

Applying a market lens to advocacy for increased misoprostol access in Nigeria

THE BIG PICTURE

Nigeria has the second highest number of maternal deaths in the world. Each year, 150,000 Nigerian women die from post-partum hemorrhage (PPH), the leading cause of maternal deaths. Fewer than 40% of women in Nigeria give birth in health facilities, with a large discrepancy in facility-based births between urban and rural women. Three out of four rural women give birth outside of health facilities, and struggle to obtain life-saving care in their communities. This includes access to skilled birth attendants and critical maternal health medicines such as misoprostol—an easy to administer, safe, effective, and inexpensive pill—for the prevention and treatment of PPH.

With support from PATH, the Generation Initiative for Women and Youth Network (GIWYN) took a market-based approach to designing an advocacy initiative for increasing public-sector misoprostol access in Edo, Imo, and Lagos states. Efforts focused on strengthening capacity of community health extension workers (CHEWs) to understand and implement existing guidelines for community-based distribution of misoprostol and advocating with local government authorities to ensure funds are available and used for procurement of this life-saving drug.

IDENTIFYING THE POLICY CHALLENGE AND OPPORTUNITY

The route to a supportive policy environment for community-based distribution of misoprostol in Nigeria has been long. In 2006, Nigeria became the first country in the developing world to approve the distribution of misoprostol for the prevention of PPH, but with a focus only on facility-level distribution. The 2007 *Integrated Maternal, Newborn and Child Health Strategy* identified community-based services as an area of critical focus, but again, failed to call for community-based misoprostol distribution. For the first time, the 2010 revision of the *National Essential Medicines List* included misoprostol for PPH prevention. And in 2011, Nigeria approved the distribution of misoprostol at the community level in the *National Guidelines and Standards for the Use of Misoprostol in Nigeria*. However, the guidelines have not yet been fully implemented.

Timeline of key policy developments related to misoprostol¹

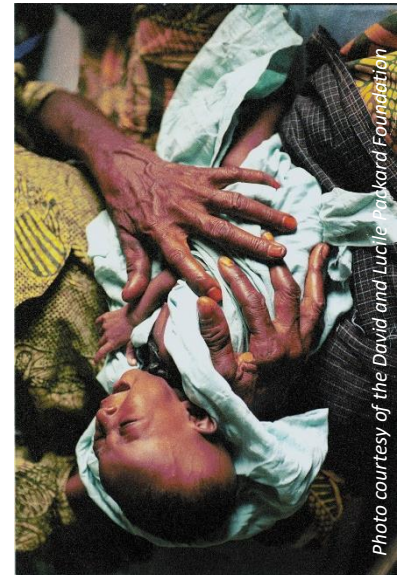
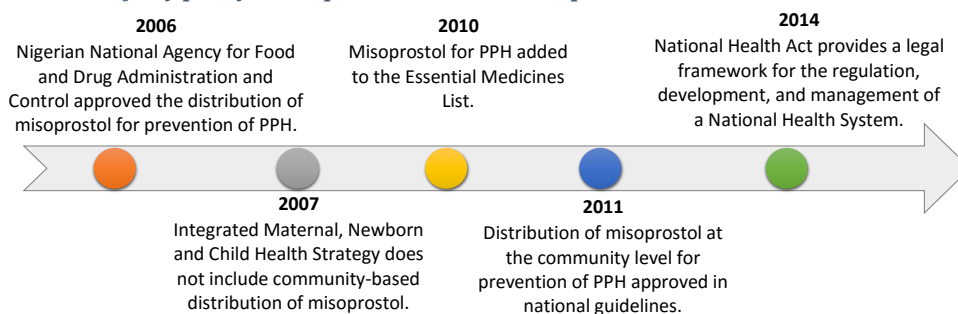


Photo courtesy of the David and Lucile Packard Foundation

Most women in Nigeria—particularly in rural areas—give birth outside of a health facility. Community-based distribution of misoprostol is crucial for preventing post-partum hemorrhage, which kills 150,000 Nigerian women annually.

The National Health Act (NHA), passed in 2014 provides a legal framework for the regulation, development, and management of a National Health System, placing responsibility for promoting quality, safe, and affordable essential medicines with the Federal Ministry of Health. Given its listing in the 2010 NEML, misoprostol is among the essential drugs covered under the act. The NHA also established a Basic Health Care Provision Fund to provide for essential health products at primary health care facilities.

Despite having a broad policy foundation to ensure funding for and provision of misoprostol at the primary health care and community levels, it has remained elusive for many expectant mothers in Nigeria.

GIWYN is a Nigerian nonprofit that works to realize the full sexual and reproductive health and rights in local communities. Through its ongoing work in Edo, Imo, and Lagos states, GIWYN has identified limited access to misoprostol, at the primary health center and community levels, as a persistent challenge each state.

To better understand the root cause of the problem, GIWYN conducted a scoping exercise, framed around the “5As” which characterize well-functioning markets: availability, affordability, assured quality, appropriate design, and awareness.

Characteristics of well-functioning health product markets²



Available: Consistently available through a range of public and private channels.



Affordable: Offered at a price that balances what buyers can afford to pay while ensuring financial incentives for manufacturers and suppliers.



Assured quality: Safe and effective with quality protected throughout the supply chain.



Appropriate design: Designed to meet the context specific health needs and health system constraints of consumers, health care providers, supply chain managers, and other relevant stakeholders.



Awareness: Well-known and demanded by health care providers and consumers to ensure informed choice and rational use.

With support from the National Coalition for Reproductive Justice (NCRJ), GIWYN interviewed 4,000 low-income women living in rural communities and 760 CHEWs from 40 local governments. They also conducted key informant interviews with select government officials. The exercise revealed two underlying causes for underutilization of misoprostol: **low awareness** among CHEWs and community members, and **limited or no stock availability**.

Based on these findings, GIWYN identified two key advocacy objectives to improve access to misoprostol through the public sector:

1. By October 2017, the existing guidelines on community-based distribution of misoprostol for PPH will be implemented in Imo, Lagos, and Edo.
2. By October 2017, the state Ministry of Health and Health Management Board will have misoprostol included in the budget for Edo, Imo and Lagos.

Universe of Market Actors

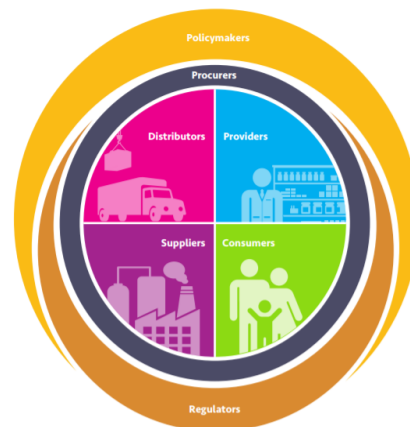


Illustration: Tony Frye

Market advocacy can strengthen the policy environment that governs how health markets deliver products. This approach enables advocates to understand the root causes that keep products out of reach from those who need them, and employs advocacy tactics to engage and inform relevant market actors.

IMPLEMENTING THE STRATEGY

Market advocacy focuses on influencing the policy environment to strengthen the rules that govern how markets operate and ensure health products reach those who need them. GIWYN applied this approach, and lessons from PATH's [Markets Matter Advocacy Guide](#) to its advocacy objectives. Applying a market lens helped GIWYN develop a clear understanding of how advocating for the implementation of existing policies and guidelines can relieve bottlenecks and help ensure product availability.

Provider awareness

Despite the *National Guidelines and Standards for the Use of Misoprostol in Nigeria* outlining community-based distribution of misoprostol, many health care providers—CHEWs as well as pharmacists—remained unaware of these guidelines and unsure of how and when to provide misoprostol for PPH prevention. GIWYN's advocates alerted government officials of this challenge and sought to increase provider awareness of the guidelines.

Based on the findings from their scoping exercise and using the 5As framework, GIWYN produced case studies on current gaps in guideline implementation to alert the Primary Health Board of this issue in each of the three states. In partnership with Women Help Women and Gynunity, GIWYN also conducted a dual-purpose workshop to sensitize 34 CHEWs to existing standards for use of misoprostol, and equip them with skills to advocate with local government authorities for greater access to the drug. Understanding among CHEWs of the guidelines around misoprostol is necessary but insufficient to ensuring women receive the drug when and where it is needed—the product itself must be available.

Public-sector procurement plans and budget advocacy

While the Basic Health Care Provision Fund is intended to provide funding for essential medicines, including misoprostol, GIWYN's scoping exercise and consultative mapping with key informants, revealed that a major bottleneck to misoprostol availability is sufficient funding and timely disbursement of these funds.

At the local government authority (LGA) level, GIWYN focused its advocacy efforts on monitoring to ensure there is a line item for misoprostol included in the the budget of the primary health board and tracking the disbursement process for funds to procure misoprostol for community-based delivery. The processes determining how funds flow from the federal level to the LGAs are laid out in the NHA policy, but in practice, GIWYN found that funds are at risk of being mismanaged or diverted for other health purposes. To ensure sufficient funds are included in the budget and released in a timely manner, GIWYN formed a technical working group with representatives from local government, the Ministry of Health and nongovernmental organizations to monitor the budget for misoprostol.

TOWARD ACHIEVING THE POLICY GOAL

While policy change efforts often take a long time, GIWYN has already seen progress toward closing misoprostol policy implementation gaps—beginning with increasing awareness of the medicine. For example, over the course of the project, there were more than 8,000 calls—a significant increase from previous months—to the GIWYN-



PATH's 10-Part Approach to Advocacy Impact

Successful policy advocacy is guided by systematic analysis and pragmatic processes. PATH's ten-part framework, outlined below, is a methodical approach to policy change that has helped over 600 individuals in more than 100 organizations in countries around the world achieve health policy change.

- Identify the advocacy issue
- State the policy goal
- Identify decision-makers and influencers
- Identify the interests of the decision-makers and influencers
- Clarify opposition and potential obstacles facing your issue
- Define your advocacy assets and gaps
- Identify key partners
- State the tactics you need to reach your goal
- Define your most powerful messages
- Determine how you will measure success

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supported Ms. Rosy hotline which provides information about reproductive rights and safe choices. Eighty percent of these calls were inquiries about about misoprostol. GIWYN has also seen the bureaucratic funding hurdles reduced in Imo where the number of revolving funds signatories has been reduced from four to two, creating greater efficiency in the budget allocation process.

Following their training, CHEWs from the three states felt confident in their ability to adhere to the existing guidelines, and empowered to advocate for misoprostol to be available to do so. With support from NCRJ, the trained CHEWs will organize advocacy meetings with LGAs, ministry of health officials and other civil society leaders in their states to raise awareness about the need to implement the existing guidelines and increase budget allocations for procurement of misoprostol.

LESSONS LEARNED

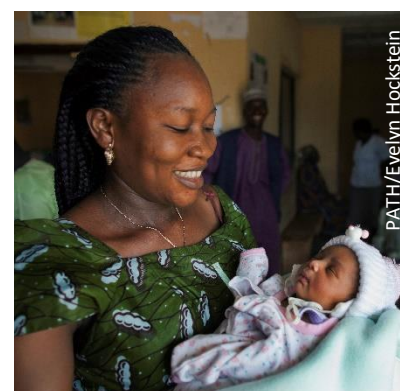
With support from PATH, GIWYN applied a market lens to its misoprostol advocacy, which helped the organization better understand the root causes of misoprostol unavailability, and informed its advocacy objectives and tactics. It also provided a new way to organize evidence and communicate concepts that made notable inroads with key decision-makers:

- **Understanding the policy environment.** Despite having policies “on the books,” misoprostol still wasn’t getting to the women who needed it. Understanding the root causes—bureaucratic budget processes and limited patient and provider awareness—was instrumental in determining the right advocacy objectives and tactics.
- **Collecting and packaging evidence.** By framing the challenges around access to misoprostol through a market lens in their advocacy efforts and case studies, GIWYN helped policymakers better understand the nature of the problems preventing access to misoprostol. In the words of GIWYN Executive Director Sybil Nmezi, it “opened doors that had previously been closed.”
- **Fostering increased coordination.** Applying a market lens helped GIWYN understand the range of actors involved in ensuring community-based distribution of misoprostol, which led them to partner with others to effectively engage the Primary Health Board for the first time on issues affecting health providers and community women.

LOOKING FORWARD

Encouraged by the early success of employing market advocacy, GIWYN plans to continue budget tracking for misoprostol, including at the federal level. It also plans to continue to share its experience and this approach to advocacy, particularly with the other members of the Mama Network across seven sub-Saharan African countries.

1. Adapted from: Misoprostol Policy and Scale-Up for the Prevention of Postpartum Hemorrhage in Nigeria. African Strategies for Health, 2016.
2. Adapted from Healthy Markets for Global Health: A Market Shaping Primer, USAID, 2014.



Ensuring healthy and safe deliveries requires that policies are implemented appropriately and essential health products reach communities throughout the country. By utilizing market-based approaches, advocates can diagnose policy and product shortcomings—providing compelling evidence for decision-makers at all levels to take action.



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455 Massachusetts Avenue NW
Suite 1000
Washington, DC 20001 USA
202.822.0033