Reproductive Health-Output Based Aid: Lessons from integration of safe motherhood, family planning and gender-based violence recovery programs in Kenya [1]Muga, Richard O., [2]Mumah, Solomon J. and [3]Kundu, Francis W.

Abstract

Following the revelation that only 42% of all births in Kenya are assisted by a health professional and that over 400 per 1000 live births die during or immediately after delivery, yet unattended delivery is the greatest risk factor for maternal mortality and morbidity, the government of Kenya, based on a financing agreement with the German government has embarked on a performance-based reproductive health program (Output-based Aid – OBA) that links the government's goal of improving the health of women with incentives to reward service delivery. The objective is to improve access of the poor to quality reproductive health services. The three-year OBA pilot program is being implemented in three rural districts: Kisumu (n=8), Kitui (n=7) and Kiambu (n=8) as well as the informal settlements of Korogocho (n=8) and Viwandani (n=12) in Nairobi. This paper identifies the most effective means of reducing maternal mortality and morbidity by ensuring the provision of safe motherhood package for antenatal care and attended delivery. Preliminary results show that within the first six months, some 1798 safe motherhood, 149 family planning and 9 gender-based violence recovery voucher claims had been processed. Close to 1000 cases of normal deliveries had been redeemed while all facilities involved in the project implementation recorded highest number of claims on family planning services every month. Could this be the long searched-for solution in a bid to turn around undesired trends within Africa's reproductive health cycles?