



FAMILY PLANNING

IntraHealth International supports the fundamental human right of all people to plan the number, timing, and spacing of their children. Over four decades, we've helped countries around the world fulfill this right through high-quality family planning and reproductive health (FP/RH) information, counseling, and services. To address the FP needs of current and future clients, we build the capacity of national and local health systems, health workers, and communities to sustainably scale-up high-impact FP practices.

Our competencies and 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 regarding FP through social influencers.
- Implementing task-sharing & other approaches to expand access to FP in fragile-state & other challenging environments.
- Maintaining access to critical FP services during the COVID-19 pandemic.



OUR APPROACHES IN ACTION

Partnerships to advocate for & advance FP in West Africa

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), making a shared commitment to elevate FP in the region. Since 2012, IntraHealth has managed the Ouagadougou Partnership Coordination Unit, which has raised the partnership's visibility and assisted member countries to develop and implement costed implementation plans for FP. During 2012-2015, 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 has helped to 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 is helping cities in **Benin, Burkina Faso, Côte d'Ivoire, and Senegal** to scale-up high-impact FP interventions through a demand-driven model of donor-municipality partnership. Cities self-select to participate in the program, are chosen competitively, and must contribute their own resources to implement activities. TCI's high-impact interventions include 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 help build capacity through online courses and mentorship by coaches and by facilitating collaboration between city governments and health system actors. During the past year, 20 coaches and 2,000+ health workers have been trained to conduct universal referral. Overall, TCI-supported cities generated an 8% increase in FP client volume. Local contributions have been substantial: ten cities initially committed \$360,000, have already deposited 52% of that into a project-specific bank account, and subsequently increased their commitments by 25%.

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. Immediate adoption of postpartum FP increased by 96% overall from 2018 to 2019 at the project's flagship health facilities for the intervention, ranging from 37% in Burkina Faso to 404% in Niger. In Mali, by integrating FP into treatment services for obstetric fistula, IntraHealth helped increase FP acceptance among fistula clients from 12% to 78% between 2014 and 2019.

Our program in eastern **Uganda** improved access to FP by integrating services—including for long-acting and reversible contraceptives and permanent methods—into mobile outreach camps that serve rural areas. This year, the program also intensified assistance in eight districts through mentoring antiretroviral therapy clinic staff in FP/HIV integration, leading to FP services for 4,000+ women living with HIV since January. As of June 2020, overall FP users in the 25 program districts had increased from 163,875 to 240,886 over nine months.

Meaningful social change through influencers

Through CS4FP, IntraHealth has 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.

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 the 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 500-600 women per month to 1,100-1,200 per month.

Essential services maintained during the COVID-19 pandemic

Through a regional community of practice, the INSPiRE project worked with the **nine OP countries** to develop costed national continuity plans for delivering essential FP services during the pandemic. In **Senegal** we've been **working 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 contraceptives, and Sayana Press to minimize facility visits and provide for self-care.

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