

The National Composite Index for Family Planning (NCIFP)

Malawi 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 1) national FP strategy/plan includes objectives that are quantified and 2) targets to reach the poorest and most vulnerable; 3) resource requirements are projected; 4) means to broaden participation among diverse stakeholders are supported; 5) seniority of FP program director; and 6) policies that facilitate contraceptive importation or local manufacturing.

Data - whether the government 7) collects data to monitor special sub-groups (e.g. the poor) and 8) availability data on private sector commodities; 9) quality control of service statistic in place; and 10) data used to ensure access by vulnerable groups; 11) adequate client record keeping in place; and 12-13) uses various data sources for program operations, monitoring and evaluation.

Quality – whether the 14) government uses WHO-based FP procedures; 15) has FP task-sharing guidelines; 16-17) has and uses quality of care indicators in public and private facilities, 18) has adequate structures in place to address quality, 19) collects information on informed choice and provider bias, 20) has adequate training programs in place, 21) logistics and transport systems insure sufficient stock, 22) adequate supervision system in place, 23) informed choice on sterilization, 24-25) access to IUD and implant removal

Equity - whether 26) policies are in place to prevent discrimination; 27) extent to which service providers discriminate against special groups; 28) underserved areas are served by CBDs; and 29-30) the entire population has access to modern methods.

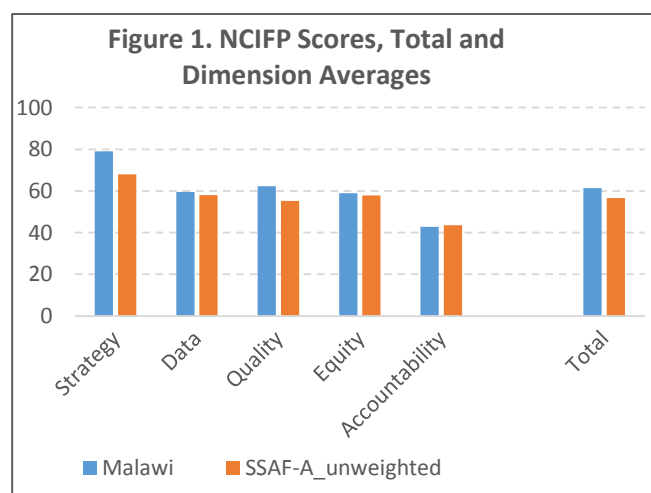
Accountability – whether there are 31) national, sub-national and facility-level mechanisms in place to monitor voluntary, non-discriminatory FP provision; 32-33) mechanisms to report denial of services in place and reviewed; 34) client feedback solicited, and 35) system in place to encourage dialogue between clients and providers.

The NCIFP builds on the long-standing National Family Planning Effort Index (FPE). In 2014, FPE and NCIFP questionnaires were fielded jointly in 90 countries by the Health Policy Project (implemented by Palladium with USAID funding) and Avenir Health's Track20 project (funded by the Bill and Melinda Gates Foundation). 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 Malawi results look like?

Malawi's total NCIFP score was slightly higher than that of the Anglophone SSAF region (61% vis-a-vis 57% as shown in Figure 1). In terms of Dimensions, Malawi averaged higher than the region regarding Strategy and Quality, but the country and region had nearly similar averages for the three other Dimensions.

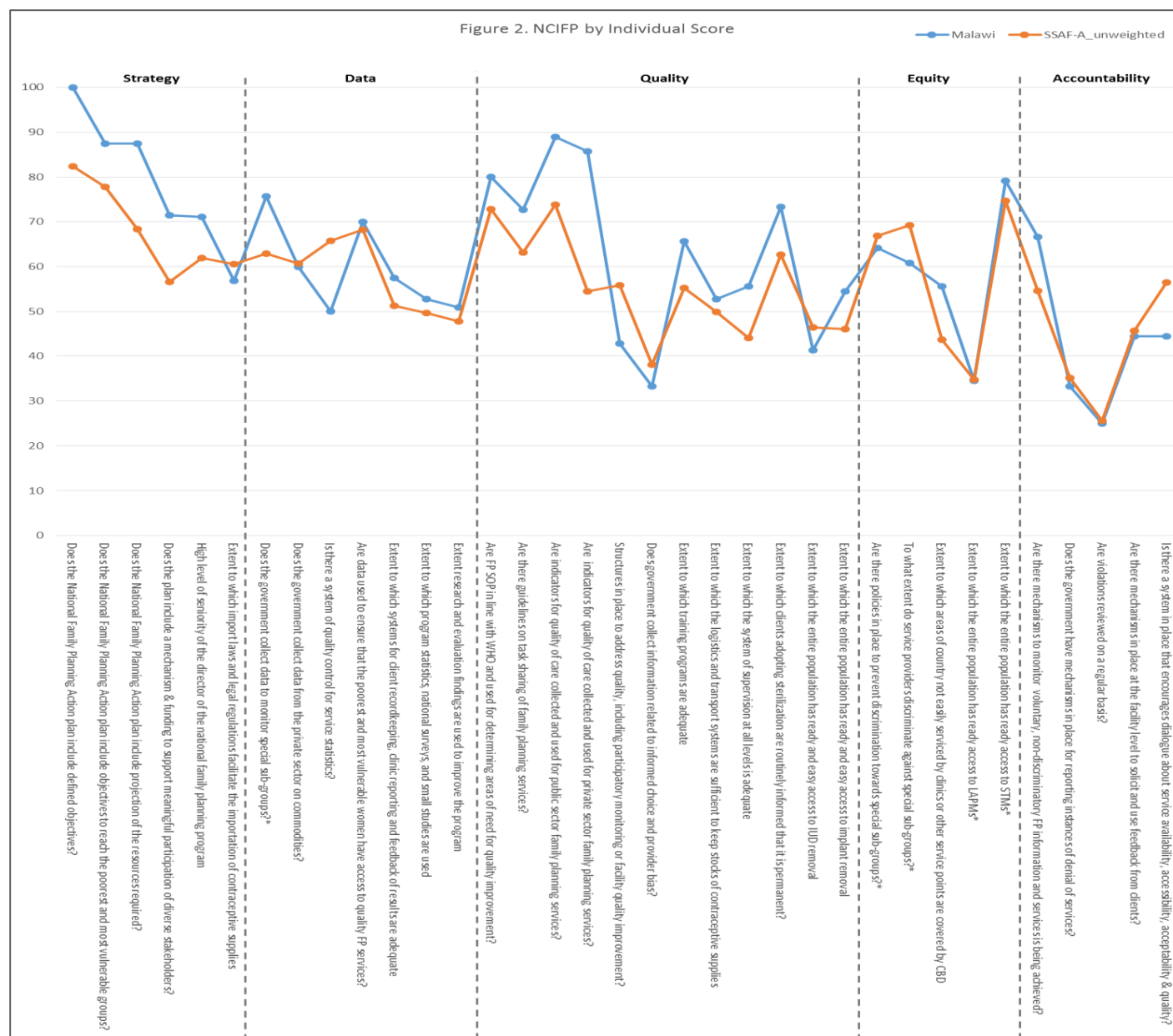
Malawi's scores for individual items (Figure 2) follow closely the regional pattern, but the country's ratings for most items under Strategy and Quality are higher than corresponding regional scores. Malawi scored 100 for having a national FP Action Plan with defined objectives and quantitative targets, and high 80s for objectives to reach the poorest and most vulnerable, and for projections of needed resources. The country's scores under Data were mostly higher than the region's, although one key challenge is quality control of service statistics. Under Quality, Malawi scored 90 percent for having public sector quality of care indicators and 80 percent for using WHO-based quality improvement standards, but rated only about 40 percent for data collection on informed choice and provider bias, and mid-30s for structures (including participatory monitoring) to address quality issues. Overall, its lowest scores were under



Accountability, regarding mechanisms for reporting instances of denial of services and regular review of violations, and under Equity, regarding access to LAPM.

Implications

The NCIFP provides qualitative information on how a country stands regarding factors that help make FP programs effective and widely supported: Strategy, Equity, Quality, Data and Accountability systems. During the FP2020 Summit in 2012, the government of Malawi committed to increase the country's contraceptive prevalence rate to 60 percent by 2020 with focus on the 15-24 age group, attempt to raise the legal age at marriage to 18, develop a comprehensive reproductive health program for young people, increase service coverage by expanding public-private partnerships, increase community participation in FP efforts (e.g. through initiatives such as the Traditional Chiefs Committee, strengthen the contraceptive logistics system, approve a new Population Policy, raise the level of FP program leadership, increase financial allocations for government systems supporting FP, and improve accountability of FP resource utilization. Malawi's high scores for various NCIFP items in 2014 point to progress toward attaining national objectives and international commitments. The NCIFP scores also point to issues and challenges that merit further discussion and appropriate action by key country stakeholders.



Want to know more: Read the full NCIFP report and use the interactive data tool available at track20.org

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