What is our goal and how do we get there? FP Goals Model

Overview



May 2016

What we need to know



- 1. What growth is realistic?
- 2. What strategies and interventions can get us to our goal?

Using evidence to drive our decisions

- What is already happening in the country?
- How is the population changing? urbanization, growth, age
- What interventions are effective in increasing use?
- Who can these interventions reach?

FP Goals takes all of this into consideration

What types of interventions?

- Post Partum Family Planning
- Post Abortion Family Planning
- Improve Public Sector provision
- Community Health Workers
- Mobile Clinical Outreach
- Social Franchising

sector

Public

Private sector

System

- Pharmacies and Drug Shops
- Reduce stock-outs
- Introduce a new method OR revitalize an under-used method

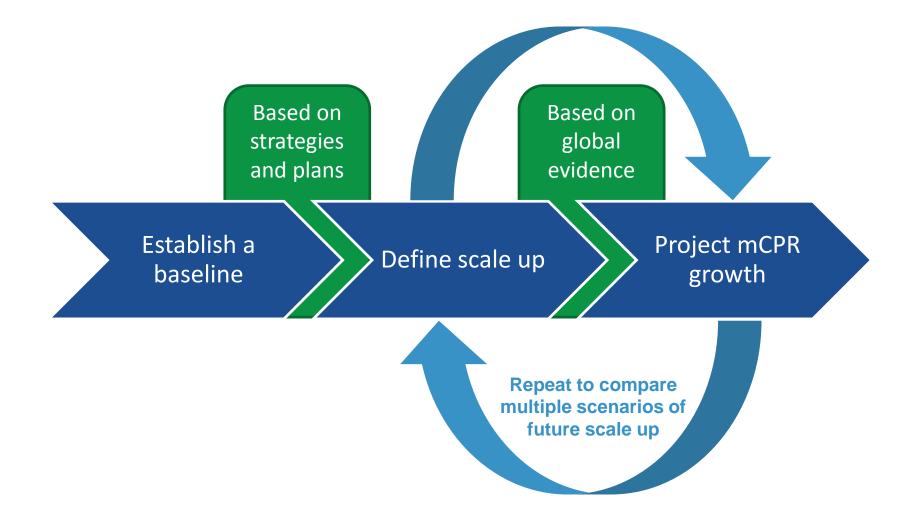
Mass Media
Community-centered SBCC

Demand

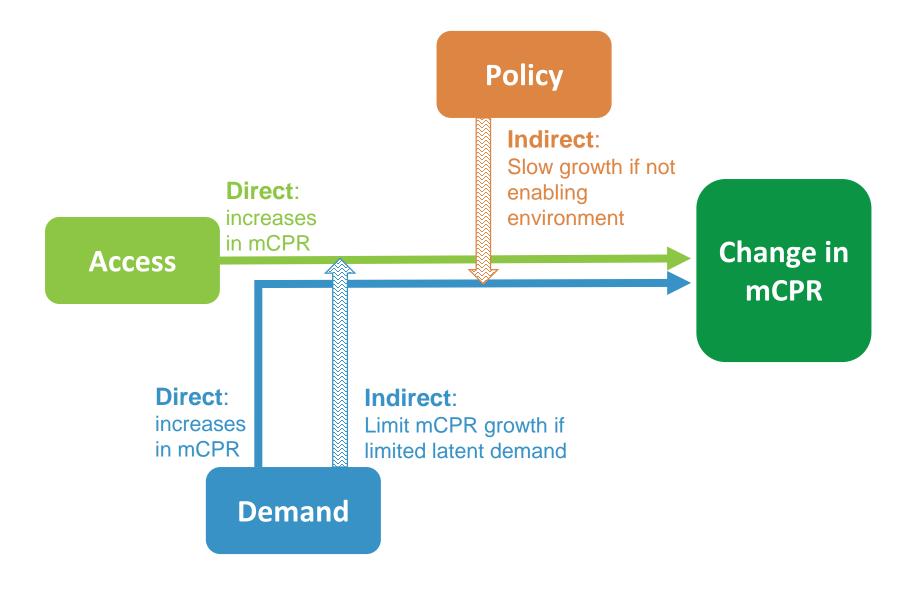
- Individual-based SBCC
- Adolescent-Focused interventions

Where possible interventions are aligned to High Impact Practices

How it works



How it works



Direct: Access and Demand

Change in coverage

WRA (or MWRA)

A. Change in intervention coverage

End line coverage

B

Baseline coverage B. How relates to all women of reproductive age- to determine what fraction of mCPR can be impacted

e.g. PPFP can only increase use among women giving birth, so impact on total mCPR limited by number women giving birth. Odds Ratio → Impact

X

When calculating mCPR impact, accounts for starting mCPR, and, potential overlap of multiple interventions.

When sub-group specific basslines are available, OR applied to them.

Example: Post-partum FP

WRA (or MWRA)

Increase can only happen among women who have given birth, but, are *not* already using PPFP– *what is this as a % of all WRA?*

Women giving birth

Women already using PPFP

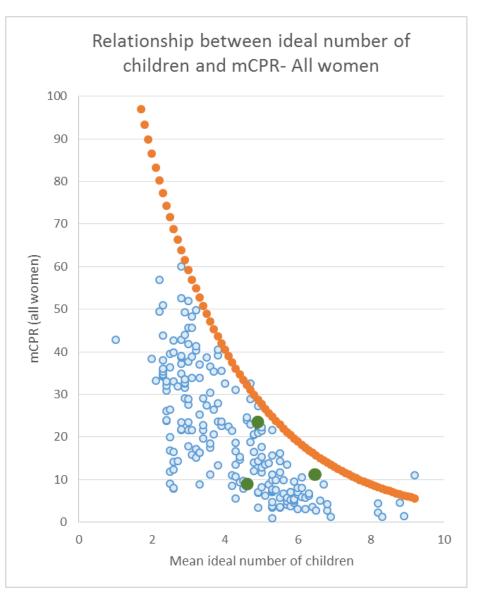
	# WRA	% of WRA giving birth in 2015	% WRA who are post- partum and NOT using FP
DR Congo	20.6m	17%	16%
Nigeria	47.5m	16%	15%
Ghana	7.7m	12%	11%
Pakistan	52.3m	10%	7%
Philippines	27.9m	9%	6%

Indirect: is there enough demand?

Latent demand measured by ideal number of children

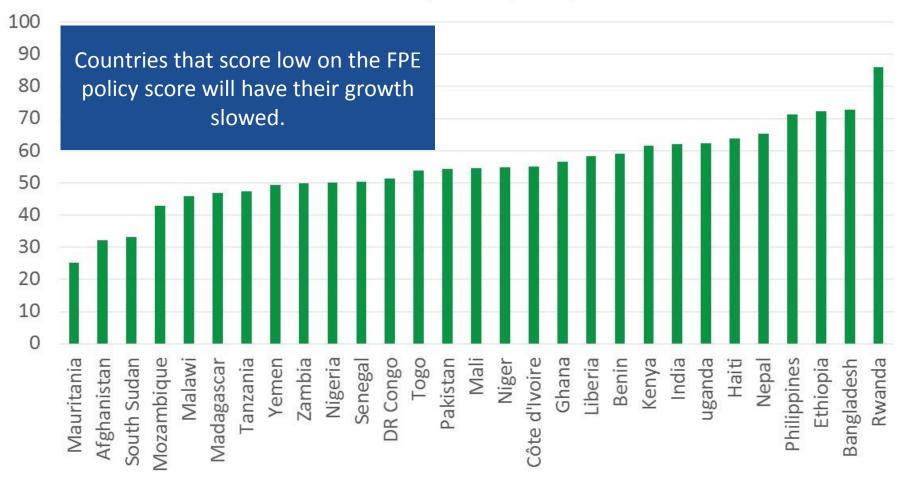
If a country sits nearly the orange line- unlikely to see further growth without investments in demand

Demand generation interventions lower mean ideal number of children



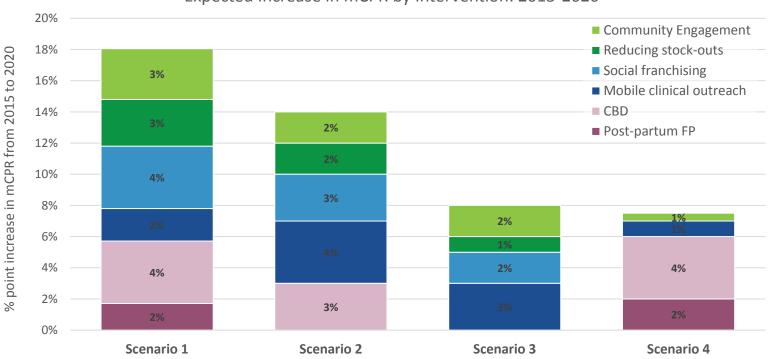
Indirect: Is the enabling environment supportive?

FPE Policy Score (2014)



What results do you get?

Below is an illustrative example of FP goals result. The model shows you the mCPR growth estimated in each scenario, as well as the relative contribution of each intervention. Results can be used to assess a realistic mCPR goal, and support discussions on prioritization of interventions.



Expected Increase in mCPR by Intervention: 2015-2020

What FP Goals does not do

- Does not account for other important investments beyond mCPR growth— but these are still important! For example:
 - Quality of services
 - Equity
 - Changing norms related to sexual debut, marriage, future contraceptive use
- Not an optimization tool— must enter different scale up plans and compare results
- Does not adjust for unrealistic scale up- must sense check plans (e.g. is it feasible to train XXX new CHWs?)

When use FP Goals?

- Developing a new strategic plan
- Mid-term review of an existing plan
- Prioritize funding and focus within a larger plan

FP Goals is a strategic decision making tool. Applications must be linked to opportunities for strategic policy decisions in country.