FAMILY PLANNING

IntraHealth International believes that women and men have a fundamental human right to plan the number, timing, and spacing of their children. Over four decades, we’ve assisted countries around the world to fulfill this right through high-quality family planning and reproductive health (FP/RH) information, counseling, and services. This enables communities, health workers, and health systems to ensure that current and future FP clients can make informed, voluntary choices about the methods best suited to their reproductive intentions, from a broad range of regularly available, accessible, and affordable modern method options.

More than 214 million women have an unmet need for family planning—each woman an individual with her own specific reproductive intentions and needs, which will change across her reproductive life cycle. In addition, the largest number of young people in human history will soon enter their reproductive years. From helping individuals and couples space or limit pregnancies to helping youth plan their futures, public- and private-sector health workers and health systems can improve their clients’ health and well-being. Together, we’re working to achieve this transformative goal.

KEY APPROACHES

• **Expanding the roles of health workers** to deliver appropriate FP/RH information, counseling, and services—including through task-shifting—supported by updated policies and plans.

• **Increasing the range of available FP methods**, including long-acting reversible contraceptives (LARCs) and permanent methods, at all levels of the health system, from hospitals to communities.

• **Strengthening the systems** for planning, education, training, management, and supply chains that help health workers provide high-quality FP/RH services.

• **Integrating FP with other services**, such as immunization, postpartum care, obstetric fistula repair, and HIV prevention, care, and treatment.

• **Improving the quality of FP/RH service delivery** by applying IntraHealth’s Optimizing Performance and Quality tools for health workers and facilities.

• **Expanding access to FP for young people** through policy reform, youth-friendly services, and empowering youth as advocates for comprehensive sexuality education and FP.

• **Increasing constructive male engagement** in FP/RH as supportive partners and method users and in roles as policy-makers and program leaders.

• **Engaging with communities, national and local governments, religious leaders, journalists, and civil society through advocacy, public campaigns, and social media.**

• **Applying efficient, cost-effective digital health solutions** for health worker education and training, including eLearning and mobile phone apps.

• **Applying principles of behavioral science and user-centered design** to accelerate progress in FP/RH service quality and integration.
HIGHLIGHTS OF RECENT WORK

• Benin, Burkina Faso, Cote d’Ivoire, Guinea, Mali, Mauritania, Niger, Senegal, Togo: IntraHealth helped launch civil society coalitions to advocate for FP and demand government accountability in meeting FP commitments. As part of this work, we’ve trained and deployed over 270 FP youth ambassadors. We are also supporting national costed implementation plans for smarter integration of FP, nutrition, and essential newborn care services.

• Kenya: We helped develop a national FP training plan, establish an FP center of excellence, and roll out a contraceptive supply chain management eLearning course that has cut the cost and improved the efficiency of health worker training.

• Mali: By integrating FP and services for obstetric fistula, we’ve helped increase FP acceptance among clients from 12% to 78%.

• Rwanda: Through the recently awarded USAID Ingobyi Activity, we’re working to improve the quality, equity, and accessibility of integrated FP/RH, malaria, and maternal, newborn, and child health services.

• Senegal: We work with religious leaders, journalists, and civil society to overcome negative perceptions of family planning. After two years of integrating FP services into popular child immunization clinics, 28,000+ women have been offered FP information and methods, 25% of whom have chosen to start using modern methods. And by scaling up a new model for contraceptive security—our Informed Push Model—we helped reduce stockouts to under 2% and increased contraceptive acceptance by 38%.

• South Sudan: We’ve supported integration of FP with existing HIV services in three states, reaching almost 4,000 clients with modern contraception, and helped develop the country’s first national FP curricula for community health workers.

• Tanzania: Our advocacy with decision-makers for district-level funding led to an increase from 11 to 119 facilities offering IUD insertion and removal services in three districts.

• Uganda: We’ve improved access to FP by integrating services, including those for LARCs and permanent methods, into mobile outreach camps that serve rural areas.

• Ouagadougou Partnership: IntraHealth manages the Coordination Unit that supports this multi-donor, multi-organizational partnership. In 2015, the nine francophone West African member countries pledged to expand use of modern contraceptives in the region by an additional 2.2 million women by 2020. After the first two years of this effort, an additional 910,000 women were using modern contraceptive methods.

• The Challenge Initiative (TCI): IntraHealth serves as the francophone West Africa accelerator hub for TCI’s groundbreaking program to scale up urban FP/RH services. Through a demand-driven model of donor-municipality partnership, we’ve engaged local officials from seven cities in five countries serving 1.5 million women of reproductive age to commit sizable resources to boost FP/RH services.

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