

Journey to Self-Reliance



In 2008 Population Services Kenya (PS Kenya) began a journey that now provides over 3.5 million Kenyans with better healthcare each year. Tunza was established in response to a need that PS Kenya had observed in its work delivering reproductive and family health services. Developed as a social health franchise, Tunza provides family health services through an innovative franchisee model. An important aspect of the model is ensuring franchisees have the requisite business and management skills to keep their facilities open, thus providing their critical services.

TOWARDS SUSTAINABILITY

Since its inception in 2008, Tunza was generously funded by several donors. LAD, USAID, DFID, AHME and Bill and Melinda Gates Foundation were among the organizations keen on widening the scope of actors who delivered health services. By 2015, however, the donor landscape globally was beginning to change. The overall spending on foreign aid was set to reduce in coming years, and the quest for truly sustainable programmes had become a central conversation for funders in health, as well as other sectors.

Aware of this evolving landscape, PS Kenya began brainstorming internally around how to turn the lessons of the first seven years of Tunza into a long-term, sustainable initiative. The Tunza business development programme had perhaps given them the greatest insights to a possible next step.

Many of the small-scale providers had significantly grown their facilities since joining the Tunza network. The growth was visible in various ways. Some providers moved to larger premises, others saw an increase in the number of patients they served and scope of services offered, while others grew in the number of staff they had on payroll and in their balance sheets. Investments in new diagnostic equipment ranging from laboratories to full-scale operating theatres was a reference of growth as well.

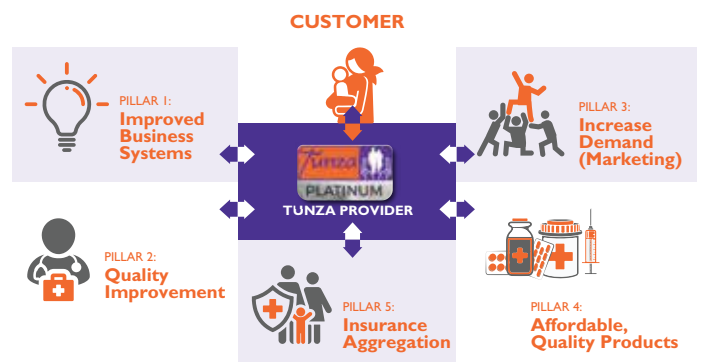
The providers who were enrolled in the business programme provided specific metrics that showed that the facilities had indeed moved up the chain to being strong enterprises from a financial standpoint. The providers took it upon themselves to form their own forums as a way to encourage and inform each other. In essence, building a network within the Tunza network that was self-propelled, peer-informed and user-defined. In many ways, the value of Tunza to the providers was clear — which led to the question:

Would providers be willing to pay for a package of growth-oriented services that Tunza could provide?

Exploration around this question began in earnest in 2016. PS Kenya sought a consultant team which spent time engaging directly with providers in the network, learning which revealed pain points, and offered a potential entry to a more nuanced programme of support. By the end of 2017, a business model that known as “Tunza Platinum” that was provider-informed was developed.

The new network that would be funded by member contributions, and that would offer a bespoke set of services themed around five core value proposition pillars:

TUNZA PLATINUM OFFERING



The task then became to find out whether there was willingness to pay by providers, and if so, at what threshold. After interviewing over a hundred providers, PS Kenya learnt that indeed the providers were ready to invest in a support function. From their perspective, the value the network brought far outstripped the modest fees that had been proposed. An initial set of 63 facilities were selected and confirmed for the pilot of Tunza Platinum. They would be the vanguard for the next step of the Tunza journey.



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