

UCSF Global Health Sciences

Social Franchising for Health

a community of practice for sharing innovations

NEWS AND EVENTS

World Social Marketing Conference

The World Social Marketing conference will be held in Toronto April 21–23. There will be several sessions and presentations on social franchising. For further conference information, visit: wsmconference.com/programme

Fifth Annual Social Franchising Compendium

The Global Health Group is beginning work on the fifth annual compendium of social franchises. A survey will be sent out shortly to program managers. Please help us – and ensure your program is included in this compendium – by responding as quickly as possible to the survey!

RESOURCES

Measuring Quality in Social Franchises

SF4Health published a new resource for social franchising programs on how to measure quality. The brief provides an overview of the primary methods available to social franchise program managers for assessing quality – as well as tips on how to use these, and examples of franchises that have successful quality assurance programs. You can download this brief at: www.sf4health.org/sites/www.sf4health.org/files/resources/quality-assurance-brief.pdf



A Tinh Chi Em client reading IEC material

Social franchising in the public sector: Integrating cervical cancer screening services

At the First Global Conference on Social Franchising held in Mombasa, Kenya in 2011, eight franchise programs presented their ideas in a contest and participants voted for the best Integrated New Franchised Service Idea. Just over a year later, we checked-in with contest winner Nguyen Thi Quy Linh, program manager for the Government Social Franchise Tinh Chi Em (Sisterhood) in Vietnam, about the progress they have made in implementing the winning new service idea – cervical cancer screening.

The Tinh Chi Em Franchise

Tinh Chi Em is a unique government social franchise that is the result of a partnership between Marie Stopes

International in Vietnam (MSIVN) and the Provincial Departments of Health. In Vietnam public Commune Health Stations (CHS), located in rural communities, are the most accessible primary health centers. Yet many CHS lack the resources needed to provide quality reproductive health care, and rural women must frequently travel to district hospitals to meet their health needs. In response, Tinh Chi Em successfully integrated franchised sexual and reproductive health services within the CHS, improving the accessibility and quality of health care for rural women.

Cervical Cancer Screening Program

One of the initiative's successes is the integration of cervical cancer screening using the effective and low-cost visual inspection with acetic acid technique (VIA). Since this program was awarded 'best new service idea' in 2011, Tinh

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Chi Em clinics have screened over 65,000 women for cervical cancer, and referred 200 clients for treatment.

The key to the screening program's success is the combination of comprehensive training and quality assurance. Teams of Master Trainers in each province provide capacity building to the staff of franchised CHS, as well as on-going quality monitoring and training. MSIVN also provides technical assistance and training visits to the participating clinics.



Staff training

Tinh Chi Em also uses creative marketing strategies to engage rural women. It was difficult at first to encourage women to access the new CHS services, so Tinh Chi Em employed local "Brand Ambassadors" in each rural commune. These ambassadors lead community outreach to increase awareness and interest in the services – attending community events, presenting at schools and visiting women in their homes.

The introduction of the screening program has improved treatment opportunities. Prior to the introduction of this program district hospitals lacked the equipment and resources to treat women who tested positive on VIA. The high uptake of screening led to increased demand for treatment. The Department of Health responded by expanding treatment capacity, including purchasing cryotherapy machines for the district hospitals. Although some CHS clinics have found it difficult to afford the supplies for VIA, they have overcome this by introducing affordable service charges (\$1) to subsidize the cost of delivery and ensure the sustainability of services.

The Tinh Chi Em network currently includes over 300 commune health stations, and continues to expand. The close collaboration between the Department of Health and MSIVN contributes to the success and sustainability of this program. According to Nguyen Thi Quy Linh, the provincial departments of health are continuously "building their ownership [of the program] and are now taking the lead in expanding the model". In three pilot locations, the Departments of Health have committed to the replication of the model throughout each province by 2015 with their own resources.

The Tinh Chi Em model of integrated services has greatly expanded access to comprehensive reproductive health

care, and CHS staff have benefited from improved technical capacity, communication and customer service skills. The program shows that social franchising in the public sector offers significant potential to improve service quality and expand access to primary health care including essential reproductive health services.

African Health Markets for Equity

The African Health Markets for Equity (AHME) project is a new partnership developed to improve health service delivery systems in Ghana, Kenya, and Nigeria, through expanding the coverage of effective interventions and key health technologies in poor communities. Social franchising is a main component of the project – AHME will increase the scale of social franchise program in these three countries, and support the integration of a range of new health services including care for malaria, respiratory infections, diarrhea, nutrition, maternal health, HIV and TB.

Researchers and social franchise implementers are collaborating on a large evaluation of the AHME partnership to inform the expansion of the program into other countries throughout Africa.

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The new goals of social franchising

The social franchising community of practice, SF4Health, has revised the goals for social franchising originally adopted in 2008. The new set of goals reflects the expanding scope of social franchise programs globally, and the on-going work to better measure the impact of franchise programs.

The new goals of social franchising are:

- 1. Health Impact:** Deliver services that make a significant improvement in overall health outcomes or health prospects in a community, country, region, or population.
- 2. Quality:** Provide services that adhere to quality standards and improve the quality of pre-existing health services.
- 3. Cost-effectiveness:** Provide a service at an equal or lower cost to other service delivery options, inclusive of all subsidy or system costs.
- 4. Equity:** Provide services in relation to economic need, particularly to those in the bottom two quintiles of the national wealth index.
- 5. Health Market Expansion:** Provide a service to those who would not otherwise be covered by the existing health system.

The Metrics Working Group is currently developing standardized metrics and measurement tools that franchises can use to track their progress towards these goals. Information about these tools will be made available as they are finalized.

SF4Health is the collaborative result of work by franchise programs worldwide including several “umbrella organizations” that serve as implementing agencies for multiple franchises

BroadReach Healthcare | Chemonics | DKT | Drishtee | Family Health International
Greenstar Social Marketing | Hygeia Nigeria Limited | INPPARES | Living Goods
Marie Stopes International | Marie Stopes Society | Hindustan Latex Family Planning Promotion Trust
Programme for Accessible Health, Communication and Education | Population Services International
Social Marketing Company | Society for Family Health | World Health Partners

Additional collaborators

Abt Associates | Bill & Melinda Gates Foundation | ExxonMobil | The Global Health Group
International Centre for Diarrhoeal Disease Research, Bangladesh | Results for Development (R4D)
Johns Hopkins University | Karolinska Institute | MIT-Zaragoza International Logistics Program
The Rockefeller Foundation | The William and Flora Hewlett Foundation | The World Bank
World Health Organization

To share news, events, or updates on new publications, please write to us at:
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