





Availability of Oxytocin: A Ground-Up Advocacy Initiative



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What was the health challenge?

- In Uganda, the maternal mortality rate is 336 deaths per 100,000 live births.
 Post-partum hemorrhage (PPH) contributes to 34% of deaths.
- Oxytocin is a lifesaving commodity that prevents and treats PPH. Cold chain storage is recommended.
- In Uganda, oxytocin is used at higherlevel health facilities (HC III and above) where women give birth and there is cold chain capacity.
- Though oxytocin is included in Uganda's RMNCAH quantification and supply plan, it is often unavailable.









Gathering evidence to inform advocacy

- CSO conducted a desk review, compiled evidence, and validated with partners. Found two problems:
 - Unavailability of oxytocin at health facilities.
 - Where oxytocin was available, storage outside of the cold chain effected quality and efficacy.
- Community groups conducted health facility assessments, which revealed stock-outs of oxytocin.
 - Almost 60% of HC III did not have fridges in the maternity ward.
 - o Unreliable electricity.
- Community findings informed nationallevel engagement.









Influencing the policy agenda

- Presented evidence to MOH Maternal & Child Health technical working group (TWG) on the magnitude of the problem and effects on maternal health if not addressed.
- Consensus: must resolve cold storage issue.



Presenting evidence on stock-outs of the 13 Life-Saving Commodities in health facilities and its impact on mothers.







A directive on oxytocin storage

- As a result, the MOH issued a directive to all district health officers, which enabled storage of oxytocin in Uganda National Expanded Program on Immunization (UNEPI) fridges
- Previously, these fridges were restricted to vaccines—their use for other drugs was a crime.
- Next steps:
 - MOH is working to procure fridges for maternity wards.
 - ABH is continuing to advocate through the coalition.

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IN ANY CORRESPONDENCE ON THIS SUBJECT PLEASE OLD TE No. ADM.215/206/01

14th June 2017.

To: All District Health Officers

In Charges Health Facilities

Re: Use of the UNEPI cold chain in storage and maintaining a cold chain for Oxytocin.

According to the 2015/2016 annual health sector report, obstetric haemorrhage continues to be the leading cause of maternal mortality contributing to 39% of the maternal mortality in Uganda. Whereas Active management of third stage of labour (AMSTL) can prevent up to 60% of all PPH cases. PPH continues to have a devastating effect to women in Uganda.

In Uganda, oxytocin is used as the first-line medicine to both prevent and treat excessive bleeding after delivery. Because of its potential public health impact, oxytocin is one of 13 priority lifesaving, cost-effective commodities for reproductive, maternal, newborn, and child health. WHO and UNICEF recommend that Oxytocin-based products be kept refrigerated as much as possible (at a temperature 2-8° C) to maintain its potency and prolong its shelf life.

WHO and UNICEF endorse the integration of Oxytocin into the EPI cold chain in order to improve the availability of high quality oxytocin that is not heat-damaged. This is on condition that the best storage and labeling practices are adhered to at all times to clearly distinguish non-vaccine products from vaccines and diluents.

In Uganda, the EPI cold chain is currently restricted to vaccines. This pre existing well established cold chain system provides an opportunity for delivery and maintenance of exyterin.

You are informed to start using the UNEPI cold chain for storage of oxytocin to ensure delivery of high quality oxytocin for prevention and treatment post-partum haemorrhage.

Thank you.

Dr. Diana Atwine
PERMANENT SECRETARY

CC: Ag. Director General Health Services

- Ag Commissioner Health Services, Community Health
- Ag. Assistant Commissioner Health Services, Reproductive Health
- Programme Manager, UNEPI
- * The Executive Director, National Medical Stores







Lessons learned

- Important to have well-packaged evidence to support your advocacy and evidence generated at the community-level lends credibility.
- Critical to know your **decision-makers and their interests**.
 - For example, chairperson of the MCH TWG previously led work under the UN Commission on Life-Saving Commodities.
- **Coalition building** is important for demonstrating broad-based support for issues.
- Persistence and repetition is key. ABH and partners were in the meeting room, repeatedly raising the issue. This persistence, combined with evidence, convinced decision-makers that they could improve maternal health outcomes by taking action.







Keys to success

- Gathering evidence about the availability of oxytocin and cold chain storage at the facility level, using ABH's Health Facility Assessment tool.
- Building the capacity of CSOs in advocacy strategy development using PATH's 10-part approach.

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Health Facility Assessment Tool

Asikaris (guards)