ABSRACT TITLE: Understanding access and penetration of Misoprostol across private and Public Facilities in the Management of Post Abortion Care.

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Introduction.

In Uganda, Misoprostol is currently distributed through the National Medical Stores (NMS) and through private sector distributors. However, there have been wide spread reports of shortage in public hospitals and health centres in the country. At the same time there have been reports of Misoprostol expiring from the NMS. At the introduction of Misoprostol, providers were trained and medical detailing strategies to expand Misoprostol availability country wide.

Population Services International Uganda conducted a study in 2018. The study aimed to measure the performance of the distribution system for Misoprostol in public and private sector facilities. The study assessed the geographic coverage, quality of coverage and penetration of Misoprostol in Uganda. The coverage survey was to be used by programs department to evaluate the Misoprostol distribution chain. Since Population Services International (PSI) adapted a Total Market Approach (TMA) it is important to understand the performance of the distribution system in both the public and private sectors.

More than 35% of the Maternal deaths are due to poor care of women who have had both induced and spontaneous abortions. PAC has been widely embraced as an important intervention to address complications related to spontaneous and induced abortion through improving treatment and one of the alternatives on the Market is Misoprostol. Due to the personal nature regarding PAC, women may be reluctant to choose facilities where friends or neighbors may recognize them. Studies have documented that provider attitudes toward PAC clients have an impact on client decisions to seek care. Women especially in rural areas may have little access to transportation or no funds to access PAC.

Methodology

Using a Lot Quality Assurance Sampling (LQAS), 5 regions in Uganda were represented i.e. Central, Western, South Western, Eastern and Northern. All parishes in the country (except Karamonja region) were listed. These were grouped into 5 supervision areas (regions). In each supervision area, 19 parishes were selected using probability proportional to size (PPS) - a sampling technique in which the probability that a particular parish is selected is proportional to its population size (that is, larger parishes have a greater chance of being selected). The list of parishes were obtained from the most up-to-date Ministry of Local Government/ UBOS Administrative units list.

Results

Findings from the survey showed that the urban areas are over served with Misoprostol and the rural rarely access it or afford it. The availability of Misoprostol in facilities/outlets is unreliable and inconsistent because of the number of stock outs reported in the different outlets



Recommendations and Conclusion

Increasing Misoprostol Coverage in Uganda with providers trained with the correct dosage in partnership with the Ministry of Health and other Implementing partners will decrease on the Maternal Mortality by saving lives through the management of Post Abortion Care.