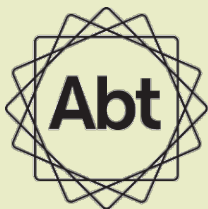


# Increasing Access to Maternal Health Services through Vouchers: The Uganda Healthy Baby Experience

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Banyan Global  
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# Why a maternal health voucher in Uganda?

- Maternal mortality ratio of 430 deaths per 100,000 live births
- 40% of deliveries not attended by skilled personnel
- Widespread FBO and private health infrastructure, but prices out of reach for the poor
- Opportunity to demonstrate potential of demand-side financing



# Background to the Healthy Baby voucher

- Marie Stopes Uganda operated 'Healthy Baby' maternal health voucher from 2006-2012
- An evaluation found shift from home based to facility deliveries and reduction in out of pocket payments in villages with voucher clients
- Private providers primarily use voucher reimbursements for:
  - Construction
  - HR
  - Medical Procurement

# The SHOPS intervention: April 2012-Dec 2014

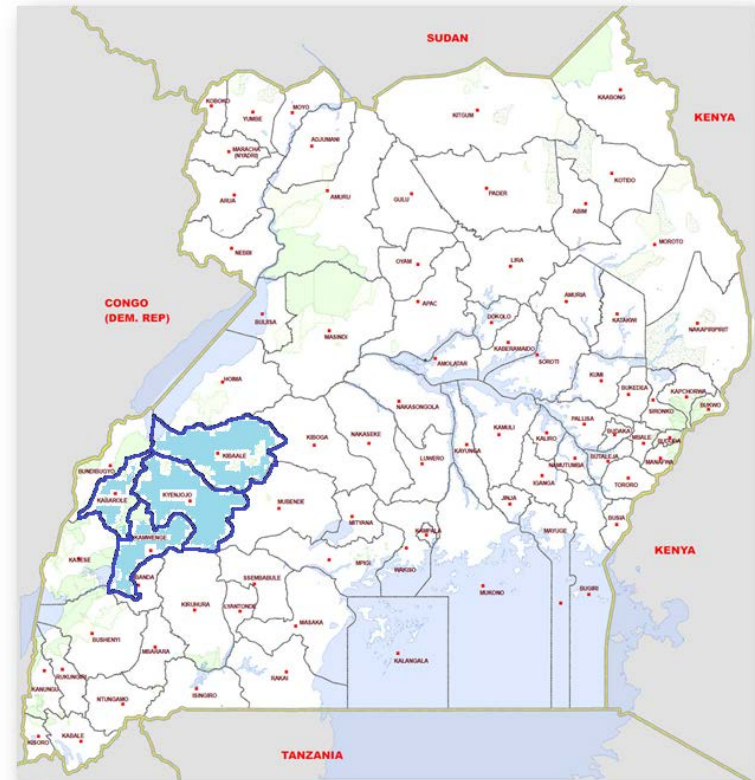
## Objectives:

- Increase access to comprehensive obstetric care for the poor in private facilities
- Improve and maintain quality of obstetric care within the private sector

## Coverage:

- Districts with highest maternal mortality
- 48 facilities (47 private, one public)

***Part of broader Saving Mothers,  
Giving Life initiative in these districts***



# What is the Healthy Baby Voucher?



# How does the voucher program work?



- Vouchers sold to CBDs for \$.70



- CBDs use poverty grading tool to assess eligibility



- CBDs sell vouchers to qualifying women for \$1.20



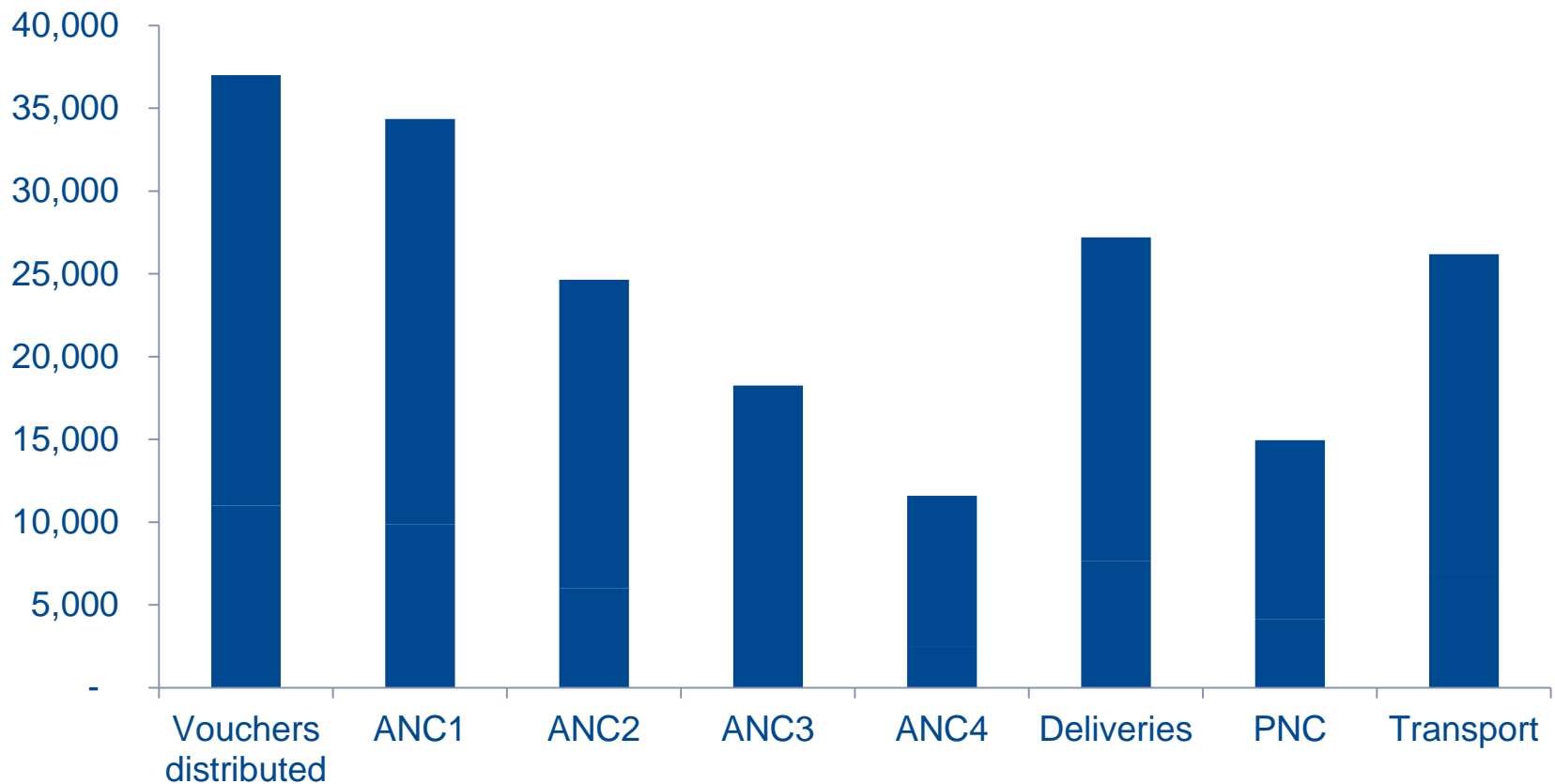
- Women access services from participating health facilities



- Providers reimbursed by MSU for services provided

# Program achievements

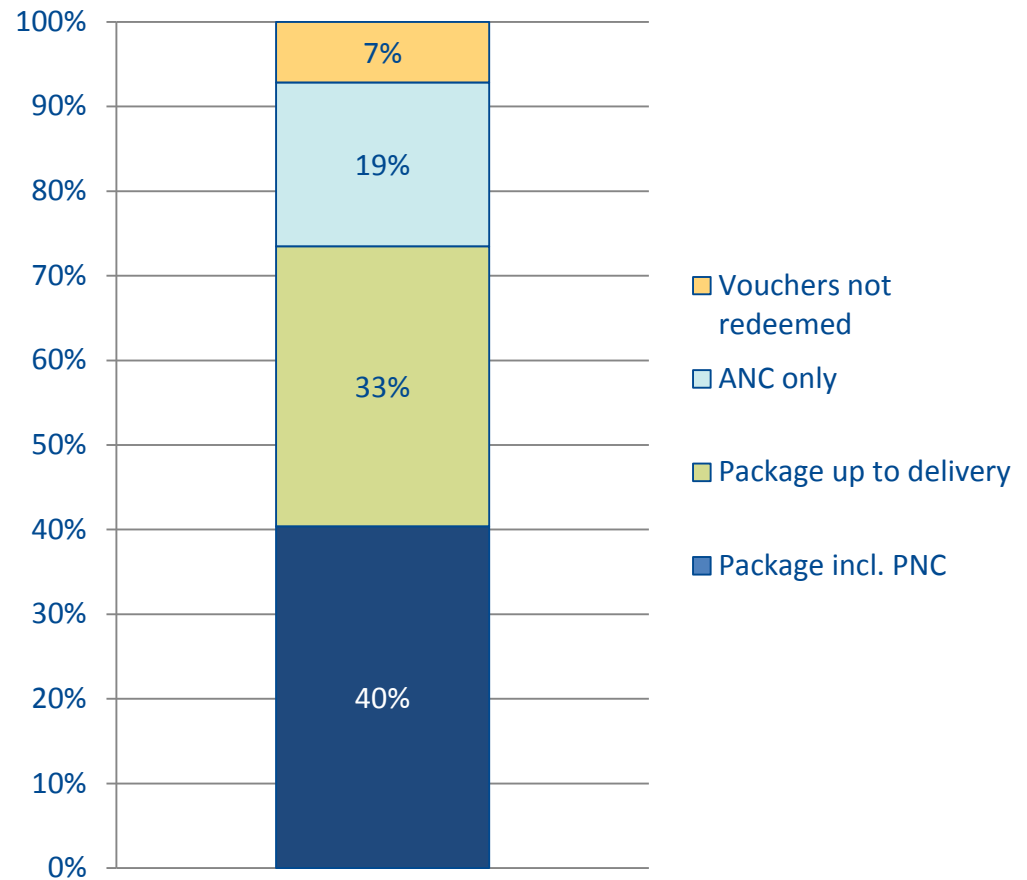
## Service redeemed by type (May 2012 – November 2014)





# Program achievements: vouchers redeemed

- **37,000** vouchers distributed
- **74%** redeemed for a safe delivery
- Redemption rate increased over project - introduction of transport voucher, improved BCC/follow-up





# Program achievements: improving quality of care in the private sector

## Key activities

- Facility staff trained in safe delivery, post-partum FP, PMTCT, business management
- Supportive supervision to ensure maintenance of service standards
- Investment in equipment and infrastructure to meet national protocol

## Results

- 100% of facilities achieved targeted audit score of 80% or higher
- Private providers appreciative of opportunity to strengthen skills

# Program achievements: strengthening health systems

- Provider mentoring/supervision by MSU, MoH district officials and Association of Obstetrics and Gynaecologists of Uganda
- Strengthened public-private linkages led to:
  - Improved **ease of referrals**
  - Increased **reporting** from private sector
  - Ability for private sector facilities to receive **public commodities and supplies** for essential services
  - Collaboration in **transport assistance**

# Challenges

- **Public sector participation:** Mixed experience with introduction of voucher in private wings of two public facilities
- **Short funding cycles** led to disruption in voucher distribution/use
- **Limited success with postpartum family planning** – some providers are FBOs, ad-hoc integration with FP voucher program

# Key learning and next steps

- SHOPS demonstrated proof of concept for the use of vouchers to reduce barriers to maternal health access through the private sector
- Ugandan government now scaling up the scheme, under Ministry of Health ownership, with World Bank funds
- Vouchers can act as a stepping stone in the path to universal health coverage





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