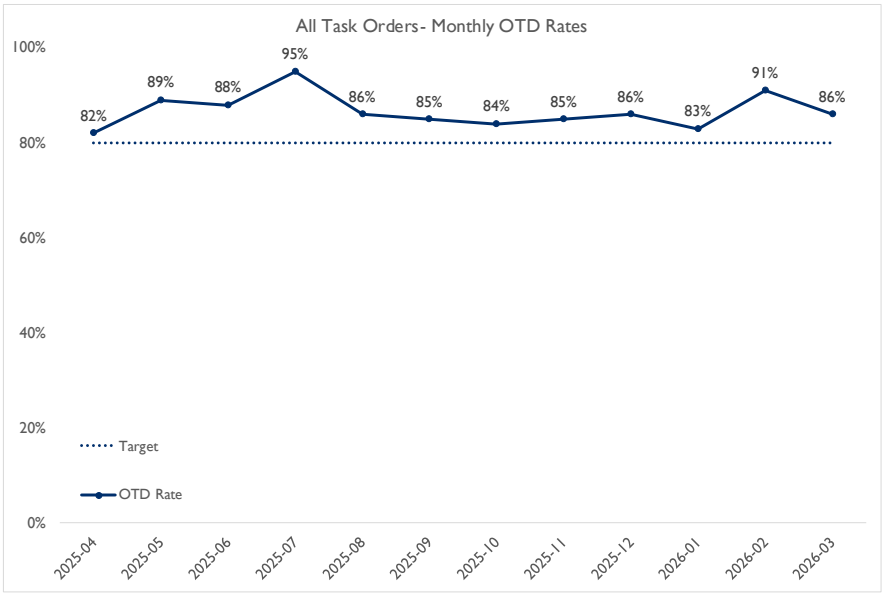
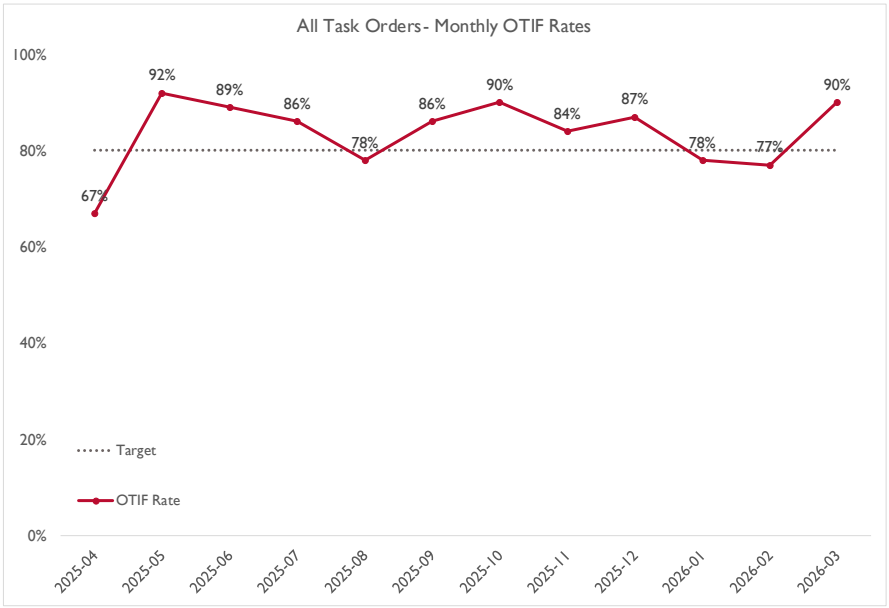


Exhibit 3. Monthly IDIQ OTIF Rates



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 Q2 to support supply chain continuity during disruptions, refer to Annex B: 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 C: Performance on Project Indicators.

PROGRESS BY OBJECTIVES

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

Maintaining a Clear Path to Delivery

GHSC-PSM conducts monthly "Clear Path to Delivery" risk assessments to analyze country-level risks to commodity delivery across HIV/AIDS and malaria programs, focusing on shipment consignees, import duty waivers, warehousing, and handover of procurement functions to U.S. Embassies. Where risks are imminent, the project applies targeted crisis management approaches, adapting operational strategies to navigate constraints and adjusting delivery pathways to ensure commodities arrive on time. Together with GHSD and U.S. Embassies, GHSC-PSM has worked to resolve the majority of items on the critical path to delivery. By the end of Q2, 46 out of 48 countries had a clear path to delivery, with shipments fully or partially paused in just two countries (Burundi, Colombia), where efforts to resolve remaining challenges are ongoing.

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: In Q2, GHSC-PSM strengthened business partnerships and strategic communication with suppliers through 24 focused meetings, including 14 business performance reviews and several in-person meetings with vendors. These engagements reinforced supplier confidence in GHSC-PSM as a transparent and reliable partner operating effectively in a dynamic global supply environment. The project also maintains a comprehensive and competitive suite of framework contracts and vendor-managed solutions (VMS), enabling pooled procurement, reducing contracting burden, pre-positioning commodities closer to demand, and reinforcing regional supply chain resilience.

In alignment with the America First Global Health Strategy and with GHSD's support, GHSC-PSM explored expanding the pool of eligible laboratory product vendors through a sourcing event targeting U.S.-based distributors and manufacturers. Through consultations and a request for information,

suppliers identified multiple product manufacturing sources in the U.S. and Asia, with several major vendors expressing interest in participating in upcoming laboratory sourcing events, subject to compliance with GHSC quality assurance (QA) eligibility requirements. The GHSC-PSM lab request for quotation (RFQ) event is scheduled for Q3, pending GHSD clearance.

Supply Chain Vulnerability Assessment: In Q2, GHSC-PSM conducted a targeted survey of key eligible suppliers to assess upstream supply chain vulnerabilities affecting priority HIV and malaria commodities. This assessment responds to Congressional direction for the U.S. Department of State to enhance visibility into medicine supply chain security amid growing concerns about U.S. reliance on foreign, particularly Chinese, sources of pharmaceutical and essential health commodity inputs. As a result of the assessment, GHSC-PSM now has a high-level snapshot of where GHSC-PSM-eligible suppliers rely on concentrated (two or fewer sources) or China-exclusive sources of active pharmaceutical ingredients (APIs), key starting materials, or other critical input materials. This assessment reinforces existing evidence that the HIV and malaria pharmaceutical ecosystem remains heavily reliant on upstream suppliers in India and China. While direct API-level dependence on China is limited, several essential input materials originate exclusively from China. This body of knowledge can enable the USG to conduct market-shaping interventions for future, more robust and resilient, upstream supply chains for health commodities.

HIV/AIDS

The project continued to reshape the ARV treatment and molecular diagnostic markets by addressing systemic barriers in HIV treatment and viral load (VL) and early infant diagnosis (EID) supply chains through increased private-sector engagement and partnerships with suppliers to strengthen in-country supply chain performance. Through strategic sourcing and engagement with private sector partners, GHSC-PSM has achieved competitive tenofovir/lamivudine/dolutegravir (TLD) pricing, including a five percent year-over-year reduction that brings the annual cost of patient treatment to $34.

In Q2, under the Southern Africa VMS program, private sector partners delivered 1.6 million bottles of TLD to Eswatini, Mozambique, Zambia, and Zimbabwe. 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 enables 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 (599,616 bottles) and twelve deliveries of TLD to nine different intermediary warehouses[5] (448,960 bottles). Direct delivery to intermediary warehouses represents a logistical cost saving to the country, while alleviating space constraints at the central level. This was the completion of the first series of deliveries at scale to downstream warehouses in Mozambique that started in Q1 and required close

[5] Beira, Chimoio, Maputo, Mocuba, Nampula, Pemba, Tete, Xai-Xai, and Zambezia.

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coordination between representatives from the ministry of health (MOH), GHSC-PSM, and each VMS supplier's third-party logistics provider.

These ARV procurement strategies have increased private-sector involvement in the delivery process and created a more sustainable environment where suppliers are true partners in addressing in-country supply chain challenges, expanding industry engagement further down the supply chain.

Since 2024, GHSC-PSM has worked with 18 countries to transition to the optimal pediatric HIV treatment regime of pediatric abacavir/lamivudine/dolutegravir (pALD) 5/60/30 mg. In total, the project has delivered 238,850 180-count bottles to ensure long-term, sustainable pediatric treatment for children living with HIV. In Q2, the project completed an additional ten deliveries of 223,850 to seven countries.[6]

After finalizing the award allocations with strategic partners for TLD and pALD procurements in Q1, advancing market health and retaining competitive pricing, GHSC-PSM placed three master orders totaling 86,160 180-count bottles of pALD, ensuring availability for planned demand from Mozambique and Eswatini, and placed an additional three orders of 15,614 180-count bottles of pALD for Burundi, Eswatini, and Rwanda.

The project also maintained the VL/EID all-inclusive service-level agreement (SLA) program which aims to optimize laboratory services to be more cost effective, efficient, and responsive to patient needs. The supply chain for molecular diagnostics products is especially complex; products typically have a short shelf life, are temperature sensitive, are of high value, and are exclusively shipped by air. Strategic sourcing arrangements incentivize manufacturers to utilize production lines efficiently to ensure country-based shelf-life requirements are met.

In Q2, GHSC-PSM held quarterly business reviews with its three molecular SLA holders. Suppliers performed well against established KPIs and commodity security stabilized across the GHSC-PSM portfolio. Further, GHSC-PSM continued providing support to the MOH in Eswatini to establish an SLA directly with manufacturers that allows them to benefit from the global pricing on reagents and consumables. A vendor-managed inventory pilot in Nigeria continued in Q2 and discussions began with the supplier to scale this pilot approach to all of their platforms in Nigeria.

GHSC-PSM also strengthened access to essential medicines for the treatment of cryptococcal meningitis, a severe opportunistic infection affecting individuals with advanced HIV. Building on recent market developments, an additional manufacturer of flucytosine enabled the project to secure approval from GHSD and the USG-funded Qualifying, Testing, and Issuing (QTI) project to expand direct sourcing options. This increases the number of approved procurement channels, reducing reliance on a single source and improving supply continuity for this critical lifesaving medicine. In Q3,

[6] Burkina Faso, Cameroon, DRC, Mozambique, Nigeria, Tanzania, and Zimbabwe.

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the project will establish contracts to operationalize procurement from the newly approved manufacturer, further mitigating ongoing supply risks.

Malaria

In Q2, GHSC-PSM continued placing purchase orders with awarded suppliers based on the FY 2026 RFQ allocations for artemisinin-based finished pharmaceutical products, seasonal malaria chemoprevention (SMC), malaria rapid diagnostic tests (mRDTs), and LLINs, using country funding received at the end of Q4 of FY 2025. All orders reflected updated pricing solicited for FY 2026. Notably, in FY 2026, GHSC-PSM awarded SMC volumes across three eligible suppliers for the first time in the life of the project, one of which was a local supplier in Kenya.

In Q2, the project held business review meetings with 13 suppliers across the artemisinin-based combination therapies (ACT), SMC, mRDT, and LLIN commodity groups. These discussions focused on key programmatic updates, including the resumption of temperature monitoring device rollout with geo-tracking capabilities for shipments originating from most countries[7], which was paused during the 2025 Stop Work Order. The meetings also covered forthcoming contractual changes to comply with the branding and marking plan, updated to reflect DOS guidance. Additionally, the meetings reviewed progress toward implementing EDI, transitioning from a document-based, manually managed supply chain to standardized, electronic data capture and information sharing with all trading partners.

In Q2, GHSC-PSM engaged ACT suppliers through a targeted survey to gain a clearer understanding of their operational footprint across key markets. The survey focused on identifying where ACT supply partners have local representation or subsidiaries, the roles these local entities play in target countries, and whether they stock or distribute ACTs for public and private markets. Suppliers are expected to respond to the survey in Q3.

Lastly, in Q2, following the issuance of a notice of concern and the subsequent delisting of an mRDT supplier, GHSC-PSM cancelled and re-sourced orders previously placed with the delisted supplier. Replacement orders were awarded to alternative eligible suppliers offering the best value, in alignment with GHSC-PSM's approved ordinal sourcing strategy for FY 2026.

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

In Q2, GHSC-PSM completed inspections, sampling, and laboratory testing for 34 health products across 140 purchase orders, in accordance with approved QA standard operating procedures and established lead times. These activities ensured that all procured malaria products met USG and international requirements for safety, efficacy, and quality before delivery to implementing countries.

[7] As per guidance received, geo-tracking devices are not permitted by the Chinese government.

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To support expanded product availability, the project completed method transfers at two independent third-party laboratories for artesunate injectable 30 mg kits (single-solvent product) and conducted a successful trial evaluation to add a new dual active ingredient (AI) LLIN to the list of eligible products.

The project also reviewed one new mRDT and one new topical repellent for eligibility. Additionally, through a review of historical documentation and manufacturing processes, the project developed technical specifications and a QA questionnaire for a spatial emanator, representing a new product category being procured for the first time under the project.

In Q2, the project's robust quality risk management and routine surveillance system helped manage six quality investigations, including three pharmaceutical products, two mRDTs, and one LLIN.

The pharmaceutical quality investigations are as follows:

An out-of-specification (OOS) friability result was reported for sulfadoxine/pyrimethamine (SP) 500/25 mg tablets in six batches during routine testing. Investigations conducted by both the testing laboratory and manufacturer determined that friability testing is required at product release only, and not as part of stability testing. GHSC-PSM reviewed applicable International Council for Harmonisation guidelines for new drug products and confirmed alignment with this interpretation. Based on these findings, the project will recommend product acceptance and removal of friability from the routine testing scope for this product, without compromising product quality or patient safety.

An assay OOS result for the amodiaquine API was identified in three batches of sulfadoxine-pyrimethamine + amodiaquine (SPAQ) dispersible tablets. The project coordinated a joint investigation with the manufacturer and laboratory, including phase I hypothesis testing and phase II confirmatory testing. Results confirmed the OOS in one batch. Given the use of SPAQ in SMC campaigns, the project will recommend the release of batches that met all quality specifications and the replacement of affected batches to ensure uninterrupted program implementation. The investigation remains ongoing.

An OOS result for an unidentified impurity was identified in artesunate + amodiaquine (ASAQ) infant and child formulations. The project's third-party laboratory is conducting additional confirmatory testing, including placebo analysis, to assess the validity and source of the result. The investigation remains ongoing.

Two separate investigations addressed reports of leaking or underfilled buffer bottles associated with mRDT kits shipped to Mozambique and Uganda. As the products were shipped concurrently with testing, GHSC-PSM issued a precautionary recommendation to quarantine the products upon arrival. Destination inspections confirmed that buffer volumes were acceptable overall. As a corrective action, affected batches with leaking buffer bottles are being replaced, while compliant units have been released for use. Preventive actions include enhanced supplier oversight through pre-shipment quality control (QC) testing and tightened inspection procedures consistent with ISO 2859 1:1999 standards.

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The manufacturer identified equipment misalignment during the filling process as the root cause and implemented corrective measures.

An OOS result for elevated chlorfenapyr AI content was identified in one of six batches of dual AI LLINs. This result was consistent with a previously investigated case in FY 2025. In alignment with WHO guidance and consultation with the WHO Prequalification Team–Vector Control (WHO PQT VC), previous analyses confirmed no increased toxicological risk to end users. Based on current findings, in process control data, and historical precedent, GHSC-PSM determined that the product met quality, safety, and efficacy requirements and will recommend its release.

During Q2, GHSC-PSM concluded QA activities related to a notice of concern for an mRDT product attributable to Good Manufacturing Practice (GMP) non-compliance with potential patient safety implications. The issue was immediately escalated to GHSD, and as a risk mitigation measure, the product was removed from the eligibility list and existing orders were canceled. Supplementary documentation, including certificate of conformity information, was shared for inclusion in the WHO Information Notice for Users 2026/01 to support decision-making by National Malaria Control Programs and National Regulatory Authorities for products already in-country.

Throughout the quarter, the project maintained regular coordination with USG and the Global Fund by facilitating QA-focused meetings to address emerging risks, strengthen supplier oversight, and share best practices. These efforts support uninterrupted access to quality-assured commodities while safeguarding patient safety and USG investments.

MCHN

GHSC-PSM works closely with GHSD to maintain a comprehensive list of eligible maternal and child health and nutrition (MCHN) commodities, including essential medicines, nutrition products, and lifesaving medical equipment.

Nutrition Products

In Q2, leveraging long-term agreements established with suppliers for nutrition products in Q1, GHSC-PSM processed nutrition requisition orders for six countries[8] and placed seven purchase orders for ready-to-use therapeutic food (RUTF), ready-to-use supplementary food, ready-to-use lipid-based nutrient supplement, small quantity, therapeutic milk, and therapeutic complex of vitamins and minerals (CMV), powder for reconstitution.

GHSC-PSM actively coordinated with Niger and Senegal to finalize order quantities for their nutrition requisition orders. This was challenging as both countries considered several supply scenarios as they worked to optimize their budgets while considering other MCH requirements. Sourcing events were completed for these two countries, along with Nigeria and Uganda. GHSC-PSM also continues to

[8] Ghana, Haiti, Malawi, Mali, Mozambique, and Tajikistan

coordinate with stakeholders in Bangladesh and the Democratic Republic of the Congo (DRC) to determine their nutrition needs.

In coordination with QTI[9], GHSC-PSM engaged an additional nutrition supplier to establish product eligibility for RUTF 510 gm biscuits requested by Tajikistan. The project will consider establishing a supply agreement in Q3.

MCH Commodities (Essential Medicines)

GHSC-PSM advanced maternal and child health (MCH) priorities within the essential medicines portfolio by introducing and continuing to scale-up key interventions, including multiple micronutrient supplementation (MMS) for pregnant and breastfeeding women, rehydration solution for malnutrition, and heat-stable carbetocin (HSC). A key achievement in Q2 was GHSD and QTI approval for the direct procurement of HSC. Recommended for the prevention of postpartum hemorrhage, HSC is particularly well-suited for low-resource settings due to its stability without cold chain requirements. Preparatory procurement activities have been initiated, with order placement and delivery anticipated in Q3 to support country-level implementation.

In parallel, GHSC-PSM continued to advance sourcing strategies for MMS through close collaboration with QTI, including engagement with a U.S.-based manufacturer to enable direct procurement. Manufacturer eligibility assessments are ongoing, and once confirmed, contract negotiations initiated in Q2 will be finalized in Q3. Across both MCH and HIV portfolios, these efforts reflect a deliberate focus on expanding access to priority commodities, strengthening procurement resilience, and positioning the program to respond effectively to evolving supply and demand dynamics in complex global health markets.

Furthermore, for essential medicines, the updated product list includes both existing and newly introduced products, aligning with evolving programmatic needs and technical guidance from GHSD. The products are available from pre-selected wholesalers under the Blanket Ordering Agreement for competitive pricing and efficient procurement. By maintaining a comprehensive list and defining eligible commodities in advance of each procurement cycle, GHSC-PSM has streamlined procurement planning and enhanced alignment between global health priorities and country-level demand forecasts, thereby strengthening overall supply chain readiness for FY 2026.

Procurement and Delivery Highlights in Q1:

HIV/AIDS

GHSC-PSM has delivered more than $4.44 billion in HIV commodities over the life of the project.

[9] QTI qualified the supplier and the product.

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- Delivered 240.4 million bottles of ARVs while reducing HIV treatment costs to $34 per patient per year.
- Delivered 71.2 million adult VL tests and 3.2 million EID tests for a total of over 74.4 VL/EID tests since the launch of the all-inclusive SLA program in 2020, generating savings of $352 million. Cumulative savings on all VL/EID orders for GHSC-PSM and other PEPFAR buyers since 2020 are more than $389 million with a total of 84.4 million VL/EID tests delivered.

In Q2, GHSC-PSM:

- Delivered more than $115 million in HIV commodities to 24 countries[10] and provided health supply chain operational support to 27 countries.[11]
- Delivered 5.9 million bottles of TLD 90-count bottles to twelve countries,[12] and 542,083 30-count bottles to Botswana and Zambia.
- Continued to prioritize and deliver pediatric HIV treatment, including ten shipments totaling 176,385 180-count bottles of pALD tablets to six countries,[13] two shipments totaling 89,682 90-count bottles of pALD tablets mg to Tanzania, and five shipments of abacavir/lamivudine to Angola, Botswana, and DRC.
- Delivered 2.9 million adult VL tests and 138,912 EID tests for a total of over three million VL/EID tests, with cost savings of approximately $19.9 million.
- Delivered laboratory supplies to 20 countries.[14]
- Achieved 88 percent OTD and 84 percent OTIF for HIV/AIDS commodities.

Malaria

GHSC-PSM has delivered nearly $1.58 billion worth of malaria medicines and commodities to 33 countries[15] over the life of the project.

In Q2, GHSC-PSM:

- Delivered over $70 million in malaria commodities to 26 countries[16] and provided health supply chain strategic support to 22 countries.[17]

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[10] Angola, Benin, Bolivia, Botswana, Burkina Faso, Burundi, Cameroon, DRC, Côte d'Ivoire, Eswatini, Ethiopia, Haiti, Honduras, Kenya, Mozambique, Namibia, Nigeria, Panama, Tanzania, Togo, Uganda, Ukraine, Zambia, and Zimbabwe.
[11] Angola, Benin, Botswana, Burkina Faso, Burundi, DRC, El Salvador, Eswatini, Ghana, Guatemala, Haiti, Honduras, Kenya, Lesotho, Liberia, Malawi, Mali, Mozambique, Myanmar, Namibia, Nigeria, Panama, Rwanda, Togo, Uganda, Zambia, Zimbabwe.
[12] Bolivia, Côte d'Ivoire, DRC, Eswatini, Kenya, Mozambique, Nigeria, Tanzania, Togo, Ukraine, Zambia, and Zimbabwe.
[13] Burkina Faso, Cameroon, DRC, Mozambique, Nigeria, and Zambia
[14] Benin, Botswana, Burkina Faso, Burundi, Cameroon Côte d'Ivoire, DRC, Eswatini, Ethiopia, Haiti, Honduras, Kenya, Mozambique, Nigeria, Tanzania, Togo, Uganda, Ukraine, Zambia, Zimbabwe.
[15] Angola, Benin, Burkina Faso, Burundi, Cambodia, Cameroon, Côte d'Ivoire, DRC, Ethiopia, Gambia, Ghana, Guinea, Guyana, Kenya, Laos, Liberia, Madagascar, Malawi, Mali, Mozambique, Myanmar, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, South Sudan, Tanzania, Thailand, Togo, Uganda, Zambia, and Zimbabwe.
[16] Angola, Benin, Burkina Faso, Burundi, Cambodia, Cameroon, Côte d'Ivoire, DRC, Ethiopia, Gambia, Ghana, Guinea, Kenya, Liberia, Madagascar, Malawi, Mali, Mozambique, Nigeria, Senegal, Sierra Leone, Tanzania, Togo, Uganda, Zambia, and Zimbabwe.
[17] Angola, Benin, Burkina Faso, Burundi, Cambodia, DRC, Ghana, Guinea, Kenya, Liberia, Madagascar, Malawi, Mali, Mozambique, Niger, Nigeria, Rwanda, Sierra Leone, Togo, Uganda, Zambia, Zimbabwe

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- Procured malaria commodities with a total value of nearly $64 million for 26 countries.[18]
- Delivered over 55.4 million mRDTs to eight countries.[19]
- Delivered over 3.4 million sulfadoxine-pyrimethamine (SP) treatments to three countries[20]
- Delivered nearly 20 million ACTs to 13 countries[21] (nearly 674 million over the life of the project).
- Delivered more than 21 million LLINs to 16[22] for distribution as a malaria prevention measure.
- Delivered the first orders of artesunate injectable single solvent to Angola, Ghana and Tanzania.
- Delivered 105,915 packs of AL-DT (artemether-lumefantrine dispersible tablets) to Cameroon, Malawi, Nigeria, and Zimbabwe, along with 86,617 packs of AL-HT (hard tablets) to Malawi, Mozambique, and Nigeria from stock sourced from two vendor stored inventory suppliers.
- Delivered 8,517,400 dual AI nets to Nigeria, which were procured by the Against Malaria Foundation in support of the country's planned distribution activities.
- Delivered SPAQ to Benin, Cameroon, Ghana, Kenya, Nigeria, and Togo in advance of the upcoming 2026 SMC campaigns.
- Expedited urgent procurement needs by liaising with the local supplier in Kenya and coordinating with QA/QC to support the final release and delivery of SPAQ for Kenya within three months of RO creation.
- Achieved 81 percent OTD and 84 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 life-saving commodities 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 Q2, 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.

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

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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	$551,078,194	$171,891,826	$433,722,808	$345,110,613	$1,501,803,442	77%
HIV - antiretroviral commodities	$182,100	$849,424,633	$823,974	$1,633,150,293	$2,483,581,000	34%
HIV - all other commodities	$7,100,977	$9,776,257	$135,929,269	$247,661,359	$400,467,863	38%
Malaria - rapid diagnostic tests	$15,411,249	$137,912,917	$0	$81,123,022	$234,447,188	65%
Malaria - all other commodities	$462,751	$302,881	$92,449	$1,501,668,909	$1,502,526,990	< 1%
Total Procurement Value	$574,235,271	$1,169,308,514	$570,568,500	$3,808,714,197	$6,122,826,482	38%

Shipping via U.S.-based Third-party Logistics (3PLs) 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 Q2, U.S.-based 3PLs accounted for 95 percent of the project's total international logistics spend during this period. Recent lane awards further demonstrate this alignment, with U.S. 3PLs managing 90 percent of all 470 shipments booked in Q2, including 84 percent of air freight, 98 percent of ocean freight, and 100 percent of truck lanes delivering through first ports of entry in destination countries.

Furthermore, in Q2, the project significantly exceeded U.S. Maritime Administration requirements, with 80.71 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 deteriorated further in Q2 as the U.S.-Iran conflict escalated into a direct, multi-domain disruption of global trade corridors. The conflict has materially affected maritime security, airspace accessibility, fuel markets, insurance availability, and carrier network design. While global freight systems remain operational, cost, reliability, and routing predictability have worsened across all modes, increasing risk to global supply chains.

Maritime Environment: Security conditions across the Persian Gulf, Gulf of Oman, Red Sea, and Gulf of Aden remained unstable throughout Q2, with heightened war-risk exposure and insurance constraints—particularly around the Strait of Hormuz and the southern Red Sea. As a result, most Asia-Europe and Asia-Africa services continued to bypass the Suez Canal and route via the Cape of Good Hope, extending transit times by approximately 10-14 days and absorbing an estimated 5-7 percent of effective global container capacity. While headline ocean freight rates softened from early 2025 peaks, total landed costs remained elevated and volatile as carriers applied fuel, emergency/security surcharges, and insurance premiums and managed capacity through blank sailings.

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Schedule reliability remained weak as carriers prioritized asset security and cost recovery over service consistency.

Air Cargo: Air cargo conditions tightened significantly in Q2 as the US-Iran conflict removed critical Middle East airspace and reduced hub throughput, forcing longer routings between Asia, Europe, and Africa and extending block times. Reduced operations by Gulf carriers further tightened global airfreight networks, particularly for Africa- and Middle East-linked lanes. Fuel volatility and extended routings pushed air cargo markets into a state dominated by the carriers' demands, with rising spot rates and constrained availability. As ocean schedule reliability deteriorated, air freight was increasingly used as a contingency mode, further tightening space and complicating access for humanitarian shipments.

Africa Port Operations: Rerouted global vessel flows continued to concentrate traffic along African corridors during Q2, sustaining moderate to high congestion at key gateways including Abidjan, Appa, Dar es Salaam, Durban, and Mombasa. Typical vessel waiting times ranged from three to seven days, with episodic spikes linked to Cape-diverted arrivals and schedule bunching. While some ports implemented targeted productivity improvements, operations remained vulnerable to weather-related disruptions, equipment constraints, and inland logistics bottlenecks. Inland transport costs, particularly in DRC, Mozambique, and Nigeria, also rose amid fuel price volatility and limited surge capacity, increasing last mile delivery risk and complicating downstream delivery planning.

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

- Actively monitoring US-Iran conflict developments and associated maritime and airspace disruptions.
- Strengthening budget controls and cost containment measures amid surcharge and fuel volatility.
- Working closely with freight forwarders and carriers to preserve routing flexibility and prioritize critical shipments.
- Applying multimodal strategies selectively to balance speed, cost, and reliability and protect continuity of supply.

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

Driving Supply Chain Excellence

Operational Excellence: In Q2, GHSC-PSM strengthened operational efficiency and supply chain visibility by advancing automation, optimizing internal systems, and implementing targeted cost-saving measures across procurement, logistics, finance, and reporting operations. Key achievements include developing an AI-enabled freight invoice payment system to streamline logistics payments and eliminate the need for a third-party invoice review service. The project also improved responsiveness

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to emerging global risks by introducing a dedicated "Iran War Report" to track shipments affected by disruptions in the Strait of Hormuz.

Supply Chain Management Information: ARTMIS[23] 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 statuses, and account for holds and cancellations. In Q2, the project maintained and updated key system capabilities to support evolving operational needs, including MCHN workflows, electronic data interchange (EDI) requirements, supplier participation tracking, and continued order management functionality.

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. By aligning project activities with each country's national strategies, GHSC-PSM provides 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. These country-driven successes, from sustaining access to lifesaving malaria treatment in Burma to strengthening HIV service delivery in Eswatini and advancing evidence-based supply chain decision-making in Mali, are highlighted in Annex B: 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. The project consolidates and analyzes country-level data to support timely updates to supply plans and also uses the information in engaging with suppliers to expedite orders and delivery timelines where necessary, ensuring that lifesaving commodities arrive when and where they are needed most.

[23] 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.

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 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 tuberculosis preventative treatment 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 Q2, GHSC-PSM reported monthly on 72 unique commodity stockout risks across 24 countries. The most common causes of stockout risks were funding gaps, expiries, late order placement and delivery of Global Fund funded orders, late order placement and delivery of host-Government funded orders, and increased consumption. The products most reported as "at risk of stockout" were adult ARVs, VL/EID reagents and consumables, and HIV rapid test kits. Reported stock-outs 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.

Malaria

In Q2, GHSC-PSM conducted monthly reviews and reporting on 30 unique malaria commodities across 27 countries (all funding sources). Leveraging existing sourcing strategies and strong supplier relationships, the project continues to mitigate potential stockout risks stemming from the transition from USAID to DOS. With MOP24 funding obligations received in Q4 FY 2025, GHSC-PSM placed orders in Q1 FY 2026 and continues to engage with countries and suppliers to expedite delivery timelines in response to several countries reporting potential stockout risks.

As of the end of Q2, the horizon projection was reverted from a 12-month forecast to a six-month forecast, and the report indicated that up to four countries could face potential stockouts of AL 6x1–6x4, with GHSC-PSM shipments expected to mitigate shortages in three. Malaria RDTs and artesunate 60mg injection each showed projected stockouts in two countries, with only one covered by scheduled GHSC-PSM shipments. SP was expected to run short in five countries, two of which have GHSC-PSM shipments scheduled. For LLINs, only one out of the seven countries with projected stockouts currently has GHSC-PSM shipments underway. There is an increasing risk of stockouts on the horizon, with limited mitigation options available, particularly in light of the pause on new orders and the acceleration of final deliveries. The project is working with host governments on commodity funding advocacy as well as to identify available funding resources from other partners to meet outstanding requirements and mitigate country stockouts.

GS1 Standards for Traceability

GHSC-PSM was directed in Q1 to restart GS1-related activities in alignment with the America First Global Health Strategy and in response to country commitments and governance frameworks emerging through MOU agreements. GHSC-PSM and GHSD finalized a scope of work focused on providing tangible benefits to supply chain operations and helping receiving warehouses to advance visibility and management of USG-funded commodities.

In Q2, GHSC-PSM reactivated the EDI project and provided guidance to numerous countries regarding GS1 implementation requirements.

Electronic Data Interchange

In Q2, GHSC-PSM advanced the EDI initiative by completing a technical review of program materials, including required data sets, XML message mappings, and sample files, while coordinating with the EDI vendor to address contractual and technical implications arising from the acquisition of the original EDI vendor. The project also re-engaged internal teams, suppliers, and country counterparts; assessed the readiness of ARV, laboratory, and malaria suppliers for EDI participation; introduced the initiative during supplier business reviews; and conducted preliminary assessments of candidate countries for dispatch implementation, including reviews of GS1 readiness in Nigeria and Zambia.

Supporting Country GS1 Implementation Planning

In Q2, GHSC-PSM supported multiple countries seeking guidance on GS1 implementation in alignment with emerging MOU commitments. To support these efforts, the project developed and disseminated strategic guidance materials, including a concept note on GS1 standards and a high-level implementation roadmap outlining core activities, system changes, and an indicative implementation sequence, while also providing targeted country support in Eswatini, Kenya, Tanzania, and Uganda.

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 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.

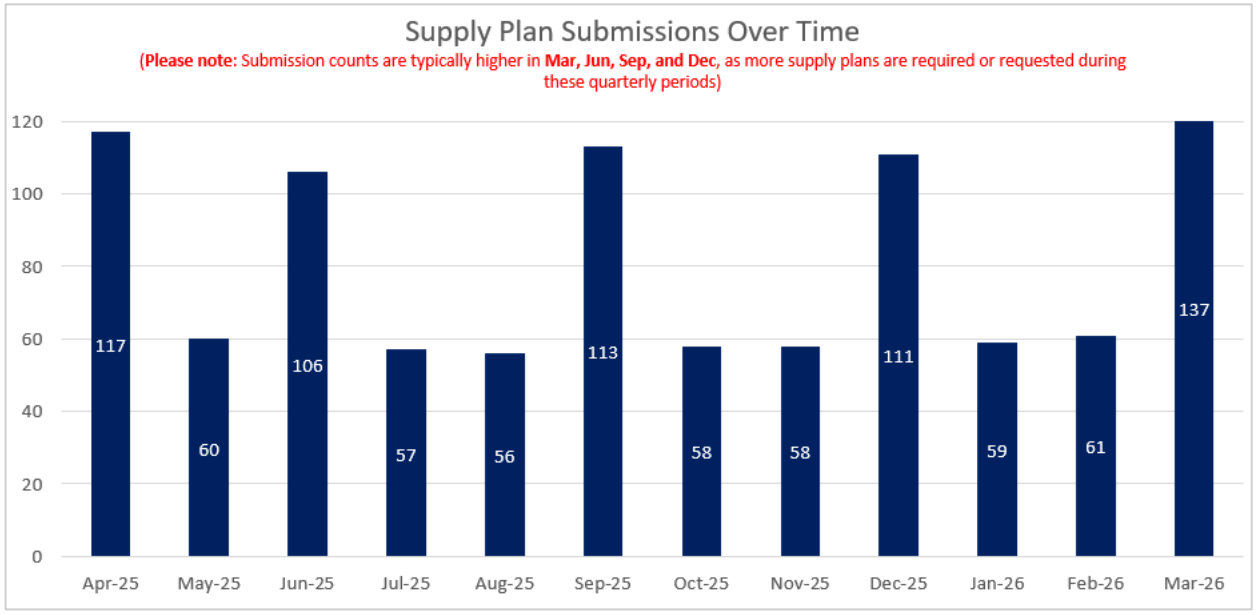
Forecasting and Supply Planning

GHSC-PSM continues to support countries' use of the Quantification Analytics Tool (QAT), a country-led forecasting and supply planning (FASP) platform. In Q2, GHSC-PSM received 137

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quarterly supply plan updates from 32 countries[24] through QAT (see Exhibit 5). The project also conducted trainings on the QAT forecasting and/or supply planning module in Cameroon and Tanzania. The workshop in Tanzania trained six new QAT trainers and a cohort of new users. In addition, the project supported the onboarding of historical data for ARV, laboratory, and malaria programs, and provided HQ support for a malaria annual quantification exercise in Angola. To date, GHSC-PSM has trained 44 countries[25] on QAT, with 832 active users[26] worldwide.

Exhibit 5: Country Supply Plan Submissions Using QAT



GHSC-PSM continues to support countries to submit supply plans every month, in addition to the quarterly submissions. This shift to more frequent submissions for high-priority programs improves visibility into real-time supply dynamics, enabling the project to anticipate and mitigate disruptions to the supply chain and monitor stockout risks.

In Q2, the project responded to a request from GHSD to produce actionable procurement plans and gap analyses for 22 countries receiving funding for HIV commodities for FY 2026, expanding beyond the bridge period. These plans were largely an output of QAT and were meant to establish order placement and approval expectations for GHSD and U.S. Embassy teams, while also highlighting commodity funding gaps and enabling the USG to respond to potential stockout situations. Through supply plan

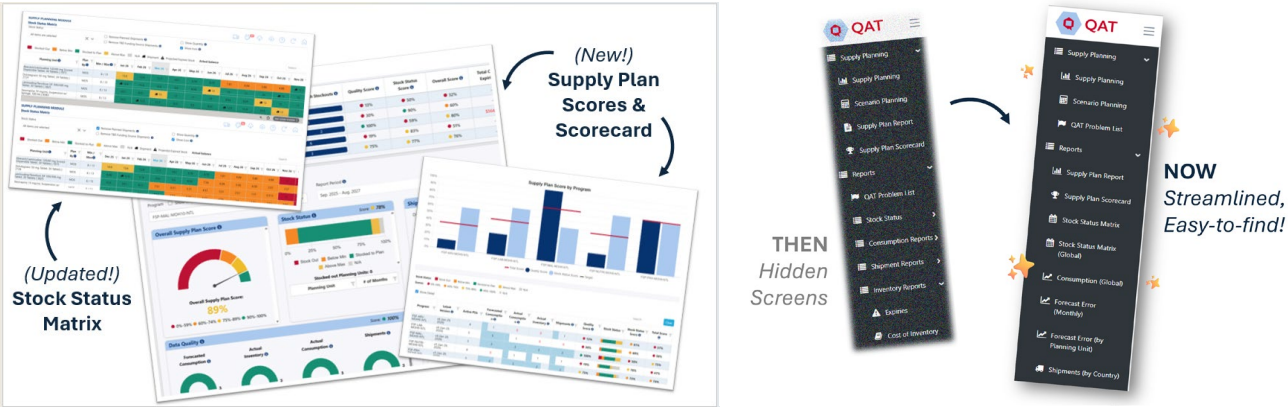
[24] Angola, Benin, Botswana, Burkina Faso, Burundi, Cambodia, Cote d'Ivoire, Cameroon, DRC, Eswatini, Ethiopia, Ghana, Guinea, Haiti, Kenya, Lesotho, Liberia, Madagascar, Malawi, Mali, Mozambique, Myanmar, Niger, Nigeria, Rwanda, Senegal, Sierra Leone, Tanzania, Togo, Uganda, Zambia, and Zimbabwe.
[25] Angola, Benin, Botswana, Burkina Faso, Burundi, Cambodia, Cameroon, Cote d'Ivoire, DRC, El Salvador, Eswatini, Ethiopia, Ghana, Guatemala, Guinea, Haiti, Honduras, Kenya, Laos, Lesotho, Liberia, Madagascar, Malawi, Mali, Mauritania, Mozambique, Myanmar, Namibia, Nepal, Niger, Nigeria, Pakistan, Panama, Rwanda, Senegal, Sierra Leone, Somalia, South Sudan, Tanzania, Thailand, Togo, Uganda, Zambia, and Zimbabwe.
[26] Active QAT users refer to those with an active status who have logged in within the last 12 months.

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data and other internal sources of information, the project also began preparing an analysis of the last "must order by dates" for GHSC-PSM shipments, a key resource in planning for upcoming transitions.

The project also launched several software enhancements to QAT, including updated shipment, consumption, and stock status reports, improvements in supply plan validation, and a brand-new Supply Plan Scorecard feature (see Exhibit 6), which will help country supply planners benchmark their supply plan data quality and stock status.

Exhibit 6: Updates To QAT Features



In addition, the project launched new and improved terms of use, including an updated End-User License Agreement (EULA), Data Processing Agreement (new), and Privacy Notice (new). Together, this set of terms ensures that QAT is compliant with General Data Protection Regulations and sets the stage for multi-stakeholder management and governance of the application.

Last Mile Delivery and Distribution Support

GHSC-PSM is responsible for the last mile delivery of life saving 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[27], GHSC-PSM will report this indicator by:

- Number of facilities receiving commodities through USG-funded last mile distribution (see Exhibit 7)
- Quantities of commodities[28] distributed via USG-funded last mile distribution services (see Exhibit 8)

In Q2, GHSC-PSM conducted last mile deliveries of life-saving commodities in ten countries, delivering to the doorstep of 11,992 facilities.

[27] Eligibility for inclusion of LMD data within this reporting are based on the date when GHSC-PSM confirmed the delivery occurred rather than 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.
[28] Commodity totals will contain both USG-funded commodities and other entity-funded commodities.

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Exhibit 7. Health Facilities receiving USG-funded last mile distribution support in Q2.

Number of facilities receiving commodities through USG-funded last mile distribution in Q2, by country											
Unique Facility Count	Angola	Congo DRC	Ghana	Haiti	Malawi	Nigeria	Sierra Leone	Togo	Zambia	Zimbabwe	Q2Total
HIV/AIDS	13	401	45	91		1,523		29	302		**2,404**
Malaria		3,633	79		718	4,017	1,361		419	73	**10,300**
Country Total	**13**	**3,921**	**84**	**91**	**718**	**5,171**	**1,361**	**29**	**531**	**73**	**11,992**

Exhibit 8. Quantities of commodities distributed via USG-funded last mile distribution services in Q2.

Quantity of health commodities distributed via USG-funded last mile distribution (LMD) services in Q2			
Health Program Area	Tracer Category	Quantity Delivered	Units
HIV/AIDS	Adult ARVs	345,061	Patient-Year Treatments
	Pediatric ARVs	27,234	Patient-Year Treatments
	HIV RTKs	9,556,502	Tests
Malaria	ACTs	2,888,316	Treatments
	LLINs	1,454,442	Nets
	mRDTs	5,771,709	Tests

LMD support under TO1

To protect continuity of lifesaving HIV treatment and ensure uninterrupted access to vital viral load 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 Eswatini, emergency redistribution and intensified coordination helped prevent HIV testing disruptions and maintain services nationwide. In Ghana, new HIV diagnostic kits were distributed to facilities to support rollout of an updated national testing algorithm. In Togo, accelerated delivery of 180-count TLD bottles supported continued six-month dispensing for patients receiving HIV treatment. Complementing these operational efforts, countries including Mali, Zambia, and Zimbabwe strengthened the systems, data visibility, and supply planning needed to support reliable commodity availability at the point of care.

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 various 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.

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Support for Routine LLIN Distribution: An example of the project's continuous support to national program objectives is its rapid response to an emergency in Liberia. At the request of the National Malaria Control Program (NMCP), the project quickly mobilized to prevent LLIN stock-outs in Margibi County. Through coordinated emergency last mile distribution, GHSC-PSM delivered 6,250 LLINs to 26 health facilities, restoring stock levels critical for routine distribution during antenatal care. The team leveraged electronic logistics management information system (eLMIS) data to confirm consumption trends and prioritize high-burden facilities, while coordinating transport to serve hard-to-reach facilities. Continuous coordination calls with the NMCP and county leadership helped resolve bottlenecks and ensure timely delivery.

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 a continuing activity that GHSC-PSM provides both strategic and operational support to, working with government counterparts and stakeholders to conduct comprehensive reviews of existing first line malaria commodity stock, forecast and plan for the introduction of new treatment molecules, and guide distribution planning to ensure all commodities required for MFT rollout are available at facility level. This approach strengthens governments' ability to meet national malaria treatment goals while reducing the risk of stock loss through expiry. See Annex B: 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 Q2, collaboration remained an essential part of the recovery of the supply chain following the stop work order (SWO) in 2025. 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 the Global Fund (both globally and in supported countries) to identify stockout risks and to identify mitigating options.

In Q2, GHSC-PSM presented the results of its annual allocation management process for pALD orders to the ARV Procurement Working Group. 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.

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 inclusion of spatial emanators as a new tool in the prevention and elimination of malaria, and the topic was discussed extensively

throughout Q2. The LLIN Global Donor Coordination Call also served as a platform to align on incorporating resistance to damage scores as a product durability metric into sourcing evaluations to enhance value for money. In the vector control space, GHSC-PSM collaborated closely with the Against Malaria Foundation 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 early Q2, the project participated in the Vector Control Market Strategy Meeting in London, contributing alongside global stakeholders to market strategies and market-shaping initiatives. Participants focused discussions on ensuring continuity of supply, maintaining a strong innovation pipeline, and promoting equitable market access in alignment with USG activities in support of the new global health strategy.

Furthermore, GHSC-PSM supported GHSD's engagement with the Supply Chain Funders Forum secretariat to facilitate QAT becoming a shared platform across multiple global health stakeholders. Through these discussions, a QAT Governance Council, which includes funders outside of the USG, was established. This shared approach aims to preserve QAT as a digital public good that continues to deliver value across the global health community. Anticipating that the QAT Governance Council intends to fund additional members to join the GHSC-PSM FASP team to form a QAT Management Team, GHSC-PSM began preliminary lesson plans to support the training of these new staff.

ANNEXURES

Annex A: Cost Savings on Health Commodities and Logistics

Annex B: Country Stories

Annex C: Performance on Project Indicators

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ANNEX A: COST SAVINGS ON HEALTH COMMODITIES AND LOGISTICS

COST SAVINGS ON COMMODITIES

GHSC-PSM conducts regular and detailed analysis to understand the markets for the medicines and health commodities it procures and to bring this knowledge to supplier negotiations. Through carefully negotiating long-term contracts for major product groups, such as viral load testing, GHSC-PSM has saved $1.88 billion on commodities over the life of the project, as shown in Exhibit 9.

Commodity cost savings are realized through:

- Aggregated country demand, executed through pooled procurement, consolidates purchasing power, reduces fragmentation, and secures lower unit prices, maximizing value and return on U.S. taxpayer investments.
- Intentional diversification of qualified manufacturers ensures a healthy and competitive marketplace, reduces reliance on single suppliers, and protects U.S.-funded procurements from supply disruptions and price volatility.
- Long-term pricing agreements with manufacturers stabilize costs over time, insulating U.S. investments from inflation, market shocks, and short-term price spikes
- Predictable, more frequent sourcing with clear demand visibility increases supplier competition and efficiency, securing more responsive and cost-effective pricing for U.S.-funded HIV commodities (e.g., the All-inclusive SLAs for VL/EID and the Southern Africa ARV VMS program)
- Innovative procurement models, including all-inclusive diagnostic pricing and VMS, reduce total system costs, improve budget predictability, shorten lead times, and improve access to HIV testing and treatment.

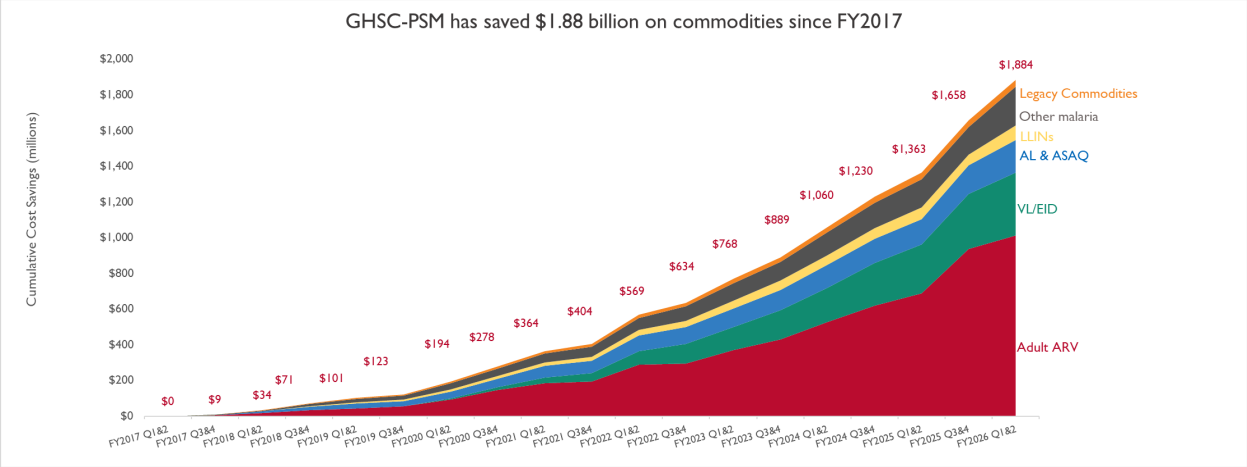
HIV/AIDs commodities have accumulated $1.37 billion in savings for key products as of FY 2026 Q1 and Q2. The primary drivers behind these savings are adult ARVs, mostly both D-incoterm TLD and FCA-incoterm TLD products, which have collectively contributed $975 million. VL/EID products have also contributed $352 million to the life of project cost savings figure.

Malaria commodities have accumulated $482 million in savings for key products as of FY 2026 Q1 and Q2. The primary drivers behind the growth in cost savings this term were AL products, mRDTs, and LLINs. For individual product contributions, see the sections below.

Commodity cost savings are calculated using a comparison of the weighted average baseline cost of products when they were first procured to an average weighted cost of the product in the current review period, adjusted for inflation as determined by the USG Bureau of Labor Statistics (BLS) consumer price index (CPI). To produce long-term value and sustainability, GHSC-PSM achieved these cost savings while working to create and maintain healthy supply

markets in the various commodity categories, so the USG can benefit from a competitive supplier base. Additional savings have also accrued as prices for commodities have risen more slowly than the general rate of inflation. This analysis is provided in each section for each task order.

Exhibit 9. Life of Project Savings on Medicines and Health Commodities



HIV/AIDS

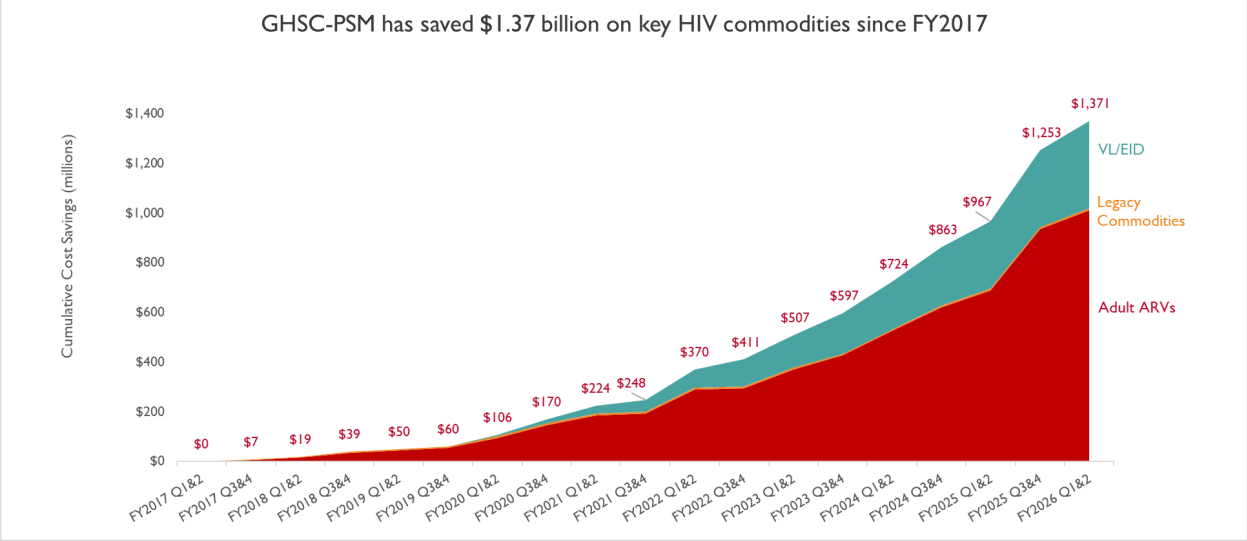
Over the life of the project, GHSC-PSM has accumulated $1.37 billion in cost savings on key HIV/AIDS commodities. In FY 2026 Q1 and Q2, there were two commodity types that drove the growth of cost savings: adult ARVs and VL/EID products. TLD, the most purchased commodity in the adult ARV category, has both D-incoterm and FCA incoterm products (see Exhibit 10).

Cost savings on ARVs: As of the first half of FY 2024, TLD orders purchased under D-series Incoterms are now included in the adult ARV commodity cost savings calculation. Therefore, the commodity cost savings calculation now more accurately reflects the procurement of TLD products. For FY 2026 Q1 and Q2, D-term TLD orders accounted for 14 percent of TLD purchase orders this term, garnering an additional $11 million in cost savings. The remaining TLD purchase orders were issued under FCA, which garnered an additional $80 million in cost savings, due to strategic sourcing practices through vendor diversity and bulk purchasing. TLD orders in FY 2026 Q1 and Q2 had a decrease in procurement volumes compared to FY 2025 Q3 and Q4, and therefore, this term saw a slower accumulation of commodity cost savings for this product category.

Cost savings on VL/EID Laboratory commodities: Commodity cost savings for VL/EID laboratory commodities have been reported since the 2020 global request for proposals (GRFP). Due to the unique requirements of the GRFP, procurements included SLAs for equipment rental, maintenance, and repair. Therefore, the viral load savings methodology calculates a "savings per test" (rather than "savings per saleable unit) to reflect the holistic savings achieved. VL/EID

savings also factor inflation into the final savings figure, in line with all other commodity cost savings reported by the project. This adjustment started in Q4, FY 2024 and is applied retroactively. As of FY 2026 Q1 and Q2, VL/EID products have accumulated $353 million in savings over the life of the project.

Exhibit 10. Life of Project Savings on Key HIV Commodities



Malaria

Over the life of the project, GHSC-PSM has accumulated $482 million in cost savings on major malaria products (see Exhibit 11). In FY 2026 Q1 and Q2, six product categories were the drivers of cost savings: AL, ASAQ, LLINs, mRDTs, severe malaria medicines, and SPAQ.

Five different AL products had impacts during this period: AL 6x1, AL 6x1 dispersible, AL 6x2 dispersible, AL 6x3 and AL 6x4. AL 6x1 was procured significantly less than the AL 6x1 dispersible, with both products showing an increase in procurement amounts in FY 2026 Q1 and Q2 compared to FY 2025 Q3 and Q4, and maintained the same providers for consistent cost savings growth. AL 6x1 is usually only procured by one country (Senegal), but large quantities were ordered for a second country (Cote d'Ivoire) in FY 2026 Q1 and Q2. AL 6x3 also saw consistent procurements and vendors, and therefore consistent costs. AL 6x2 dispersible doubled its procurement in FY 2026 Q1 and Q2 compared to FY 2025 Q3 and Q4, and utilized some vendors that were not awarded in recent years, helping diversify the vendor mix and keeping costs low. AL 6x4 also doubled its procurement volume this period compared to the previous period, with decreased average costs in two of the five vendors this term, allowing for greater accumulation of commodity cost savings. The procurement increases in FY 2026 Q1 and Q2, when compared to FY 2025 Q3 and Q4, are mostly due to the timing of when more funding obligations were received. Current pricing of AL presentations remains below historical levels, meaning all procurement volumes from the most recent period contributed to the continued LOP savings growth.

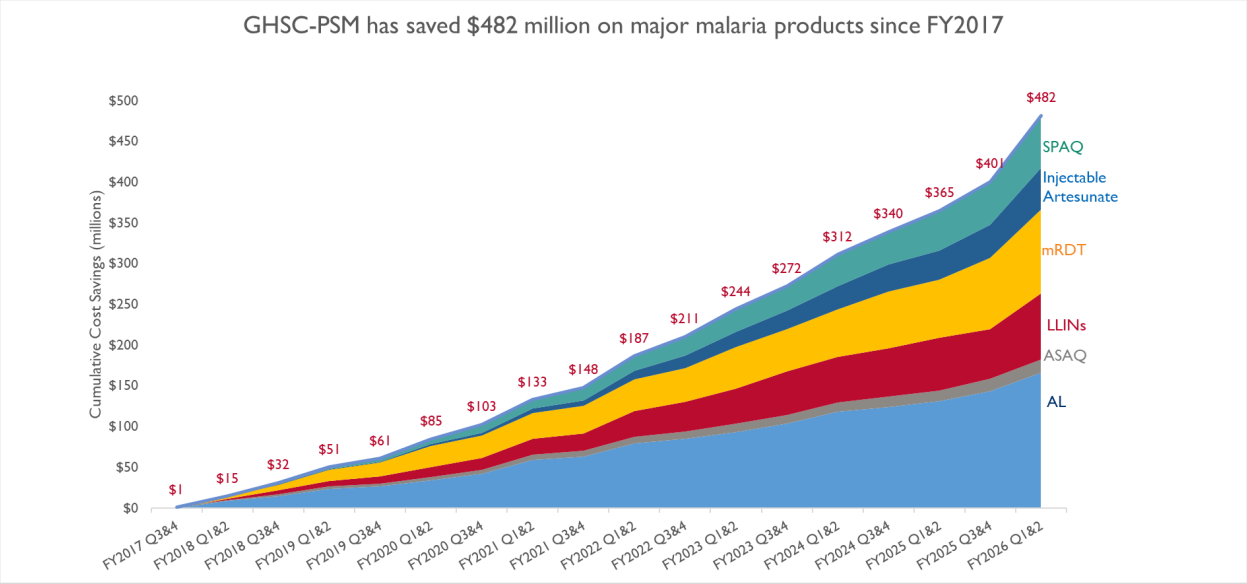
ASAQ products saw decreased procurements this term, with ASAQ 100/270 25x3 having half the number of procurements in terms of units this half of the year compared to FY 2025 Q3 and Q4; ASAQ 100/270 25x6 had one-fourth the procurement amount, ASAQ 25/67.5 had one-tenth the procurement amount, and ASAQ 50/135 had one-third the procurement amount. Generally, the ASAQ procurements went to the lower cost providers this term, with a notable change in ASAQ 100/270 25x6 shifting to a mid-cost provider this term, as opposed to a higher cost provider that was utilized more in FY 2025 Q3 and Q4. ASAQ products contributed to the growth of commodity cost savings, albeit in a lesser amount than in some previous terms due to smaller procurement.

In the LLIN market, demand for PBO and single pyrethroid nets has generally lessened as dual AI nets continue gaining popularity. Most categories of nets, however, saw an increase in procurement during FY 2026 Q1 and Q2 compared to FY 2025 Q3 and Q4, with the exception of dual AI 150 cm nets and single pyrethroid 170 cm nets. The other net categories (dual A1 170 cm, PBO 150 cm, PBO 170 cm, and single pyrethroid 150 cm) had significantly larger procurements this half of the year, with the largest bump in procurement for PBO 150 cm, having ten times the amount of nets procured when compared to FY 2025 Q3 and Q4. PBO 150 cm demand spiked due to four different Nigeria campaign procurements occurring this term. The most popular net, however, is dual AI 170 cm with over 10 million nets procured in FY 2026 Q1 and Q2. Prices for nets remain consistently low, with diverse vendors in the market for most net types, and most of the procurement for each net going to lower-cost providers. Only single pyrethroid 150 cm nets saw an increase in the weighted average cost per net this term, due to more procurement allocated to the higher cost provider, which procured less than a million units.

MRDTs had a diverse vendor mix in FY 2026 Q1 and Q2, and had similar procurement amounts to FY 2025 Q3 and Q4, contributing consistently to the growth in commodity cost savings, as inflation-adjusted negotiated product prices remain below historical pricing levels. Severe malaria medicines more than doubled procurement this term, utilizing the same vendors at the same prices as last term, further contributing to a net growth in commodity cost savings.

In FY 2026 Q1 and Q2, SPAQ procurements were split between SPAQ 150 and SPAQ 75, with both products doubling procurement when compared to FY 2025 Q3 and Q4, due to this product having seasonal ordering. SPAQ 150 reintroduced a vendor who had not been used since the start of the previous year, at a lower cost, which took nearly half of these procurements. SPAQ 75 also has a more diversified vendor mix this term. Both SPAQ products saw slight increases in the weighted average cost per product due to more procurements proportionally shifting to higher cost providers. However, both products remained below their baseline costs and therefore contributed to a net growth in commodity cost savings.

Exhibit 11. Life of Project Savings on Key Malaria Commodities



COST SAVINGS ON LOGISTICS

GHSC-PSM has saved $197.3 million on logistics costs over the life of the project.

Cost savings are realized through:

- Open competition in freight lanes
- Optimization of the RDC network
- Strategic packing to reduce shipping costs
- Shipping of malaria commodities by ocean over air

Open competition in freight lanes. GHSC-PSM saves money on shipments by managing through a fourth-party logistics model that competes lanes between 3PL shipping companies to improve service and reduce costs. This leads to cost savings on shipping rates versus an alternative approach with limited or no competition for shipping lanes (a simple 3PL approach) through scale and competition. Over the life of the project, GHSC-PSM has saved $50.9 million on shipments (See Exhibit 12).

Exhibit 12. Cost Savings through Open Competition in Freight Lanes

Health Area	Benefits of Competing Freight Lanes
HIV/AIDS	$37,917,311
Malaria	$11,256,104
Legacy commodities	$1,720,798
Grand Total	**$50,894,213**

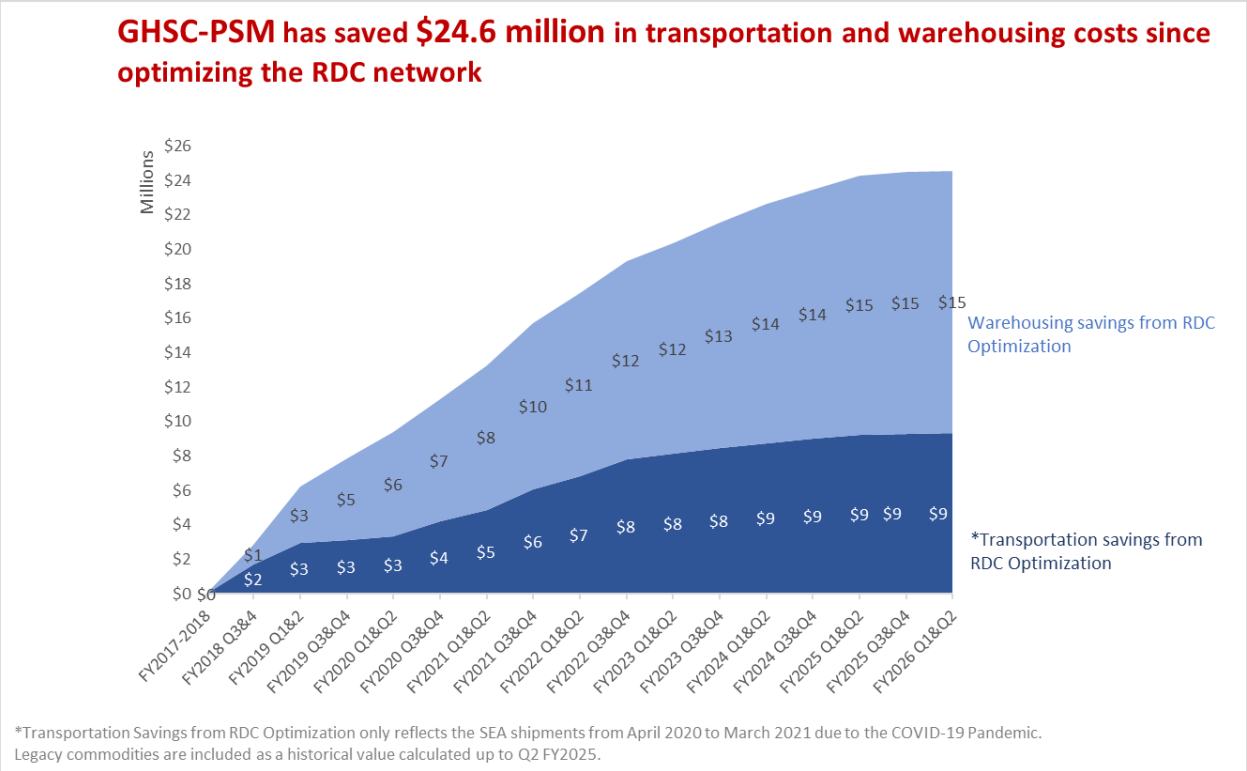
As of Q3, 2019, logistics savings were calculated as the difference between the rates awarded to the selected 3PL and the average of the two most expensive 3PLs. This method provides a comparison of all shipping lanes and simulates the rates that would likely be obtained under a non-competitive 3PL model. The project uses shipping data and annual 3PL rates for the specific timeframe of the shipment being measured to calculate these cost savings. At times, annual 3PL rates were not available due to market conditions; adjustments were made to past rates to track these savings more accurately with the available information.

Optimizing the RDC network. GHSC-PSM saves money on logistics by optimizing the project's network of RDCs. Savings are generated through:

- Warehousing savings from lower costs at the project's two RDCs (Dubai and Belgium).
- Transportation savings from shipping costs on actual commodities that moved through the RDCs, compared to what shipping would have been for those commodities under the previous, five-warehouse model (Ghana, Kenya, Netherlands, Singapore, and South Africa). These savings are in addition to cost savings generated by negotiating lower shipping rates.

GHSC-PSM saved $24.6 million in transportation and warehousing costs since optimizing the RDC network. Exhibit 13 shows cost savings from RDC optimization; the light blue indicates warehouse savings and the dark blue, transportation savings.

Exhibit 13. RDC Optimization Cost Savings



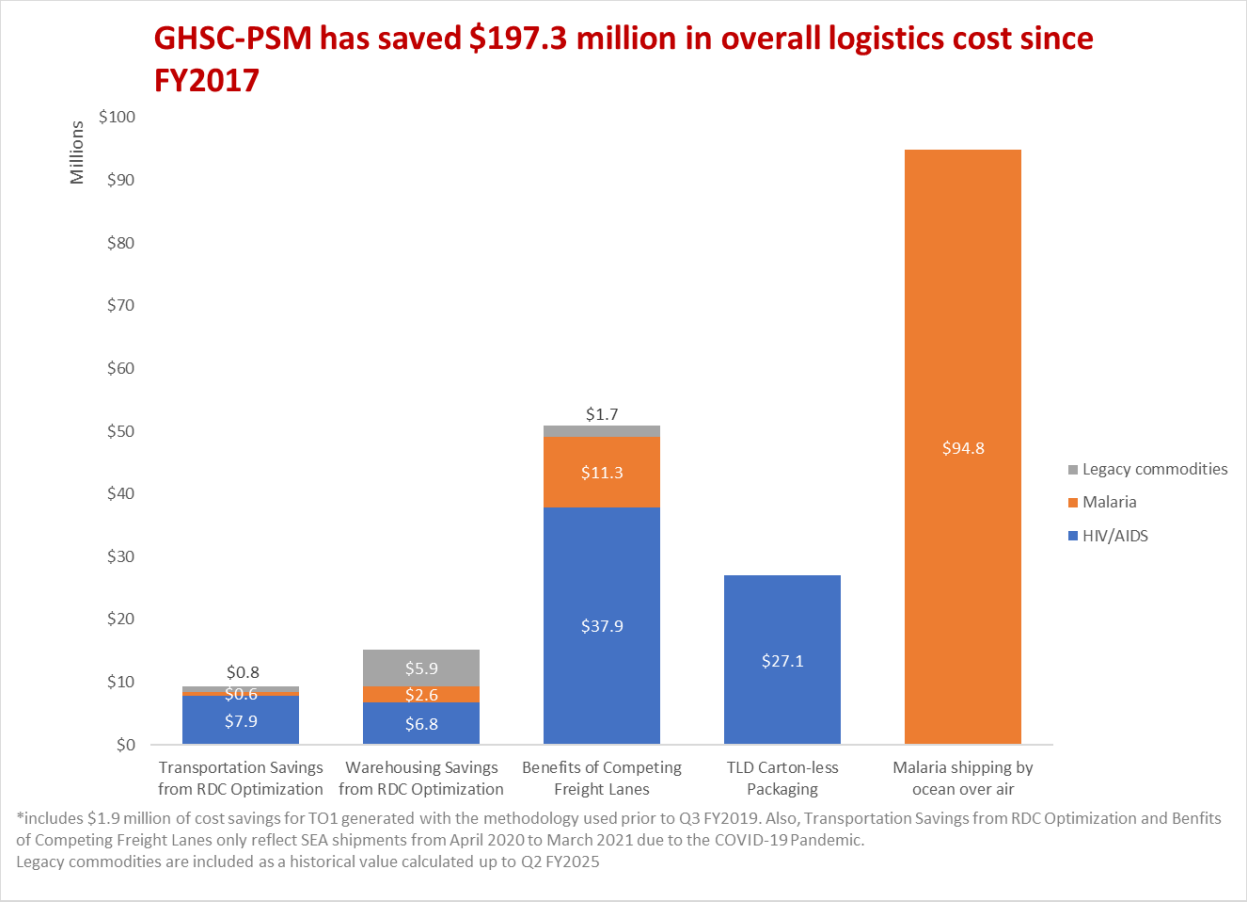
Strategic packaging to reduce shipping costs. GHSC-PSM saves money on logistics by reducing the weight and shipping containers needed to transport TLD products. In FY 2019, the project began procuring TLD in carton-less packaging and introduced larger pill counts in TLD bottles. Carton-less is a term global health procurement agents use to refer to ordering and handling pharmaceutical products by the bottle and without the external boxes around each individual bottle. Before FY 2019, GHSC-PSM standardized the TLD pack size to 30-tablet bottles.

Since FY 2019, GHSC-PSM shifted to procuring 90- and 180- count tablet bottles. These changes allow suppliers to fit more total tablets in shipping containers for sea shipments and reduce total shipment weight for air shipments, thus saving $27.1 million in logistics costs for both FCA and D-Term shipments.

Malaria shipping by ocean over air. Since FY 2019, the malaria task order has tracked cost savings from orders shipped by ocean that would have historically been shipped by air. The methodology for tracking these savings is to compare the selected ocean rates quoted by the awarded 3PL against the cheapest of all 3PL air rates quoted in the annual 3PL rate refresh. GHSC-PSM has generated $94.8 million in cost savings since FY 2019 by shipping orders by ocean instead of air.

Total cost savings on logistics to date is $197.3 million, which includes $24.6 million in transportation and warehousing costs from optimizing the RDC network, $27.1 million from strategic packaging of TLD, $50.9 million from competing freight lanes, and $94.8 million from Malaria shipping by ocean over air. (See Exhibit 14)

Exhibit 14. Logistics Cost Savings Breakdown



GHSC-PSM Q2 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.

Bangladesh: Strengthening Supply Chain Resilience Through Rapid Assessment

Since mid-2024, Bangladesh's public health supply chain has faced financial and operational disruptions that weakened procurement, forecasting, and logistics functions. These challenges increased the risk of shortages across critical programs, including TB, MNCH, the expanded program on immunization, and emergency commodities, threatening continuity of essential health services nationwide.

To support the Government of Bangladesh, GHSC-PSM conducted a Rapid Supply Chain Assessment between November and December 2025. The assessment combined desk reviews, stakeholder consultations, and health facility visits to evaluate key supply chains. Findings highlighted fragmented coordination, weak forecasting capacity, incomplete digital systems, and limited real-time visibility of stock levels.

Based on these findings, GHSC-PSM recommended prioritized actions, including bridge procurement, rapid forecasting exercises, and establishment of a Supply Chain Technical Working Group, alongside medium-term investments in digital integration and governance. These recommendations provide a clear roadmap to strengthen resilience, reduce stockout risks, and support sustained access to lifesaving health commodities across Bangladesh.

Eswatini: Preventing HIV Testing Disruptions Through Coordinated Supply Chain Action

In Q1, supply chain disruptions linked to delayed funding affected the availability of key HIV commodities in Eswatini, including rapid test kits, viral load, and early infant diagnosis products. By November, the Central Medical Stores (CMS) stock levels had reached critical lows, with some items stocked out and others nearing depletion, placing HIV testing and monitoring services at risk nationwide.

In response, GHSC-PSM strengthened coordination across national stakeholders, including the MOH, the Government of Eswatini, the U.S. Government (USG), and the

Global Fund. Weekly coordination meetings aligned resources, monitored stock levels, and prioritized rapid action as funding became available. Emergency measures included expediting shipments and releasing limited advance stock of HIV Determine test kits to sustain services.

At the regional level, intensified stock monitoring, inter-facility redistribution, and real-time reporting for viral load reagents improved visibility and enabled early risk identification. This allowed timely platform switching and targeted deliveries to maintain continuity.

As a result, stockouts of critical HIV commodities were fully averted, and no service interruptions were reported. These efforts reinforced coordinated, data-driven supply chain management and the impact of U.S. investment in sustaining lifesaving HIV services.

Liberia: Rapid Action Protects Malaria Prevention in Margibi County

In early 2026, Margibi County faced an urgent risk of running out of LLINs, a critical tool for malaria prevention. Health facilities were rapidly depleting supplies, placing pregnant women and children under five at risk of losing essential protection. Recognizing the threat to maternal and child health, the NMCP alerted GHSC-PSM to the impending stockout.

At the request of NMCP, GHSC-PSM quickly mobilized an emergency response. Through coordinated last mile distribution, 6,250 LLINs were delivered to 26 health facilities across the county, restoring supplies for routine antenatal care services. eLMIS data helped confirm consumption trends and prioritize high burden facilities, while coordinated transport ensured deliveries reached hard to access sites. Close coordination with county leadership helped resolve bottlenecks and keep deliveries on track.

Within weeks, LLIN stocks were stabilized across Margibi County, preventing service interruptions and safeguarding malaria prevention services. The response also strengthened coordination and data use, reducing the risk of future stockouts.

"*GHSC-PSM's rapid support helped us act before the situation became a crisis. Facilities were reached on time, and lifesaving malaria prevention services continued without interruption*" - Winston Sumo, Representative of the NMCP, Liberia.

Myanmar: Safeguarding Malaria Commodity Delivery Amid Crisis and Supply Chain Disruption

Following the 2021 military coup, Myanmar's healthcare system experienced severe disruption, creating major logistical and administrative barriers to the importation of lifesaving malaria commodities, including primaquine. Import permit and tax exemption approvals that previously took approximately three months extended to as long as six to

eight months due to staffing shortages linked to the Civil Disobedience Movement, heightened scrutiny of imports, and inefficient paper-based approval systems that frequently delayed processing. At the same time, a U.S. Government funded program that was responsible for importation and customs duties was abruptly halted in mid-2025, and in Q2 2026, the U.S.-Iran conflict further constrained transport options. To prevent disruption of malaria treatment services, GHSC-PSM expanded its role beyond procurement and directly assumed responsibility for importation and customs clearance of pipeline commodities. The project worked closely with government counterparts to accelerate approvals, resolve bottlenecks, and coordinate expedited air shipment despite severe freight limitations.

All required approvals were secured in Q1, and in Q2, 360,000 primaquine tablets were successfully delivered to the NMCP central warehouse. This intervention prevented stockouts at service delivery points and sustained uninterrupted access to lifesaving malaria treatment despite conflict, operational disruption, and global shipping constraints.

Rwanda: Maintaining Malaria Treatment Continuity During MFT Transition

As Rwanda rolled out MFT for malaria, districts adopted different treatments. Some transitioned to dihydroartemisinin piperaquine (DHAP) and artesunate pyronaridine (ASPY) while others continued using artemether lumefantrine. At the same time, DHAP formulations were stocked out at central and subnational levels, while AL remained available in non-AL districts, creating a risk of treatment disruptions during the transition.

GHSC-PSM worked with the Rwanda Biomedical Center and Rwanda Medical Supply to align distribution with district needs. AL was temporarily deployed in areas facing DHAP gaps, including at community level, while additional DHAP shipments were ordered. A redistribution exercise moved 1,201 AL treatments from non-AL districts and 22,650 AL treatments from central stores to DHAP districts.

As a result, malaria treatment services continued without interruption. Patients maintained access to care while inventory monitoring and supply planning supported onward orders, with additional shipments expected in September 2026 to support the second year of the MFT strategy.

Togo: Preventing HIV Treatment Disruptions Through Accelerated TLD180 Delivery

In early 2026, Togo faced a critical risk of stockout of 180-count bottles of TLD, a key antiretroviral medicine used for six-month multi-month dispensing (MMD6). Expanded access to MMD6 increased consumption during the first quarter of FY 2026, placing more than 72 percent of patients at USG–supported health facilities at risk of treatment interruption.

GHSC-PSM, in collaboration with the National AIDS Control Program, the MOH, the commodity supplier, and third-party logistics providers, coordinated early delivery of a USG–funded order of 20,008 bottles of TLD180. The cumulative effect of proactive follow-up, strong coordination, and expedited waiver processing, which reduced approval timelines from 15 to 11 business days, contributed to the shipment to arriving one month ahead of schedule in early March.

As a result, a potential national stockout was averted. HIV treatment services continued without interruption, MMD6 implementation was sustained, and patients remained on life-saving therapy. This intervention highlights the role of agile supply chain management in maintaining continuity of care.

"Procured with U.S. Government funding to prevent treatment interruptions, this response underscores the responsiveness and effectiveness of the GHSC-PSM procurement and supply chain management mechanism." – DOSSOU Cyrille, ARV Dispensing Officer, Grand Lomé health region, Togo

Data-Driven Decisions That Strengthen Supply Chains

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

Ghana: Strengthening Malaria Forecasting Through Data-Driven Quantification

Accurate forecasting and supply planning for malaria commodities require high quality data. Historically, limited access to consolidated data and analytical tools made it hard for stakeholders to analyze trends, test assumptions, and produce accurate forecasts, affecting planning and decision making across the malaria supply chain.

GHSC-PSM supported the National Malaria Elimination Program and partners to conduct a national quantification using QAT. With a focus on a smooth and well managed transition that safeguards progress made during the project and enables future implementers to continue building from a solid base, stakeholders developed five-year forecasts to inform the new Global Fund grant cycle (2027 to 2029) and an 18-month supply plan to guide procurement needs. The process included gap analysis and a review of differences from past forecasts, helping teams closely examine historical data. GHSC-PSM facilitated the sessions and encouraged collaborative, structured use of data.

As a result, stakeholders are better equipped to produce accurate, data driven forecasts. With a shared platform for analysis, partners can align more easily, identify gaps, and plan supplies that better reflect real malaria commodity needs, supporting a stronger and more reliable supply chain.

Honduras: Improving HIV Forecasting Through Data-Driven Planning

Honduras' HIV commodity forecasting has been constrained by fragmented data flows, manual processes, and inconsistent data quality. Antiretroviral consumption data are collected through hybrid systems and consolidated manually, increasing the risk of errors and delays. These gaps limited the MOH's ability to generate reliable forecasts, undermining timely procurement and increasing the risk of stock imbalances.

GHSC-PSM provided targeted technical assistance to strengthen national forecasting capacity. Working with the MOH's Logistics Management Unit, the team validated logistics, consumption, and program data to improve reliability and transparency. Standardized data quality tools were introduced, and staff were guided through hands-on analyses to identify gaps and strengthen data use. Collaborative forecasting sessions produced a preliminary antiretroviral forecast based on nationally validated data, reinforcing country ownership.

This work improved data readiness and forecasting capacity. A consolidated dataset was prepared for national planning, and staff strengthened their ability to apply standardized tools. As a result, Honduras advanced a more sustainable, data-driven approach to HIV supply planning, supporting reliable forecasts and uninterrupted access to lifesaving commodities while improving the efficiency of U.S.-supported systems.

Lesotho: Expanding Real-Time Data Visibility Through eLMIS Rollout

In Q2, Lesotho continued the phased rollout of its eLMIS, expanding to 35 additional health facilities across four districts: Mohale's Hoek (7), Quthing (9), Mafeteng (16), and Maseru (3). This builds on earlier efforts to digitize logistics data and strengthen supply chain visibility. Prior to expansion, facility-level reporting relied on manual, fragmented processes, limiting timely access to accurate stock and consumption data. These constraints reduced the ability of central and regional teams to identify risks early, respond to gaps, and make informed supply planning decisions.

GHSC-PSM supported the rollout through system deployment, on-site training, and targeted follow-up to strengthen user adoption and data quality. Facilities transitioned to real-time reporting, improving the accuracy, completeness, and timeliness of data captured at service delivery points.

As a result, eLMIS expansion improved real-time visibility, enabling earlier identification of stock risks and more responsive decision-making. This rollout reinforces a more data-driven, efficient supply chain, supporting improved availability of HIV commodities and the impact of U.S.-supported systems.

Mali: Enhancing Viral Load Monitoring Through Real-Time Data Visibility

Achieving the third UNAIDS 95 target, ensuring patients on treatment know their viral load status, depends on consistent availability of viral load and early infant diagnosis

commodities. In Mali, limited visibility into logistics data constrained timely resupply decisions, increasing the risk of reagent shortages and gaps in monitoring.

GHSC-PSM supported the MOH's Sectoral Unit for the Fight Against AIDS, Tuberculosis, and Hepatitis to strengthen data-driven supply chain management. A dedicated portal for viral load and early infant diagnosis was configured within the national electronic logistics reporting platform (OSPSANTE), enabling centralized collection, aggregation, and visualization of logistics data. To operationalize the system, GHSC-PSM supported a national workshop in Q2, training 38 regional actors, including chief pharmacists and health information officers. These users were granted access to monitor data entry and validation across 68 districts and 81 service delivery points.

This improved real-time visibility of critical commodities, enabling more timely and accurate resupply decisions. In doing so, Mali advanced a more data-driven approach to viral load monitoring, supporting progress toward epidemic control while improving the effectiveness of U.S.-supported health systems.

Mali: Strengthening SMC Readiness Through Data-Driven Supply Planning

As Mali prepares for its 2026 SMC campaign, ensuring sufficient availability of SPAQ is essential to protect children under five. The campaign aims to reach more than 4.2 million children nationwide, including nearly 1.4 million in USG-supported districts. Achieving this scale requires precise alignment between national needs and supplies from multiple sources.

Coordinating medicines from the Government of Mali, the Global Fund, and the USG posed a key challenge. Limited visibility of stock levels and the complexity of managing multiple supply streams increased the risk of imbalances that could delay or disrupt the campaign.

GHSC-PSM supported the MOH with forecasting, supply planning, and a nationwide inventory assessment. A detailed gap analysis identified shortfalls of 310,960 doses in USG-supported districts and 410,404 doses in MOH-supported districts. GHSC-PSM helped secure an emergency order of 311,000 doses, alongside more than 4.7 million doses already in shipment, strengthening readiness and helping ensure children are protected on time.

Nigeria: Strengthening Warehouse Management Through Digital mSupply Integration

Without a fully digitized system, ensuring accountability, data accuracy, and efficient supply chain operations remained a challenge, affecting warehouse performance and timely access to essential medicines.

GHSC-PSM supported integration of the mSupply platform, a digital inventory and warehouse management system. Capacity-building sessions were conducted in Abuja and Lagos for 35 participants from the Government of Nigeria, MODHIP, HJFMRI/Defense Reference Laboratory, and the Department of Defense. The intervention included integration of two central warehouses with 31 health facilities, digitization of stock requisition, distribution, and reporting processes, and system setup covering stock verification, location mapping, and master data validation.



Strengthening warehouse visibility through digital mSupply integration.

Facilities transitioned from manual, fragmented processes to a digital system, enabling real-time visibility of stock levels, improved accountability and reporting accuracy, and faster, more efficient distribution of medical supplies.

"*I am particularly excited about the assessment and the processes being put in place to ensure that our warehouse is upgraded to a pharmagrade warehouse and also goes a long way in achieving the general health outcomes of the Nigerian populace*." -Major M.A. Haruna, Commandant of the CMS in Yaba, Lagos, Nigeria.

Panama: Strengthening ARV Forecasting Through Improved Data Integration.

Panama's HIV program faces challenges in consolidating high-quality, patient-level data for antiretroviral forecasting and supply planning. Fragmented systems, limited interoperability, and inconsistent data quality constrained the ability to reliably estimate ARV needs for 2026, increasing reliance on manual adjustments and posing risks to timely procurement and uninterrupted treatment delivery.

In Q2, GHSC-PSM provided targeted technical assistance to the MOH. Joint working sessions with the National HIV/AIDS Program, IT, Laboratory Regulation, Medicines Directorate, and key counterparts reviewed and validated the 2026 ARV forecasting methodology using IDL-HIV and Excel tools. Engagements with major facilities, including regional laboratory and Hospital Santo Tomás, supported direct observation of workflows, while technical discussions between the MOH and IT teams identified interoperability gaps and defined a roadmap for system integration, including data requirements, system connection and data sharing needs, governance roles, and next steps.

As a result, Panama validated its 2026 ARV estimation methodology using higher-quality system-generated data, reducing reliance on manual corrections. National stakeholders

established interoperability steps, improving data use and strengthening the foundation for reliable forecasting, uninterrupted treatment delivery, and national supply planning.

Rwanda: Improving Commodity Availability Through Strengthened Data Quality

Despite progress in supply chain digitalization and the ongoing eBuzima rollout, gaps in data accuracy and system use limited visibility on commodity availability in Rwanda. Inconsistent reporting and misalignment between physical stock and system records increased risks of stockouts and inefficient decision-making across health programs.



Data cleaning in Rwanda.

GHSC-PSM, in collaboration with the MOH and RBC, conducted nationwide logistics data cleaning and system assessments across all provinces, including the city of Kigali. Activities included physical stock verification, reconciliation with the eLMIS and eBuzima, and review of system functionality while engaging facility staff on operational challenges.

The exercise covered 248 health facilities and revealed wide variability in inventory accuracy (0 percent to 100 percent) and stockout rates (3 percent to 41 percent). High-performing districts showed strong data accuracy and low stockouts, while others showed critical gaps. These findings are informing targeted improvements in data use, system utilization, and commodity management, including redistribution of overstocked commodities.

Togo: Improving Malaria Supply Planning Through Better Data

In Togo, maintaining uninterrupted access to lifesaving malaria commodities has been challenged by poor logistics data quality. Without a fully functional eLMIS, the NMCP relied on incomplete paper-based stock reports, fragmented pipeline information, and DHIS2 service data that did not reflect actual commodity availability at health facilities. These gaps created uncertainty in national forecasting and procurement planning.

In early FY 2026, routine reviews continued to show discrepancies between stock data reported by service delivery points and malaria service data captured in DHIS2. This increased the risk of supply decisions being made using incomplete or inaccurate information.

To address this, the project partnered with NMCP to implement a structured data triangulation approach. Monthly facility data were collected, cross checked against DHIS2, and consolidated across supply chain levels. By Q2 FY 2026, reporting coverage reached 94 percent, strengthening data credibility, enabling targeted follow up, and improving supply planning despite system limitations.

"*The support of the GHSC-PSM project has been an essential catalyst in optimizing our supply chain. By strengthening our capacity to analyze consumption and stock data, this support has enabled greater reliability of the data produced, thereby ensuring more accurate forecasting and increased efficiency in our antimalarial commodity ordering processes*." - Mr. Aliou Nourou, Malaria Focal Point, Maritime Health Region, Togo

Uganda: Strengthening Commodity Visibility Through Improved Reporting and Data Use

Uganda's health system relies on DHIS2 reporting, including the HMIS 105 report, to track essential medicines and health supplies across 50 tracer commodities. However, incomplete reporting identified during October 2025 Last Mile Assurance activities limited data accuracy, weakened accountability, and affected commodity availability.

At the start of targeted support in August 2025, HMIS 105–6 reporting stood at 88 percent and completeness at 72 percent, both below the national target of 90 percent. GHSC-PSM supported improvements by developing region-specific Excel templates to track performance and training Supply Chain Management Points of Contact on DHIS2 data extraction and analysis. Performance updates were routinely shared with district biostatisticians, HMIS focal persons, and implementing partners to enable timely follow-up on incomplete submissions.

Peer-to-peer training in December 2025 engaged lower-performing partners while drawing lessons from stronger performers. In Q2, reporting improved to 93 percent, exceeding national targets, and completeness increased to 83 percent. These gains strengthened supply chain visibility, accountability, and data use at national and regional levels.

Smart Logistics and Operational Coordination

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

Eswatini: Driving Supply Chain Performance Through Data-Driven Management

For several years, Eswatini's CMS lacked systematic performance monitoring across warehousing and distribution operations. While earlier efforts improved organization and efficiency, persistent bottlenecks in productivity, throughput, and service delivery remained. As a result, CMS had limited visibility into performance trends needed to identify issues and strengthen accountability.

GHSC-PSM worked with CMS leadership to introduce a KPI-based performance management approach covering end-to-end operations. Between October and December 2025, CMS teams defined 19 KPIs across functional areas. Beginning in Q2, teams presented results during weekly management meetings, creating a structured forum for

problem-solving, performance tracking, and rapid action. Within one quarter, key indicators improved. Product fill rate increased from 59 percent to 61 percent, while order quantity fill rate rose from 67 percent to 93 percent. Emergency orders declined from 26 percent to 16 percent, and timely dispatch improved from 47 percent to 52 percent.

These improvements enhanced operational visibility and accountability, enabling faster, data-driven decisions and reinforcing the efficiency of U.S.-supported supply chain systems.

Eswatini: Sustaining HIV Commodity Availability Through Coordinated Regional Support

In 2025, supply chain disruptions required GHSC-PSM to operate with a reduced footprint, focusing on targeted systems and operational support for HIV services. With two regional logistics officers covering four regions, the project prioritized high-risk facilities through a data-driven approach focused on HIV and laboratory commodities. Persistent disruptions, including delayed procurements, late deliveries from the CMS, weak facility-level planning, and lagging stock data, continued to drive stockout risks.

In response, GHSC-PSM established a structured monthly collaboration framework in coordination with USG partners including the SEASEC Project, implemented by Georgetown University in collaboration with the Government of the Kingdom of Eswatini, and Jhpiego's RISE Project. GHSC-PSM led coordination, strengthened partner capacity, and delivered direct operational support to SEASEC and RISE project teams, extending supply chain support across all 190 facilities requiring supply chain strengthening.

This coordinated approach enabled rapid distribution of lenacapavir (LEN) to 29 sites in Q2, ensured zero stockouts of HIV Determine test kits despite central-level rationing, and strengthened facility-level systems through targeted support. As a result, priority HIV commodities remained available without interruption, reinforcing regional ownership and establishing a more sustainable model for proactive supply chain coordination.

Ghana: Improving HIV Diagnostic Accuracy

Ghana's HIV testing algorithm required optimization to align with updated global health best practice, which emphasizes highly accurate, rapid diagnostic tests. Some previously used kits presented limitations in specificity when used in combination, increasing the risk of false-positive results and requiring a transition to more reliable options, including STANDARD Q HIV 1/2 Ab 3-Line Test and STANDARD Q HIV/Syphilis Combo Test.

GHSC-PSM worked closely with the National AIDS/STI Control Program to plan and implement the revised testing algorithm, ensuring commodity availability and a smooth rollout. Using supply chain and service data, GHSC-PSM guided commodity allocation

and quantified facility needs. New test kits were distributed through last-mile systems to ensure timely availability across service delivery points.

Targeted facility-level monitoring tracked uptake, identified stock gaps, and enabled redistribution to prevent expiries while introducing new kits. As a result, facilities transitioned to the updated algorithm, and HIV testing services continued without disruption, improving diagnostic accuracy nationwide.

Mali: Protecting Pregnant Women and Young Children Through Nationwide LLIN Distribution

Malaria remains a major public health challenge in Mali, accounting for 41 percent of morbidity and 18 percent of mortality in 2025, according to DHIS2 data. Children under five and pregnant women are the most affected. Protecting these groups is a national priority, and the NMCP includes nationwide distribution of LLINs as a core prevention strategy.

GHSC-PSM supports this effort by managing the nationwide distribution of LLINs for pregnant women and children under five. To implement the campaign, GHSC-PSM partnered with a local NGO for storage and a private logistics provider for transport to 68 health districts. Despite security constraints and fuel shortages, deliveries continued, including to remote districts in central and northern Mali.

GHSC-PSM implemented the use of a mobile data collection tool, KoboToolbox, to design four forms specific to Driver Registration, Vehicle Registration, Dispatch and Delivery. All drivers and vehicles were registered prior to the dispatch of products, and the data then linked to each dispatch together with the POD loaded (including total number of LLIN and sites).

To collect delivery data including GPS coordinates and photos of the site, delivered products and signed PODs, GHSC-PSM provided tablets with a cellular connection and conducted a training on data entry with eleven 3PL conveyors who accompanied the distribution process. The 3PL then completed a delivery form at each site and submitted the responses, which were received and reviewed by GHSC-PSM in real-time.

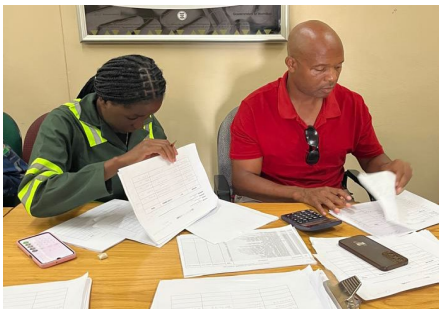
The distribution covers up to eight months of needs and includes 1,030,852 LLINs valued at over $2.9 million. As of end Q2, 61 of 68 districts received supplies, with deliveries ongoing. This effort supports malaria prevention for about 1.2 million pregnant women and 960,000 children under five, helping protect families and strengthen confidence in essential health services nationwide.

Namibia: Advancing Inventory Accuracy and Accountability

Namibia's CMS has faced persistent challenges in inventory accuracy, stock visibility, and accountability due to disorganized storage, weak procedures, inconsistent

verification, and staffing constraints. These issues increased the risk of variances, expiries, and supply disruptions for critical commodities, including ARVs, TB/Malaria medicines, and vaccines.

During the March 2026 annual stock-taking exercise, GHSC-PSM provided technical support to the MOH. Two GHSC-PSM specialists served on the stocktaking board, leading teams in key warehouses. The team applied and enhanced quality assurance tools, conducted data analysis on stock count and verification sheets, and supported classification of findings using good storage and distribution practices standards. GHSC-PSM also contributed to prioritized recommendations to improve human resource capacity, procedures, storage organization, and verification processes.



ARVs stock-taking teams conducting batch reconciliation

The exercise covered 13 warehouses and over 1,200 product lines, identifying stock surpluses of $2.2 million (1.9 percent) and deficiencies of $1.5 million (1.3 percent) against a total allocation of $112.7 million. As a result, CMS gained a clearer, evidence-based understanding of system gaps and a prioritized roadmap to strengthen accountability, reduce variances, and improve supply reliability.

"The GHSC-PSM team's technical support has given us practical steps to strengthen accountability, organization, and verification so we can ensure more reliable supply of life-saving medicines to facilities and patients." - Ms. Grace Nghaamwa, Pharmacist and Chair of the Stock-Taking Board, Khomas Regional Health Directorate, MoHSS

Zambia: Streamlining Medicine Dispensing Through SmartCare–eLMIS Integration

Across many health facilities in Zambia, healthcare workers dispensed medicines using both SmartCare Pro and the eLMIS, requiring parallel entry in two unintegrated systems. This duplication increased workload, introduced risks to data integrity and traceability, and delayed dispensing, making it difficult to balance patient care with reporting requirements.

To address this, the MOH, working with GHSC-PSM and the SmartCare Pro implementing partner, adopted a phased approach to validate system interoperability and workflow alignment. Phase one was implemented in 30 facilities, enabling prescriptions from SmartCare Pro to flow directly into eLMIS. Healthcare workers were oriented to dispense through a single system, supported by targeted onsite assistance in facilities with infrastructure and data quality constraints.

All 30 facilities were activated, achieving a 100 percent prescription data flow success rate between SmartCare Pro and eLMIS. Healthcare workers now dispense medicines without duplicate entry, improving efficiency, reducing errors, and strengthening accountability through confirmed dispensing records. The streamlined workflow improved data visibility and allowed more time for patient care, while continued attention is needed to ensure capture of all dispensed medicines.

"*Previously, we entered the same information in two systems. Now dispensing is faster and more reliable, allowing us to focus on patient care*." - MS. Vivian Miyoba, Pharmacy Technologist, Maramba Health Centre.

Supporting Country Ownership and Sustainable Systems

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

Guinea: Turning Supervision into Action for Malaria Supply Chains in Guinea

In Guinea,

In the first quarter of 2026, GHSC-PSM, working with the Guinea MOH and the NMCP, introduced the Effective Management of Vital Products (EMVP) approach in 22 health facilities across Conakry, Kindia, Boké, and Labé. EMVP combines an initial assessment, immediate corrective actions, intensive on-site coaching, and close follow up with a final evaluation. The approach emphasizes hands on learning, real time problem solving, and practical use of data to guide decisions.

Challenges in managing malaria commodities have continued to affect health system performance, not because of product shortages, but due to weak monitoring of supply chain activities. Traditional supervision approaches left many issues unresolved, including poor follow up on recommendations, uneven staff capacity, limited use of logistics data, and weak tracking of performance. As a result, the initial overall supply chain performance score across the facilities that benefited from the EMVP approach stood at 48 percent, with only 24 percent of recommendations implemented, and some regions performing at critical levels, but within three months, results improved dramatically. Overall performance rose from 48 percent to 95 percent, while implementation of recommendations increased from 24 percent to 91 percent. Trained staff increased from 33 percent to 89 percent, reaching 132 health workers. Rational use of products improved from 37 percent to 80 percent, and distribution system performance reached 100 percent across all regions. Beyond these results, facilities strengthened accountability, improved data quality, and built momentum

for continuous improvement, offering a low cost and replicable model for nationwide scale up.

"This approach has significantly strengthened our supply chain management skills. It allowed us to better understand, in a practical and structured way, the entire implementation process: developing terms of reference, organizing preparatory meetings, guiding data collection, engaging local authorities, reporting, and presenting results. It also improved our ability to develop improvement plans and establish effective monitoring mechanisms, and enhanced our understanding of key logistics principles, including stock management, quantification, storage, distribution, and data analysis." - Dr. Maké Beavogui, Regional Pharmacist Inspector, Kindia

Panama: Improving ARV Data Quality to Strengthen System Reliability

Panama faces challenges in ensuring consistent and accurate HIV logistics and patient-level data, including incorrect use of ARV product codes, variability in patient classification and diagnostic variables, and the need to improve data quality and system use across institutions, particularly between the MOH and the Social Security Institute.

In Q2, GHSC-PSM provided targeted support through on-site visits to ART clinics and the MOH Central Warehouse. The team validated data entries, corrected ARV coding errors, and reinforced standardized patient and diagnostic variables. Collaborative working sessions with the MOH Information Technology Department and the National AIDS Program, along with engagement with Social Security stakeholders, supported alignment on the use of the IDL-HIV tool and strengthened interoperability.



On-site visits to ART clinics

As a result, the intervention improved the accuracy and reliability of HIV logistics data, ensured correct use of ARV product codes, and strengthened data management processes, including automated backup and secure access. Key institutions aligned on actions to support the sustainability of IDL-HIV (Logistics Data Integrator for HIV), improving data-driven decision-making and reinforcing system reliability for uninterrupted ART services. These improvements also laid the foundation for more reliable forecasting and supply planning.

Mali: Integrating MMS into the National Supply Chain

For several years, multiple micronutrient supplementation (MMS) distribution in Mali has been managed through a parallel supply chain supported by UNICEF and the Helen Keller International (HKI). While this enabled rapid scale-up, it is not aligned with Mali's national strategy for the supply and distribution of essential medicines and health products, which promotes an integrated system.

Maintaining a parallel supply chain limits stock visibility, complicates coordination, and creates inefficiencies in warehousing and distribution. It can also lead to duplication, increased costs, and missed opportunities to strengthen national systems, posing risks to sustainability and country ownership.

To support alignment with national priorities, GHSC-PSM provided strategic assistance to advocate for integration of MMS into the national supply chain. The project engaged the MOH, HKI, and UNICEF to highlight the benefits of transitioning to an integrated model and co-facilitated a national workshop In Q2, bringing stakeholders together to review the current model, identify bottlenecks, and define a roadmap for integration.

These efforts led to consensus to transition to an integrated system aligned with national policies. The shift is expected to improve stock visibility, streamline distribution, strengthen coordination, and enhance sustainability of MMS supply within the broader health system. Senior representatives from the MOH and HKI formally commended GHSC-PSM's leadership and technical support in advancing this transition.

Nigeria: Strengthening Local Leadership to Deliver ITNs at Scale

In Nigeria, delivering millions of ITNs to hard-to-reach communities requires complex logistics, along with strong local ownership to support sustainability. In Kebbi State, Mubarak Balarabe, a pharmacist and Logistics Management Coordinating Unit Coordinator at the State MOH, has played a key role in strengthening ITN distribution. He oversees the movement of nets from the state warehouse to households across all 21 local government areas, supported by years of structured engagement from GHSC-PSM.



Training of Ward Supervisors during the Kebbi State ITN Campaign 2026

Through training, mentorship, and hands on support, Mubarak has built strong expertise in ITN campaign logistics, including micro planning, quantification, digital tracking, and coordination. Now a certified Master Trainer, he is part of a growing pool of state-level professionals leading complex public health efforts.

During the 2026 ITN campaign, Mubarak coordinated distribution to more than 1.4 million households, reaching over 6 million residents. The use of Ipolongo, a mobile-first digital platform developed by the GHSC-PSM Nigeria team, enabled real-time delivery tracking, rapid identification of gaps, and ensured no community was left behind.

"*We are now the designers of our campaigns. Partners play a support role"* - Mubarak Balarabe, LMCU Coordinator, MOH, Kebbi State

Sierra Leone: Advancing National Ownership of Digital LMIS

Since 2015, Sierra Leone has implemented a digital Logistics Management Information System using mSupply across central, district, and hospital medical stores, expanding in 2023 to include dispensing modules in 46 sites across 15 hospitals and 103 health facilities in Pujehun District. However, coordination and system management remained largely partner-led, creating sustainability risks as the country prepares to scale to an additional 106 facilities in Port Loko district and 20 hospitals nationwide by mid-2026.

With support from GHSC-PSM, the MOH established a fully functional mSupply Implementation Hub staffed by government personnel. GHSC-PSM provided hands-on capacity transfer, supporting system configuration, product and workflow standardization, and troubleshooting. MOH personnel were trained on Open mSupply and led cascading training for over 350 users, while conducting assessments in 20 hospitals and 106 health facilities and developing an organogram and Terms of Reference.



Open mSupply training to hub personnel

The Implementation Hub strengthened national ownership and technical capacity, enabling the MOH to lead system coordination, training, and scale-up. This approach reduces reliance on external partners and supports sustainable expansion of a government-led supply chain system aligned with national strategy.

Zambia: Institutionalizing Data-Driven Quantification Across Health Programs

Zambia's public health supply chain relied on legacy tools such as Quantimed/ForeLab and Pipeline, which lacked the flexibility and advanced analytics required for evolving programs. Manual processes limited timely, evidence-based decision-making, and early use of QAT remained largely project-driven, creating sustainability risks and limiting ownership by MOH program officers.

GHSC-PSM supported a country-led approach to institutionalize QAT, training 57 MOH and Zambia Medicines and Medical Supplies Agency (ZAMMSA) staff, including 20 additional users in Q2. QAT implementation was aligned with the ministry's Control Tower reform agenda, and a dedicated supply planning unit was established within ZAMMSA, with pharmacy and laboratory personnel positioned as custodians of quantification activities. Thirteen priority programs were onboarded through a phased approach.

By Q2, QAT was used by 14 programs for supply planning and 30 for forecasting, supported by a catalogue of over 5,000 commodities. Continued enhancements, including

forecast error analysis and supply plan scorecards, strengthened analytical visibility and supported more effective, data-driven decision-making.

Enabling New Treatment Strategies and Health Innovation

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

Eswatini: Scaling Lenacapavir Through Data-Driven Supply Planning

Eswatini launched LEN for HIV pre-exposure prophylaxis in December 2025, with demand driving rapid expansion from 16 to 29 sites by January 2026. However, global supply constraints limited availability to 17,400 doses through 2026, creating a high risk of stockouts and treatment interruptions for clients already initiated on PrEP. While LEN represents a major scientific advancement, sustaining its impact depends on aligning scale-up with available supply.

GHSC-PSM provided targeted technical assistance using QAT to support evidence-based decision-making. Real-time scenario modelling assessed multiple scale-up options under different retention assumptions, enabling stakeholders to evaluate sustainability and prioritize continuity of care. Analysis showed that unrestricted scale-up would result in stockouts by September or October 2026, depending on retention rates. In contrast, a continuity-of-care approach would sustain uninterrupted treatment for up to 12,000 clients until additional supply becomes available.

Based on this evidence, Eswatini adopted a ring-fencing strategy, prioritizing existing clients while deferring broader expansion. This ensured continued access to PrEP and demonstrated how supply chains translate scientific advances into sustained, real-world impact.

Ghana: Expanding Pediatric Respiratory Care with Oxygen Equipment Delivery

A 2023 assessment identified critical gaps in the availability and use of respiratory care equipment, limiting health facilities' capacity to manage pediatric respiratory distress.

> *"This is one of the best donations I've ever witnessed in my career as a doctor"*
> – Ho Municipal Hospital Medical Superintendent.

With funding from the USG, GHSC-PSM procured and distributed 2,655 oxygen devices and consumables to 299 health facilities across all 16 regions of Ghana. This included Pulse Oximeters with Temperature RAD-G, Multisite Reusable Sensors SPO2 RAD-G, Vayu Bubble CPAP devices and consumables, and Vayu Oxygen Blender systems and consumables. Post-distribution monitoring was conducted in 169 facilities to validate

delivery, assess functionality, and evaluate utilization. Health providers were trained on equipment use, recordkeeping, maintenance, and availability of accessories.

Monitoring confirmed that devices and consumables were delivered and operational in the majority of the 299 supported facilities. Health workers demonstrated improved capacity to use and maintain the equipment, contributing to strengthened respiratory care services for children.

Malawi: Expanding Newborn Care Capacity Through CPAP Training

Malawi has made progress in improving maternal and newborn health outcomes despite persistent resource constraints. The neonatal mortality rate stands at approximately 18.7–19 deaths per 1,000 live births (2022–2023 estimates). While this reflects progress, newborn mortality remains a challenge, with nearly 80 percent of deaths linked to prematurity, complications during birth, and infections. Skilled birth attendance exceeds 96 percent, but many health facilities still lack essential equipment and medicines for effective newborn care.

On behalf of the USG, GHSC-PSM provided operational assistance to the MOH to coordinate blended training on the use of VAYU Bubble Continuous Positive Airway Pressure (CPAP) and oxygen blender systems. The training in Q2 brought together 30 nurses and clinicians from neonatal wards across eight health facilities and complemented earlier procurement of oxygen-related equipment and accessories valued at $290,097.

GHSC-PSM supported device preparation and organized the training sessions. The intervention strengthened provider capacity to manage neonates requiring respiratory support, improving facility readiness and supporting efforts to reduce preventable neonatal deaths.

Zimbabwe: Scaling Lenacapavir Through Targeted Delivery and Consumption Tracking

In February 2026, Zimbabwe introduced LEN for pre-exposure prophylaxis, marking a major milestone in the national HIV response. However, projected demand exceeded available supply, requiring alignment of programmatic targets with supply plans and strategic allocation across service delivery points. Limited supply also created an urgent need for a robust consumption monitoring mechanism to provide weekly data visibility and support uninterrupted access.

GHSC-PSM worked with the MOH to set facility-level client targets aligned with LEN supply. Timely deliveries were coordinated alongside orientation of supply chain cadres on a consumption tracking tool to improve visibility of product movement. At delivery points, system discussions reinforced storage practices, differentiation of initiation and

continuation packs, reordering procedures, and adverse event reporting. Supply chain teams coordinated with clinical providers to align patient initiation with available stock.

This approach minimized stockout risks, strengthened demand planning, and ensured continuity of services, demonstrating how effective supply chain management supports scale-up of new HIV interventions and equitable access to lifesaving commodities.

Zimbabwe: Transitioning to Optimized Pediatric HIV Treatment

Zimbabwe's HIV program adopted the transition of eligible pediatric clients from abacavir/lamivudine and single dolutegravir regimens to the triple dispersible fixed-dose combination pALD to simplify treatment. However, significant stocks of legacy formulations meant an immediate shift risked losses through redundancy.

GHSC-PSM collaborated with the MOH to design a phased rollout plan, aligning the national transition with depletion of existing stock. Implementation began in early 2025 at 14 high-volume facilities, with nationwide rollout guided by prepositioning of pALD, monitoring of usage, redistribution of legacy formulations, and support to facilities on optimal transition timing. By Q2, all eligible service delivery points had received pALD with no reported supply interruptions. Legacy medicines were efficiently utilized, preventing losses and ensuring a smooth transition.

This approach ensured uninterrupted access to pediatric HIV treatment while simplifying regimens for children and caregivers, demonstrating how coordinated supply planning can support effective treatment transitions.

Current Reporting Period

2026-Q2

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

Global Supply Chain M&E Indicator Performance

FY2026 Quarter 2, January - March 2026

Delivery Impact to Date

Number of ACT treatments delivered

660,394,685

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

32,710,411

Delivery (OTIF, OTD)

Supply Plan Submissions

Product Loss

HIV/AIDS Complete Quarterly Results

Malaria Complete Quarterly Results

Overall Delivery Performance

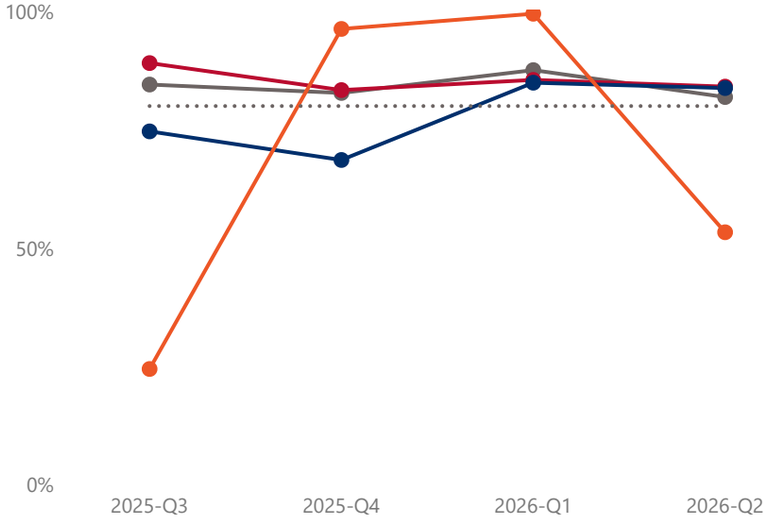
Health Area: All

Product Category: All

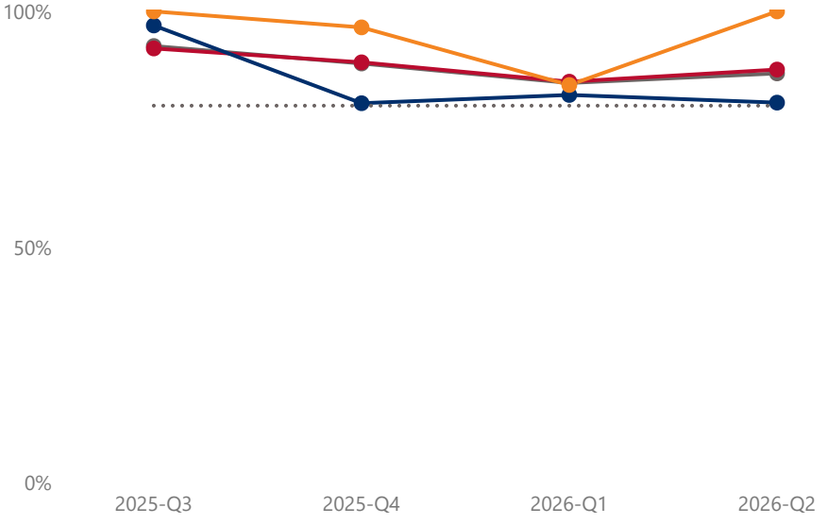
Current Reporting Period: 2026-Q2

HIV COVID19 Malaria All Target

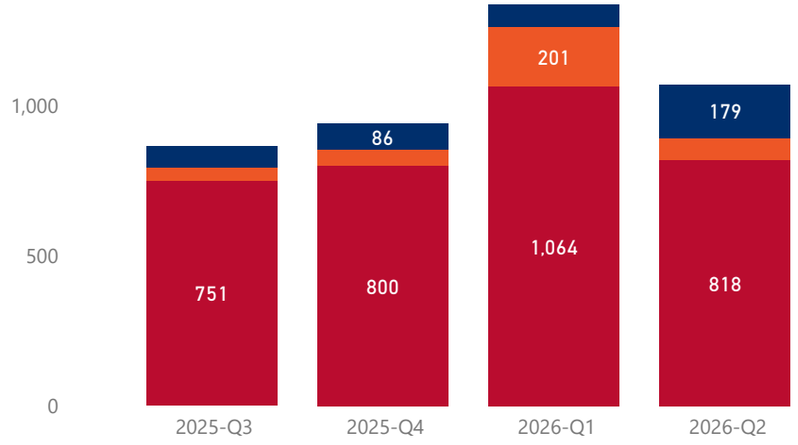
A1a. On-time, in-full delivery rate (OTIF)



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 87 percent OTD for cumulative products, while OTIF stood at 82 percent. HIV/AIDS products had an OTIF rate of 84 percent, and an OTD rate of 88 percent in FY2026 Q2. Malaria products had an OTIF rate of 84 percent and an OTD rate of 81 percent in FY2026 Q2. COVID-19 products, while generally a smaller category and more volatile, had an OTD rate of 100 percent, but an OTIF rate of 53 percent. The majority of line items delivered this quarter were HIV/AIDS commodities, which accounted for 800 of the 1000 line items delivered. Malaria products had 175 line items delivered, and COVID-19 products had 75 this quarter. 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 87 percent, and OTD score of 89 percent, and accounted for over 600 of the line items delivered in FY2026 Q2. Delivery quantity decreased in FY2026 Q2 for HIV/AIDS products and COVID-19 products, with each health area having decreased in total line items delivered, except malaria, which more than doubled their delivery totals from last quarter. For more information on the OTD and OTIF calculations, see the following pages detailing each product category, as well as the "Indicator

Delivery Performance - HIV/AIDS

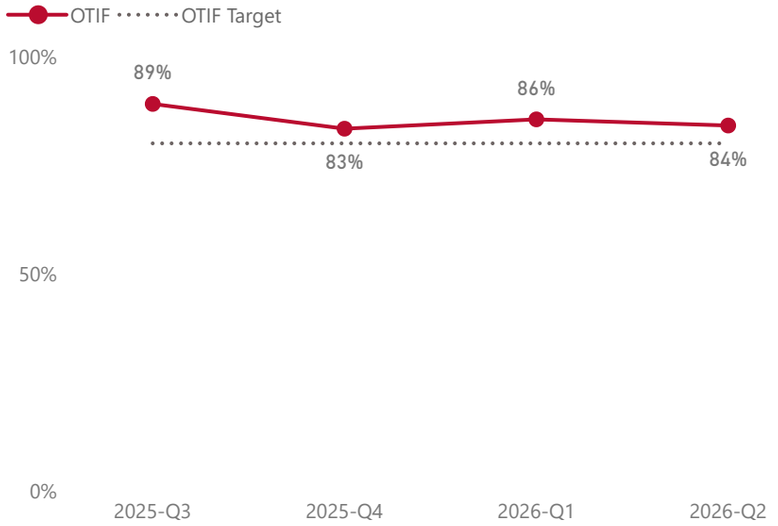
Product Category

All

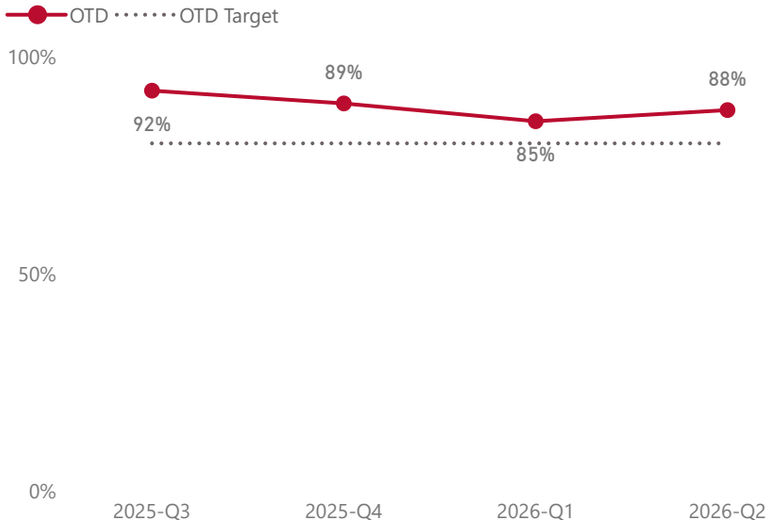
Current Reporting Period

2026-Q2

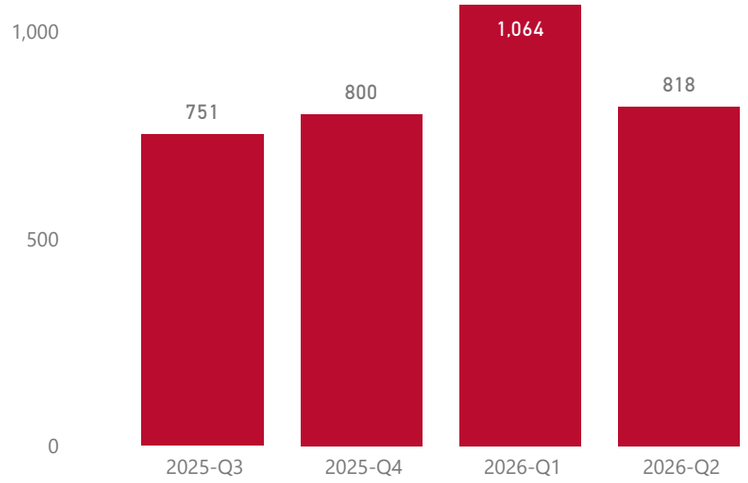
A1a. On-time, in-full delivery rate (OTIF)



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 relatively consistent this quarter, remaining above the target of 80 percent. In FY2026 Q2, OTIF and OTD stood at 84 and 88 percent, respectively. Nearly all products, with the exception of other non-pharma and other RTK, remained above the 80 percent OTD target this quarter. Other non-pharma had an OTD rate of 50 percent and other RTK had an OTD rate of 57 percent. Adult ARVs had an OTD rate of 87 percent. The largest product category, laboratory products, which accounted for over 600 of the 800 line items delivered this quarter, had an OTD rate of 89 percent and an OTIF rate of 87 percent, greatly impacting the overall HIV/AIDS rates. Almost all products, except other non-pharma (at 45 percent), adult ARVs (at 72 percent), and pediatric ARVs (at 77 percent) had OTIF rates over 80 percent. For more information on the OTD and OTIF calculations, see the "Indicator Details" pages

Delivery Performance - Malaria

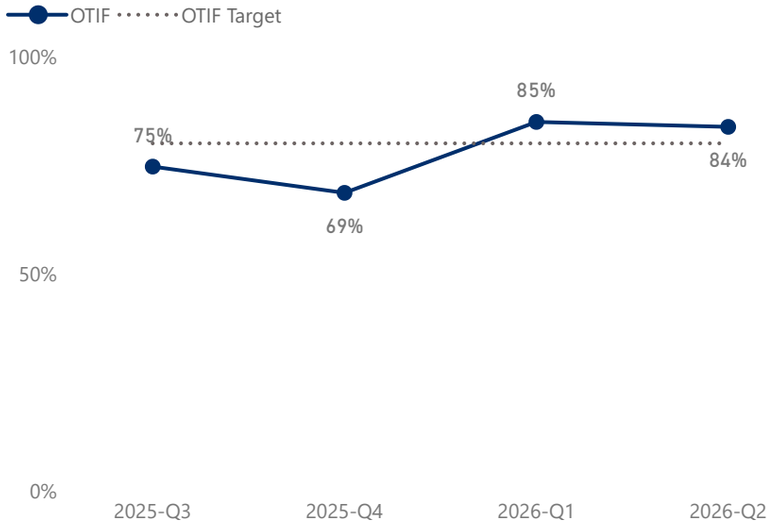
Product Category

All

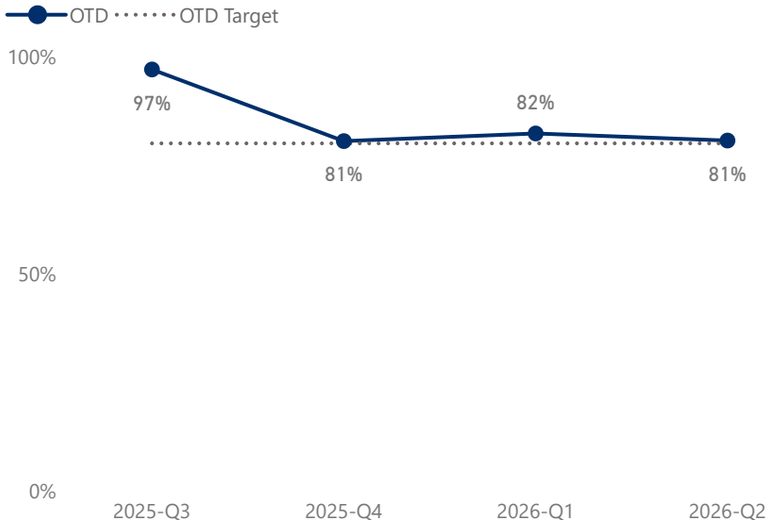
Current Reporting Period

2026-Q2

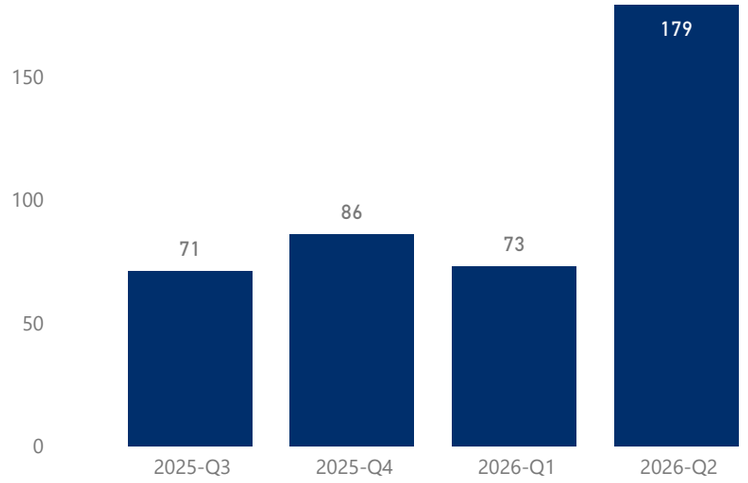
A1a. On-time, in-full delivery rate (OTIF)



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 consistent this quarter, remaining above the target of 80 percent. In FY2026 Q2, OTD and OTIF stood at 81 percent and 84 percent, respectively. The largest product categories this quarter, ACTs and LLINs, had OTD rates of 77 percent and 71 percent, respectively. No other product categories had less than 80 percent OTD rates, with other non-pharma, other pharma, SMC, and SP having OTD rates of 100 percent in FY2026 Q2. The OTIF scores were primarily dictated by the ACTs and LLINs categories, as well, with OTIF rates of 85 percent and 74 percent, respectively. Only LLINs, other pharma, and SP had OTIF scores of less than 80 percent, with other pharma and SP having very small denominators. LLINs had 58 line items delivered this quarter, with 43 of them meeting the criteria for the OTIF score. The delivery volume of malaria products was larger this quarter, at 179 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

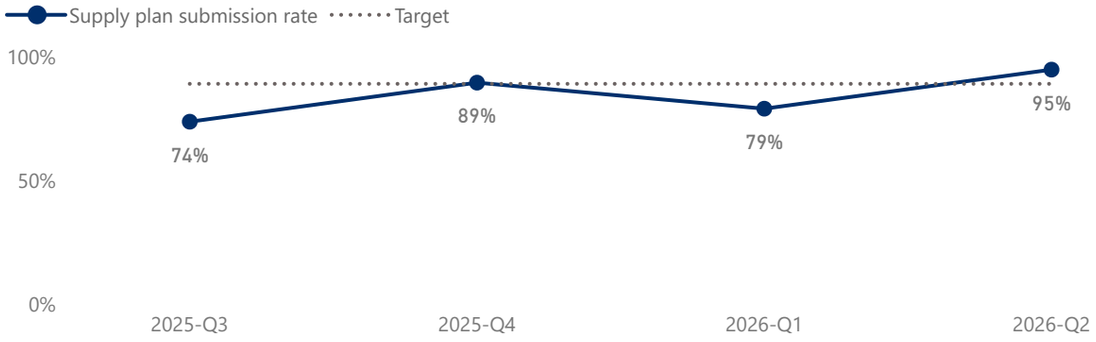
Supply Plan Submission - HIV/AIDS

Current Reporting Period

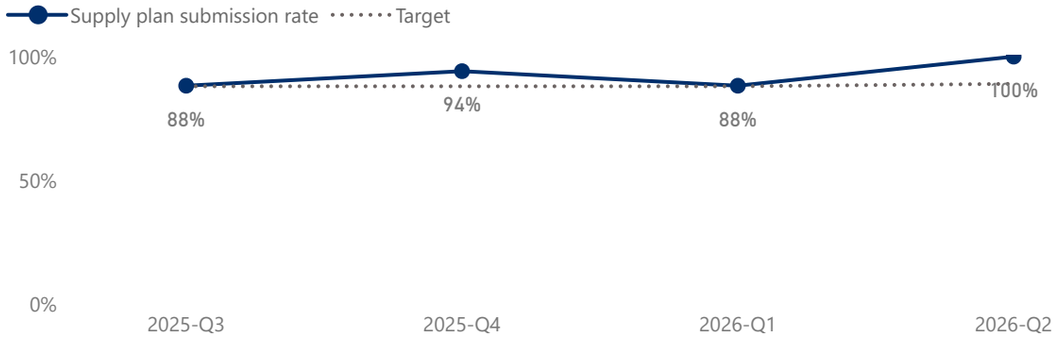
2026-Q2

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

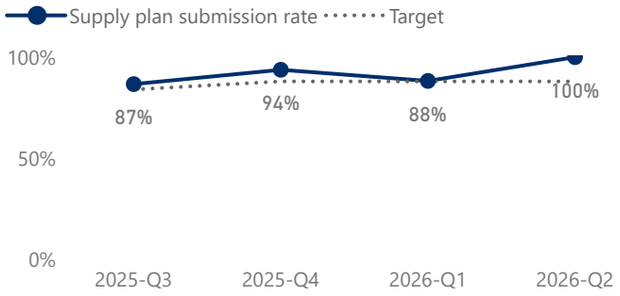
ARVs



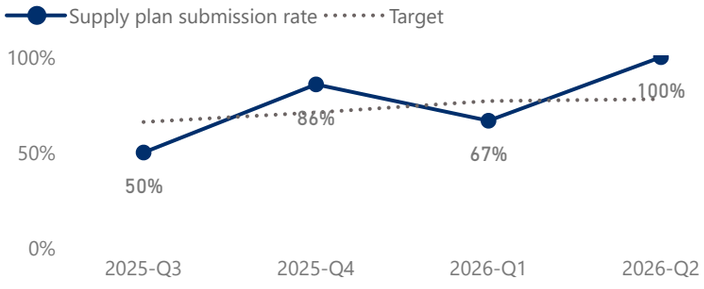
Lab (HIV diagnostics)



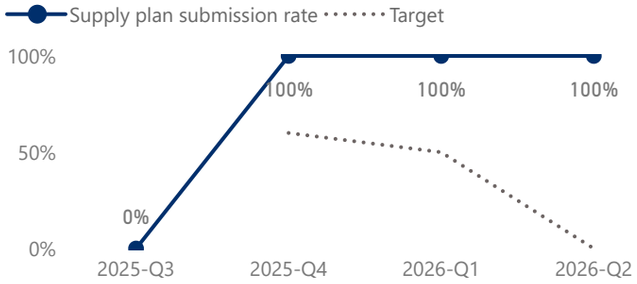
RTKs



Tuberculosis Preventive Treatment (TPT)



Essential Medicines



Analysis

Supply plan submissions for HIV/AIDS commodities increased this quarter, with only one ARV supply plan submission missing from Tanzania. This falls within the target of 89 percent, or two missed supply plan submissions. All other product categories had a 100 percent submission rate. Please note, a target for the essential medicines supply plan submissions is not a meaningful measure, as there were only two required submissions this quarter, making the rolling target 0 percent.

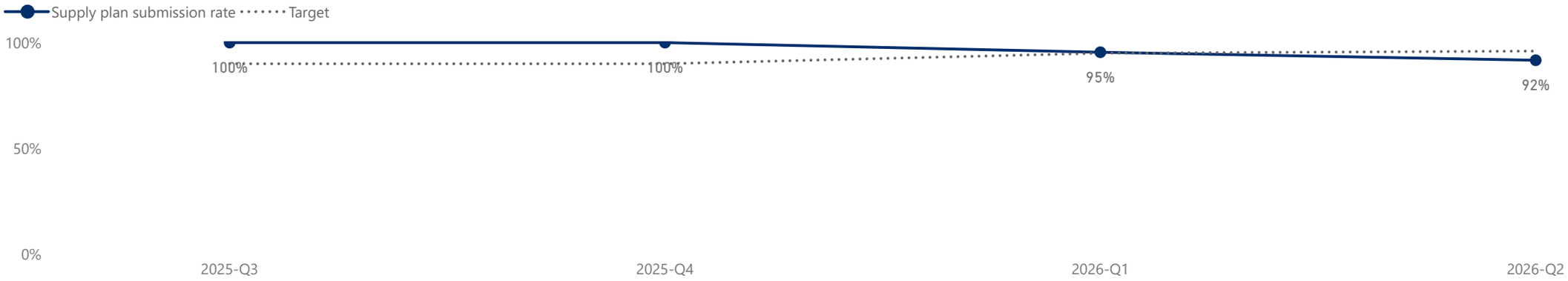
Supply Plan Submissions - Malaria

Current Reporting Period

2026-Q2

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

Malaria commodities



Analysis

Two malaria supply plans were missing this quarter, from Sierra Leone and Tanzania. This falls slightly below the target of 96 percent, or one missed supply plan submission.

Product Loss

Current Reporting Period

2026-Q2

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

Reporting Period	Health Area	Product Group	Loss Value	% Loss
2026-Q2	TO1 - HIV	Pediatric ARVs, Dapirivine Vaginal Ring	$53,052	4.29%
2026-Q2	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	Nigeria	Damage	HIV Rapid Test Kits (RTKs)	$1,360	$118,898,657	0.00%
TO2 - Malaria	Cameroon	Missing product	LLIN	$5,007	$70,132,400	0.01%
TO2 - Malaria	Malawi	Damage	LLIN	$1,331	$70,132,400	0.00%

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

Ref	Analysis
C07a	HIV/AIDS products in the RDC encountered a few expiries this quarter. 3,000 units of Dapivirine Vaginal Rings which had been prepositioned at the RDC to be used in support of implementation studies and subsequently determined out of scope will expire July 31, 2026 and have been shipped for destruction. 6,867 units of Zidovudine 10 mg/mL Solution w/ Syringe, 240 mL (ZDV) expired March, 30, 2026. ZDV is a critical product needed for neonates. Most countries require it in very small quantities but the supplier needs to make it in a batch of no less than 12,000 units. To help countries that require the product, but order far less than 12,000 units, an XO strategy is used, product is stored in the RDC, and countries pull from the reserves. This was a useful strategy with minimal risk and 10 countries utilize this procurement method. It is important to note that PSM is not trying to maintain stocks in the RDC at this stage in the program, and as such loss percentages may appear higher though very much at or below historical loss levels in terms of stock amounts lost.
C07a	There are no expiries to report for malaria commodities this quarter.

Ref	Analysis
C07b	There were three incidents of loss that occurred this quarter, all of which occurred during transit. In Nigeria, $1,360 of HIV rapid test kits were determined to be dented or compressed upon delivery. In Cameroon, one bale of LLINs was missing from delivery and 30 bales were reported damaged upon delivery. In Malawi, similarly, 11 bales of LLINs were found to be wet and stained with rust after having been placed directly onto the floor of the shipping container during transit.

Complete Quarterly Results (HIV/AIDS)

Reporting Period

2026-Q2

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	**84%**	**818**	**88%**	**770**
Adult ARV	72%	95	87%	77
Laboratory	87%	605	89%	579
Other Non-Pharma	45%	20	50%	18
Other Pharma	97%	34	97%	34
Other RTK	89%	9	57%	14
Pediatric ARV	77%	52	91%	45
TB HIV	100%	3	100%	3
TO1 - COVID19	**53%**	**75**	**100%**	**40**
COVID19	53%	75	100%	40
Total	**82%**	**893**	**88%**	**810**

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
ARVs	95%	19
Essential Medicines	100%	2
Lab (HIV diagnostics)	100%	19
RTKs	100%	17
TPT	100%	9

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

Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
Nigeria	Damage	HIV Rapid Test Kits (RTKs)	$1,360	$118,898,657	0.00%
RDC	Expiry	Pediatric ARVs, Dapirivine Vaginal Ring	$53,052	$1,235,434	4.29%

Complete Quarterly Results (Malaria)

Reporting Period

2026-Q2

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	**84%**	**179**	**81%**	**186**
ACTs	85%	52	77%	57
Laboratory	100%	9	82%	11
LLINs	74%	58	71%	63
mRDTs	90%	20	95%	21
Other Non-Pharma	100%	2	100%	2
Other Pharma	33%	3	100%	1
Severe Malaria Meds	93%	15	88%	16
SMC	100%	16	100%	14
SP	75%	4	100%	1
Total	**84%**	**179**	**81%**	**186**

B6. Quarterly supply plan submissions

Product Group	Supply plan submission rate	# of supply plans required
Malaria commodities	92%	24

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

Country	Type of Loss	Product Group	Loss Value	Loss Denominator	% Loss
Malawi	Damage	LLIN	$1,331	$70,132,400	0.00%
RDC	Expiry	NA	$0	$441,168	0.00%
Cameroon	Missing product	LLIN	$5,007	$70,132,400	0.01%

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 Q3	FY 2025 Q4	FY 2026 Q1	FY 2026 Q2	FY 2026
Reporting Period (Quarter) Start Date		04/01/25	07/01/25	10/01/25	01/01/26	10/01/25
Reporting Period (Quarter) End Date		06/31/25	09/30/25	12/31/25	03/31/26	09/30/26
Global Supply Chain						
A1a.	Percentage of line items delivered on time and in full, within the minimum delivery window	85%	83%	88%	82%	NA
A1b.	Percentage of line items delivered on time, within the minimum delivery window	93%	89%	85%	87%	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 Q3	FY 2025 Q4	FY 2026 Q1	FY 2026 Q2	FY 2026
Reporting Period (Quarter) Start Date		04/01/25	07/01/25	10/01/25	01/01/26	10/01/25
Reporting Period (Quarter) End Date		06/31/25	09/30/25	12/31/25	03/31/26	09/30/26
In-Country						
B1.	Stockout rate at SDPs	26%	30%	25%	27%	NA
B2.	Percentage of stock status observations in storage sites where commodities are stocked according to plan, by level in supply system	25%	24%	20%	22%	NA
B3.	SDP reporting rate to the logistics management information system (LMIS)	83%	88%	89%	89%	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 Q3	2025 Q4	2026 Q1	2026 Q2	Target	2025 Q3	2025 Q4	2026 Q1	2026 Q2
A1a	Percentage of line items delivered on time and in full, within the minimum delivery window (*Total number of line items delivered*)	80%	89% (751)	83% (800)	86% (1064)	84% (818)	80%	75% (71)	69% (86)	85% (73)	84% (179)
A1b	Percentage of line items delivered on time within the minimum delivery window (*Total number of ADDs in the quarter*)	80%	92% (725)	89% (796)	85% (1100)	88% (770)	80%	97% (67)	81% (77)	82% (79)	81% (186)

Note: Due to the 2025 Stop Work Order, data is not available for FY2025 Q2 (01/01/2025-03/31/2025).

Key Performance Overview By Health Area

Indicator		HIV/AIDS	2025 Q3	2025 Q4	2026 Q1	2026 Q2	Malaria	2025 Q3	2025 Q4	2026 Q1	2026 Q2
In-country Context, Performance, and Sustainability											
B1	Stockout rate at SDPs		11%	11%	10%	9%		30%	34%	28%	31%
B2	Percentage of stock status observations in storage sites where commodities are stocked according to plan, by level in supply system		30%	23%	26%	29%		21%	24%	17%	17%
B3	SDP reporting rate to the logistics management information system (LMIS)		89%	89%	90%	91%		80%	87%	89%	88%
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.*									

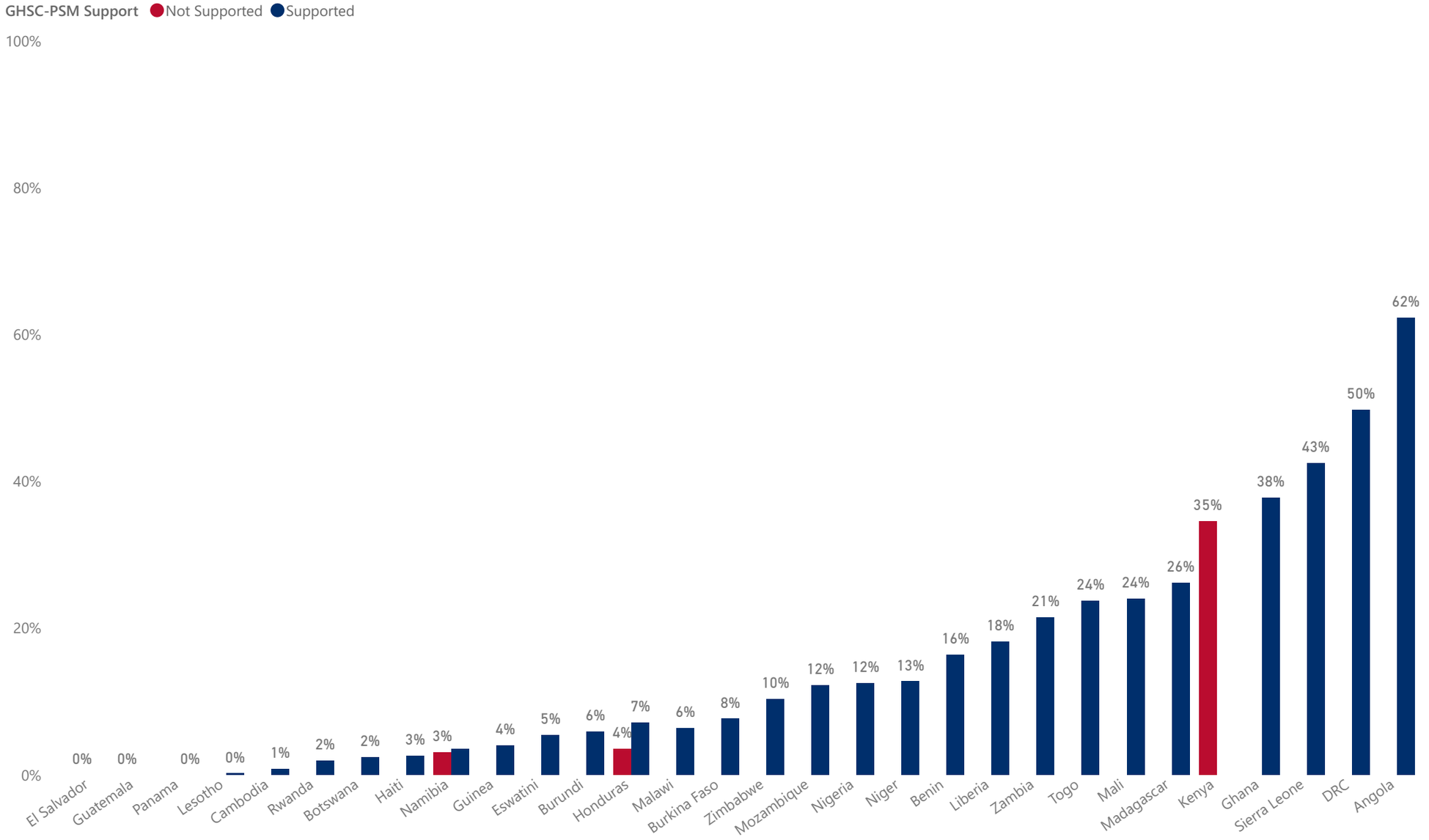
Note: Due to the 2025 Stop Work Order, data is not available for FY2025 Q2 (01/01/2025-03/31/2025).

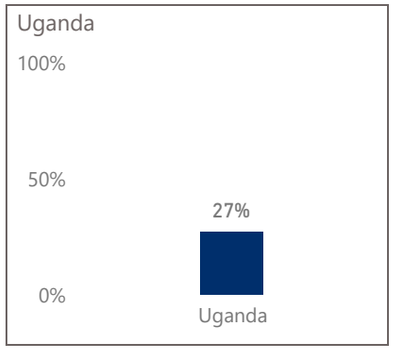
SDP Stockout Rates by Country

Health Area: All

Tracer Product: All

Current Quarter: 2026-Q2





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

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	**2.8%**	**0.0%**	**2.4%**	**4.4%**	**4.9%**	**20.8%**	**0.0%**	**5.5%**	**32.5%**	**0.0%**	**2.6%**	**7.1%**	**0.2%**	**17.5%**	**12.4%**	**23.5%**	**6.0%**	**3.5%**	**3.6%**	**0.0%**	**1.9%**	**0.0%**	**38.0%**	**4.8%**	**9.2%**
1st line adult ARV	0.0%	0.0%	0.0%	0.0%	3.0%	23.8%	0.0%	0.0%	5.2%	0.0%	0.0%	4.0%	0.0%	8.3%	2.5%	9.7%	0.8%	0.0%	0.6%	0.0%	1.2%	0.0%	2.3%	1.5%	0.3%
2nd line adult ARV	4.8%	0.0%		0.0%	7.1%	10.8%	0.0%	1.9%	53.1%	0.0%	1.4%	10.5%	0.0%		8.6%		2.4%	5.3%	6.0%	0.0%	2.0%	0.0%	36.2%	34.5%	4.9%
Pediatric ARV	0.0%	0.0%	0.0%	0.0%		35.2%	0.0%	2.4%	11.8%	0.0%	1.6%	8.3%	0.0%	54.2%	8.9%	22.4%	2.2%	0.0%	4.0%	0.0%	4.9%	0.0%	26.2	9.0%	16.4%
First RTK	0.0%	0.0%	4.3%	9.4%	11.7%	17.4%	0.0%	7.8%	62.5%		1.5%		0.0%	8.3%	17.8%	36.0%	8.8%	5.3%	0.4%		2.2%	0.0%	47.2	5.2%	5.4%
Second RTK	9.1%	0.0%	0.0%	0.0%		18.6%		22.1%	35.8%		8.6%		0.0%	8.3%	20.2%	25.3%	16.8%	5.3%	11.8%		1.7%	0.0%	61.3	4.7%	7.8%
Tie-breaker RTK						19.0%		1.5%						8.3%				5.3%	9.7%				52.5		21.2%
Viral load reagent		0.0%	14.3%	14.3%			0.0%	0.0%					0.0%				2.4%		0.0%		0.0%	0.0%		0.0%	4.7%
Viral load consumable			0.0%	28.6%				0.0%											0.0%		0.0%				
EID reagent			100.0%	0.0%				0.0%					4.7%				7.1%		6.5%		0.0%	0.0%		0.0%	4.7%
EID consumable			0.0%	12.5%				0.0%													0.0%				
Most used 3rd line ARV										0.0%															

Health Area	El Salvador	Guatemala	Honduras	Kenya	Namibia
HIV/AIDS	**0.0%**	**0.0%**	**3.6%**	**44.9%**	**3.1%**
1st line adult ARV	0.0%	0.0%	4.8%	11.1%	0.0%
2nd line adult ARV	0.0%	0.0%	0.0%	99.3%	2.3%
Pediatric ARV		0.0%	0.0%	28.5%	0.0%
First RTK	0.0%			20.6%	2.3%
Second RTK					7.0%
Tie-breaker RTK					7.0%
Viral load reagent	0.0%			26.7%	
Viral load consumable				65.6%	
EID reagent				20.0%	
EID consumable				69.9%	
Most used 3rd line ARV		0.0%			

SDP Stockout Rates by Country - Malaria

Current Quarter

2026-Q2

Table 1. Overall malaria stockout rates with product breakdown

GHSC-PSM Support	Not Supported	Supported																		
Health Area	Kenya	Angola	Benin	Burkina Faso	Burundi	Cambodia	DRC	Ghana	Guinea	Liberia	Madagascar	Malawi	Mali	Mozambique	Niger	Nigeria	Rwanda	Sierra Leone	Togo	Zambia	Zimbabwe
Malaria	**9.9%**	**63.1%**	**16.8%**	**7.7%**	**6.0%**	**0.8%**	**51.0%**	**38.5%**	**4.0%**	**18.2%**	**26.2%**	**2.9%**	**24.0%**	**17.3%**	**12.7%**	**14.0%**	**1.9%**	**42.5%**	**24.3%**	**29.7%**	**11.6%**
AL 6x1	5.1%	84.8%	17.9%	4.2%	5.2%		79.6%		5.1%	12.3%		1.1%	14.5%	11.2%	11.7%	11.9%	1.4%	25.9%	8.1%	38.5%	24.7%
AL 6x2	5.1%	76.0%	23.8%	3.3%	5.1%		71.5%	42.8%	3.3%	10.9%		2.2%	18.9%	17.3%	10.8%	7.7%	1.4%	43.2%	9.3%	25.3%	12.3%
AL 6x3	5.7%	86.9%	24.0%	4.1%	5.9%		70.3%		6.8%	20.4%		3.4%	30.9%	21.7%	36.9%	9.0%	2.3%	39.6%	14.5%	34.4%	11.4%
AL 6x4	4.7%	77.6%	25.5%	17.2%	6.5%		67.7%	36.6%	4.5%	31.3%		5.1%	9.4%	23.8%	14.0%	31.4%	1.6%	47.0%	14.9%	18.6%	4.3%
AS/AQ 100/270mgx3		65.2%					43.9%				16.2%										
AS/AQ 100/270mgx6		62.1%					40.2%	47.8%			24.1%										
AS/AQ 25/67.5mg		31.7%					46.7%	44.8%			65.1%										
AS/AQ 50/135mg		88.9%					43.5%	44.8%			22.0%										
ASPY 180/60mg, 9 tabs				0.7%		0.1%											0.5%				
ASPY 60/20mg, 3 sachets				0.9%													1.2%				
DHA-PPQ 20mg/160mg 3 tabs				19.7%													3.4%				
DHA-PPQ 40mg/320mg 3 tabs																	3.3%				
DHA-PPQ 40mg/320mg 6 tabs																			66.9%		
DHA-PPQ 40mg/320mg 9 tabs				2.9%															73.2%		
LLINs				7.2%	4.8%		44.7%			27.5%		2.1%	51.5%	31.6%	8.8%	20.4%		29.5%	13.9%		
Rapid diagnostic test for malaria	15.9%	17.4%	4.2%	3.9%	8.2%	1.5%	18.4%	26.8%	1.3%	9.8%	10.5%	2.1%	24.4%	10.9%	2.8%	7.7%	2.7%	47.6%	4.8%	21.8%	7.5%
Sulphadoxine-pyrimethamine	18.7%	17.2%	5.3%	16.1%	6.7%		34.8%	32.0%	3.3%	15.2%	19.3%	4.6%	18.6%	13.3%	4.2%	19.1%		85.4%	12.6%	41.0%	8.3%

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.

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.

SDP Stockout Rates by Country - Malaria

Current Quarter

2026-Q2

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

GHSC-PSM Support Health Area	Supported Angola	Benin	Burkina Faso	Burundi	DRC	Ghana	Guinea	Liberia	Malawi	Mali	Mozambique	Niger	Nigeria	Rwanda	Sierra Leone	Togo	Uganda	Zambia	Zimbabwe
Malaria																			
AL inability to treat	13.7%	0.0%	0.9%	2.9%	49.7%	20.9%	0.5%	7.7%	0.3%	1.5%	5.3%	0.8%	3.9%	0.3%	18.6%	1.1%	7.0%	5.1%	1.0%

Table 3. Malaria stockout rates for Uganda

GHSC-PSM Support Health Area	Supported Uganda
Malaria	**7.0%**
AL inability to treat	7.0%
Rapid diagnostic test for malaria	7.0%

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.

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

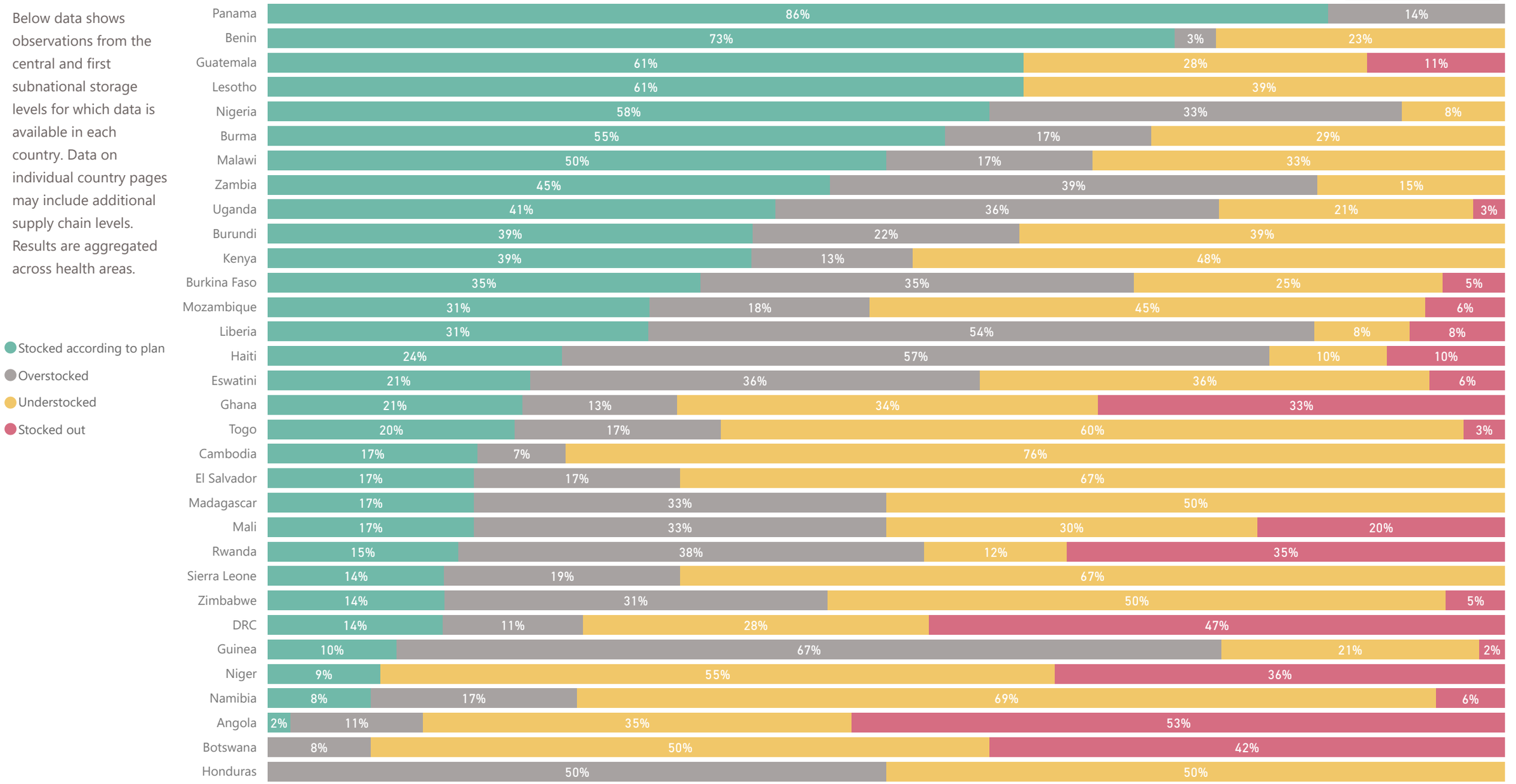
Table 3: In Uganda, health facilities report on all presentations of AL as a single item, equivalent to AL inability to treat. Stockout data is not available by individual presentation. As a result, GHSC-PSM incorporates AL inability to treat into Uganda's overall stockout rate to ensure that these essential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

Stocked According to Plan Rates by Country

Current Quarter

2026-Q2

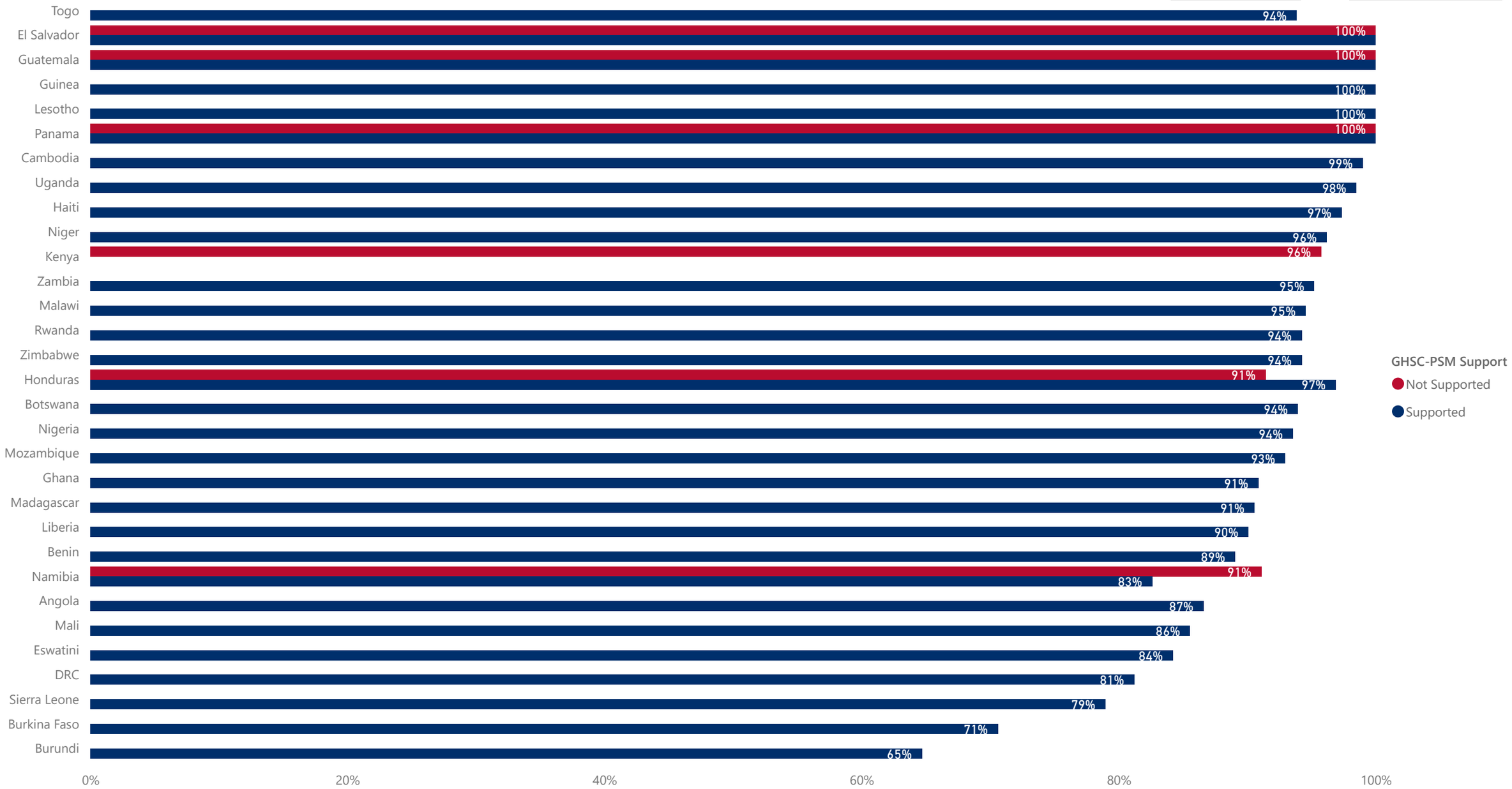
Below data shows observations from the central and first subnational storage levels for which data is available in each country. Data on individual country pages may include additional supply chain levels. Results are aggregated across health areas.



LMIS Reporting Rates by Country

Health Area: All

Current Quarter: 2026-Q2



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.

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 2
January - March 2026

Country M&E Indicator Performance

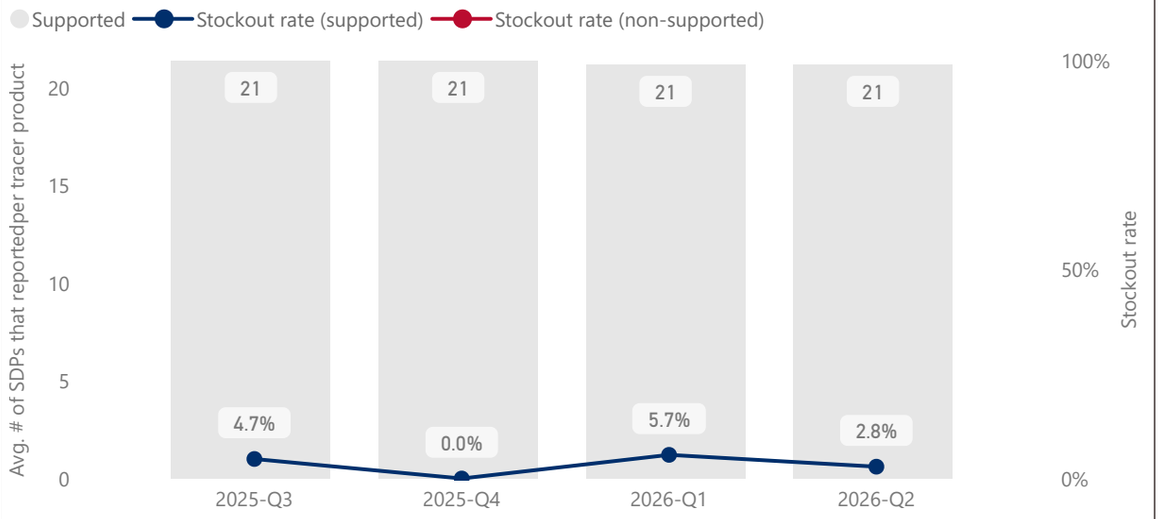
Country

Angola

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Angola | Current Quarter: 2026-Q2 | Tracer Product: All

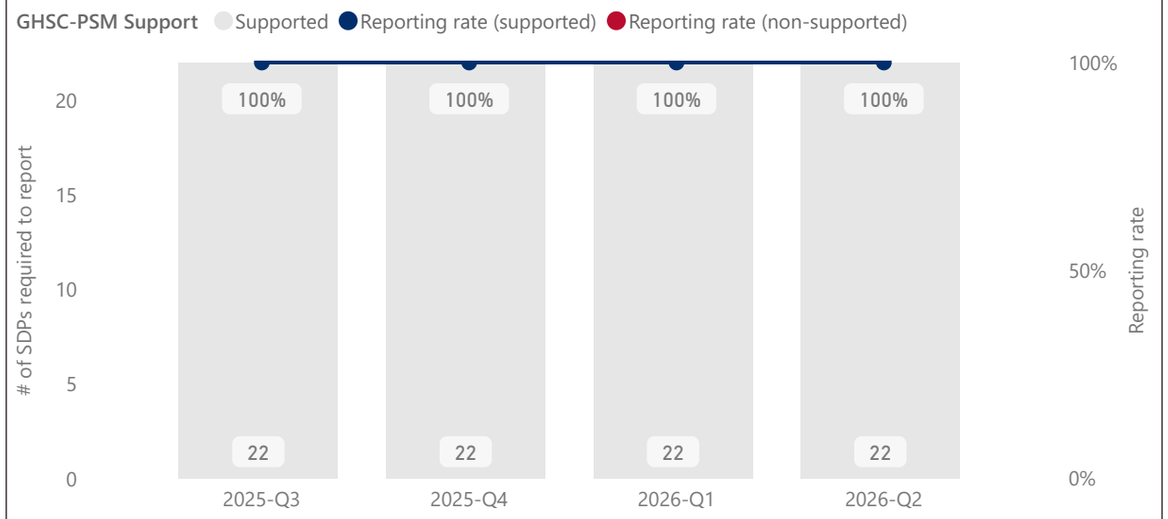
B1. Stockout rate at service delivery points



Data source

LMIS March 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

LMIS March 2026

B3. Data Source (numerator)

LMIS March 2026

Analysis

The overall stockout rate decreased from 5.7 percent in the last quarter, FY 2026 Q1, to 2.8 percent in FY 2026 Q2. There was a 21 percentage-point decrease in the stockout rate of 1st line pediatric ARVs from the previous quarter. Stockouts were only reported for two (2) tracer products: most used 2nd line ARV (5 percent) and 2nd RTK (9 percent). The reported RTK stockouts were in the province of Benguela where, per USG guidance, GHSC-PSM Angola only provides limited systems support to not duplicate efforts by the Global Fund in that province.

Analysis

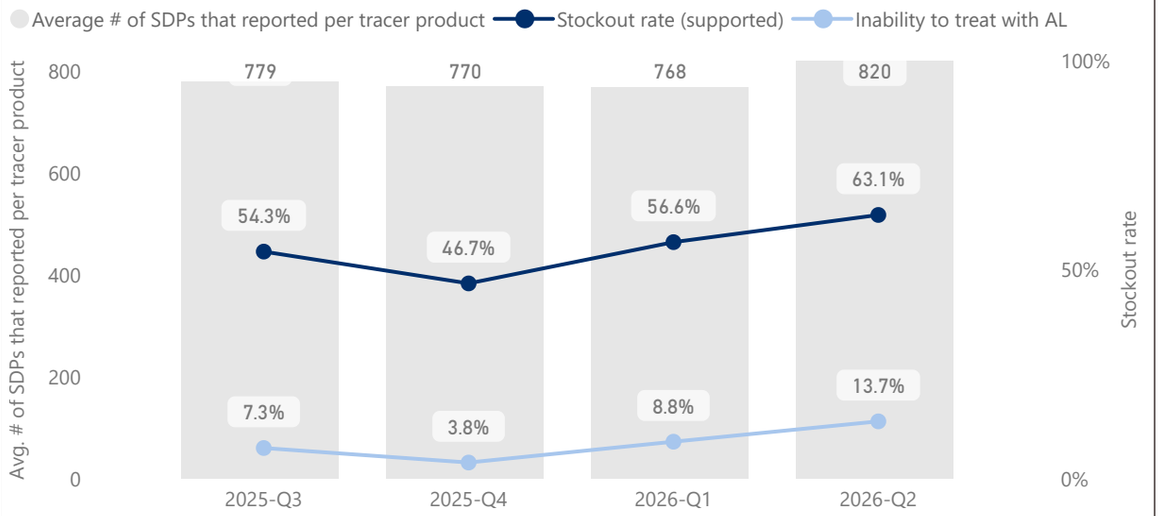
The reporting rate for facilities offering HIV/AIDS commodities remained at 100 percent this quarter.

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-Q2 | Tracer Product: All

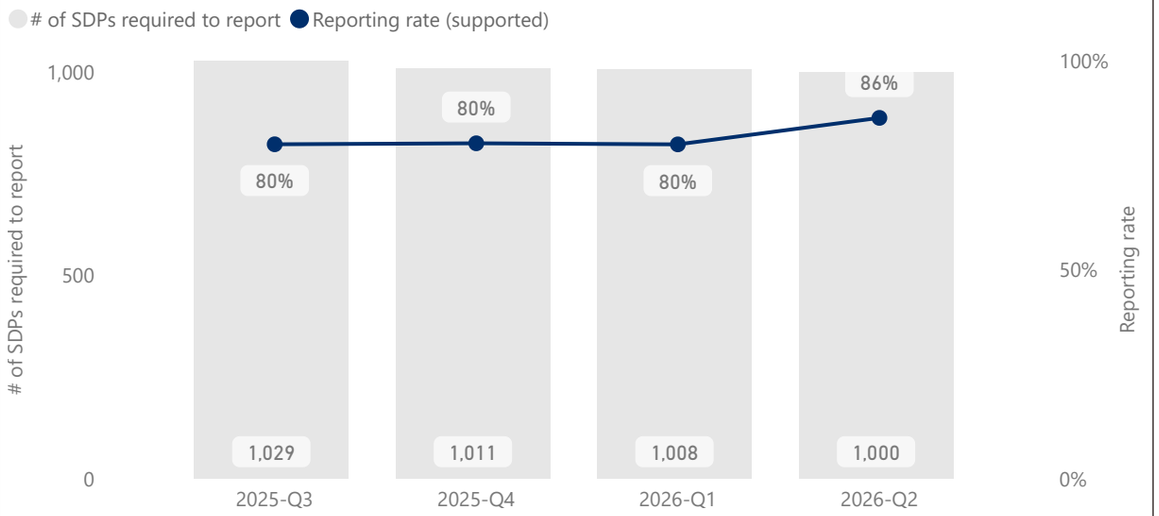
B1. Stockout rate at service delivery points



Data source

LMIS February 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

LMIS February 2026

B3. Data Source (numerator)

LMIS February 2026

Analysis

The stockout rate for supported facilities increased from 56.6 percent in the last quarter, FY 2026 Q1, to 63.1 percent in FY 2026 Q2. While there was a 31 percentage-point decrease in stockout rates for both AS/AQ 25/67.5 mg and mRDTs, stockout rates have increased for all other tracer products compared to the previous quarter. There is an ongoing distribution of AS/AQ and RDTs during April 2026.

Analysis

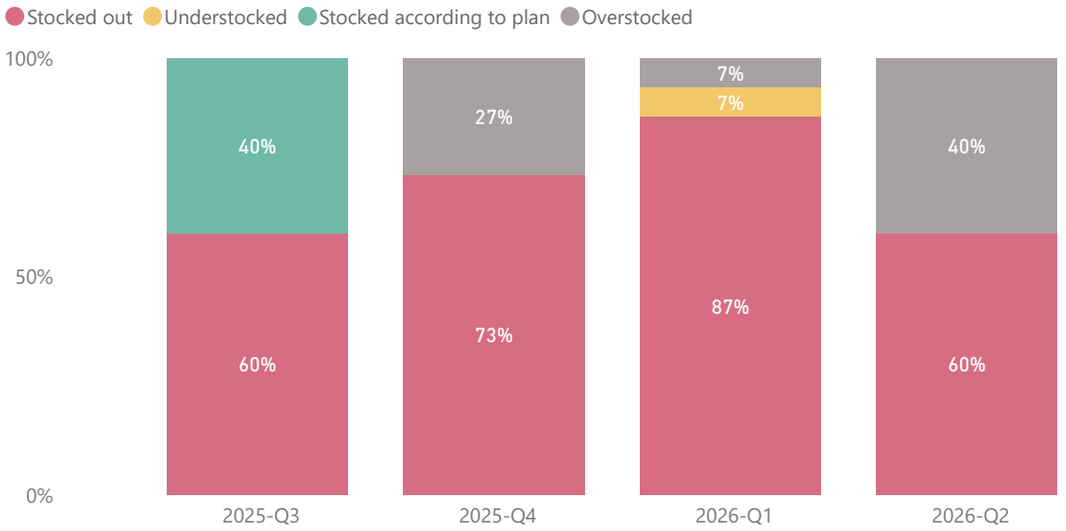
SDP reporting rate is 86 percent, a 6 percentage-point increase from the previous quarter.

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

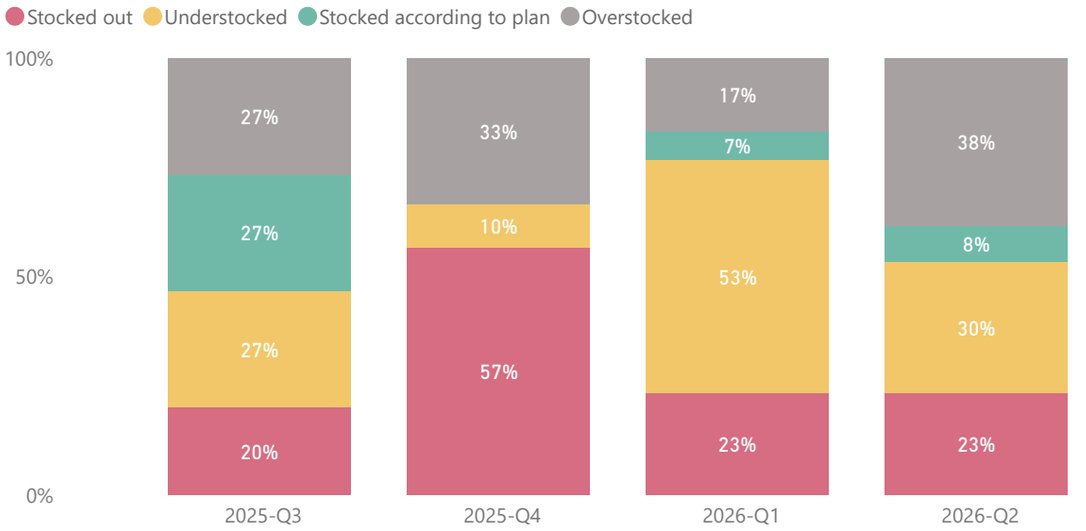
Country: Angola | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	LMIS January, Fabruary, March 2026

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	LMIS January, Fabruary, March 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 %

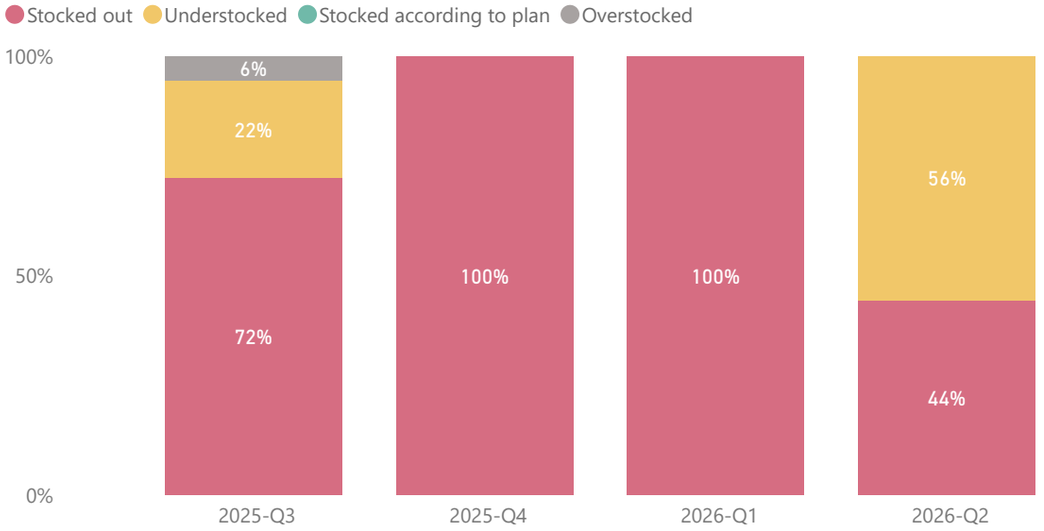
Ref	Analysis
B2	The stockout rate at the central level decreased to 60 percent but continues to remain high due to PEPFAR guidelines to prioritize distribution of resources to the implementation site level to reduce storage costs at 3PL warehouses. At the central level, all observations for 1st line adult and pediatric ARVs were overstocked; for pediatric ARVs, pALD is still in the introduction phase and consumption at the facility level is expected to continue increasing over time. Similar to the central level, most observations at the subnational level show that adult and pediatric ARVs are overstocked and RTKs are understocked or stocked out.
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

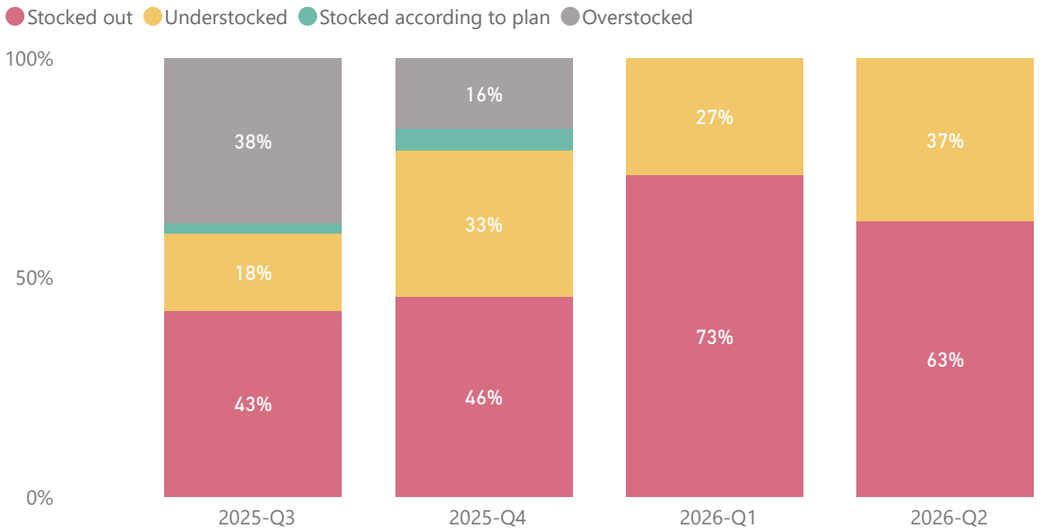
Country: Angola | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	LMIS January, Fabruary, March 2026

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	LMIS January, Fabruary, March 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	Most products previously stored at the central level were distributed to lower levels and the next shipments are awaited for storage. Because of this, stockout (44 percent) and understocked (56 percent) rates remain high at the central level. All tracer products stock observations continue to remain stocked out (63 percent) or understocked (37 percent) at the subnational level because there are ongoing distributions of products to facilities.

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-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**2.8%**	**106**
HIV-First RTK	0.0%	22
HIV-Most used 1st line ARV	0.0%	22
HIV-Most used 1st line pediatric ARV	0.0%	19
HIV-Most used 2nd line ARV	4.8%	21
HIV-Second RTK	9.1%	22
Malaria	**63.1%**	**8,202**
Malaria-First line ACT (AL 6x1)	84.8%	863
Malaria-First line ACT (AL 6x2)	76.0%	863
Malaria-First line ACT (AL 6x3)	86.9%	863
Malaria-First line ACT (AL 6x4)	77.6%	863
Malaria-First line ACT (AS/AQ 100/270mgx3)	65.2%	863
Malaria-First line ACT (AS/AQ 100/270mgx6)	62.1%	863
Malaria-First line ACT (AS/AQ 25/67.5mg)	31.7%	863
Malaria-First line ACT (AS/AQ 50/135mg)	88.9%	863
Malaria-Rapid diagnostic test for malaria	17.4%	863
Malaria-Sulphadoxine-pyrimethamine	17.2%	435
Overall	**62.3%**	**8,308**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	13.7%	863

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	86%	1000

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%**	**30%**	**52%**	**33**
HIV/AIDS	0%	40%	0%	60%	15
Malaria	0%	0%	56%	44%	18
Subnational level 1	**2%**	**10%**	**35%**	**53%**	**238**
HIV/AIDS	8%	38%	30%	23%	60
Malaria	0%	0%	37%	63%	178
Overall	**2%**	**11%**	**35%**	**53%**	**271**

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 2
January - March 2026

Country M&E Indicator Performance

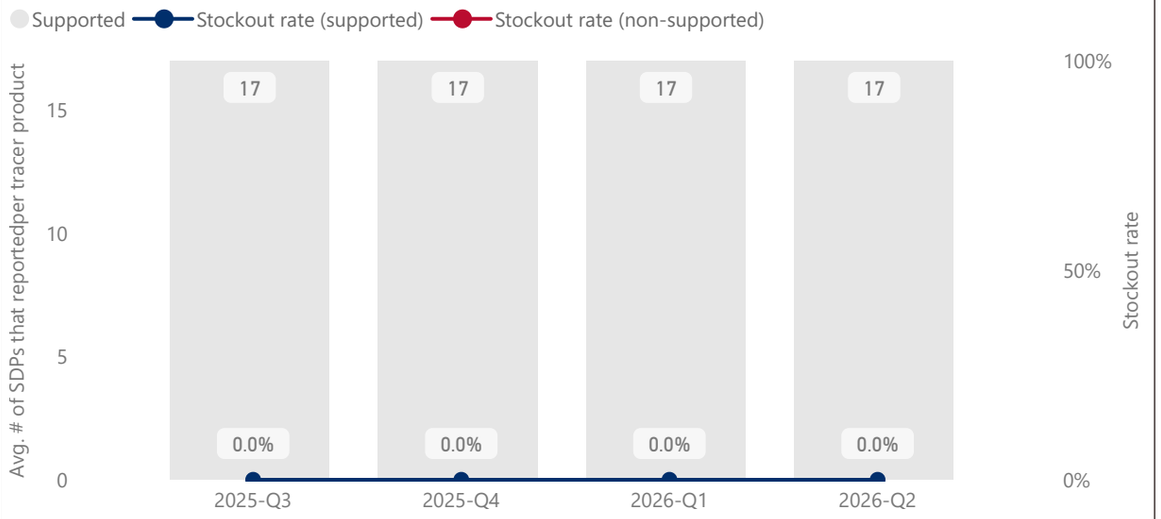
Country

Benin

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Benin | Current Quarter: 2026-Q2 | Tracer Product: All

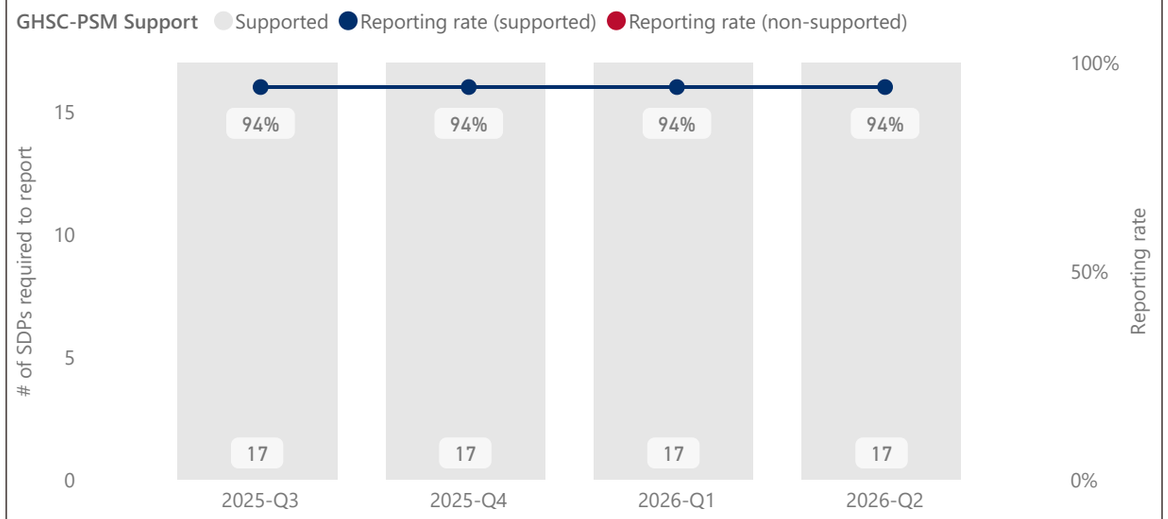
B1. Stockout rate at service delivery points



Data source

SVDL/eDisp Février 26

B3. LMIS reporting rate



B3. Data Source (denominator)

SVDL/Edisp Février 26

B3. Data Source (numerator)

SVDL/Edisp Février 26

Analysis

Similar to FY 2026 Q1 performance, no stockouts of HIV/AIDS commodities monitored by the project were recorded in FY 2026 Q2. As in the previous quarter, first-line adult ARVs, second-line adult ARVs, and pediatric first-line ARVs remained available at all 17 reporting sites in FY 2026 Q2. In addition, first and second RTKs, as well as viral load reagents, recorded zero stockout rates across all reporting SDPs.

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, combined with timely adjustments informed by consumption trends, further reduced the risk of shortages and ensured uninterrupted commodity availability at SDPs.

Analysis

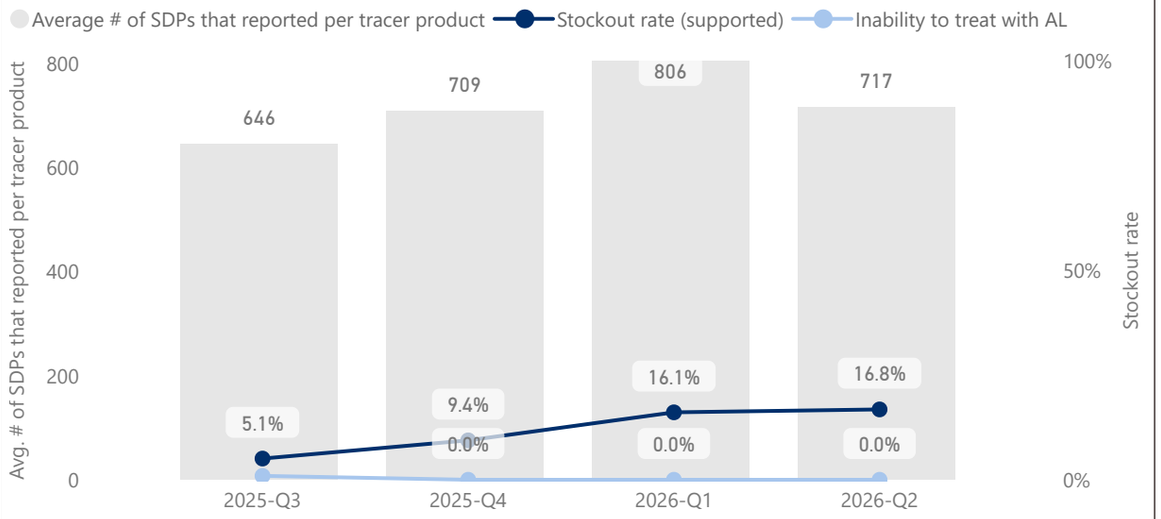
Sixteen out of 17 reporting sites submitted data in FY 2026 Q2, resulting in a reporting rate of 94 percent, maintaining the reporting rate achieved in FY 2026 Q1.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



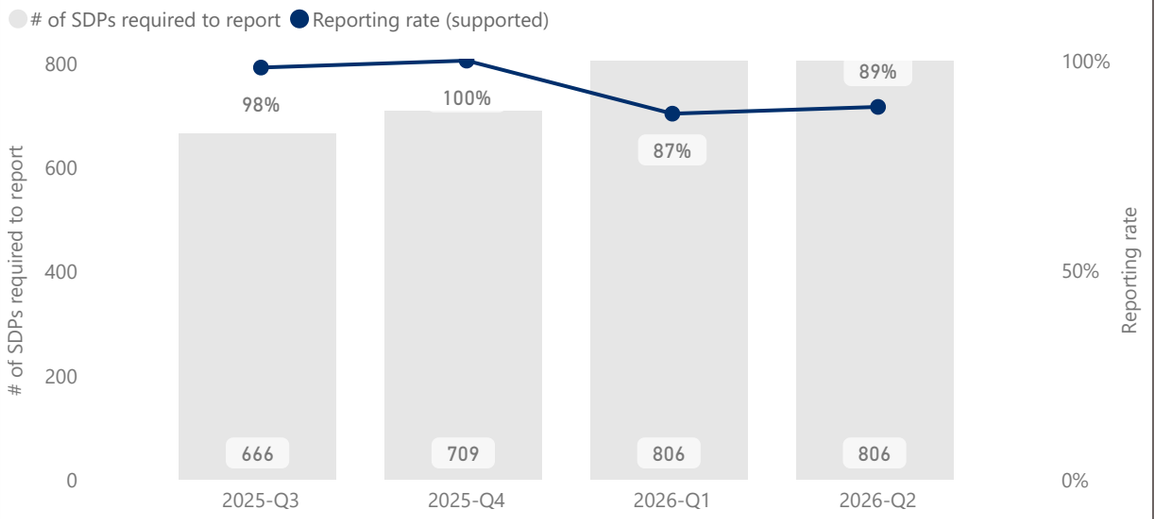
Data source

SVDL/Esigl Février 26

Analysis

In FY 2026 Q2, stockout rates for AL formulations at SDPs ranged from 18 to 26 percent. Nonetheless, the inability to treat malaria with AL remained at zero percent, indicating sustained treatment availability at health facilities. Treatment access was further strengthened by the recent introduction of artesunate-pyronaridine (ASPY) as an alternative first-line treatment across all age groups. Malaria RDT and sulphadoxine-pyrimethamine stockout rates remained low, at 4 percent and 5 percent, respectively, due to recent deliveries received from the government and GHSC-PSM.
The project will work with the NMCP to strengthen coordination, adjust quantifications, and provide relevant systems support to sites in line with product distribution schedules. These efforts are expected to ensure continuous product availability.

B3. LMIS reporting rate



B3. Data Source (denominator)

SVDL/Esigl Février 26

B3. Data Source (numerator)

SVDL/Esigl Février 26

Analysis

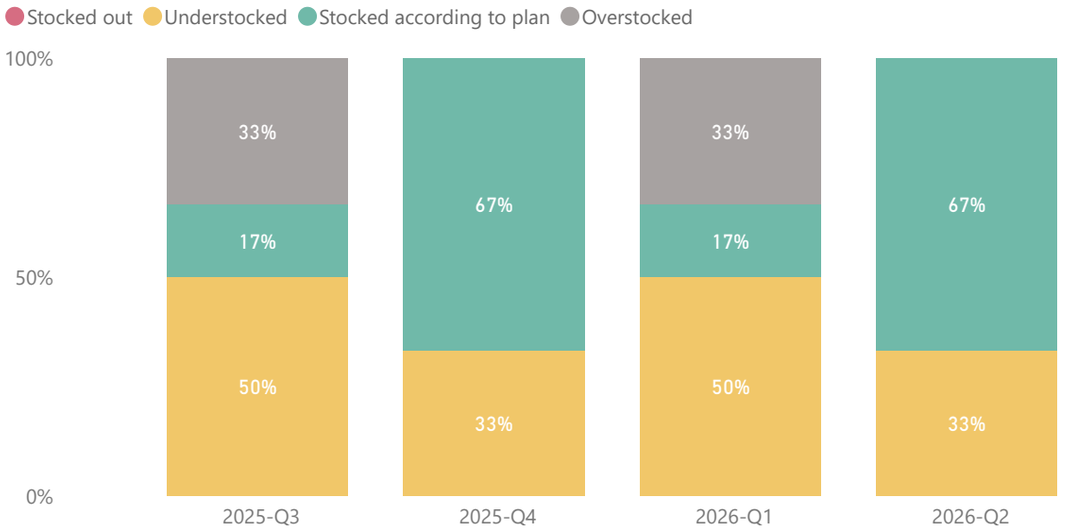
In FY 2026 Q2, the reporting rate for malaria commodities from SDPs was 89 percent from 806 sites, as compared to 87 percent in FY 2026 Q1. GHSC-PSM, through its regional logistics officers, is providing supervision to improve reporting rates.

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: Benin | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)

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 %

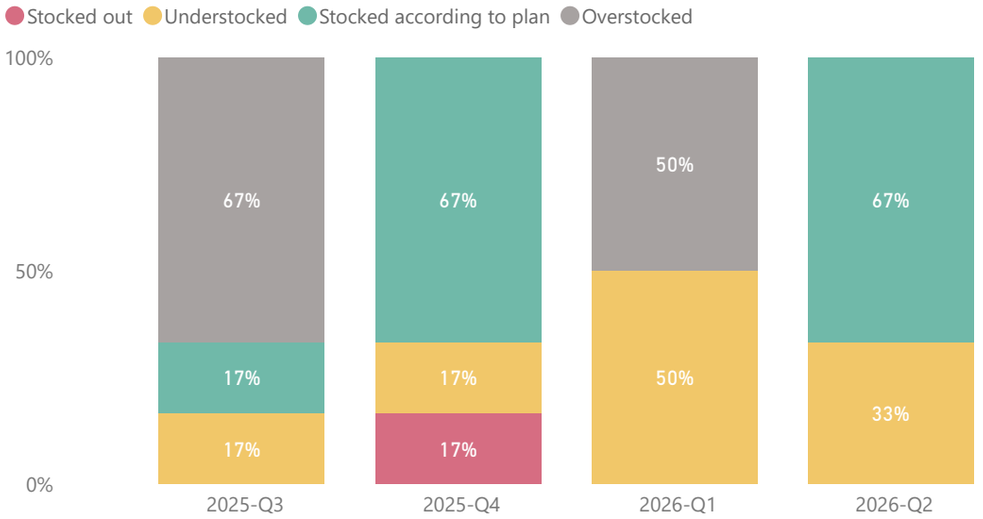
Ref	Analysis
B2	For HIV/AIDS tracer commodities stocked at the central level, the proportion of products stocked according to plan increased from 17 percent in FY 2026 Q1 to 67 percent in FY 2026 Q2, while the proportion of products that were understocked declined from 50 percent to 33 percent over the same period. The most used first-line ARV, the most used second-line ARV, viral load reagents, and the second RTK were all stocked according to plan. The first RTK and the most used first-line pediatric ARV were understocked. Planned RTK shipments expected by the end of April 2026 and pediatric ARV shipments anticipated before the end of May 2026 are expected to address these temporary gaps and restore stock levels to expected ranges. Overall, the HIV supply chain remains responsive, with measures in place to mitigate identified stock imbalances and maintain uninterrupted service delivery.
C7	GHSC-PSM does not report on this indicator, as the warehousing and distribution of HIV/AIDS commodities are carried out by the government.

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

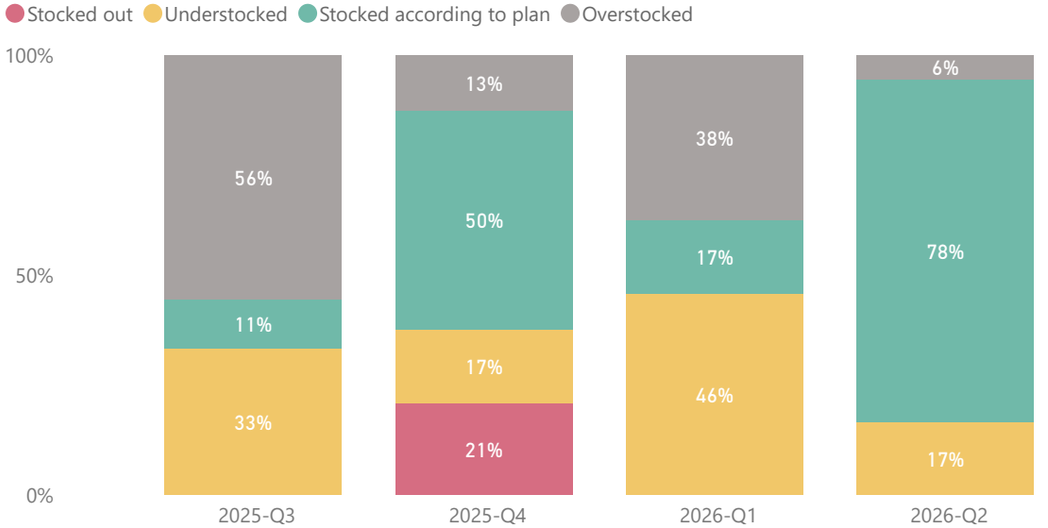
Country: Benin | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	Rapport Mensuel SOBAPS Février 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	In FY 2026 Q2, 67 percent of malaria commodities at the central level were stocked according to plan, while the remaining 33 percent were understocked, compared to FY 2026 Q1, when 50 percent were stocked according to plan, and 50 percent were understocked. This improvement at the central level was due to the timely receipt of new stocks and their distribution to the regional level during the quarter. At the regional level, the proportion of commodities stocked according to plan improved from 17 percent in FY 2026 Q1 to 78 percent in FY 2026 Q2, while 6 percent of commodities were overstocked and 17 percent were understocked. These observations represent an improvement in stock status compared to the previous quarter (FY 2026 Q1). The project will work with the NMCP to monitor stock levels and plan distributions to keep stock levels within forecasted limits.
C7	GHSC-PSM does not report on this indicator. Warehousing and distribution for 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-Q2

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, Lab diagnostics, RTKS, and malaria commodities for this quarter (FY 2026 Q2) were reviewed, updated, and submitted to the GHSC-PSM headquarters FASP team.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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	**16.8%**	**4,302**
Malaria-First line ACT (AL 6x1)	17.9%	717
Malaria-First line ACT (AL 6x2)	23.8%	717
Malaria-First line ACT (AL 6x3)	24.0%	717
Malaria-First line ACT (AL 6x4)	25.5%	717
Malaria-Rapid diagnostic test for malaria	4.2%	717
Malaria-Sulphadoxine-pyrimethamine	5.3%	717
Overall	**16.4%**	**4,404**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.0%	717

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%	17
Malaria	89%	806

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%**		**12**
HIV/AIDS	67%		33%		6
Malaria	67%		33%		6
Subnational level 1	**78%**	**6%**	**17%**	**0%**	**18**
Malaria	78%	6%	17%	0%	18
Overall	**73%**	**3%**	**23%**	**0%**	**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 2
January - March 2026

Country M&E Indicator Performance

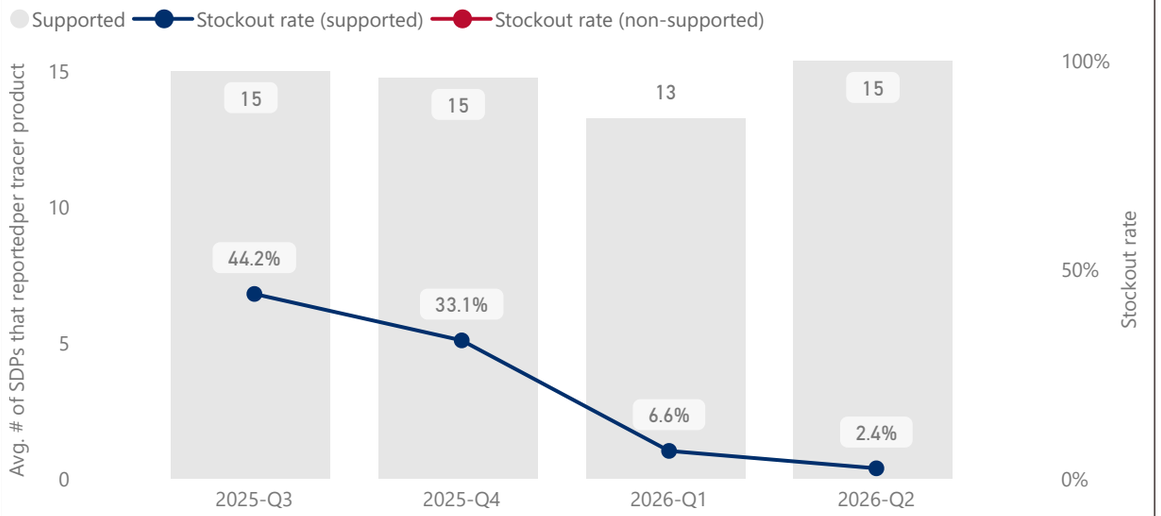
Country

Botswana

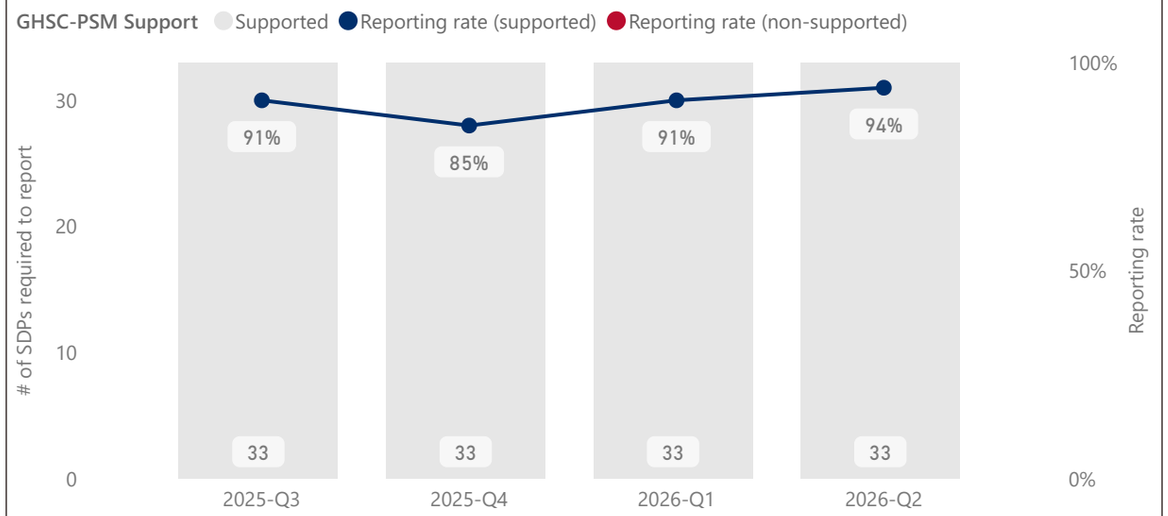
Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Botswana | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



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

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

Analysis

Stockout rates at SDPs declined from the previous quarter to 2.4 percent. This is due to incoming shipments of ARVs and RTKs and distribution of RTK stock from the central level. The only facility reporting on EID tracer products was stocked out of reagent (100 percent stockout) and one out of seven facilities reporting on viral load (VL) products was stocked out of VL reagent (24 percent stockout).

Analysis

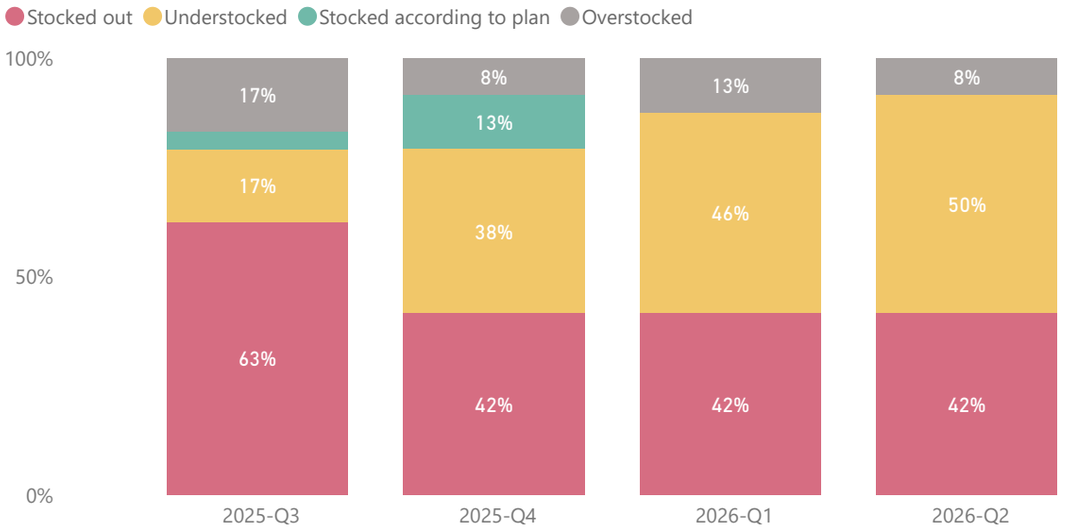
The reporting rate increased to 94 percent in FY 2026 Q2. A majority of reports were submitted by the deadline (87 percent) with the remaining reports being submitted within the following two weeks. GHSC-PSM continues to provide technical assistance to the CMS through its technical team and a seconded 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-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	CMS Pharmacy StockSituation Report March'25
Central	CMS Lab StockSituation Report March'25

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



Supply Chain Level	B2. Data Source(s)

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 Q1, no tracer commodities were observed as stocked according to plan. All observations of adult ARVs continue to be understocked. New stock of pediatric ARVs was received resulting in a shift from all observations being understocked (FY 2026 Q1) to now being overstocked. A similar shift was observed for RTKs which were stocked out in the previous quarter and now have more stock, however, all stock observations indicate they remain understocked. All observations for early infant diagnosis (EID) reagents continue to be stocked out because they are supposed to be delivered directly to health facilities, while stock continues to be low for EID consumables and viral load (VL) commodities. The slight decline in stock status is a result of few shipments that CMS received during the quarter due to financial constraints that have impacted the procurement and delivery of shipments, especially for lab commodities.
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-Q2

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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**2.4%**	**123**
HIV-EID consumable	0.0%	1
HIV-EID reagent	100.0%	1
HIV-First RTK	4.3%	23
HIV-Most used 1st line ARV	0.0%	31
HIV-Most used 1st line pediatric ARV	0.0%	30
HIV-Second RTK	0.0%	23
HIV-Viral load consumable	0.0%	7
HIV-Viral load reagent	14.3%	7
Overall	**2.4%**	**123**

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	94%	33

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**0%**	**8%**	**50%**	**42%**	**24**
HIV/AIDS	0%	8%	50%	42%	24
Overall	**0%**	**8%**	**50%**	**42%**	**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 2
January - March 2026

Country M&E Indicator Performance

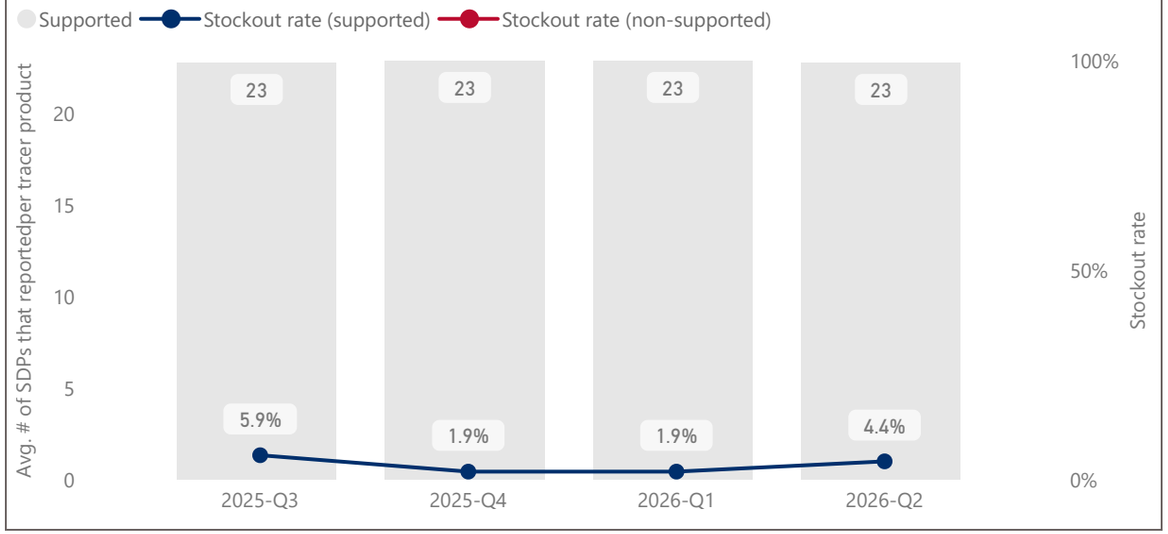
Country

Burkina Faso

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Burkina Faso | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



Data source

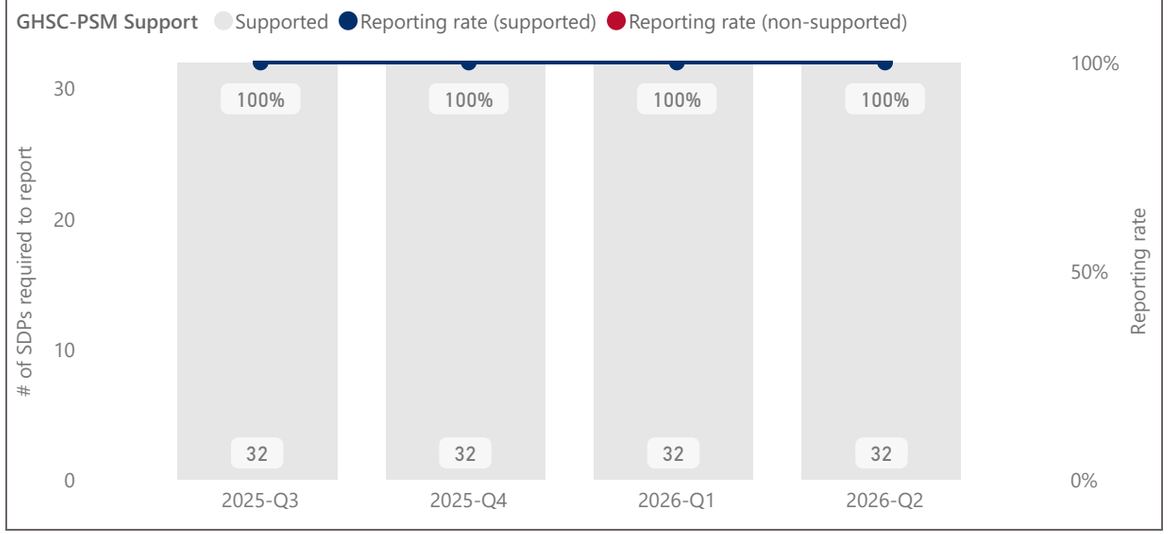
PEPFAR Sites Logistics Data Collection canvas, February 2026

Weekly surveillance data from viral load platform, March 2026

Analysis

The stockout rate for HIV/AIDS tracer products at USG-supported sites increased from 1.9 percent in FY 2026 Q1 to 4.4 percent in FY 2026 Q2. First RTK, viral load reagents, and viral load consumables were stocked out in 9.4 percent, 14.3 percent, and 4.4 percent of facilities, respectively. These stockouts are attributable to increased consumption of RTKs and delays in the restocking of viral load reagents and consumables due to quality concerns. However, none of the 32 USG-supported HIV treatment sites experienced any stockout of the most-used first-line ARV, most-used second-line ARV, most-used pediatric ARV, second RTKs, or EID reagents. The project is supporting MoH stock managers to conduct weekly and monthly stock level analyses to identify resupply and redistribution needs and ensure continuous product availability for uninterrupted service delivery.

B3. LMIS reporting rate



B3. Data Source (denominator)

PEPFAR Sites Logistics Data Collection canvas, February 2026

B3. Data Source (numerator)

PEPFAR Sites Logistics Data Collection canvas, February 2026

Analysis

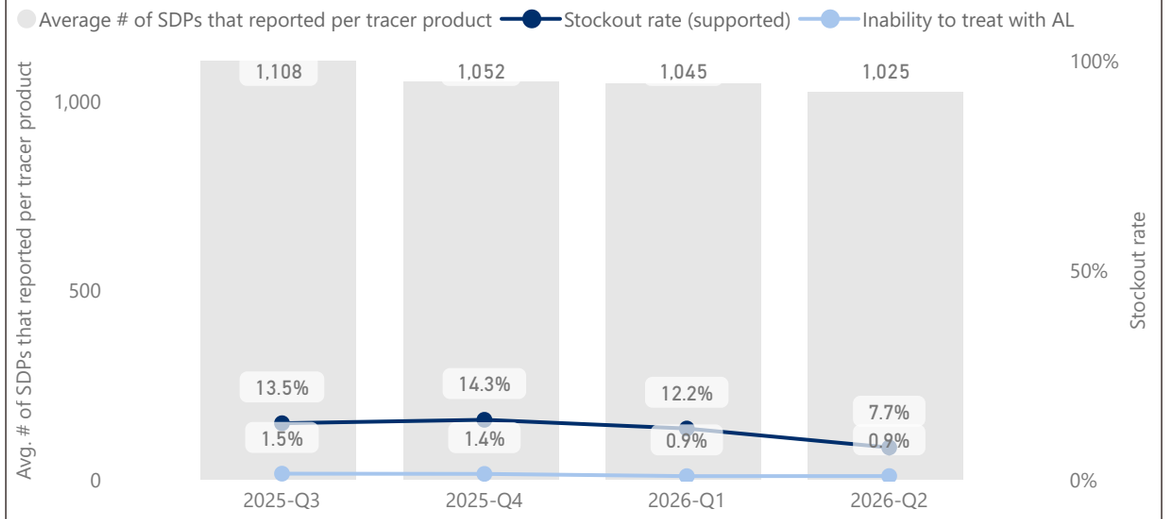
As in previous quarters, PEPFAR-supported HIV/AIDS sites maintained a 100 percent reporting rate in FY 2026 Q2 through the weekly data collection tool and bi-monthly data validation sessions supported by GHSC-PSM. The project continues to provide support to improve data quality and timeliness of reports.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



Data source

Endos-BF (DHIS2), Febuary 2026

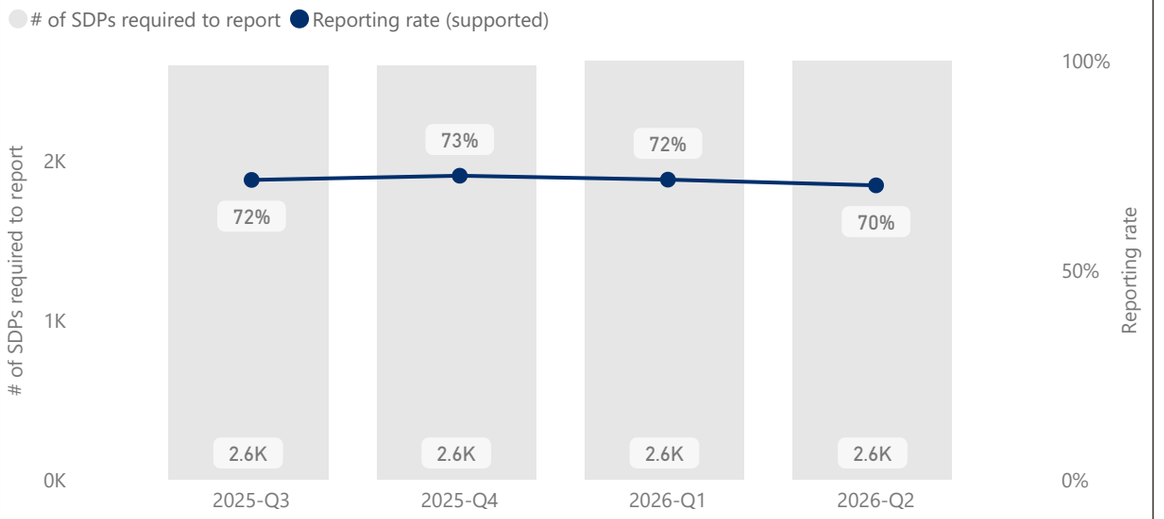
Analysis

The overall stockout rate for malaria tracer commodities decreased from 12.2 percent in FY 2026 Q1 to 7.7 percent in FY 2026 Q2, while the inability to treat malaria with an AL formulation remained constant at 0.9 percent over the same period. The reduction in the overall stockout rate can be attributed to low seasonal demand and the receipt of deliveries at the central level within the quarter.

However, there were variations in product-specific stockout rates ranging from 1 percent to 20 percent across commodities. AL 6x4 had a stockout rate of 17 percent due to stockouts at the central level. The stockout rate for DHA-PPQ decreased from 37.1 percent to 19.5 percent for the 3-tablet presentation and from 12.0 percent to 3.0 percent for the 9-tablet presentation between FY 2026 Q1 and FY 2026 Q2. Similarly, stockout rates for ASPY 20/160 mg (3 sachets) declined from 4.3 percent to 1.4 percent between FY 2026 Q1 and FY 2026 Q2, while stockout rates for ASPY 60/180 mg (9 tablets) decreased from 2 percent to 1 percent over the same period due to adequate availability at the central level.

GHSC-PSM will continue to work with in-country stakeholders to address specific product availability challenges.

B3. LMIS reporting rate



B3. Data Source (denominator)

Endos-BF (DHIS2), February 2026

B3. Data Source (numerator)

Endos-BF (DHIS2), February 2026

Analysis

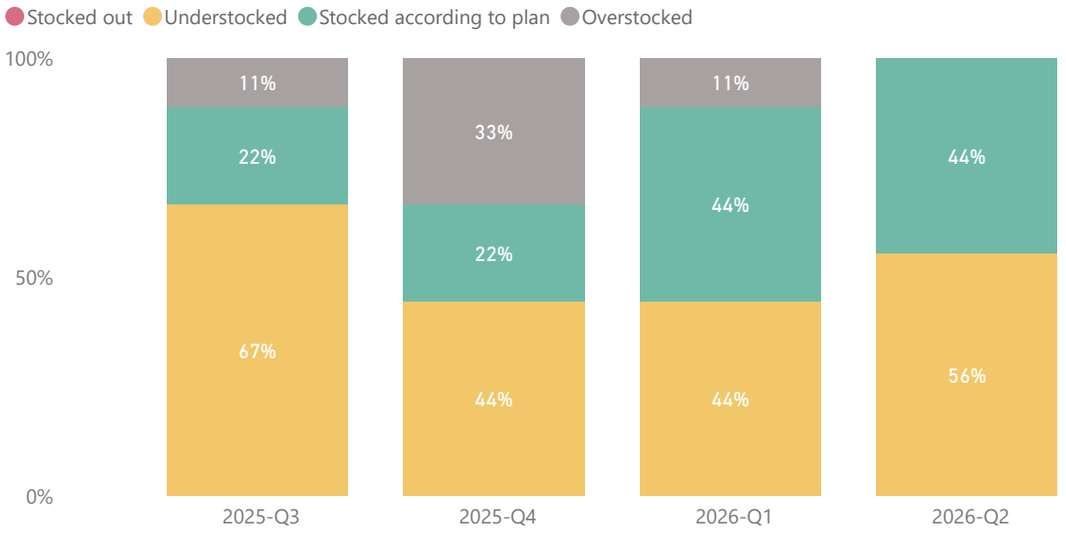
The reporting rate for malaria tracer products into the DHIS2 platform, Endos-BF in FY 2026 Q2 was 70 percent.

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: Burkina Faso | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)

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 %

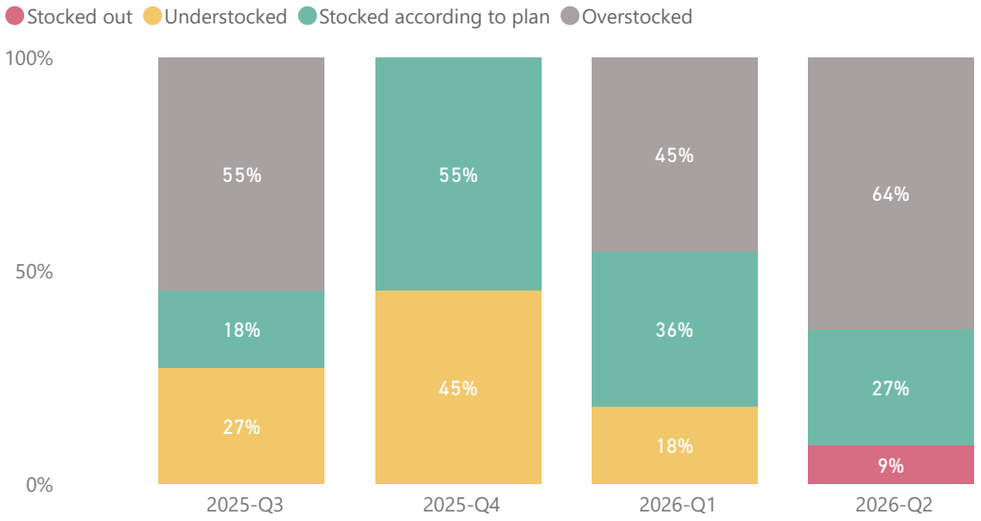
Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	In FY 2026 Q2, the percentage of HIV/AIDS tracer commodities stocked according to plan at the central level remained at 44 percent, unchanged from FY 2026 Q1. Commodities stocked according to plan at the time of reporting included the most-used second-line ARVs, most-used first-line pediatric ARVs, EID reagents, and EID consumables. This reflects compliance with planned GHSC-PSM and Global Fund order deliveries during the quarter. However, the proportion of commodities understocked increased from 44 percent in FY 2026 Q1 to 56 percent in FY 2026 Q2. These included the most-used first-line ARVs, first and second RTKs, viral load reagents, and viral load consumables. Understocking is mainly due to delays in replenishment and increased consumption of available stocks during the quarter. Planned TLD 300/300/50mg shipments in FY 2026 Q3, and the delivery of HIV early detection test kits is expected to improve central-level stock availability. GHSC-PSM will continue to engage with the central level (CAMEG) to ensure timely fulfillment of orders to district stores and SDPs.
C7	The project does not report on this indicator in Burkina Faso.

Warehouse stock status and product losses
Malaria

Country: Burkina Faso | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	PipeLine and CAMEG, February 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 Q2, all malaria tracer commodities were in stock at the central level except AL 6x2. The proportion of commodities stocked according to plan decreased from 36 percent in FY 2026 Q1 to 27 percent in FY 2026 Q2, while the proportion of commodities overstocked increased from 45 percent to 64 percent over the same period. Overstocked commodities included AL 6x1, ASPY 20mg/60mg (3 sachets), ASPY 60mg/180mg (9 tablets), and RDTs. The primary causes of overstocking were low seasonal demand and the receipt of shipments during the quarter (FY 2026 Q2), which led to an accumulation of stocks at the central warehouse. The project will continue working with CAMEG to monitor stock levels and improve allocation to address these imbalances.
C7	The project 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.

HIV Tracer Products and Supply Planning

Country: Burkina Faso

Current Quarter: 2026-Q2

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

GHSC-PSM supported the MoH technical committees in the quarterly review of procurement plans for malaria, ARV, and RTK commodities. The updated malaria procurement plans and the ARV and Lab-RTK quarterly supply plans were submitted to the GHSC-PSM FASP team. In addition, GHSC-PSM supported MoH technical committees to conduct monthly supply plan reviews for ARV, RTK, and malaria commodities.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**4.4%**	**205**
HIV-EID consumable	12.5%	24
HIV-EID reagent	0.0%	7
HIV-First RTK	9.4%	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	28.6%	7
HIV-Viral load reagent	14.3%	7
Malaria	**7.7%**	**11,278**
Malaria-First line ACT (AL 6x1)	4.2%	1,019
Malaria-First line ACT (AL 6x2)	3.3%	1,019
Malaria-First line ACT (AL 6x3)	4.1%	1,019
Malaria-First line ACT (AL 6x4)	17.2%	1,019
Malaria-First line ACT (ASPY 180/60mg, 9 tabs)	0.7%	550
Malaria-First line ACT (ASPY 60/20mg, 3 sachets)	0.9%	550
Malaria-First line ACT (DHA-PPQ 20mg/160mg 3 tabs)	19.7%	279
Malaria-First line ACT (DHA-PPQ 40mg/320mg 9 tabs)	2.9%	279
Malaria-LLINs	7.2%	1,848
Malaria-Rapid diagnostic test for malaria	3.9%	1,848
Malaria-Sulphadoxine-pyrimethamine	16.1%	1,848
Overall	**7.6%**	**11,483**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.9%	1,019

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	70%	2631

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**35%**	**35%**	**25%**	**5%**	**20**
HIV/AIDS	44%		56%		9
Malaria	27%	64%		9%	11
Overall	**35%**	**35%**	**25%**	**5%**	**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 2
January - March 2026

Country M&E Indicator Performance

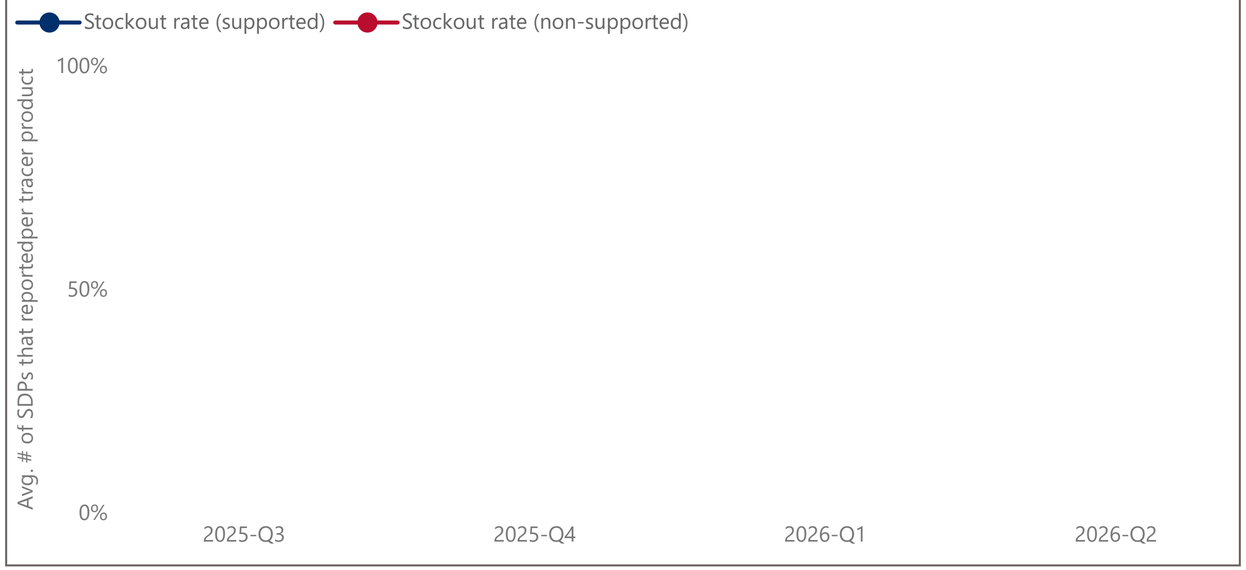
Country

Burma

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Burma | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points

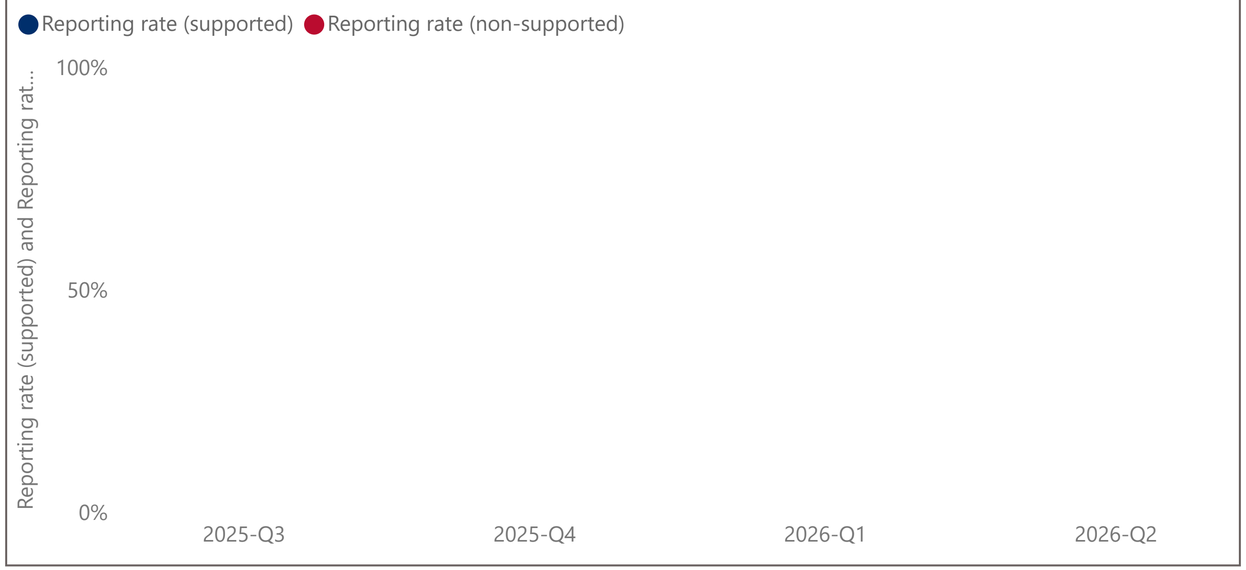


Data source

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.

B3. LMIS reporting rate



B3. Data Source (denominator)

B3. Data Source (numerator)

Analysis

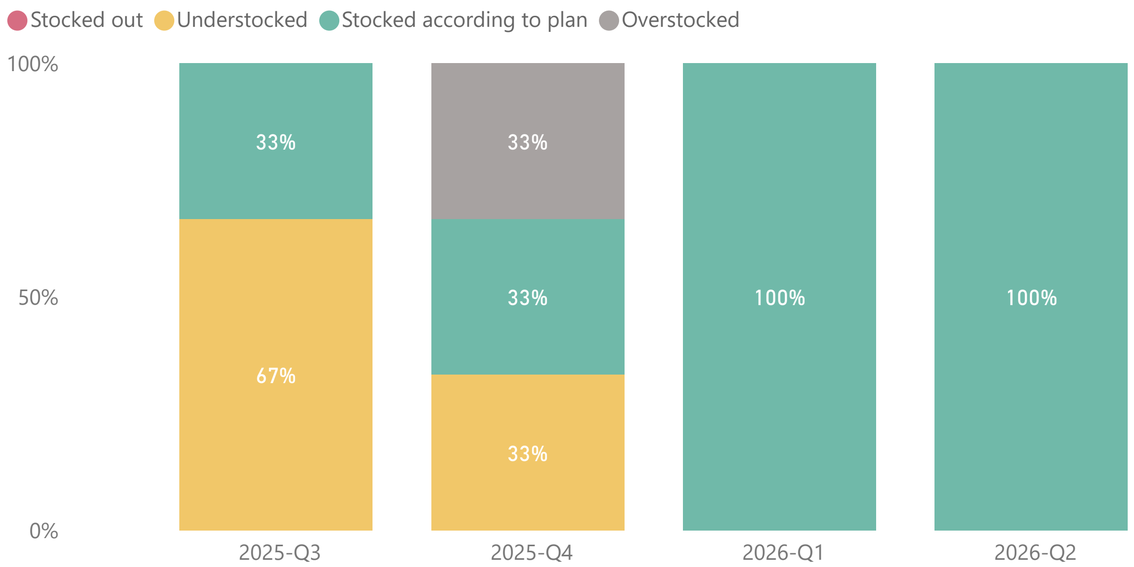
Due to ongoing political instability, the project has had challenges being able to report stock availability from HIV sites. Compounding this issue now, an eLMIS architecture re-structure has removed visibility down to the SDP level. Therefore GHSC-PSM in Burma will not be able to report on this indicator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

Analysis 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

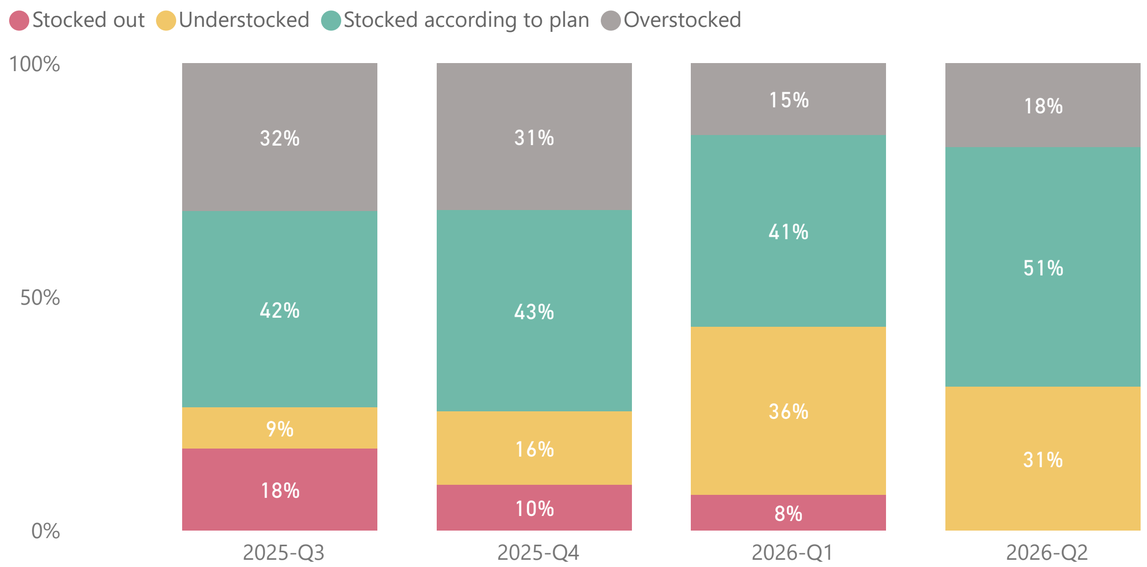
Country: Burma | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	Regional government warehouses (March 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 remained constant from the previous quarter at 100 percent. Central level stock situation continues to remain optimal. At the subnational level, the stock situation has also improved with and increase in the stocked according to plan rate from 41 percent in the previous quarter to 51 percent this quarter. Stockout observations shifted into understocked and understock observations shifted into stocked according to plan as more stock was distributed from the central level.
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-Q2

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-Q2

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

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**100%**				**3**
HIV/AIDS	100%				3
Subnational level 1	**51%**	**18%**	**31%**	**0%**	**39**
HIV/AIDS	51%	18%	31%	0%	39
Overall	**55%**	**17%**	**29%**	**0%**	**42**

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 2
January - March 2026

Country M&E Indicator Performance

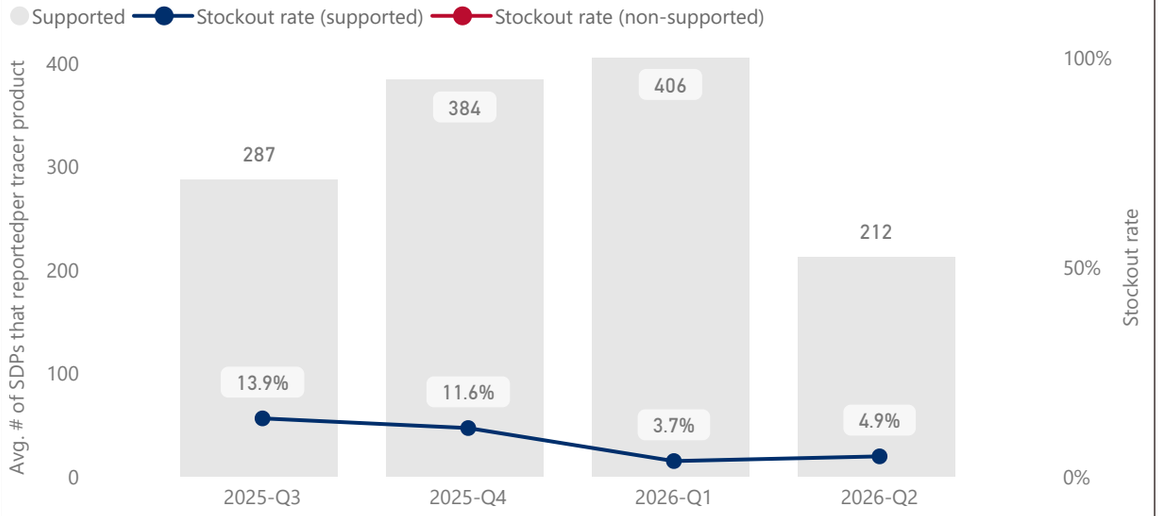
Country

Burundi

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Burundi | Current Quarter: 2026-Q2 | Tracer Product: All

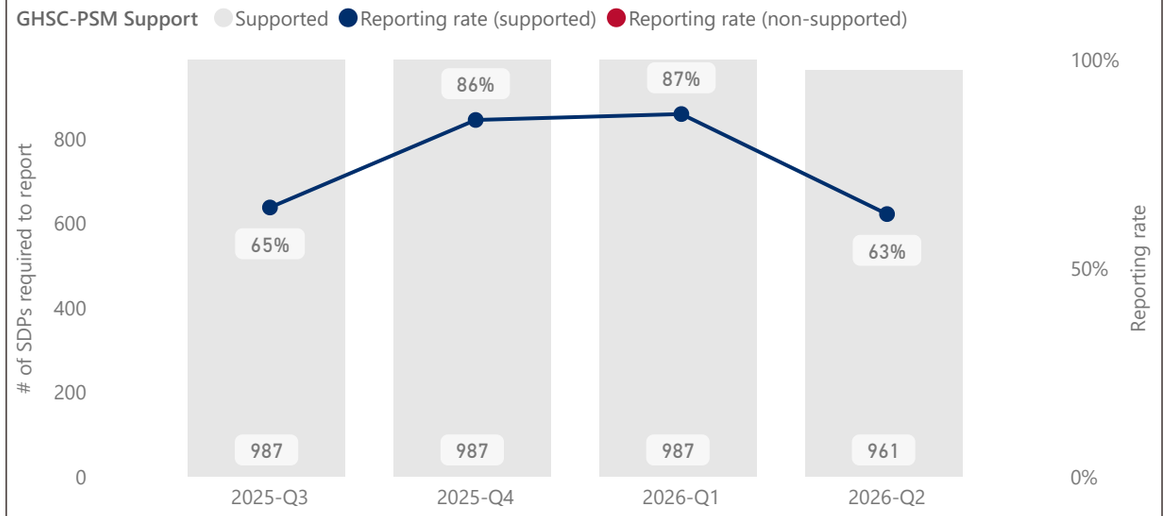
B1. Stockout rate at service delivery points



Data source

DHIS2 Fevrier 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

DHIS2 Fevrier 2026

B3. Data Source (numerator)

DHIS2 Fevrier 2026

Analysis

The stockout rate for HIV/AIDS tracer products increased marginally from 3.7 percent in FY 2026 Q1 to 4.9 percent in FY 2026 Q2. This increase is due to low stock levels of first RTK at the central level for full supply to SDPs. The arrival of new RTK shipments in April 2026 is expected to improve the understock situation at the central level for adequate supply to SDPs.

Analysis

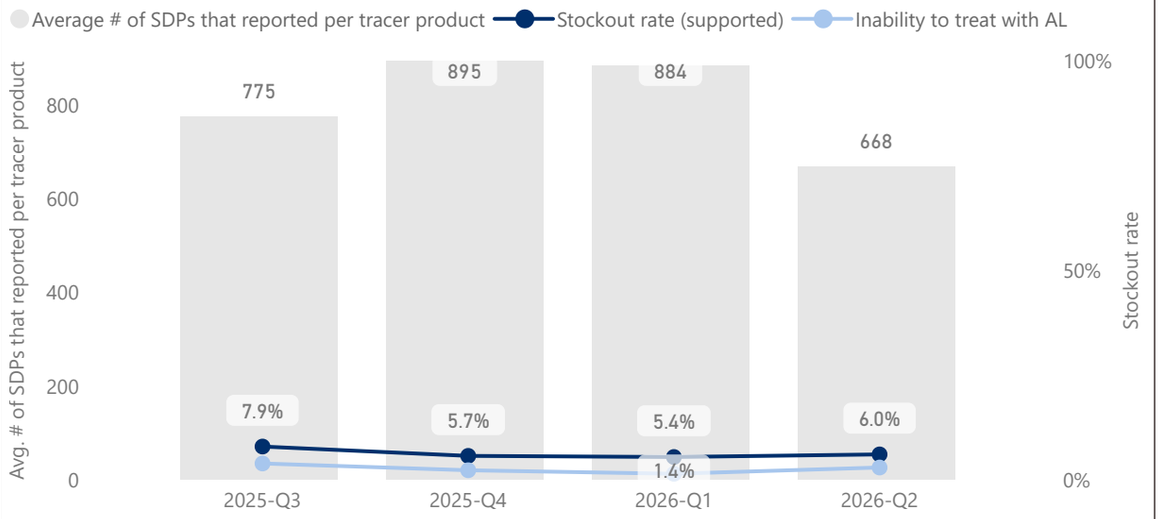
The reporting rate for HIV/AIDS commodity sites decreased from 87 percent in FY 2026 Q1 to 63 percent in FY 2026 Q2. This decrease is due to the interruption of interoperability between DHIS2 and the LMIS (Medexis), which is being resolved.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



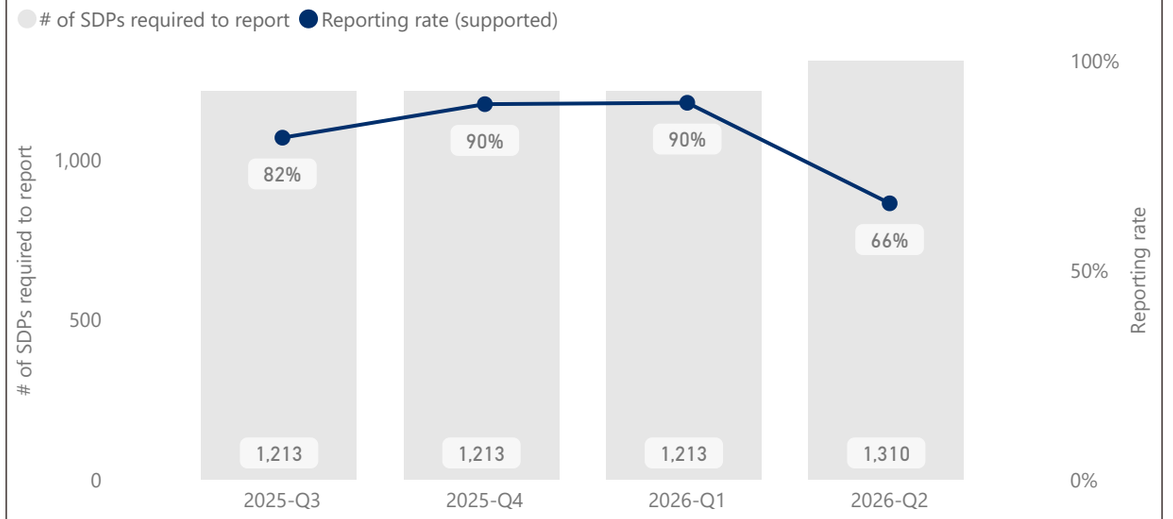
Data source

DHIS2 Fevrier 2026

Analysis

The stockout rate for tracer malaria commodities increased from 5.4 percent in FY 2026 Q1 to 6 percent in FY 2026 Q2, while the inability to treat malaria with an ACT formulation increased from 1.4 percent to 2.9 percent between the two quarters. This increase is primarily due to low stock levels of AL 6x3 and AL 6x4 at the central level for distribution to SDPs. Consequently, the National Malaria Control Program (NMCP) is rationing distribution to districts to minimize the impact at the SDP level. Two USG-supported shipments of AL 6x4 and AL 6x3 are pending tax exemptions; therefore, the project is coordinating with the NMCP and the Global Fund to accelerate shipments and minimize disruptions to product supply.

B3. LMIS reporting rate



B3. Data Source (denominator)

DHIS2 Fevrier 2026

B3. Data Source (numerator)

DHIS2 Fevrier 2026

Analysis

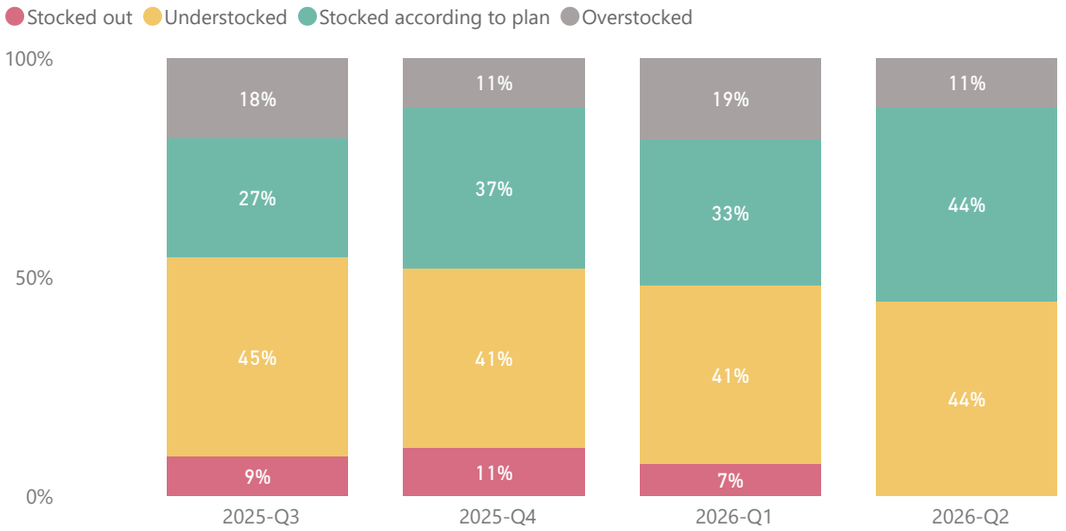
The reporting rate for malaria commodity sites decreased from 90 percent in FY 2026 Q1 to 66 percent in FY 2026 Q2. This decrease is a negative impact of the discontinuation of interoperability between Medexis and DHIS2 since January 2026.

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-Q2 | 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)

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 %

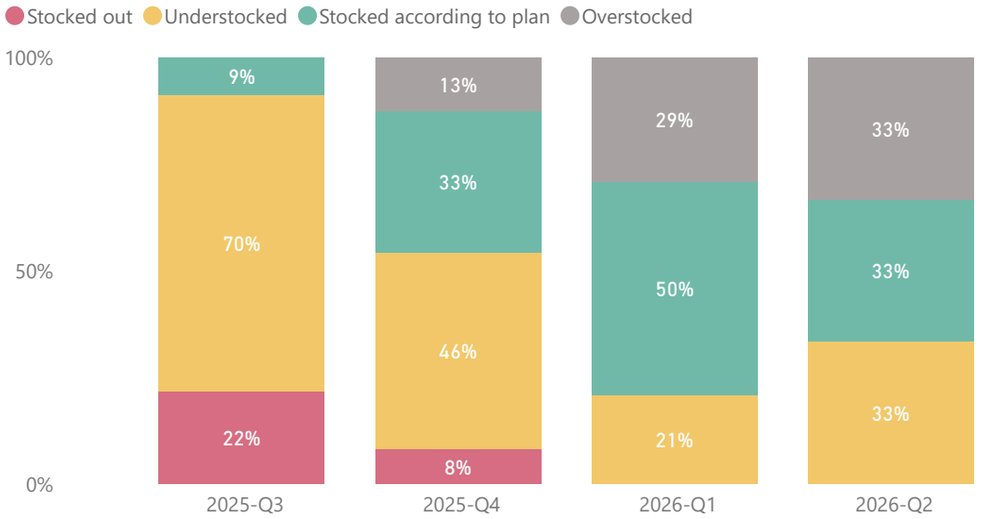
Ref	Analysis
B2	At the central level, the proportion of HIV/AIDS commodities stocked according to plan increased from 33 percent in FY 2026 Q1 to 44 percent in FY 2026 Q2, mainly due to the arrival of planned USG and Global Fund shipments in January 2026. Also, 11 percent of commodities were overstocked, while 44 percent were understocked, with no stockouts at the central level in FY 2026 Q2.
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

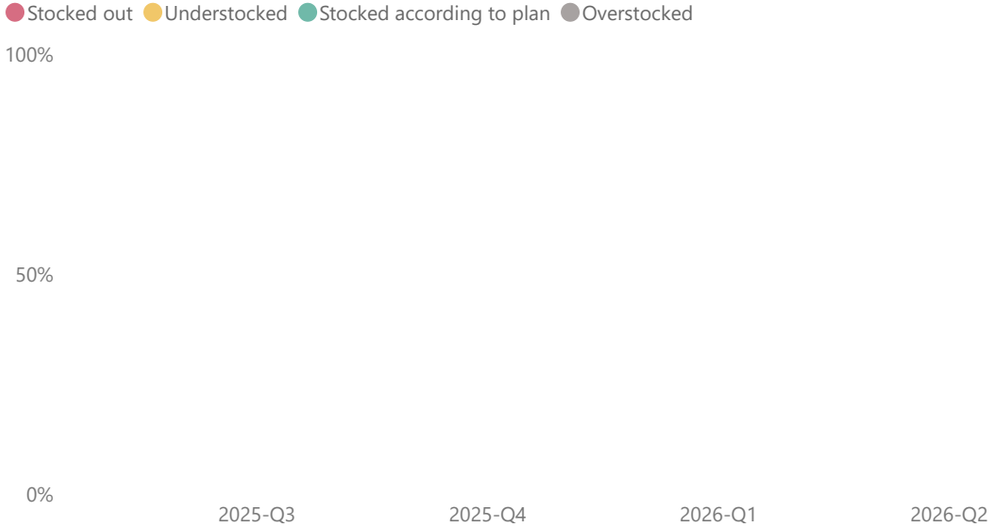
Country: Burundi | Current Quarter: 2026-Q2 | Tracer Product: All

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	For malaria commodities at the central warehouses, the proportion of commodities stocked according to plan decreased from 50 percent in FY 2026 Q1 to 33 percent in FY 2026 Q2. Also, the proportion of products understocked increased from 21 percent in FY 2026 Q1 to 33 percent in FY 2026 Q2. This situation reflects the effect of delays to planned USG shipments pending the issuance of tax exemption certificates. While exemptions are pending, the project is coordinating with the NMCP to fast-track Global Fund shipments to prevent prolonged stockouts.
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-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
Lab (HIV diagnostics)	✓	✓	✓	✓
Malaria commodities	✓	✓	✓	✓
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: Burundi

Current Quarter: 2026-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**4.9%**	**637**
HIV-First RTK	11.7%	77
HIV-Most used 1st line ARV	3.0%	434
HIV-Most used 2nd line ARV	7.1%	126
Malaria	**6.0%**	**4,678**
Malaria-First line ACT (AL 6x1)	5.2%	757
Malaria-First line ACT (AL 6x2)	5.1%	762
Malaria-First line ACT (AL 6x3)	5.9%	762
Malaria-First line ACT (AL 6x4)	6.5%	802
Malaria-LLINs	4.8%	475
Malaria-Rapid diagnostic test for malaria	8.2%	660
Malaria-Sulphadoxine-pyrimethamine	6.7%	460
Overall	**5.9%**	**5,315**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	2.9%	820

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	63%	961
Malaria	66%	1310

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**39%**	**22%**	**39%**	**0%**	**51**
HIV/AIDS	44%	11%	44%	0%	27
Malaria	33%	33%	33%	0%	24
Overall	**39%**	**22%**	**39%**	**0%**	**51**

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 2
January - March 2026

Country M&E Indicator Performance

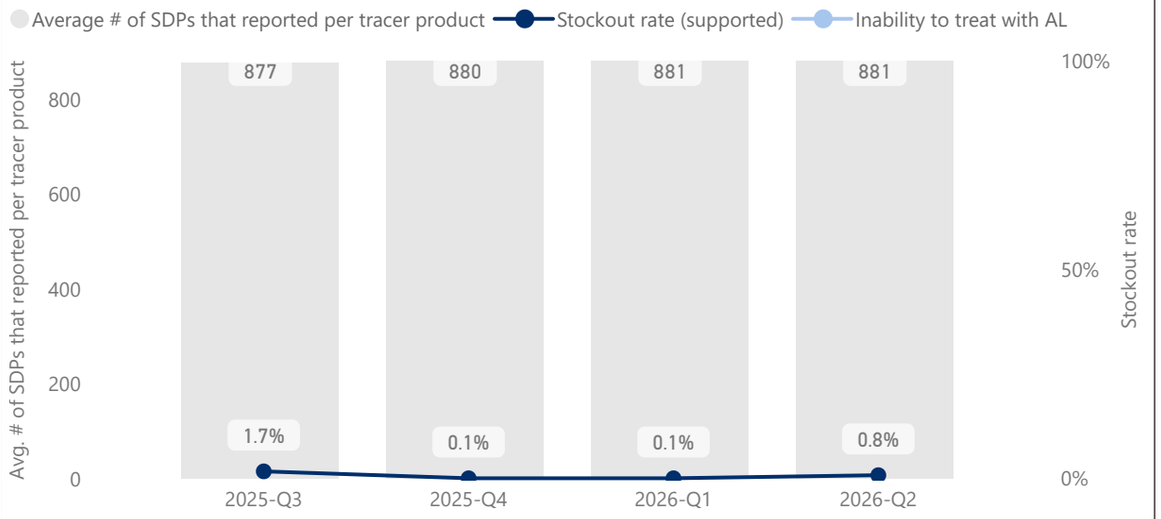
Country

Cambodia

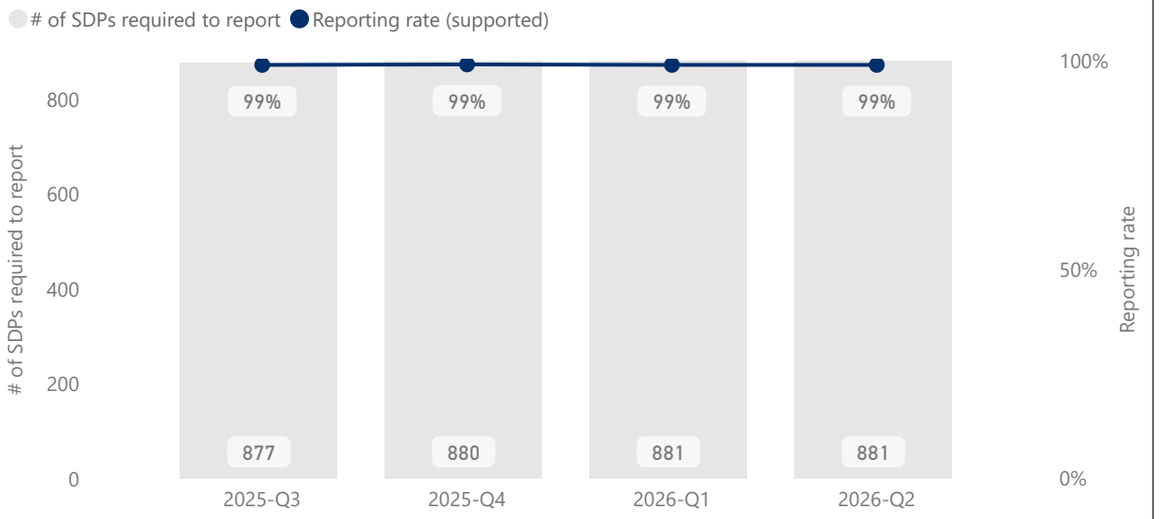
Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Cambodia | Current Quarter: 2026-Q2 | 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_Feb
CNM MIS, Stock out rate at HF (RDT)_2026_Feb

B3. Data Source (denominator)	B3. Data Source (numerator)
CNM MIS-HF Stock Data - 2026 Feb	CNM MIS-HF Stock Data - 2026 Feb

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 increased slightly from 0.1 percent in the previous period to 0.8 percent this quarter. Despite the minor increase, the low stockout rate indicates sufficient product stock at all health facilities. The increase in stockout rate of RDT has driven the overall increase this quarter. The stockout is due to a product transition for the RDT category (RDT PF/PV to RDT PF/PAN) which has led to some small delays in procurement and distribution from CMS to the operationl districts. The stockout issues of RDT have already been addressed by the ODs/HFs with close monitoring and coordination from CNM, IPs and CSOs.

Analysis

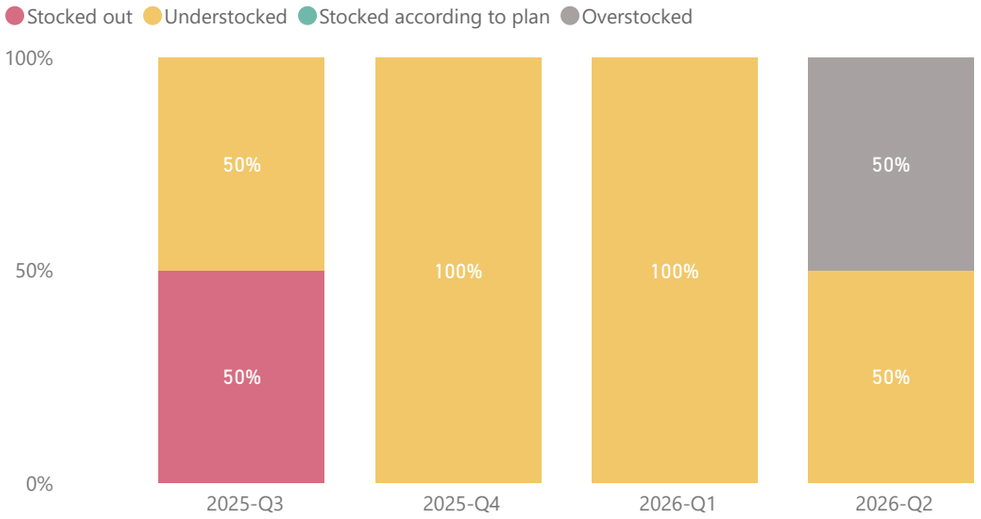
The LMIS reporting rate for malaria commodities remained consistent at 99 percent this quarter.

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

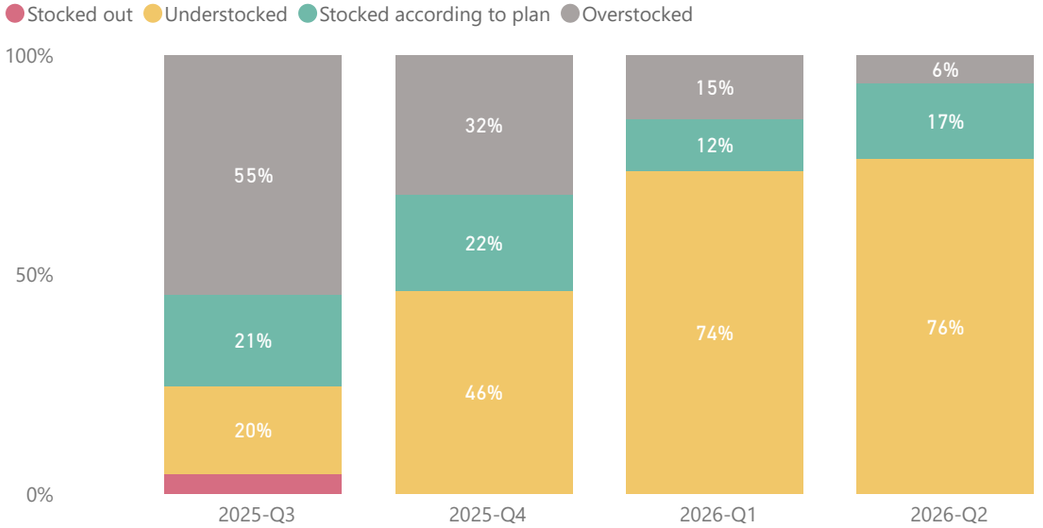
Country: Cambodia | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	CMS Report_31 Mar 2026

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	CNM MIS-OD Stock Data - 2026 Feb

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, mRDTs were overstocked and ASPY 180/60mg was understocked. There were no observations for stockouts or stocking according to plan. At the subnational level, stock observations also remained relatively consistent in comparison to past quarters, with 17 percent of products stocked according to plan, 6 percent of products overstocked, and understocks account for 76 percent. Specifically, ASPY is understocked at the subnational level at 73 percent, and mRDTs are understocked at the subnational level at 80 percent, stocked according to plan at 15 percent, and overstocked at 5 percent. As stated on the prior page, the country is is in transition from Pf/Pv to Pf/Pan RDT in the country from during the first four months of 2026. Current reporting for Q2 is using stock data for the legacy product. GHSC-PSM will continue to closely monitor the transition to ensure the appropriate moment to switch to the new RDT product and will note this in future indicator analysis.
C7	There were no product losses to report this quarter.

HIV Tracer Products and Supply Planning

Country: Cambodia

Current Quarter: 2026-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
Malaria	**0.8%**	**1,762**
Malaria-First line ACT (ASPY 180/60mg, 9 tabs)	0.1%	881
Malaria-Rapid diagnostic test for malaria	1.5%	881
Overall	**0.8%**	**1,762**

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%	881

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central		**50%**	**50%**		**2**
Malaria		50%	50%		2
Subnational level 1	**17%**	**6%**	**76%**		**110**
Malaria	17%	6%	76%		110
Overall	**17%**	**7%**	**76%**		**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 2
January - March 2026

Country M&E Indicator Performance

Country

DRC

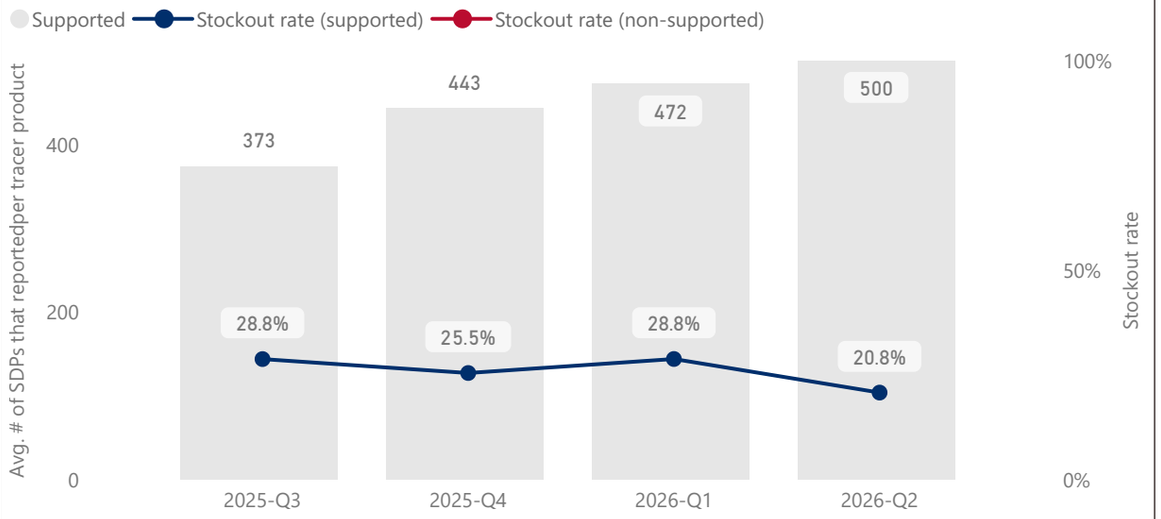




Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: DRC | Current Quarter: 2026-Q2 | Tracer Product: All

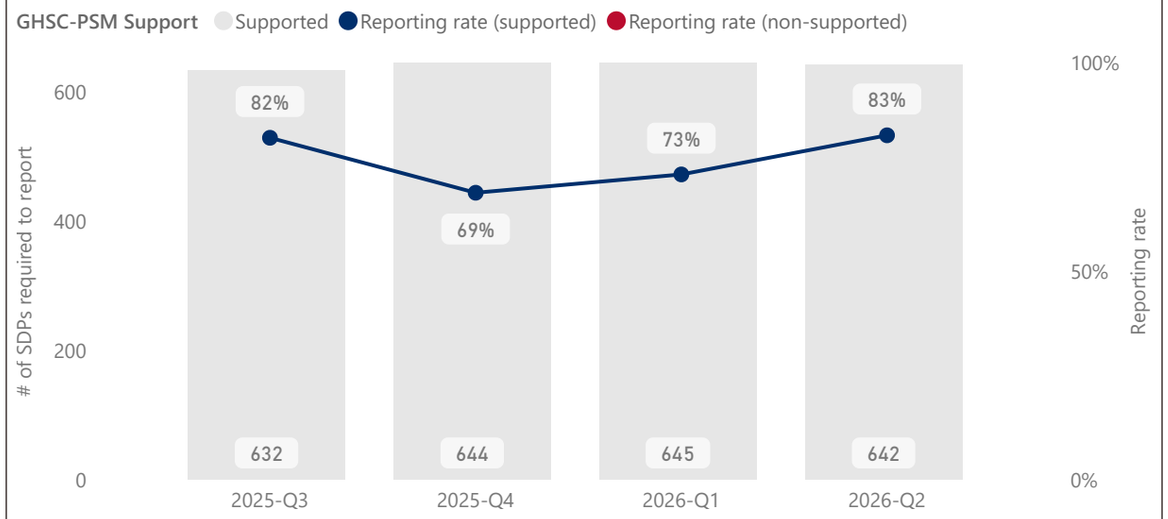
B1. Stockout rate at service delivery points



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 decreased from 28.8 percent in FY 2026 Q1 to 20.8 percent in FY 2026 Q2, indicating measurable improvement. Despite this progress, the stockout rate remains high and continues to be a priority area for project interventions.

The primary drivers of the persistent stockouts include reduced ordering of second-line antiretroviral medicines (ARVs) due to low patient volumes at most service delivery points (SDPs), as well as the ongoing transition of the most commonly used pediatric ARV regimen from ABC/3TC to pALD formulations.

In response, the project is collaborating with national- and provincial-level stakeholders to strengthen quantification and distribution practices, with particular emphasis on low-volume products such as second-line and pediatric ARVs.

It should be noted that data reporting coverage increased during the period, with the number of SDPs submitting data rising from 472 in FY 2026 Q1 to 500 in FY 2026 Q2, which may have influenced observed stockout rates.

Analysis

In FY 2026 Q2, 500 out of 642 sites submitted data. The overall reporting rate for HIV/AIDS reporting sites increased to 82 percent from 73 percent in FY 2026 Q1.

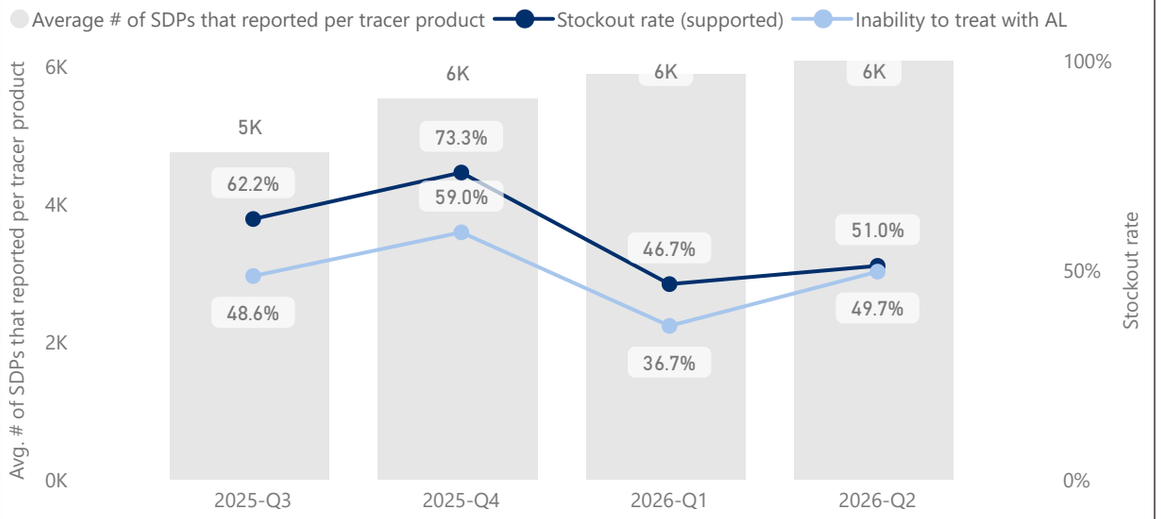
To sustain the improvement in reporting rates, GHSC-PSM is supporting targeted coaching for newly onboarded LMIS users. In addition, electronic data collection at SDPs is being expanded, and joint supervisory visits are planned in low-performing areas to support data entry.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



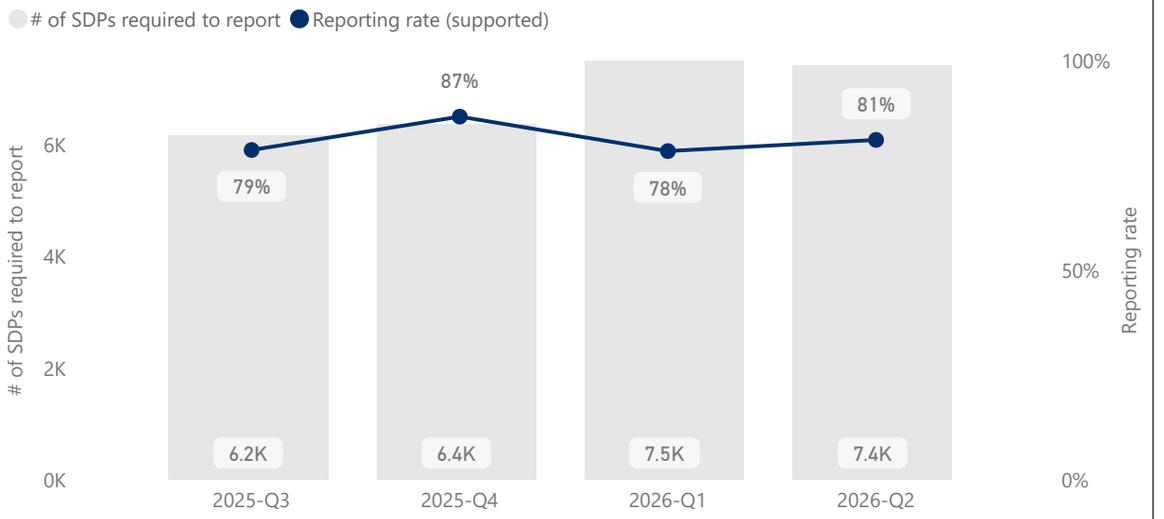
Data source

Infomed

Analysis

The stockout rate for tracer malaria commodities increased from 46.7 percent in FY 2026 Q1 to 51 percent in FY 2026 Q2. This increase reflects a combination of factors, including limited availability of ACTs, particularly ASAQ, during the most recent last-mile distributions conducted between December 2025 and February 2026, as well as insufficient quantities of AL formulations to meet demand. In response, the project is working with national-level stakeholders to accelerate ACT orders to allow immediate delivery and inclusion in the planned FY 2026 Q3 distribution scheduled for April–May 2026. The project will also strengthen monitoring of products at risk of expiry and take timely actions to prevent further losses.

B3. LMIS reporting rate



B3. Data Source (denominator)

Infomed

B3. Data Source (numerator)

Infomed

Analysis

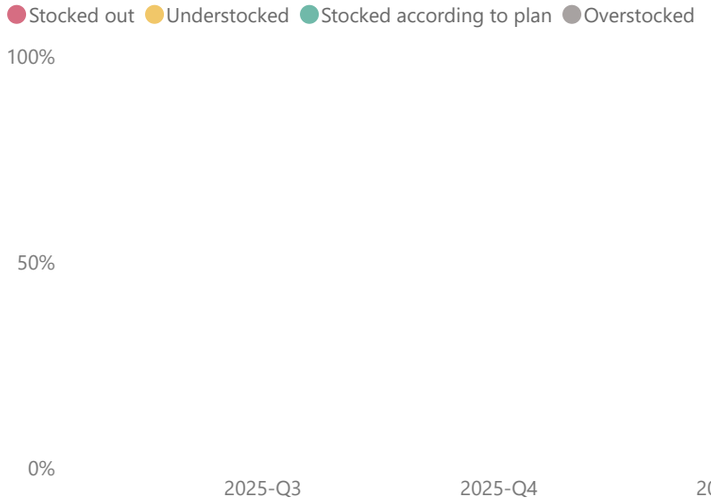
In FY 2026 Q2, the overall reporting rate for sites stocking malaria commodities was 82 percent, based on 7,412 expected reports. Reporting rates were 83 percent at the primary level, 70 percent at the secondary level, and 88 percent at the tertiary level. This represents an improvement from the 78 percent recorded in FY 2026 Q1. However, further improvements are required to reach the national benchmark of 90 percent for zone pharmacists.

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-Q2 | Tracer Product: All

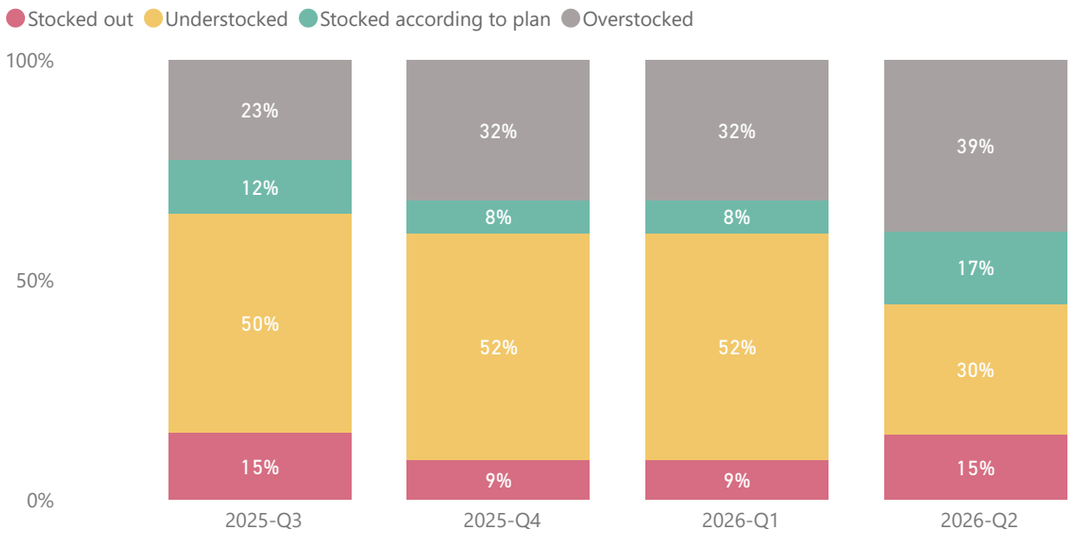
B2. Stocked according to plan - Central level



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	HIV/AIDS commodities	$231,251	$25,656,160	0.90%

Ref	Analysis
B2	The percentage of HIV/AIDS commodities at regional distribution centers (RDCs) that were stocked according to plan increased from 8 percent in FY 2026 Q1 to 17 percent in FY 2026 Q2. Nonetheless, 39 percent of commodities were overstocked due to reduced demand for some products. In addition, 30 percent were understocked, and 15 percent were stocked out due to pending pipeline orders awaiting customs clearance at the national level. These delays have slowed deliveries to RDCs and limited timely replenishment. To address these challenges, GHSC PSM and partners are prioritizing the acceleration of pipeline deliveries to bring stock levels back in line with the supply plan. In addition, there is closer monitoring of products at risk of expiry, along with proactive redistribution between RDCs and the use of batch interchangeability measures, in coordination with other program partners, to reduce expiry risks and improve overall stock balance
C7	HIV commodities valued at USD 231,251 were lost to expiry during the quarter. This represents an expiry rate of 0.9 percent against an average stock value of USD 25,656,160

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-Q2 | Tracer Product: All

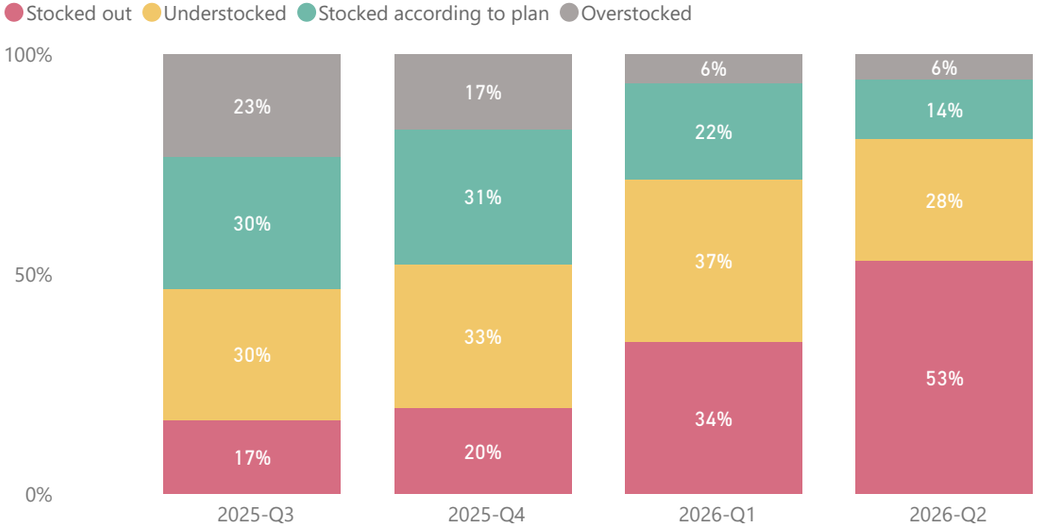
B2. Stocked according to plan - Central level



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	$313,939	$5,786,083	5.43%

Ref	Analysis
B2	At the RDCs, 14 percent of tracer malaria commodities were stocked according to plan, 6 percent were overstocked, 28 percent were understocked, and 53 percent were stocked out in FY 2026 Q2. These stock observations indicate limited product availability at the regional level for distribution to SDPs. This was mainly due to the depletion of ACT stocks, particularly ASAQ, which were fully distributed to SDPs to prevent expiry. To address these stock imbalances, upcoming pipeline deliveries of ACTs scheduled for FY 2026 Q3 will be expedited to restore stock levels to adequate levels. In addition, there will be closer monitoring of products at risk of expiry to enable timely mitigation actions to improve overall availability at the regional distribution level.
C7	Malaria commodities valued at USD 313,939 were lost to expiry out of an average inventory value of USD 5,786,083. This corresponds to an expiry rate of 5.4 percent.

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-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**20.8%**	**3,000**
HIV-"Tie-breaker" RTK	19.0%	500
HIV-First RTK	17.4%	500
HIV-Most used 1st line ARV	23.8%	500
HIV-Most used 1st line pediatric ARV	35.2%	500
HIV-Most used 2nd line ARV	10.8%	500
HIV-Second RTK	18.6%	500
Malaria	**51.0%**	**66,858**
Malaria-First line ACT (AL 6x1)	79.6%	6,078
Malaria-First line ACT (AL 6x2)	71.5%	6,078
Malaria-First line ACT (AL 6x3)	70.3%	6,078
Malaria-First line ACT (AL 6x4)	67.7%	6,078
Malaria-First line ACT (AS/AQ 100/270mgx3)	43.9%	6,078
Malaria-First line ACT (AS/AQ 100/270mgx6)	40.2%	6,078
Malaria-First line ACT (AS/AQ 25/67.5mg)	46.7%	6,078
Malaria-First line ACT (AS/AQ 50/135mg)	43.5%	6,078
Malaria-LLINs	44.7%	6,078
Malaria-Rapid diagnostic test for malaria	18.4%	6,078
Malaria-Sulphadoxine-pyrimethamine	34.8%	6,078
Overall	**49.7%**	**69,858**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	49.7%	6,078

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	83%	642
Malaria	81%	7412

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	**14%**	**11%**	**28%**	**47%**	**318**
HIV/AIDS	17%	39%	30%	15%	54
Malaria	14%	6%	28%	53%	264
Overall	**14%**	**11%**	**28%**	**47%**	**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 2
January - March 2026

Country M&E Indicator Performance

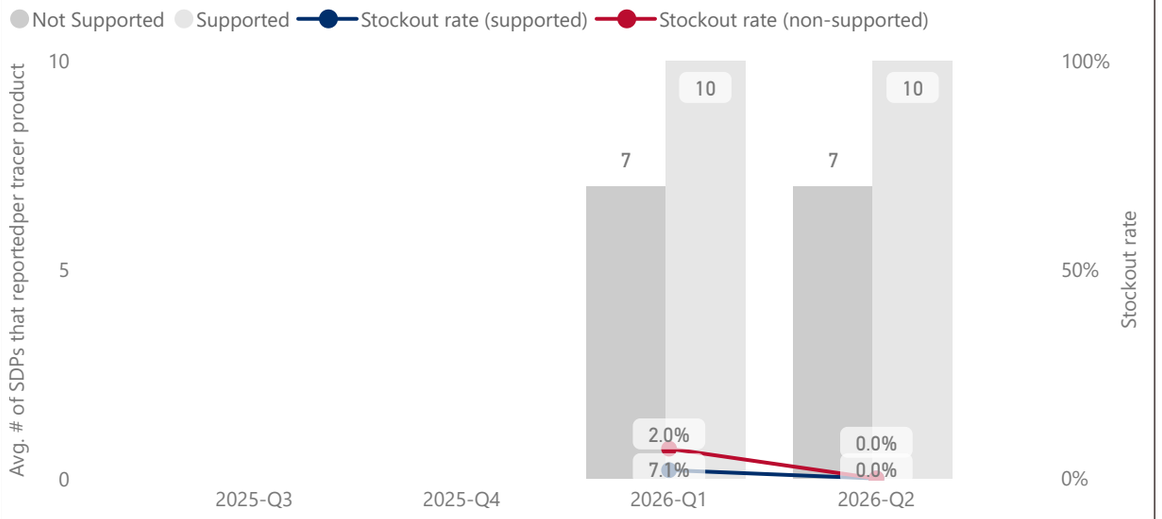
Country

El Salvador

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: El Salvador | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



Data source

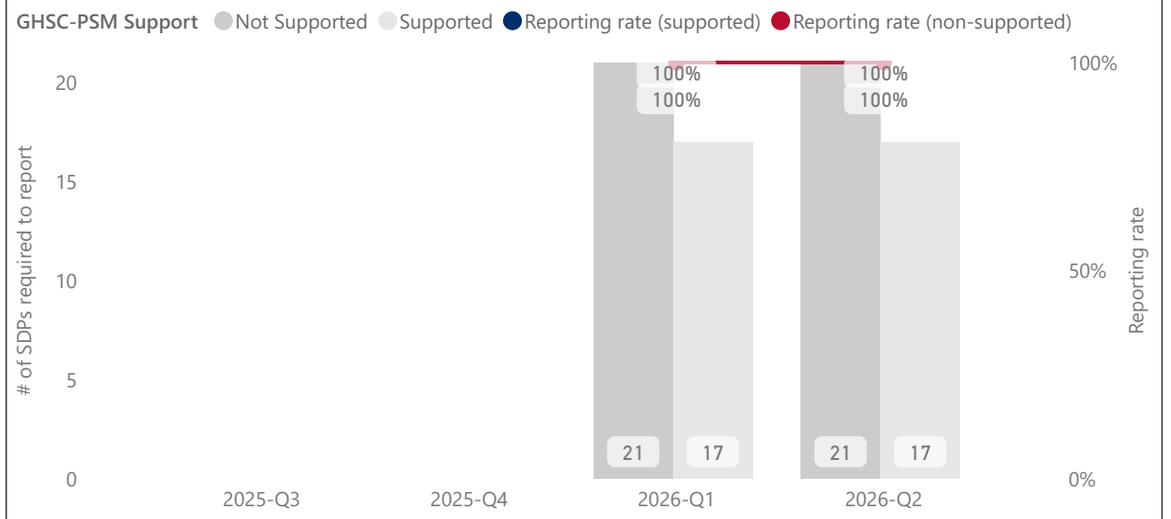
SUMEVE (Single System for Monitoring and Evaluation of HIV Epidemiological Surveillance)

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

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. Viral load reagents, which had higher stockout rates last quarter, have recovered completely, however, stock remains limited and its use is being prioritized. 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.

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) and ART Stock card

Analysis

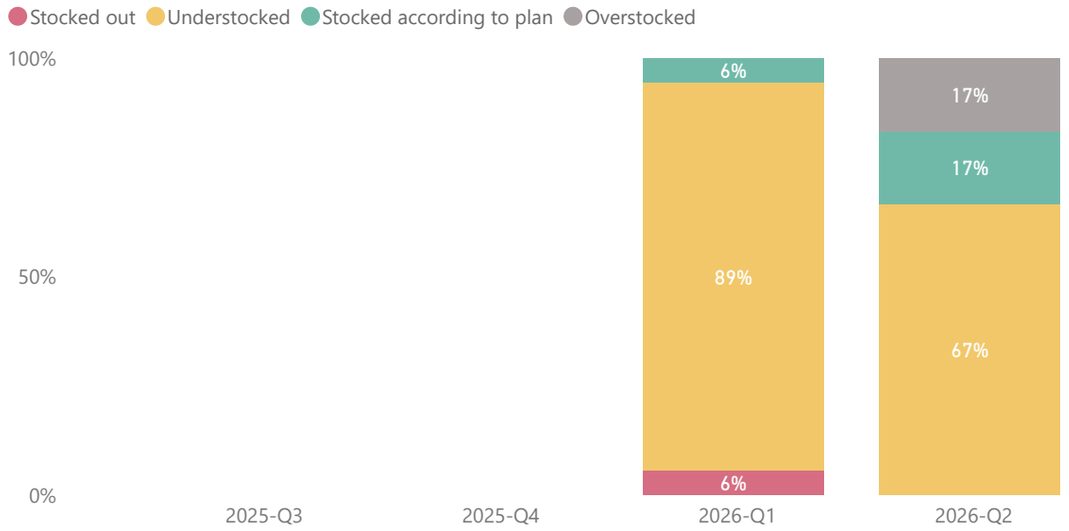
All SDPs (supported and non-supported) reported consumption through the MOH's electronic systems at 100 percent, as well as utilizing inventories that have transactional systems that allow inventory balances to be kept up to date for all sites.

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-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)

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	$3,681	$876,333	0.42%

Ref	Analysis
B2	Tracer products at the central level in El Salvador in FY2026 Q2 were primarily understocked, at 67 percent, although observations have shifted more toward being stocked according to plan this quarter, at 17 percent, and overstocked, at 17 percent. There were no stockout observations. First line adult ARVs and viral load reagents both saw increases in stocking according to plan, and second line adult ARVs shifted from understocked in FY2026 Q1 to being overstocked in FY2026 Q2. All other tracer products held consistent stock statuses across both quarters. For products with understocks, there are alternative pack sizes available or there is product availability at the district level.
C7	An expiry of USD $3,681 of adult ARVs in storage has been noted for this quarter, accounting for less than 1 percent of the overall value in the warehouses in-country. GHSC-PSM will continue monitoring the status of ARV drug inventory through QAT, preparing reports for the MOH to prevent losses due to expiration, and anticipating actions to avoid future expiries. Due to the risks identified, GHSC-PSM had an intervention on the delivery of medications to the ISSS, which had been overstocked, thereby reducing the risk of loss due to expiration.

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-Q2

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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.0%**	**50**
HIV-First RTK	0.0%	17
HIV-Most used 1st line ARV	0.0%	17
HIV-Most used 1st line pediatric ARV	0.0%	1
HIV-Most used 2nd line ARV	0.0%	10
HIV-Viral load reagent	0.0%	5
Overall	**0.0%**	**50**

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%**	**17%**	**67%**		**18**
HIV/AIDS	17%	17%	67%		18
Overall	**17%**	**17%**	**67%**		**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 2
January - March 2026

Country M&E Indicator Performance

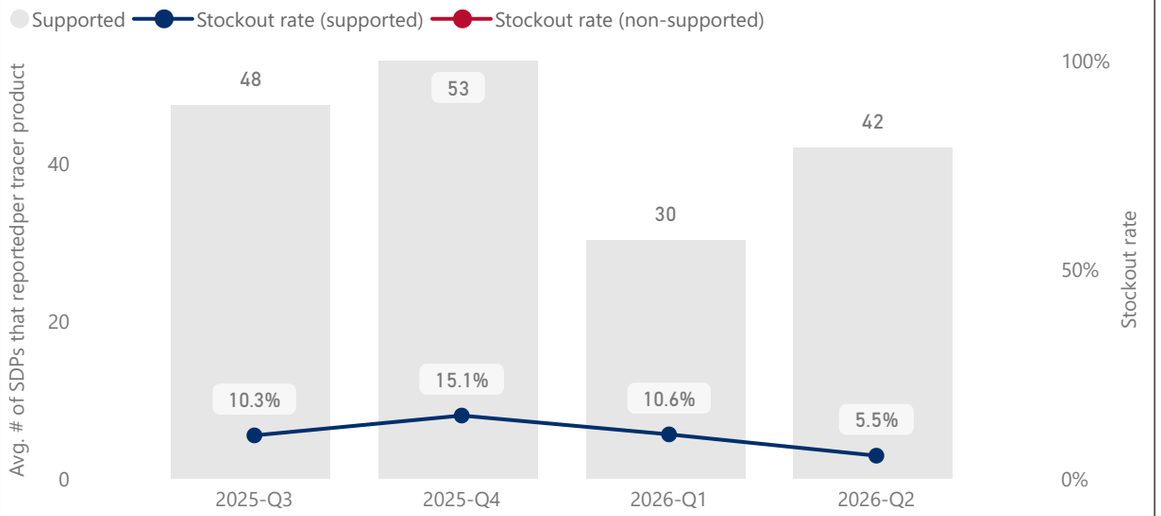
Country

Eswatini

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Eswatini | Current Quarter: 2026-Q2 | Tracer Product: All

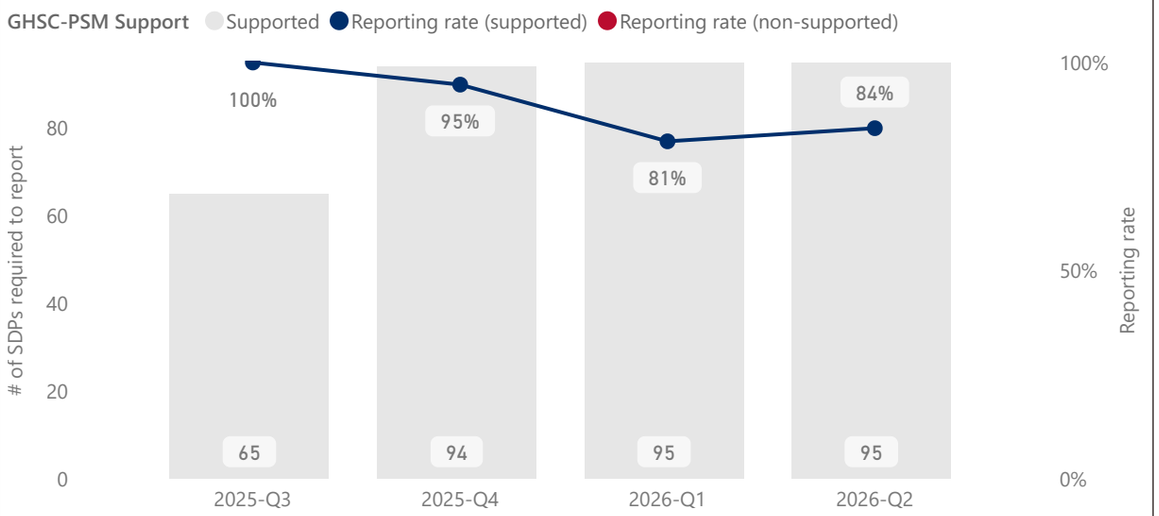
B1. Stockout rate at service delivery points



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 Q2 was 5.5 percent, a decrease from last quarter. Second RTK had the highest stockout rate of any product this quarter, at 22.1 percent, an increase from last quarter's 12.5 percent. These stockouts were driven by central level stock outs resulting from delays in COP 25 funds approval and placement of orders for the bridge period. The next highest stockout rate was for first RTK at 7.8 percent. No other tracer products had stockout rates of higher than 3 percent, with the 1st line adult ARV having no stockouts. Overall, the stockout pattern observed during the reporting period reflects an improved availability of ARVs and laboratory commodities, with HIV rapid test kits, particularly second RTK, remaining the most affected tracer commodities at facility level, underscoring the impact of GHSC-PSM supported monitoring and targeted supply chain interventions for HIV testing products.

Analysis

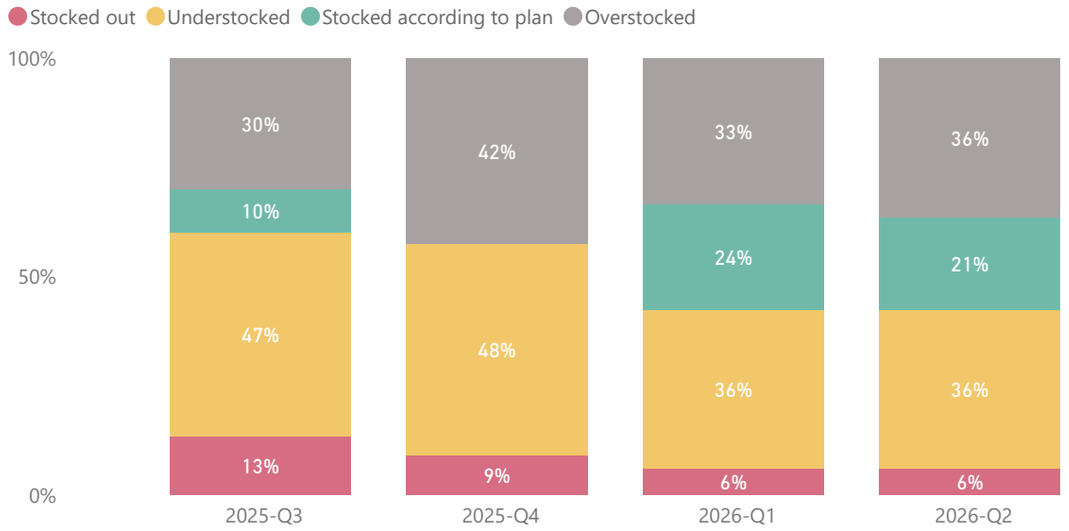
The LMIS reporting rate into the Commodity Tracking System (CTS) for this quarter was 84 percent, representing an increase from 81 percent last quarter. During the quarter, the ongoing annual stocktake and the end of employment contracts for Global Fund supported data clerks contributed to delays in data entry and reporting. The regional logistics teams continue to support facilities to ensure timely submission of LMIS forms, especially those that have just been accredited or where there are new staff. To ensure equitable and timely LMIS data entry, staff roles and scope have been reviewed to adapt to the reduced number of data entry staff. In the long term, the transition to electronic ordering using eLMIS is expected to support real time availability of LMIS data.

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-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)

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 Q2, the stocked according to plan rate decreased slightly to 21 percent of tracer products, while most products were still understocked (at 36 percent) or overstocked (at 36 percent). Stockouts remained at 6 percent. While last quarter, no tracer product had all three observations stocked to plan, first RTK was entirely stocked according to plan this quarter. Additionally, EID reagent and EID consumable were both 66 percent stocked according to plan. Only RUTF had stockouts this quarter, at 66 percent stocked out. Forecast and assumption quality continue to affect the accuracy of quantification and supply planning, limiting the achievement of consistent optimal stock levels. To address the stocking challenges, GHSC-PSM is involved in ongoing quarterly forecast accuracy discussions for the March supply planning exercise with the HIV program, ensuring continued validation and adjusting of assumptions.
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-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**5.5%**	**421**
HIV-"Tie-breaker" RTK	1.5%	67
HIV-EID consumable	0.0%	20
HIV-EID reagent	0.0%	20
HIV-First RTK	7.8%	64
HIV-Most used 1st line ARV	0.0%	80
HIV-Most used 1st line pediatric ARV	2.4%	42
HIV-Most used 2nd line ARV	1.9%	52
HIV-Second RTK	22.1%	68
HIV-Viral load consumable	0.0%	4
HIV-Viral load reagent	0.0%	4
Overall	**5.5%**	**421**

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	84%	95

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**21%**	**36%**	**36%**	**6%**	**33**
HIV/AIDS	21%	36%	36%	6%	33
Overall	**21%**	**36%**	**36%**	**6%**	**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 2
January - March 2026

Country M&E Indicator Performance

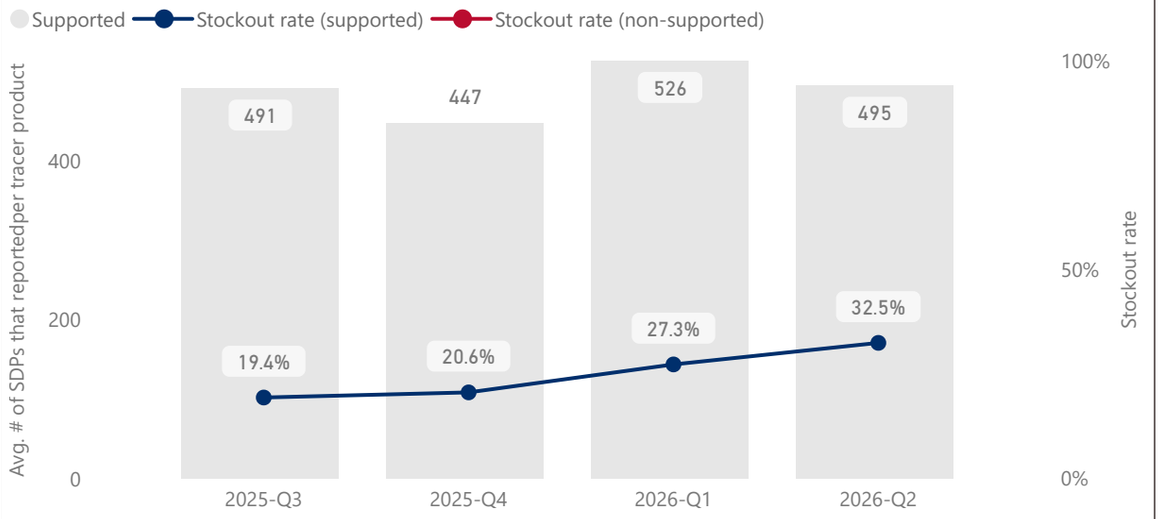
Country

Ghana

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Ghana | Current Quarter: 2026-Q2 | Tracer Product: All

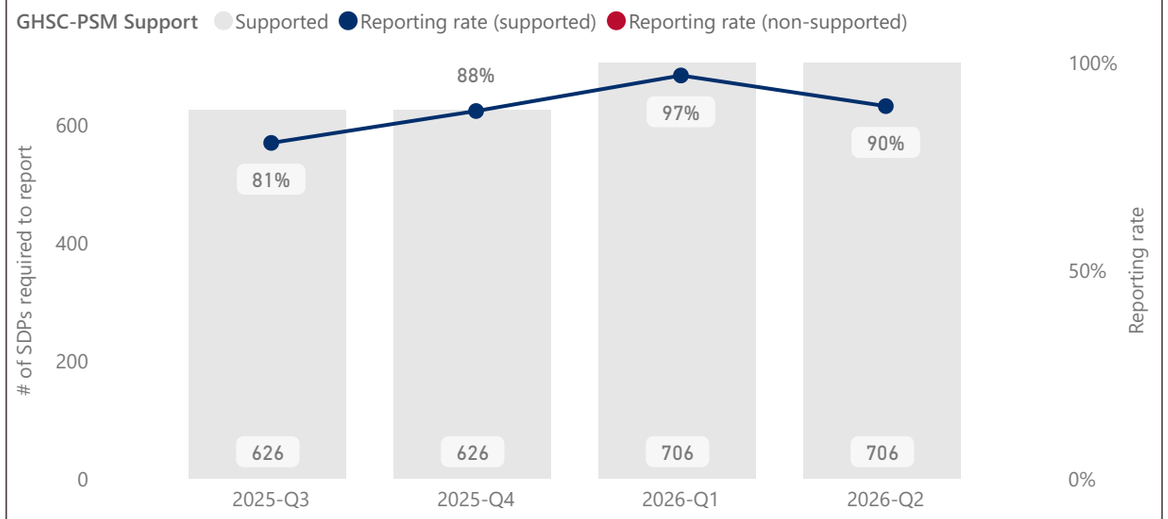
B1. Stockout rate at service delivery points



Data source

HIV LMIS Report for February 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

HIV LMIS Report for February 2026

B3. Data Source (numerator)

HIV LMIS Report for February 2026

Analysis

The stockout rate for HIV commodities increased from 27.3 percent in Q1 FY2026 to 32.5 percent in Q2 FY2026, driven primarily by a rise in stockouts of the HIV first rapid test kit (RTK), which increased from 44.4 percent to 62.5 percent over the same period. This increase reflects dwindling stock levels at health facilities associated with the ongoing national transition to the STANDARD Q HIV 1/2 Ab 3-Line Test Kit. Stockout rates for the remaining HIV tracer commodities were largely consistent with Q1 FY2026. The most commonly used first-line antiretroviral (ARV) was stocked out at only 5.2 percent of antiretroviral therapy (ART) sites, indicating relatively stable supply. In contrast, stockout rates for the most used second-line ARV and the HIV second RTK remained high at 53.1 percent and 35.8 percent, respectively. The elevated stockout rate for the second-line ARV reflects suboptimal uptake at some ART sites due to the absence of eligible pediatric clients, despite adequate availability at regional medical stores, while stockouts of the second RTK are primarily attributable to insufficient stock levels at regional medical stores.

Analysis

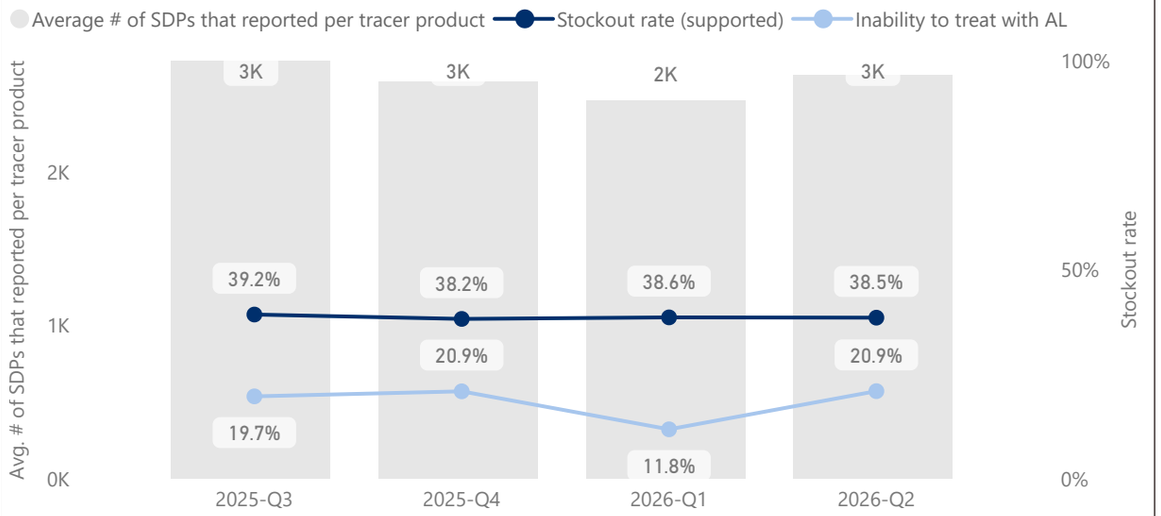
The HIV LMIS reporting rate declined from 97 percent in Q1 FY2026 to 90 percent in Q2 FY2026. While this represents a 7-percentage-point drop, the Q2 rate remains above 81 percent and 88 percent rates recorded in Q3 and Q4 FY2025, respectively, indicating sustained overall improvement relative to earlier performance. The decline in Q2 was due to delayed reporting by some ART sites. The project, in collaboration with the NACP, will engage non-reporting sites to reinforce reporting deadlines and improve data submission compliance in subsequent quarters.

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-Q2 | Tracer Product: All

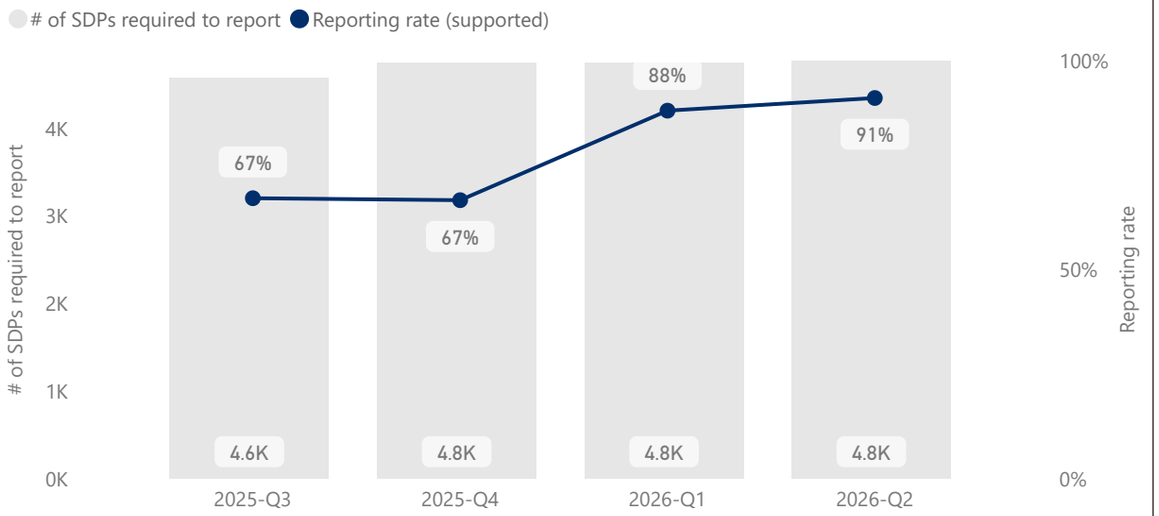
B1. Stockout rate at service delivery points



Data source

GhiLMIS End February 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

GhiLMIS End February 2026

B3. Data Source (numerator)

GhiLMIS End February 2026

Analysis

The stockout rate for malaria commodities remained largely unchanged at 38.5 percent in Q2 FY2026, consistent with persistently high levels observed in preceding quarters (38.2 percent in Q4 FY2025 and 38.6 percent in Q1 FY2026). Stockout rates were particularly high for artemisinin combination therapy (ACT) formulations, with AS/AQ and AL presentations recording stockout rates ranging from 44.8–47.8 percent and 36.6–42.8 percent, respectively. These sustained high stockout rates for ACTs are primarily attributable to suboptimal stock levels at regional medical stores, despite significant overstocks at the central medical store. To address this imbalance, the National Malaria Elimination Programme (NMEP), with project support, will facilitate the redistribution of surplus ACT stocks from the central level to regions experiencing stockouts or inadequate stock levels and leverage ongoing last-mile distribution activities to close stock gaps at health facilities.

Analysis

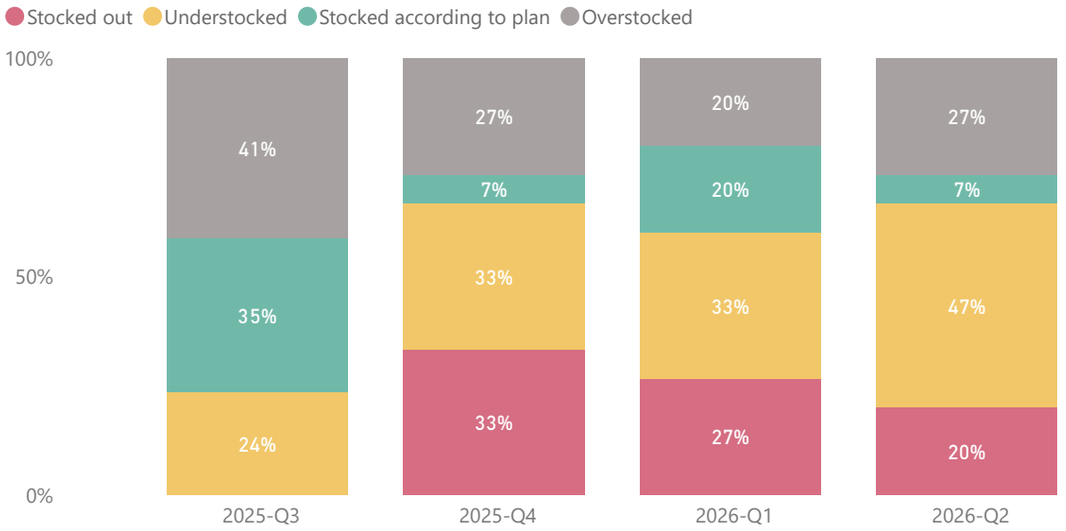
The malaria LMIS reporting rate increased from 88 percent in Q1 FY2026 to 91 percent in Q2 FY2026, the highest rate recorded over the past four quarters. This improvement is attributable to two complementary interventions: the Centres of Excellence (CoE) initiative, which provides structured programmatic oversight and targeted technical support to sites with persistent GhiLMIS utilization challenges, as well as the rollout of GhiLMIS Leader Boards across regions, which has strengthened facility-level accountability and reinforced timely data capture. Together, these interventions have driven improvements in GhiLMIS utilization across the regions.

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

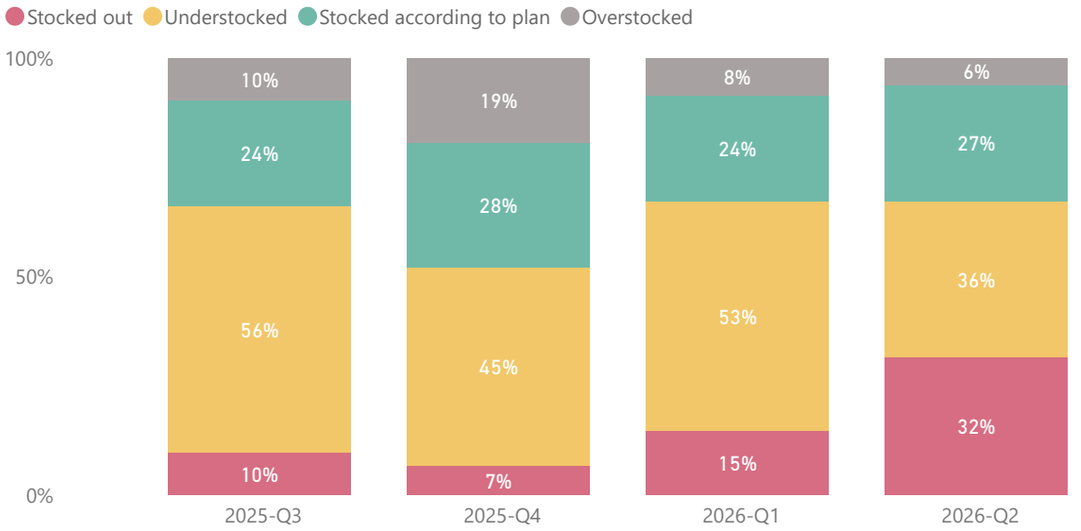
Country: Ghana | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	CMS Stock Status Report for January 2026, February 2026, March 2026

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	RMS Stock Status Report for January 2026, February 2026, March 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 %

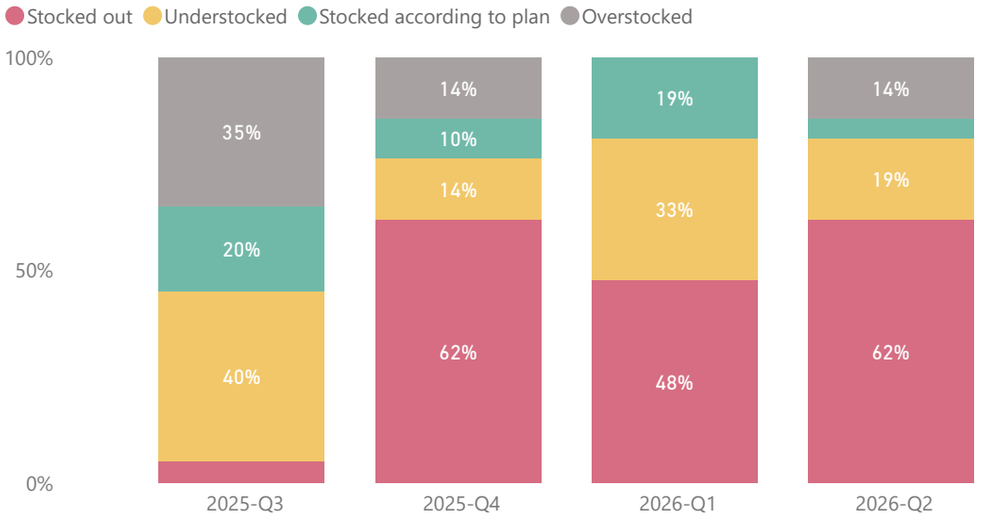
Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	At the central level, the proportion of products stocked according to plan declined sharply from 20 percent to 7 percent in Q2 FY2026, while understocked items increased from 33 percent to 47 percent, largely driven by the most used adult first-line ARV, whose understocked proportion rose from 0 percent to 67 percent due to prioritized distribution to ART sites to avert expiry in May 2026. The central-level stockout rate fell from 27 percent to 20 percent, primarily reflecting the resolution of second RTK stockouts following shipments received in Q1 and Q2 FY2026. At the regional level, stocking according to plan improved from 24 percent to 27 percent; however, the stockout rate increased from 15 percent to 32 percent, driven by increased stockouts of the first RTK amid the ongoing transition to the STANDARD Q HIV 1/2 Ab 3-Line Test Kit and shortages of the most used adult second-line ARV resulting from inadequate central-level stock. Going forward, the National AIDS/STI Control Programme (NACP), with project support, will continue targeted monitoring, distribution, and redistribution efforts to strengthen regional stock positions and sustain ART site supply.
C7	No product losses were recorded for HIV commodities.

Warehouse stock status and product losses
Malaria

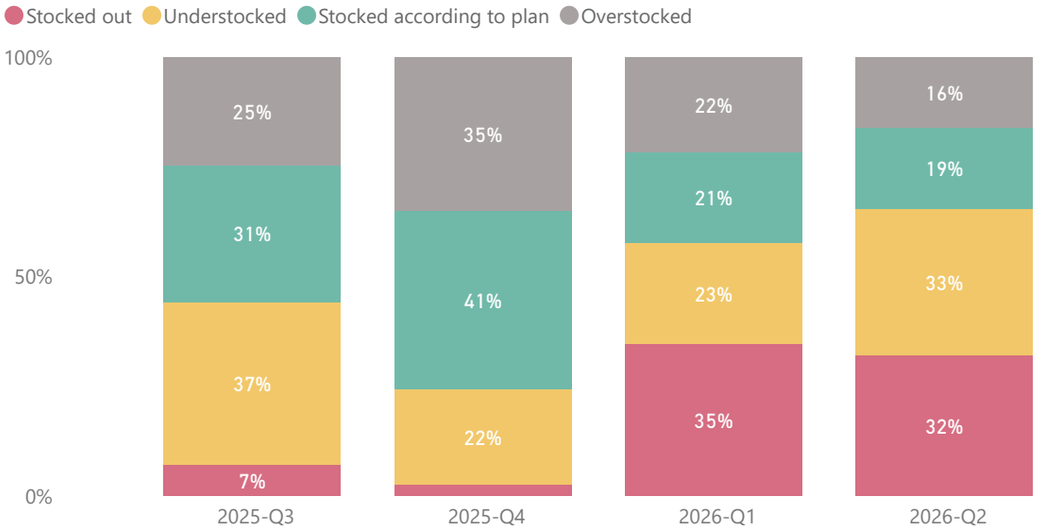
Country: Ghana | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	CMS Stock Status Report for January 2026, February 2026, March 2026

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	RMS Stock Status Report for January 2026, February 2026, March 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, the proportion of malaria products stocked according to plan declined sharply from 19 percent in Q1 FY2026 to 5 percent in Q2 FY2026, while stockout rates increased from 48 percent to 62 percent. This deterioration was driven by rising stockouts of AL 6x2 and AL 6x4 formulations, both of which increased from zero percent to 67 percent during the quarter. The situation is expected to improve with the arrival of more than 900,000 treatments of AL 6x2 and AL 6x4 in May and June 2026. At the regional level, the proportion stocked according to plan decreased slightly from 21 percent to 19 percent, while stockout rates improved modestly from 35 percent to 32 percent, reflecting the impact of central-level distribution efforts that strengthened regional availability of malaria rapid diagnostic tests and supported the redistribution of surplus ACT stocks to regions with stockouts or inadequate stock levels.
C7	No product losses were recorded for malaria 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: Ghana

Current Quarter: 2026-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**32.5%**	**2,474**
HIV-First RTK	62.5%	632
HIV-Most used 1st line ARV	5.2%	632
HIV-Most used 1st line pediatric ARV	11.8%	382
HIV-Most used 2nd line ARV	53.1%	196
HIV-Second RTK	35.8%	632
Malaria	**38.5%**	**18,426**
Malaria-First line ACT (AL 6x2)	42.8%	2,562
Malaria-First line ACT (AL 6x4)	36.6%	3,037
Malaria-First line ACT (AS/AQ 100/270mgx6)	47.8%	2,245
Malaria-First line ACT (AS/AQ 25/67.5mg)	44.8%	2,270
Malaria-First line ACT (AS/AQ 50/135mg)	44.8%	2,317
Malaria-Rapid diagnostic test for malaria	26.8%	3,116
Malaria-Sulphadoxine-pyrimethamine	32.0%	2,879
Overall	**37.8%**	**20,900**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	20.9%	3,487

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	90%	706
Malaria	91%	4774

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**6%**	**19%**	**31%**	**44%**	**36**
HIV/AIDS	7%	27%	47%	20%	15
Malaria	5%	14%	19%	62%	21
Subnational level 1	**22%**	**12%**	**34%**	**32%**	**396**
HIV/AIDS	27%	6%	36%	32%	165
Malaria	19%	16%	33%	32%	231
Overall	**21%**	**13%**	**34%**	**33%**	**432**

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 2
January - March 2026

Country M&E Indicator Performance

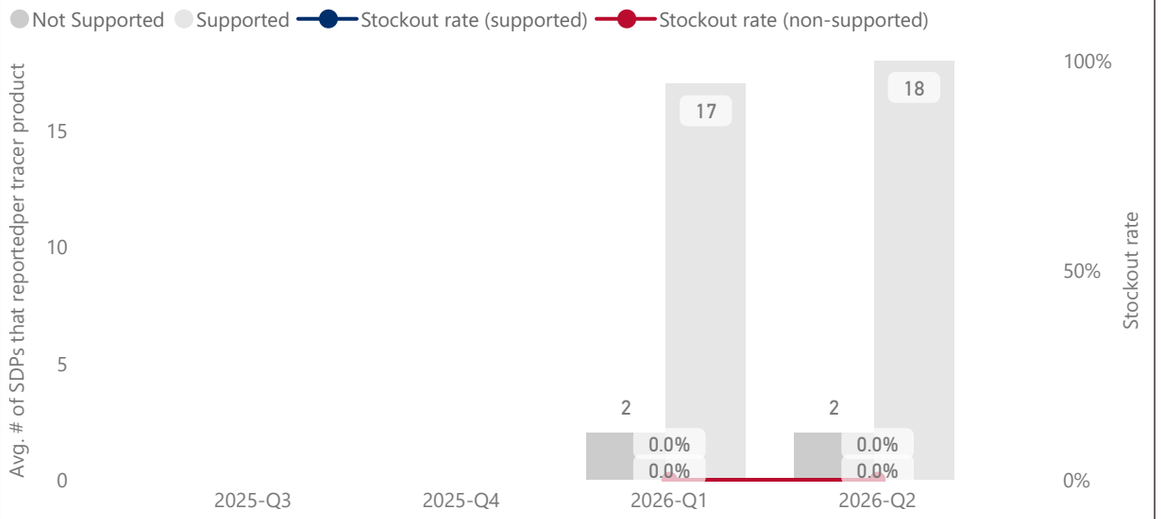
Country

Guatemala

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Guatemala | Current Quarter: 2026-Q2 | Tracer Product: 1st line adult ARV

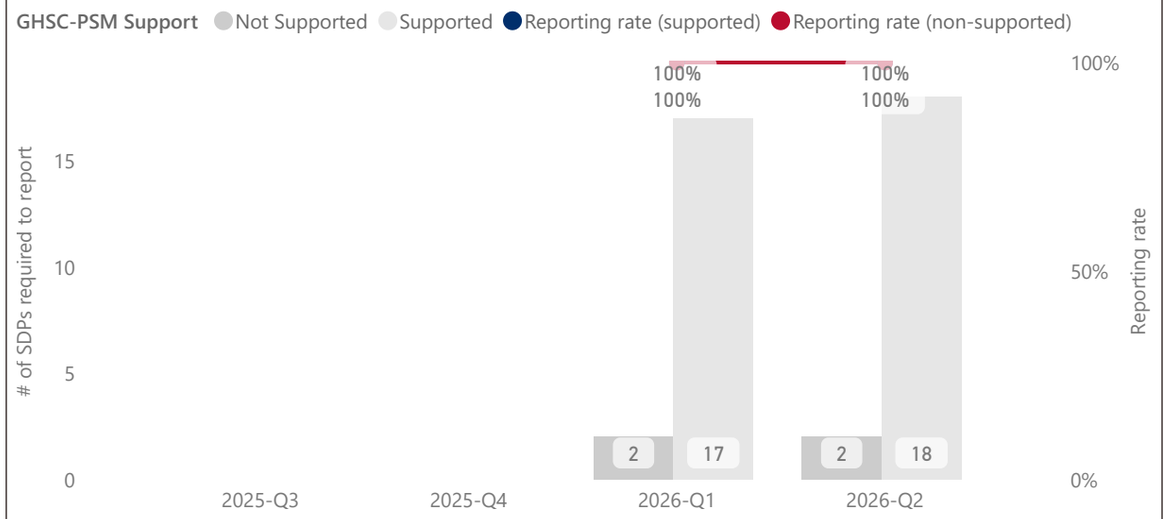
B1. Stockout rate at service delivery points



Data source

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

B3. LMIS reporting rate



B3. Data Source (denominator)

BRES

B3. Data Source (numerator)

BRES

Analysis

There were no reported stockouts of any HIV/AIDS tracer commodities at service delivery points (SDPs) this quarter, including the most used 1st line ARV, most used 2nd line ARV, and most used 1st line pediatric ARV. GHSC-PSM continues providing support to the NAP in the distribution of 1st and 2nd line ARVs for 5 months to avoid any possible SDP stockouts and expirations of these commodities.

Analysis

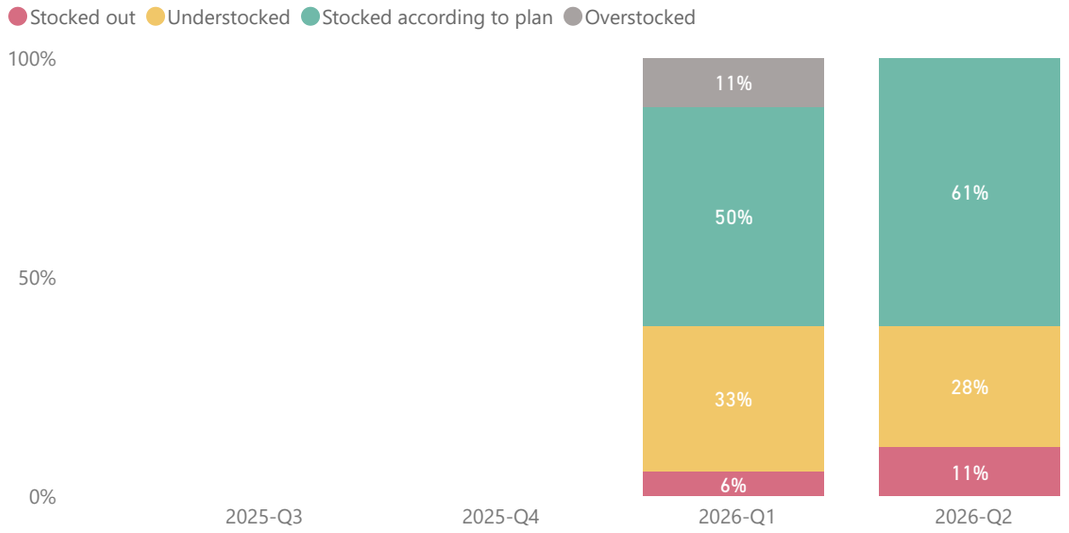
The LMIS reporting rate was 100 percent in FY2026 Q2 for both supported and non-supported sites. All SDPs report consumption through the MOH's electronic systems (BRES and auxiliar Kardex) that allow for inventory balances to be kept up to date for all facilities. GHSC-PSM will continue monitoring inventories 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-Q2 | 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 %

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

Ref	Analysis
B2	In FY2026 Q2, the central level stocked according to plan rate was 61 percent, an increase from last quarter's 50 percent, while the understock rate was 28 percent, and the stockout rate was 11 percent. There were no overstocked products this quarter. The increase in the stockout rate can be attributed to more stockouts of second RTK, which was 67 percent stocked out in FY2026 Q2 where it had not been stocked out in FY2026 Q1. The stockout observations took place in February and March, and were caused by the fact that second RTK is purchased locally and has difficulties obtaining order approvals. Conversely, first RTK, which had been stocked out at 33 percent in FY2026 Q1 was not stocked out at all in FY2026 Q2. Upcoming deliveries have been requested to be split into two during 2026 (one in June and one in October) to avoid shortages due to expiration or late delivery. First line, second line, and pediatric ARVs are all stocked according to plan, with adequate stock within the country.
C7	There was no product loss to report this quarter.

HIV Tracer Products and Supply Planning

Country: Guatemala

Current Quarter: 2026-Q2

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-Q2

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%	12
HIV-Most used 2nd line ARV	0.0%	5
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	**61%**		**28%**	**11%**	**18**
HIV/AIDS	61%		28%	11%	18
Overall	**61%**		**28%**	**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 2
January - March 2026

Country M&E Indicator Performance

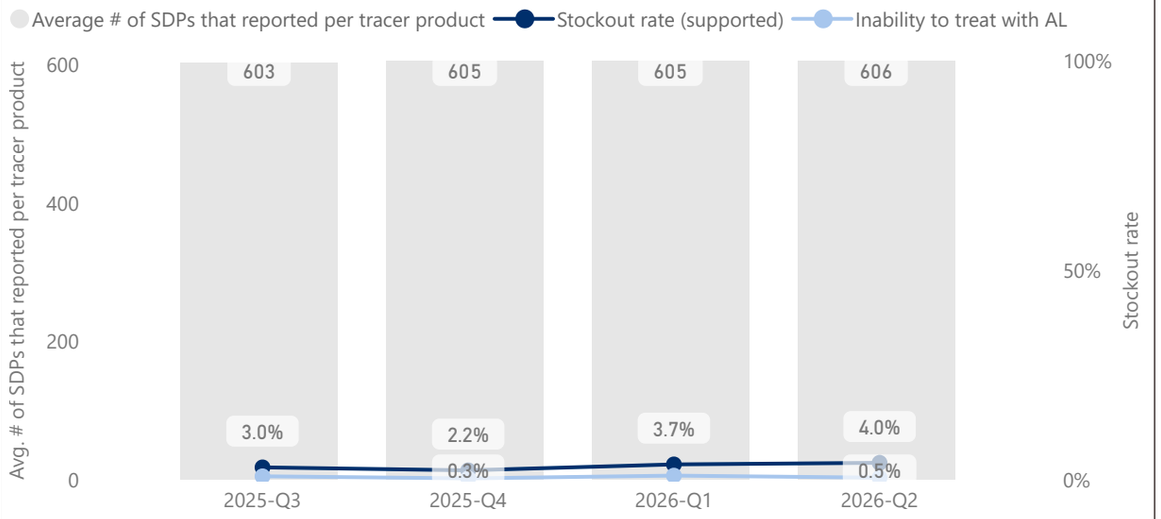
Country

Guinea

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Guinea | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



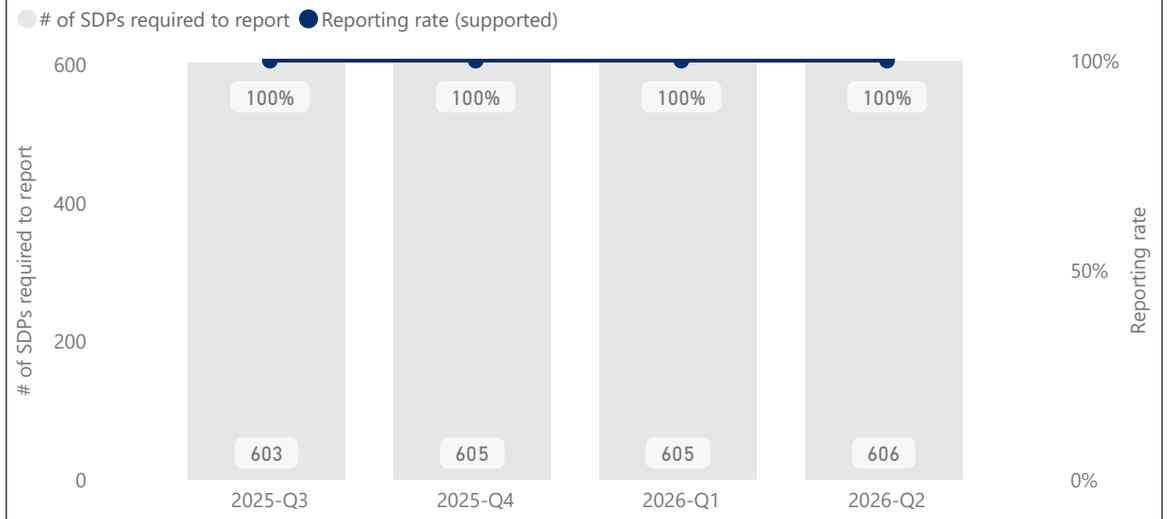
Data source

LMIS, February 2026

Analysis

The stockout rate for tracer malaria products increased modestly from 3.7 percent in FY 2026 Q1 to 4 percent in FY 2026 Q2, and the inability to treat malaria with an AL formulation was 1 percent and 0.5 percent, respectively, between the two quarters. While these results indicate malaria tracer product availability remained stable between FY 2026 Q1 and FY 2026 Q2, there are still delays within the distribution process, which must be improved to optimize product availability. As a result, 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 stocking of commodities at the regional levels for distribution to the SDPs.

B3. LMIS reporting rate



B3. Data Source (denominator)

LMIS, February 2026

B3. Data Source (numerator)

LMIS, February 2026

Analysis

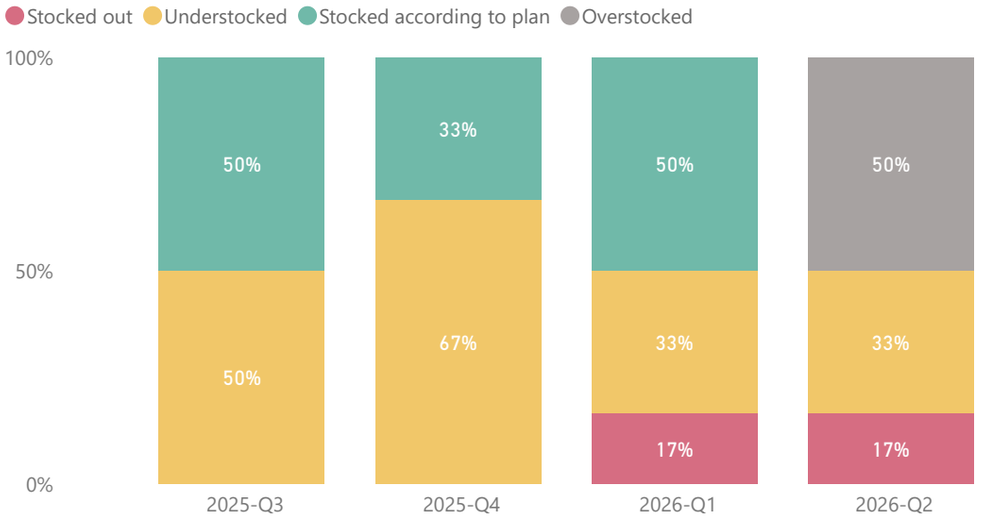
The LMIS reporting rate for malaria sites in FY 2026 Q2 remained consistent with previous quarters, achieving a 100 percent submission rate. A total of 606 SDPs successfully submitted their data.

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

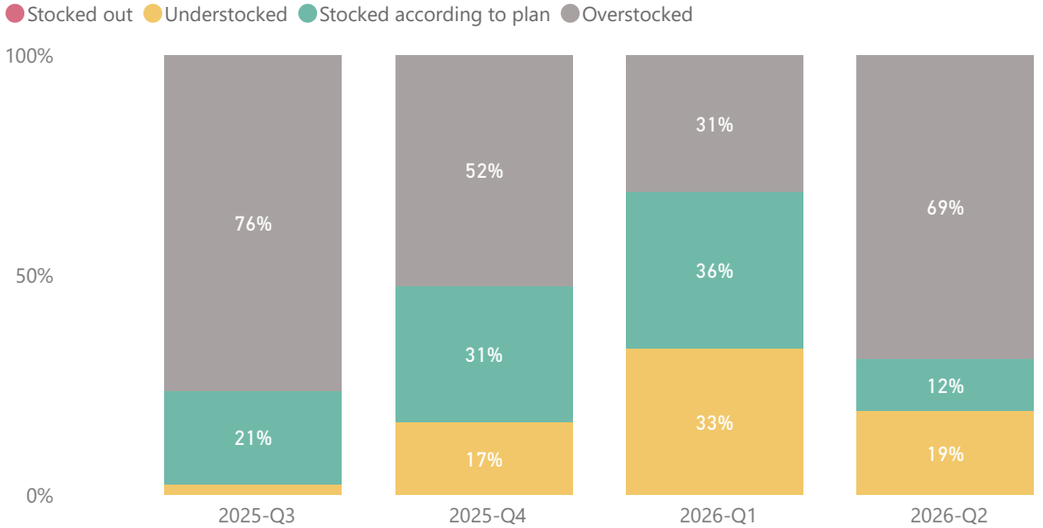
Country: Guinea | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



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

Ref	Analysis
B2	The proportion of malaria tracer products stocked according to plan at the central level declined from 50 percent in FY 2026 Q1 to zero in FY 2026 Q2. In the current quarter (FY 2026 Q2), 50 percent of products were overstocked, 33 percent were understocked, and 17 percent were stocked out. The overstocking of products at the central level is explained by the arrival of stocks during the quarter (FY 2026 Q2) pending distribution to the regional depots. At the regional level, the proportion of products stocked according to plan declined from 36 percent in FY 2026 Q1 to 12 percent in FY 2026 Q2, while the proportion of products overstocked increased from 31 percent to 69 percent. These results point to inherent challenges within the product supply and distribution system that must be addressed to optimize product availability. To address these challenges, GHSC-PSM and the central pharmacy will strengthen stock monitoring and improve allocation efficiency during distributions to prevent service delivery disruptions.
C7	There were no product 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: Guinea

Current Quarter: 2026-Q2

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 Q2 to the GHSC-PSM FASP team.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
Malaria	**4.0%**	**3,636**
Malaria-First line ACT (AL 6x1)	5.1%	606
Malaria-First line ACT (AL 6x2)	3.3%	606
Malaria-First line ACT (AL 6x3)	6.8%	606
Malaria-First line ACT (AL 6x4)	4.5%	606
Malaria-Rapid diagnostic test for malaria	1.3%	606
Malaria-Sulphadoxine-pyrimethamine	3.3%	606
Overall	**4.0%**	**3,636**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.5%	606

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%	606

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central		**50%**	**33%**	**17%**	**6**
Malaria		50%	33%	17%	6
Subnational level 1	**12%**	**69%**	**19%**		**42**
Malaria	12%	69%	19%		42
Overall	**10%**	**67%**	**21%**	**2%**	**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 2
January - March 2026

Country M&E Indicator Performance

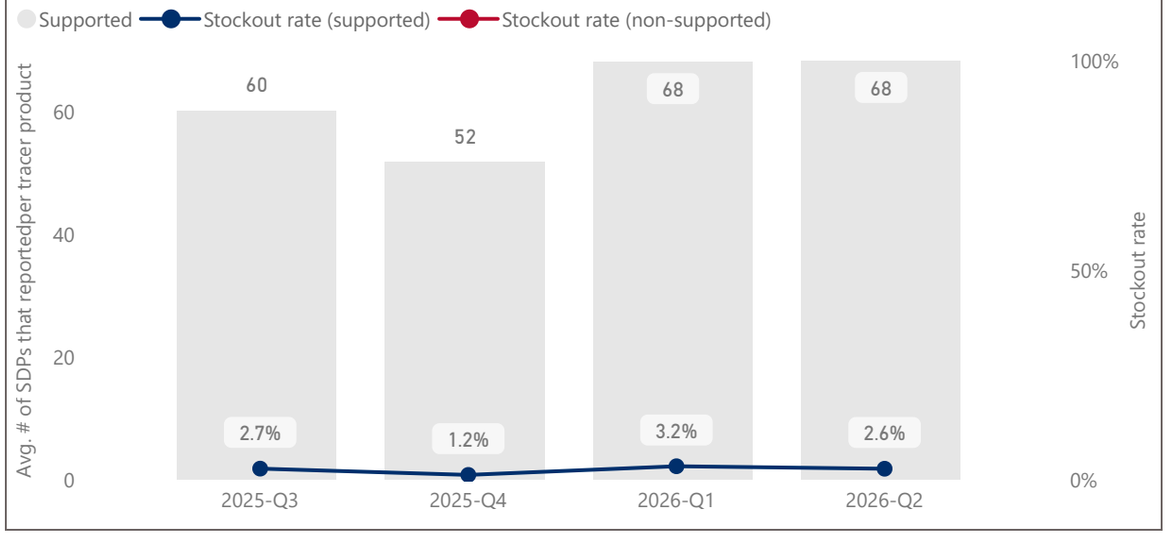
Country

Haiti

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Haiti | Current Quarter: 2026-Q2 | Tracer Product: All

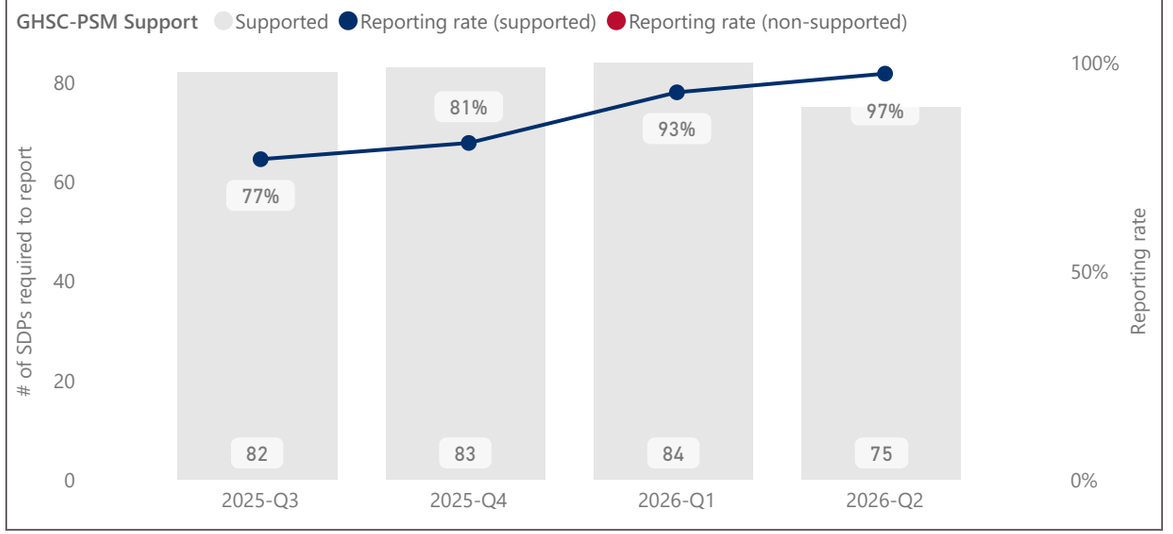
B1. Stockout rate at service delivery points



Data source

SYGDOCC (an internal data management system), February 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

SYGDOCC (an internal data management system), February 2026

B3. Data Source (numerator)

SYGDOCC (an internal data management system), February 2026

Analysis

The average stockout rate for HIV tracer products decreased from 3.2 percent in FY 2026 Q1 to 2.6 percent in FY 2026 Q2. Although pockets of stockouts persisted, the average rate of 2.6 percent in FY 2026 Q2 remained below the programmatic threshold of 5 percent, indicating that disruptions were localized rather than systemic.

During FY 2026 Q2, nine out of 75 HIV care sites reported at least one stockout event affecting selected ARVs and HIV rapid diagnostic test kits, with the majority of cases related to the second RTK. These stockouts were driven by consumption spikes, temporary service disruptions that limited data availability, underestimation of site-level needs during replenishment, and inventory management weaknesses.

Overall, system performance remained stable; however, the results highlight the need to strengthen consumption reporting, forecasting accuracy, and adherence to standard inventory management practices at the service delivery level to sustain improvements in product availability.

Analysis

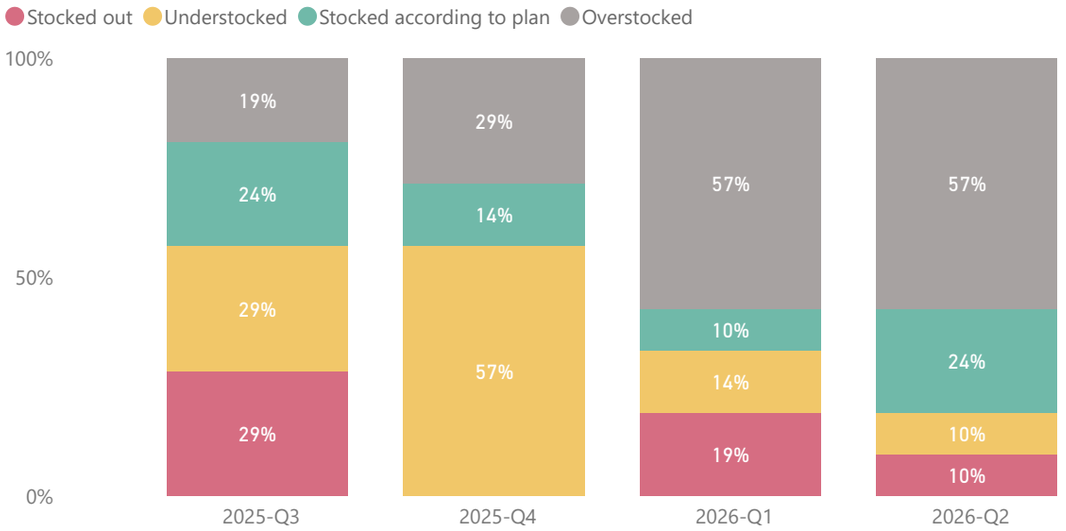
In FY 2026 Q2, the reporting rate for HIV/AIDS commodities increased to 97 percent, up from 93 percent in FY 2026 Q1, reflecting continued improvements in logistics data reporting and site engagement. During the quarter, the reporting denominator decreased from 84 to 75 sites following the net transition of project-supported sites to Global Fund support. Overall, FY 2026 Q2 results demonstrate continued strengthening of the HIV logistics reporting system, supported by the implementation of the revised SOP for the Monthly Data Reporting Process. These enhancements, combined with robust data validation and structured follow-up, enable earlier identification of stock risks and more proactive 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
HIV/AIDS

Country: Haiti | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)

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 proportion of HIV/AIDS tracer commodities stocked according to plan increased from 10 percent in FY 2026 Q1 to 24 percent in FY 2026 Q2, while the proportion of commodities overstocked remained at 57 percent over the same period. In FY 2026 Q2, both the proportion of commodities understocked and stocked out stood at 10 percent. These observations point to persistent imbalances in product stock levels due to a combination of supply timing and consumption-related factors. Among ARVs, the most-used adult regimen (DTG/TDF/3TC 50/300/300 mg) experienced periods of understocking due to shipment delays, while DTG 50 mg and the most-used pediatric formulation (ABC/DTG/3TC) were overstocked following large receipts and slower-than-anticipated consumption. For diagnostics, both first and second RTKs were consistently overstocked during the quarter as a result of recent deliveries and comparatively lower utilization, while EID reagents experienced stockouts after rapid depletion of available quantities. Overall, these results underscore the need to improve alignment between deliveries and actual consumption, strengthen routine monitoring of months of stock, and enhance corrective mechanisms to prevent both prolonged overstocking and episodic shortages.
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: Haiti

Current Quarter: 2026-Q2

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 Q2, all required HIV product procurement plans, including laboratory commodities, RTKs, ARVs, and TPT, have been reviewed, updated, and submitted in a timely manner to the GHSC-PSM FASP 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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**2.6%**	**342**
HIV-First RTK	1.5%	68
HIV-Most used 1st line ARV	0.0%	71
HIV-Most used 1st line pediatric ARV	1.6%	64
HIV-Most used 2nd line ARV	1.4%	69
HIV-Second RTK	8.6%	70
Overall	**2.6%**	**342**

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%	75

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%**	**10%**	**10%**	**21**
HIV/AIDS	24%	57%	10%	10%	21
Overall	**24%**	**57%**	**10%**	**10%**	**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 2
January - March 2026

Country M&E Indicator Performance

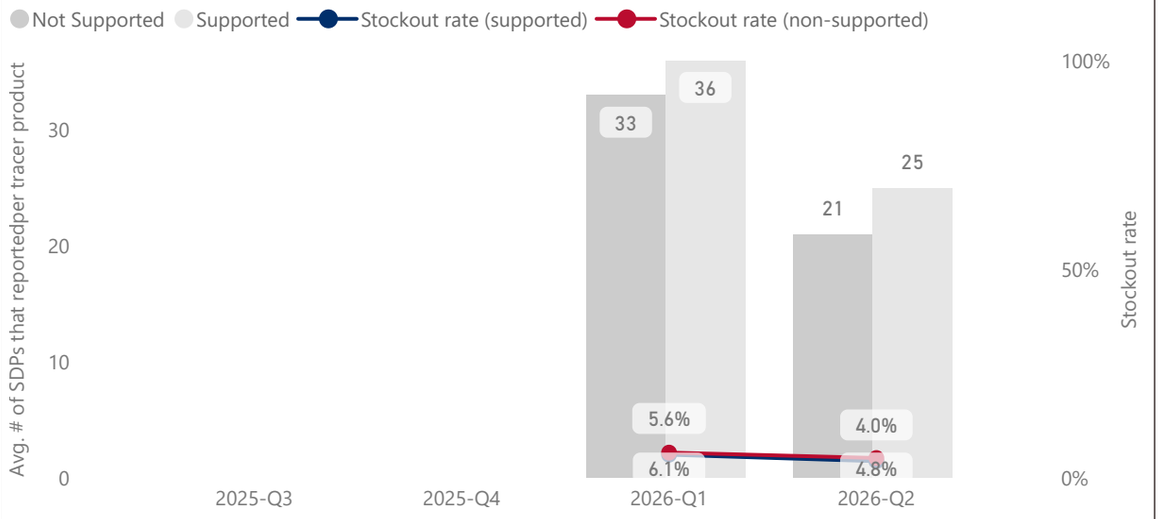
Country

Honduras

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Honduras | Current Quarter: 2026-Q2 | Tracer Product: 1st line adult ARV

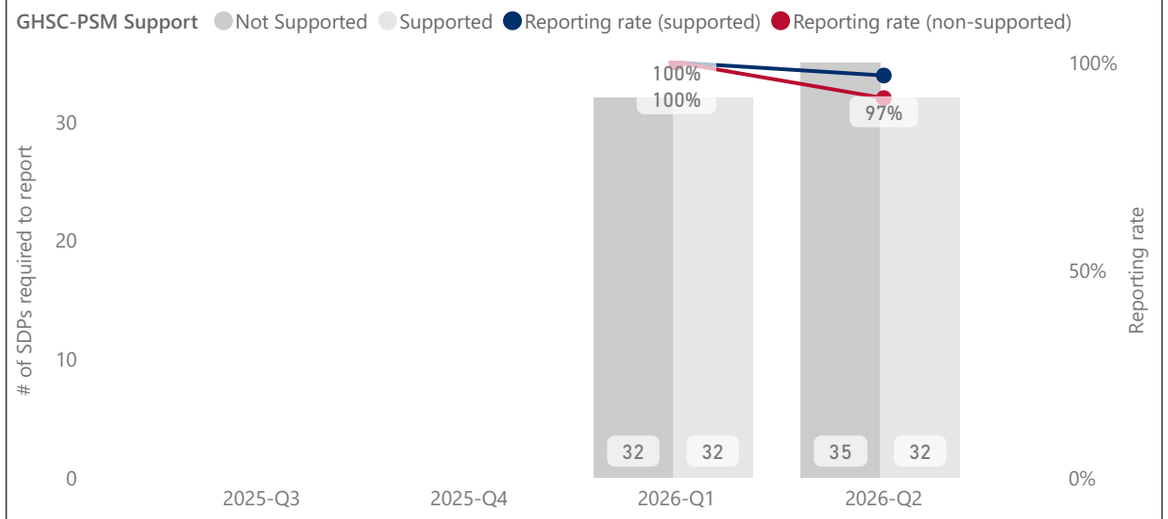
B1. Stockout rate at service delivery points



Data source

BIOS-FEBRERO 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

BIOS-FEBRERO 2026

B3. Data Source (numerator)

BIOS-FEBRERO 2026

Analysis

The stockout rate at SDPs in FY 2026 Q2 was 7.1 percent for supported sites and 3.6 percent for non-supported sites. 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 9 and 19 SDP averages. The 2nd line adult ARVs at supported sites had the highest rate of stockouts, at 10.5 percent, followed by the 1st line pediatric ARVs at supported sites, at 8.3 percent, and finally 1st line adult ARVs at supported sites with a stockout rate of 4 percent, a decrease from last quarter's 5.6 percent. All tracer products for non-supported sites had no stockouts except for 1st line adult ARVs, which had a stockout rate of 4.8 percent. GHSC-PSM will review ARV and opportunistic infection medication stocks in coordination with the national warehouse staff, implementing early warning alerts for potential stockout risks. It should be noted that performance was affected by political instability in Honduras the suspension of procurement processes previously managed by the Ministry of Health which have yet to be reactivated.

Analysis

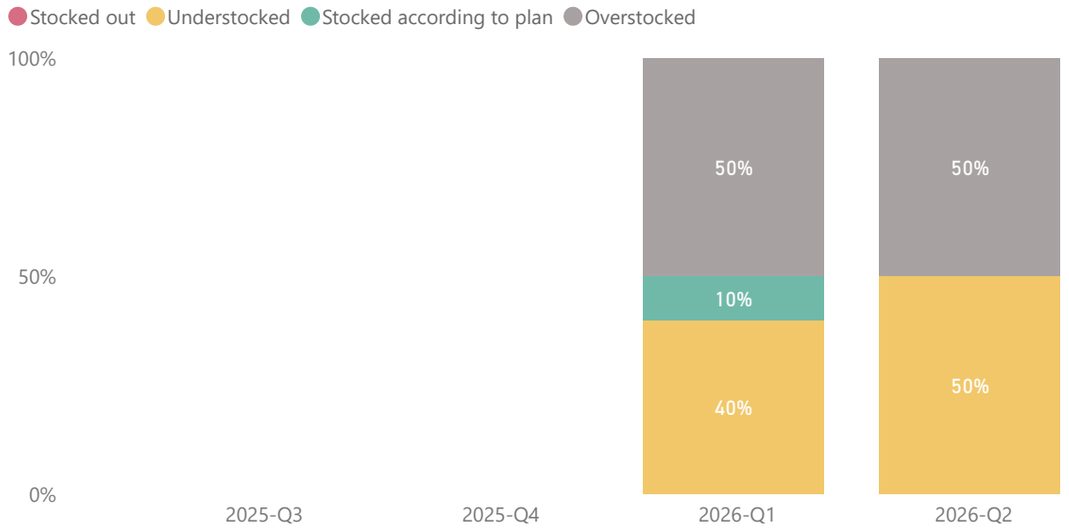
In FY 2026 Q2, all 67 facilities reported into the LMIS systems, 32 supported and 35 non-supported. However, one supported and three non-supported sites reported over a month after the deadline, which is considered late by this indicator; therefore, the LMIS reporting rate for Honduras this quarter is 97 percent for supported sites and 91 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-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)

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 Q2, the HIV/AIDS tracer products were primarily overstocked or understocked centrally, at 50 percent for both categories, with no stockouts and no products stocked according to plan. First line adult ARVs were entirely understocked, while 2nd line adult ARVs were entirely overstocked, and pediatric first line ARVs were a mix of both. It should be noted that this indicator only includes January and February data, as March data was not yet available at the time of this report. A new shipment of ARVs is expected to arrive in Q3, which will stabilize the stock statuses some. The project will encourage and accompany the Ministry of Health in the implementation of corrective and preventive actions where overstock situations or risks of understock are identified, including periodic inventory reviews to identify deviations from recommended stock levels, as well as promotion of inventory management practices such as stock redistribution mechanisms.
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-Q2

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 second-quarter activities and as part of inventory control efforts, GHSC-PSM, in coordination with the Ministry of Health team, carried out stock status analyses to verify stock levels, including inventory assessment and review exercises.

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-Q2

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	4.0%	25
HIV-Most used 1st line pediatric ARV	8.3%	12
HIV-Most used 2nd line ARV	10.5%	19
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		**50%**	**50%**		**6**
HIV/AIDS		50%	50%		6
Overall		**50%**	**50%**		**6**

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 2
January - March 2026

Country M&E Indicator Performance

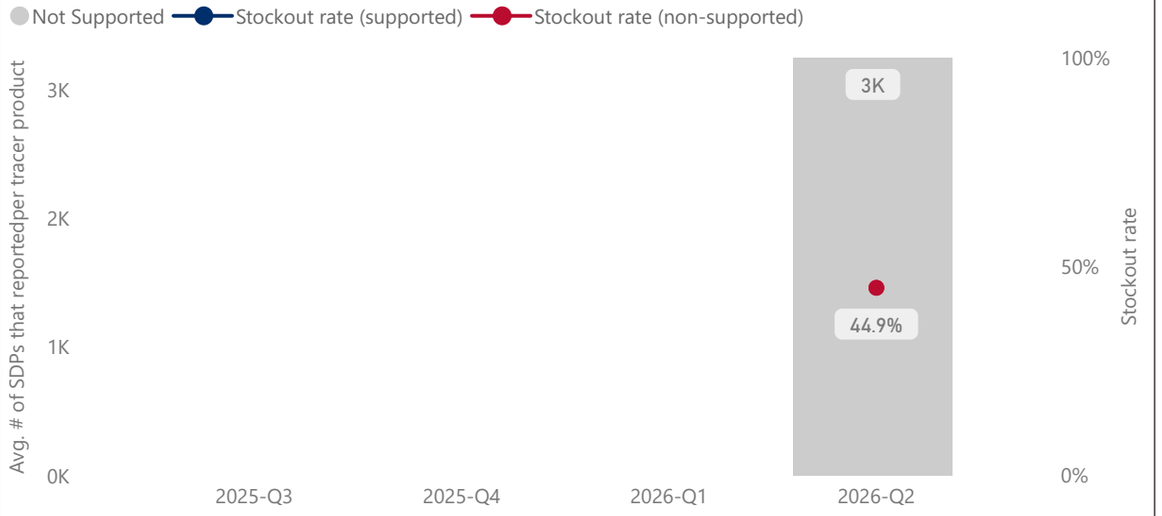
Country

Kenya

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Kenya | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



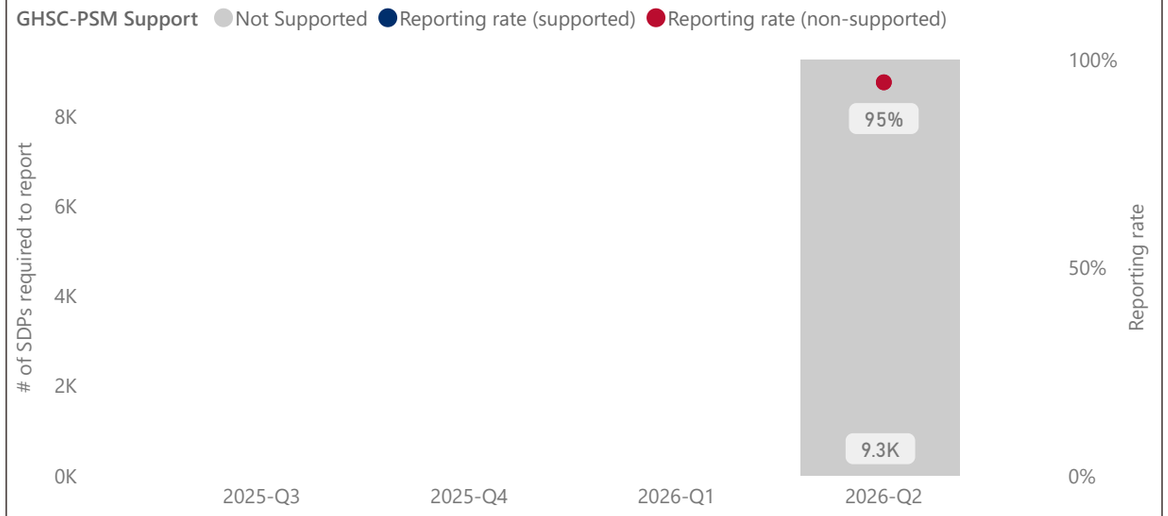
Data source
KHIS MOH 643B
KHIS MOH 730B, KHIS MOH 729B

Data source
KHIS MOH 730B, MoH 731-3 HIV and TB Treatment Rev 2023
NHRL Lab Report from 15 labs, KHIS

Analysis

In Kenya, GHSC PSM provides systems support only at the central level; therefore, all SDPs are classified as unsupported. In FY2026 Q2, the overall stockout rate was 44.9 percent. Second line ARVs recorded a particularly high stockout rate (99 percent), reflecting low need for this treatment method relative to facility reporting requirements. Darunavir is the preferred second line regimen, to which all patients are being transitioned accordingly. The rollout of integrated HIV guidelines will include targeted provider sensitization focused on regimen optimization. RTK stockouts (21 percent) were addressed through ongoing distribution to facilities through March 2026. Pediatric ARVs also experienced elevated stockouts (28 percent). Laboratory commodities showed high stockout rates, with 66 percent and 70 percent of facilities reporting VL and EID consumable stockouts, respectively, largely due to short expiry dates and ordering only as needed at county and subcounty levels to avoid wastage. A new county based distribution model for PPTs and DBS has improved availability, and the NOMT will continue monitoring reporting rates as participation expands. At regional laboratories, VL and EID reagent stockout rates were 27 percent and 20 percent, respectively. To mitigate storage and expiry risks for laboratory reagents, a monthly resupply model is used, supported by multiple testing platforms per lab and ongoing efforts to improve stock visibility through inclusion of reagents in monthly reports.

B3. LMIS reporting rate



B3. Data Source (denominator)
730B+643B
NHRL Reports

B3. Data Source (numerator)
NHRL Reports
730B+643B

Analysis

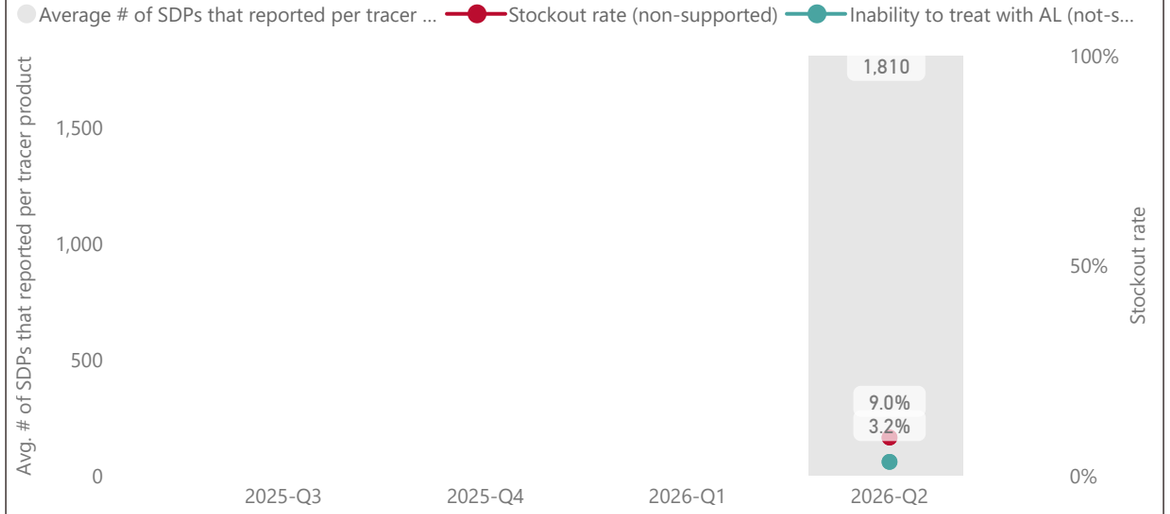
The reporting rate for SDPs was 95 percent. The commodity security team and NOMT follows up with counties and coordinators to implementing partners to ensure facilities submit reports. Additionally, the NOMT continues to enforce the practice where allocation and resupply of commodities is tied to compliance 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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



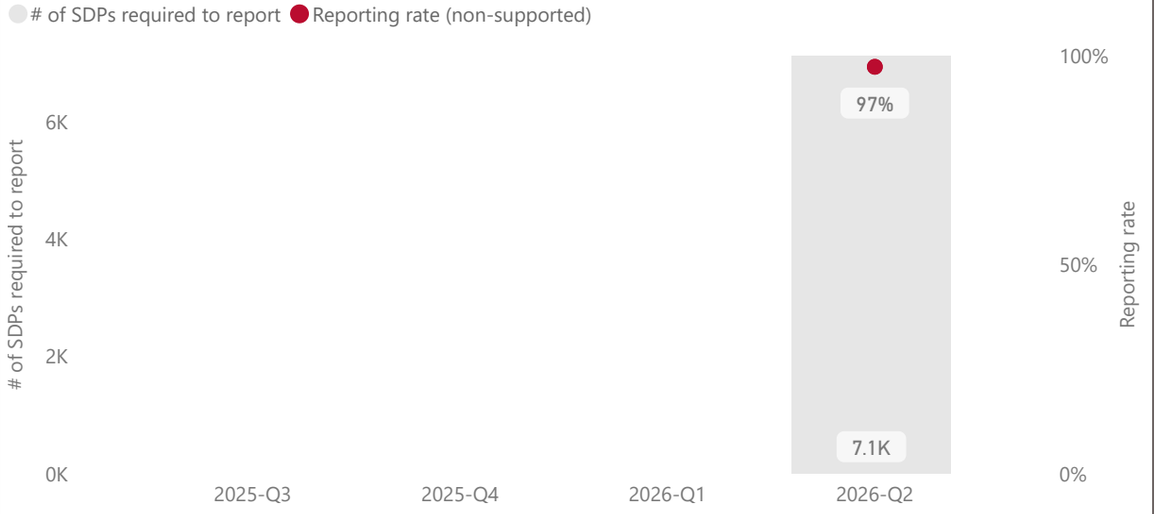
Data source

KHIS

Analysis

The overall stockout rate across tracer products was 9.0 percent in FY2026 Q2. The stockout rate of all ACTs was approximately 5 percent or lower. The reported stockout rate was 16 percent for mRDTs and 19 percent for SP. Facilities included for ACT and mRDT reporting span nine (9) high-burden malaria counties which together account for 85 percent of national consumption as per the 2025 forecasting exercise. For SP, which is used for prevention of malaria in pregnancy, data is reported across 15 counties and 9 sub-counties.

B3. LMIS reporting rate



B3. Data Source (denominator)

KHIS-MOH743

B3. Data Source (numerator)

KHIS-MOH743

Analysis

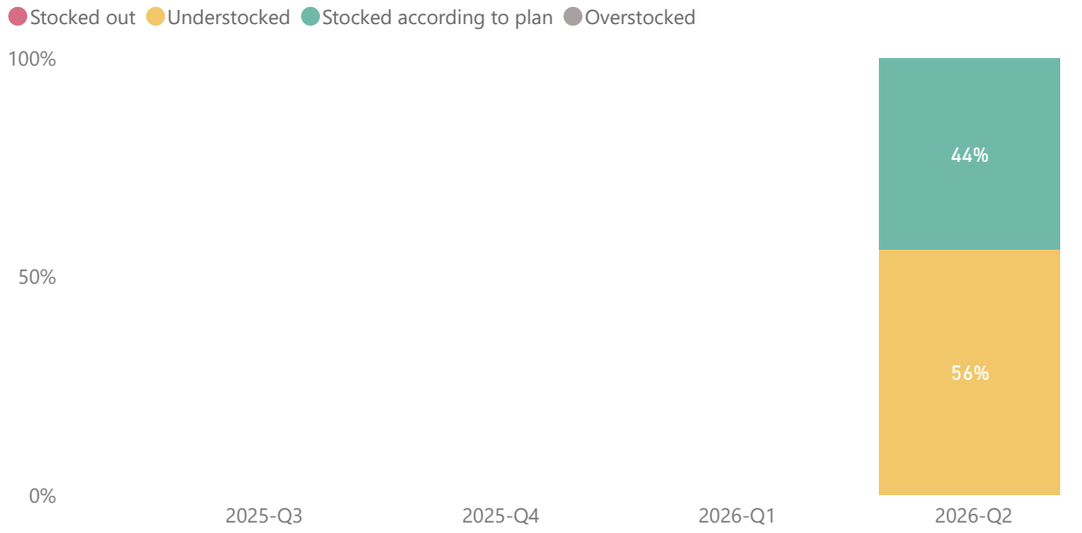
The reporting rate for SDPs was 97 percent. There are continued efforts between GHSC-PSM, the national malaria program, and the commodity security technical working group to maintain high reporting rates.

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-Q2 | 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

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



Supply Chain Level	B2. Data Source(s)

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, 56 percent of stock status observations were understocked while 44 percent were stocked according to plan. All observations for 1st RTKs, 1st line pediatric ARVs, and EID consumables were stocked according to plan. First line ARVs observations were split between stocked according to plan and understocked. All observations were understocked for 2nd line ARVs, EID reagents, and VL consumables and reagents. First-line ARV commodities supply chain has remained stable with staggered deliveries over the course of the year with continuous monitoring by the NOMT. The transition to fixed-dose ARV combination therapy is ongoing and commodities have been stocked adequately with improved forecasting. RTK forecasting has transitioned to a consumption-based methodology for 2026-2027 to align procurement with actual usage. Laboratory consumables have adopted a county-led distribution model, with stock levels intentionally left lean to prevent wastage due to short expiry of these products. New procurements have been made for laboratory reagents.
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

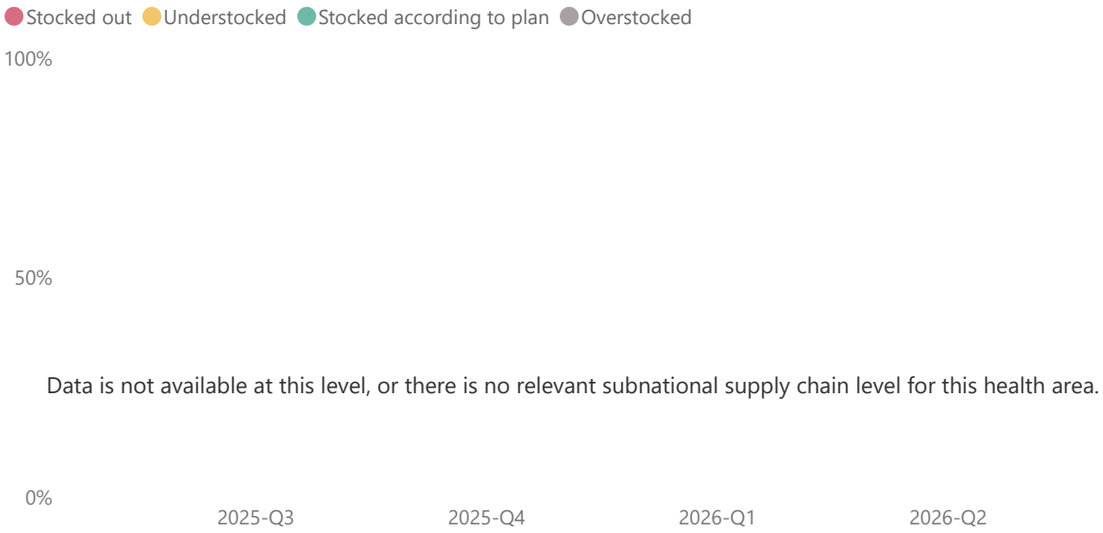
Country: Kenya | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)

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	Stock observation at the central level was only available for February 2026 because NMCP did not compile the January stock status report. Most observations for ALs were overstocked as a result of decreased consumption after a mass net distribution. LLINs were stocked according to plan due to new stock arriving in January 2026. The observation for SP was understocked. There is ongoing collaboration between the GHSC-PSM unit with the national malaria program to provide support in compiling the monthly stock summary reports for better pipeline visibility.
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: Kenya

Current Quarter: 2026-Q2

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-Q2

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	**39%**	**13%**	**48%**		**23**
HIV/AIDS	44%		56%		16
Malaria	29%	43%	29%		7
Overall	**39%**	**13%**	**48%**		**23**

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 2
January - March 2026

Country M&E Indicator Performance

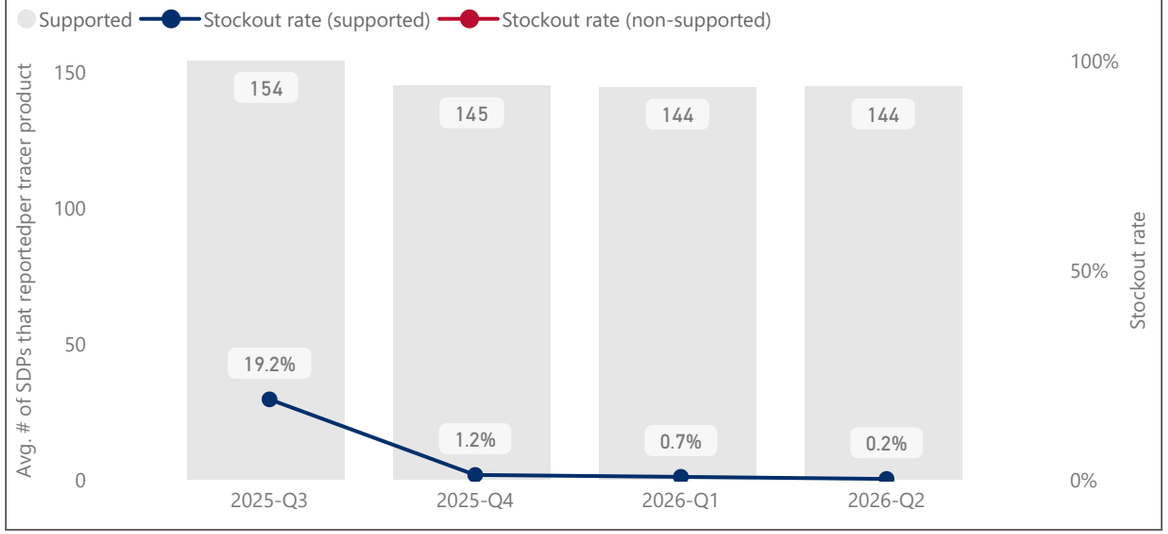
Country

Lesotho

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Lesotho | Current Quarter: 2026-Q2 | Tracer Product: All

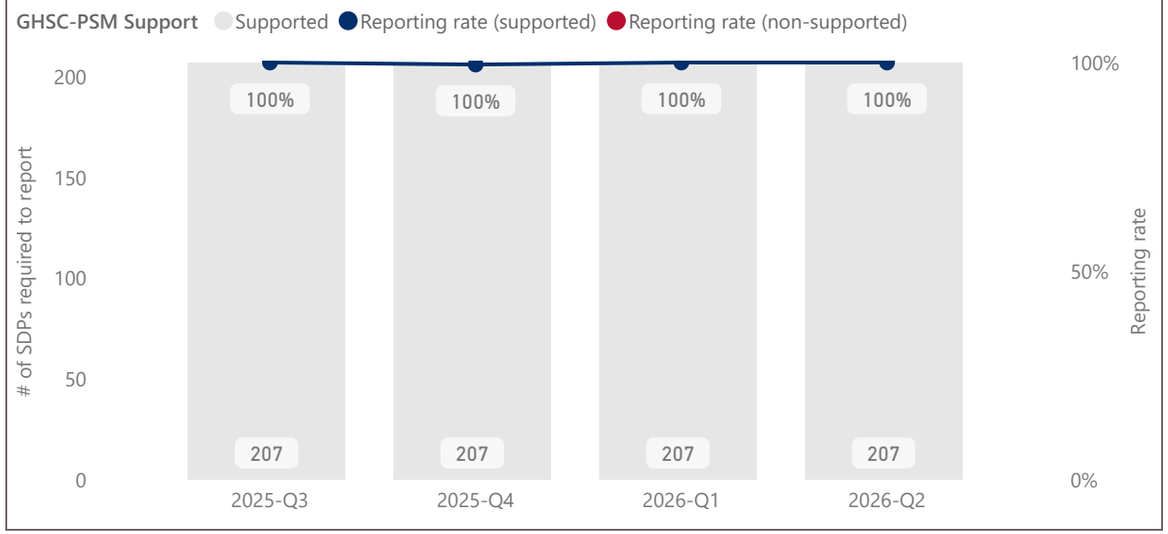
B1. Stockout rate at service delivery points



Data source

Informed Push, February 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

Informed Push, February 2026

B3. Data Source (numerator)

Informed Push, February 2026

Analysis

Lesotho saw a decrease in the stockout rate, from 0.7 percent to 0.2 percent in FY 2026 Q2. Every product except for EID reagent had a stockout rate of 0 percent. EID reagent had a stockout rate of 4.7 percent this quarter, a decrease from last quarter's 16.7 percent. The EID cartridges were stocked out at two health facilities because they did not request the product from CMS in January 2026, which was restocked at CMS at the beginning of October 2025 after prolonged stockout. To avoid service interruption, the EID samples from the affected health facilities were being sent to National Reference Laboratory (NRL) for testing.

Analysis

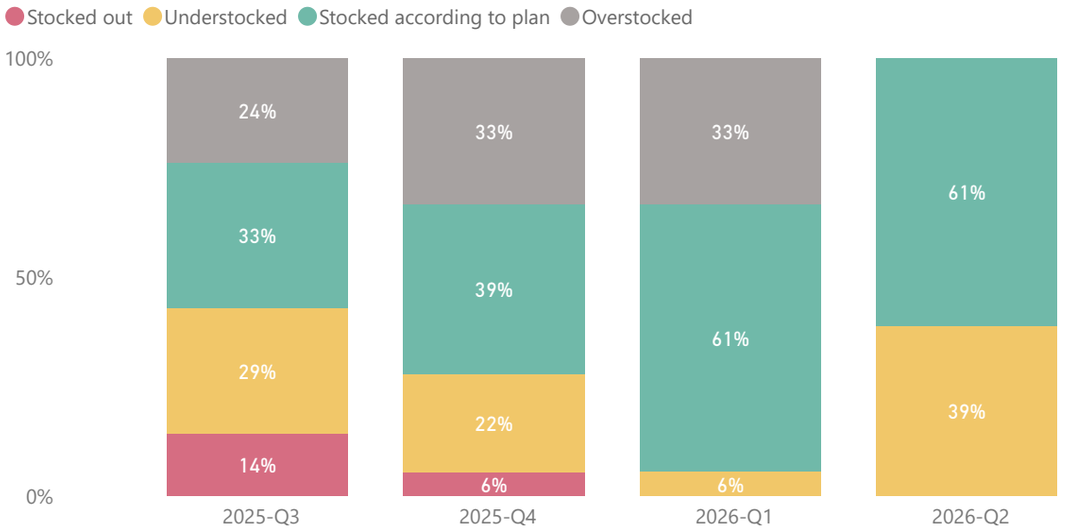
All 207 health facilities reported on time this quarter. The National Reference Laboratory (NRL) was slightly delayed compared to the usual reporting cycle this quarter, but was still considered within the reasonable window of "on time" for this indicator. The districts shared district ordering schedules for 12 months which outline clearly when health facilities must submit their informed push reports to the district for the year 2026. To maintain the reporting of health facilities to the LMIS, districts will maintain WhatsApp groups where reminders for reporting will be sent prior to reporting week.

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-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



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

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



Supply Chain Level	B2. Data Source(s)

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 remained consistent at 61 percent, while understocks increased to 39 percent from last quarter's 6 percent. There were no overstocks or stockouts this quarter. The largest change in the stocking observations can be attributed to a shift in more understock observations of RTKs and reagents, for which there are expected deliveries in June and July 2026. First line adult ARV and pediatric ARV, however, were entirely stocked according to plan this quarter.
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-Q2

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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**0.2%**	**1,011**
HIV-EID reagent	4.7%	43
HIV-First RTK	0.0%	207
HIV-Most used 1st line ARV	0.0%	207
HIV-Most used 1st line pediatric ARV	0.0%	176
HIV-Most used 2nd line ARV	0.0%	138
HIV-Second RTK	0.0%	207
HIV-Viral load reagent	0.0%	33
Overall	**0.2%**	**1,011**

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	**61%**	**0%**	**39%**	**0%**	**18**
HIV/AIDS	61%	0%	39%	0%	18
Overall	**61%**	**0%**	**39%**	**0%**	**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 2
January - March 2026

Country M&E Indicator Performance

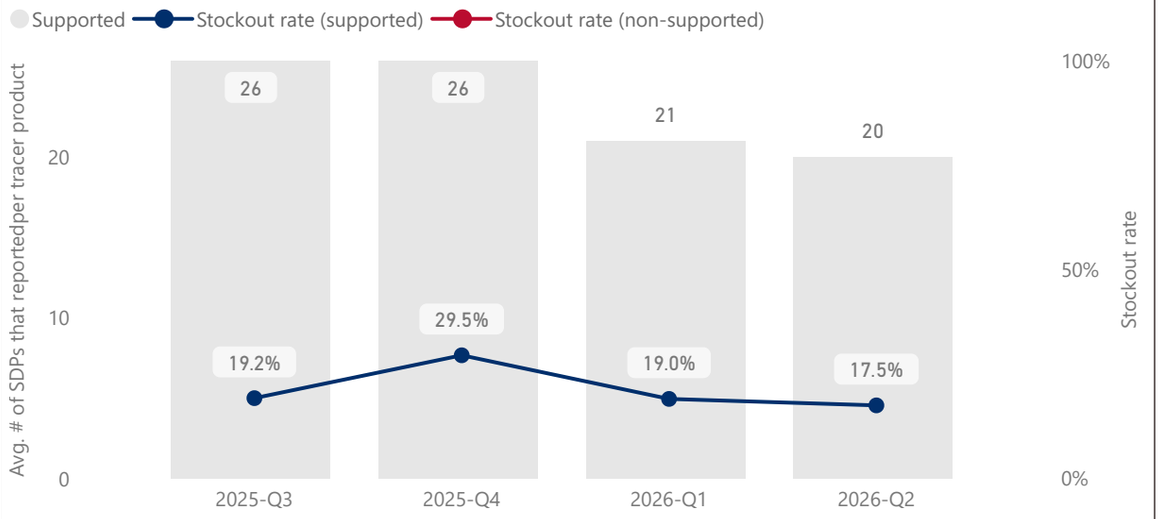
Country

Liberia

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Liberia | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



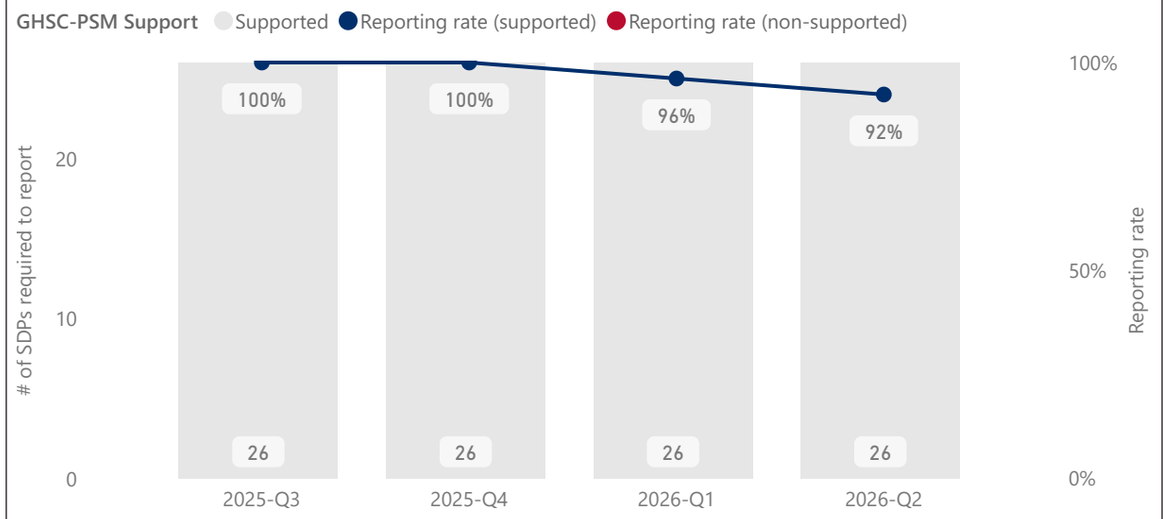
Data source

High Burden Facilities Stock Status Report end March' 2026

Analysis

The stockout rate for HIV/AIDS commodities this quarter decreased to 17.5 percent, down from 19.0 percent last quarter; however, stockouts for HIV pediatric ARVs increased to 54.2 percent, compared to 42.3 percent in the previous quarter, and the stockout rate for HIV first-line ARVs rose to 8.3 percent from 4.0 percent. For HIV rapid test kits (RTKs), the stockout rate for first RTKs increased from zero to 8.3 percent, while second RTK stockouts decreased significantly to 8.3 percent from 36.0 percent, and stockouts for HIV "tie-breaker" RTKs also declined to 8.3 percent from 12.0 percent in the previous reporting period.

B3. LMIS reporting rate



B3. Data Source (denominator)

High Burden Facilities Stock Status Report end March' 2026

B3. Data Source (numerator)

High Burden Facilities Stock Status Report end March' 2026

Analysis

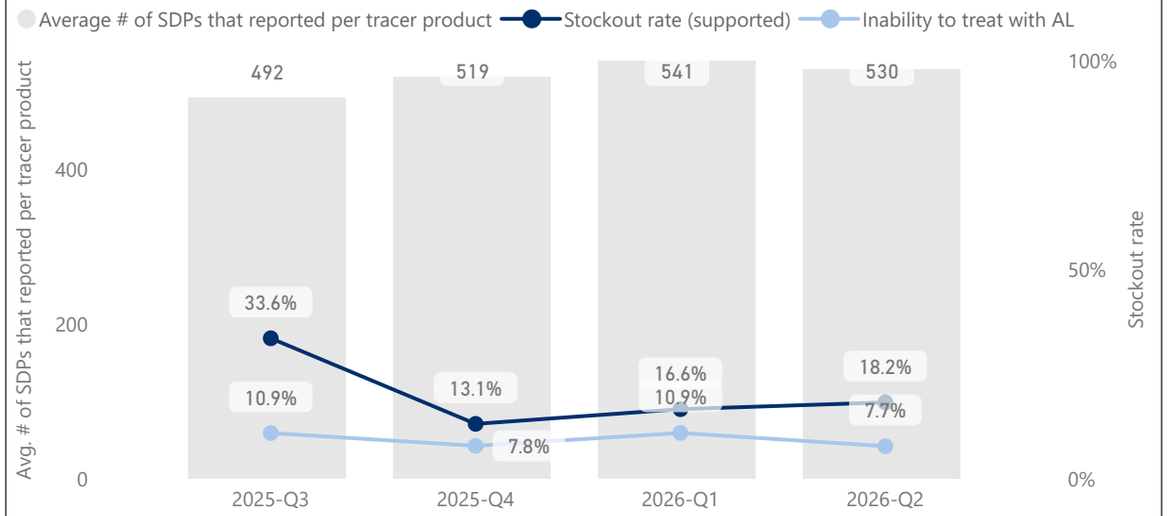
The reporting rate remained strong at 92 percent. Only a slight decrease from the previous quarter reporting rate of 96 percent.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



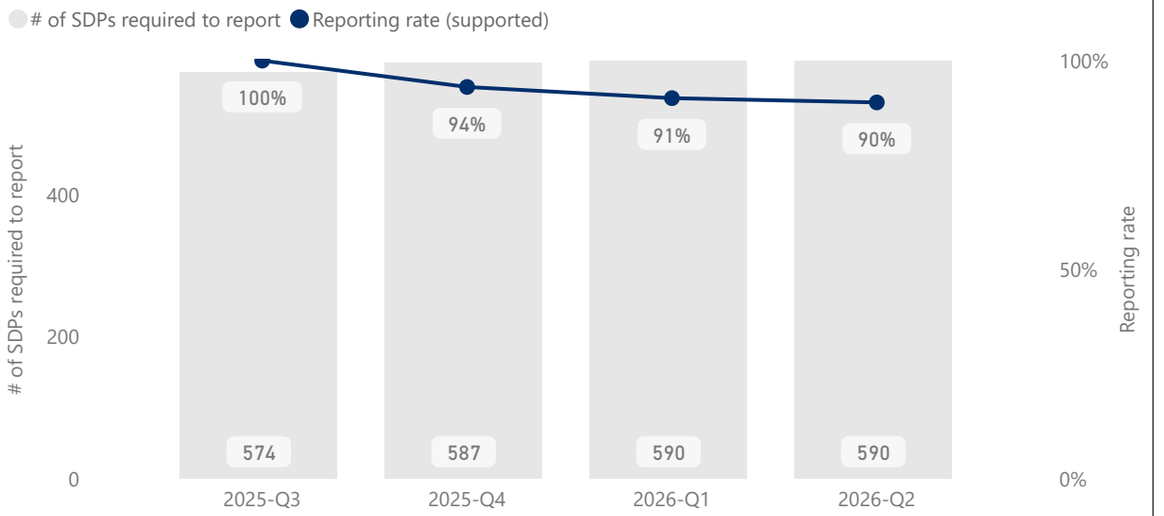
Data source

e_LMIS stock status report end March' 2026

Analysis

The stockout rate for malaria commodities this quarter increased slightly to 18.2 percent, up from 16.6 percent last quarter. For AL formulations, AL 6x1 and AL 6x2 reported stockout rates of approximately 12 percent, remaining consistent with the previous quarter, while AL 6x3 increased to 20.4 percent from 15.0 percent and AL 6x4 rose more sharply to 31.3 percent from 18.9 percent. Despite these increases, the inability to treat with AL in Q1 FY2026 stands at 7.7 percent. SP stockouts declined to 15.2 percent from 18.7 percent last quarter, and malaria RDT stockouts also improved, decreasing to 9.8 percent from 12.8 percent; however, LLIN stockouts increased slightly to 27.5 percent compared to 26.7 percent in the previous quarter.

B3. LMIS reporting rate



B3. Data Source (denominator)

e_LMIS stock status report end March' 2026

B3. Data Source (numerator)

e_LMIS stock status report end March' 2026

Analysis

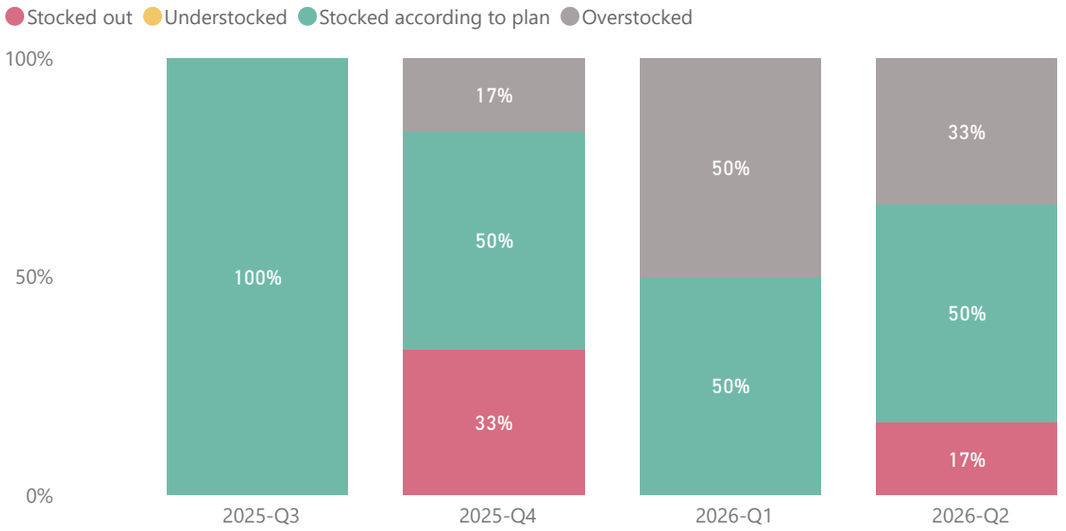
The reporting rate remained strong at 90 percent. Only a slight decrease from the previous quarter reporting rate of 91 percent.

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: Liberia | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	March 2026 QAT

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



Data is not available at this level, or there is no relevant subnational 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 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 %

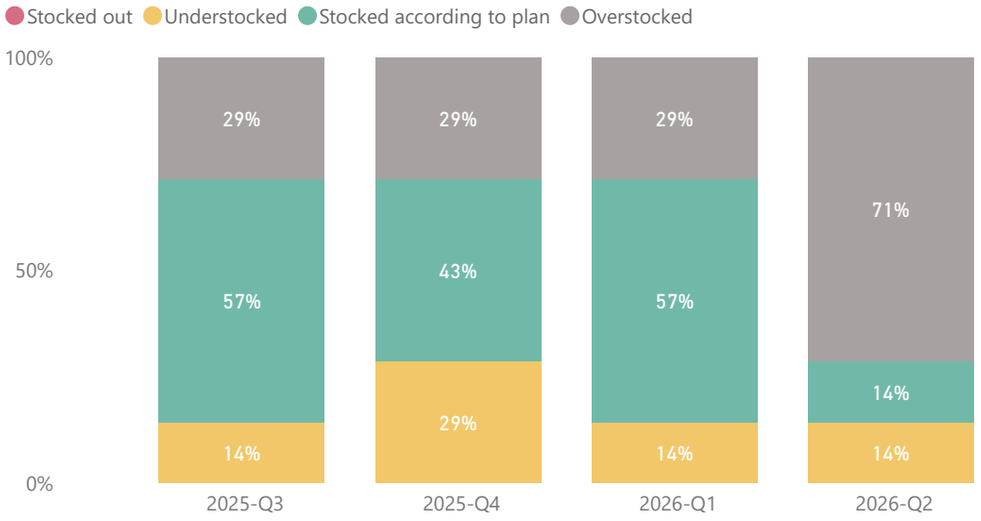
Ref	Analysis
B2	Overall, stocked according to plan rates remained steady at 50 percent compared with last quarter, while overstocked HIV commodities decreased to 33 percent from 50 percent. In contrast, stocked out rates increased to 17 percent from zero percent in the previous quarter. This rise in stockouts is primarily attributed to second-line adult ARVs shifting from overstocked status last quarter to stocked out this quarter, while all other HIV commodities remained 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

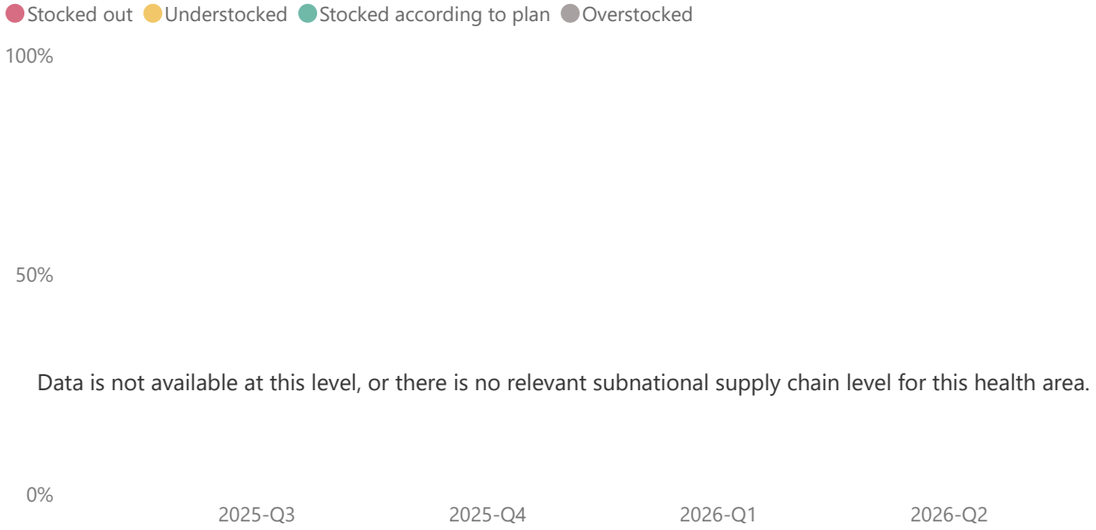
Country: Liberia | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	March 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, stocked according to plan rates decreased to 14 percent from 57 percent last quarter, while overstocked commodities increased to 71 percent from 29 percent. This shift is primarily driven by AL 6x1, 6x2, and 6x3 moving from stocked according to plan to overstocked this quarter. Understocked commodities remained unchanged at 14 percent, and all other commodities showed no change from 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-Q2

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 Q2.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q3	2025-Q4	2026-Q1	2026-Q2
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

Cu: 20

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**17.5%**	**120**
HIV-"Tie-breaker" RTK	8.3%	24
HIV-First RTK	8.3%	24
HIV-Most used 1st line ARV	8.3%	24
HIV-Most used 1st line pediatric ARV	54.2%	24
HIV-Most used 2nd line ARV		0
HIV-Second RTK	8.3%	24
Malaria	**18.2%**	**3,707**
Malaria-First line ACT (AL 6x1)	12.3%	530
Malaria-First line ACT (AL 6x2)	10.9%	531
Malaria-First line ACT (AL 6x3)	20.4%	530
Malaria-First line ACT (AL 6x4)	31.3%	530
Malaria-LLINs	27.5%	530
Malaria-Rapid diagnostic test for malaria	9.8%	528
Malaria-Sulphadoxine-pyrimethamine	15.2%	528
Overall	**18.2%**	**3,827**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	7.7%	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	92%	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	**31%**	**54%**	**8%**	**8%**	**13**
HIV/AIDS	50%	33%		17%	6
Malaria	14%	71%	14%		7
Overall	**31%**	**54%**	**8%**	**8%**	**13**

B6. Quarterly supply plan updates

Product Group	# of supply plans requir
Malaria commodities	1

GLOBAL HEALTH SUPPLY CHAIN PROGRAM

Procurement and Supply Management

FY2026 Quarter 2
January - March 2026

Country M&E Indicator Performance

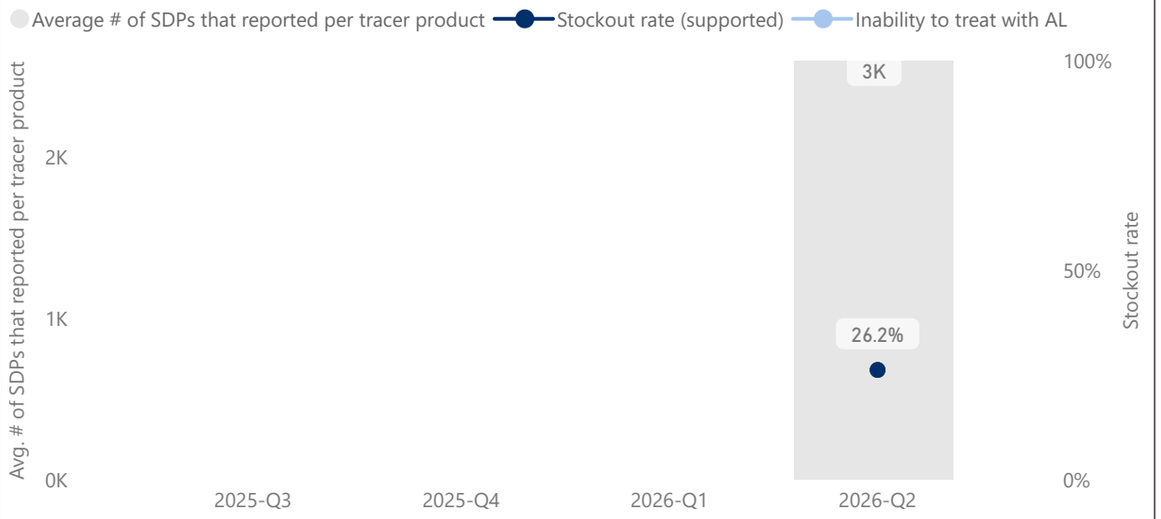
Country

Madagascar

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Madagascar | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



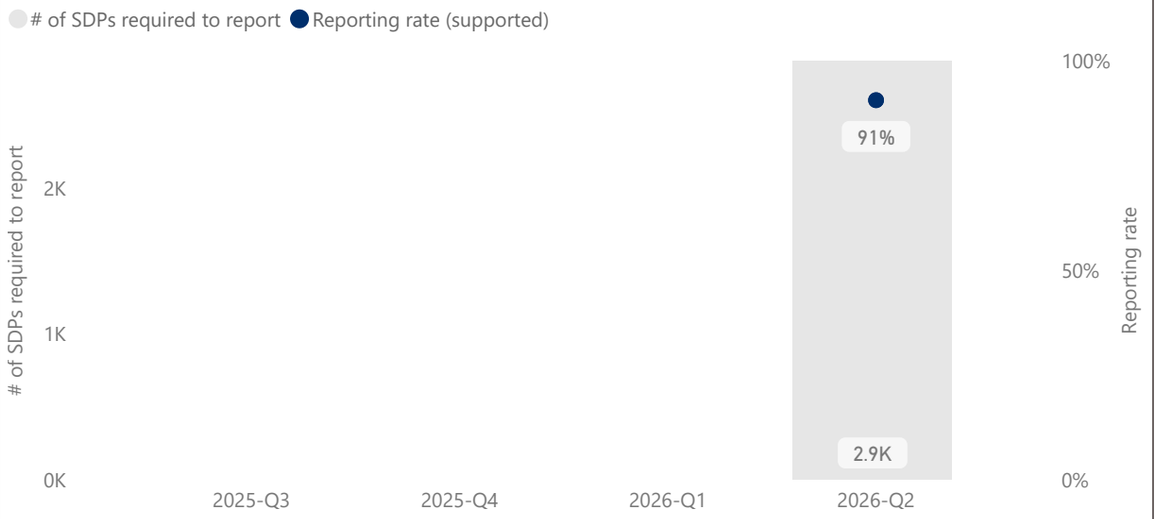
Data source

DHIS2, SoH as of Jan 31, 2026, collected on Mar 21, 2026

Analysis

The overall stockout rate of malaria tracer commodities was 26.2 percent in FY 2026 Q2, with individual product stockout rates ranging from 10 percent to 65 percent. The elevated stockout rates observed at SDPs were primarily the result of disruptions to product distribution following the USAID SWO in February 2025. The resumption of product distribution following the restoration of USG funding and the arrival of 285,225 ACT doses in December 2025 is expected to improve product supply to SDPs. Also, an additional 1.3 million ACT doses have been received in April 2026.

B3. LMIS reporting rate



B3. Data Source (denominator)

MoH updated list - 2025

B3. Data Source (numerator)

DHIS2, SoH as of Jan 31, 2026, collected on Mar 21, 2026

Analysis

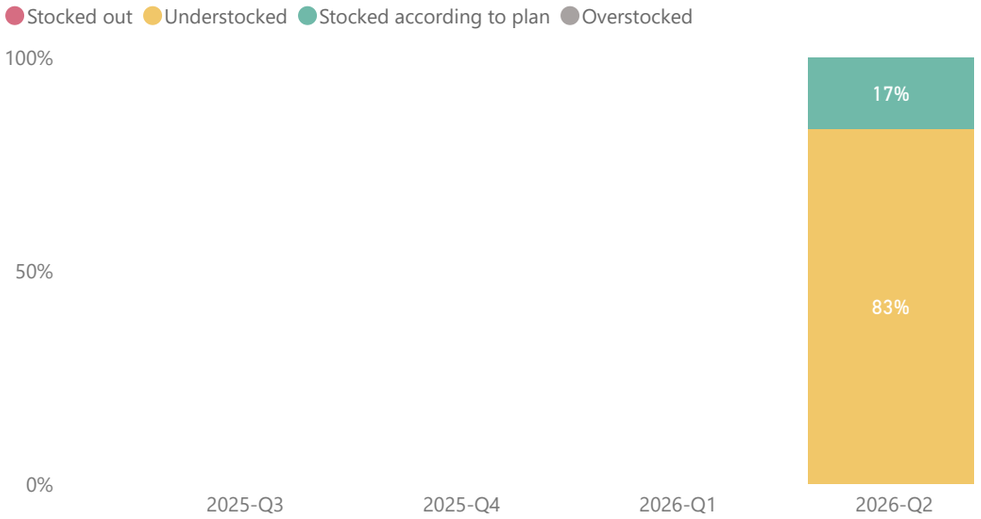
The reporting rate of SDPs reached 91 percent in FY 2026 Q2, indicating strong availability of logistics data. Logistics data are currently reported through the DHIS2 platform in the absence of a dedicated LMIS

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-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Central warehouse inventory report on Feb 28, 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	As of FY 2026 Q2, 83 percent of commodities in storage at the central level were understocked due to limited product supply following the USAID SWO in February 2025. Only one commodity (sulphadoxine-pyrimethamine) was stocked according to plan, due to regular shipments from the Global Fund and a USG shipment in August 2025. Product deliveries following the restoration of USG funding will improve stock levels at the central level and support downstream distribution. The project will continue to support the MoH to routinely monitor stock status and regularly update supply plans.
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: Madagascar

Current Quarter: 2026-Q2

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 Project supported the MoH supply chain coordination committee to update the malaria commodity supply plan using the QAT tool. The updated supply plan has been shared with the GHSC-PSM HQ FASP team.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
Malaria	**26.2%**	**15,600**
Malaria-First line ACT (AS/AQ 100/270mgx3)	16.2%	2,600
Malaria-First line ACT (AS/AQ 100/270mgx6)	24.1%	2,600
Malaria-First line ACT (AS/AQ 25/67.5mg)	65.1%	2,600
Malaria-First line ACT (AS/AQ 50/135mg)	22.0%	2,600
Malaria-Rapid diagnostic test for malaria	10.5%	2,600
Malaria-Sulphadoxine-pyrimethamine	19.3%	2,600
Overall	**26.2%**	**15,600**

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	91%	2871

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**17%**		**83%**		**6**
Malaria	17%		83%		6
Overall	**17%**		**83%**		**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 2
January - March 2026

Country M&E Indicator Performance

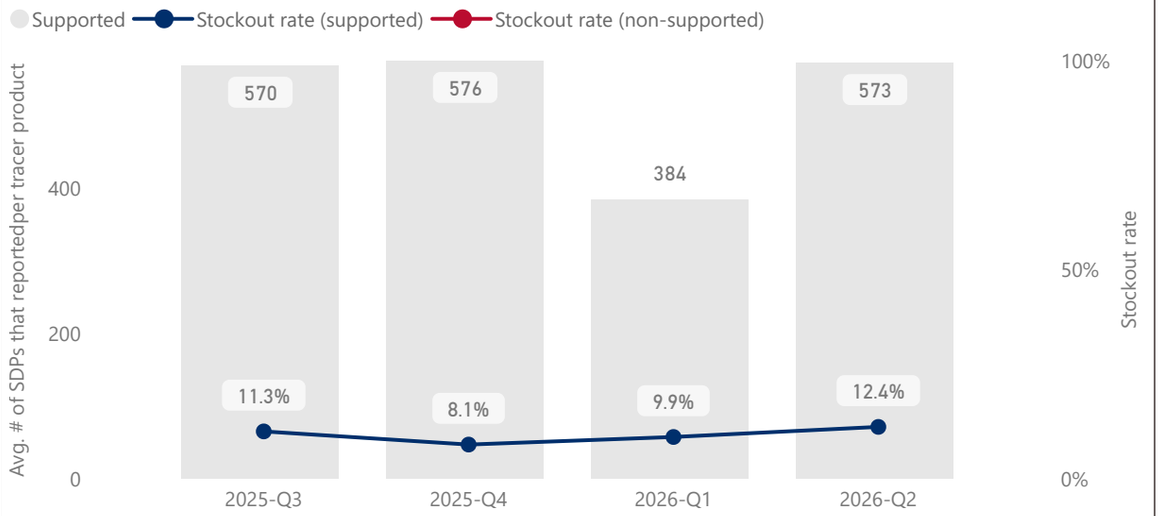
Country

Malawi

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Malawi | Current Quarter: 2026-Q2 | Tracer Product: All

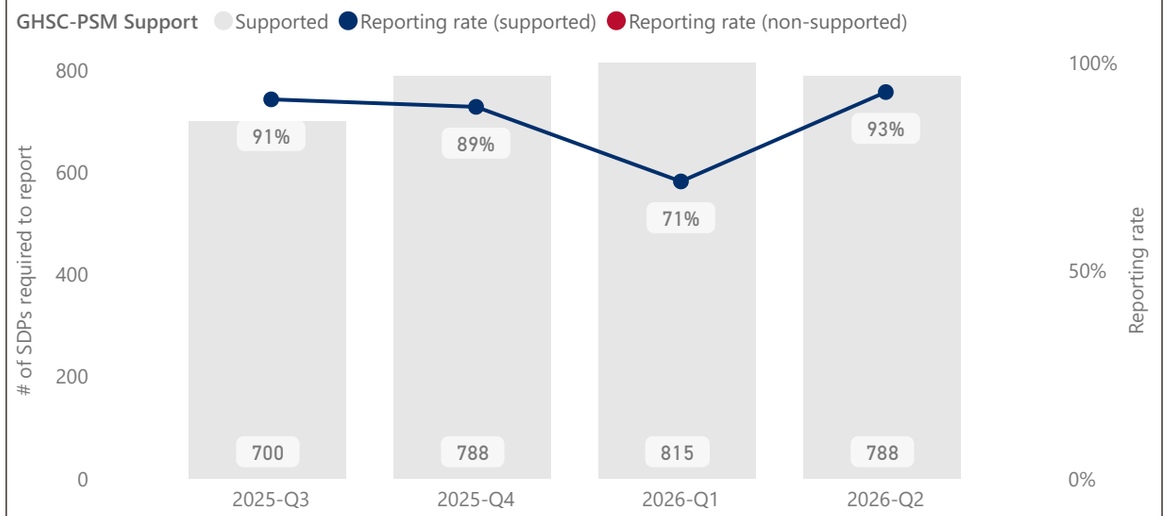
B1. Stockout rate at service delivery points



Data source

Monthly LMIS Report, February 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

Monthly LMIS Report, February 2026

B3. Data Source (numerator)

Monthly LMIS Report, February 2026

Analysis

The stockout rate for HIV/AIDS commodities rose to 12.4 percent this quarter, driven primarily by increased stockouts of second-line adult ARVs and first- and second-line RTKs. The average number of SDPs reporting by product increased to 573, returning to levels observed in Q4 FY2025. GHSC-PSM continues to support the Ministry of Health in strengthening commodity security through monthly stock analyses and distribution planning of HIV lab commodities, and broader systems support. GHSC-PSM will also continue working with the MOH to follow up with facilities and facilitate redistributions to mitigate stockouts.

Analysis

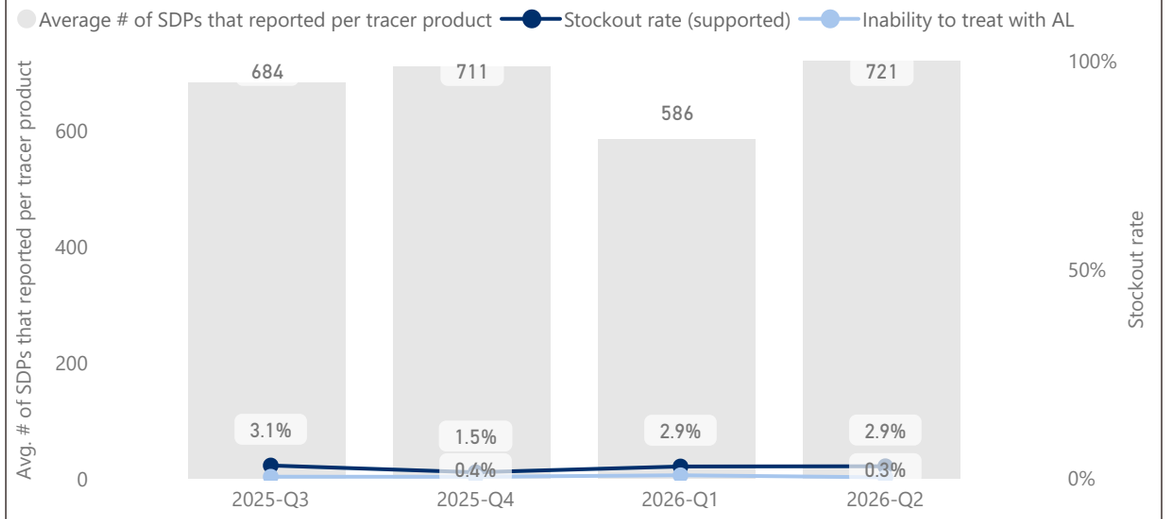
The HIV/AIDs reporting rate increased to 93 percent this quarter. This is a significant increase from 71 percent reported in Q1 FY2026.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



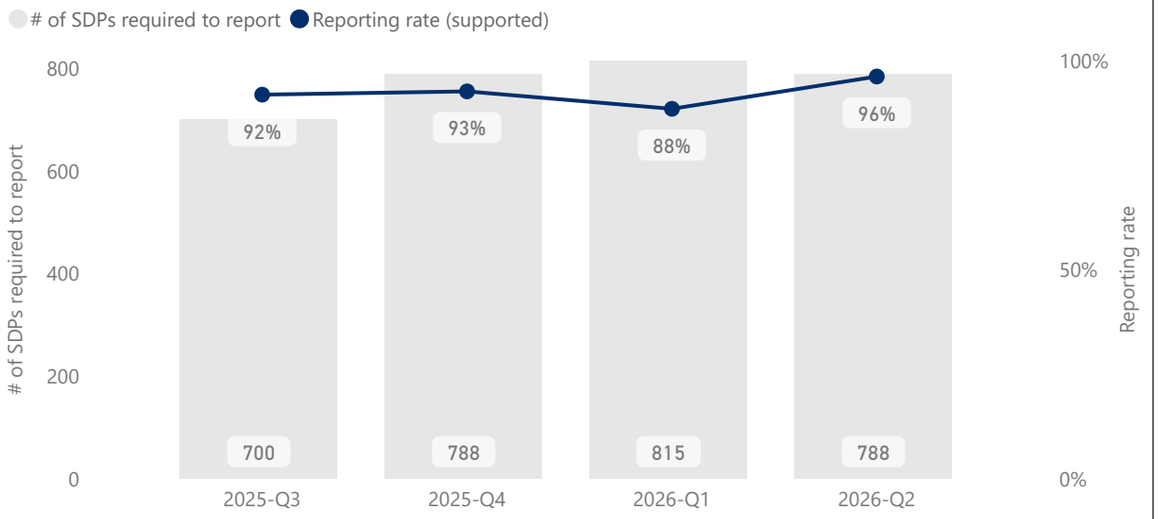
Data source

Monthly LMIS Report, February 2026

Analysis

The stockout rate for malaria commodities remained consistent at 2.9 percent this quarter. The AL inability to treat score remained very low at 0.3 percent, meaning almost all facilities had the means to treat malaria with first line regimens. GHSC-PSM continues to support the Ministry of Health in its efforts to improve commodity security through monthly supply plan update, monthly commodity stock analyses, distribution planning and coordination, and other systems support. GHSC-PSM will also continue supporting districts to follow up with facilities and facilitate redistribution to reduce stockouts.

B3. LMIS reporting rate



B3. Data Source (denominator)

Monthly LMIS Report, February 2026

B3. Data Source (numerator)

Monthly LMIS Report, February 2026

Analysis

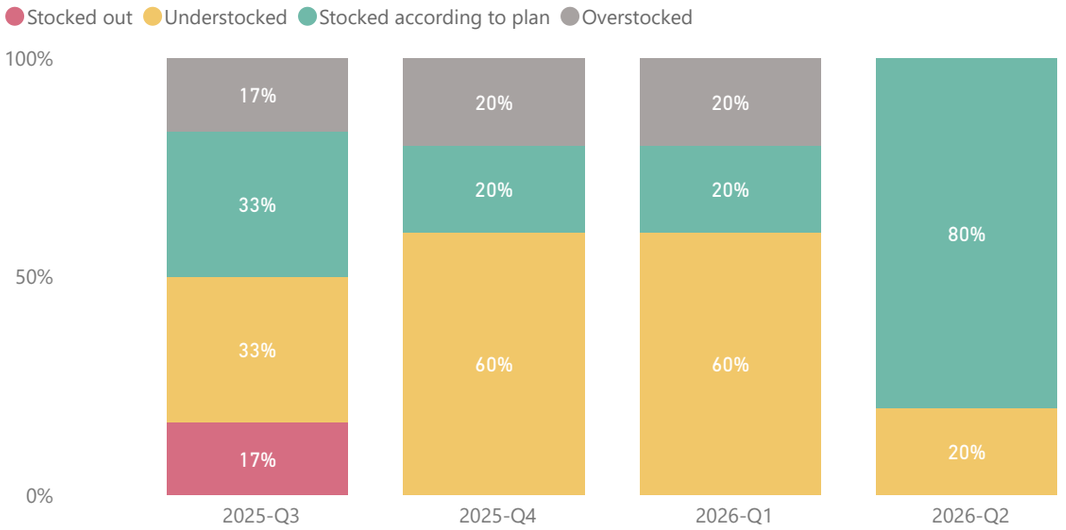
The malaria reporting rate increased to 96 percent this quarter. This is a significant increase from 88 percent reported in Q1 FY2026.

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-Q2 | 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)

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 %

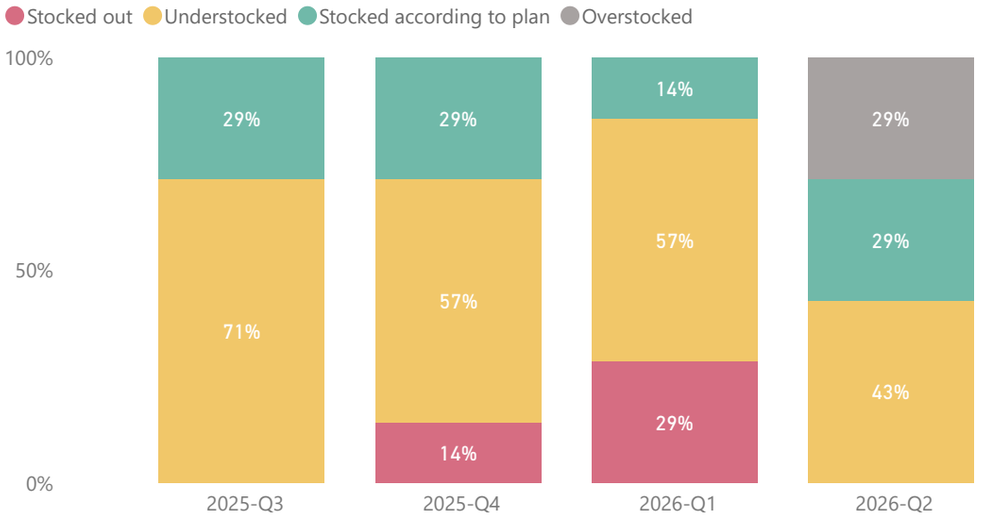
Ref	Analysis
B2	In Q2 FY2026, the proportion of HIV/AIDS commodities stocked according to plan increased to 80 percent, up from 20 percent in Q1 FY2026. This improvement was largely due to second-line adult ARVs shifting from overstocked to stocked according to plan, as well as pediatric ARVs and second-line RTKs moving from understocked to stocked according to plan. There were no reported stockouts at the central level during the quarter, and overall central-level stock status remained strong. GHSC-PSM continues to support the prevention of stockouts by updating the HIV lab commodities supply plan in QAT and facilitate inclusion of the commodities in OpenLMIS to inform decision-making, placing additional orders for understocked or stockout products, and analyzing data to support the Ministry of Health's advocacy and resource mobilization efforts to procure additional medicines.
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

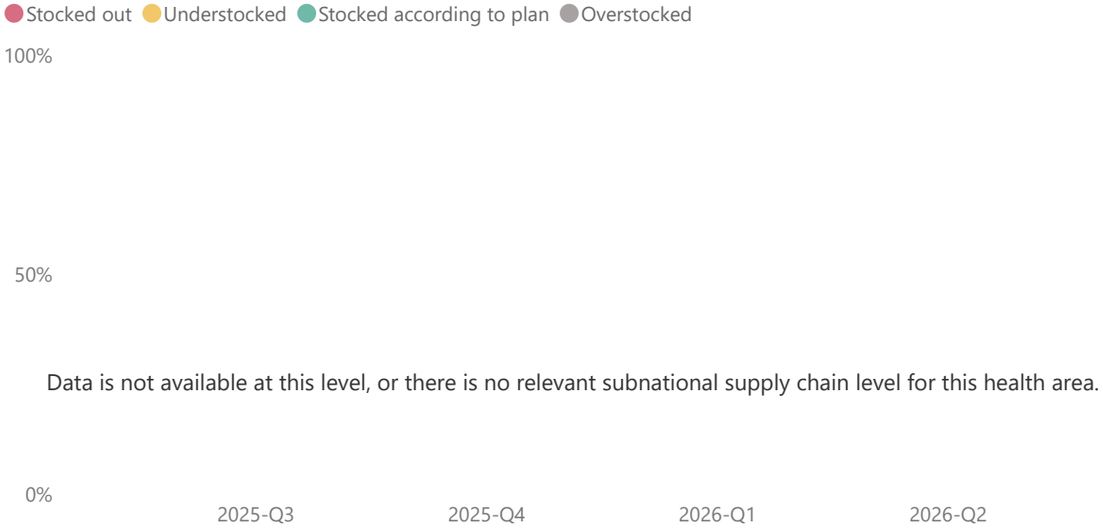
Country: Malawi | Current Quarter: 2026-Q2 | Tracer Product: All

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 %

Ref	Analysis
B2	In Q2 FY2026, the proportion of malaria commodities stocked according to plan increased to 29 percent, driven by AL 6x2 and 6x4 formulations moving to stocked according to plan at the central level. The share of understocked commodities declined to 43 percent, while overstocked commodities increased to 29 percent. No stockouts were reported during the quarter. GHSC-PSM continues to support the prevention of stockouts by updating the supply plan in QAT to inform decision-making, placing additional orders for understocked or stockout products, and analyzing data to support the Ministry of Health's advocacy efforts to procure additional medicines.
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: Malawi

Current Quarter: 2026-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
Lab (HIV diagnostics)	✓	✓	✓	✓
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: Malawi

Current Quarter: 2026-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**12.4%**	**2,866**
HIV-First RTK	17.8%	732
HIV-Most used 1st line ARV	2.5%	653
HIV-Most used 1st line pediatric ARV	8.9%	616
HIV-Most used 2nd line ARV	8.6%	186
HIV-Second RTK	20.2%	679
Malaria	**2.9%**	**5,046**
Malaria-First line ACT (AL 6x1)	1.1%	719
Malaria-First line ACT (AL 6x2)	2.2%	720
Malaria-First line ACT (AL 6x3)	3.4%	710
Malaria-First line ACT (AL 6x4)	5.1%	719
Malaria-LLINs	2.1%	719
Malaria-Rapid diagnostic test for malaria	2.1%	758
Malaria-Sulphadoxine-pyrimethamine	4.6%	701
Overall	**6.3%**	**7,912**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.3%	720

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%	788
Malaria	96%	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%**	**17%**	**33%**		**24**
HIV/AIDS	80%		20%		10
Malaria	29%	29%	43%		14
Overall	**50%**	**17%**	**33%**		**24**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Lab (HIV diagnostics)	1	1
Malaria commodities	1	1
MCH 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 2
January - March 2026

Country M&E Indicator Performance

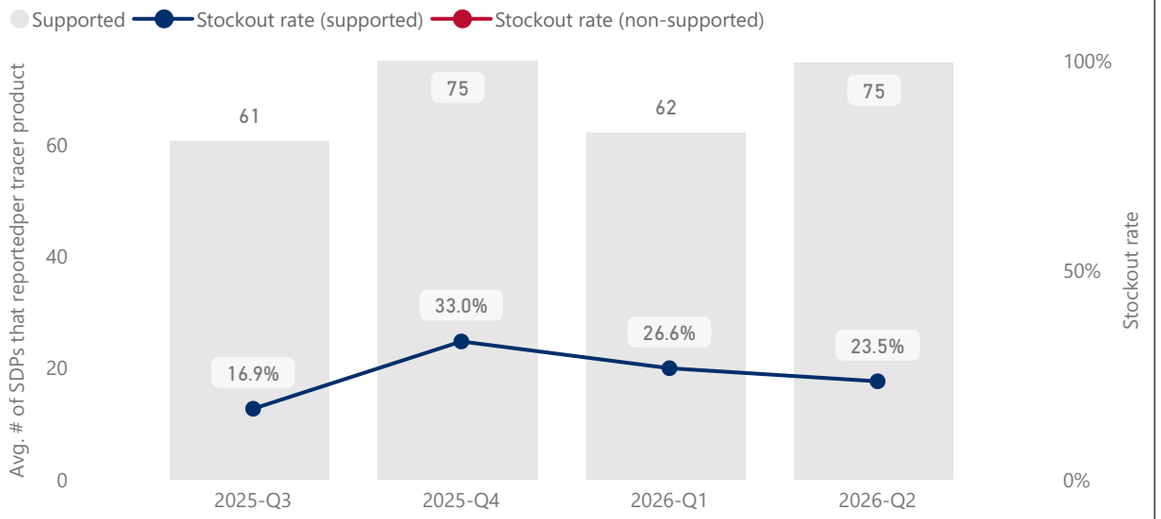
Country

Mali

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Mali | Current Quarter: 2026-Q2 | Tracer Product: All

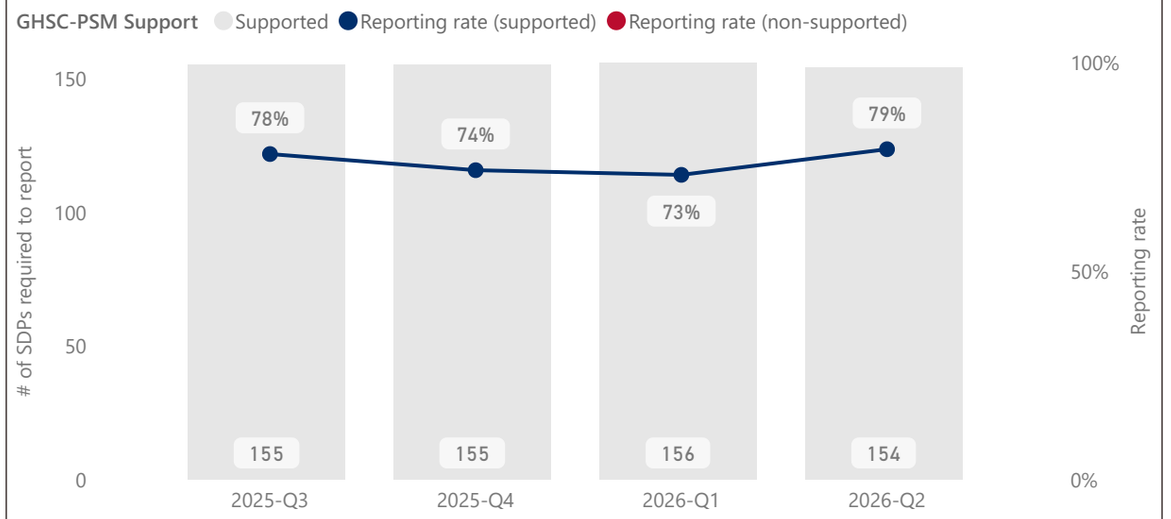
B1. Stockout rate at service delivery points



Data source

OSPSANTE (Fevrier 2026)

B3. LMIS reporting rate



B3. Data Source (denominator)

OSPSANTE (Fevrier 2026)

B3. Data Source (numerator)

OSPSANTE (Fevrier 2026)

Analysis

The average stockout rate of HIV/AIDS tracer commodities declined from 26.6 percent in FY 2026 Q1 to 23.5 percent in FY 2026 Q2. First RTK was stocked out in 36 percent of SDPs, second RTK in 25 percent of SDPs, and the most used first-line pediatric ARV was stocked out in 22 percent of SDPs. Improved uptake of the newly introduced first-line pediatric ARV (ABC/3TC/DTG 60/30/5 mg), together with strengthened downstream distribution, remains key to reducing overall stockout rates for HIV/AIDS commodities in subsequent quarters.

Analysis

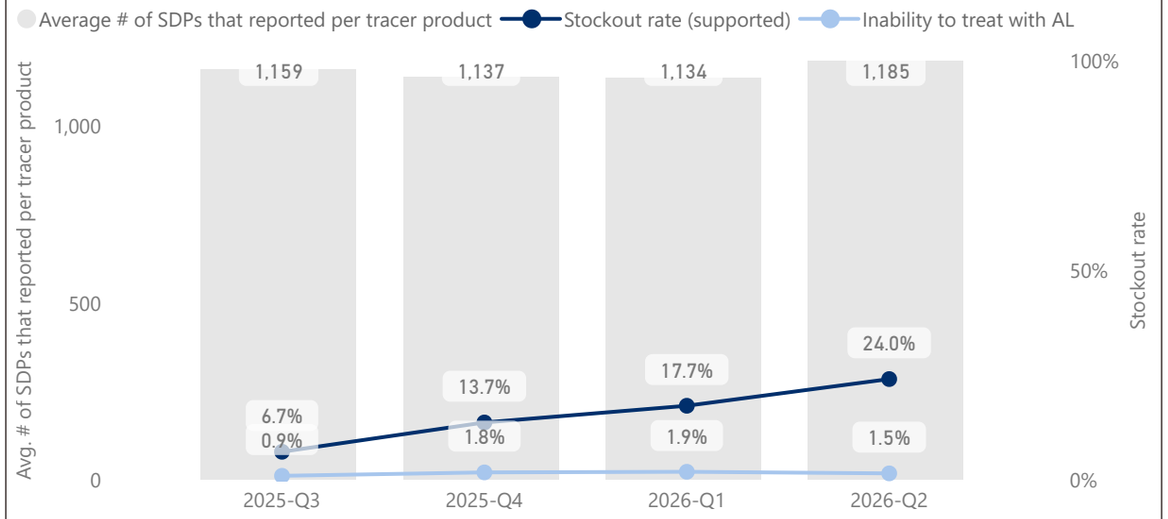
The reporting rate for HIV/AIDS commodity sites increased from 73 percent in FY 2026 Q1 to 79 percent in FY 2026 Q2. The project is collaborating with the Logistics Management Unit of the National Directorate for Pharmacy and Medicines to monitor and supervise reporting into the DHIS2 platform, with the aim of ensuring timely and complete submission 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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



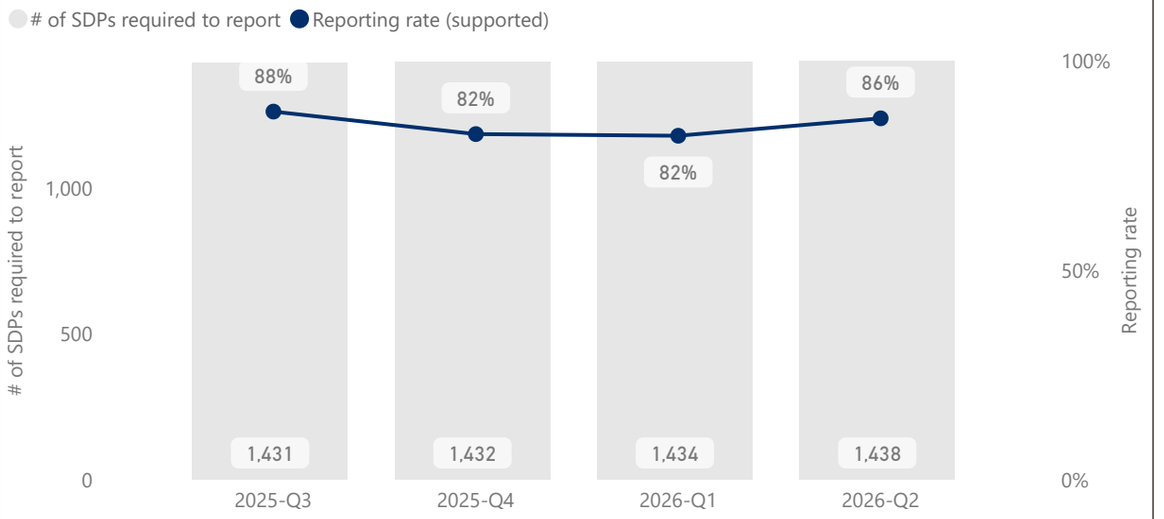
Data source

OSPSANTE (Fevrier 2026)

Analysis

The average stockout rate for malaria tracer commodities increased from 17.7 percent in FY 2026 Q1 to 24.0 percent in FY 2026 Q2. This increase is primarily attributable to higher stockout rates of AL 6x3 and LLINs, which were stocked out in 30.9 percent and 51.5 percent of SDPs, respectively. LLINs were stocked out at the central level, while AL 6x3 was less preferred for stocking at SDPs beause AL 6x4 available.

B3. LMIS reporting rate



B3. Data Source (denominator)

OSPSANTE (Fevrier 2026)

B3. Data Source (numerator)

OSPSANTE (Fevrier 2026)

Analysis

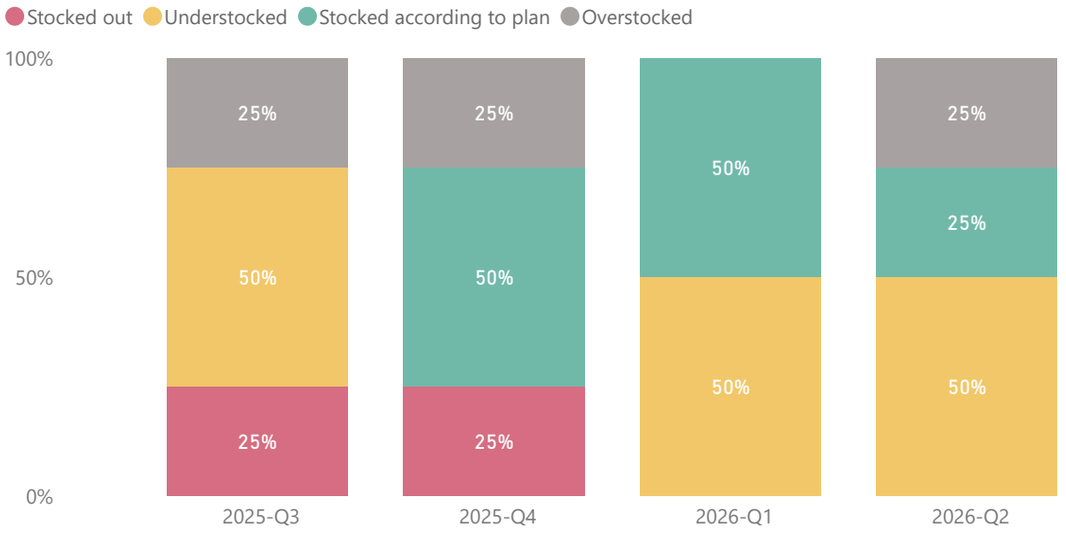
The reporting rate for malaria commodity sites increased from 82 percent in FY 2026 Q1 to 86 percent in FY 2026 Q2. The project is collaborating with the Logistics Management Unit of the National Directorate for Pharmacy and Medicines to promote timely and complete reporting of logistics data into the DHIS2 platform.

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

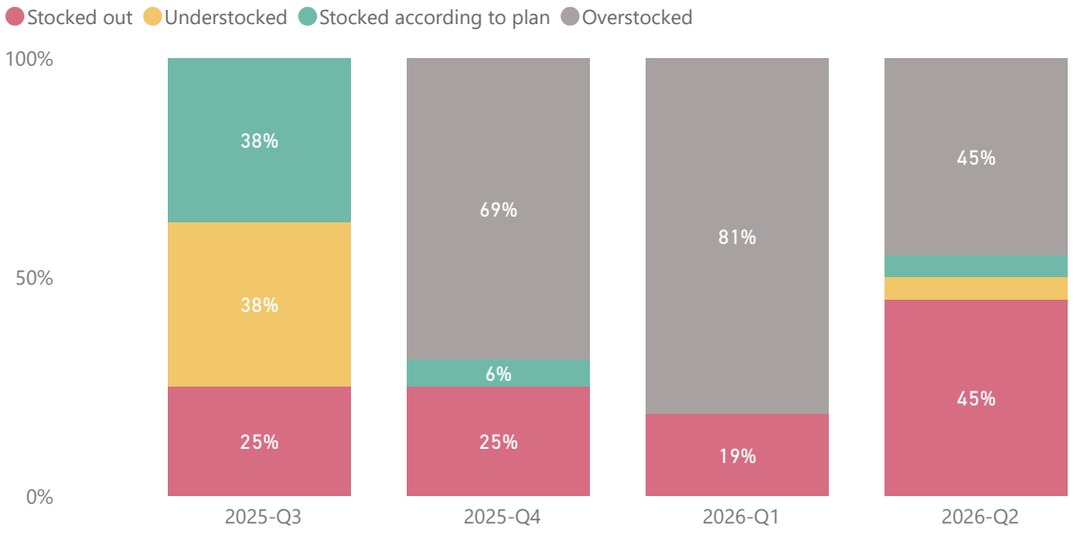
Country: Mali | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	PPM Central, OSPSANTE (Fevrier 2026)

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



Supply Chain Level	B2. Data Source(s)

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 %

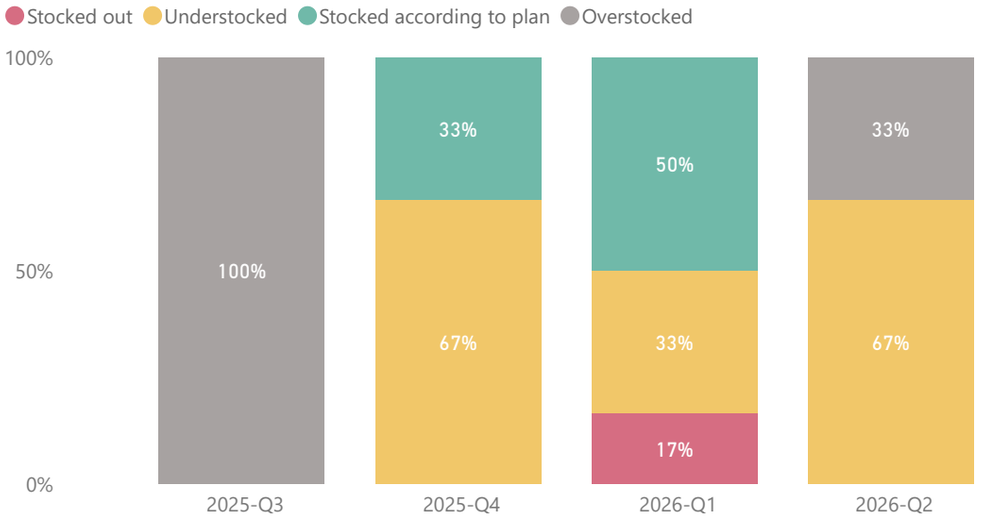
Ref	Analysis
B2	At the central level, 25 percent of HIV/AIDS tracer products were stocked according to plan, 50 percent were understocked, and 25 percent were overstocked, with no stockouts recorded. However, at the regional level, the proportion of products stocked out increased from 19 percent in FY 2026 Q1 to 45 percent in FY 2026 Q2, while the proportion of overstocked products declined from 81 percent to 45 percent over the same period, following distribution to SDPs during the quarter. Additionally, 5 percent of products at the regional level were understocked, and 5 percent were stocked according to plan. These variations in stock levels reflect ongoing product supply challenges and imbalances within the HIV/AIDS supply chain.
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

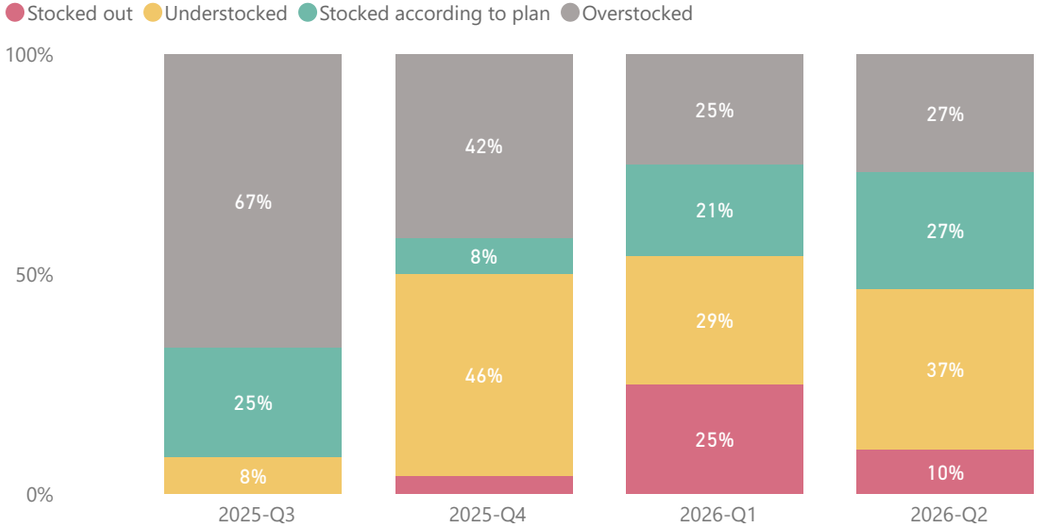
Country: Mali | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	PPM Central, OSPSANTE (Fevrier 2026)

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	OSPSANTE(Fevrier 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	For malaria tracer commodities in storage at the central level, the proportion of products stocked according to plan declined from 50 percent in FY 2026 Q1 to zero in FY 2026 Q2. Consequently, 67 percent of products were understocked and 33 percent were overstocked in FY 2026 Q2, with no stockouts recorded following product receipts and downstream distribution during the quarter. At the regional level, the proportion of products stocked according to plan increased from 21 percent in FY 2026 Q1 to 27 percent in FY 2026 Q2. During the quarter, 37 percent of products were understocked, 27 percent were overstocked, and 10 percent were stocked out. These findings indicate persistent variations in stock levels at both the central and regional levels that need to be addressed to improve access to malaria commodities.
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-Q2

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 provided support to the MoH HIV and malaria technical working groups to conduct a stockout and expiry risk analysis and update the supply plans for HIV/AIDS and malaria products. The updated product supply plans have been submitted to the GHSC-PSM FASP team.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

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

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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**23.5%**	**298**
HIV-First RTK	36.0%	75
HIV-Most used 1st line ARV	9.7%	72
HIV-Most used 1st line pediatric ARV	22.4%	76
HIV-Second RTK	25.3%	75
Malaria	**24.0%**	**8,295**
Malaria-First line ACT (AL 6x1)	14.5%	1,185
Malaria-First line ACT (AL 6x2)	18.9%	1,185
Malaria-First line ACT (AL 6x3)	30.9%	1,185
Malaria-First line ACT (AL 6x4)	9.4%	1,185
Malaria-LLINs	51.5%	1,185
Malaria-Rapid diagnostic test for malaria	24.4%	1,185
Malaria-Sulphadoxine-pyrimethamine	18.6%	1,185
Overall	**24.0%**	**8,593**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	1.5%	1,378

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	79%	154
Malaria	86%	1438

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**10%**	**30%**	**60%**		**10**
HIV/AIDS	25%	25%	50%		4
Malaria		33%	67%		6
Subnational level 1	**18%**	**34%**	**24%**	**24%**	**50**
HIV/AIDS	5%	45%	5%	45%	20
Malaria	27%	27%	37%	10%	30
Overall	**17%**	**33%**	**30%**	**20%**	**60**

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 2
January - March 2026

Country M&E Indicator Performance

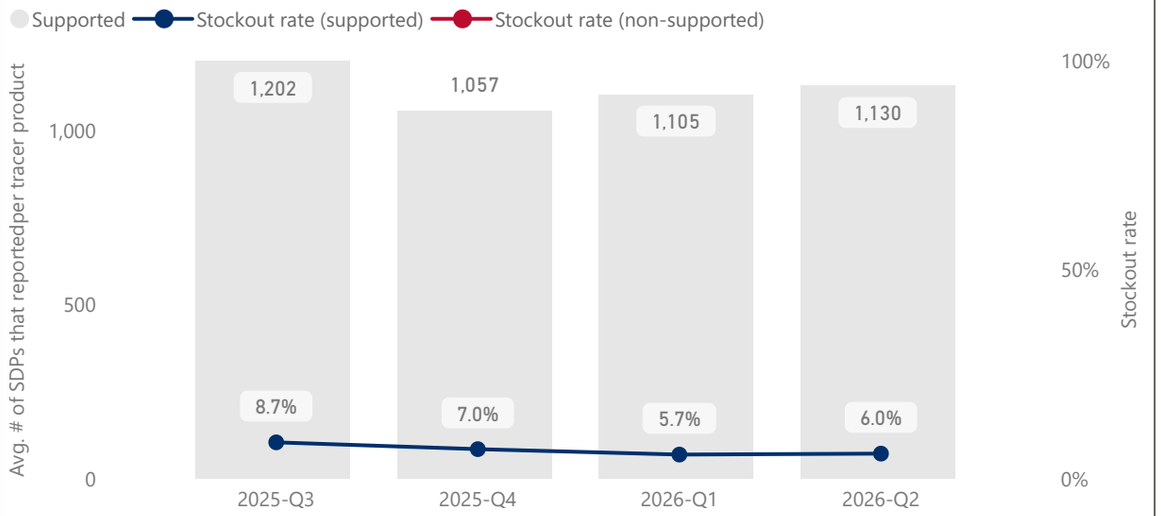
Country

Mozambique

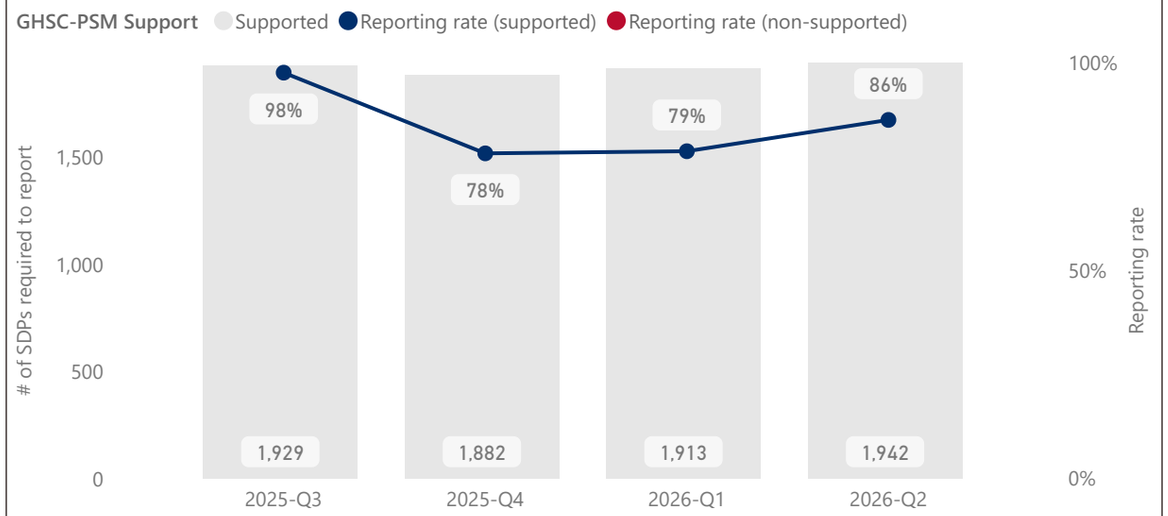
Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Mozambique | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source
FC March'26
LMIS

B3. Data Source (denominator)	B3. Data Source (numerator)
FC, March'2026	RRF, 31th March'26
RRF, 31th March'26	FC, March'2026

Analysis

The stockout rate for HIV/AIDs products increased slightly to 6.0 percent this quarter, due to a slight increase in stockouts of all HIV/AIDs products except for pediatric ARVs. Most HIV commodities were steadily available across facilities during Q2 FY2026. These improvements suggest strengthened supply chain coordination and timely replenishment mechanisms, likely supported by consistent pipeline management and partner collaboration at national and provincial levels.

Analysis

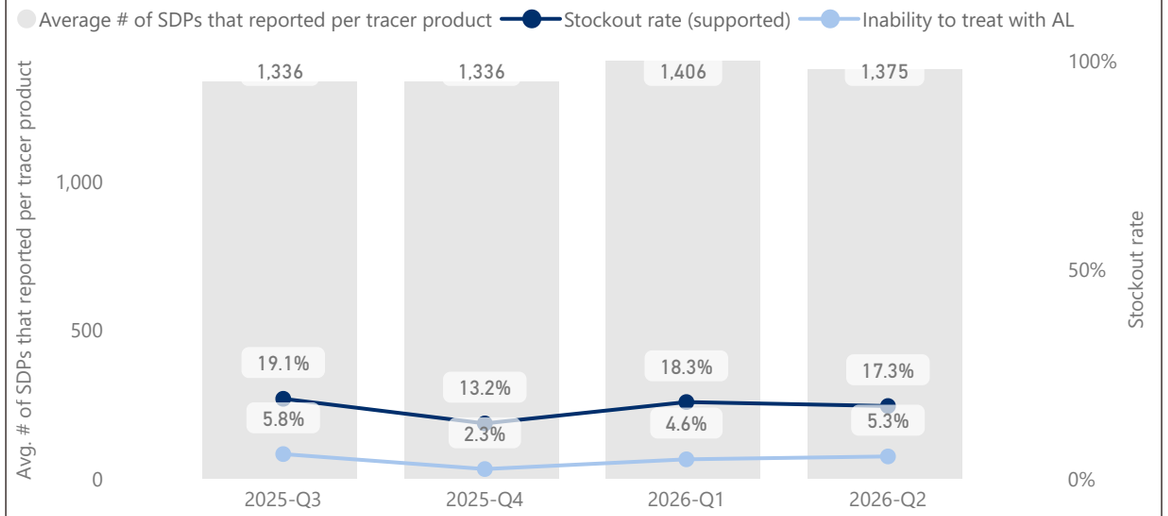
During Q2 FY2026, the overall reporting rate for SDPs under HIV/AIDS increased to 86 percent, compared to 79 percent in Q1 FY2026. SDPs maintained strong performance, suggesting that the reporting challenges were concentrated at the lower service delivery tiers.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



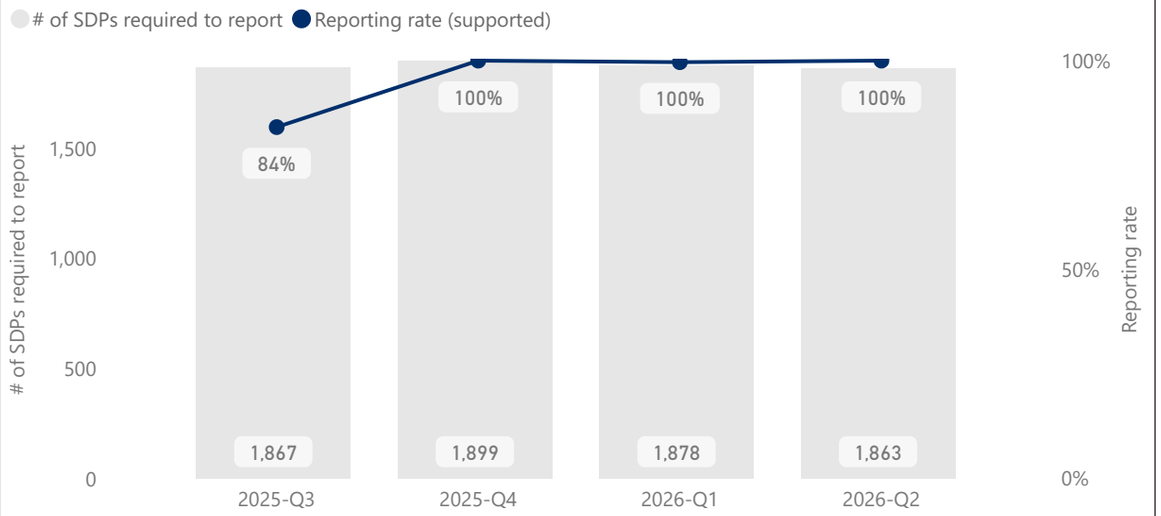
Data source

FC March'26

Analysis

The stockout rate for malaria commodities decreased slightly to 17.3 percent this Q2 FY2026, from last quarter's 18.3 percent. AL 6x1, AL 6x2, and AL 6x3 all had decreases in stockout rates this quarter. The inability to treat rate being at 5.3 percent indicates AL availability at nearly all facilities.

B3. LMIS reporting rate



B3. Data Source (denominator)

SIGLUS Jan'26,Feb'26,Mar'26

B3. Data Source (numerator)

SIGLUS Jan'26,Fev'26,Mar'26

Analysis

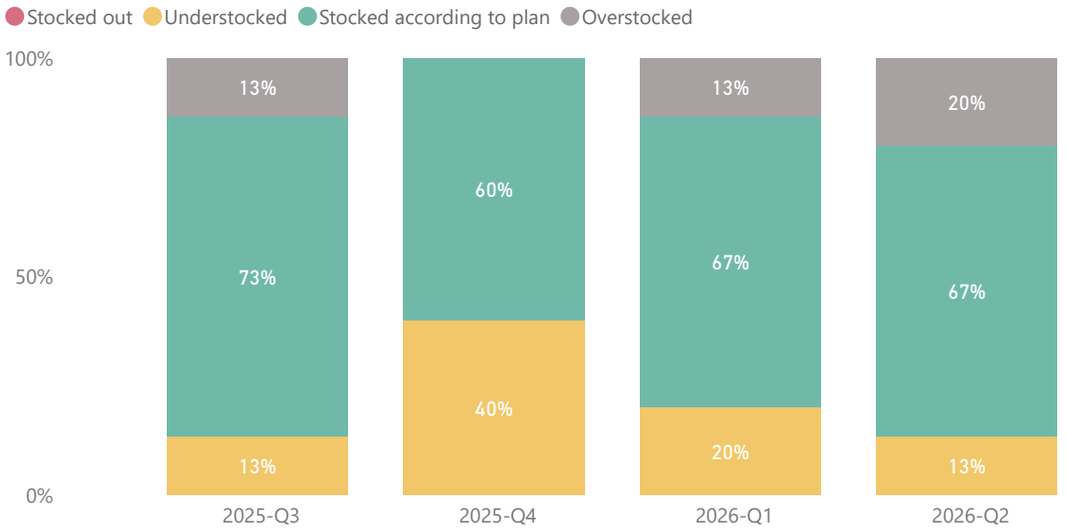
The malaria reporting rate remained at 100 percent this quarter.

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

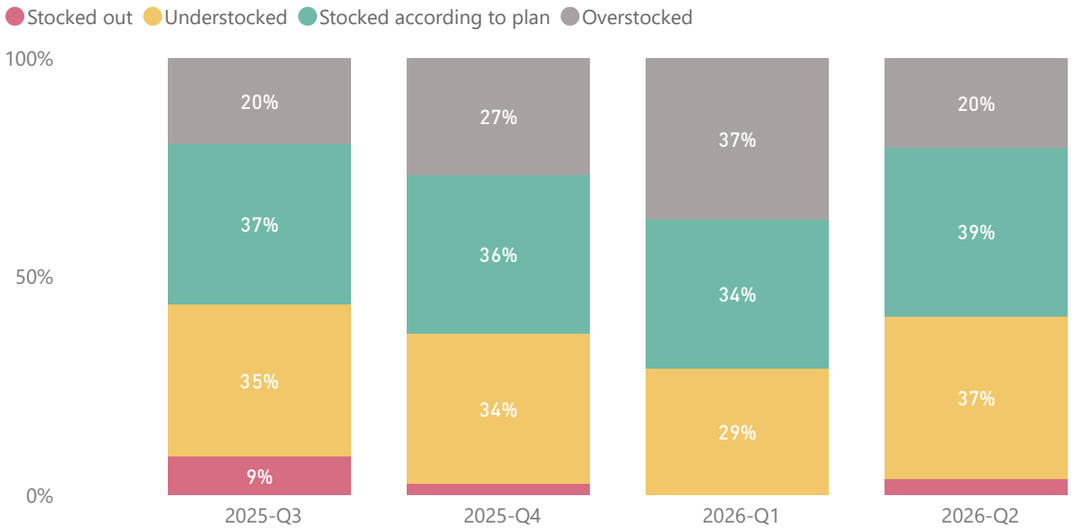
Country: Mozambique | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	FC Jan'26, Fev'26, Mar'26

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	FC Jan'26. Fev'26. Mar'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 %

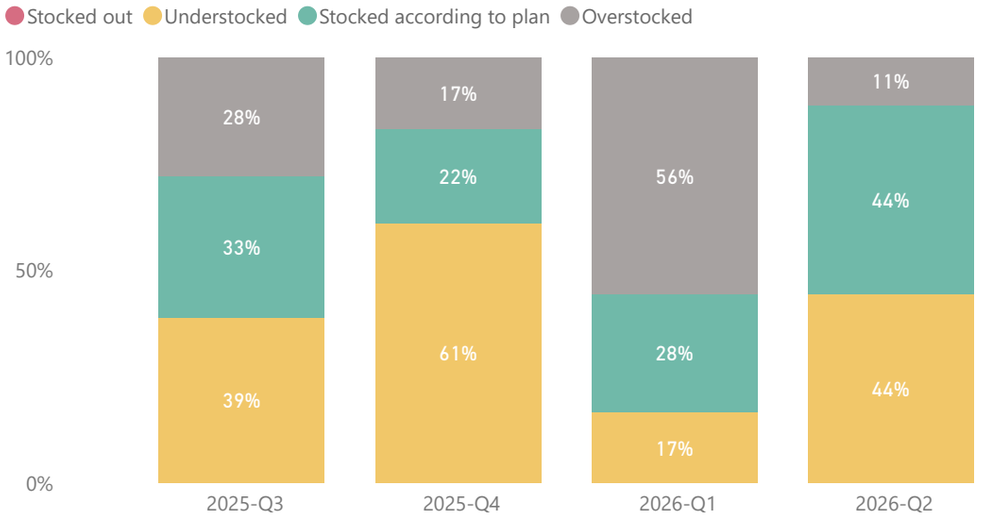
Ref	Analysis
B2	At the central level, the stocked according to plan rate for HIV/AIDS commodities remained at 67 percent, while the understock percentage decreased to 13 percent. Overstock percentages increased to 20 percent. At the subnational level, the stocked according to plan rate for HIV/AIDS commodities increased to 39 percent, and the understock percentage increased to 37 percent. Overstock percentages decreased to 20 percent. Stocked out percentage is at 4 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

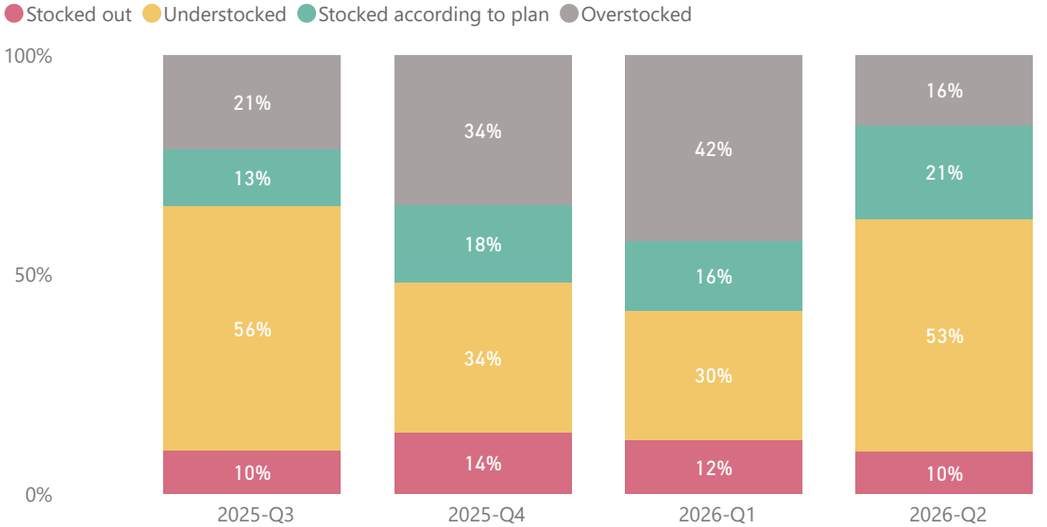
Country: Mozambique | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	FC Jan'26, Fev'26, Mar'26

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



Supply Chain Level	B2. Data Source(s)
Subnational level 1	FC Jan'26, Fev'26, Mar'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 stocked according to plan rate for malaria commodities increased to 44 percent, and the understock percentage increased to 44 percent. Overstock percentage decreased to 11 percent. At the subnational level, the stocked according to plan rate for malaria commodities increased to 21 percent, while the understock percentage increased to 53 percent. Overstock percentage decreased to 16 percent, and stocked out percentages decreased to 10 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.

HIV Tracer Products and Supply Planning

Country: Mozambique

Current Quarter: 2026-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**6.0%**	**7,908**
HIV-EID reagent	7.1%	14
HIV-First RTK	8.8%	1,495
HIV-Most used 1st line ARV	0.8%	1,503
HIV-Most used 1st line pediatric ARV	2.2%	1,613
HIV-Most used 2nd line ARV	2.4%	1,769
HIV-Second RTK	16.8%	1,472
HIV-Viral load reagent	2.4%	42
Malaria	**17.3%**	**9,626**
Malaria-First line ACT (AL 6x1)	11.2%	1,541
Malaria-First line ACT (AL 6x2)	17.3%	1,539
Malaria-First line ACT (AL 6x3)	21.7%	1,504
Malaria-First line ACT (AL 6x4)	23.8%	1,562
Malaria-LLINs	31.6%	591
Malaria-Rapid diagnostic test for malaria	10.9%	1,511
Malaria-Sulphadoxine-pyrimethamine	13.3%	1,378
Overall	**12.2%**	**17,534**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	5.3%	1,591

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	86%	1942
Malaria	100%	1863

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**55%**	**15%**	**30%**	**0%**	**33**
HIV/AIDS	67%	20%	13%	0%	15
Malaria	44%	11%	44%	0%	18
Subnational level 1	**29%**	**18%**	**46%**	**7%**	**495**
HIV/AIDS	39%	20%	37%	4%	225
Malaria	21%	16%	53%	10%	270
Overall	**31%**	**18%**	**45%**	**6%**	**528**

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 2
January - March 2026

Country M&E Indicator Performance

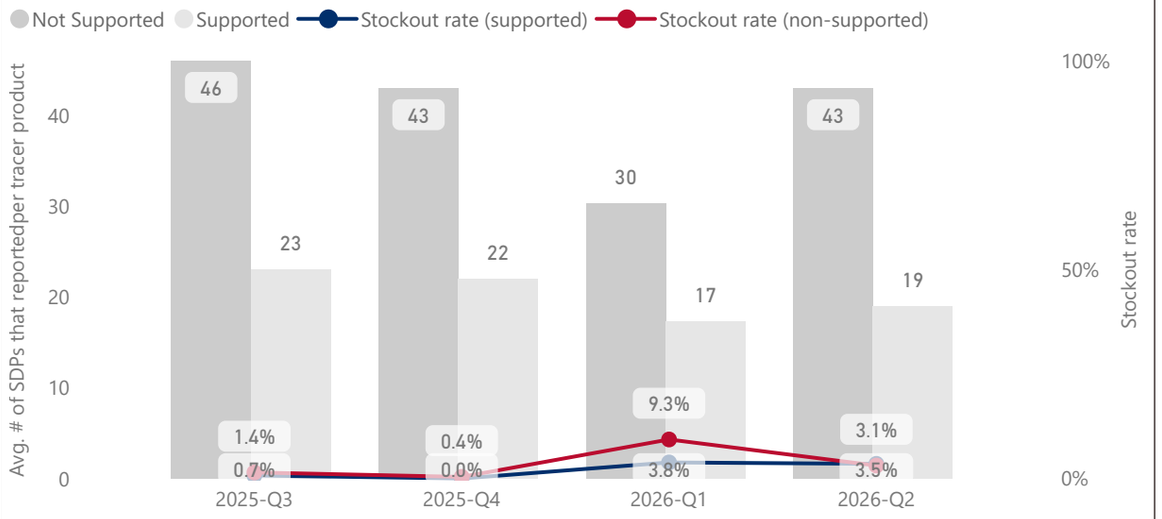
Country

Namibia

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Namibia | Current Quarter: 2026-Q2 | Tracer Product: All

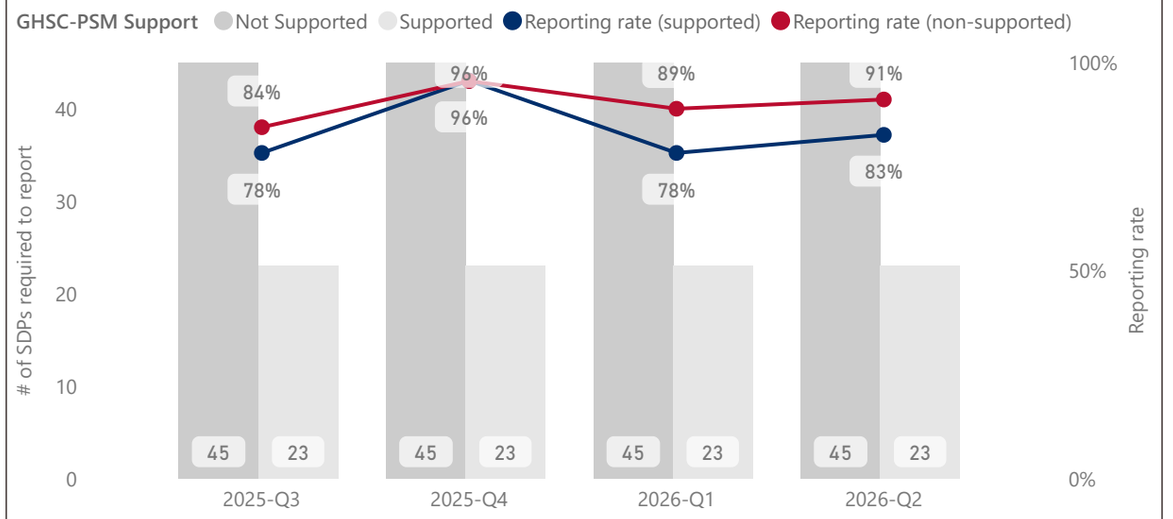
B1. Stockout rate at service delivery points



Data source

MoHSS Pharmaceutical Management Information System Dashboard

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

Stockout rates decreased in both supported and non-supported facilities in FY 2026 Q2. One noteworthy improvement is the zero (0) percent stockout rate of pediatric ARVs reported across both supported and not supported facilities, suggesting that the transition to pALD is stabilizing. Stockout rates of 7 percent or less were reported for RTKs and 2nd line ARVs.

Analysis

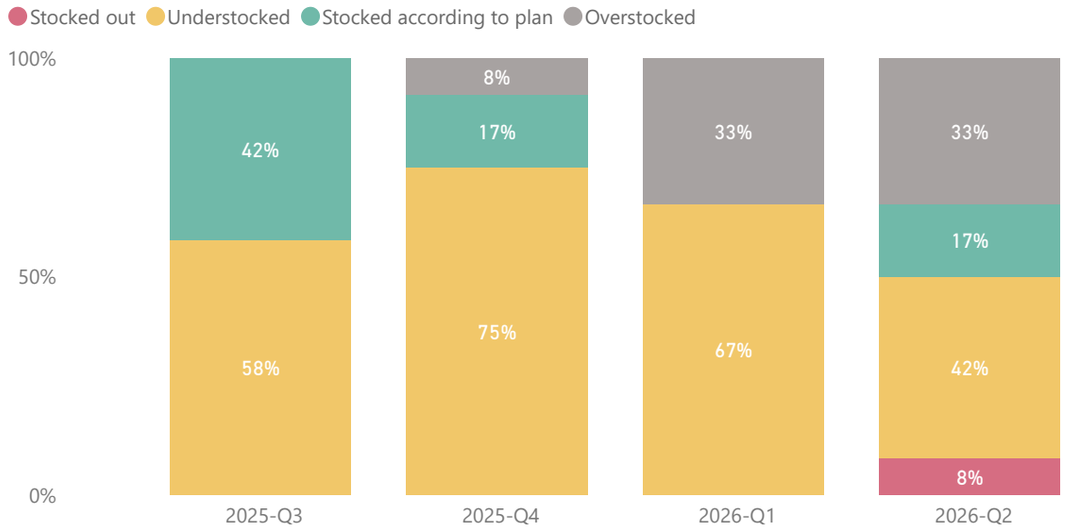
Reporting rates increased for both supported facilities (83 percent) and non-supported facilities (91 percent). Reporting timelines also greatly improved, with almost all facilities submitting their reports by or within one week of the deadline. GHSC-PSM provided support to ARV sites during report compilation and uploads and DPS made efforts to replace staff lost during the Stop Work Order at ARV 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

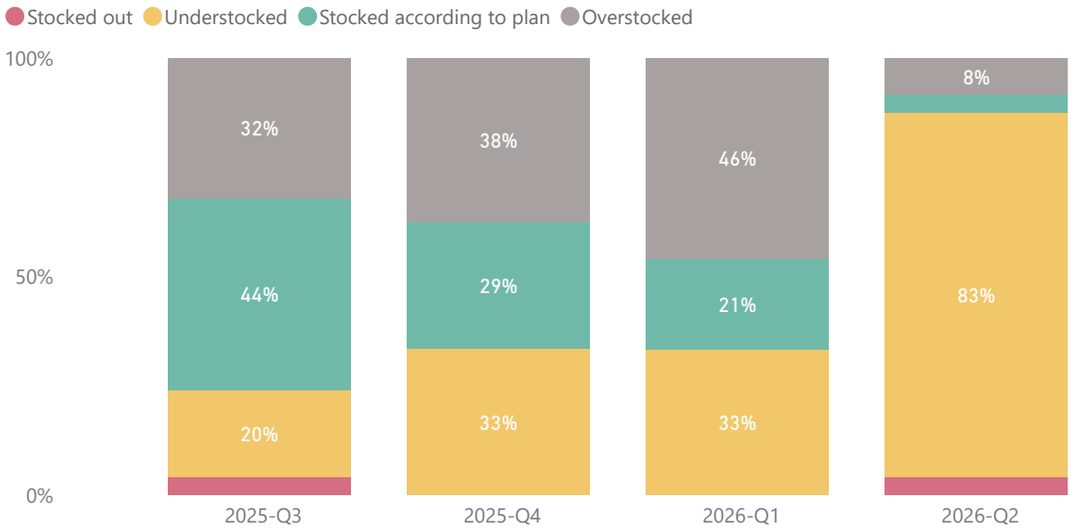
Country: Namibia | Current Quarter: 2026-Q2 | Tracer Product: All

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 %

Ref	Analysis
B2	Stock status observations at the central level continue to be understocked for pediatric ARVs during the transition to pALD. New stock was received for 2nd line ARVs, resulting in overstocked status, while 1st line ARVs are stocked according to plan. New stock was also received for 2nd RTKs (overstocked), however, both observations for 1st RTKs were understocked and tie-breaker RTK observations were understocked or stocked out; there have been challenges in procurement for RTKs. Stock status observations at the subnational level have shifted to almost all being understocked. There were 2 overstocked observations of 2nd line ARVs and 1 stocked according to plan observation of 2nd RTKs.
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: Namibia

Current Quarter: 2026-Q2

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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**3.5%**	**114**
HIV-"Tie-breaker" RTK	5.3%	19
HIV-First RTK	5.3%	19
HIV-Most used 1st line ARV	0.0%	19
HIV-Most used 1st line pediatric ARV	0.0%	19
HIV-Most used 2nd line ARV	5.3%	19
HIV-Second RTK	5.3%	19
Overall	**3.5%**	**114**

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	83%	23

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**17%**	**33%**	**42%**	**8%**	**12**
HIV/AIDS	17%	33%	42%	8%	12
Subnational level 1	**4%**	**8%**	**83%**	**4%**	**24**
HIV/AIDS	4%	8%	83%	4%	24
Overall	**8%**	**17%**	**69%**	**6%**	**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 2
January - March 2026

Country M&E Indicator Performance

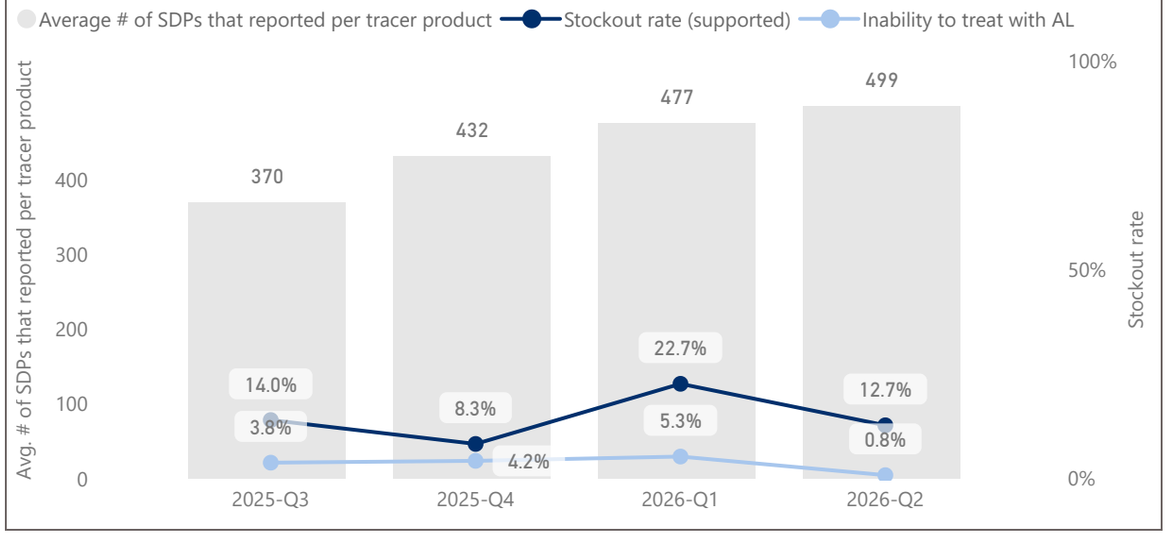
Country

Niger

Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Niger | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



Data source

DHIS2 February 2026

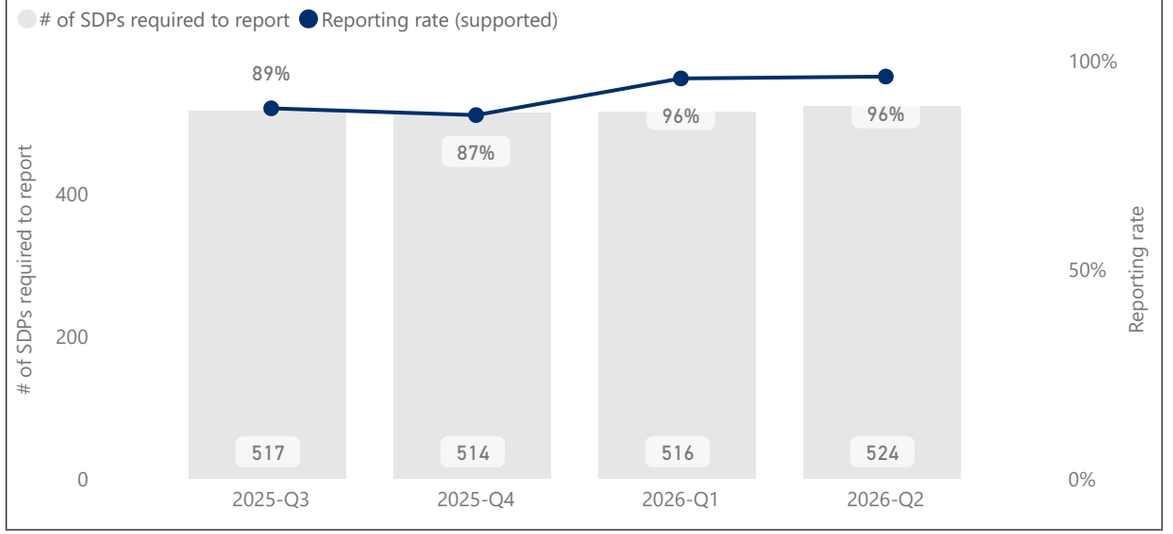
Analysis

The January–March 2026 reporting period coincides with the onset of the low malaria transmission season, during which demand for malaria commodities typically declines. In line with seasonal demand patterns, the overall stockout rate for malaria tracer products declined from 22.7 percent in FY 2026 Q1 to 12.7 percent in FY 2026 Q2.

The inability to treat malaria with an AL formulation declined from 5.3 percent in FY 2026 Q1 to 0.8 percent in FY 2026 Q2. However, stockout rates for individual products ranged from 3 percent for RDTs to 37 percent for AL 6x3, largely due to multiple constraints within the supply chain. For example, LLIN stockouts are driven by funding constraints, as U.S. Government procurement ceased in 2023 following increased air freight costs.

GHSC-PSM will continue to support the National Malaria Control Program to refine distribution planning and strengthen alignment between allocated quantities, estimated needs, and available stock. Quarterly supportive supervision will be maintained to consolidate gains and proactively mitigate stockout risks.

B3. LMIS reporting rate



B3. Data Source (denominator)

DHIS2 February 2026

B3. Data Source (numerator)

DHIS2 February 2026

Analysis

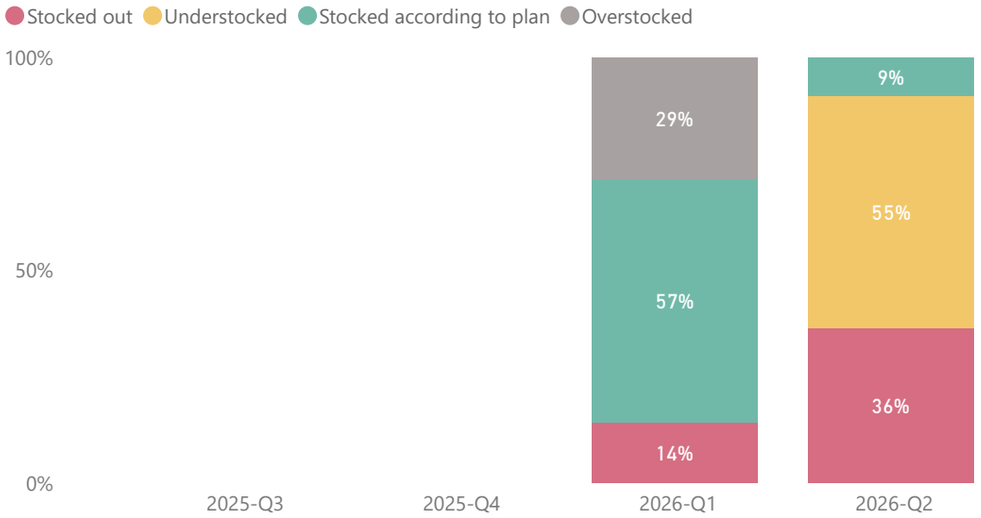
Out of 524 expected SDPs, 504 submitted their LMIS reports, maintaining a reporting rate of 96 percent across all 21 districts in the two project focus regions between FY 2026 Q1 and FY 2026 Q2. This performance is attributable to regular follow-up on LMIS report submission and completeness conducted by the 12 GHSC-PSM district logistics officers. GHSC-PSM will continue to support districts to sustain high LMIS reporting completeness and will establish operational KPIs at the district level to enable districts to monitor performance over time.

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

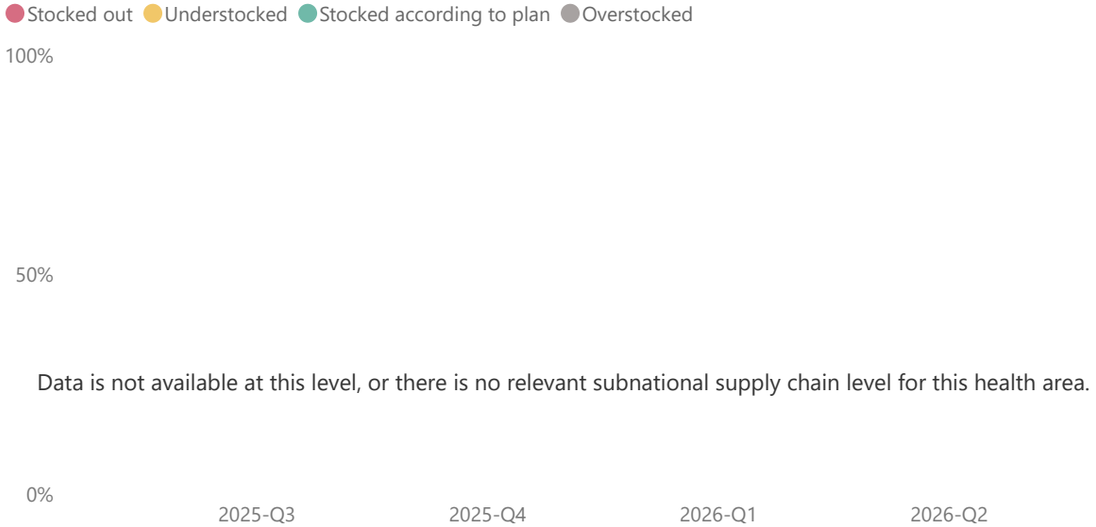
Country: Niger | Current Quarter: 2026-Q2 | Tracer Product: All

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 %

Ref	Analysis
B2	The Project and NMCP rely on inputs from the QAT tool to analyze stock status at the central level. The proportion of commodities stocked according to plan declined from 57 percent in FY 2026 Q1 to 9 percent in FY 2026 Q2. Over the same period, the proportion of understocked products increased from zero to 55 percent, while 36 percent of commodities were stocked out in FY 2026 Q2. Products that were understocked included AL 6x2, AL 6x3, AL 6x4, SP, and RDTs. These declines in stock levels were anticipated and reflect the implementation of planned distributions from the central level to peripheral levels during the quarter. Replenishments are expected in FY 2026 Q3 through planned shipments from the USG and the Global Fund. GHSC-PSM will continue to support the NMCP in strengthening the use of QAT, particularly through improved shipment tracking and more regular stock data updates. Support will also be maintained at the district level to improve DHIS2 data quality and strengthen validation of health facility orders, thereby reducing the risk of under-allocation.
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-Q2

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 Q2 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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
Malaria	**12.7%**	**3,494**
Malaria-First line ACT (AL 6x1)	11.7%	495
Malaria-First line ACT (AL 6x2)	10.8%	498
Malaria-First line ACT (AL 6x3)	36.9%	498
Malaria-First line ACT (AL 6x4)	14.0%	499
Malaria-LLINs	8.8%	498
Malaria-Rapid diagnostic test for malaria	2.8%	506
Malaria-Sulphadoxine-pyrimethamine	4.2%	500
Overall	**12.7%**	**3,494**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.8%	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%	524

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**9%**		**55%**	**36%**	**11**
Malaria	9%		55%	36%	11
Overall	**9%**		**55%**	**36%**	**11**

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 2
January - March 2026

Country M&E Indicator Performance

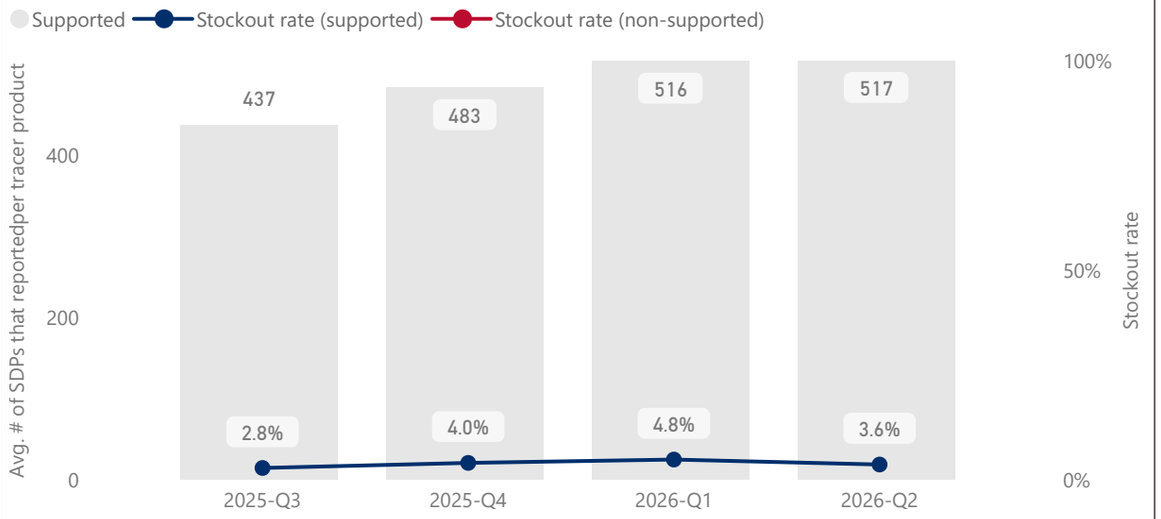
Country

Nigeria

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Nigeria | Current Quarter: 2026-Q2 | Tracer Product: All

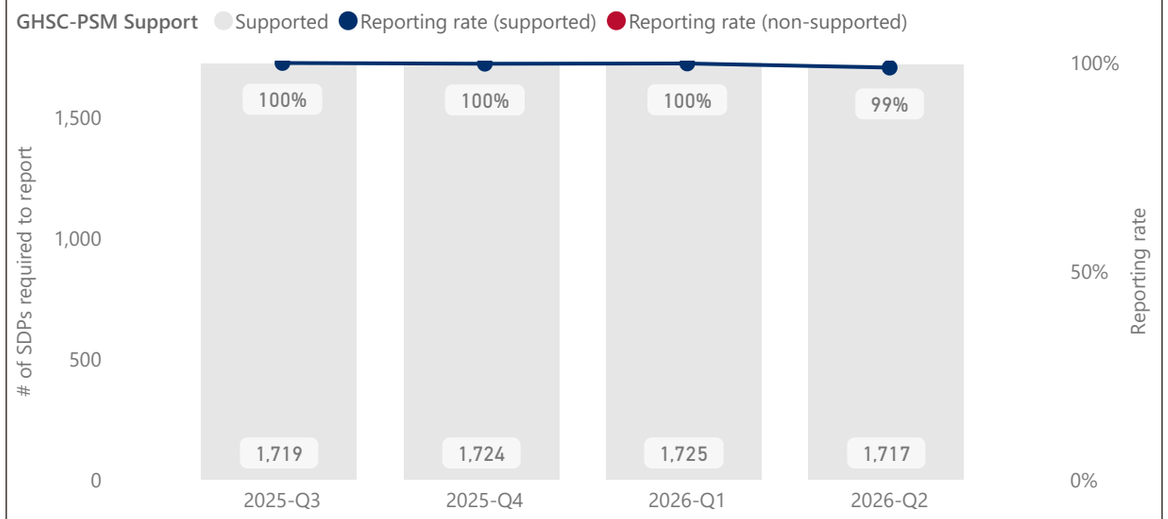
B1. Stockout rate at service delivery points



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 3.6 percent. This improvement was driven primarily by reductions in stockouts of first-, second-, and tie-breaker RTKs, which together fell from 13.4 percent in Q1 FY2026 to 7.2 percent in Q2 FY2026. Stockout rates for first-line and second-line adult ARV and pediatric ARV regimens remained consistently low at a combined 2.9 percent. Overall, these trends indicate sustained stability in ARV supply chains and continued reliable access to treatment for clients. The most used pediatic ARV shifted from Abacavir/Lamivudine 120/60 mg Scored Dispersible Tablet to Abacavir/Lamivudine/Dolutegravir 60mg/30mg/5mg this quarter.

Analysis

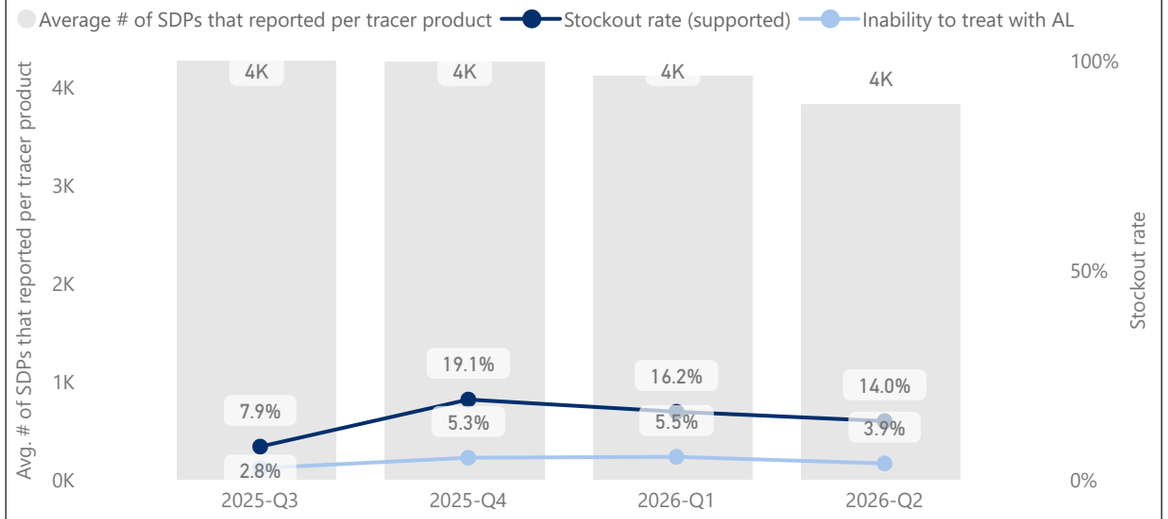
The reporting rate for HIV/AIDS commodity sites decreased to 99 percent this quarter.

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

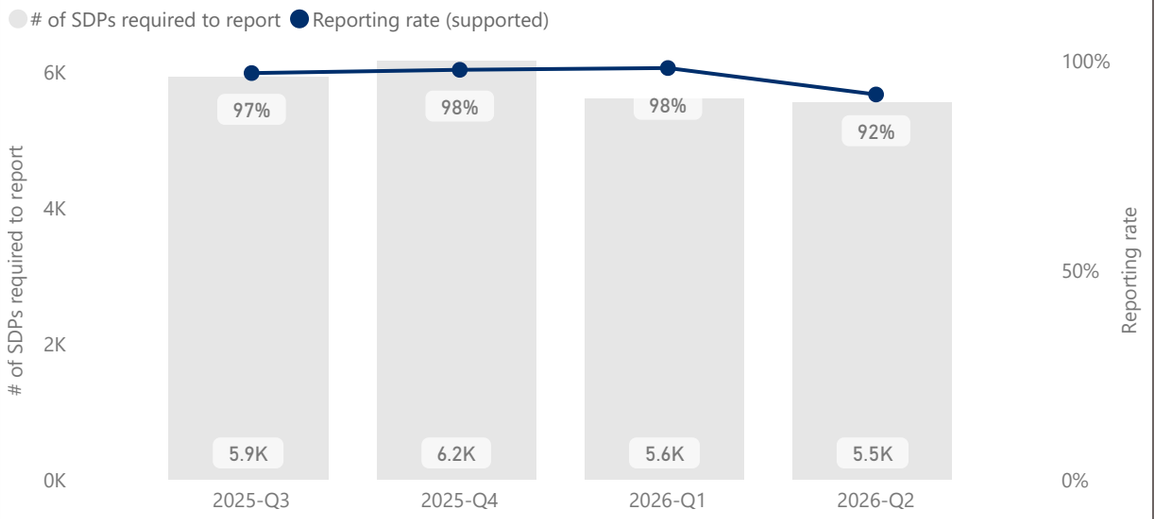
Service Delivery Point Stockouts and Reporting Rates Malaria

Country: Nigeria | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



B3. LMIS reporting rate



Data source
NHLMIS

B3. Data Source (denominator)	B3. Data Source (numerator)
NHLMIS	NHLMIS

Analysis

This quarter saw a decrease in the facility stockout rate for malaria commodities, from 16.2 to 14.0 percent, while the rate of "inability to treat" decreased to 3.9 percent. Stockouts of AL 6x4 had the largest increase in from 11.5 to 31.4 percent, while all other AL presentation combined stockout rate declined from 11.7 percent to 9.5 percent. RDT stockouts had the largest decrease from 32.4 to 7.7 percent.

Analysis

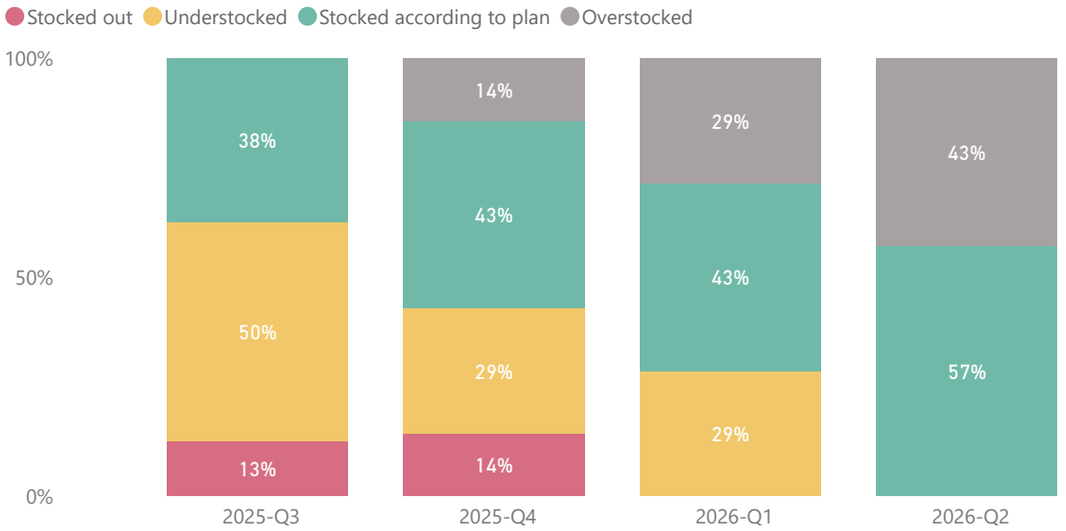
The reporting rate for malaria commodity sites decreased to 92 percent this quarter.

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-Q2 | 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	Essential Medicines,HIV Rapid Test Kits (RTKs),HIV/AIDS Pharmaceuticals	$5,182	$28,581,259	0.02%
Central	Storage	Expiry	HIV/AIDS commodities	$4,569	$28,581,259	0.02%

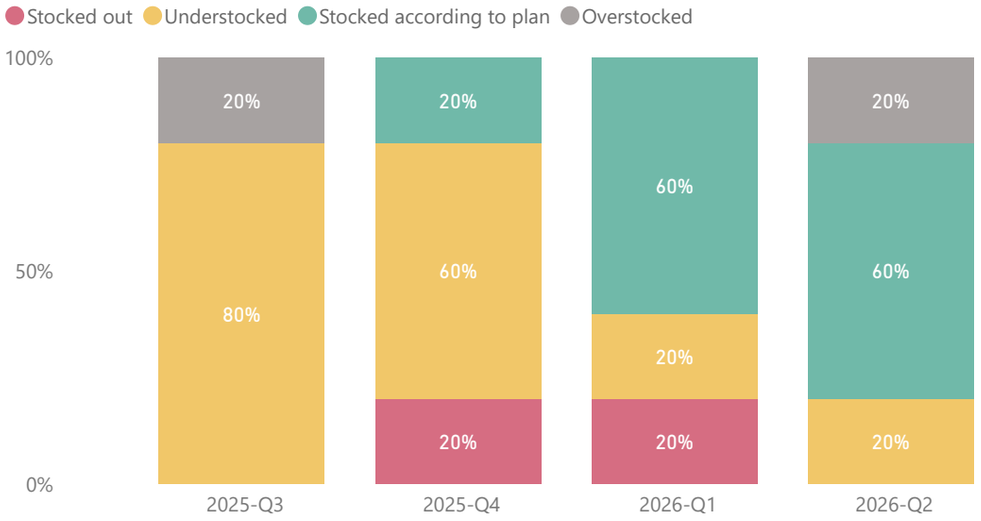
Ref	Analysis
B2	Stocks of HIV/AIDS commodities at the central warehouse have stabilized slightly since last quarter, with no warehouses recording stockouts. Items stocked according to plan increased to 57 percent. Overstock increased from 29 percent to 43 percent this quarter. HIV first RTKs moved from understocked to stocked according to plan. HIV second RTKs moved from understocked to overstocked this quarter.
C7	This quarter, a central warehouse in Abuja had $4,569 worth of expiries. Temperature excursions were observed at the Calabar Private Warehouse managed by DP World. The total value of damaged goods is USD $5,182.04

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

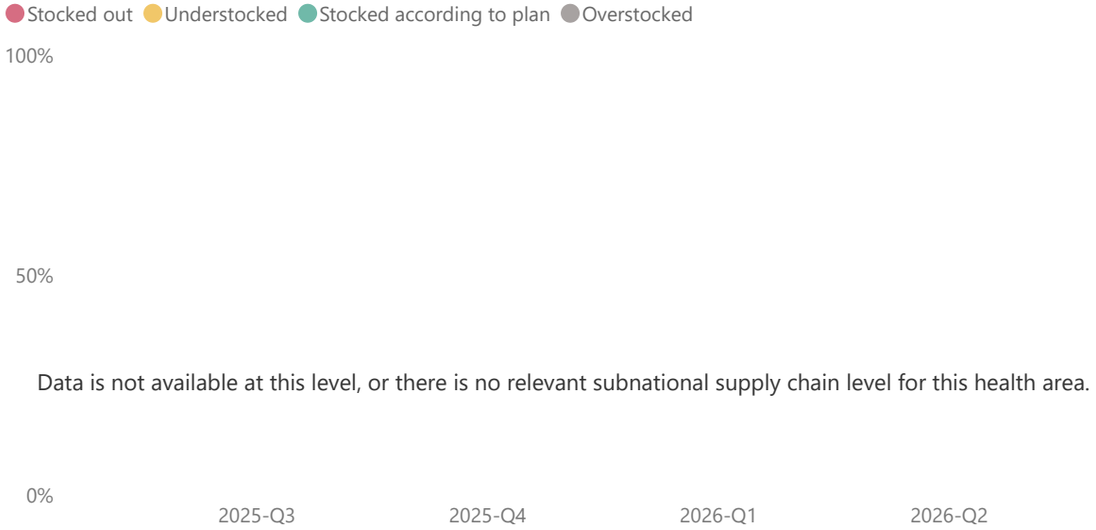
Country: Nigeria | Current Quarter: 2026-Q2 | Tracer Product: All

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 %
Subnational Level 1	Transit	Other	LLIN	$15,255	$8,580,193	0.18%

Ref	Analysis
B2	This quarter, the proportion of commodities stocked according to plan remained steady at 60 percent. Stocks of AL 6x4 shifted from being stocked out last quarter to overstocked, with 9.8 months of stock reported at the end of March 2026. This change drove the overstock rate to increase to 20 percent, up from 0 percent in the previous quarter.
C7	The truck conveying these nets had several challenges and had to transload to another truck, hence it was found that $15,255 worth of nets was not accounted for as at the time the truck got to the state warehouse.

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-Q2

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 five 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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**3.6%**	**4,651**
HIV-"Tie-breaker" RTK	9.7%	227
HIV-EID reagent	6.5%	107
HIV-First RTK	0.4%	258
HIV-Most used 1st line ARV	0.6%	1,680
HIV-Most used 1st line pediatric ARV	4.0%	1,357
HIV-Most used 2nd line ARV	6.0%	752
HIV-Second RTK	11.8%	255
HIV-Viral load consumable	0.0%	7
HIV-Viral load reagent	0.0%	8
Malaria	**14.0%**	**26,721**
Malaria-First line ACT (AL 6x1)	11.9%	4,490
Malaria-First line ACT (AL 6x2)	7.7%	4,677
Malaria-First line ACT (AL 6x3)	9.0%	4,593
Malaria-First line ACT (AL 6x4)	31.4%	4,033
Malaria-LLINs	20.4%	1,347
Malaria-Rapid diagnostic test for malaria	7.7%	4,822
Malaria-Sulphadoxine-pyrimethamine	19.1%	2,759
Overall	**12.5%**	**31,372**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	3.9%	4,783

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%	1717
Malaria	92%	5547

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**58%**	**33%**	**8%**		**12**
HIV/AIDS	57%	43%			7
Malaria	60%	20%	20%		5
Overall	**58%**	**33%**	**8%**		**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 2
January - March 2026

Country M&E Indicator Performance

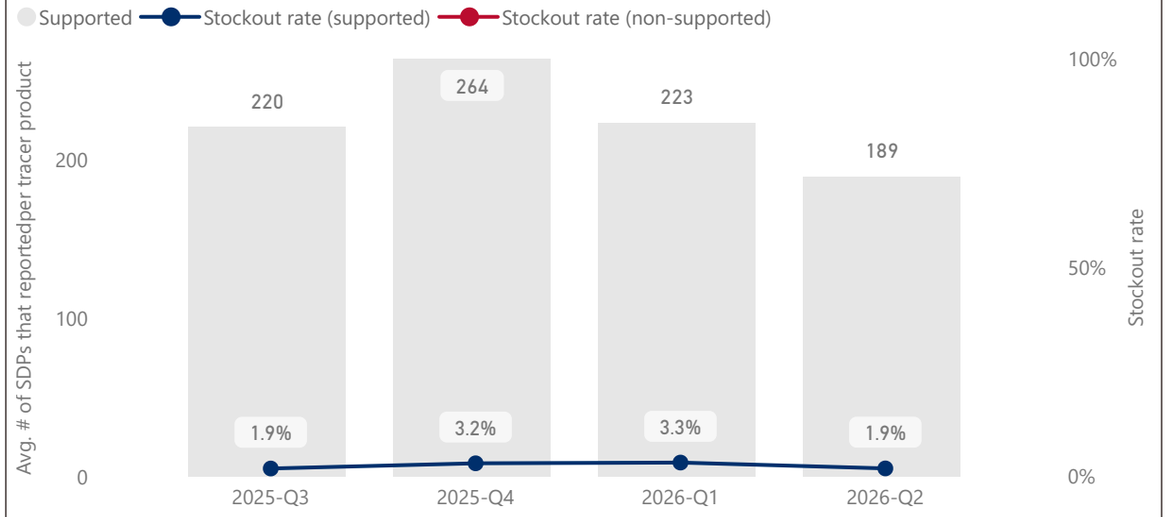
Country

Rwanda

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Rwanda | Current Quarter: 2026-Q2 | Tracer Product: All

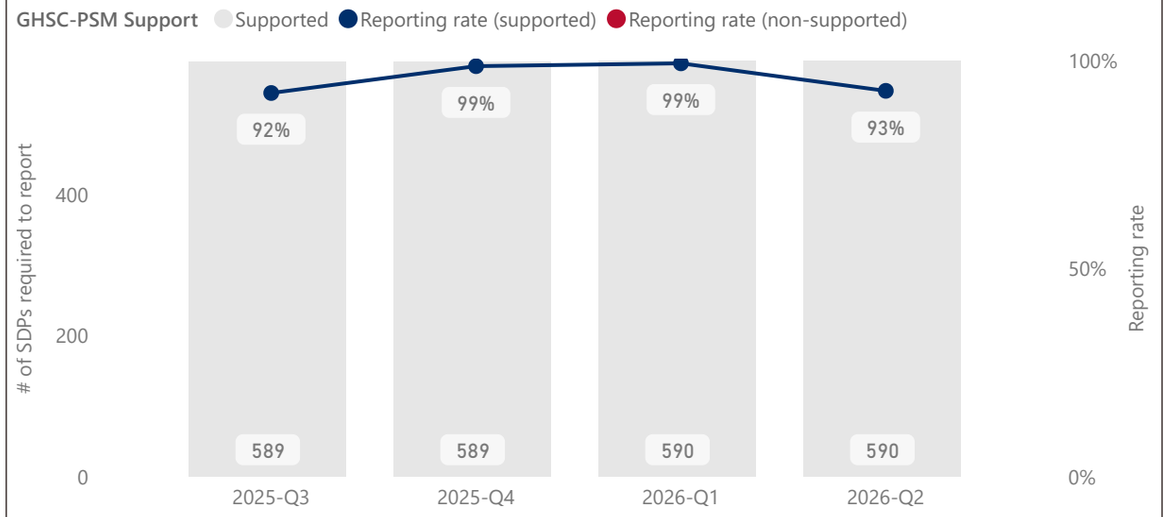
B1. Stockout rate at service delivery points



Data source

eLMIS

B3. LMIS reporting rate



B3. Data Source (denominator)

eLMIS

B3. Data Source (numerator)

eLMIS

Analysis

The stockout rate for HIV/AIDS products decreased slightly to 1.9 percent, down from 3.3 percent in the previous quarter. Both EID reagent and consumable drove the decrease, reporting no stockouts this quarter compared to 8.3 percent of facilities in the preceding quarter. There was also a small increase in stockout rates for first-line pediatric ARVs, increasing to 4.9 percent from 3.0 percent in the previous quarter.

Analysis

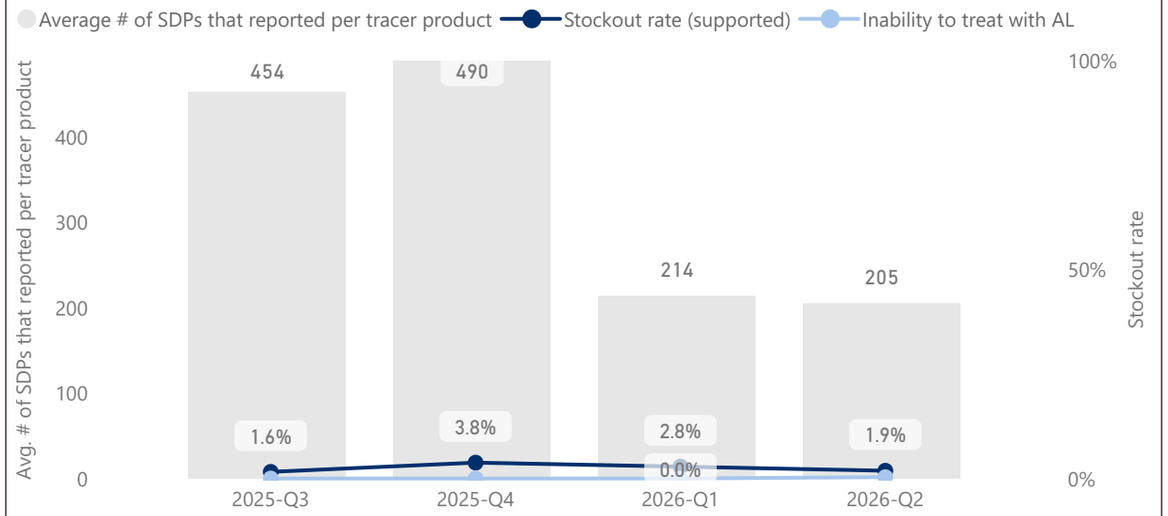
The average reporting rate for SDPs to e-LMIS has decreased this quarter to 93 percent from 99 percent in the preceding quarter. There has been a decrease in the number of facilities reporting this quarter, on average, primarily due to reporting challenges that have emerged due to SDPs transitioning from e-LMIS to e-Ubuzima.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



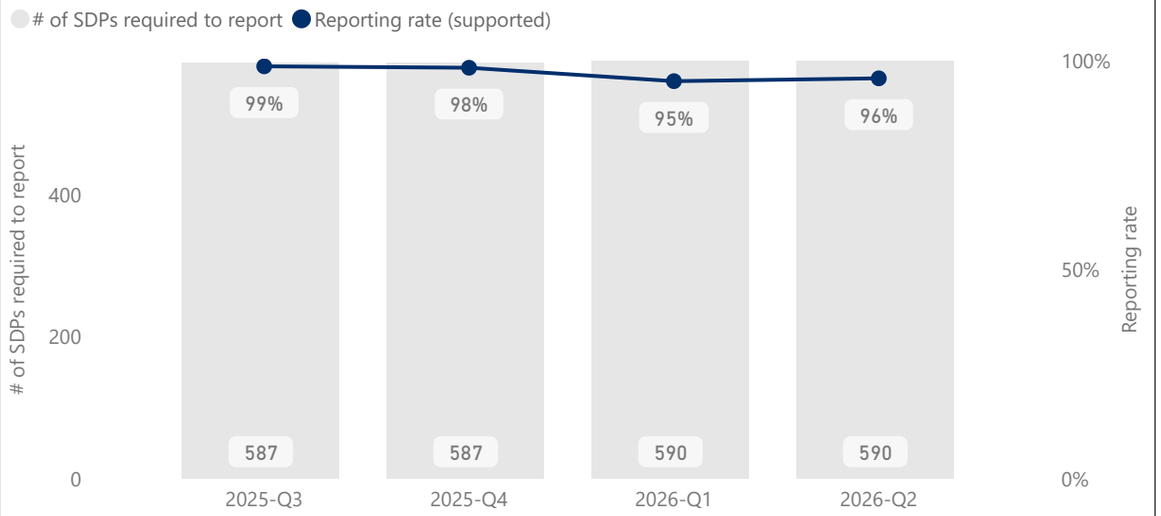
Data source

eLMIS

Analysis

The stockout rate for malaria products decreased slightly from 2.8 percent in the previous quarter to 1.9 percent in the current quarter. DHA-PPQ 40mg/320mg (3 tabs) was the primary driver, decreasing from 22.9 percent in the previous quarter to 3.3 percent in the current quarter. All first line ACT presentations had a stockout rate of less than 3.5 percent with almost all below 3 percent.

B3. LMIS reporting rate



B3. Data Source (denominator)

eLMIS

B3. Data Source (numerator)

eLMIS

Analysis

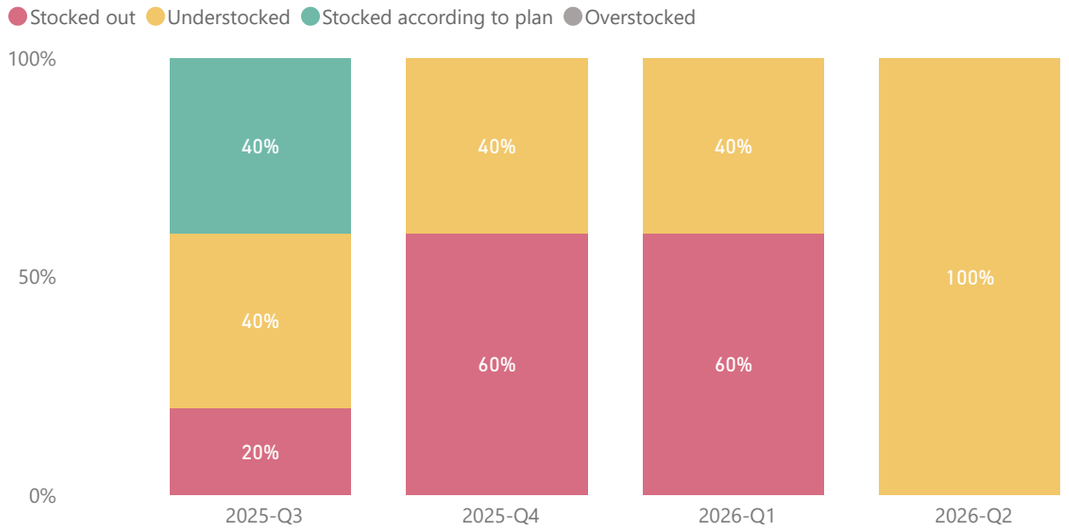
The average reporting rate for malaria products increased slightly to 96 percent from 95 percent in the previous quarter. Reporting rates for malaria products has been stable over the preceding three quarters.

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

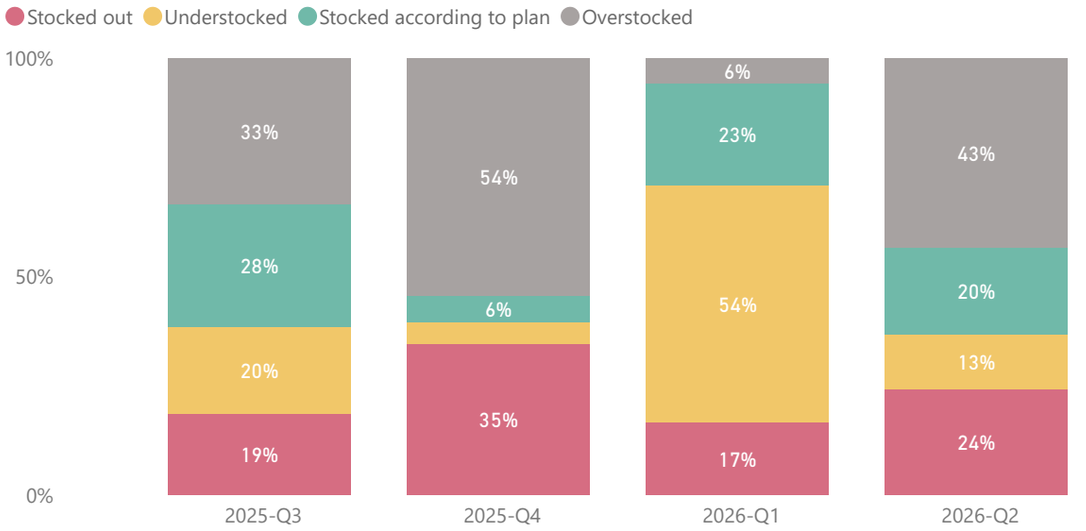
Country: Rwanda | Current Quarter: 2026-Q2 | Tracer Product: All

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	eLMIS

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 %

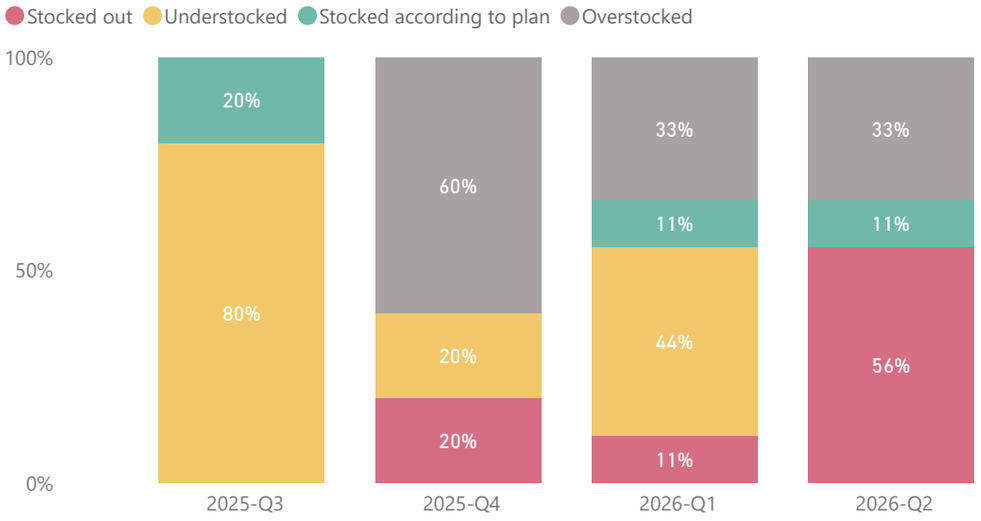
Analysis is provided for the current quarter only. Please refer to previous reports for analysis of earlier periods.

Ref	Analysis
B2	The stock status at the central level for HIV/AIDS products improved, with 100 percent of products reporting as understocked; a marked improvement from 60 percent of products reporting a central level stockout in the preceding two quarters. The stock situation has worsened at the subnational 1 level, with the stockout rate increasing to 24 percent from 17 percent in the previous quarter and the stocked according to plan rate decreasing from 23 percent to 20 percent this quarter. Overstocked oberservations have also jumped significantly, rising to 43 percent from just 6 percent in the previous quarter. The primary challenge contributing to these stock levels is limited funding for commodity procurement. In addition, RMS Central is implementing a policy to push stock to regional warehouses to optimize storage space, which contributed to increased overstock observations to the subnational level for some commodities during this quarter.
C7	There was no product loss to report this quarter.

Warehouse stock status and product losses
Malaria

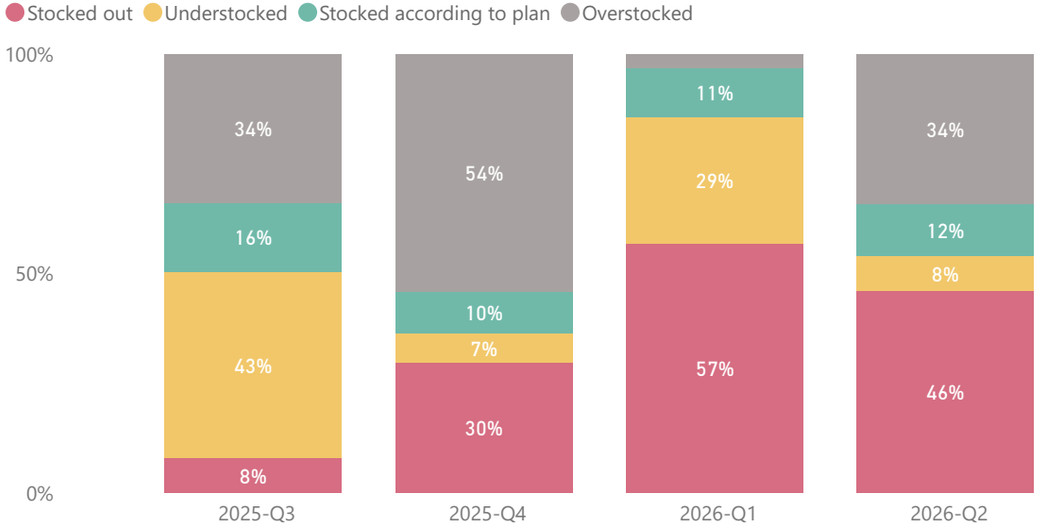
Country: Rwanda | Current Quarter: 2026-Q2 | Tracer Product: All

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	eLMIS

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	During FY26 Q2, the stocked according to plan rate for malaria commodities remained unchanged at 11 percent. However the stockout rate has dramatically increased from 11 percent in the preceding quarter to 56 percent this quarter. All formulations of DHA-PPQ and AL 6x3 are stocked out at central level. At the subnational 1 level, the stock situation has improved slightly with stockout rates decreasing from 57 percent in the previous quarter to 46 percent in the current quarter. Stocked according to plan rates have largely remained stable, increasing just one percentage point to 12 percent this quarter. Understocked rates have decreased to 8 percent from 29 percent in the previous quarter while overstocked rates have increased from 3 percent in the previous quarter to 34 percent in the current quarter. RMS Central is implementing a policy to push stock to regional warehouses to optimize storage space, which contributed to increased overstock observations to the subnational for some commodities during this quarter.
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: Rwanda

Current Quarter: 2026-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**1.9%**	**1,704**
HIV-EID consumable	0.0%	48
HIV-EID reagent	0.0%	48
HIV-First RTK	2.2%	314
HIV-Most used 1st line ARV	1.2%	501
HIV-Most used 1st line pediatric ARV	4.9%	185
HIV-Most used 2nd line ARV	2.0%	344
HIV-Second RTK	1.7%	236
HIV-Viral load consumable	0.0%	14
HIV-Viral load reagent	0.0%	14
Malaria	**1.9%**	**2,095**
Malaria-First line ACT (AL 6x1)	1.4%	211
Malaria-First line ACT (AL 6x2)	1.4%	290
Malaria-First line ACT (AL 6x3)	2.3%	298
Malaria-First line ACT (AL 6x4)	1.6%	309
Malaria-First line ACT (ASPY 180/60mg, 9 tabs)	0.5%	196
Malaria-First line ACT (ASPY 60/20mg, 3 sachets)	1.2%	170
Malaria-First line ACT (DHA-PPQ 20mg/160mg 3 tabs)	3.4%	87
Malaria-First line ACT (DHA-PPQ 40mg/320mg 3 tabs)	3.3%	92
Malaria-Rapid diagnostic test for malaria	2.7%	442
Overall	**1.9%**	**3,799**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	0.3%	309

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%	590
Malaria	96%	590

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**7%**	**21%**	**36%**	**36%**	**14**
HIV/AIDS			100%		5
Malaria	11%	33%		56%	9
Subnational level 1	**16%**	**39%**	**10%**	**35%**	**246**
HIV/AIDS	20%	43%	13%	24%	120
Malaria	12%	34%	8%	46%	126
Overall	**15%**	**38%**	**12%**	**35%**	**260**

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 2
January - March 2026

Country M&E Indicator Performance

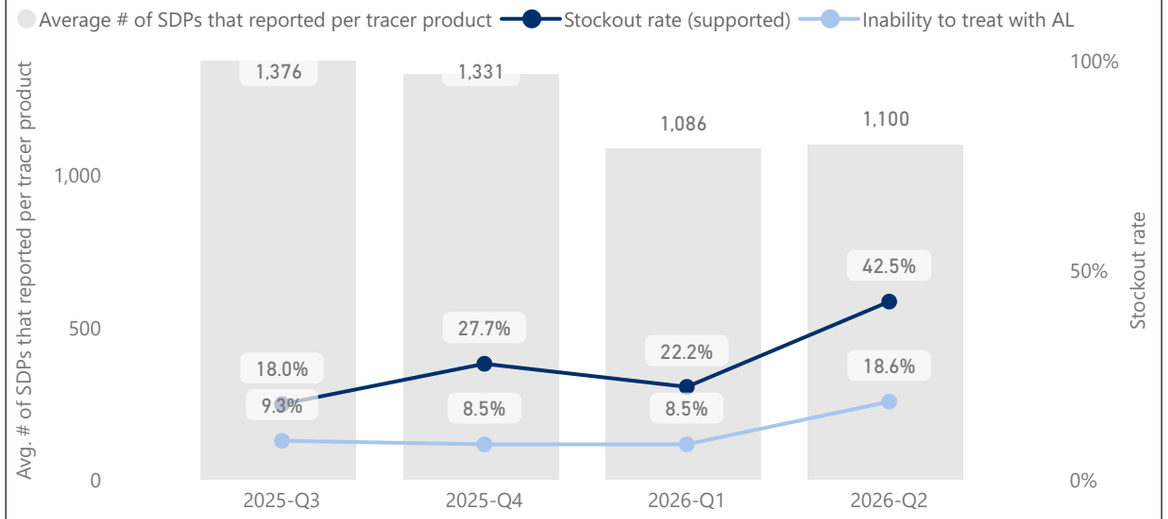
Country

Sierra Leone

Service Delivery Point Stockouts and Reporting Rates
Malaria

Country: Sierra Leone | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



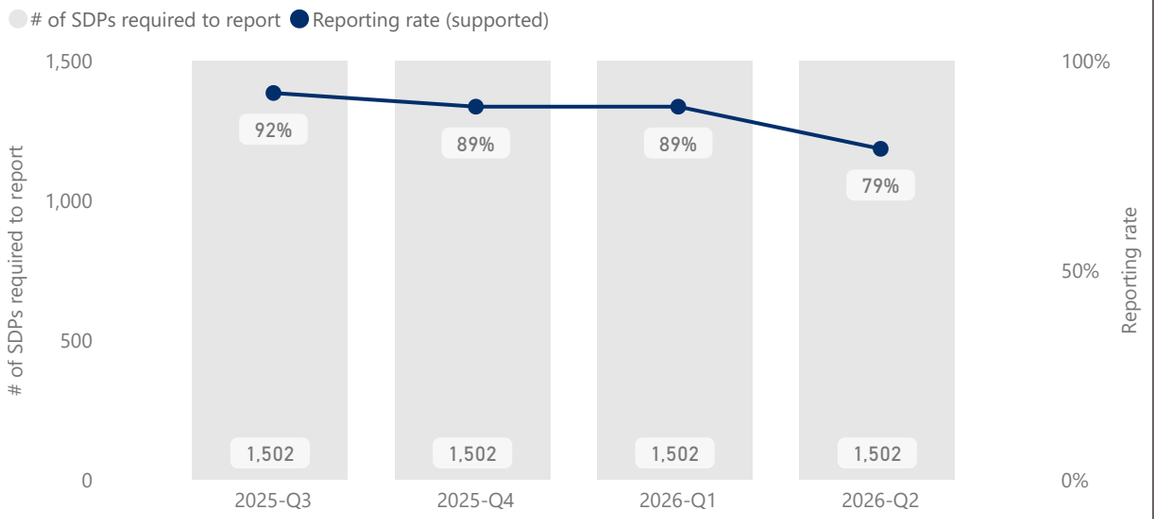
Data source

LMIS Data for JANUARY 2026

Analysis

In FY2026 Q2, the stockout rate of malaria products increased to 42.5 percent, and the AL inability to treat rate increased to 18.6 percent. The stockout rate for all ALs increased, with the highest stockout rate being AL 6x4 at 47 percent, and the lowest AL stockout rate being AL 6x1 at 25.9 percent. MRDT and LLIN stockouts also increased this quarter, to 47.6 percent and 29.5 percent, respectively. SP saw a consistent stockout rate at 85.4 percent from last quarter's 87.4 percent. This increase in stockouts across all products except SP was primarily driven by challenges in replenishment during the district to health facility distribution, as well as delays in distribution from the central level to districts. Fewer SDPs reported this quarter than in FY2025 Q3 and Q4, largely due to the continued absence of a District Information Officer in one of the largest districts, resulting in missing data entry during the period; however, the officer has been recruited and reporting rates are expected to rise. NMCP will follow-up with non-compliant districts to investigate and correct distribution anomalies, strengthening last-mile monitoring to ensure compliance with buffer stock policies, and include distribution compliance as a performance indicator in quarterly reviews. The MoH will continue replenishment of commodities, providing clearer interim guidance, improved data validation, and engagement with district teams.

B3. LMIS reporting rate



B3. Data Source (denominator)

LMIS Data for October 2025

B3. Data Source (numerator)

LMIS Data for October 2025

Analysis

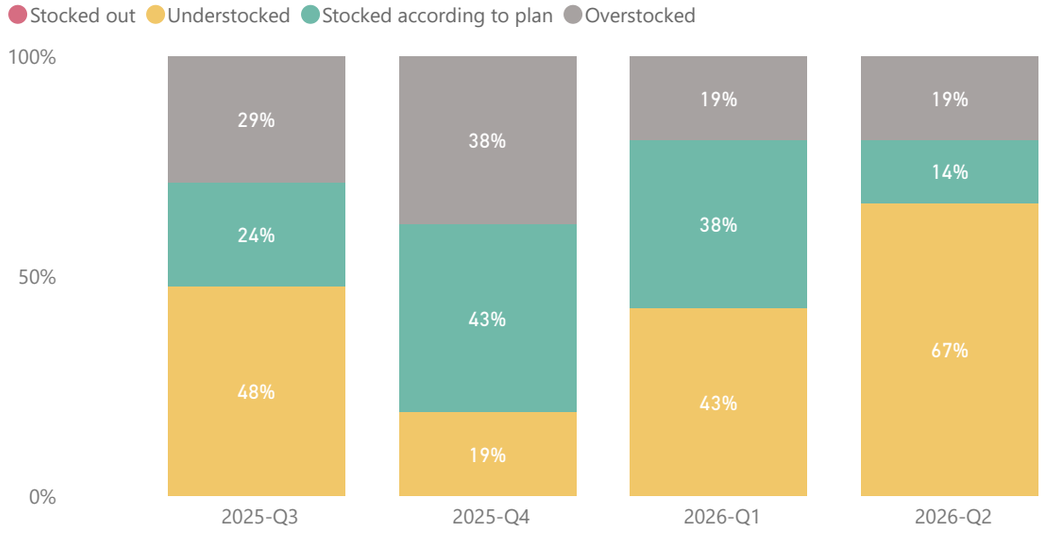
The LMIS reporting rate this quarter decreased to 79 percent, primarily attributed to one of the largest districts not reporting since October due to the District Information Officer being unavailable to enter data into DHIS2. The officer has now been recruited and has recommended to enter all backlog LMIS data covering the period of non-reporting starting in October 2025 to ensure data completeness and continuity. Reporting rates are expected to rise in coming 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
Malaria

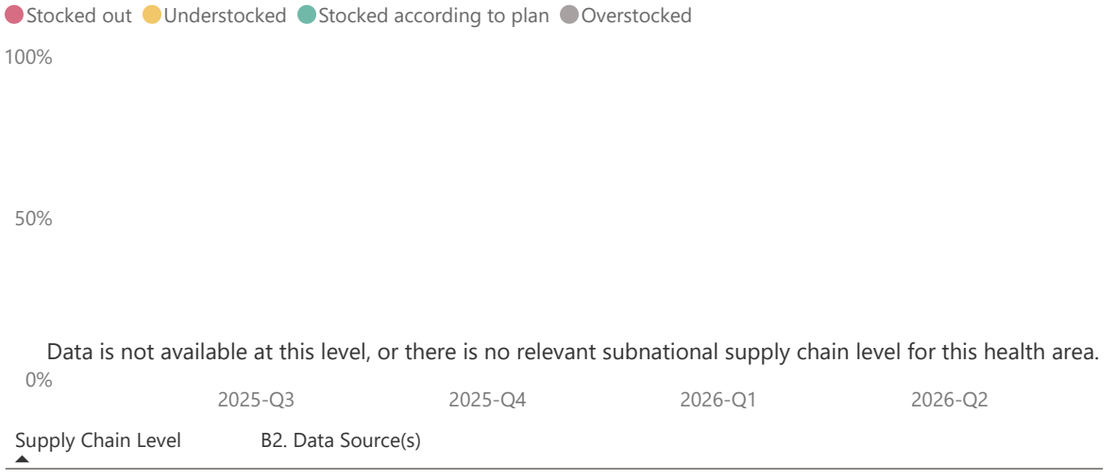
Country: Sierra Leone | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	QAT Data for DeC_2025, JAN_2026 AND FEB_2026

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



Supply Chain Level	B2. Data Source(s)

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	Stock statuses at the central level have shifted this quarter to having higher rates of products understocked, at 67 percent, following an increase in understocks over the past few quarters. Products stocked according to plan decreased to 14 percent, while overstocked products remained consistent at 19 percent. There were no stockouts observed. AL 6x1, AL 6x2, and AL 6x3 were each stocked according to plan in one observation of three this quarter, and AL 6x4 was entirely understocked. MRDTs and LLINs were also entirely understocked, while SP was mostly overstocked. This rapid increase in understocks this quarter was primarily driven by uneven distribution practices, whereby facilities received uniform quantities of commodities regardless of their consumption patterns. As a result, some facilities experienced stockouts while others retained excess stock, indicating a predominance of a push-based rather than pull-based commodity distribution system. To rectify this, key interventions include continued improvement in forecasting accuracy, strengthened coordination among stakeholders, enhanced communication regarding donor related delays, and the timely distribution and redistribution of commodities. Regular monitoring, supportive supervision, and data driven decision making remain essential to improving supply chain efficiency and resilience. In collaboration with the Ministry of Health through the Directorate of Pharmaceutical Services (DPS), leadership under the Chief Medical Officer has mandated district level medical stores to submit weekly stock status reports. This initiative aims to enable real time, national level tracking of malaria commodity availability and to support prompt supply chain decision making.
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: Sierra Leone

Current Quarter: 2026-Q2

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 malaria supply plan was not created and submitted this quarter, due to delayed March 2026 LMIS data input into the DHIS2 at the district level, needed before finalizing the supply plan.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q3	2025-Q4	2026-Q1	2026-Q2
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: Sierra Leone

Current Quarter: 2026-Q2

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

Health Area	Stockout rate	# SDP stock observations
Malaria	**42.5%**	**7,698**
Malaria-First line ACT (AL 6x1)	25.9%	1,185
Malaria-First line ACT (AL 6x2)	43.2%	1,185
Malaria-First line ACT (AL 6x3)	39.6%	1,187
Malaria-First line ACT (AL 6x4)	47.0%	1,186
Malaria-LLINs	29.5%	1,171
Malaria-Rapid diagnostic test for malaria	47.6%	1,173
Malaria-Sulphadoxine-pyrimethamine	85.4%	611
Overall	**42.5%**	**7,698**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	18.6%	1,186

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	79%	1502

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**14%**	**19%**	**67%**	**0%**	**21**
Malaria	14%	19%	67%	0%	21
Overall	**14%**	**19%**	**67%**	**0%**	**21**

B6. Quarterly supply plan updates

Product Group	# of supply plans required	# submitted
Malaria commodities	1	0

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 2
January - March 2026

Country M&E Indicator Performance

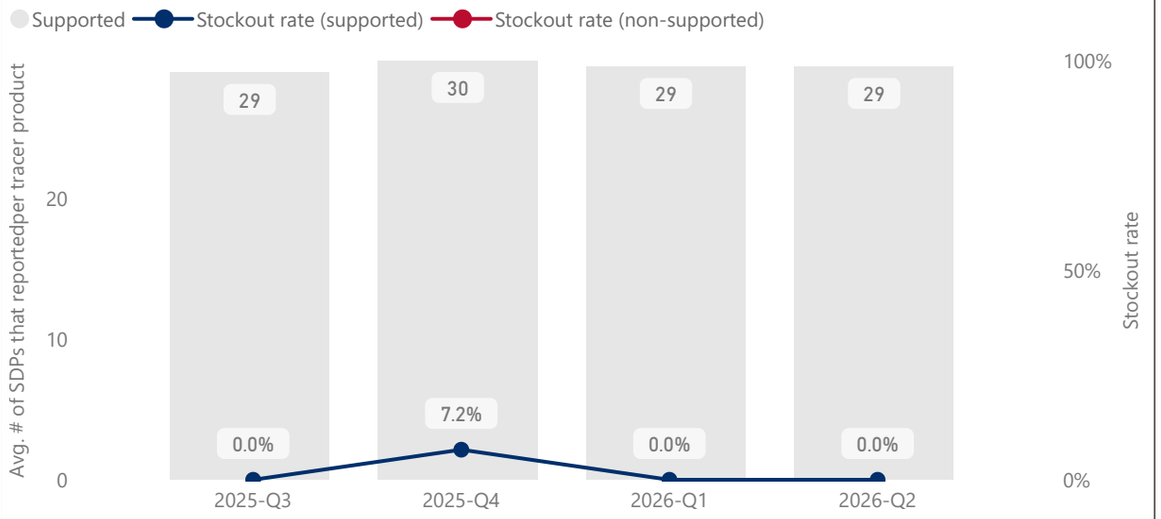
Country

Togo

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Togo | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



Data source

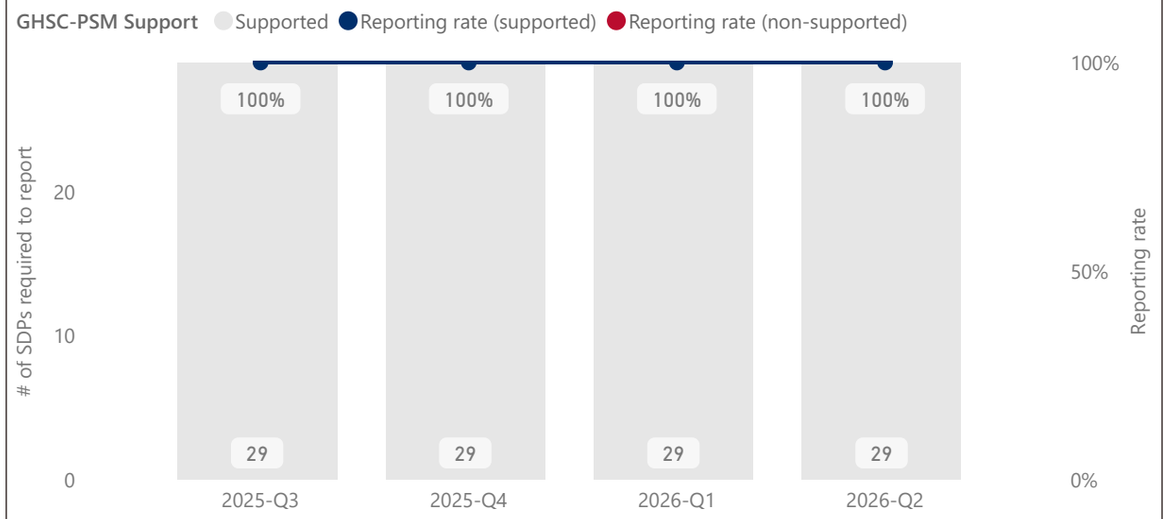
Stock monitoring Dashboard

Analysis

Similar to FY 2026 Q1 performance, no stockouts of HIV/AIDS commodities monitored by the project were recorded in FY 2026 Q2. As in the previous quarter, first-line adult ARVs, second-line adult ARVs, and pediatric first-line ARVs remained available at all 29 reporting sites in FY 2026 Q2. In addition, first and second RTKs recorded zero stockout rates across all reporting SDPs.

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, combined with timely adjustments informed by consumption trends, further reduced the risk of shortages and ensured uninterrupted commodity availability at SDPs.

B3. LMIS reporting rate



B3. Data Source (denominator)

Stock monitoring dashboard

B3. Data Source (numerator)

Stock monitoring dashboard

Analysis

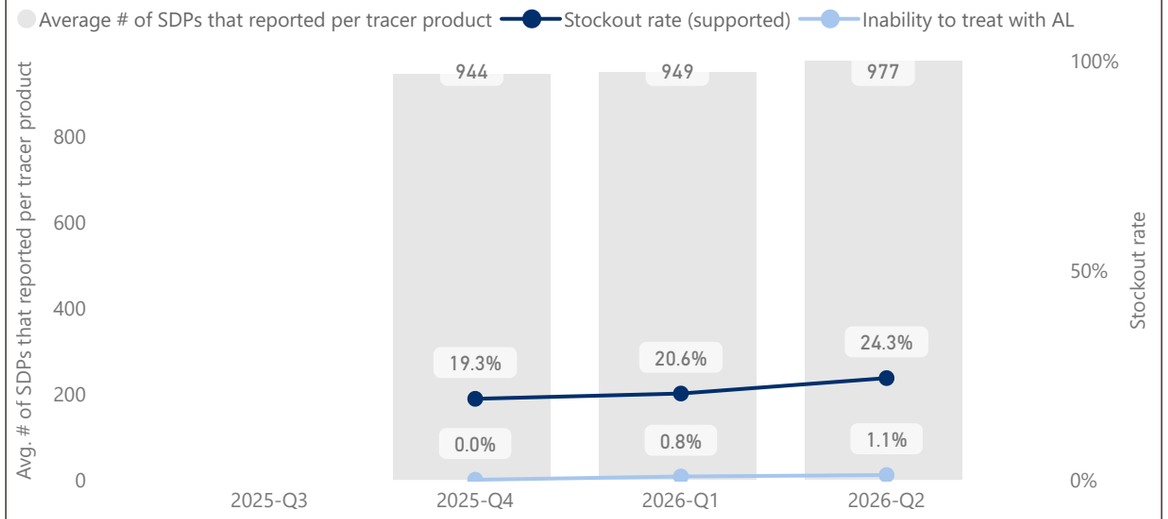
In FY 2026 Q2, the SDP reporting rate to the LMIS for HIV/AIDS was 100 percent, consistent with the results of the previous quarters (FY 2026 Q1 and FY 2025 Q4). All PEPFAR-supported health facilities reported logistics data, enabling effective monitoring of HIV commodities availability. This consistent and complete reporting supports efficient distribution planning and reflects strong coordination within the reporting system.

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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



Data source

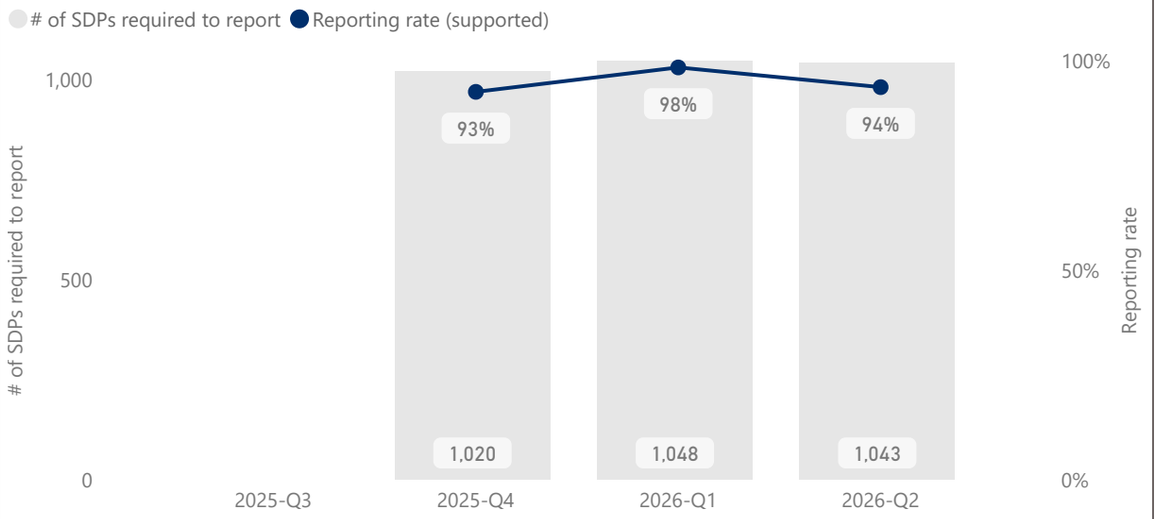
logistics data report

Analysis

The stockout rate for tracer malaria commodities increased from 20.6 percent in FY 2026 Q1 to 24.3 percent in FY 2026 Q2. Stockout rates for individual AL formulations were 8.1 percent for AL 6x1, 9.3 percent for AL 6x2, 14.5 percent for AL 6x3, and 14.9 percent for AL 6x4. Consequently, the inability to treat malaria using AL formulations increased modestly from 0.8 percent in FY 2026 Q1 to 1.1 percent in FY 2026 Q2.

Stockouts were more pronounced for DHA-PPQ formulations. DHA-PPQ 40/320 (6 tablets) was stocked out in 66.9 percent of facilities, while DHA-PPQ (9 tablets) was stocked out in 73.2 percent of service delivery points (SDPs). In addition, 12.6 percent of SDPs reported stockouts of sulphadoxine-pyrimethamine, 4.8 percent reported stockouts of RDTs, and 13.9 percent reported stockouts of LLINs. These stockouts were largely attributable to the rationing of available stocks. The current stockout situation is expected to be resolved following the arrival of FY 2026 malaria commodity orders in May 2026. Additionally, the project will continue to support the National Malaria Control Programme in strengthening distribution planning and monitoring to reduce stockouts and improve commodity availability at the SDP level.

B3. LMIS reporting rate



B3. Data Source (denominator)

Logistics data report

B3. Data Source (numerator)

Logistics data report

Analysis

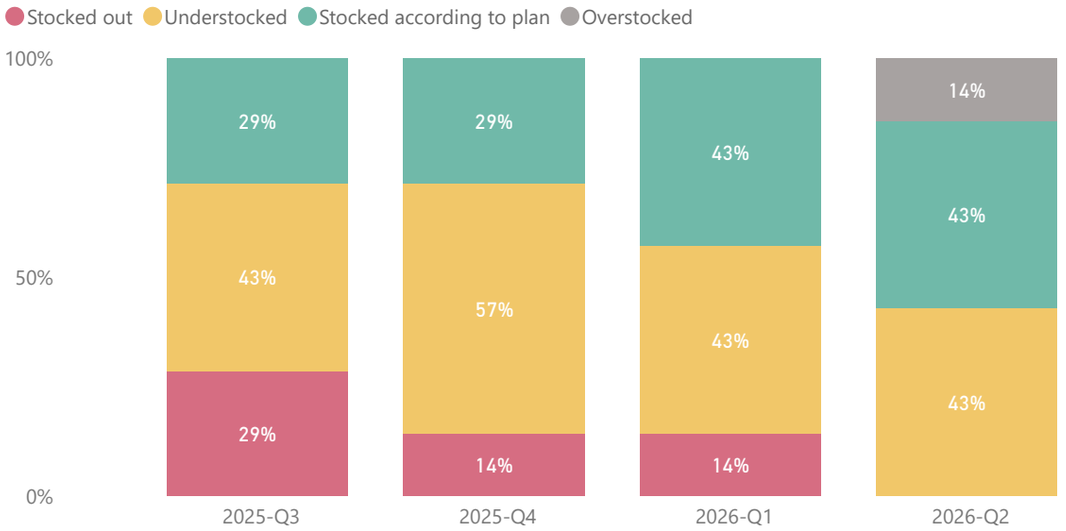
For the malaria program, the SDP reporting rate to the LMIS was 94 percent in FY 2026 Q2, compared to 98 percent in FY 2026 Q1 due to delays in reporting submissions. 977 out of 1,043 required health facilities reported data in FY2026 Q2. The project will continue to support the PNLP to improve and sustain SDP reporting rates in subsequent 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

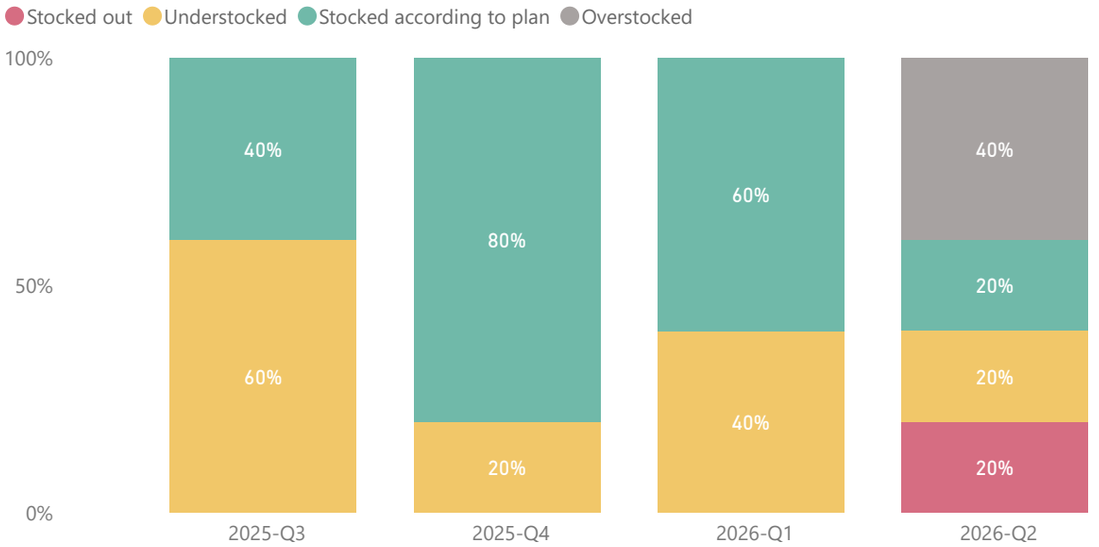
Country: Togo | Current Quarter: 2026-Q2 | Tracer Product: All

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 %

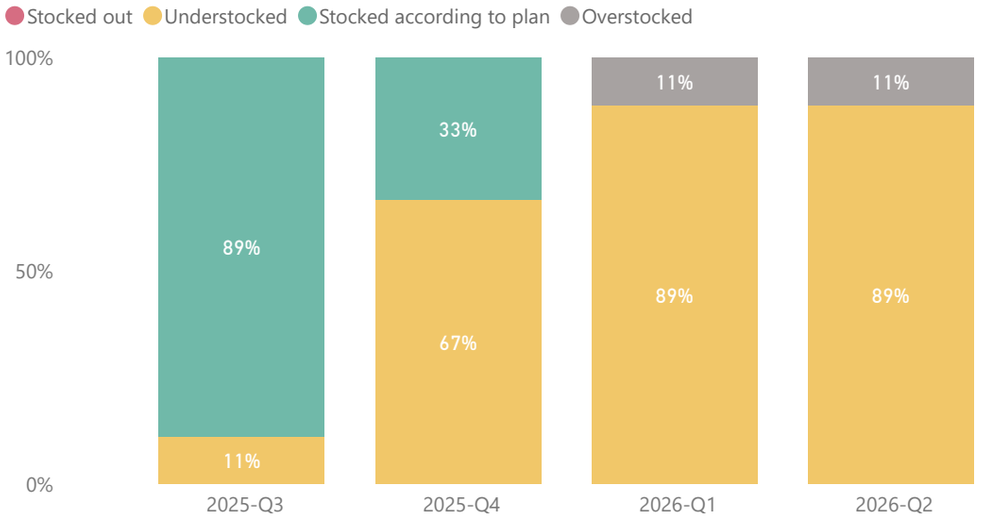
Ref	Analysis
B2	At the central level, 43 percent of HIV/AIDS tracer commodities were stocked according to plan, 43 percent were understocked, and 14 percent were overstocked. There were no stock-outs at the central level in FY 2026 Q2, compared to 14 percent recorded in FY 2026 Q1. Commodities stocked according to plan at the central level include EID reagents, viral load reagents, and the most used first-line pediatric ARV. At the regional level, 20 percent of commodities were stocked according to plan in FY 2026 Q2, compared to 60 percent in FY 2026 Q1, while the proportion of overstocked commodities increased from zero to 40 percent over the same period. The decline in commodities stocked according to plan at the regional level is due to downstream distribution to SDPs. Additionally, 20 percent of commodities stored at the regional level experienced stock-outs, while another 20 percent were understocked in FY 2026 Q2. The project is supporting the National HIV/AIDS Control Program to monitor stock levels, improve distribution planning, and ensure timely delivery of orders to maintain optimal stock levels.
C7	There were no HIV/AIDS 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

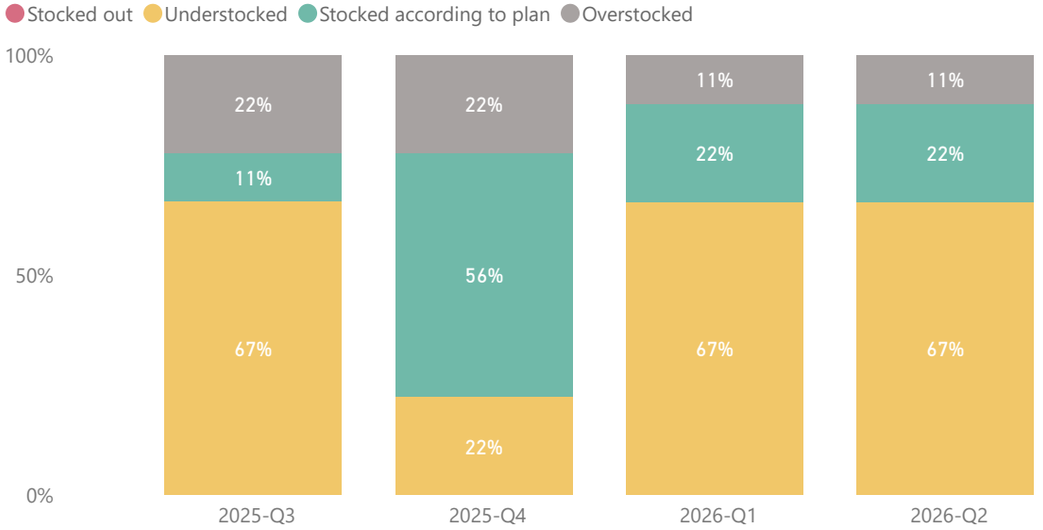
Country: Togo | Current Quarter: 2026-Q2 | Tracer Product: All

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, none of the malaria tracer commodities were stocked according to plan in FY 2026 Q2. Overall, 89 percent of commodities were understocked, while the remaining 11 percent were overstocked. Commodities understocked included AL 6x1, AL 6x1, AL 6x1, AL 6x4, malaria RDTs, and DHA-PPQ 40/320 mg (6 tablets). At the regional level, 67 percent of commodities were understocked, 11 percent were overstocked, and 22 percent were stocked according to plan. The high proportion of understocked commodities at this level is largely attributable to low stock availability at the central level for onward resupply, pending the receipt of planned shipments. The project will continue to support the National Malaria Control Program (PNLP) to strengthen commodity availability at the central level, improve distribution planning, and enhance routine stock monitoring to ensure improved and sustained access to malaria commodities across the supply chain.
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: Togo

Current Quarter: 2026-Q2

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

In FY 2026 Q2, the project, in collaboration with the National HIV/AIDS Control Program and the national malaria control program, reviewed and updated the supply plans for HIV/AIDS and malaria commodities, respectively. The updated plans have been shared with the GHSC-PSM headquarters FASP team.

B6. Quarterly supply plan submissions to GHSC-PSM HQ

Product Group	2025-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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	**24.3%**	**8,793**
Malaria-First line ACT (AL 6x1)	8.1%	977
Malaria-First line ACT (AL 6x2)	9.3%	977
Malaria-First line ACT (AL 6x3)	14.5%	977
Malaria-First line ACT (AL 6x4)	14.9%	977
Malaria-First line ACT (DHA-PPQ 40mg/320mg 6 tabs)	66.9%	977
Malaria-First line ACT (DHA-PPQ 40mg/320mg 9 tabs)	73.2%	977
Malaria-LLINs	13.9%	977
Malaria-Rapid diagnostic test for malaria	4.8%	977
Malaria-Sulphadoxine-pyrimethamine	12.6%	977
Overall	**23.7%**	**8,999**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	1.1%	977

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	94%	1043

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**19%**	**13%**	**69%**		**16**
HIV/AIDS	43%	14%	43%		7
Malaria		11%	89%		9
Subnational level 1	**21%**	**21%**	**50%**	**7%**	**14**
HIV/AIDS	20%	40%	20%	20%	5
Malaria	22%	11%	67%		9
Overall	**20%**	**17%**	**60%**	**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 2
January - March 2026

Country M&E Indicator Performance

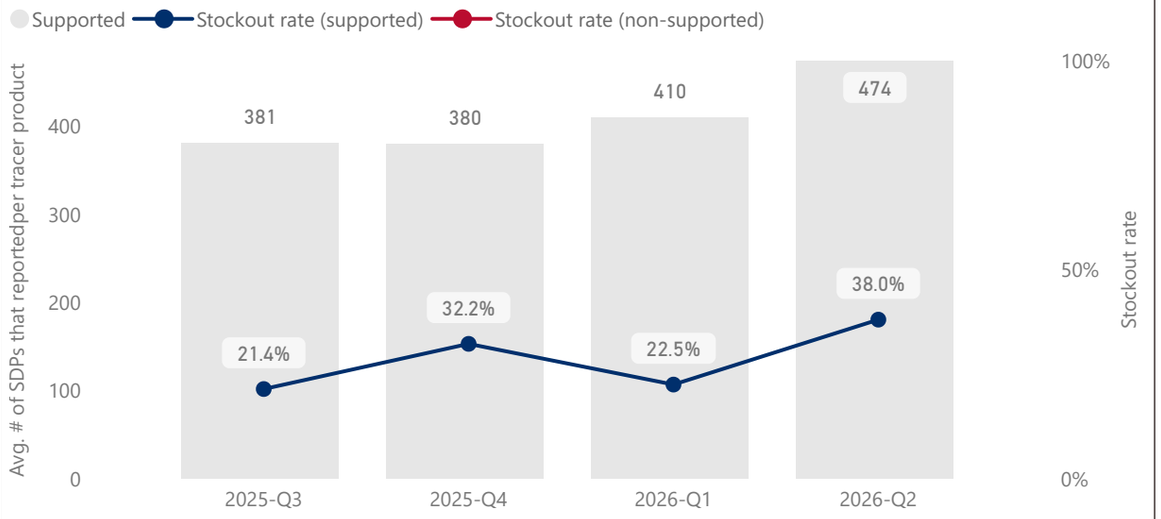
Country

Uganda

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Uganda | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



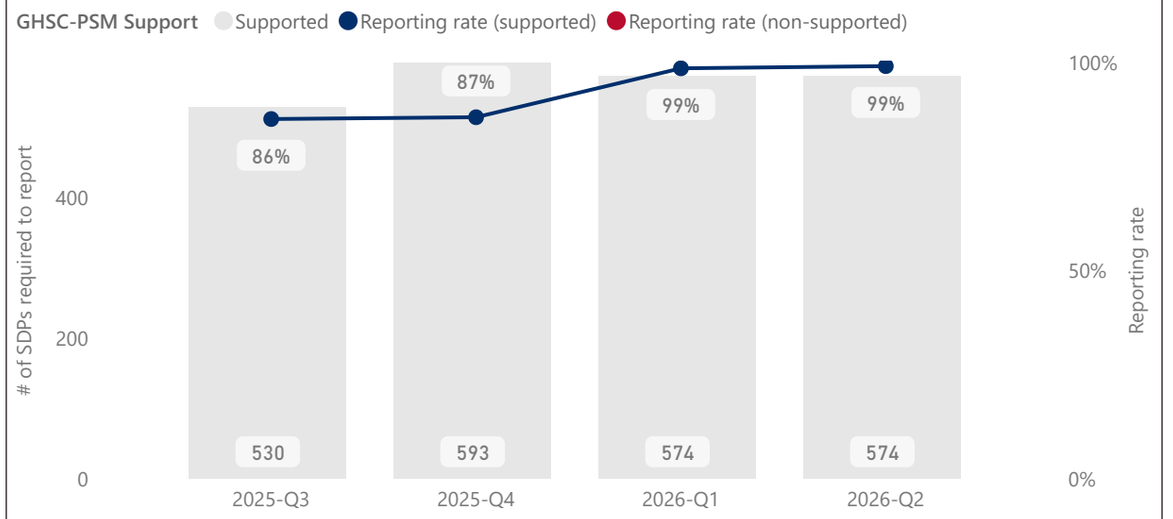
Data source

JMS Electronic Logistic Management Information System, Cycle-1

Analysis

In FY26 Q2, the overall stockout rate for HIV/AIDS commodities increased to 38.0 percent, up from 22.5 percent in FY26 Q1. The incease can be primarily attributed to second-line adult ARVs, first-line RTKs, and second-line RTKs. Slight decreases in the stockout rate were reported for first-line adult ARVs and first-line pediatric ARVs. Efforts are ongoing to conduct redistributions of second-line ARVs from governement run to PNFP health facilities to address stock imbalances. RTK availabiity continues to do be an issue due to procurement funding disbursement delays but recent procurement funding releases and RTK procurements excecuted should improve availability imminently. 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-1

B3. Data Source (numerator)

JMS Electronic Logistic Management Information System, Cycle-1

Analysis

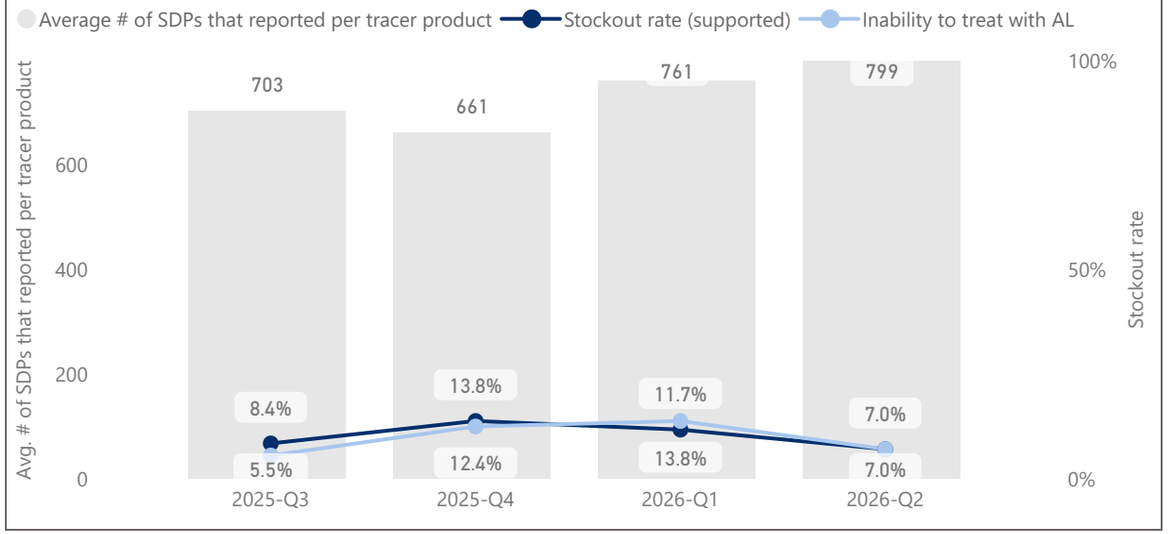
In FY26 Q2, the LMIS reporting rate for HIV/AIDS commodities held steady at 99 percent, unchanged from the previous quarter. This sustained high performance is attributable to coordinated follow-up and order tracking efforts, including GHSC-PSM's focused support in tracking facility orders and providing 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-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



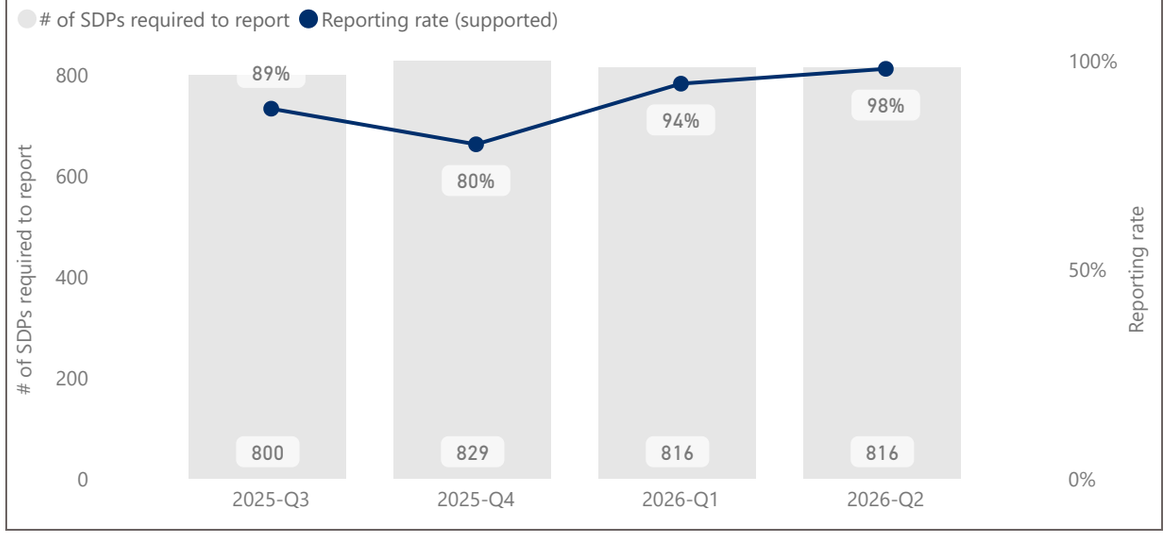
Data source

JMS Electronic Logistic Management Information System, Cycle-1

Analysis

Stockout rates for first-line malaria ACTs decreased from 13.8 percent in FY26 Q1 to 7 percent in FY26 Q2, while stockout rates for mRDTs declined from 11.7 percent to 7 percent over the same period. The improvement in both ACTs and mRDT 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-1

B3. Data Source (numerator)

JMS Electronic Logistic Management Information System, Cycle-1

Analysis

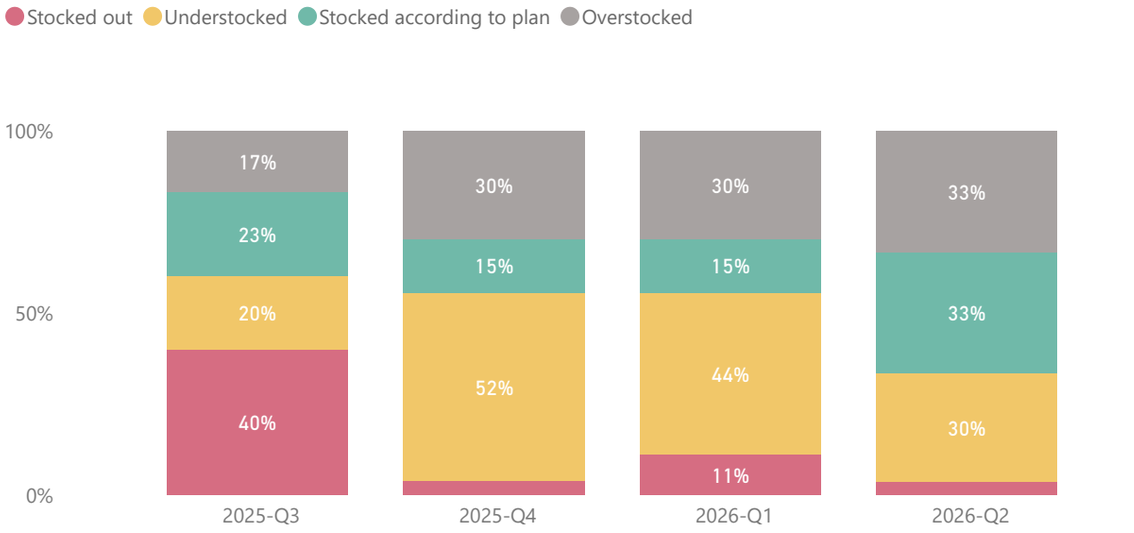
The reporting rate for malaria commodities improved by 4 percentage points from 94 percent in FY26 Q1 to 98 percent in FY26 Q2. This improvement is attributable to coordinated follow-up and order tracking efforts, including GHSC-PSM's focused support in tracking facility orders and providing timely feedback, 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-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Quantification Analytics Tool (QAT)

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



Supply Chain Level	B2. Data Source(s)

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 %

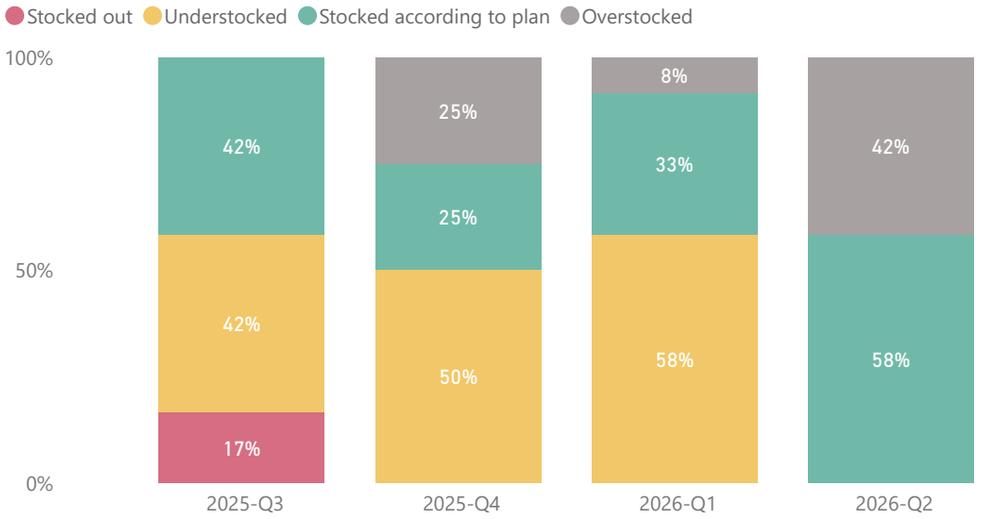
Ref	Analysis
B2	The overall stocked according to plan rate at central level for HIV/AIDS commodities increased significantly to 33 percent from 15 percent in the previous quarter. The understocked rate decreased to 30 percent, down from 44 percent in the previous quarter. The stockout rate at central level decreased to 4 percent, down from 11 percent in the previous quarter. This stockout decrease is entirely attributable to second-line RTKs, which were finally restocked after being out for all three months of the previous quarter and the first month of this quarter. Overstocking was mainly observed among viral load consumables. Commodities stocked according to plan included EID reagents and first-line HIV rapid test kits. Understocking was recorded for the most used first-line ARVs, the most used second-line ARVs, and tiebreaker HIV rapid test kits.
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

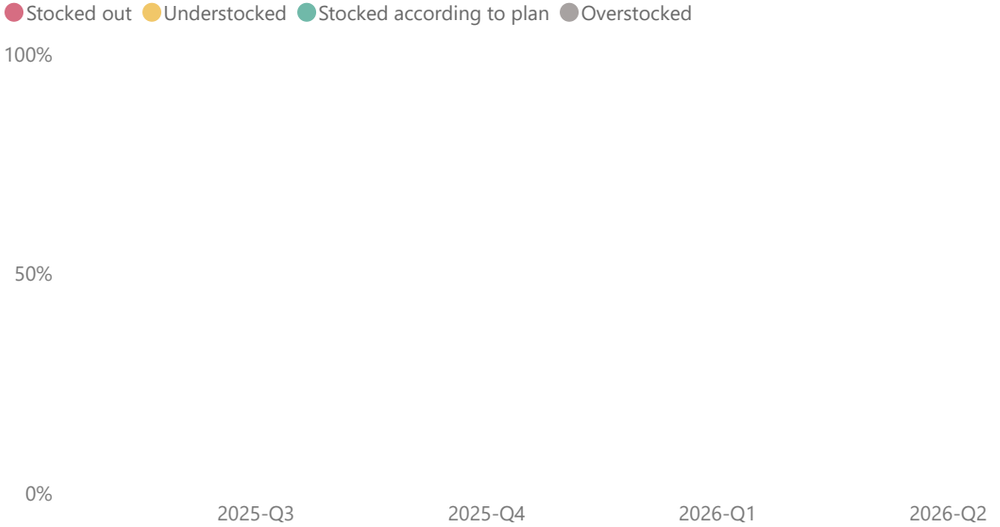
Country: Uganda | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Quantification Analytics Tool (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 %

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

Ref	Analysis
B2	For malaria commodities, the overall stocked according to plan rate at central level improved to 58 percent, up from 33 percent in the previous quarter. Both AL 6x1 and AL 6x4 reported observations shifting into stocked according to plan, which drove the observed overall improvement. Overstocked rates also increased during the quarter to 42 percent, up from 8 percent in the previous quarter; primarily driven by LLINs and mRDTs. 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.

HIV Tracer Products and Supply Planning

Country: Uganda

Current Quarter: 2026-Q2

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

Current Quarter: 2026-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**38.0%**	**2,846**
HIV-"Tie-breaker" RTK	52.5%	394
HIV-First RTK	47.2%	568
HIV-Most used 1st line ARV	2.3%	523
HIV-Most used 1st line pediatric ARV	26.2%	389
HIV-Most used 2nd line ARV	36.2%	409
HIV-Second RTK	61.3%	563
Malaria	**7.0%**	**799**
Malaria-Rapid diagnostic test for malaria	7.0%	799
Overall	**31.2%**	**3,645**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	7.0%	797

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%	574
Malaria	98%	816

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**41%**	**36%**	**21%**	**3%**	**39**
HIV/AIDS	33%	33%	30%	4%	27
Malaria	58%	42%			12
Overall	**41%**	**36%**	**21%**	**3%**	**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 2
January - March 2026

Country M&E Indicator Performance

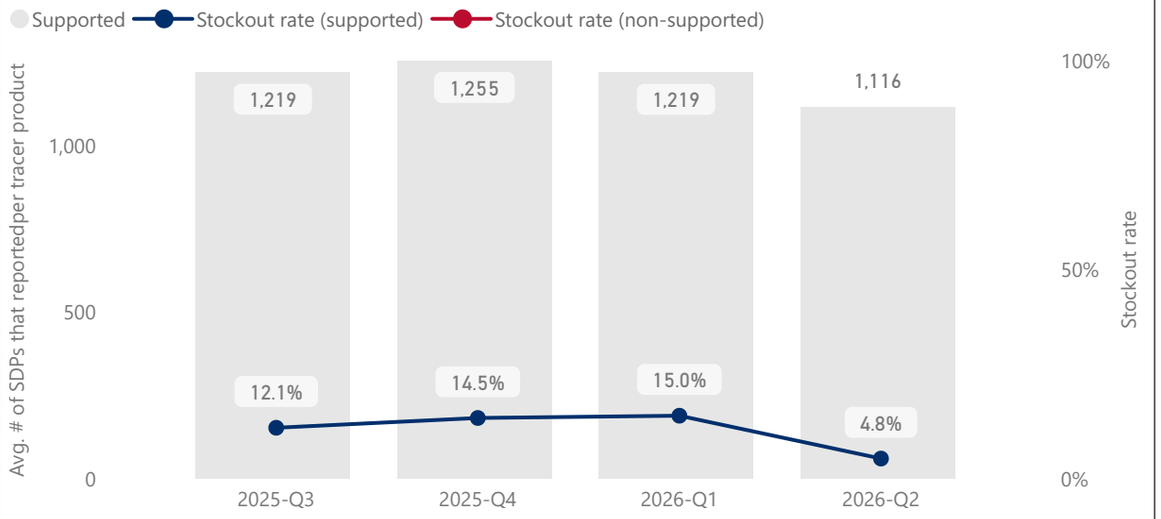
Country

Zambia

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Zambia | Current Quarter: 2026-Q2 | Tracer Product: All

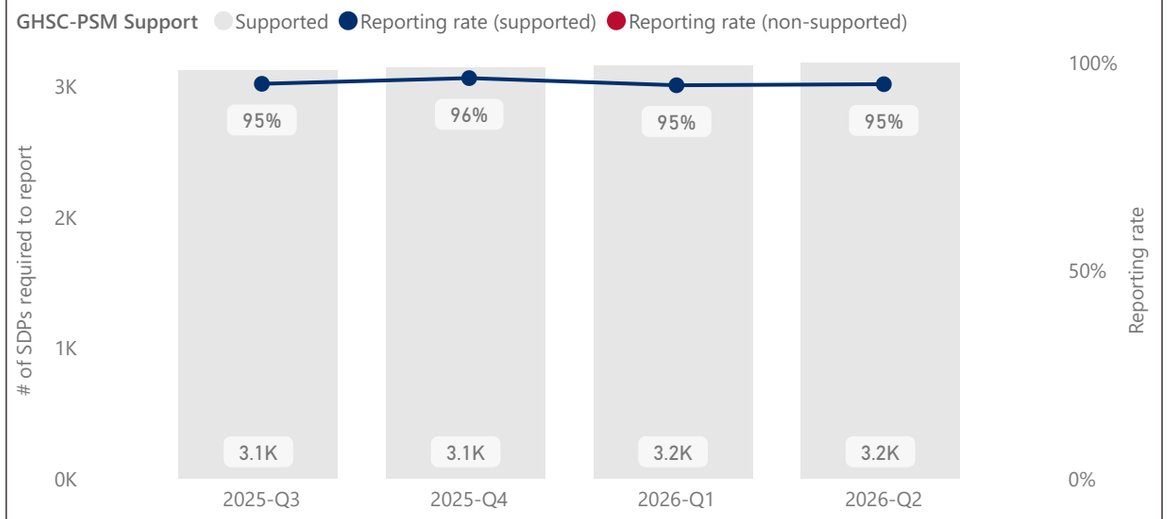
B1. Stockout rate at service delivery points



Data source

eLMIS report for February 2026 data

B3. LMIS reporting rate



B3. Data Source (denominator)

eLMIS report for February 2026 data

B3. Data Source (numerator)

eLMIS report for February 2026 data

Analysis

The stockout rate for HIV/AIDS commodities averaged 4.8 percent in FY2026 Q2, a decrease from Q1's 15 percent. This decrease can be primarily attributed to a successful ongoing transition between two categories of tracer products: 2nd line adult ARV which transitioned from Lopinavir/Ritonavir 200/50mg to Darunavir/Ritonavir 400/50mg, and the 1st line pediatric ARV which transitioned from pDTG 10 to pALD. The highest stockout rate this quarter was for the 2nd line adult ARV at 34.5 percent, due to ZAMMSA's challenges delivering orders despite facilities having placed resupply orders. This is an improvement from last quarter's 2nd line adult ARV stockout rate, which was 64.5 percent. No other tracer product in FY2026 Q2 had a stockout rate of more than 10 percent, with most having stockout rates of less than 5 percent.

Analysis

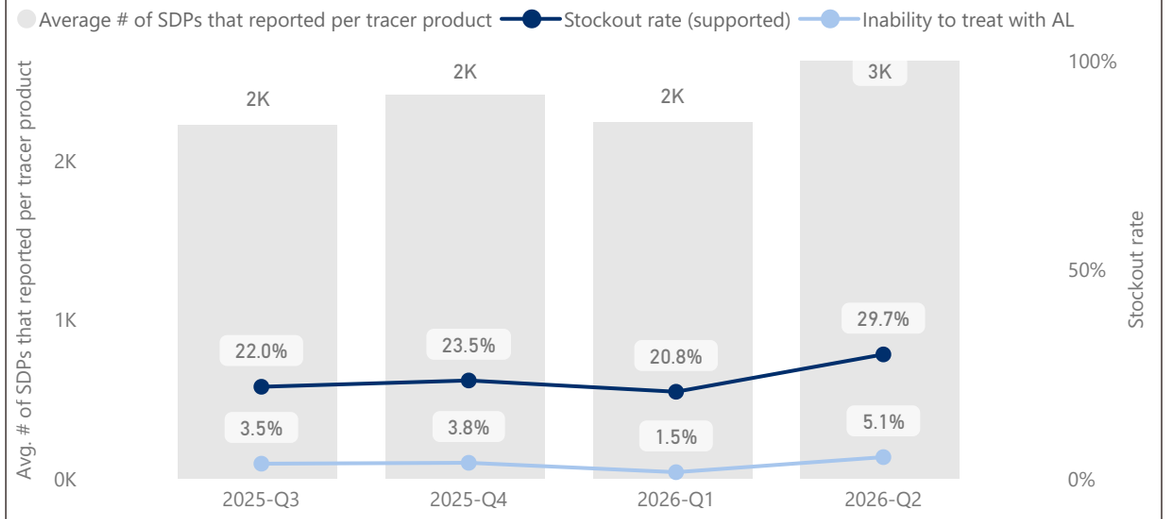
Zambia has consistently maintained high reporting rates, achieving 95 percent in FY2026 Q2. GHSC-PSM contributed to this achievement through system support for the electronic Logistics Management Information System (eLMIS) at service delivery points (SDPs). This effort has strengthened the efficiency of eLMIS and ensured adherence to reporting 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: Zambia | Current Quarter: 2026-Q2 | Tracer Product: All

B1. Stockout rate at service delivery points



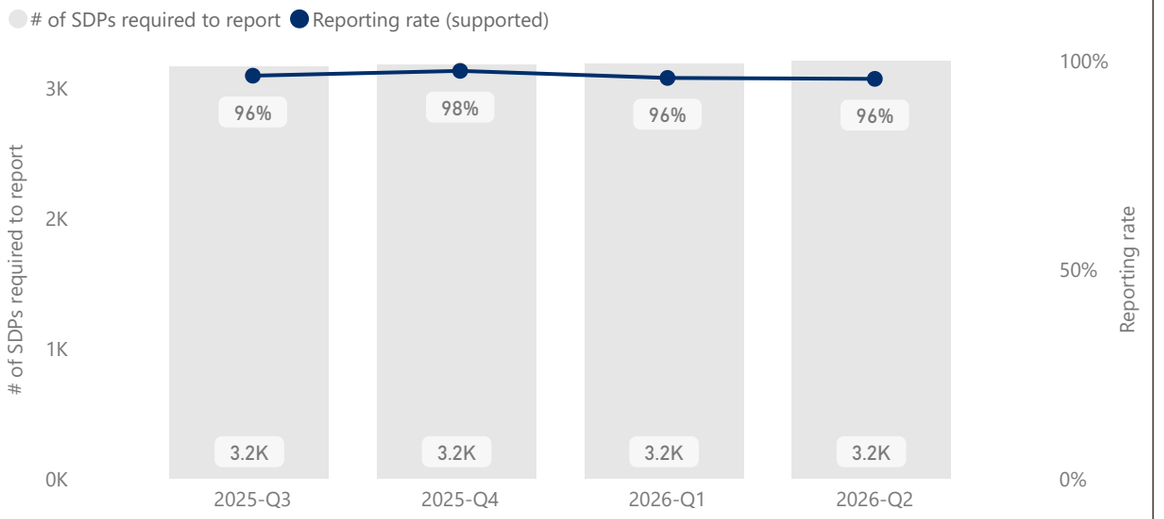
Data source

eLMIS report for February 2026 data

Analysis

The stockout rate for malaria commodities increased in FY2026 Q2, to 29.7 percent from Q1's 20.8 percent. All four AL pack sizes saw increased stockouts this quarter, which also increased the inability to treat rate to 5.1 percent from Q1's 1.5 percent. MRDTs and SP also saw increased stockouts this quarter, to 21.8 percent and 41 percent, respectively. ZAMMSA faced challenges this quarter delivering orders despite facilities placing resupply orders. Additionally, the phasing out of AL 6x1 and AL 6x3 have resulted in low central-level stock, which impacted abilities to fill orders. SP also had low central-level stock. However, there was no service disruption due the availability of alternative pack sizes. 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 through the use of 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.

B3. LMIS reporting rate



B3. Data Source (denominator)

eLMIS report for February 2026 data

B3. Data Source (numerator)

eLMIS report for February 2026 data

Analysis

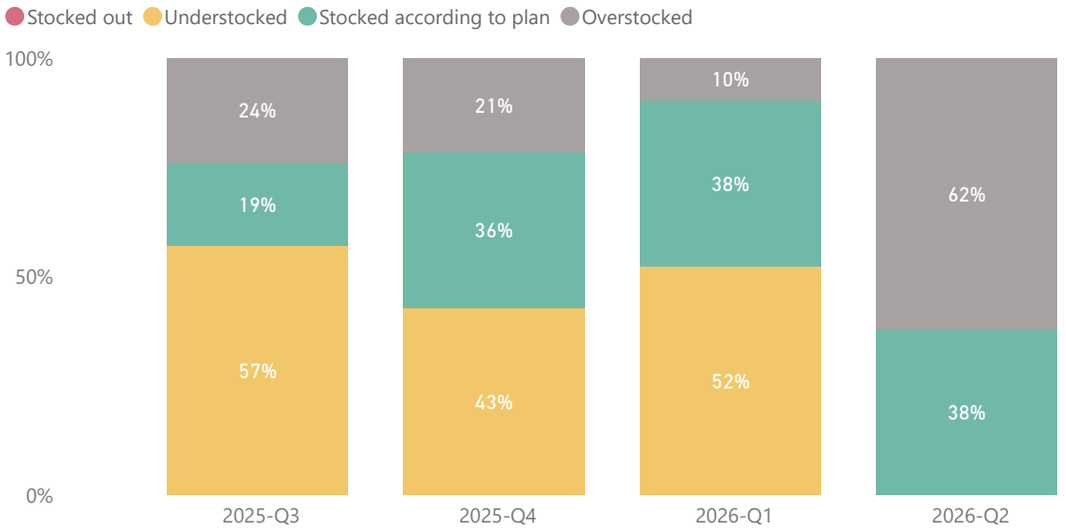
Zambia has consistently maintained high reporting rates, achieving 96 percent in FY2026 Q2. GHSC-PSM contributed to this achievement through system support for the electronic Logistics Management Information System (eLMIS) at service delivery points (SDPs). This effort has strengthened the efficiency of eLMIS and ensured adherence to reporting timelines.

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-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	QAT report for Jan' 26, Feb' 26, Mar' 26

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



Supply Chain Level	B2. Data Source(s)

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 %

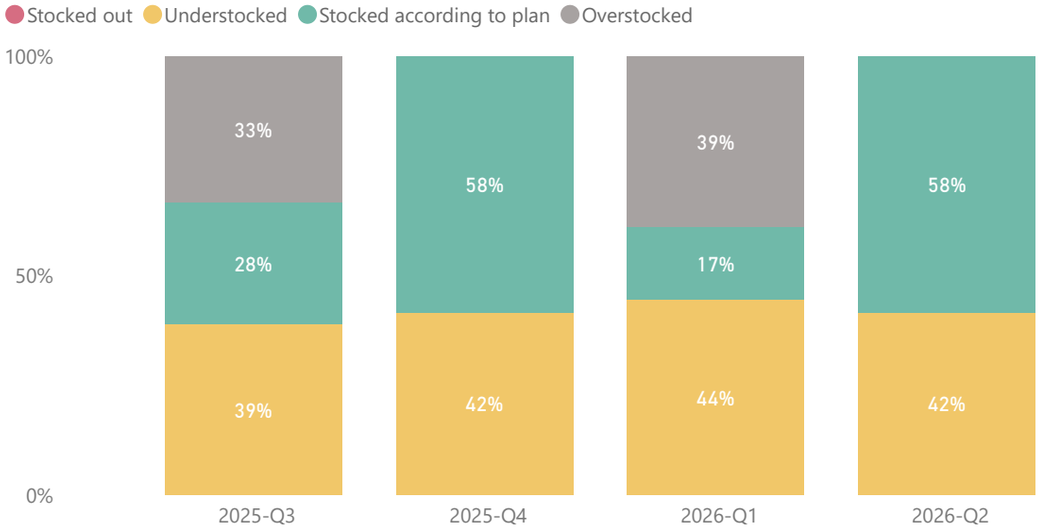
Ref	Analysis
B2	The overall stock status for HIV/AIDS commodities at the central level shifted more toward being overstocked this quarter, at 62 percent, while products stocked according to plan remained at 38 percent. There were no understock or stockout observations of HIV/AIDS tracer products at the central level. Viral load reagents and EID reagents were 100 percent stocked according to plan, 1st line adult ARV and second RTK were both 33 percent stocked according to plan, and all other observations of tracer products were overstocked. Risk of expiry is being closely monitored and does not pose an immediate concern for these products.
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

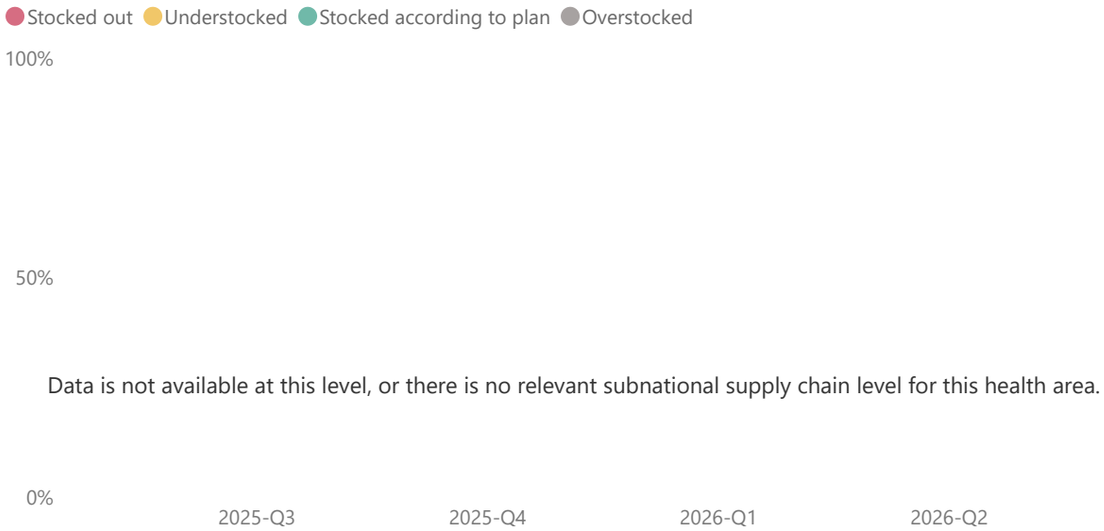
Country: Zambia | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	QAT report for Jan' 26, Feb' 26, Mar' 26

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



Supply Chain Level	B2. Data Source(s)

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 malaria commodities at the central level shifted more toward being stocked according to plan, at 58 percent, although the understock rate remained relatively consistent at 42 percent. There were no overstock or stockout observations of the malaria tracer products this quarter. 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 6x4 is entirely stocked according to plan, while AL 6x2 is mostly understocked. The understocking of AL 6x2 is attributed to higher-than-forecasted issues recorded in February and March 2026, reflecting increased service delivery demand at the health facility level. To avoid stockouts, a shipment of 3 months of stock is scheduled to arrive at the end of April 2026. SP is also mostly understocked and mRDTs are mostly stocked according to plan.
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.

HIV Tracer Products and Supply Planning

Country: Zambia

Current Quarter: 2026-Q2

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-Q3	2025-Q4	2026-Q1	2026-Q2
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: Zambia

Current Quarter: 2026-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**4.8%**	**7,813**
HIV-EID reagent	0.0%	14
HIV-First RTK	5.2%	2,770
HIV-Most used 1st line ARV	1.5%	1,579
HIV-Most used 1st line pediatric ARV	9.0%	632
HIV-Most used 2nd line ARV	34.5%	58
HIV-Second RTK	4.7%	2,746
HIV-Viral load reagent	0.0%	14
Malaria	**29.7%**	**15,807**
Malaria-First line ACT (AL 6x1)	38.5%	2,677
Malaria-First line ACT (AL 6x2)	25.3%	2,642
Malaria-First line ACT (AL 6x3)	34.4%	2,675
Malaria-First line ACT (AL 6x4)	18.6%	2,724
Malaria-Rapid diagnostic test for malaria	21.8%	2,698
Malaria-Sulphadoxine-pyrimethamine	41.0%	2,391
Overall	**21.5%**	**23,620**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	5.1%	2,775

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	95%	3185
Malaria	96%	3208

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**45%**	**39%**	**15%**		**33**
HIV/AIDS	38%	62%			21
Malaria	58%		42%		12
Overall	**45%**	**39%**	**15%**		**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 2
January - March 2026

Country M&E Indicator Performance

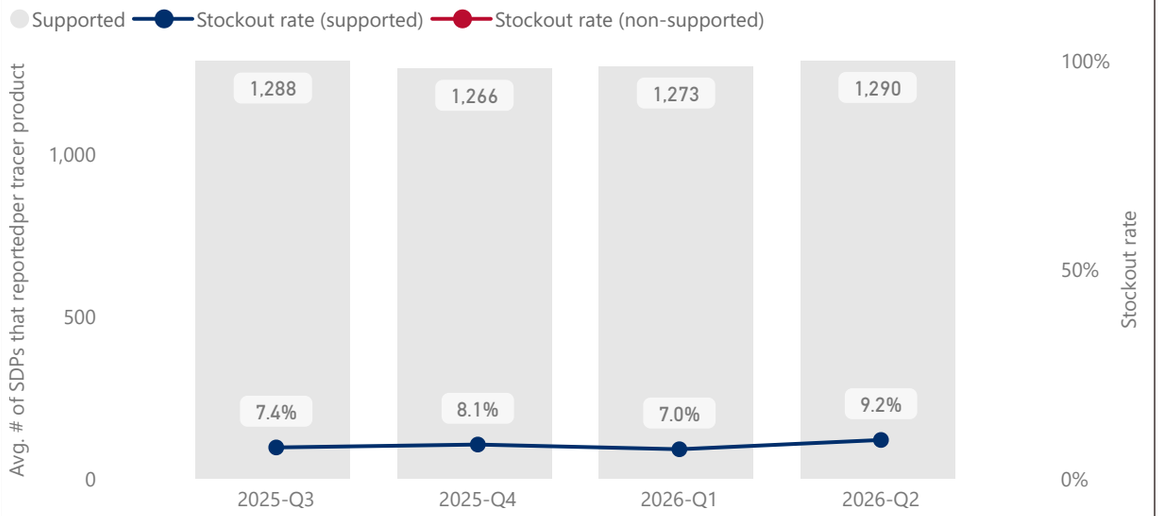
Country

Zimbabwe

Service Delivery Point Stockouts and Reporting Rates HIV/AIDS

Country: Zimbabwe | Current Quarter: 2026-Q2 | Tracer Product: All

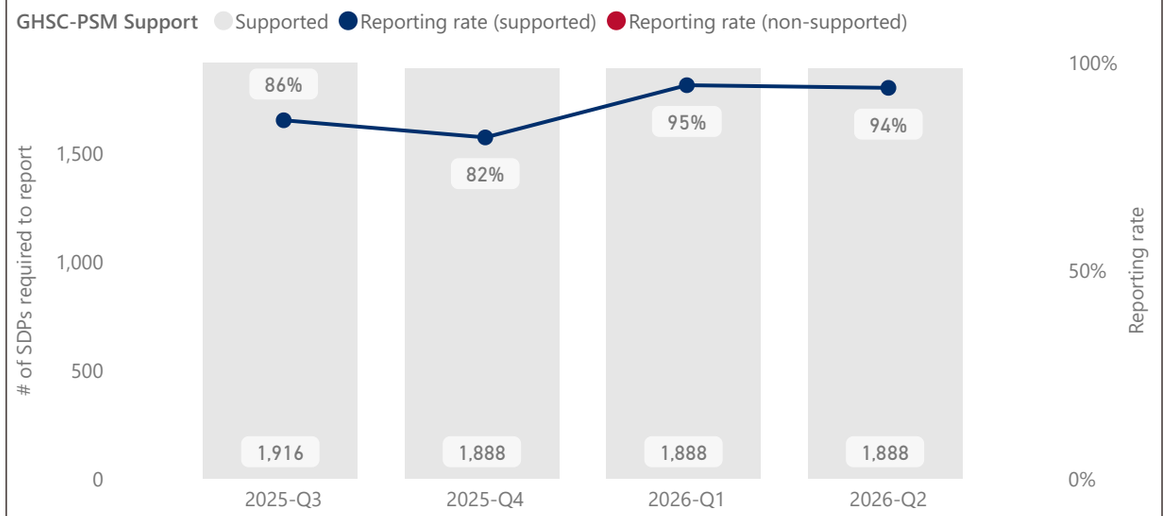
B1. Stockout rate at service delivery points



Data source

Top Up, Mar 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

Top Up, Mar 2026

B3. Data Source (numerator)

Top Up, Mar 2026

Analysis

The overall stockout rate at SDPs has slightly increased, from 7.0 percent in FY 2026 Q1 to 9.2 percent in FY 2026 Q2. While the stockout rates for most commodities fluctuated by approximately 5 percent, the largest change was the increased stockout rate for the RTK tie-breaker tracer category, from 10 percent in the previous quarter to 21 percent in the current. A distribution of this product was ongoing during FY2026 Q2 and reported stockout rates are expected to decrease in the following quarter.

Analysis

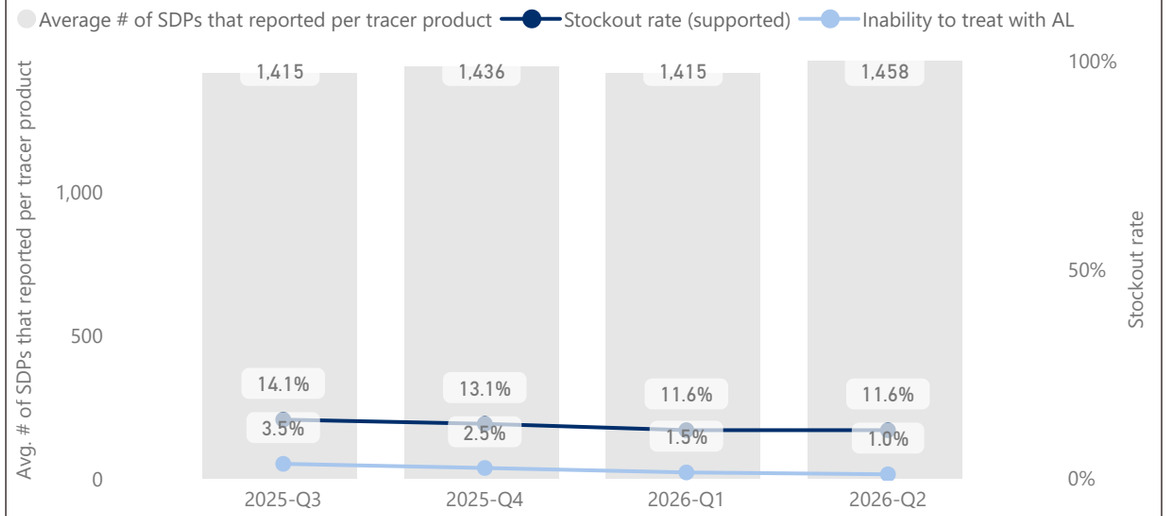
The SDP report submission remains high at 94 percent. Reports were submitted over a longer period of time with 61 percent submitted within one week of the deadline, compared to 92 percent in the previous quarter.

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: Zimbabwe | Current Quarter: 2026-Q2 | Tracer Product: All

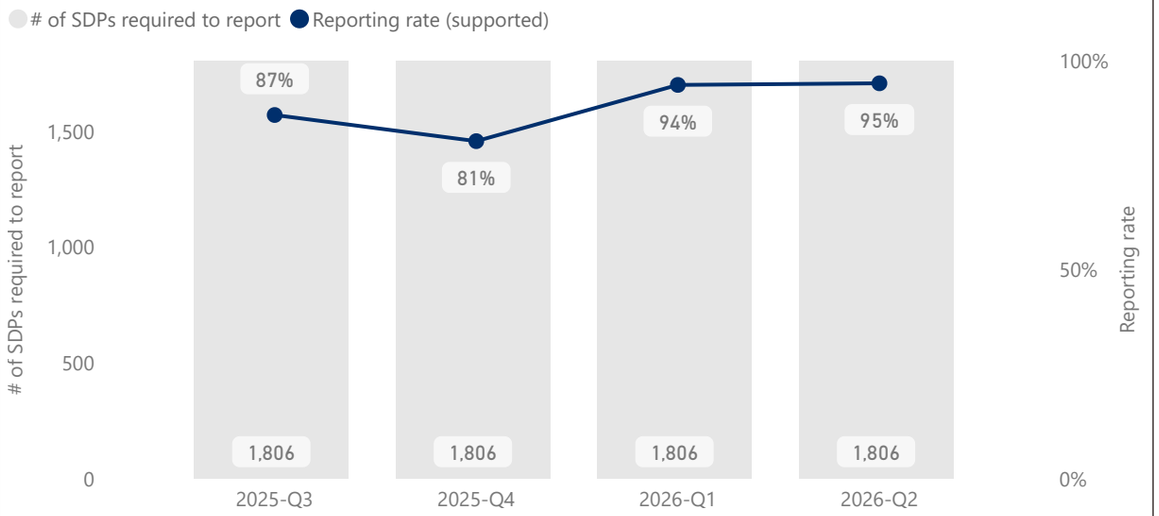
B1. Stockout rate at service delivery points



Data source

Top Up, Mar 2026

B3. LMIS reporting rate



B3. Data Source (denominator)

Top Up, Mar 2026

B3. Data Source (numerator)

Top Up, Mar 2026

Analysis

The overall stockout rate remains at 11.6 percent. While the stockout rate of AL 6x1 remained high at 25 percent, the stockout rates of AL 6x4, mRDTs, and SP remain below 10 percent. The stockout rates of AL 6x2 and 6x3 remain at approximately 12 percent.

Analysis

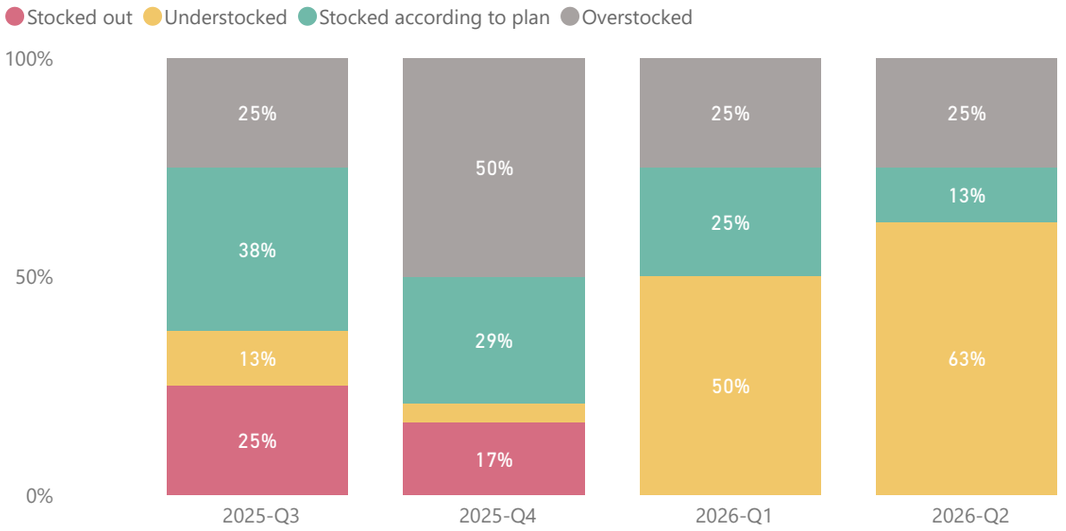
The SDP report submission remains high at 95 percent. Reports were submitted over a longer period of time with 61 percent submitted within one week of the deadline, compared to 93 percent in the previous quarter.

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: Zimbabwe | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Top Up, Navision Reports Mar 2026

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



Supply Chain Level	B2. Data Source(s)

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 %

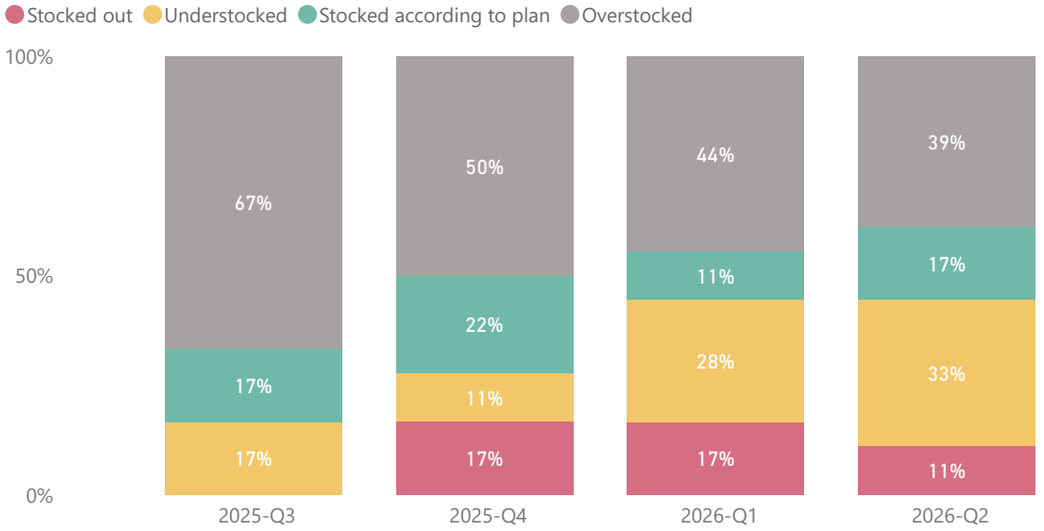
Ref	Analysis
B2	There were no observed stockouts at the central level for HIV/AIDS tracer products. There was, however, a shift to more understocked observations, with the stocked according to plan rate decreasing from the previous quarter. Low central level stocks of 1st line ARVs are a result of delays in receipt of GF funded shipments planned for early 2026. New shipments of 1st RTK and VL reagents arrived in April 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

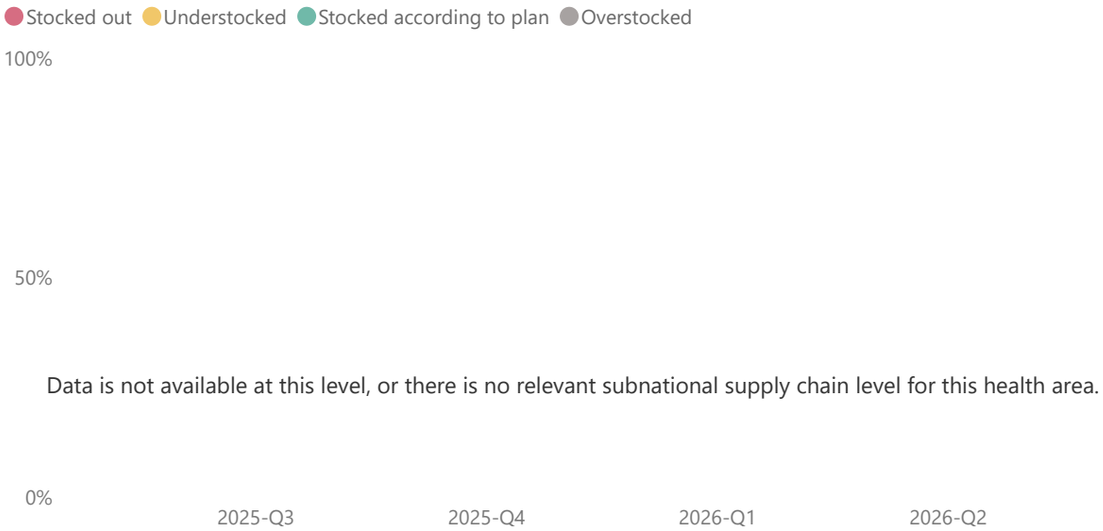
Country: Zimbabwe | Current Quarter: 2026-Q2 | Tracer Product: All

B2. Stocked according to plan - Central level



Supply Chain Level	B2. Data Source(s)
Central	Top Up, Navision Reports Mar 2026

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



Supply Chain Level	B2. Data Source(s)

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	Tracer product stock statuses somewhat improved, with stocked according to plan observations increasing to 17 percent and stockout observations decreasing to 11 percent. Although AL 6x1 observations have been stocked out since FY2025 Q4, the tracer product was stocked according to plan as of the observation in March 2026. Stock status improvements were also observed for AL 6x2 and AL 6x3 while observations remain consistent for AL 6x4. The number of understock observations increased for mRDTs and SP.
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-Q2

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	Roche Ampliprep Automated kits VL
Viral load consumable	Not reported
EID reagent	Roche Ampliprep Automated kits EID
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-Q3	2025-Q4	2026-Q1	2026-Q2
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-Q2

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

Health Area	Stockout rate	# SDP stock observations
HIV/AIDS	**9.2%**	**10,321**
HIV-"Tie-breaker" RTK	21.2%	1,780
HIV-EID reagent	4.7%	64
HIV-First RTK	5.4%	1,836
HIV-Most used 1st line ARV	0.3%	1,755
HIV-Most used 1st line pediatric ARV	16.4%	1,515
HIV-Most used 2nd line ARV	4.9%	1,505
HIV-Second RTK	7.8%	1,802
HIV-Viral load reagent	4.7%	64
Malaria	**11.6%**	**8,749**
Malaria-First line ACT (AL 6x1)	24.7%	1,632
Malaria-First line ACT (AL 6x2)	12.3%	1,453
Malaria-First line ACT (AL 6x3)	11.4%	1,457
Malaria-First line ACT (AL 6x4)	4.3%	1,759
Malaria-Rapid diagnostic test for malaria	7.5%	1,758
Malaria-Sulphadoxine-pyrimethamine	8.3%	690
Overall	**10.3%**	**19,070**

B1. Composite stockout rates

Health Area	Stockout rate	# SDP stock observations
Malaria		
Malaria-First line ACTs (AL inability to treat)	1.0%	1,786

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	95%	1806

B2. Stocked according to plan at storage sites

Supply Chain Level	Stocked according to plan	Overstocked	Understocked	Stocked out	Total Stock Observations
Central	**14%**	**31%**	**50%**	**5%**	**42**
HIV/AIDS	13%	25%	63%	0%	24
Malaria	17%	39%	33%	11%	18
Overall	**14%**	**31%**	**50%**	**5%**	**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.