

# The National Composite Index for Family Planning (NCIFP) Egypt 2014 Results

## What is the NCIFP?

The NCIFP is a new tool developed to support FP2020's efforts to improve the enabling and policy environment for family planning. The NCIFP measures both the existence of policies and program implementation, using 35 individual scores organized under five dimensions: **strategy, data, quality, equity, and accountability**.

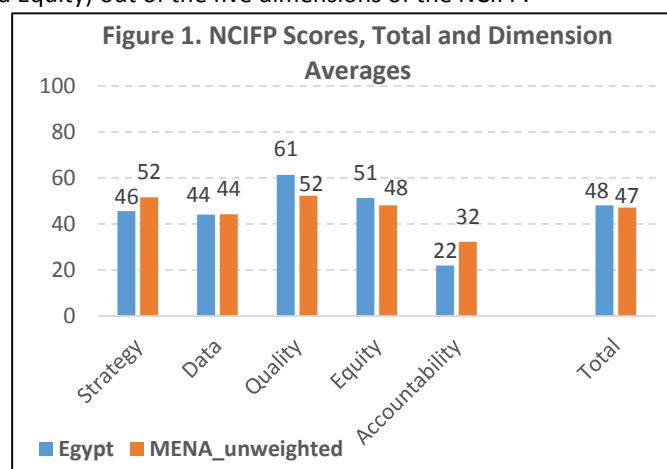
- **Strategy** – whether the national FP strategy/plan includes objectives that are quantified and targets to reach the poorest/most vulnerable, resource requirements, means to broaden participation, FP program director seniority level, and policies that facilitate contraceptive importation or local manufacture.
- **Data** - whether the government a) collects data to monitor special sub-groups (e.g. the poor) and the availability of private sector commodities; b) has adequate client record-keeping and quality control of service statistic; and c) uses various data sources (surveys, program statistics, etc.) for program operations, monitoring and evaluation.
- **Quality** – whether the government uses WHO-based FP procedures; has FP task-sharing guidelines; has and uses quality of care indicators in public and private facilities, has adequate structures -e.g., training, logistics, supervision, short-term contraceptives (STM), and long-acting/permanent methods (LAPM)- to support quality of care at all levels.
- **Equity** - whether service providers discriminate against special groups; policies exist to prevent discrimination towards special sub-groups; underserved areas are served by CBDs; and the entire population has access to modern methods.
- **Accountability** – whether there are national, sub-national and facility-level mechanisms/systems in place to monitor, report, review, and/or encourage dialogue on informed choice, voluntariness, coercion or denial of services, and quality of care.

The NCIFP builds on the long-standing *National Family Planning Effort Index* (FPE). In 2014, the FPE and NCIFP questionnaires were fielded jointly in 90 countries by the Health Policy Project (implemented by Palladium with funding from USAID, and Avenir Health (with funding from the Bill and Melinda Gates Foundation). This report shows that NCIFP data allow assessments of FP programs and can help stimulate discussions among stakeholders about factors that help make FP programs effective, widely supported and sustainable.

## What do the Egypt results look like?

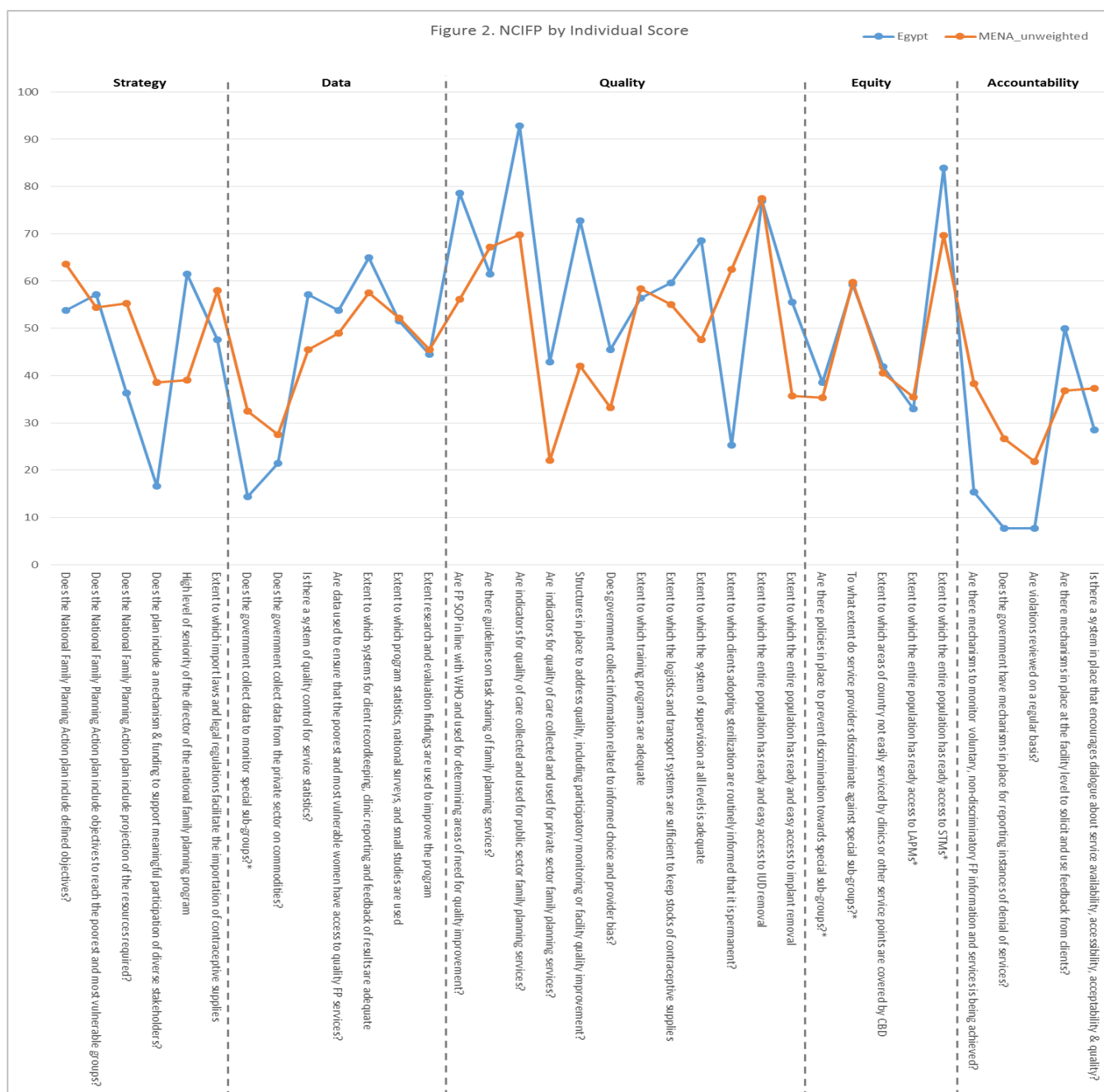
Egypt's overall NCIFP score was only one point higher than the regional average for MENA (48 vs 47%, as shown in Figure 1). The country scored higher than the regional average in two (Quality and Equity) out of the five dimensions of the NCIFP.

Individual NCIFP item scores (Figure 2) show that Egypt scored highest on whether quality of care indicators are collected/used for public sector FP services and the entire population has ready access to STMs. The lowest scores were under Accountability: whether the government has mechanisms for reporting denial of services on non-medical grounds or coercion, and review of violations on a regular basis. Low scores were also noted under Data, regarding government collection of information to monitor FP access of population sub-groups and commodities in the private sector; and under Strategy, on mechanisms for meaningful stakeholder participation. It can also be noted that the general patterns in individual item scores are similar for Egypt and the average for MENA, especially for the Equity dimension. Compared to the regional averages, Egypt scored higher or about par in various items under Data (except for government collection of data to monitor FP acceptance of special population sub-groups and private sector commodities) and under Quality (except for informing clients about the permanence of sterilization), but tended to have lower scores in a number of Strategy and Accountability items.



## Implications

The NCIFP scores reflect concerns about Egypt reversing decades of successful FP program implementation. The Demographic and Health Surveys (DHS) of 2003 to 2014 indicate practically stagnant total and modern contraceptive prevalence rates, substantial increases in national and sub-national total fertility rates, and continuing early childbearing. The recent pattern of stagnation deserves significant attention from the country's political, health and development leaders and key stakeholders. As the Cairo University Center for Economic and Financial Research Studies and the UNFPA joint study "Cost -Benefit Analysis of Egypt Family Planning Program, 2014- 2050" showed, the family planning program is a very good investment: for every Egyptian Pound spent on the FP program, the average return is 56.12 EGP for the period 2014-2050 (see more at <http://egypt.unfpa.org>).



Want to know more: Read the full NCIFP report and use the interactive data tool available at [track20.org](http://track20.org)

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