

## **2017 health facility assessment for reproductive health commodities and services**

### **Abstract**

Most importantly, reproductive health (RH) services must be of quality in all aspects. Regular supply of medicines for emergency obstetric care (EmOC) & infections and contraceptives to meet the needs of facilities is crucial. In this regard, this survey addressed stock out of RH commodities supply chain (including cold chain); staff training and supervision; availability of guidelines and protocols, availability of information technology, methods of waste disposal and users' fees and finally the views of clients about the services. A national wide cross-sectional descriptive assessment was made to representative sample of 402 health facilities covering three different levels (i.e. tertiary level, district/township level and primary level) from all administratively divided States and Regions. The assessment was conducted in June to August 2017. Survey teams were set up with enumerators, team leaders and field supervisors recruited from Department of Medical Research and Department of Public Health after giving training and pretesting. The 58.4% of health facilities (HFs) could provide at least five modern contraceptive methods. The 49.9 % HFs could provide at least 7 types of life saving RH medicines. Availability of at least 7 life-saving RH medicines was 46.4% in primary level, 50.3% in secondary level, 72.7% in tertiary level HFs and 52.6% private HFs. The 49.1% HFs had stock-out for at least one contraceptive method within the last 3 months. Supply system was mostly irregular and inconsistent. About 50.4% of HFs had trained staff for birth spacing and 21.1% HFs had trained staff for implant. HFs which had not received supervision for RH matters was 37% and it was highest in secondary level (45%). Supervisions were mostly related to quality of reporting, drug stock-outs and the use of guideline/job aids and less related to staff clinical practice and training. Mobile phones and personal computers were mainly used for communication and for record keeping respectively. Wastes were disposed mostly by burying and burning. Forty-five percent and 31.8% of tertiary level HFs used municipal system and incineration respectively. Most of clients satisfied with waiting time, cleanliness, privacy and consultation time. Personal relationship and communication of staff were satisfied by more than 90% of clients. In conclusion, ensuring adequate, timely and need-based distribution of commodities and services to reach targeted population is critical and it requires a comprehensive and systematic supply system that will in turn contribute to achieving RH commodity security. The survey findings would form the basis for measuring progress in family planning and reproductive health services over the coming years and Myanmar's commitment to halve by 2020 the unmet need for family planning among women of reproductive age.