

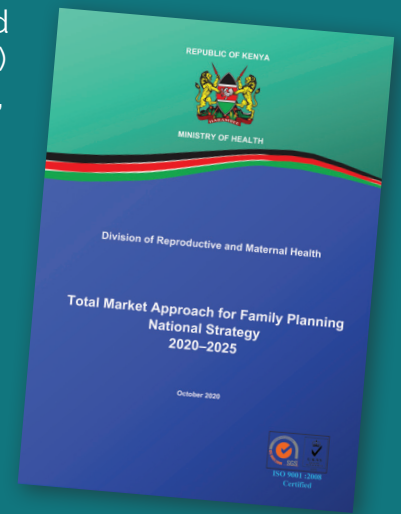


Total Market Approach for Family Planning National Strategy 2020–2025

Dissemination brief

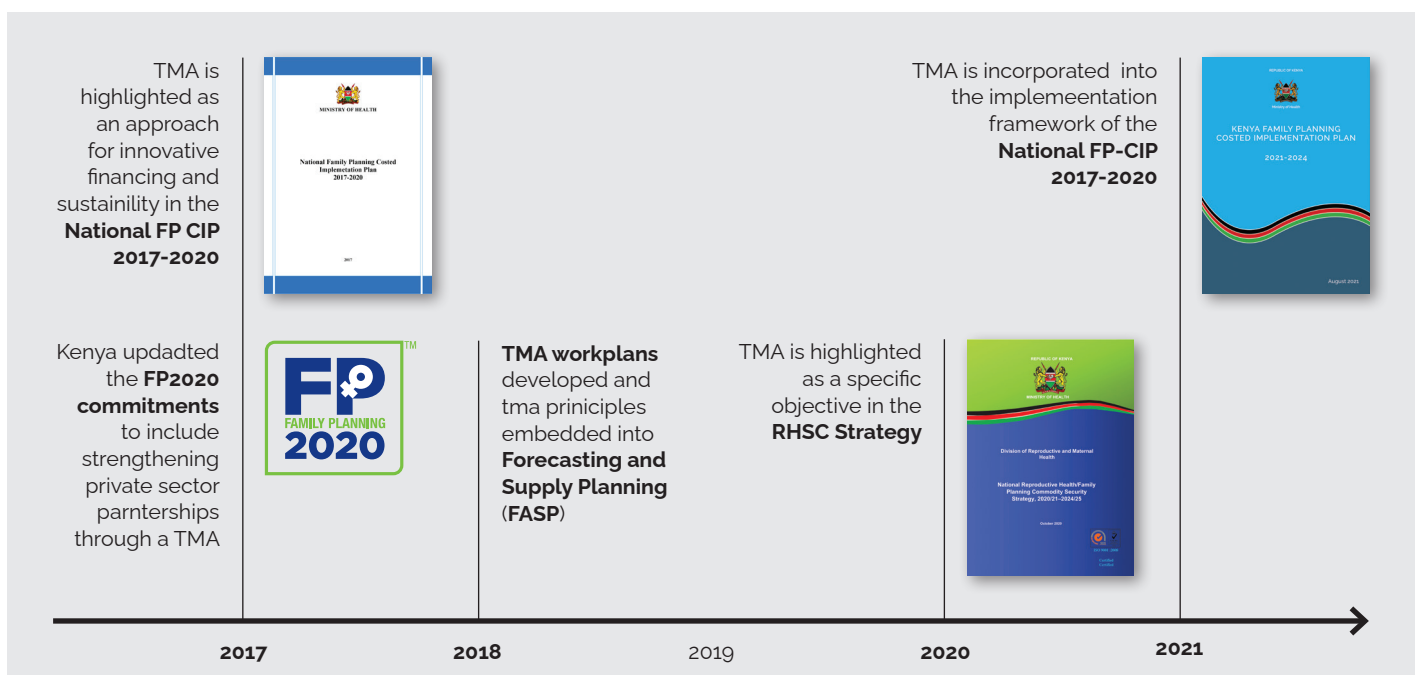
A series of market analysis carried out between 2016 and 2018 revealed the potential to considerably increase access to family planning (FP) commodities by harnessing the comparative advantage of all sectors, including the public, not-for profit and commercial sectors, to reach particular user segments. The process of **developing and stewarding a common strategic framework among FP suppliers and funders to maximize the use of FP commodities among all users** is known as a Total Market Approach (TMA).

In 2020, the Ministry of Health (MOH), led by the Division of Reproductive Health (DRMH) convened a range of stakeholders across sectors to develop the TMA for FP National Strategy which has as its vision that **by 2024 Kenya's total FP market is more sustainable, efficient and equitable for its people.**



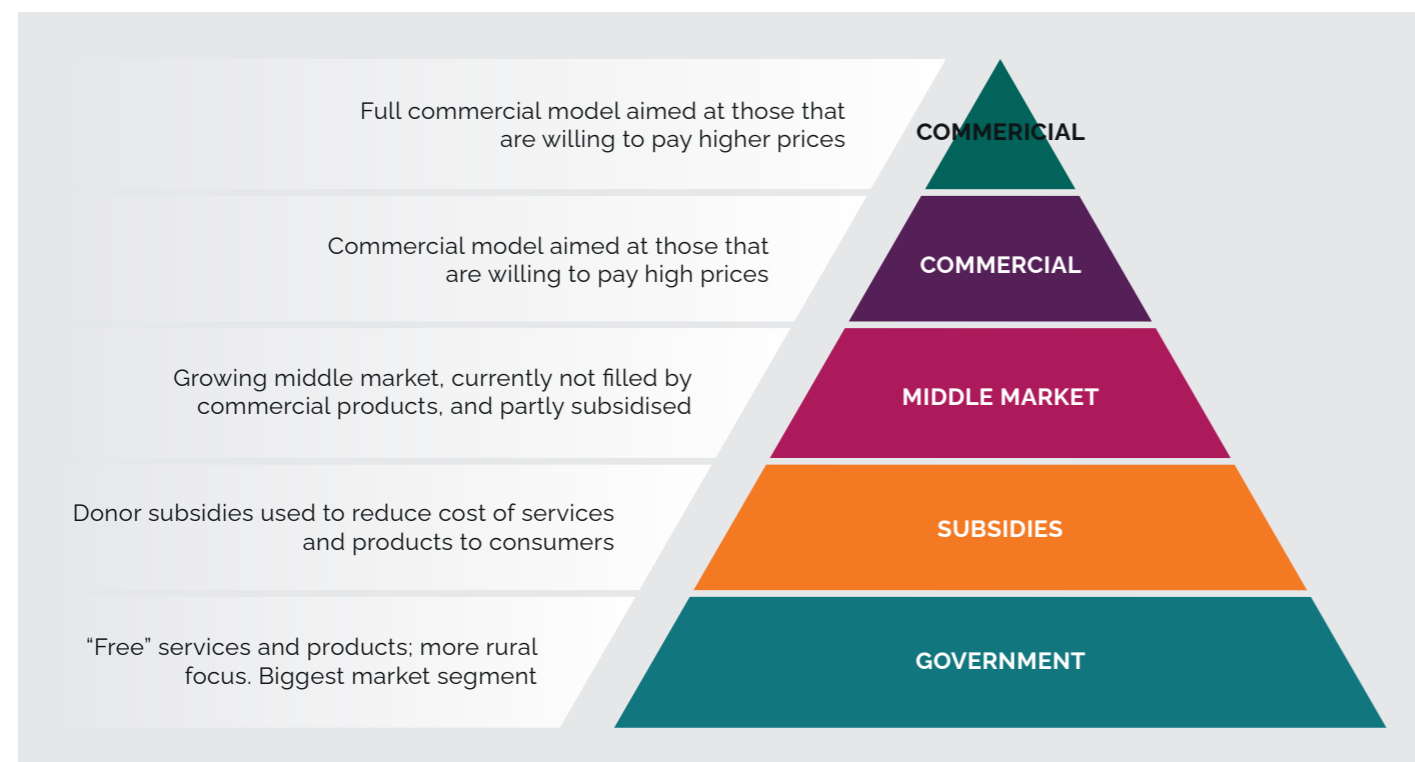
Kenya's experience of using a total market approach

The strategy builds on extensive FP market analyses carried between 2016 and 2018. Since then, TMA work plans were developed in 2017 and 2018, and TMA principles have been embedded into national processes, such as Forecasting and Supply Planning (FASP), as well as national commitments and plans, including the updated FP2020 Commitments in 2017; the National Family Planning Costed Implementation Plan (FP-CIP) (2017–2021), the Reproductive Health Commodity Security Strategy (2020/21–2024/25) and the National FP-CIP 2021–2024.



How the total market approach works

TMA works through a segmented approach, whereby the various market players meet the needs of FP users based on their distinct roles and comparative advantage, as shown in the diagram below.



The TMA Strategy will support a stronger and diversified supply chain that is more efficient, follows good market principles and reduces distortions and stockouts of FP products, technologies and health technologies across Kenya.

Implementation of the TMA Strategy will help achieve:



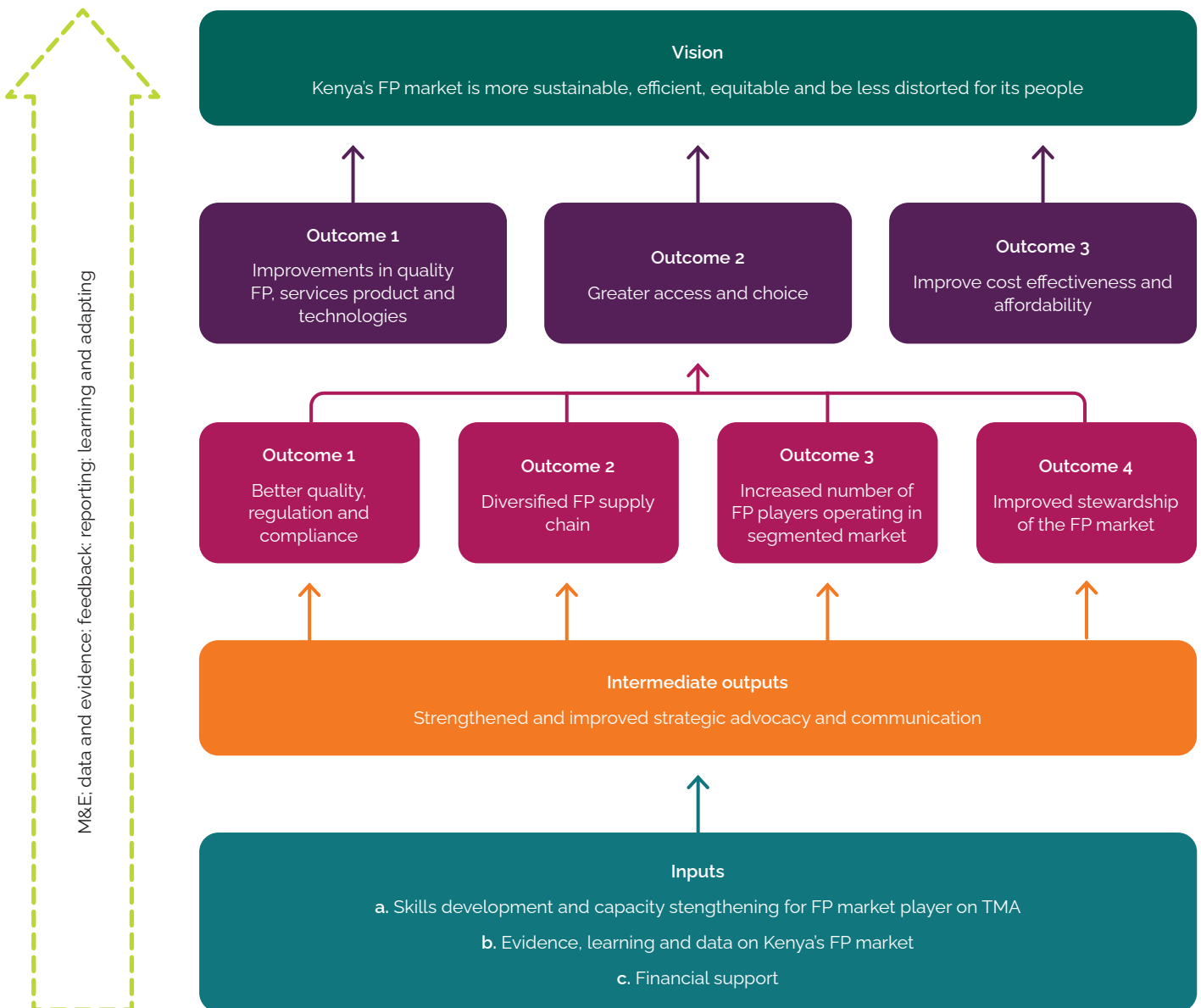
Kenya's family planning market

The TMA Strategy was designed to respond to the key contextual factors that shape the current family planning market in Kenya. These are outlined below.

	<p>Access: Kenya's modern Contraceptive Prevalence Rate (mCPR) has increased significantly from 39% in 2003 to 58% in 2014. This increase is largely driven by increased access to and use of injectables and implants. This picture masks considerable inequities, however, and in some counties access to modern contraceptive methods remains very low.</p>
	<p>Market share: The provision of FP commodities and services through the public sector and social marketing organizations has remained largely unchanged in recent years. The commercial sector has, by contrast, grown significantly from 1% in 2015 to 20% in 2018. This growth is largely driven by sales in emergency contraceptives and combined oral contraceptives.</p>
	<p>Pricing: FP clients in Kenya have been dependent on government-procured supplies for many years and large proportions of clients that can afford to pay get their supplies at subsidized rates (from both public and private sector providers). This has made it difficult for the commercial sector to compete for market share.</p>
	<p>Financing: Over the last decade, investments in FP from both domestic and international sources has been very erratic. There was a dramatic drop in funding from the GoK following the introduction of devolved powers in 2013/14. This has gradually increased as roles and responsibilities have become clearer, though not at a consistent rate. At the same time, there has been an overall downward trend in funding from donors as part of the growing push for domestic financing. The considerable funding gap for FP commodities points to a need for more efficient and targeted allocation of resources.</p>
	<p>Distribution: A 2018 study showed that a significant proportion of government-procured commodities are distributed to the private sector, including both for-profit and not-for profit providers. These commodities are received for free (though they do pay for associated transport and storage costs) and sold to clients for a fee. The study also indicated that this contributes to stockouts of FP commodities. To date, there are no regulations in place relating to this practice.</p>
	<p>Data: market research carried out by the MoH and partners has helped stakeholders to better understand Kenya's FP market, including aspects of the market that are not working effectively or efficiently. This has also helped to build momentum for the TMA process. Further investment is needed for regular market research to inform programming and advocacy.</p>

Overview of the TMA strategy

The graphic below outlines the TMA vision to be realized by 2024; the three outcomes that are expected from the strategy; the four outputs and the intermediate output that will play a cross-cutting role and the strategic inputs to enable the strategy to be supported and delivered.



Operationalising and monitoring the TMA strategy

The TMA for FP Strategy shall be stewarded and managed by the MoH, through the DRMH, which will contribute to increasing the overall sustainability of the FP market.

The TMA Strategy includes a monitoring plan with annual indicators to track progress against each of the outcomes and outputs. It also includes a two-year action plan with roles and responsibilities detailed for each. The majority of actions are to be led by the MOH, DRMH, the Pharmacy and Poisons Board (PPB), KEMSA and development partners.

Where to access the strategy

The full version of the National TMA Strategy for FP can be accessed from the MoH website (<https://www.health.go.ke/>) or hard copies from the Family Planning Manager at the Division of Reproductive and Maternal Health.



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