

Stronger health systems. Greater health impact.



Management Sciences for Health

Drug Sellers and Community Access to Quality Medicines and Care

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Access to Medicines – Background



- Most people in developing countries get their medicines from retail drug sellers
- The Strategies for Enhancing Access to Medicines project assessment in 2001 showed that:
 - Tanzania had more *duka la dawa baridi* than all other health facilities combined (4,627 versus 4,288)
 - Ghana had 1,000 pharmacies (the vast majority in urban areas) and almost 8,000 registered chemical sellers
- In Uganda, 51% of the population gets medicines through the private sector and mainly the retail drug sellers (579 licensed pharmacies compared to over 6,000 drug shops in 2011)

Drug Sellers – The Problem



- Selling of unauthorized medicines
- Dispensing of medicines by unqualified personnel
- Inadequate storage space and conditions for stocking of medicine
- Inadequate record keeping
- Inadequate regulation



Drug Sellers – The Opportunity

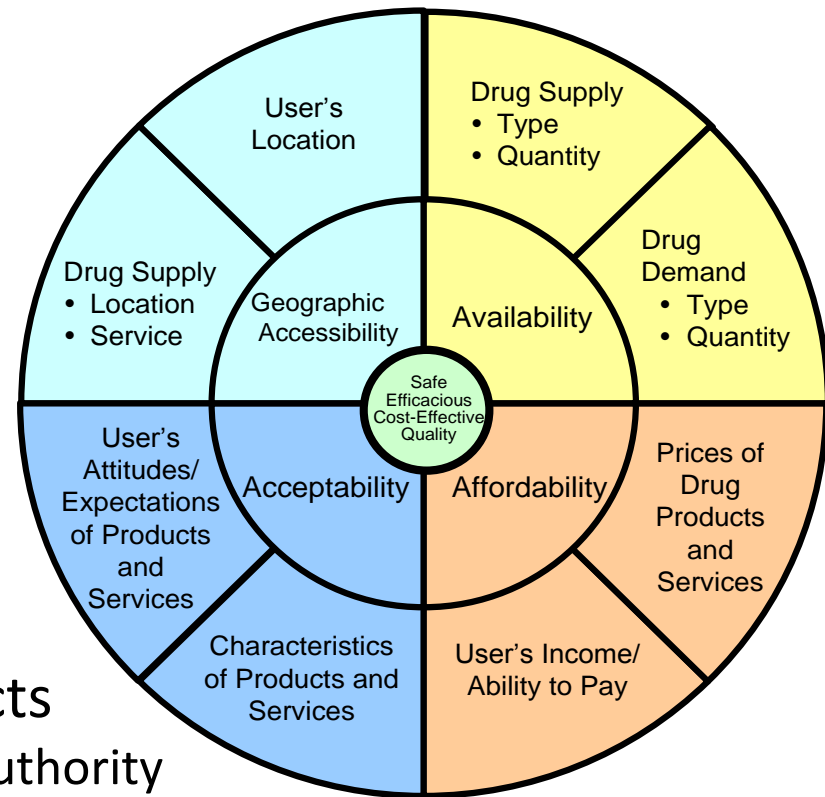


- Close proximity—majority of the rural population lives within 5 km of a drug shop
- Perception of being more personal
- Offer flexible payment and credit
- More widely distributed; fewer licensed pharmacies in rural areas
- Public facilities often experience stock outs

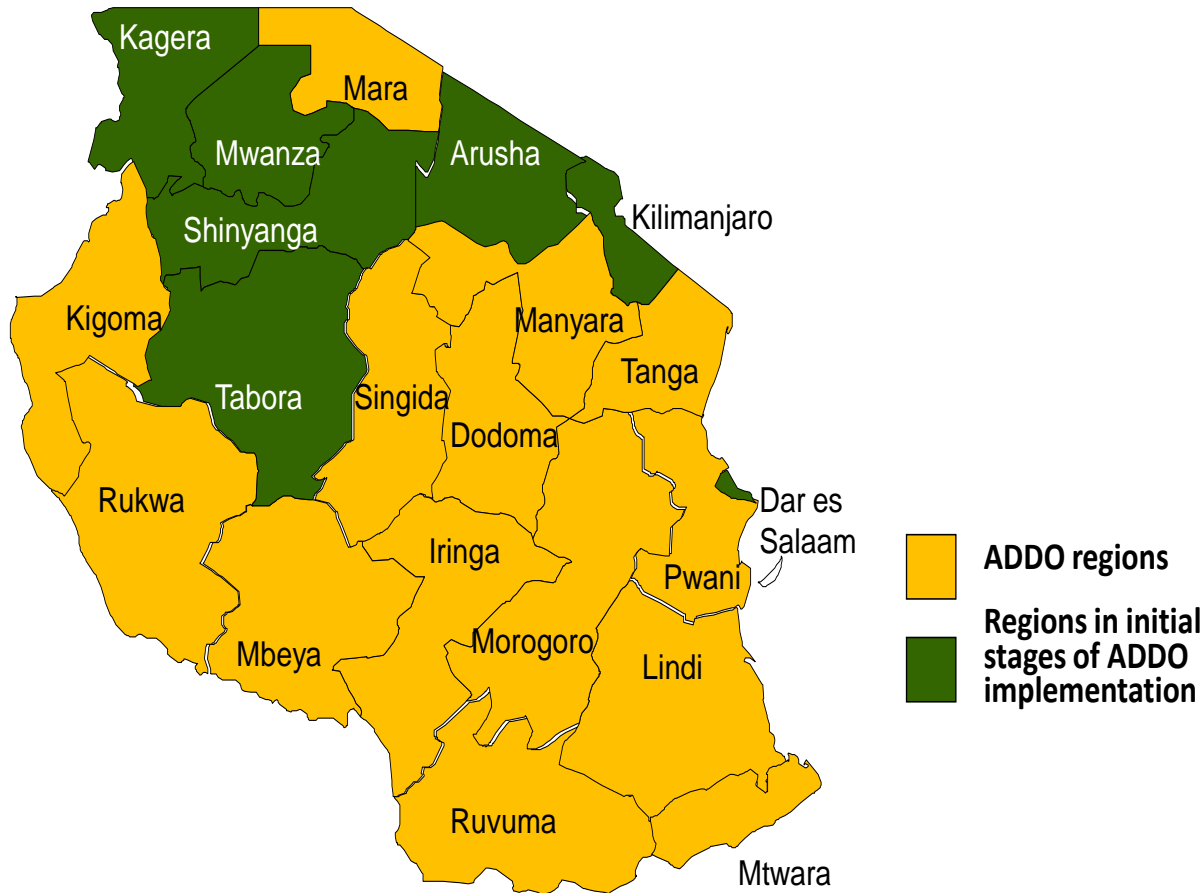
Accredited Drug Sellers – The Solution



- Building private sector capacity
 - Business skills of owners
 - Training of dispensers
- Providing incentives
 - Expanded list of medicines to sell
 - Loans
- Ensuring quality services
 - Record keeping; inspections
 - Mentoring and supervision
- Ensuring availability of quality products
 - Only stock products approved by drug authority
 - Use of local suppliers
 - Inspections
- Increasing consumer awareness
 - Marketing; advocacy; information; education



Accredited Drug Dispensing Outlets – Tanzania



Regions covered	14
Functioning ADDOs	3,484
Potential ADDOs	5,853
Dispensers trained	7,126

Drug Seller Programs – Zambia and Liberia



Zambia

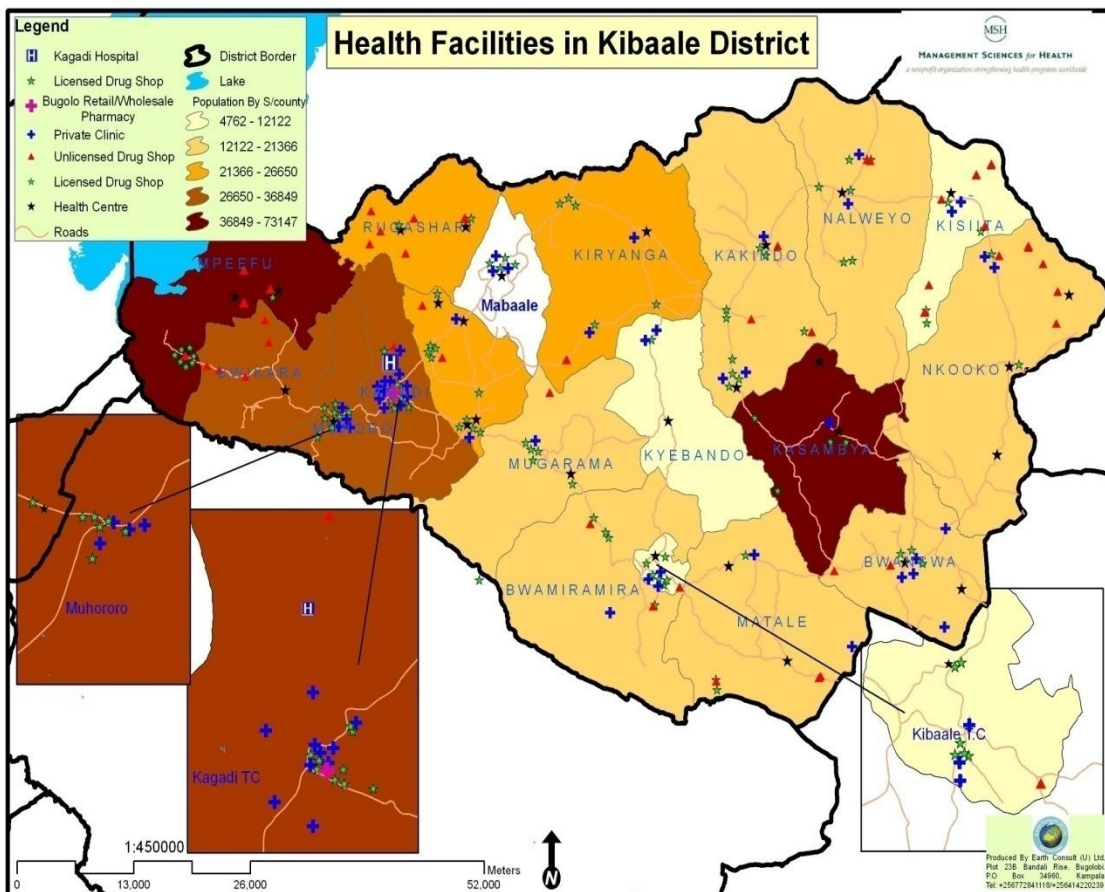
- Piloted in 4 districts: Lundazi, Chama, Chinsali and Kasama
- Accreditation program (adapted from Tanzania ADDO model), ACT price subsidy, RDT price subsidy, and community awareness campaigns
- 50 outlets accredited by July 2011



Liberia

- Implementing adapted ADDO model in Montserrado county
- Planned scale-up nationwide

Accredited Drug Shops – Uganda



- ADDO-adapted model piloted in Kibaale district (2010)
- 73 out of 85 Class C drug shops accredited to operate as ADS at the end of the pilot
- 246 drug sellers and 82 owners trained
- Local monitors trained
- Implementation underway in 4 additional districts (2012)

Public Health Interventions Integrated into Accredited Drug Seller Initiatives



Supporting Integrated Community Case Management of Childhood Illness
(Malaria, Diarrhea, Pneumonia)

Counseling on family planning; initiating oral contraceptive/condom use

Counseling mothers on newborn care and nutrition

Providing access to ACTs and insecticide-treated nets

Linking to community-based HIV/AIDS information/palliative care provision



Accredited Drug Sellers – Potential Role in Maternal Health Services



Potential maternal health services:

- Assessment for danger signs in pregnancy and referral
- Counseling on when and where to access antenatal care and post-natal checks – HC II, III, IV, Hospital
- Monitor medicine use during the antenatal period
- Counseling on the need for Facility Based Deliveries and safe delivery practices
- Distribution of safe delivery kits



The Case for Accredited Drug Sellers in Maternal Health

- (1) Community-based access
- (2) Often first point of contact for health care-seeking patients
- (3) Majority of dispensers are women with a nursing background who live in the community

The Road Ahead in Uganda – Garnering support and partners to expand access

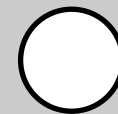
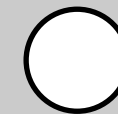
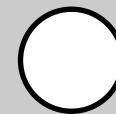
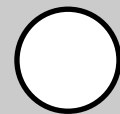
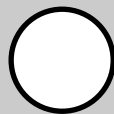
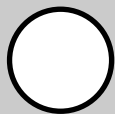


**Review
existing
legislation
on access
to medicine**

**Strengthen
ADS
regulatory
and
supervision
system**

**Evaluate
and
recalibrate**

**Expand
and scale
up**



**Incorporate
ADS in
existing laws
and
regulations**

**Enhance ADS
role in
community
based access
to medicines
and care**

**Develop
scale-up plan
and build
donor
support.**

Key Lessons Learned



- The accredited drug seller model provides a platform for increasing private sector access to medicines while ensuring the quality of services and products provided
- As shown in Tanzania's ADDO program, private sector accredited drug seller initiatives are sustainable and scalable—but:
 - They require human and financial resources, high stakeholder participation, and commitment
 - It takes time to effectively integrate new public health interventions into an established model; planning is required
- Intervention focus may not fall under core functions of regulatory bodies

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