



Tupange

NEWSLETTER

KENYA URBAN REPRODUCTIVE HEALTH INITIATIVE



Family Planning for Under Served Urban Populations: Making a Difference in Urban and National Development

It is an indisputable fact that family planning is one of the most cost-effective ways to reduce maternal, infant, and child mortality. Furthermore, family planning enables couples to determine the optimal timing and spacing of births and to determine the number of children they want and can afford to support. Therefore, access to high quality, voluntary, and affordable family planning is an essential attribute to achieving Kenya's social and economic development goals. For poor underserved urban populations in Kenya, the need is even greater.

The challenge of reaching the urban poor with family planning and reproductive health services is the main thrust of a five year initiative, which

is being supported by the Bill and Melinda Gates Foundation. The goal of the Kenya Urban Reproductive Health Initiative (KURHI), rebranded Tupange (Let's Plan), is to achieve a 20 percentage point increase in contraceptive prevalence rates in five selected urban centers, specifically among the urban poor, by the year 2014. Tupange, working together with a diverse range of local partners, aims to convert unmet need into demand for quality family planning services and to reposition family planning as an accepted societal norm among vulnerable urban populations. The project is currently supporting the provision of quality integrated FP/RH services in pre-selected high-volume clinical settings and through outreach activities in

Nairobi, Mombasa and Kisumu. These services will be extended to Machakos and Kakamega in 2013.

Tupange is being implemented by a consortium of partners led by JHPIEGO. The other partners are the National Coordinating Agency for Population and Development (NCPD), the Johns Hopkins Center for Communication Programs (CCP), Pharm Access Africa, Ltd, and Marie Stopes International (MSI/K). The unique skills and expertise these partners bring to the project will help them to implement the following strategies which will contribute to the overall achievement of the project's goal:

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Tupange Welcomes Susan Rich to Nairobi



Susan Rich, Strategic Program Lead & Senior Program Officer for Reproductive Health, Family Health Division, Bill and Melinda Gates Foundation (BMGF) visited the Tupange Project between 27th – 30th June 2011. She was accompanied by Dr Ron Magarick, Director, Global Programmes, Jhpiego. The purpose of their visit was to monitor the progress the project is making and to meet with senior level officials in the Ministry of Health, as well as other interested partners.

During an introductory meeting with representatives from all Tupange partners, Ms Rich emphasized that 'Tupange provides a unique opportunity to improve on reproductive health indicators for the urban poor. She noted the

importance of implementing innovative mechanisms to improve family planning, commodity security, demand creation and service provision in a cost effective, timely and sustainable manner". Ms Rich and Dr Magarick had the opportunity to hold a series of review meetings with Tupange senior management and staff as well. They also met with Dr Shanaz Shariff, Director of Public Health and Sanitation and with Dr Munyu, of Kenya Medical Supplies Agency (KEMSA). A critical issue during these discussions was to determine the availability of contraceptive commodities in the health facilities where Tupange is supporting in-reach and outreach services to increase uptake of family planning, especially long acting and permanent methods (LAPMs).

Dr Magarick said: 'It is our goal to explore and pursue innovative approaches in the implementation of Tupange. We shall emphasize quality and demonstrate incremental and sustainable results'. In her debriefing with all Tupange partners, Ms Rich encouraged the staff and urged everyone to remain focused on the project targets and deliverables. ■

Kenyan Legislators Push for Increased Funding for Family Planning Programme

Family planning is set to become a top priority in Kenya's national development agenda after Kenyan Parliamentarians resolved to champion and advocate for population issues at all levels. This was the outcome of a retreat held recently in Mombasa for Members of Parliament to review the draft National Population Policy for Sustainable Development. The review was a result of resolutions from the second National Leaders Conference on Population and Development that recognized "Family planning is the missing link to achieving Kenya's development goals articulated in Vision 2030."

During the retreat, the Hon. Wycliffe Ambetsa Oparanya, Minister of State for Planning, National Development and Vision 2030, noted that the high rate of population growth has adverse effects on spending on infrastructure, health, education, environment and water. He further noted the need for a major investment for family planning services, and other social and economic sectors to improve the welfare of Kenyans.

Within the next three months, a six-member team of MPs will be nominated by the speaker of the National Assembly to support the finalization and subsequent adoption of the National Population Policy for Sustainable Development. ■

Conference Resolutions 2010

- Increase funding for RH programmes, including FP, and ensure that budget allocations for family planning include supply chain costs.
- Ensure that procurement matches the well projected contraceptive commodity needs.
- Ensure equitable allocation of funds from CDF and LATF to address RH /FP.
- Prioritise RH/FP as other health issues such as HIV/AIDS and TB have been prioritised.
- Develop a clearly defined funding structure for FP that included all components such as commodity security, advocacy, and capacity building to enable partners to engage fruitfully.
- Mainstream FP in relevant line ministries to ensure budget allocations for RH/FP.
- Work closely with the private sector to finance capacity building programmes on RH/FP particularly for the youth. ■

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- Developing cost effective interventions for integrating quality family planning into existing maternal and child health and HIV services;
- Improving the quality of family planning services for the urban poor with emphasis on high volume clinical settings;

- Testing innovative private-sector approaches to increase access to and use of family planning by the urban poor;
- Developing interventions that create demand for and sustain use of contraceptives.

The Tupange Project Director, Mr Nelson

Keyonzo, explained that "Tupange is a unique project because of its focus on the urban poor." He went on to add that "for the first time ever, Kenya will have data that is specific to the urban poor and this will enable the government to plan more effectively to meet the needs of this population." ■

Tupange takes FP Services Beyond the Clinic Walls



Using innovative approaches to get services to where the people are, Tupange recently organized integrated outreach services in Soweto and Embakasi. Hundreds of people turned up to receive family planning and other health services including deworming, vitamin A supplements, voluntary counselling and testing, TB screening and cervical cancer screening.

Outreach Camps: More services to more people in more places!

- More services means expanding method choices
- More people means expanding access by addressing unmet needs for family planning

- More places means expanding beyond static service delivery points

It was not surprising to note that women and children took advantage of these services while men were conspicuously outnumbered. Mr Vincent Sunda, a Community Health Extension Worker (CHEW), attributes this to stereotypes saying that “most men believe that family planning is a woman’s business. The men do not want to show up because they believe that family planning is for women”.

One thing that was evident during the first health camps was the fact that most people are still influenced by myths and misconceptions about family planning. Victor Ochieng, one of the young men who did come for services echoed Mr Sunda’s sentiments.

He claimed that it was ‘unmanly’ to be seen at such camps seeking for family planning services.

Prior to the onset of service delivery at the camp, the health staff delivered a “health talk” which informed the clients on the family planning that were available.

Twenty year old Caroline Kendi said that she had come to have a depo provera injectable but instead opted for an IUCD after being counselled. The mother of two said that she would not have considered having an IUCD inserted before, as she had heard from other women that it gets displaced and goes to the stomach. “I never thought about long term family planning but now that I do not want another child, I have decided to do go for a long acting method. She was happy with the services offered and lauded Tupange and the District health officers for organizing the outreach.

Ms Dorcas Nzivo, the District Reproductive Health coordinator noted that the people of Soweto slums were happy with the services rendered. “The nearest health facility is miles away. These people only come to the health facilities for curative services. It is highly unlikely for such a person to come all that way to receive family planning,” she stated. She added, “We are happy to team up with Tupange as we have now been able to bring the services closer to the people.” ■

Councillors in Mombasa and Kisumu Open Doors for Tupange

Within Nyali ward in the newly created Nyali constituency, the National Coordinating Agency for Population and Development (NCAPD) brought together 35 councillors from the Municipal Council of Mombasa to sensitize them on the Tupange Project.

A key highlight of the meeting was the presentation of the baseline study that was conducted in all five Tupange sites including Mombasa. The councillors were enthusiastic about the baseline results for their city, although some expressed concern about the respondents’ preference for private facilities over public facilities for FP services and wondered if this was a reflection of public facilities

being underutilized.

The Tupange team clarified other key findings from the baseline by explaining the importance of healthy timing and spacing of births and the need for couples to talk about family planning. This would enable the couple to plan for a better quality of life when they have the number of children they can afford to care for and support.

Meanwhile, in Kenya’s third largest urban centre, Kisumu, Tupange attended the Annual Operational Planning (AOP) meetings in Kisumu East District. Representatives at the meeting were drawn from Ministries of Public Health and Sanitation (MOPHS) and Medical Services

(MOMS), the Municipal Council of Kisumu, and NGOs working in Kisumu. The AOP6 review meeting discussed and reviewed health activities that have already been implemented. Mr Peter Kagwe, the Kisumu City project manager said that Tupange will endeavour to improve the family planning indicators in Kisumu East District through the implementation of a targeted FP program.

Tupange will collaborate with the Ministry of Public Health and sanitation as well as the Ministry of Medical Services to improve the capacity of FP service providers and FP commodity security. The project will also actively work to reposition family planning in the health and social sector.

To their credit, the councillors in both cities pledged their support for the project activities and outreaches and urged the Tupange city team to keep them involved in and updated on the activities within their wards. ■



Tupange Supports the Distribution of Contraceptives to Nairobi District Stores

To address the challenge of contraceptive stock outs and to achieve its goal, Tupange has put in place various service delivery strategies and interventions aimed at ensuring a constant and consistent supply of contraceptives to the facilities to ensure that all the clients receive their preferred method of contraception.

Therefore when Tupange looked at the availability of contraceptives, they concluded that Nairobi was the hardest hit by contraceptive stock outs. The city has been experiencing recurrent contraceptive stock-outs for the last several years. Most district stores and facilities have not received commodities since mid-last year and some reported not to having received commodities in almost two years.

With this information, the Tupange contraceptive security team approached

the Division of Reproductive Health (DRH) and Kenya Medical Supplies Agency (KEMSA) with a plan to distribute contraceptives within the city to ensure availability of contraceptives in the city.

Tupange worked with the District Reproductive Health Coordinators (DRHCs) to prepare the estimates of contraceptive quantities needed for a three month supply in their districts including a one month supply buffer stock. Tupange then discussed this issue with KEMSA, who is responsible for transporting and distributing these commodities to the district stores in Nairobi. The partners agreed that DRH would provide transport, and Tupange would fuel and provide incidentals to the drivers and accompanying staff.

The commodities were then packed and ready for distribution. They were the

distributed to the: Dagoretti, Embakasi, Kamukunji, Langata, Makadara, Njiru, Starehe, Westlands, Kiambu West and Kiambu East. Once the contraceptives reached their destination, they were off-loaded and verified by the stores personnel together with the DRH and Tupange representatives.

This was the first time that Tupange collaborated with the DRH and KEMSA and in spite of a few challenges, the whole process was successful and all the districts and facilities targeted got sufficient stocks to last them at least 3 months. The successful distribution of contraceptives to district stores and facilities in Nairobi is a clear demonstration of the importance of good collaboration, coordination and personal commitment among various stakeholders. Tupange plans to replicate this process in Mombasa and Kisumu. ■



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