

Advocating for a total market approach to contraceptives in Vietnam

THE BIG PICTURE

In Vietnam, nearly 70 percent of women use modern contraceptives, which have long been provided by the government with the help of donor funding. But as external funding diminished during the late 2000s, the Vietnamese government faced a significant budget shortfall, threatening its ability to provide contraception to vulnerable populations. PATH recognized an opportunity to work with government decision-makers to shift toward a more sustainable approach to family planning, called a total market approach, which would involve both the public and private sectors.

On June 27, 2011, after two years of collaborative work with experts across sectors, the Vietnamese Ministry of Health (MOH) officially approved the Operational Plan for the Contraceptive Total Market, which identified specific roles for all sectors in meeting the family planning needs of the Vietnamese population. The plan outlines the activities necessary to ensure that free or subsidized contraceptives remain available in Vietnam for vulnerable groups, while enhancing social marketing and commercial sales of contraceptives for those who are able to pay.

IDENTIFYING THE POLICY CHALLENGE AND OPPORTUNITY

In 2008, the Vietnamese government estimated that 68 percent of women of reproductive age used a modern contraceptive method—one of the highest rates in the world. The Vietnamese budget for its family planning program has long been dependent on foreign aid; in fact, government estimates indicate that about 80 percent of funding for purchasing contraceptives between 1996 and 2006 came from donors. But with Vietnam's move to middle-income status, donor funding for such programs was in decline; with the MOH now responsible for providing contraceptives to the population. In 2009, a shortfall of US\$45 million was projected for the years 2011-2015.

The government was concerned about its own ability to provide contraception to the country's most vulnerable groups in the face of a massive budget gap, but had not identified a clear way forward. In discussions with the family planning division of the Vietnamese MOH in 2009, PATH began to advocate for



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policies and plans that accounted more deliberately for the contributions of the private sector. Building on Vietnam's strong commitment to family planning and an emerging private sector for contraception, PATH and government officials discussed the potential for a total market approach to family planning in Vietnam. They defined this as government coordination and support of public and private stakeholders to leverage their comparative advantages to enhance equitable, sustainable family planning. In other words, the public sector might focus on providing free or subsidized contraceptives to vulnerable groups, while commercial sales would increase for those who are able to pay.

During 2009, a clear policy advocacy opportunity emerged to help address the reality of decreasing donor support; the government initiated the process to develop their National Reproductive Health and Population Strategy for 2011-2020. As part of this process, the MOH requested that the family planning division (the General Office for Population and Family Planning, or the GOPFP) develop a five-year action plan to determine which populations in Vietnam would receive subsidized contraceptives, how many subsidized contraceptives would be needed, and what budget would be required. A new plan that accounted for the total family planning market could enable the GOPFP to fulfill the MOH request.

Officials were increasingly receptive to the idea of working closely with PATH to develop a total market plan. PATH had worked in the country since 1980 and had forged strong ties with government decision-makers who trusted PATH recommendations. Still, challenges remained. Within the government, the GOPFP had recently transitioned from an autonomous program on par with the MOH to a division within the MOH, somewhat diminishing the authority of the family planning program and its ability to influence the budgeting process. Additionally, government officials were still looking to international fundraising as a solution to meet budget shortfalls. And while the government expressed initial openness to involving the commercial sector in a planning initiative, it was not clear how to facilitate their representation in a meaningful way. There was no active family planning provider association, for example, nor had there previously been much private-sector strengthening work in Vietnam in family planning.

Despite these challenges, the GOPFP, PATH, and other reproductive health organizations believed that a moment of opportunity existed to move toward a plan that could change the course of family planning in Vietnam.

IMPLEMENTING THE STRATEGY

As a first step in the strategy, the GOPFP and PATH co-convened a technical advisory group (TAG) that would advise on the plan's essential components, provide access to other critical decision-makers, and advocate for total market principles. The TAG included the Maternal and Child Health Department of the MOH, UNFPA, Marie Stopes International (MSI), Population Services International, Vietnam Family Planning Association (VINAFPA), DKT International, and the Women's Union.

In addition to this important advisory group, PATH dedicated full-time staff to move activities forward and maintain strong relationships and ongoing engagement with the GOPFP and stakeholders. This investment, which enabled daily focus and follow-up on the policy process, was a major factor in keeping the issue at the top of the government's agenda.



PATH/Nguyen Ba Quang

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Once the work was staffed and the TAG was established, the GOPFP and PATH then focused on engaging stakeholders from both the public and private sectors. This included conducting a stakeholder analysis and then convening representatives from the various groups to discuss the process and the rationale for total market planning. More than 70 stakeholders from 35 organizations attended the meeting, engaging in sessions designed to elicit input about different elements of a total market plan.

The GOPFP and PATH then assembled evidence to help develop the total market plan. In order to address gaps in necessary data, the partners were able to segment the contraceptive market, assess willingness and ability to pay for different methods, and determine the costs of family planning service provision in the public sector. They also collected experiences from other countries' family planning services, which allowed government officials to learn about health-targeting methods that could inform their new approach to serving vulnerable groups. This phase included a study tour by Vietnamese officials to the United States to learn about public-private sector models.

After this learning and evidence-gathering phase, work began on the total market plan. In March 2011, the GOPFP and PATH co-convened a focused, small-group meeting to kick-off the process with the MOH, government planning and finance ministries, the commercial sector, provincial governments, and representatives of MSI, UNFPA, and VINAFFPA. There, participants provided more detailed input on the content of a total market plan and priorities on segmentation.

Following these consultations, PATH gathered input for and drafted an extensive background document to shape the operational plan. Once the plan was drafted, the GOPFP was ultimately responsible for refining the content, finalizing the plan, and gaining MOH approval.

ACHIEVING THE POLICY GOAL

On June 27, 2011, the Vietnamese MOH officially approved the Operational Plan for the Contraceptive Total Market, which identified specific roles for the public and private sectors in meeting the family planning needs of the Vietnamese population. Vietnam is the first country to develop and approve a total market plan for family planning collaboratively with private-sector stakeholders, and this plan represented a major policy and programmatic step forward for family planning in the country. As part of this work, PATH also helped the government plan a 2012 pilot program to compare different mechanisms to protect vulnerable populations within the context of new fees and to advocate for the eventual inclusion of family planning in the national health insurance program.

FACTORS FOR SUCCESS

- **Strong relationships with decision-makers help to lay a foundation for advocacy.** PATH's many years of work with the government of Vietnam, as well as its expertise in family planning, meant that recommendations and initial overtures about a potential new policy approach were well received and considered credible.
- **Providing the right staff and adequate resources can help to accelerate the timeline and avert roadblocks.** By devoting a full-time staff person to the initiative in Vietnam, along with administrative support, PATH was able to keep the project on track and avoid missteps with government decision-makers.



PATH's 10-Part Approach to Advocacy Impact

Successful policy advocacy is guided by systematic analysis and pragmatic processes. PATH's ten-part framework, outlined below, is a methodical approach to policy change that has helped over 600 individuals in more than 100 organizations in countries around the world achieve health policy change.

- Identify the advocacy issue.
- State the policy goal.
- Identify decision makers and influencers.
- Identify the interests of the decision makers and influencers.
- Clarify opposition and potential obstacles facing your issue.
- Define your advocacy assets and gaps.
- Identify key partners.
- State the tactics you need to reach your goal.
- Define your most powerful messages.
- Determine how you'll measure success.

For more information and resources, and to find out how we can help, visit <http://sites.path.org/advocacyimpact>.

- **Assembling and packaging information and evidence to address decision-makers' concerns helped build trust and inform decisions.** The initial stakeholder analysis helped to identify information needs of influential stakeholders, which informed the data collection, analysis, and dissemination so that it could directly inform relevant decision-making and policy processes.
- **Aligning with existing policy and planning processes can help generate early buy-in for new ideas and approaches.** PATH initiated discussions with the government regarding the total market approach, but the government quickly adopted ownership of the policy change process and aligned the total market work with its ongoing policy planning.



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