



Insecticide-treated nets in Burkina Faso

MAHP partners and friends,

Now, more than halfway through the four-year MAHP initiative, we have a lot of exciting news to report. Only six months after launching their health protection innovations, the five MAHP partner MFIs are providing about 80,000 clients with access to new, life-changing health education, health financing, and linkages to health providers and health products. Services that began as experimental pilot tests are already being positioned for scale-up within several MFIs, ahead of schedule. And anecdotal client and staff reactions are overwhelmingly positive.

We hope that your New Year is off to a successful start, and that you will enjoy this edition of MAHP News.

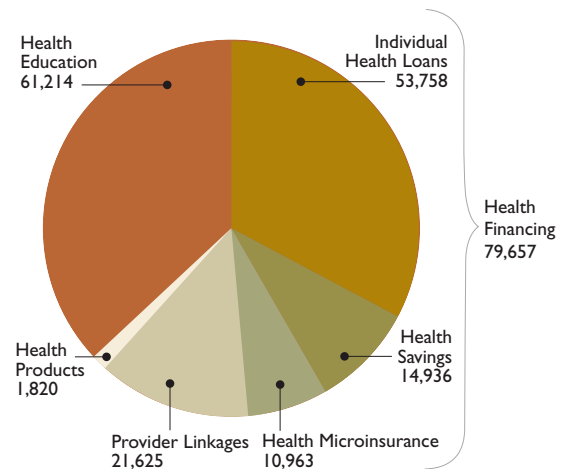
Cordially,
Myka Reinsch Sinclair and the Freedom from Hunger MAHP team

Global Microfinance and Health Protection (MAHP) News

Health Protection Innovations Reach 80,000

Approximately 80,000 MFI clients now have access to Microfinance and Health Protection services from the five MAHP-partner MFIs around the world. And this figure does not include the more than 300,000 family and other community members who also benefit—directly and indirectly—from the health education, health loans, health savings, health micro-insurance, health provider linkages and health product distribution being provided or facilitated by these pioneering MFIs. This is a stunning accomplishment occurring only six months or less after the launch of most of these innovations, and client demand already appears to be growing fast. We are pleased to share a summary of MAHP outreach to date.

Number of MFI clients with access to MAHP innovations as of December 2007 (Note that clients receiving more than one service are double-counted)



MAHP Indicators at a Glance*

Total number of microfinance clients served by all MAHP partners combined	1,519,481
Total microcredit portfolio of all MAHP partners combined	\$225,688,621
Total number of clients with access to MAHP services	80,151
Percentage of total MFI clients with access to MAHP services	5%
Number of clients in MAHP target areas receiving health education	61,214
Number of clients with MFI-facilitated linkages to health providers	21,625
Number of clients with MFI-facilitated access to health products	1,820
Estimated number of clients with MFI-facilitated access to health microinsurance	10,963
Number of clients enrolled in MFI-facilitated health microinsurance	2,584
Estimated number of clients with access to health savings accounts	14,936
Number of clients with active health savings accounts	493
Total health savings on deposit	\$12,976
Average health savings account balance	\$26
Estimated number of clients with access to individual health loans	53,758
Number of clients with outstanding individual health loans	149
Total outstanding health loan balance	\$20,506
Average health loan balance	\$138
Average days to disburse a health loan	3

* Access to MAHP Services as of December 2007 for All Five MAHP Partners

New Technical Learning Conversations Now Available

Three new health-related education modules, or “Technical Learning Conversations” (TLCs), are now available for MFIs to distribute to their clients. The TLCs are *Plan for Better Health*, *Using Health Care Services*, and *Healthy Habits for Life*. Each TLC comprises six or seven 30-minute, interactive learning conversations designed for a group of microfinance clients. The TLCs have now been field-tested by MAHP-partner staff and clients, and come with a step-by-step guide to facilitating the meetings and relevant illustrations for training participants, as well as a guide for use by MFI management to train their field staff.

- *Plan for Better Health* guides participants to consider their health-related financial risks, share their coping strategies and evaluate how various financial products (such as health savings or loans offered by the MFI) can address these needs. Participants develop a plan to save for common health problems that frequently affect their families, and to prepare in advance for unlikely but catastrophic health expenses.

- *Using Health Care Services* empowers participants to improve their health-seeking behavior by increasing their knowledge and confidence about health care. The sessions clarify how and when to access local and regional health services, describe internationally accepted health care standards that citizens can expect their providers to follow, and help participants practice negotiating for fair treatment.
- *Healthy Habits for Life* focuses on preventing diseases that are caused in part by unhealthy diets and lack of exercise. Participants discuss chronic diseases (such as high blood pressure, diabetes and cancer) present in their communities, learn about behaviors that put their families at risk, and consider alternative practices that are both realistic and relevant to their context.

Many of the MAHP partners have begun delivering or will soon extend these TLCs to their clients. All MAHP and other Freedom from Hunger partners are welcome to make use of these TLCs, which have been enthusiastically received by clients so far. To obtain a copy for review, please visit the MAHP Collaboration Space or inquire via e-mail.

Second Global MAHP Meeting

Planning has begun for the next Global MAHP meeting. The primary purpose of the meeting will be for MAHP partners to share their MAHP innovation models and experiences with their peers, exchange information and lessons learned about specific health protection services, present evidence of impact to date, and discuss plans and challenges for scaling up these services. The global MAHP team will communicate with the MAHP partner leadership over the coming weeks about the timing, location and details of the upcoming meeting.

Since for a variety of reasons we expect to hold the meeting again in San Francisco, California (USA), rather than in one of the MAHP countries, Freedom from Hunger strongly encourages the MAHP partners to again consider any study tours or cross-visits that you would find beneficial to enhancing

your knowledge of another MAHP partner's innovation package or of a specific health protection service.

Please see the Overview of MAHP Package Components by Partner (inset) for a reminder of the variety of services being offered by each MFI, and communicate with any Freedom from Hunger MAHP staff with questions or regarding a proposed visit.

Overview of MAHP Package Components by Partner

Package Component	Bandhan	CARD	CRECER	PADME	RCPB
Health education	X	X	X	X	X
Health savings					X
Health loans	X		X		X
Access to health products	X	Future		X	
Links to public health care	X		X		X
Links to private health care		X	X		
Health insurance/prepaid programs		X	Future	Future	Future

MAHP Partner News

Bandhan | INDIA

Bandhan has scaled up health protection services within the three main MAHP pilot branches, in addition to two new areas, in an effort to extend health education, health products and health loans to more villages and people. Sixty villages now have access to the health education and health product distribution offered by Bandhan's Health Community Organizers (HCOs) and "SS" (Bandhan members who visit households in the communities to reinforce health messages and sell products), and 30 more villages will be added in April. Bandhan has recruited and trained six HCOs and one SS for each new village in order to achieve this expansion. By mid-2008, Bandhan expects to provide health education and products to more than 5,000 clients and their communities.

In March, Bandhan's HCOs will begin offering new health education topics during the monthly 60-minute meetings,



A Bandhan SS visits the household of a microcredit beneficiary.

called "Health Forums," held separately from Bandhan's credit meetings and open to the entire community. New sessions will include an adaptation of the *Plan for Better Health* TLC, Care of the Pregnant Woman, Neonatal Care, Diarrhea, Acute Respiratory Illness, and Sanitation. Bandhan also added two new health products for distribution by the

SS. Five health products are now available for purchase in the MAHP areas: oral rehydration solution, paracetamol, antacid, sanitary napkins and oral contraceptive pills.

Bandhan has also continued to expand its micro health loan, which is now offered in seven branches. Among the nearly 20,000 microfinance beneficiaries in these branches, almost 12,000 are eligible for the micro health loan (having completed two loan cycles with Bandhan). At the end of December, 145 health loans were outstanding with an average loan size of US \$52 (Rs 3,580). In February, after one year of offering micro health loans, Bandhan reported 100 percent on-time repayment. Given the institution's success with the health loan, Bandhan plans to scale up this product to all of its 450 branches within the next two years.

Impact evaluation activities began at Bandhan, although a Randomized Control Trial will no longer be conducted. A simpler and smaller evaluation has been developed instead to assess the impact of Bandhan's health education, health product distribution and health loans on both the clients and the microfinance institution itself.

CARD | PHILIPPINES



CARD members participate in a learning session on the costs and benefits of health insurance.

PhilHealth Insurance Program. A growing number of CARD members and their families are protected from the high costs of hospital care, thanks to CARD's partnership with the Philippine National Health Insurance Program, or PhilHealth. By year end, CARD had enrolled 2,584 families

in PhilHealth. To support continued growth, CARD has worked closely with PhilHealth to develop a new promotional program. Weekly center meetings provide opportunities for members to receive information about program benefits, the enrollment process, and to get answers to any questions they have about CARD's PhilHealth program. Member response to the PhilHealth product has been very enthusiastic—to the extent that CARD members outside the pilot area have continued to ask when they too can join. In response, CARD is now planning to expand the PhilHealth program beyond the pilot area during 2008. A new PhilHealth education module developed by CARD will help to assure that members who have enrolled in PhilHealth, as well as those still considering membership, understand how the health insurance works, what is covered, and how to appropriately use the benefits. Educational efforts like this one are important for member retention and satisfaction with insurance products like PhilHealth. The module is currently being field-tested in selected CARD centers and will be used more broadly throughout CARD as the program is expanded.

The completion of the first-quarter enrollment cycle in March will mark one full year with the PhilHealth program. Experience from the first year of operations will be used to begin the MAHP assessment activities for this program. Research will focus on client reasons for enrollment, non-enrollment, and disenrollment in PhilHealth, as well as member perceptions of the value of the program for family financial and health security.

Healthy Pinoy Program—Bondoc Peninsula. CARD's Healthy Pinoy preferred-provider program may soon have more participating health care providers. The CARD MAHP team is visiting other towns in Quezon Province to recruit new physicians to join the program, and is also considering adding dentists and optometrists. CARD continues to look at options for improving access to affordable, quality medicines and prescription drugs. Expert assistance with this work is being provided by a physician pharmacy consultant and an experienced intern.

Health education is an integral part of CARD's Healthy Pinoy program. Following the successful delivery of the dengue fever prevention module in the Bondoc region last

year, CARD is now working closely with Freedom from Hunger to adapt and implement the *Plan for Better Health* and *Using Health Care Services* TLCs. CARD believes that the topics and materials included in these sessions will help members plan ahead for health needs and also maximize use of the preferred-provider network. It is also important to note that the dengue fever module has been incorporated into CARD's overall Credit with Education program and is now being provided throughout CARD's service area.

CRECER | BOLIVIA

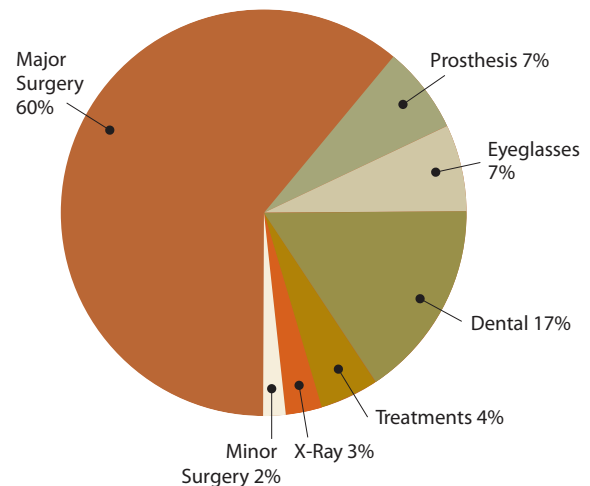
CRECER Saludable continues to improve and scale up its very cohesive package of health protection services. Seven CRECER Saludable Health Days were held in the past three months, where private health providers under contract with CRECER traveled to the field to offer preventive checkups and specialized diagnostic services to CRECER clients and their families, based on the demand and preferences of clients. Pap tests; gall bladder; kidney and gynecological ultrasounds; blood sugar (glucose) analyses; and eyesight examinations are examples of the specialized services offered at recent Health Days.

In order to ensure that clients can pay the \$1-to-\$5 fee for these services on the day they are offered, CRECER encourages its credit groups to provide collective (solidarity) health loans from their "internal loan fund." To date, a total of 232 clients have participated in CRECER Saludable Health Days, with 215 receiving collective health loans at 0% interest, in order to spread out payment for the services. A total of US \$1,135 (Bs 8,175) in collective health loans has been distributed among 20 community associations, with an average loan per individual of US \$5 (Bs 39). (Note that all loans are made in U.S. dollars.)

Since CRECER Saludable's launch of individual health loans in October 2007, 50 loans have been disbursed, with an average loan size of \$472. A Randomized Control Trial will be used to study the impact of marketing messages on clients' uptake of individual health loans, comparing messages that convey "hope" versus "fear" and "prevention" versus "treatment." With the marketing materials now in production, CRECER Saludable will begin a more concert-

ed promotion of this new product beginning in March. As a result, CRECER Saludable expects to increase the individual health loan portfolio considerably over the coming period.

Health education remains an integral component of all of CRECER's programs. To date, a total of 26,538 women have participated in CRECER's adaptation of the *Plan for Better Health* TLC, while approximately 4,500 have participated in the Women's Health TLC over the past month. During the period, a baseline study was also completed on CRECER clients' regular loan usage and their general economic and health status. A follow-up study will be conducted in about one year to assess the impact of CRECER Saludable's health protection package on the financial performance, as well as the health, of these clients.



Breakdown of individual health loan use by CRECER clients.

Finally, recognizing the success of the package so far as well as its potential impacts, CRECER Saludable has begun to decentralize operations related to the health protection package. All activities will be owned, guided and scaled up by the MAHP pilot region of La Paz as of April 2008. CRECER expects to use the experience of the La Paz region to eventually extend these products and services to other regions throughout the country in coming years.

PADME | BÉNIN

Credit with Education activities continue to gain momentum at PADME. By the end of January 2008, 92 Credit Associations comprising 2,166 clients had received Credit with Education loans, for a total portfolio of US \$105,000 (47,423,000 FCFA) and an average loan size per person of US \$49 (21,894 FCFA). Among the Credit with Education clients at PADME, 93 percent are women and 7 percent are men.



A PADME client participates in a malaria training session.

A total of 32 Credit Associations comprising 744 beneficiaries had completed the six education sessions on malaria by the end of January. Those Credit Associations are now participating in a series of sessions on *Illnesses That Attack Our Children*, and they will move on to sessions on HIV/AIDS in April, and Self-Esteem in May. As PADME's Credit with Education continues to expand, new Credit Associations begin education sessions on malaria as they receive their first loan disbursement.

A partnership is being finalized between PADME, Population Services International (PSI) and Freedom from Hunger to enable PADME field agents to sell long-lasting, insecticide-treated mosquito nets to clients who have received dialogue-based training on malaria through the Credit with Education program. Freedom from Hunger is proud to announce that a new donor contributed funds for the initial purchase of mosquito nets from PSI, to test this exciting distribution mechanism. According to the World Health

Organization, a child dies every 30 seconds of malaria, and according to MAHP market research, people in the MAHP target area of Bénin spend an average of 30 percent of their income on malaria-related treatment. Therefore, this combination of malaria education, with access to affordable mosquito nets proven to reduce the incidence of the disease, has the potential to greatly impact the health and livelihoods of thousands of poor people in Bénin.

During this period, PADME and Freedom from Hunger also worked with Step-BIT Bénin, an International Labor Organization initiative, to develop terms of reference for a feasibility study on health microinsurance, which will be programmed in the coming months.

Meanwhile, the randomized control trial impact evaluation at PADME has continued apace. Baseline studies continue to take place in waves, as new Credit with Education groups are formed. In January, Freedom from Hunger hired a new research coordinator, Teddy Ekoué-Kouvahey, to support PADME in these ongoing research activities.

In March, PADME will conduct an assessment of its first Credit with Education loan cycle, with Freedom from Hunger technical assistance. Satisfied with the results of Credit with Education so far, PADME plans to hire and train additional Credit with Education field agents in April 2008. These new agents will enable PADME to increase scale more rapidly and attain the objective of reaching 5,000 clients in 138 villages, probably by September 2008.

RCPB | BURKINA FASO

RCPB has continued to promote and enroll clients in the health savings and loan program being piloted in the MAHP target area. Health savings accounts are open to all RCPB clients in the target area—whether individual borrowers or Credit with Education members, men or women, salaried workers or microentrepreneurs. As of the end of January, 547 health savings accounts had been opened, with a total of nearly US \$11,000 (5 million FCFA) on deposit. Of these, 30 percent were held by women, and 9 percent were held by Credit with Education groups.



Two RCPB clients hold their health savings account passbooks as they leave their compound.

The six-month health savings capitalization period ended at the end of November, and at that time clients began accessing their health savings for any health use, becoming eligible for loans to cover health expenses exceeding their health savings on deposit. At the end of January, approximately US \$6,000 (2.6 million FCFA) had been withdrawn by 213 clients, and four health loans had been disbursed, totaling \$700 (310,000 FCFA). The first of these loans was to cover hospitalization and treatment related to severe malaria.

During the period, RCPB (with technical support from the Regional MAHP Manager as well as the locally based Center for Financial Innovation) conducted assessments of its two experimental health savings products: the MAHP health savings product in northern Burkina Faso, and another health savings product tested in the east that incorporated a cashless provider linkage mechanism.

Among the findings in the MAHP target area were that over 70 percent of health savings accounts were held by individual clients, and that very few Credit with Education members (who are all female and primarily rural) were participating. Reasons for this included (a) the capitalization period took place during the rainy season, when many rural people were busy in the fields; (b) difficulty group clients (Credit with Education members) have accessing money from a group savings account—the elected group leaders would need to travel to and present themselves at the RCPB branch office in order to effect an emergency withdrawal; (c) many women in rural areas lack national identity cards and therefore are ineligible to open an individual savings account or access an individual loan with RCPB; and (d) there is insufficient promotion and information sharing by Credit with Education field agents.

Over the coming weeks and months, RCPB will be reflecting on the results of these recent assessments, applying lessons learned, and identifying ways to make the MAHP package more accessible and attractive to women in Credit with Education groups. RCPB will also roll out two new MAHP education modules—*Plan for Better Health* and *Using Health Care Services*.

Freedom from Hunger launched the Microfinance and Health Protection initiative (known as “MAHP”) in January 2006 with funding from the Bill and Melinda Gates Foundation. Through MAHP, Freedom from Hunger is collaborating with a select group of microfinance institutions to develop and test sustainable innovations in health protection services that will improve the lives of poor people while also contributing positively to the financial performance of the institutions themselves. The initiative will continue through 2009, at which point the successful innovations will be widely disseminated around the world.



MAHP Staff Arrival

We are pleased to announce the arrival of Cassie Chandler as a new Freedom from Hunger Program Associate. Cassie is providing important support to the MAHP initiative, and made her first visit to a MAHP partner—CRECER—soon after her arrival in January. Welcome, Cassie! We also welcomed Teddy Ekoué-Kouvahey in January as a MAHP Research Coordinator based in Bénin to support PADME’s impact evaluation. Welcome, Teddy!

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