



“PRIORITIES OF HEALTH ECONOMICS IN AFRICA”

Inaugural Conference of the African Health Economics and Policy Association (AfHEA)
10th – 12th March 2009 - Accra, Ghana

Parallel session 6: Economics and Policy Research to Improve Malaria Control

PS 04/6

Importance of strategic management in the implementation of private medicine retailer programmes: Case studies from three districts in Kenya

Timothy Abuya, Greg Fegan, Abdinasir Amin, Abdisalan Noor, Sassy Molyneux, Simon Akhwale, Robert Snow, Lucy Gilson, Vicki Marsh*

*Presenting author - Kenya Medical Research Institute/Wellcome Trust Centre for Geographic Medicine Research-Coast, Kilifi, Kenya

Background: The retail sector has a role in improving access to appropriate malaria treatment. As part of scaling up malaria home management strategy, Kenya implemented a number of private medicine retailers (PMR) interventions. Examining implementation processes is critical to understanding intervention outcomes. This study explored factors influencing programmes' experiences of scaling up of three different PMR interventions. These were a Ministry of Health (MoH)-led participatory skill-based PMR training in Kwale district; a non-governmental organization (NGO)-led participatory skill-based PMR training programme in Kisii central district; and a social marketing approach targeting wholesalers and mobile vendors supported through USAID/AMREF in Bungoma district.

Methods: Findings are based on data from 26 focus group discussions with clients and PMRs, and 19 in-depth interviews with implementing actors. A field diary of events, informal discussions and review of documents allowed a deeper understanding of implementation experiences. Using both inductive and deductive approaches, a range of analyses were conducted to examine experiences within and across sites including stakeholder analysis. The final step of interpretive analysis drew on conceptual frameworks about the scaling up of health care innovations and the diffusion of innovations.

Findings: Implementation in the NGO-led participatory PMR training in Kisii was underpinned by a good relationship between the resource team and the user organisation, flexibility in budgetary and decision making process responsive to local contexts and use of memorandum of understanding to manage inter-organisational networks. The MoH-led PMR training in Kwale was characterised by complex and inflexible funding system, changes in leadership and low communication between

actors. Although the social marketing approach in Bungoma was characterised by a flexible funding system, perceived lack of transparency in management of funds, inadequate management of inter-organisational relationships and passive response to contextual changes led to implementation challenges.

Conclusions: The study highlights the importance of deliberate attention to the management of the implementation process while scaling up PMR interventions. Key issues of management include a strong and transparent management system with a flexible decision-making processes that responds to immediate contextual features, managing relationships between actors and the stability of district leadership. It points to the complexity of working with district health teams during scale up of innovative public health interventions, particularly where these are in competition with existing conventional programmes.