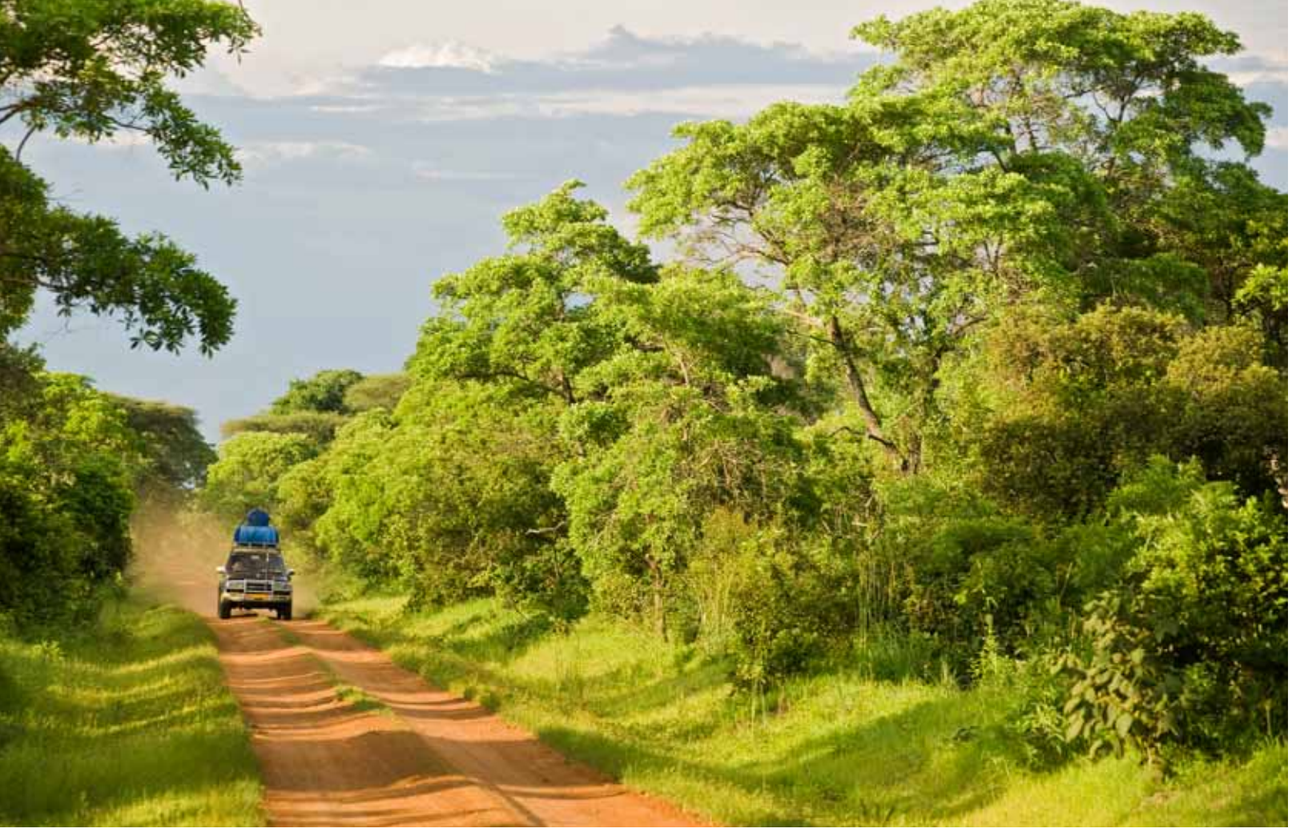

Yale and Coca-Cola Go the Last Mile

Lessons from a soft drink giant help a nation deliver its medicine

Tanzania has more than 50,000 miles of roads. Only a fraction are paved.

IN ANY DISTRIBUTION NETWORK, THE hardest stage is the "last mile"—the distance from the warehouse to the individual consumer. The challenge is even greater in developing countries, perhaps nowhere more than in Tanzania, where more than 90 percent of the nation's roads are unpaved and often impassable during the rainy season. When the products being moved are essential drugs or medical supplies, the health consequences of success or failure in the last mile can be significant.

A public-private partnership

In 2010, an unusual coalition approached Tanzania's Ministry of Health with an offer of help getting drugs and supplies to rural health facilities. Among the key leaders, the Coca-Cola Company had already developed an efficient micro-distribution network to deliver its soft drinks throughout East Africa. Their idea was a powerful one—to apply Coca-Cola's hard-won supply-chain expertise to Tanzania's most pressing health challenges.

The Ministry agreed, joining forces with Coca-Cola, the Global Fund to Fight AIDS, Tuberculosis, and Malaria, the Bill and Melinda Gates Foundation, and Accenture Development Partnerships. In the past, the Ministry's Medical Stores Department would deliver supplies to central warehouses, and district pharmacists were tasked with distributing the boxes to remote health facilities. This system was plagued with deficiencies—inadequate storage, vehicles, and fuel—often resulting in delays of weeks or months before supplies reached the clinics. Now, with coaching from Coca-Cola, the Ministry is undertaking an ambitious reorganization of its distribution strategy, delivering directly to more than 5,000 health facilities while aiming to reduce last-mile distribution costs by nearly 25 percent.

In April 2011, Yale's Global Health Leadership Institute (GHLI) launched a process evaluation to pinpoint ways to make this successful project even stronger. With funding from the Coca-Cola Company, Yale researchers have studied the changes to the supply chain, interviewed key stakeholders, and visited health facilities in Tanzania to understand the project's impact. Elizabeth Bradley, faculty director of GHLI and professor of epidemiology and public health, noted that the goal of the overall project is to improve operations on the ground and pave the way to replicate the partnership model in neighboring countries. "We are taking a deep dive to identify factors that make this unique partnership successful," Bradley said. "Coca-Cola and their partners have taken a novel idea and turned it in to action, and we have the opportunity to learn from that translation. I am so grateful that Coca-Cola is sharing their expertise in this way to potentially improve public health systems."

> The partnership...reflects a "new reality" in which "businesses, governments, and civil society organizations, including universities, work together to solve the world's most pressing challenges."

Yale and Coca-Cola

Yale's relationship with the Coca-Cola Company is longstanding. In 1992, the Coca-Cola World Fund at Yale was established to advance Yale's global initiatives, bringing experts on global affairs to campus, for example, and supporting fellowships for students to go abroad for study and research. The relationship has evolved in recent years to also encompass public health and Yale-China leadership education programs organized by Yale's Office of International Affairs.

The Coca-Cola Company Chairman and CEO Muhtar Kent has observed that the partnership with Yale reflects a "new reality" in which "businesses, governments, and civil society organizations, including universities, work together to solve the world's most pressing challenges." ■

Left: Kwanza Bottling Company, an independent Coca-Cola bottler in Dar es Salaam, Tanzania, updates its sales champion board daily. The Tanzania Medical Stores Department is considering using a similar visual reminder to incentivize performance.

Right: Elizabeth Bradley, public health professor and faculty director of the GHLI