



Increasing Access to Malaria Treatment in Tanzania through Accredited Drug Dispensing Outlets

With an estimated 10 million uncomplicated malaria cases diagnosed each year, malaria is a major public health problem in Tanzania. Facing rapidly progressing resistance to the standard treatment of sulfadoxine-pyrimethamine, Tanzania's National Malaria Control Program (NMCP) revised its treatment policy in 2006 to recommend artemether-lumefantrine, an artemisinin-based combination therapy (ACT), as the public sector's first-line treatment for uncomplicated malaria.

While developing its strategy, the NMCP recognized that a public-sector focused program alone would not benefit the majority of Tanzanians who treat malaria at home. Nevertheless, providing malaria therapy through the private sector has challenges. Registered pharmacies are not only scarce outside of cities, but they also charge unaffordable prices for ACTs, while retail drug outlet sellers are untrained and largely unregulated, leaving customers less likely to be sold the proper quality-assured medicines or to be referred to a medical facility, if necessary. As a result, the NMCP's multi-pronged malaria strategy includes plans to distribute ACTs through an innovative private-sector drug seller program, called accredited drug dispensing outlets (ADDOs) or *Duka La Dawa Muhimu* (Swahili for "essential drug shops").



ADDOs resulted from an initiative headed by the Ministry of Health and Social Welfare (MOHSW) and the Tanzania Food and Drugs Authority (TFDA) with technical assistance from Management Sciences for Health (MSH), with a goal of improving access to affordable, quality medicines and pharmaceutical services in underserved communities. To achieve this goal, the ADDO program developed a dispenser training curriculum, covering issues such as how to identify and counsel patients on common health problems and dispense appropriate treatment. Outlet owners are trained in regulations, ethics, and basic business management. The initiative also provides owners with business incentives and strengthens the supervision and regulatory system by delegating related activities to local government authorities

The success of the pilot program in Ruvuma region led to the Tanzanian government's decision to expand ADDOs to 21 regions countrywide. Through the President's Emergency Plan for AIDS

Relief, the U.S. Agency for International Development (USAID) is supporting scale-up in Morogoro region, while the Government of Tanzania is financing the rollout in Mtwara and Rukwa regions. In addition, the Tanzanian government and USAID are expanding the scope of services that ADDOs provide by using them to strengthen community-based health care interventions in child health, home-based care for HIV/AIDS patients, and ACT rollouts.

As part of a broad public health campaign to control and treat malaria in Tanzania, the President's Malaria Initiative (PMI) is supporting existing malaria interventions, including improving access to artemether-lumefantrine through the private sector. With PMI funding, MSH's Rational Pharmaceutical Management Plus Program worked with the NMCP and TFDA to—

- Design a plan to distribute ACTs through ADDOs in the Ruvuma and Morogoro regions
- Allow ACTs to be sold in ADDOs
- Revise the ADDO dispenser's training manual and train dispensers on treating uncomplicated malaria based on the new treatment policy
- Quantify the number of doses needed to treat malaria cases in the two regions
- Collaborate with stakeholders to negotiate and determine the price at which ADDOs will sell subsidized ACTs
- Design an identification mark for the blister-packaged treatments to be sold in ADDOs to differentiate them from public-sector products; separate packaging deters “leakage” of the free public-sector product into the private sector and subsidized product into other private-sector outlets
- Develop tracking tools to monitor and collect data on ACT use

So far, PMI has committed 790,953 U.S. dollars to purchase artemether-lumefantrine in Tanzania, which covers almost 650,000 treatment courses—70 percent of which will be given to children under 12 years. In July 2007, the first consignment of 113,280 treatments arrived and is being distributed in Ruvuma and Morogoro; the second consignment of over half a million treatment courses arrived in September. In Ruvuma and Morogoro regions, 1,363 ADDO dispensers have been accredited and trained and are now identifying and treating uncomplicated malaria with ACTs. In comparison, only 600 pharmacists exist in both public and private sectors in the entire country, which illustrates the enormous potential of ADDOs to improve the community's access to recommended malaria medicines through the private sector.



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