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Drug stock outs are frequent, say health workers and patients But citizens are finding ways to access the medicine they need

19 September 2013, Dar es Salaam: When visiting health facilities, almost all patients (97%) are provided with prescriptions and/or medicine. Yet 2 out of every 5 (41%) of these patients report being unable to acquire the prescribed medicines at the health facility itself. In addition, lack of medicine is mentioned as one of three major problems facing the delivery of quality health care by 69% of health facility staff. However, virtually all patients (99%) who visited a health facility to seek treatment report accessing the medication they need. This most likely means that citizens are turning to private pharmacies to fill the gap left by stock outs.

These findings were released by Twaweza in a research brief titled *Stock out or in stock? Access to medicines in Tanzania*. The brief is based on data from *Sauti za Wananchi*, a nationally representative mobile phone survey of households across mainland Tanzania.

Since two out of three families in Tanzania report that one family member was ill in the last month, access to medicine is an issue that impacts the lives of millions of citizens. *Sauti za Wananchi* sought to find out where citizens are treated, how or if they access the medicine they require and what role health facility staff play in promoting or hindering the provision of medication to patients.

The findings provide positive news about vaccinations which are an important part of preventative health care. Almost all (96%) facilities provide vaccinations and over 80% of these have major vaccinations in stock. In addition, half of all patients who visit health facilities are diagnosed with malaria, and *Sauti za Wananchi* found that a large majority (90%) of these facilities stocked the main anti-malaria medication (Alu).

Health facility heads largely cite the lack of medicines as an obstruction to better health care but they do follow up on missing medicines. About half (52%) notify the Council Health Management Team and only 7% report doing nothing when medicines are out of stock.

But the news is not all good. The Service Delivery Indicators Survey in 2010 does show that one quarter (24%) of a list of frontline essential medicines, on average, were not available in health facilities across the country. Similarly Alu, which is subsidized through a government and donor program, is often overpriced. Alu is only sold at the government recommended price in 37% of health facilities and 29% of pharmacies.

And of concern is that over a quarter of patients (28%) who reported buying medicines in private pharmacies claimed that the pharmacy was owned by a government health facility worker or a member of their family. Although there are no regulations preventing family members of health workers owning pharmacies this could lead to conflict of interests.

"It is reassuring that anti-malaria medication and vaccinations are widely available." said Elvis Mushi, Researcher at Twaweza "However the prevalence of stock outs, alongside the obstacles to access to medicine cited by patients and health workers alike present a challenge for our healthcare system."

Rakesh Rajani, Head of Twaweza, commented "Our data show that even when public health services break down, citizens are finding ways of coping and accessing the products and services they require. But one can never be certain about the quality and dosage, and its effects on health. The government needs to find innovative ways to solve this problem."

The Twaweza brief presents several other findings as well and can be downloaded from www.twaweza.org/sauti

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Notes to Editors

- This brief and the data contained can be accessed at <u>www.twaweza.org</u>, or www.twaweza.org/sauti
- Twaweza is a ten year citizen-centered initiative, focusing on large-scale change in East Africa. Twaweza believes that lasting change requires bottom-up action, and seeks to foster conditions and expand opportunities through which millions of people can get information and make change happen in their own communities directly and by holding government to account.
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