

Prioritization of Drug Restocking at Tariro Polyclinic Hopley to avoid a Health Disaster

INTRODUCTION

The 1948 Universal Declaration of Human Rights and the 1966 International Covenant on Economic, Social and Cultural Rights recognizes the right to health as a human right and calls on members states including Zimbabwe to ensure access to adequate and affordable health care services. The Abuja Declaration of 2001 mandated African States to allocate 15% of their annual budget towards health. The Public 15-17] and the Health Act [Chapter Constitution of Zimbabwe Amendment (No.20) Act, 2013 section 76(1) guarantees right to health care and mandated the Government of Zimbabwe to ensure that every citizen has the right to have access to basic health care

services including reproductive health care services. Tariro Polyclinic opened its doors to the public in July 2019 through a partnership between the City of Harare, the United Nations Population Fund (UNFPA), the International Labour Organization (ILO) and Lafarge, a cement manufacturing company as part of the skills for youth employment and infrastructure development project in Hopley, meant to strengthen Joint Programming on Adolescent and Youth Development (JPAYD). The clinic was constructed with the intention of being handed over to the City of Harare. Hopley is a peri-urban settlement that is located about 17 kilometers south of Harare with an estimated population of over 200,000 with almost 65,000 people aged between 10-24 years. The rapid assessment conducted by ActionAid Zimbabwe and Katswe Sistahood to establish the social, economic, and health issues affecting youths in Hopley, combined with the findings of the community score card (CSC) pointed to the shortage of essential drugs for family planning including the treatment of ailments caused by sexually transmitted diseases (STI), thus posing great risks to the lives of the youth. The increased cases of family planning related ailments and complications caused by STIs ranging from 10 and 15 cases being recorded daily has seen Tariro Polyclinic not able to meet the rising demand for drugs. Of the estimated 65,000 youth population in Hopley, approximately 25,000 of them are sexually active and are engaged in selling sex putting them at greater risk of contracting sexually transmitted diseases.

The community indicated that the impacts of essential drug stock-outs at Tariro Polyclinic in Hopley have put the lives of people especially voung people at difficult positions. Population Service Zimbabwe in concurrence to the sentiments shared by Katswe Sistahood and young people in Hopley, indicated that with most youths in Hopley being vulnerable to STIs, non-availability of some essential drugs complicates their already vulnerable position resulting in some resorting to traditional herbs while others die in silence because of the stigma and discrimination associated with such diseases and their failure to have money to afford the cost of accessing medical services. There has been considerable efforts by Population Service Zimbabwe outreach team to augment efforts by the City of Harare as well the voucher system by Katswe Sistahood in partnership with ActionAid Zimbabwe to provide financial support for the treatment of some of the ailments. Some residents of Hopley outsource services from the nearby suburbs of Glen Norah, Highfields, Mbare, and Waterfalls which are 5kms away

Access to affordable essential medicines is a fundamental human right. The shortage of essential drugs at Tariro Polyclinic is contrary to section 76(1) of the Constitution of Zimbabwe Amendment (No.20) 2013 that guarantees every citizen and permanent resident of Zimbabwe the right to have access to basic health care services, including reproductive health care services¹ and this is supported by SDG 3 that guarantees healthy lives and wellbeing for all ages and buttressed by target 3.8 on achieving universal coverage, including financial risk protection, access to essential health care services, medicines and vaccines for all. The shortage of drugs has magnified impacts that include the interruption or discontinuation of treatment, exorbitant expenditures, treatment failure and drug resistance and ultimately increased risk of illness and death.

1. Exorbitant Expenditures

Shortage of drugs result in increased treatment costs and out of pocket expenses. Prohibitive costs of the drugs increased the likelihood of abandoned treatment as most people in Hopley live below the poverty line and cannot bear out of pocket expenses.

2. Treatment Interuption or Discontinuation

Patients opted for a number of risk-prone practices to avoid treatment disruption during shortages. The testimonies by the youth in Hopley pointed to the use of traditional herbs which further compromises the health of the infected while others resort to counterfeit roadside tablets.

4. Treatment Failure & Drug Resistance

Medicine unavailability contributed to treatment delays, disease proliferation and complications, and treatment failure. Further, they elaborated that shortages place patient at increased risk of medication safety, such as wrong therapeutic alternatives, medication errors and adverse drug reactions.

5. Increased Risk of Complications & Death

The community of Hopley pointed out that compromised patient care and treatment delays increased the risk of complications and death among the patients.

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RECOMENDATIONS TOWARDS MITIGATING ESSENTIAL DRUG STOCK-OUTS AT TARIRO POLYCLINIC IN HOPLEY

Effective and long-lasting response to the impacts of essential drug stock-outs and how it affects health service delivery in Hopley call for transformation in the health delivery system of City of Harare Health Department and Ministry of Health and Child Care. The need to ensure robust national investment on access to health as indicated in the Constitution of Zimbabwe, Public Health Act [Chapter 15:171] and Sustainable Development Goal 3 is critical towards ensuring a healthy and wellbeing population. In support of these efforts, this policy brief recommends:

- Accountability in the utilization of the Health Service Fund with 20% being allocated toward health service delivery.
- Eliminating taxes and tariffs for essential drugs and making them available for free to the public.
- Resourcing local pharmaceutical companies.
- Advocacy for corporate social responsibility to Irvines and Boka to pay tax and make contributions to drug stocks at Tariro polyclinic.
- Strengthened Health Centre Committees where youth participate and influence accountability at local level.
- Promotion of dialogue within the community.

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