DKT INTERNATIONAL

Social Franchising

It's helping DKT International's customers secure better access to high quality, affordable family planning

or her first few years of life, Jyoti Devi lived with four siblings in Musahar Community in Bihar, one of the poorest states in India. When she was just five years old, Jyoti's parents abandoned her at a school for poor children. Though she had every reason to despair, Jyoti seized on her plight as an opportunity to study and learn, showing wisdom and resilience beyond her years.

These traits served her well later in life as she worked as a teacher, seamstress, school founder, community organizer and anganwadi (health care) worker.

It was her interest in women, children and their health that led Jyoti to Janani, DKT International's affiliate in Bihar, and its *Surya* social franchising program in family planning in 2009. As a *Surya* health promoter, she rode a motorcycle to remote villages all over Bihar, encouraging both women and men to try family planning at *Surya* and franchise clinics. In 2010, Jyoti was elected by her community to the Bihar legislative assembly with the recommendation of the chief minister of Bihar.

Jyoti is just one example of DKT International changing lives with its growing social franchising work. Just as it has capitalized on



Jyoti and her grandson.

social marketing to become one of the world's largest private providers of family planning to low-income people in the developing world, DKT increasingly uses social franchising, a highly effective and growing channel for delivery of family planning products and services. DKT implements social franchising through public and private clinics, midwives and rural medical practitioners — whatever

works best in each of the five focus countries of Africa and Asia — and it is accounting for a growing share of DKT's health impact.

Social franchising aims to increase the number of providers and health services offered (access), to provide services at an equal or lower cost to other delivery options (cost-effectiveness), to provide services that adhere to quality standards (quality) and serve all population groups, especially those most in need (equity).

Simply put, a social franchise is a network of private (and sometimes government) health providers (the franchisees) whose products and services are standardized and promoted by a single entity (the franchisor) that is, in this case, DKT. Franchises are demonstrating

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that quality health products and services can be delivered cost-effectively at increasing scale. A 2011 study showed that social franchises of private family planning providers "were found to greatly improve the quality of care in family planning..."

DKT's goal is to improve people's health by turning non-users of contraceptives into users. Moreover, once those people are users, it hopes they will shift — over time — from free to partially subsidized (social marketing) to non-subsidized (commercial) products. The idea is that the product will gradually be less and less subsidized by donors, ensuring eventual sustainability.

DKT started its work in social franchising in India in 2000 and, since then, has launched programs in Indonesia, the Philippines, Mozambique and Sudan. DKT tailors its

What is Social Franchising?

A social franchisee is defined as a network of private health providers with the following characteristics:

- 1. Outlets are operator-owned.
- Payments to outlets are based on services provided, although the mechanisms of payment may vary.
- **3.** Franchised services are standardized, although additional, non-franchised products and services may also be offered.
- **4.** Clinical services are offered, with or without franchise-branded commodities.
 - —University of California, San Francisco Global Health Sciences

approach to the realities of each country, so no two programs are the same. However, they all share a few common characteristics:

- All the social franchise networks are branded.
- All deliver both products and clinical services.
- All create demand to bring people to these products and services.

But each program is unique in its own way. Here are snapshots of DKT's five social franchises:

India:

Social franchising since 2000.
Social franchising brand: Surya.
Number of sterilizations:
50,000 through 136 clinics

Janani, DKT's affiliate
in East India, operates
DKT's flagship social
franchising program Surya

Family Planning Central Contraception

in Bihar, Jharkhand and Uttar Pradesh, three of India's poorest states. Surya, considered a "classic" social franchising model, provides products and services through franchised and DKT clinics as well as rural medical practitioners. It sells Surya brand condoms, oral contraceptives (OCs), intrauterine devices (IUDs) and other contraception, and conducts female and male sterilizations as well as abortions. DKT also partners with the government to strengthen service delivery at public health facilities. A unique feature of the Surya franchises is that they do not charge for sterilization, which is subsidized by the government.

Janani website: janani.org/

Indonesia:

Social franchising since 2001.
Social franchising brand: Andalan.
Midwives trained: More than 40,000

DKT Indonesia, the largest contraceptive Andalan social marketing program ALAT KONTRASEPSI in the world, achieved more than 6.6 million Couple Years of Protection (CYPs) in 2011 as its contribution to one of the great family planning success stories. The social franchising program Andalan (meaning trustworthy in Indonesian) is positioned as a reliable, one-stop shop for midwives with highquality, affordable contraceptives and reproductive health products. DKT Indonesia's training of more than 40,000 midwives in IUD and implant insertion and removal supports the social franchising program and has helped Andalan brand some 10,000 midwife clinics. DKT regularly reaches or visits at least 10,000 midwives each month, and more than 4,400 have signed contracts with DKT.

Andalan website: www.tundakehamilan.com/

Philippines:

Social franchising since 2005.
Social franchising brand: POPSHOP.
Current number of franchised clinics:
300+

More than 300 POPSHOP clinics ensure access to high-quality and affordable reproductive health products, services and information to nearly 50,000 couples in 2011 PO

50,000 couples in 2011. *POPSHOP* franchises set up family planning "corners"

in government clinics that are seeking a sustainable way of offering products. DKT helps them avoid stock-outs, with contraceptive security as the overriding goal. DKT provides training to government providers and promotes increased contraceptive use through education and branding. In addition, *POPSHOPs* continue to offer profitable services such as safe delivery and newborn screening as they were before they became *POPSHOP* franchises.

POPSHOP website: www.popshop.com.ph/

Mozambique:

Social franchising since 2011.
Social franchising brand name: *Intimo*.
Current number of franchised clinics: 11

The *Íntimo* program provides condoms, OCs, IUDs, implants, EC and misoprostol (to prevent postpartum hemorrhaging)

ÍNTIMO PLANEAMENTO FAMILIAR

in eleven clinics which had previously not offered family planning products. DKT teams move house to house to educate people on family planning options and promote the clinics. *Íntimo* has used innovations like social media to increase access to its clinics; its Facebook page reaches over 8,000 Mozambicans (85% between the ages of 18 and 34) with information on family planning and reproductive health. DKT is exploring plans to expand these successful clinics from the capital of Maputo to other parts of Mozambique.

Íntimo on Facebook: on.fb.me/w1Gk8Z

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¹ "Comparing private sector family planning services to government and NGO services in Ethiopia and Pakistan: how do social franchises compare across quality, equity and cost?" Health Policy and Planning, March 1, 2011: http://bit.ly/sQ5fOB

Sudan:

Social franchising since May 2011.
Social franchising brand:
Sahath Al-Om (MotherHealth).
Current number of franchised clinics: 10

An unusual feature
of the Sahath Al-Om
network is that it
actively collaborates
with government
hospitals, exemplifying

a harmonious public-private partnership as recommended by Millennium Development Goal 8. These franchised clinics also collaborate with stakeholders including religious leaders, community elders and, especially, husbands. Though the doctors and nurses are on the payroll of the hospitals, they are provided incentives for sales volume. DKT Sudan believes that *Sahath Al-Om* will become not only fully self-sustaining but able to cross-subsidize extended mother care programs.

n 2011, DKT served 24.5 million couples, using standard conversion factors for couple years of protection, at a cost per couple of around \$2 annually, the

lowest such rate among major family planning providers. Social franchising provides a small but growing share of this health impact, and helps DKT



Access to family planning remains a challenge for many Sudanese women.

reaches more people with high quality and affordable reproductive products and services. DKT expects social franchising's share to increase in the years ahead, as the five countries profiled here deliver more of their products and services through franchises and new DKT countries adopt the practice.

Jyoti says her association with Janani changed her life not only by providing a decent salary but the opportunity to educate women and men about their family planning options. "The incentives given for referring clients helped me to educate my son," she says. "I am very thankful to Janani for giving me the opportunity to become a Surya health promoter."



1701 K Street, NW, Suite 900, Washington, DC 20006 Tel: 202-223-8780 • Fax: 202-223-8786 Info@dktinternational.org • www.dktinternational.org Follow us on Twitter: dktchangeslives