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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 higher-level 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.
 - Unreliable electricity.
- Community findings informed national-level 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.



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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.



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.



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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.

Health Facility Assessment Tool

The health facility assessment tool enables communities and civil society organizations (CSOs) to monitor the quality of health services, including information on human resources for health and absenteeism, stock levels of essential medicines and supplies, and health facility function. It also enables communities to gather evidence for advocacy and accountability efforts.

District Name: _____
 County: _____
 Sub-county: _____
 Name of facility: _____
 Level of facility: _____
 Date of inauguration of facility: _____
 Name of respondent: _____
 Title and contact of respondent: _____
 Date of assessment: _____

Section A: Health Facility Staffing Levels and Absenteeism

Category	No. of approved positions ¹	No. of staff posted at facility	No. of staff present today	No. of out of office for training	No. of staff on official leave	No. of staff absent
Medical Officers						
Clinical Officers						
Nursing Officers						
Enrolled Nurses						
Enrolled Midwives						
Nursing Assistants						
Health Assistants						
Laboratory Technician						
Laboratory Assistant						
Porters						
Asikaris (guards)						