

**A COMPARATIVE STUDY OF THREE DISTRIBUTION CHANNELS OF
ANTIMALARIAL DRUGS IN EMBU DISTRICT, KENYA**

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ABSTRACT

One of the major interventions in the fight against malaria is prompt treatment with effective antimalarial drugs. However, access to such drugs especially for the poor and marginalized remains a major challenge. This was a comparative study between the government run system of distributing effective antimalarial drugs, an NGO run micro-franchise system (CFW Shops™) and the private antimalarial drug distribution system. The evaluation was carried out at all the CFW outlets and the adjacent government and private health care facilities in Embu District. The study was carried out between December 2007 and February 2008. A total of 58 health care facilities (21 CFW outlets, 18 government and 19 private) were included in the study. Data abstraction forms were used to capture various aspects of the supply-chain management. The SPSS software was used to conduct the student t-test used in data analysis. The results showed that private clinics stocked the highest variety of antimalarials many of which are outdated and inefficient against malaria. There was a significant difference in the stockage of Coartem® between the three distribution channels where 100% of all government health facilities visited reported stocking the drug as compared to only 42.9% of CFW clinics.

The difference in the lead time between the three distribution channels was also found to be significant ($P < 0.001$) since 68% of CFW clinics had a lead time of a single day while 83.3% of government health facilities reported a lead time of three months. The difference in cases of Coartem® stock outs were not significant ($P > 0.05$). The three antimalarial drugs distribution channels were regularly inspected by MOH. A majority of respondents were found to have undergone training in malaria diagnosis and drug administration. The study confirmed that there was a significant difference in the availability of Coartem between the three distribution

channels. It was concluded that the CFW outlets have served the purpose of supplementing government health facilities in expanding access to effective antimalarial drugs to the rural areas. It was recommended that the government should consider changing its system of antimalarial drugs distribution from the “push” to the “pull” system so as to minimize cases of Coartem[®] stock outs in its health facilities.