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Reproductive Health – Output Based Approach Project (Kenya)

Francis Kundu
National Coordinating Agency for Population & Development



Background & Overview

- **Scheme covers 3 rural districts and 2 urban slums**
- **Target Population: 676,000 rural poor and 105,800 urban poor**
- **Services: Safe motherhood, Family Planning, Gender based violence recovery**
- **Funding Sources: German (KfW) and Kenya Governments**

- **Voucher Price:**

- Safe motherhood US\$ 2.9
- Family Planning US\$ 1.4
- Gender Violence Free

- **Providers: Public, Private, & Mission**

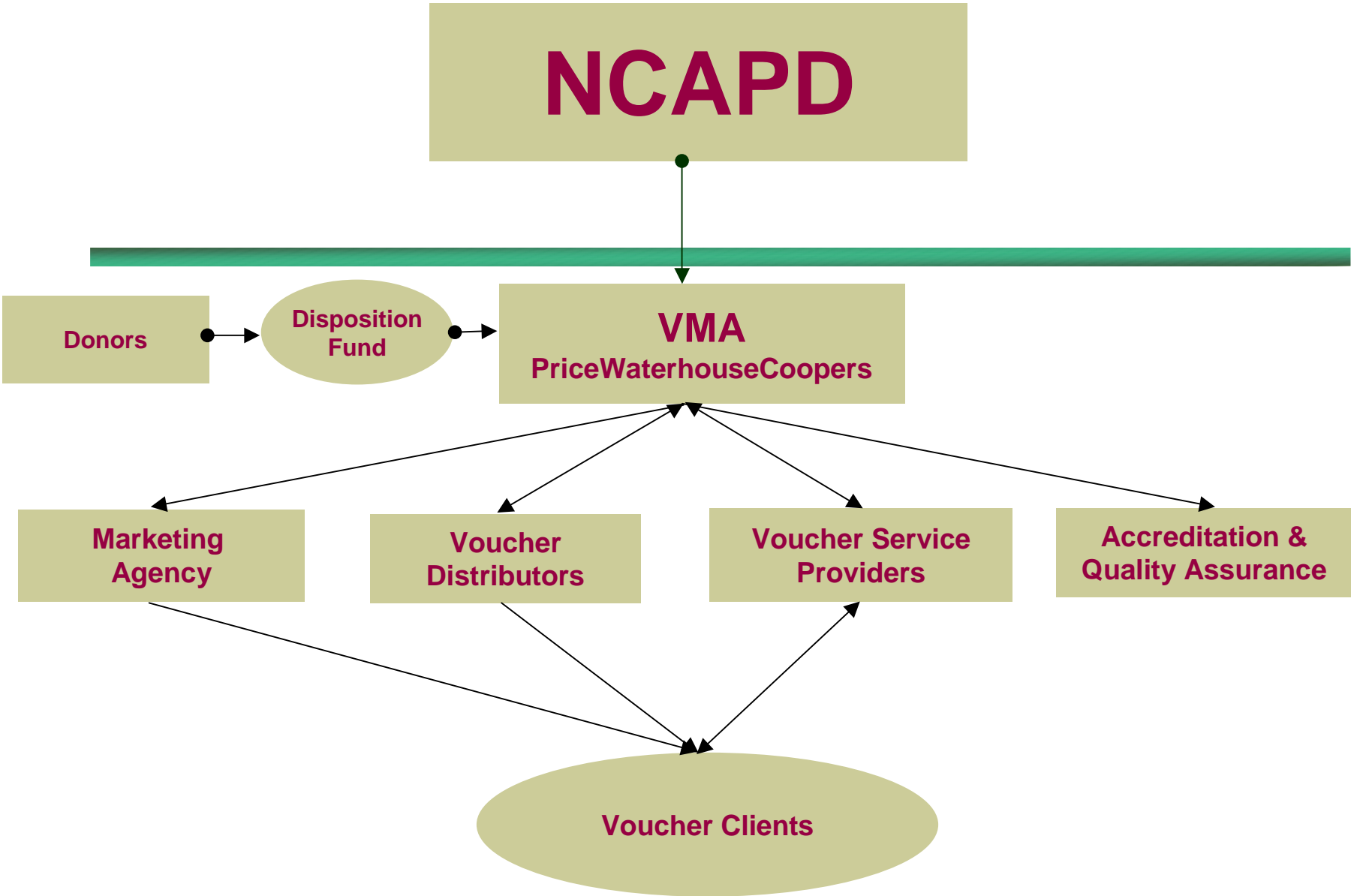
- **Implementing Agency:**

- PriceWaterhouseCoopers and Population Council Consortium contracted by NCAPD to undertake project implementation

Subsidy for the services:

	Kshs	US \$
Caesarian Section	21,000	292
Normal Delivery	5,000	70
Surgical contraception	3,000	42
Implants	2,000	28
IUCD	1,000	14

NCAPD



Poverty Grading Tool:

The poverty tool grades clients on the following:

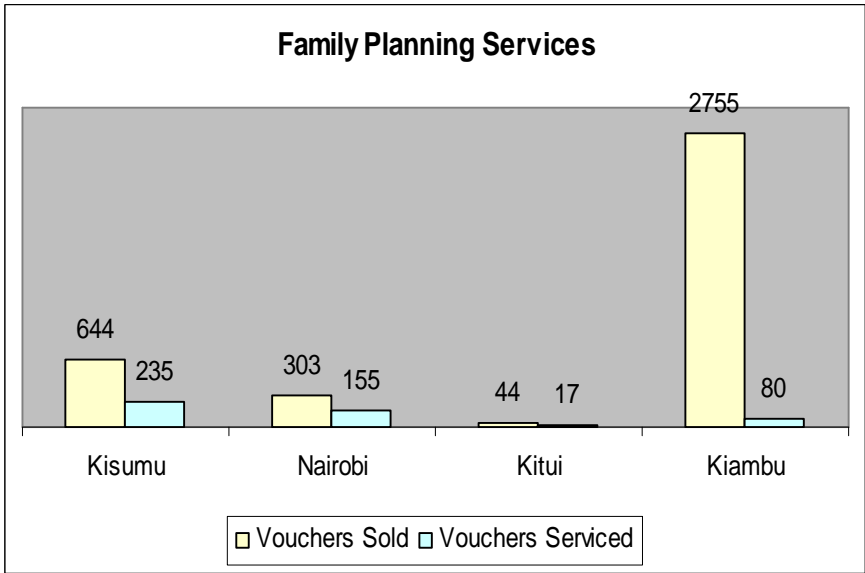
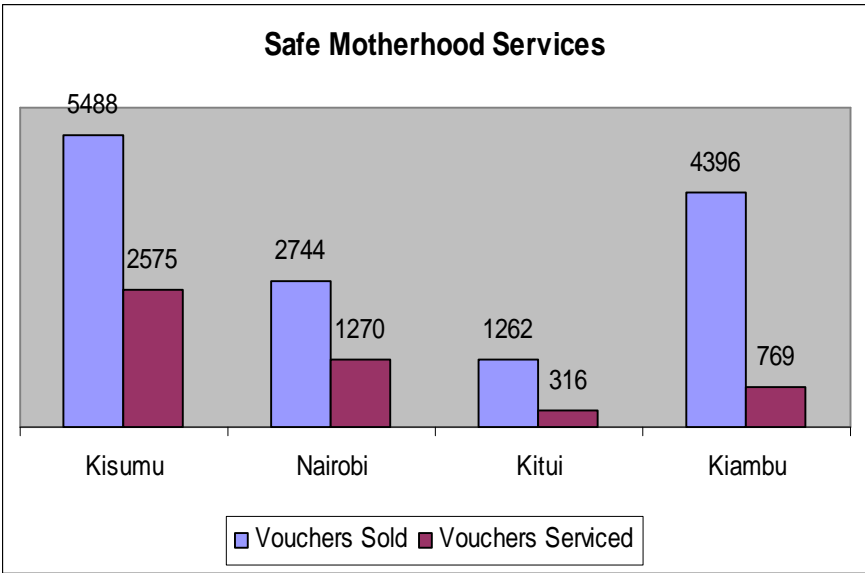
- Housing
- Access to health services
- Water sources and sanitation
- Cooking fuel
- Daily income
- No. of meals per day
- Security
- Garbage disposal
- Rent/Land ownership

Implementation: Voucher Management Agency (VMA)

- **Role of VMA and Procurement Process:**
 - Role defined during the design stage
 - Role: Operationalize project, sub-contracts, accreditation, quality assurance, marketing, claims processing, monitoring, reporting progress
 - Procurement of VMA took 6 months (3 stages)
 - It took 7 months to put project into operation after the procurement of VMA

Relationship between NCAPD & VMA:

- **Consultative meetings**
- **Quarterly reports on implementation**
- **Monthly data (voucher sales, services, reimbursements)**
- **Joint monthly field visits**



- **Addressing leakage/abuse/fraud**

- **Thorough vetting & training of voucher distributors**
- **Random checks by field officers**
- **Collaboration with service providers & public**
- **Thorough scrutiny of claims**
- **Disqualification of errant distributors and providers**

Lessons Learnt:

- **Disposition account arrangement ensures rapid disbursement of funds**
- **Fraud/abuse control needs close and continuous supervision to keep it under control**
- **Efficiency in claims processing maintains the confidence of providers**
- **Providers are using the reimbursement to improve their services**

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- **Skilled attendance at delivery for the poor has improved (improving perinatal out comes)**
 - **Vouchers dignify the poor by providing them with better choices**
 - **Competition between service providers has enhanced the quality of services**

Challenges & Way Forward:

- **Low uptake of long term FP methods & GBVR services**
- **Increase in fraud cases**
- **Accredit more service providers**
- **Publish scientific papers on OBA**



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Thank you

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