# **Proposal for a Baseline Assessment for the Caribbean Pharmaceutical Policy**

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# Problem Statement

The Caribbean Cooperation in Health, Phase 3 is the health agenda adopted by CARICOM Ministries of Health in 2009. One of the areas for collaboration on health systems strengthening is the "design and implementation of a Caribbean Pharmaceutical

# Design, setting, study population and outcome measures

**Design:** This is a descriptive study. The WHO questionnaires on pharmaceutical outcomes at health facilities and households were adapted to the small island states and administered. Data was analysed

Policy (CPP) and mechanisms to enhance access, quality and rational use of medicines".

The challenge is to develop mechanisms for monitoring implementation of the policy. It is proposed to use the WHO indicators for the pharmaceutical situation, including the WHO level II surveys on access and rational use of medicines at health facilities and households.

# Objective

To propose a baseline assessment for the CPP based on 2 or 3 selected indicators for each priority area based in the WHO Level Il survey

by using EpiData and Excel.

**Setting:** The study was conducted in 3 countries that were randomly tagged A, B, and C (Jamaica, Suriname, and Barbados). In each country, access, quality, and RUM were assessed within the public and private health sectors and in households.

**Study population:** The 3 countries are middle-income countries. The populations of Barbados and Suriname are below one million; Jamaica has 2.7 million inhabitants. On average, 27 public and private facilities were visited and 803 outpatients and 694 households were interviewed per country.

**Outcome measures:** For most selected indicators, results are presented by country as a percentage of total surveyed facilities or households.

Facilities and interviews	(A)	<b>(</b> B <b>)</b>	(C)
Public Health facilities (PHF)	12	30	38
Private pharmacies	30	30	22
Central Medical Store (Public Warehouse)	0	1	3
Patients interview		726	656
Households interviews	317	805	960

## Results

#### **Affordability**



#### **Availability of Essential Medicines (%)**

Indicator	(A)	<b>(</b> B <b>)</b>	(C)
Public Facilities	100	93.3	93
Public Central Medical Store		100	100
Private Pharmacies	94	93.3	100

#### Rational Use of Medicines (%)

Indicator	(A)	<b>(B)</b>	(C)
Prescriptions using INN	36	41	45.5
Persons with a chronic disease were told to take medicines and took them as recommended	73	68	78
Adequate labeling from all medicines found at home	82	76	62

Average cost for a prescription for an acute illness (US\$)	14.3	33	4.00
Average monthly treatment of a chronic disease (US\$)	9.50	21	6.16
Maximum monthly treatment of a chronic disease (US\$)	750	1125	125.90
Potentially catastrophic expenses with medicines (%)	12	7	15

### Quality (%)

Indicator	(A)	<b>(B)</b>	(C)
Expired medicines			
Medicines expired public health facilities	0	0	0
Medicines expired public warehouses	-	0	0
Medicines expired private pharmacies	0	0	0
Adequacy of the Storage conditions:			
in the storerooms of public health facilities.	85	70	60
in the warehouses supplying the public sector	-	90	90
In Private pharmacies	90	80	70
Presence of Pharmacist			
Public	100	62.1	100
Private	96	96.2	100
25 to 50% of prescription medicines were bought	8	0	21
without a prescription			

# Discussion of results

The availability of medicines was superior to 90% in both and public facilities in the surveys conducted. Nevertheless, the countries have different modalities of medicines supply and coverage and harmonization of the mechanisms of procurement and development of pooled negotiation prices can contribute to change the current figures.

In terms of rational use of medicines, there is a lot of room for improvement in all the selected indicators, increasing the use of INN and adherence to treatments and labelling.

The strengthening of the regulatory systems, the adoption of good practices along the medicines chain and professional codes of conduct can contribute considerably to improve the indicators.

## Conclusions

The CPP will provide the framework for strengthening the pharmaceutical sector both at sub-regional and national levels, continuing the work initiated within the current partnership. The indicators presented will certainly contribute to follow up and to assess progress of the policy implementation.

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