

Barriers and facilitators of access to Internationally Controlled Essential Medicines in Kenya

Every year, HAI accepts a few bright and ambitious students into its internship programme at our bustling Amsterdam headquarters. This provides valuable educational experience for students who are interested in conducting research and/or advocacy on a number of access to medicines issues in the European Union or internationally.

This year, our interns spent their first few weeks in the office before the working from home requirements as a result of [COVID-19](#) meant they could no longer come into the office. Instead, they have continued their work from their own homes, shifting their focus slightly to accommodate the new arrangements.

We wanted to learn a little more about what each of them have been doing, and how they've managed to adapt their work in recent weeks. Today, we're hearing from Denise de Kant, an MPA International Public Health student focusing on "Barriers and facilitators of access to Internationally Controlled Essential Medicines (ICEMs) in Kenya".

Continue to watch this space in the coming weeks for our monthly intern spotlight. And if you're interested in doing an internship at HAI, you'll find more information about how to apply [here](#).

What is your research about?

My research is about barriers and facilitators of access to Internationally Controlled Essential Medicines (ICEMs) in Sub-Saharan Africa (SSA) and Kenya specifically. ICEMs are essential medicines for important care fields (including anesthesiology, pain and palliative care, epilepsy and mental health), but are also controlled by UN Drug Conventions due to their potential for misuse. Currently 14 medicines are ICEMs. Examples are morphine, codeine, diazepam and phenobarbital. Although ICEMs are indispensable, access to these medicines in SSA is known to be problematic. I conducted a literature review about barriers and facilitators of access to ICEMs in SSA, and did interviews with 7 key experts about barriers and facilitators of access to ICEMs in Kenya specifically. The aim is to learn more about what factors influence access, and how access to ICEMs can be improved in the future.

How has your research approach/project changed since having to work from home?

Initially I was going to go to Nairobi, the capital city of [Kenya](#), for four weeks to conduct interviews for my research project. Now, I'm trying to contact these people to do interviews online via Skype. In addition, I'm conducting a literature review about access to Internationally Controlled Essential Medicines in Sub-Saharan Africa to gain more results and get a better in-depth understanding of barriers and facilitators in this context. I can

combine the results of this literature review with the results of my interviews about barriers and facilitators of access to Internationally Controlled Essential Medicines (ICEMs) in Kenya specifically.

What's the best part of research into your topic, and what's the worst or hardest part?

I think there is not really a worst part, the hard part now for me is to reach participants for my interviews. It is also sad to read about how many people have to live with severe pain or do not have access to medicines for epilepsy for example. That is why research into barriers and facilitators is so important; to understand more about how access could be improved. The good thing is that I also read a lot about improvements that are already made, and organisations and people that put all their efforts in making ICEMs more accessible. Also, with the interviews I have the opportunity to speak to really interesting people that have a lot of experience from which I can learn a lot.

What do you wish people would know about your topic?

ICEMs are medicines that are essential because they are included on the WHO Model List of Essential Medicines, and are controlled because they are listed on one of the international drug control conventions due to their potential for misuse. Currently, fourteen medicines are both essential and controlled. Although these medicines are for example essential for pain relief after an operation, palliative care for cancer or HIV/AIDS patients, epilepsy treatment, and mental health, still many people in Kenya and other sub-Saharan countries do not have access to them. There are various barriers to access, and they range from regulatory barriers like strict laws, to economic barriers like unnecessarily high costs of medicines.

What would you tell someone else looking at doing an internship at Health Action International (HAI)?

Go for it! I think the topics at HAI are all super interesting and relevant. Working for HAI, you can make (a start for) a difference. It is a great organisation that is really passionate about improving access to medicines for all people worldwide. It is a diverse organisation with people from different backgrounds, different countries, and different ages. Everyone is open, friendly and happy to talk about their project. I think doing your internship at HAI can bring you a lot.

What do you think is the single most important thing in this area at the moment and why?

The most important thing is that all individuals who are in need of ICEMs, are able to get them. Therefore, the medicines should always be available and affordable. One of the first steps that I believe is very important is raising awareness about the importance of these medicines. The government, policy makers, health professionals and also the public should be aware of this and work together in improving access. Therefore, training and education is a first step in the right direction.