



Impact of the Reproductive Health Vouchers Program on Out-of-Pocket Expenditures for Selected Services in Kenya



Timothy Abuya, Francis Obare, Charlotte Warren, Rebecca Njuki, Benjamin Bellows, Ian Askew

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the **Private Sector** *in* **Health**

Background

- The direct costs of maternal health care are prohibitive to many women in low income countries
- Innovative approaches to reduce cost include:
 - Demand-side consumer-led initiatives like cash transfers and tax rebates
 - Supply-side provider-led initiatives like capitation payment, referral vouchers
 - Strategies that integrate supply and demand elements like the output-based approach (OBA)
- No systematic evaluation of OBA to determine impact on:
 - RH behaviors utilization, service quality, target population, **Cost**

Features of the OBA Program in Kenya



- Benefit package
 - Safe motherhood (\$2.2),
 - Long term family planning (\$1.1)
 - Gender based Violence (free)
- Contracting and Quality Assurance
- Voucher Distribution and Marketing
- Claims and Reimbursement Process
- Project management
- Project sites:
 - Kisumu, Kitui, Kiambu, Kilifi districts;
 - Nairobi- Korogocho, Viwandani
 - 54 health facilities- public, private, FBO, NGO



Services covered by the program

- Safe motherhood

- ANC up to 4 visits
- delivery and complications
- PNC up to 6 weeks



- Family planning

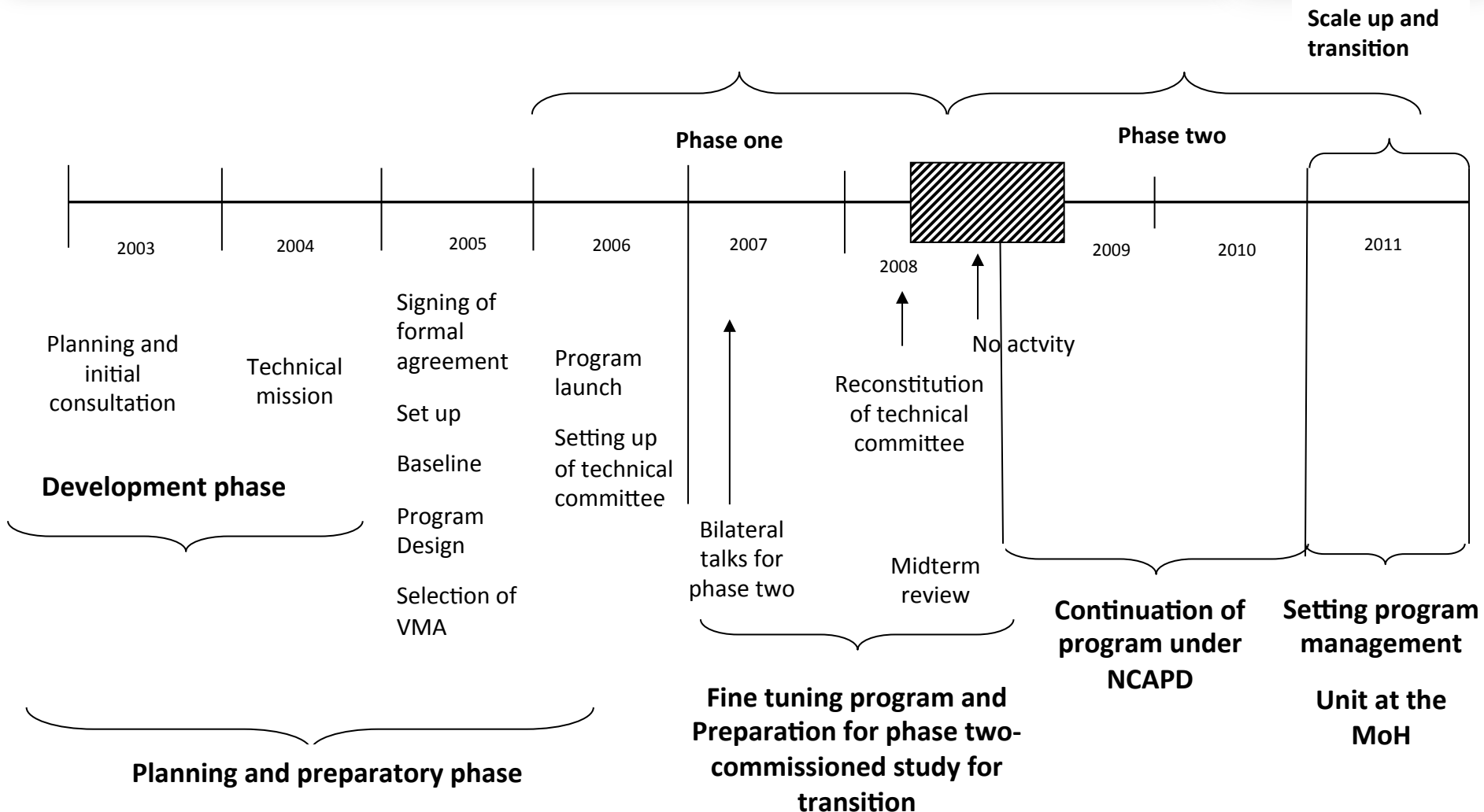
- implants
- IUCD
- surgical contraception



- Gender-based violence

- medical exam, treatment, counseling, support services

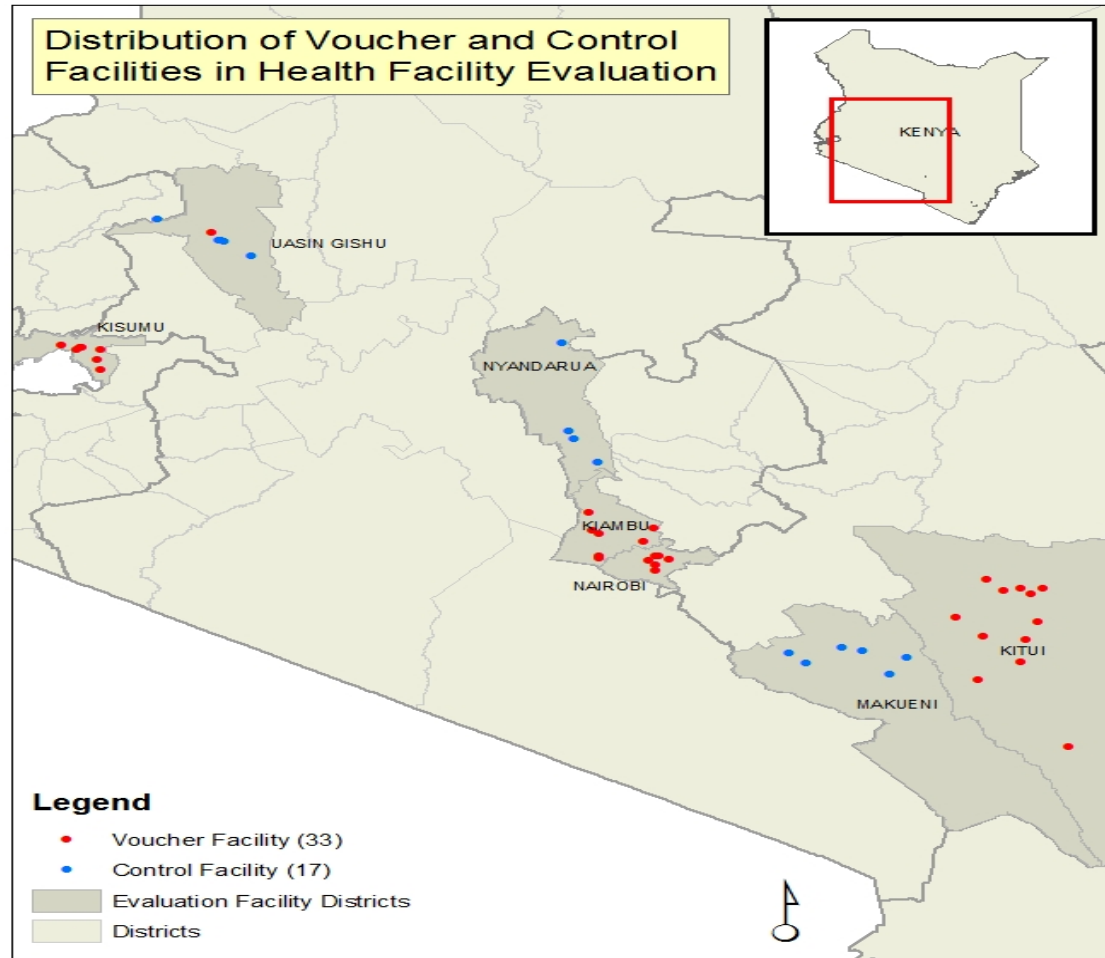
Summary of the Implementation Process



Study Design

- Quasi experimental design -before and after using comparison group
- To assess the effect of vouchers on *increasing access* to quality of and *reducing inequities* in the use of selected RH services
 - examines facility and community-level associations between exposure to the program and out-of-pocket expenditures for reproductive health services.
- Exposure to program:
 - *exposure*: community members living in sub-location within 5km radius to a facility implementing the program since 2006
 - *non-exposure*: living within 5km radius to similar facility that has not been in the program since 2006

Program sites



Data collection procedures

- Household survey conducted in 2010 in voucher and comparable non-voucher sites
 - voucher sites- Kisumu, Kiambu, Kitui
 - non-voucher sites- Uasin Gishu, Nyandarua, Makeni
- 2,527 women (15-49), 658 men (15-54), and 2,494 births
 - women: gave birth past 12 months or was pregnant
 - women and men: sexually active
 - births: 5 years preceding the survey
- Exit surveys for clients seeking for
 - PNC
 - ANC
 - FP services

Characteristics of Exit Survey Participants

% clients in the:	FP clients		ANC clients		PNC clients	
	Voucher	Non-voucher	Voucher	Non-voucher	Voucher	Non-voucher
Poorest 40%	54.4 ^a	36.4	56.8 ^b	36.6	49.4 ^c	33.6
Other 60%	45.6	63.6	43.2	63.4	50.6	66.4

a-p<0.05); b-p<0.01; c-p<0.01

Participants who paid for RH services: client exit interviews

% of clients who paid for:	Voucher users %(n)	Voucher non-users %(n)	All clients %(n)	p-value
Family planning	15.6 (45)	68.7 (265)	61.0 (310)	p<0.01
ANC	5.5 (199)	73.4 (458)	52.8 (657)	p<0.01
Delivery	3.8 (430)	67.8 (621)	50.0 (860)	p<0.01
PNC	2.0 (201)	35.3 (558)	26.4 (761)	p<0.01

Odds of paying for RH services among Exit clients

Service Type	Odds (voucher users=1)	95% CI
Family planning	0.03** (N=302)	0.01 – 0.14
ANC	0.01** (N=608)	0.00 – 0.03
Delivery	0.01** (N=836)	0.01 – 0.03
PNC	0.01** (N=736)	0.00 – 0.05

Median cost of transport to facility: Exit survey

Service type	Users KSh [IQR] (n)	Non-users KSh [IQR] (n)	All clients KSh [IQR] (n)
Family planning	20 [20; 50] (19)	30 [20; 50] (114)	30 [20; 50] (133)
Antenatal care	30 [20; 50] (101)	30 [20; 50] (273)	30 [20; 50] (374)
Delivery	50 [30; 150] (126)	150 [40; 400] (262)	100 [30; 150] (126)
Post-natal care	30 [20; 50] (45)	30 [20; 50] (181)	30 [20; 50] (226)

Out of pocket payment: Population level survey

Service	Exposed to program %(n)	Non-exposed to program % (n)	All women %(n)	p-value
Family planning	73.9 (414)	84.0 (704)	80.2 (1,118)	p<0.01
ANC	61.5 (340)	77.1 (546)	71.1 (886)	p<0.01
Delivery	53.0 (315)	60.1 (474)	57.3 (789)	p<0.05
PNC	23.8 (214)	28.5 (263)	26.4 (477)	p=0.25

Odds of paying for RH services: Population Survey

Service	Odds (Exposed women=1)	95% CI
Family planning	0.5**	0.3 – 0.7
ANC	0.3**	0.2 – 0.7
Delivery	0.6**	0.4 – 0.9
PNC	0.7	0.4 – 1.3

Discussion and Conclusions

- Although the voucher program is associated with reduced likelihood of Out of Pocket expenditure for selected reproductive services factors such as:
 - Transport for voucher users who stay beyond 5Km radius from facility are likely to be prohibitive
 - Other informal payments may increase cost of service delivery for voucher users
 - Staff turn over and providers understanding of the OBA program contribute to OBA clients to pay for services such as registration, laboratory etc
- The OBA is a potential avenue for *increasing financial access to use of selected RH services*

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