

SRHC: Availability, Affordability, & Stock-outs- Four-Country Comparison 2018

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Implementation of national policies on medicine pricing, an efficient supply chain management system, integrated county procurement strategies as well as prudent budgeting and fair allocation for commodities are all essential in ensuring medicines are affordable and available at every facility, for everyone, anywhere. While policies are also greatly needed to improve health infrastructure, health education and financing are further required to ensure the rational use of medicines. Even in the face of weak infrastructure and gross inequality that underpins poverty prevalence; improvements in access can be achieved. However, without reliable information on medicine prices and availability, governments are working in an evidence vacuum. This restricts their ability to construct meaningful policy and properly evaluate the impact of any policy interventions.



The following report presents the results of the surveys carried out by HAI and in-country partners (Medicines Transparency Alliance [\[MeTA\] Kenya](#), [MeTA Uganda](#), [MeTA Zambia](#), and [UMATI Tanzania](#)) during July and August 2018 in Kenya, Tanzania, Uganda and Zambia. It answers the following questions:

- What is the average availability of essential SRHC in health facilities in the countries of study?
- What price do people pay for SRH medicines?
- Do the prices and availability medicines vary between urban and rural health facilities and across the public, private and mission sectors?
- [How affordable are medicines](#) for ordinary people?
- What do health providers believe are the main barriers to accessing medicines?
- What are the similarities and differences between the four countries?

The report will highlight obstacles to SRHC access and will bring attention to possible areas for intervention to improve the current situation at regional as well as national levels, and monitor changes in access over time in the countries of study.