

POLICY BRIEF

SEXUAL & REPRODUCTIVE HEALTH

Availability, Affordability and Stock outs of Sexual and Reproductive Health (SRH) Commodities and devices for Newborn, Child, Maternal, Contraception and Sexually Transmitted Infections (STIs) treatment

KWALE COUNTY

Introduction

The constitution of Kenya, under Article 43 (1) (a), provides that every person has the right to the highest attainable standard of health, which includes the right to healthcare services, including reproductive healthcare. Although there has been progress in the realization of the right to health, significant gaps still exist.

For this reason, in 2019, we collected data in Kwale County to generate reliable information on the price, availability and affordability of select SRH commodities (SRHC) in Kenya's public, private and mission sectors. A total of 20 facilities were surveyed across the three sectors: 10 in the public, 1 in the mission and 9 in the private sector. The facilities visited were in Matuga, LungaLunga, Msambweni and Kinango sub-counties.

The basket of commodities assessed was developed by combining the World Health Organization's (WHO) Essential Medicines for Reproductive Health, the Interagency List of Essential Medicines for Reproductive Health, the Interagency List of Medical Devices for Essential Interventions for Reproductive, Maternal, Newborn and Child Health, and the United Nations Commission on Life Saving Commodities.

Methodology

The methodology used a cross-sectional design with quantitative methods and a semi structured questionnaire adapted from standardized HAI-WHO methodology: measuring medicines prices, availability and affordability and prices components. It allows for data collection on availability and out-of-pocket patient prices of SRHC in the public, private and mission sectors. It also assesses health provider perspectives on access to SRHC beyond the medicines supply chain. Stock-outs were measured for a period of six months and recorded as seen in the stock cards whereas affordability was measured using prices of the SRH commodities, treatment regimens and daily salary of the lowest paid government worker, which was 448.7 at the time of the study.

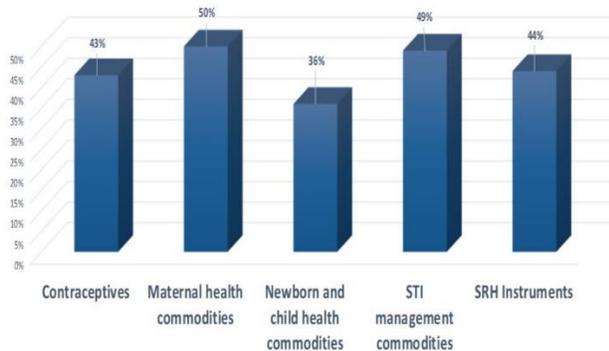
Key findings

- ❖ The overall availability of contraceptives in Kwale county was 43%. The contraceptives with the highest availability were male condoms (81%) and Etonogestrel implant (Jadelle) (81%). The commodity with the least availability was ethinyl+norethisterone (13%).
- ❖ The highest availability of maternal health commodities was found for folic acid tablets and methyldopa both at 100% while the

commodities with the least availability were Magnesium Sulphate 500mg/2ml Ferrous salt:(folic acid 150mg+500mcg) supplements at 11%.

- ❖ The overall availability of newborn and child health commodities was 36%. Dexamethasone had the highest availability at 100% followed by Zinc tablets (63%). Zinc syrup had the least availability at 5%.
- ❖ For the STI treatment commodities, the overall availability was 49%. The commodity with the highest availability was Metronidazole (90%). Both Benzathine Penicillin and Amoxicillin 125mg had the least availability at 16%.
- ❖ The overall availability of SRH devices and instruments was 44%. The highest availability of SRH instruments and devices was found for Speculum and suction device both at 91% while the commodity with the least availability was cervical dilator at 9%.

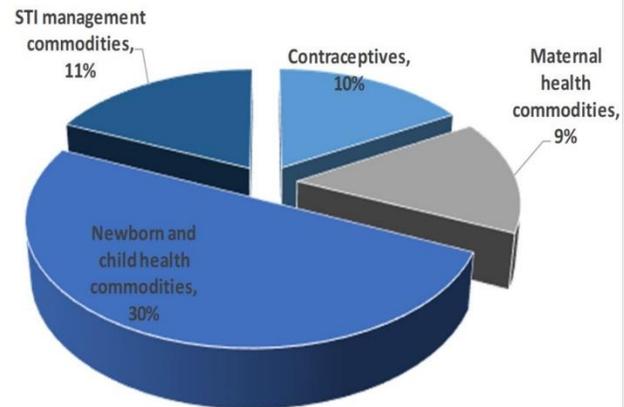
Availability of SRH Commodities in Kwale county



- ❖ In both private and mission sectors, Magnesium sulphate (500mg in 2ml vial) costed the LPGW 8.83 and 3.64 days of wages, respectively. Benzylpenicillin (powder for injection 600mg 1MU) was the most unaffordable since it costed the LPGW 3.97 days of wages, in the public sector.
- ❖ Stockouts were measured for a period of 6 months. In Kwale County, maternal health

commodities had the least stock outs while New born and child health commodities had the highest percentage of facilities having Stockouts.

Percentage of facilities facing stockouts per commodity



KEY RECOMMENDATIONS

- Comprehensive SRH services and commodities should be part of the Essential Package List as part of what is offered within the County Universal Health Coverage (UHC) programs.
- Prioritizing training on both stock management and quantification to ensure seamless supply and availability of SRH commodities.
- Providing support supervision and continuous training of the health workforce to includes elements of customer care.
- Sensitization of communities on sexual and reproductive health commodities and services so as to increase demand and raise awareness.
- Involving male partners in access to, provision of and education on the use of contraceptives and treatment of sexually transmitted infections.
- Reduction or subsidization of costs in the private sector especially in the hard to reach and marginalized areas, where populations live below poverty line.