

IntraHealth International supports the fundamental human right of all people to plan the number, timing, and spacing of their children. We help countries provide high-quality family planning and reproductive health (FP/RH) services by building the capacity of the health workforce and strengthening health systems.

Our approaches include:

- Mobilizing partnerships and coalitions to advance FP in francophone West Africa.
- Catalyzing local leadership & resources for FP service provision & sustainable programming.
- Integrating FP with other services to increase access & improve health system efficiency.
- Changing individual & community behaviors & attitudes through social influencers.
- Implementing task-sharing & other approaches to expand access to FP in fragile-state & other challenging environments.
- Building the capacity of training institutions to plan & deliver training for the FP health workforce.
- Maintaining access to critical FP services during the COVID-19 pandemic.



After the pivotal FP conference in Ouagadougou, Burkina Faso, in 2011, multiple donors joined nine country governments (Benin, Burkina Faso, Côte d'Ivoire, Guinea, Mali, Mauritania, Niger, Senegal, and Togo) to initiate the **Ouagadougou Partnership** (OP), committed to elevate FP in the region.

From 2012 to 2022, IntraHealth managed the Ouagadougou Partnership Coordination Unit, which raised the partnership's visibility and helped member countries develop and implement costed implementation plans for FP. Between 2012 and 2015, the partnership was responsible for 1.18 million new users of modern FP, a 40% regional increase. Building on this success, the nine governments embarked on an acceleration phase and have added 2.2 million more FP users since 2015.

Through the **Civil Society for Family Planning** (CS4FP) project, IntraHealth helped establish and support national civil society coalitions for FP in the nine OP countries as well as a regional coalition to harmonize FP advocacy messages, build government commitments for FP, and hold governments accountable for achieving those commitments. The coalitions raise the collective voice of civil society in planning side-by-side with governments to meet FP commitments.

# Locally led, high-impact programming

Through our role as an accelerator hub for **the Challenge Initiative** (TCI) in francophone West Africa, IntraHealth helped cities in Benin, Burkina Faso, Côte d'Ivoire, and Senegal scale up high-impact FP interventions through a demand-driven model of donor-municipality partnership. Cities self-selected to participate in the program, were chosen competitively, and were required to contribute their own resources to implement activities. TCI's high-impact interventions included providing postpartum FP, establishing FP-focused special days, community-based action for FP, and universal referral in which all women visiting a health facility are counseled and offered FP services.

We also helped build capacity through online courses and mentorship and by facilitating collaboration between city governments and health systems, training 2,300+ health workers in 910 health facilities. Because of this, over 1.6 million women of reproductive age received family planning messages and the approach contributed to recruiting 46.8% of new family planning users.

In 2022, IntraHealth began a new project phase called **TCI Next Gen**, which works with local governments in 29 urban areas of Burkina Faso, Côte d'Ivoire, and Senegal to to rapidly scale up a core package of seven proven, high-impact interventions. The project strengthens political and technical leadership and local health-systems management and coordination. It pairs with community accountability mechanisms to increase sustainability and program ownership.

# **Integrated service delivery**

In the nine OP countries, our **INSPIRE project** is integrating postpartum FP; maternal, newborn, and child health; and nutrition services into a package delivered during the same client visit through one of four critical entry points: antenatal care, delivery, postpartum care, and essential newborn care. Between 2019 and 2021, there was a 144% increase in postpartum family planning use and a 308% increase in the use of well-baby visits for growth monitoring. This has led to a 40% decrease in severe acute malnutrition in 11 INSPIRE facilities. INSPIRE's integration model is now being implemented in 115 facilities in the region.

Our Regional Health Integration to Enhance Services in Eastern Uganda Activity improved access to FP by integrating services into mobile outreach camps that serve rural areas. The program also intensified assistance in eight districts by mentoring antiretroviral therapy clinic staff on FP/HIV integration, leading to FP services for 4,000+ women living with HIV. In June 2020, overall FP users in 25 districts had increased from 163,875 to 240,886 over nine months.

# **Expanded access to FP in fragile settings**

South Sudan has one of the world's lowest levels of modern contraceptive use (below 4%), severe shortages of health workers, and continues to be plagued by violence and insecurity. We're helping expand access to FP through three task-sharing strategies: training nurses and midwives to be dedicated FP providers at nine high-volume facilities; training community health workers to offer oral contraceptives, condoms, and Sayana Press injectable contraception, and to refer clients to facilities for long-acting and reversible methods; and training clients in self-care, especially during the time of COVID-19. In the first five months of 2020, contraceptive uptake more than doubled, from ~550 women per month to ~1,150 per month.

# Meaningful social change through influencers

Through **CS4FP**, IntraHealth worked in the nine OP countries to engage religious leaders and 270+ youth ambassadors as critical influencers in promoting healthy behavior change for FP at the household, community, and national levels. These influencers have been trained in SMART advocacy, communications skills, messaging, and social media to amplify their voices and reach target audiences.

# **Building a new responsive FP workforce**

A strong FP health workforce is critical to delivering peoplecentered care. Our **Shukhi Jibon** (Happy Life) project in Bangladesh is providing support to FP training institutes to deliver competency-based training, improve their planning and manage practices, and operationalize a digital training management information system.

As a core member of the USAID consortium **MOMENTUM Safe Surgery in Family Planning and Obstetrics**,
IntraHealth leads work in Rwanda, Senegal, and Mali that addresses key skills gaps for providing long-acting reversible contraception and permanent methods. This helps overcome barriers to offering a full method-mix to clients, not only for insertion but also routine and difficult removals for implants and intrauterine devices (IUD). Access to FP removal services is a core component to ensure voluntarism, choice, and client autonomy.

Through our Ingobyi Activity in Rwanda, IntraHealth implements a multidisciplinary cascade mentorship program in 20 districts. As of May 2022, Ingobyi had trained 650+ mentors and almost 15,000 community health workers as part of the Community-Based Program on FP. Ingobyi also provides training to support the national introduction plan of hormonal IUDs, further expanding method choice.

# **Essential services maintained during the COVID-19 pandemic**

Through a regional community of practice, **INSPIRE** worked with the nine OP countries to develop costed national continuity plans for delivering essential FP services during the pandemic. In Senegal we work in synergy with government partners to maintain accessibility and use of essential FP/RH and maternal, child, and newborn health services, as well as community support for service uptake. Health workers have been trained in postpartum FP, long-acting and reversible contraception, and Sayana Press to minimize facility visits and provide for self-care.

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