affordability and availability in Kenya’s public health system

Essential medicines and technologies for diabetes are often not available or affordable in the public health system.

A person with type 1 diabetes may need to use up to 57% of their salary towards paying for diabetes care†

Based on the daily wage of the lowest paid government worker calculated over a 30-day month. Treatment regimen includes insulin, hydrochlorothiazide, Enalapril, Atorvastin, blood glucose strips and syringes.

Availability of human insulin (HI) is insufficient in the public system, especially at secondary and primary levels of care*

* Availability of oral antidiabetic medicines and diabetes technologies, such as glucometers and blood glucose strips, is similarly insufficient at the secondary and primary levels of care.

No Empty Shelves is a partnership initiative between PATH and Novo Nordisk. The work is implemented by PATH and guided by a technical advisory committee consisting of global and national leaders in diabetes and supply chain management, managed by PATH.