Lessons from targeting poor Kenyans with long term family planning methods

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Background

Poor Child Health Indicators

– *Childhood Mortality*
– *Immunization*

Poor Maternal Health Indicators

– *Medically assisted deliveries*
– *Maternal mortality*
– *Fertility rate*
– *Contraceptive prevalence*
Reproductive Health – Output Based Approach Project

• Supported by the Kenya and German Governments

• Pilot to explore Output Based Approach to Health Care

• Would this accelerate the improvement of child and maternal indicators?
Project Objectives

Provide quality health care services for:

- Safe motherhood
- Family planning (BTL, IUCD, Implants, Vasectomy)
- Gender based violence recovery

to poor people in 3 rural districts and 2 urban slums through a voucher system by qualified and approved providers
Family Planning: No. of Clients, Voucher Sales, and Target – Phase I (2006 – 2008)

- Kisumu: 3,328 actual, 4,269 voucher sales, 19,000 target
- Nairobi: 1,399 actual, 4,854 voucher sales, 8,000 target
- Kitui: 1,392,168 actual, 1,658 voucher sales, 15,000 target
- Kiambu: 5,177 actual, 14,839 voucher sales, 20,000 target

Actual = 11,296 (18%)

Voucher Sales = 25,620 (41%)

Target = 62,000
Family Planning Results: OBA and Non-OBA Clients

OBA = 11,296 (65%)
Non-OBA = 5,973
Family Planning: Voucher Clients by Method of Choice (Phase I)

BTL – 35%
IUCD – 5%
Implants – 60%

Kisumu
- BTL: 1,367
- IUCD: 93
- Implants: 1,863

Nairobi
- BTL: 152
- IUCD: 145
- Implants: 1,102

Kitui
- BTL: 759
- IUCD: 10
- Implants: 623

Kiambu
- BTL: 1,676
- IUCD: 346
- Implants: 3,155
## Family Planning Clients (June ‘06 – May 2011)

### OBA and Non-OBA Clients

<table>
<thead>
<tr>
<th>Year</th>
<th>OBA</th>
<th>Non-OBA</th>
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<tbody>
<tr>
<td>2006</td>
<td>315</td>
<td>565</td>
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<tr>
<td>2007</td>
<td>6,477</td>
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<td>2008</td>
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<td>2011</td>
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Lessons

• To improve long term FP uptake myths, misconceptions, & socio-cultural issues must be addressed

• Clients empowered by vouchers are choosing to go for quality services

• Competition between facilities is improving service provision

• Removing financial barriers can enhance FP uptake
Critical Success Factors

- Rigorous identification of the poor
- Training of providers & voucher distributors
- Public-private partnership
- Stringent claims and reimbursement process
- Continuous monitoring
Prospects for Scale-up

- OBA made national flagship project in Vision 2030
- Kenya Government has created budget item for OBA
- Project transferred from NCAPD to Ministry of Public Health & Sanitation for scale-up
- Growing interest by partners
OBA can improve access to health care including family planning