

The National Composite Index for Family Planning (NCIFP)

GHANA 2017 Scores and 2014-2017 Trendsⁱ

What is the NCIFP?

A tool that supports FP2020'sⁱⁱ efforts to improve the policy environment for family planning (FP), the NCIFP provides information on FP program activities that are not readily available in national demographic or reproductive health surveys or service statistics systems. The NCIFP measures the existence of FP policies and program implementation based on 35 items that fall under five dimensions: **Strategy**, **Data**, **Quality**, **Equity**, and **Accountability**.

Strategy – whether a national FP strategy/plan exists that includes quantified objectives, targets to reach the poorest and most vulnerable, projected resource requirements, and support for wider stakeholder participation. Also included are two items that affect strategy implementation: high-level leadership and regulations that facilitate contraceptive importation or production.

Data – whether the government collects/uses data on special sub-groups (e.g. the poor) and their access, private sector commodities, and the quality of service statistics. It also includes data-based evaluation and research to improve the program.

Quality – whether the government uses WHO standards of practice (SOPs), task-sharing guidelines, and quality of care indicators in public and private facilities. Quality of care (QOC) also considers the adequacy of structures for training, logistics, supervision, IUD and implant removal, and informed choice, including informing clients on the permanence of sterilization.

Accountability – whether mechanisms exist to monitor discrimination and free choice, review violations, report denial of services, enable facility-level feedback, and encourage communication between clients and providers.

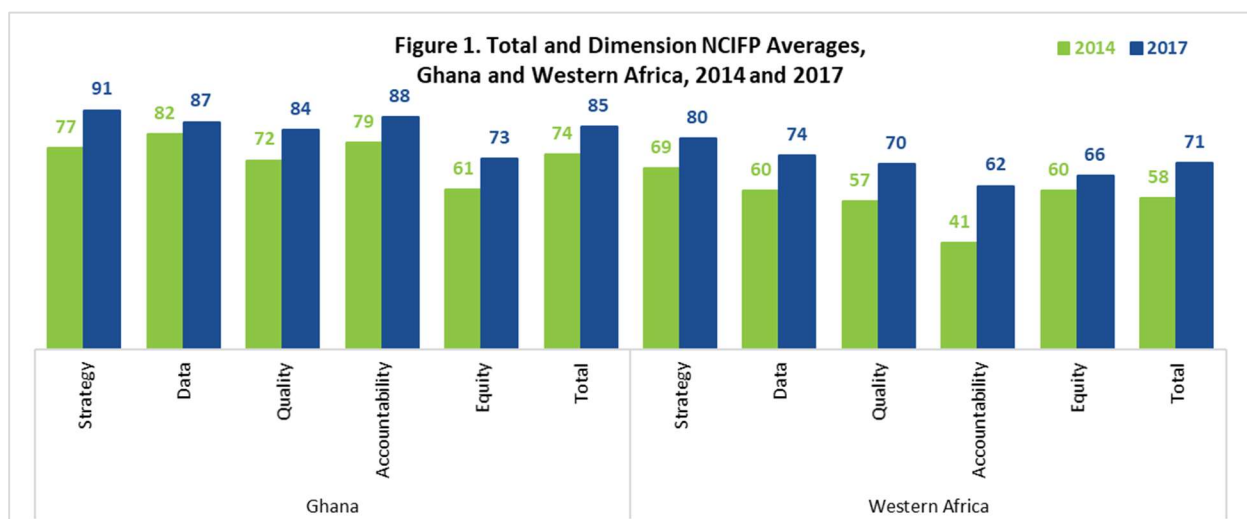
Equity - whether anti-discrimination policies exist, providers discriminate against special groups, the population has easy access to modern contraceptive methods (referring to STMs meaning short-term methods, or LAPMs meaning long-acting and permanent methods), and services are provided to underserved areas through community-based distribution (CBD).

First undertaken in 2014, the NCIFP builds on the long-standing National Family Planning Effort Index (FPE). In 2017 Avenir Health's Track20 project (funded by the Bill and Melinda Gates Foundation to assist countries participating in the FP2020 Global Initiative) administered a new round of NCIFPs to assess current national FP program status and changes since 2014. The 2017 questionnaire used yes/no categories along with a 1-10 rating scale, but to enable assessment of 2014-17 trends, the scores in this brief are based on the 2014 approach which provided primarily yes/no options.

Ghana vs Western Africa Results

Figure 1 shows Ghana and the region with improving total NCIFP scores, although the country's total NCIFP scores were much higher than the region's in both years. The two areas also saw their dimension averages rising in 2017.

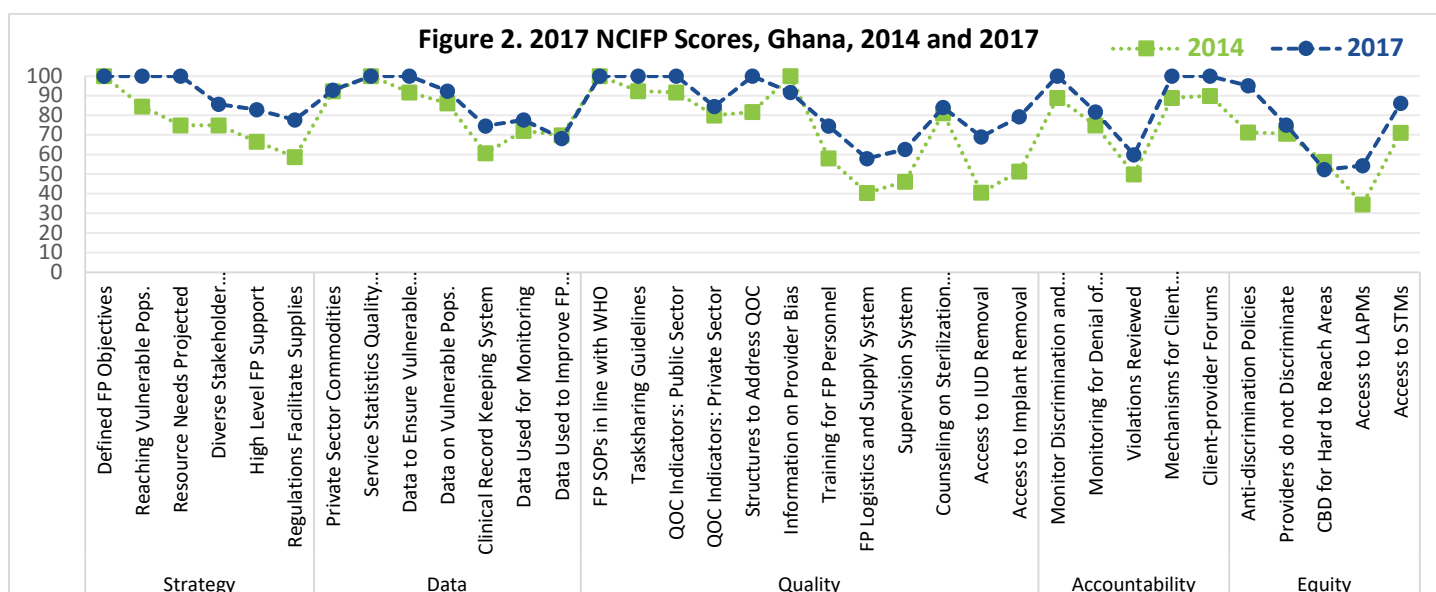
- Like most areas, Strategy was the region's highest rated dimension in both years. Ghana's highest rated dimension was Data in 2014; Strategy took over in 2017.
- The lowest rated dimension in both years was Accountability for the region and Equity for Ghana. The country and the region averaged about 60 for Equity in 2014, but in 2017, Ghana's average rose to 73 compared to the region's 66.



Individual 2017 NCIFP Scores

Ratings of individual NCIFP items over time indicate which FP program activities are progressing well, stagnating, or deteriorating. Figure 2 shows Ghana with mostly 70 or higher marks in 2014 then improving further with over 20 items rated at least 80 in 2017.

- **Strategy** – Perfect 2017 marks were given to the FP strategy for specifying quantifiable objectives, focusing on vulnerable groups, and estimating resource needs. Scores were between 78 to 86 for the three remaining items.
- **Data** – Quality control systems and using data to ensure access of the most vulnerable scored perfect in 2017, followed by 90s ratings for data collection on vulnerable groups and private sector supplies. The remaining items scored in the high 60s and 70s.
- **Quality** – The use of WHO SOPs, task-sharing, clinical/community QOC monitoring, and QOC indicators in public facilities had perfect ratings in 2017. Monitoring provider bias scored 92 (a slight decline from 2014); QOC indicators in private facilities and information about sterilization had mid-80s ratings; training and access to implant removal scored in the 70s; in the 60s ratings for supervision and access to IUD removal. Logistics was the lowest rated in 2014 (40) and 2017 (58).
- **Accountability** – Mechanisms for monitoring discrimination and free choice, provider-client dialogue, and facility-level feedback had perfect 2017 marks followed by 82 for mechanisms to report denial of services. Violations review scored the lowest in 2014 (50) and 2017 (60).
- **Equity** – 2017 scores include 95 for anti-discrimination policies, 86 for STM access, 75 for providers not discriminating against certain groups. The lowest 2017 ratings, only in the 50s, went to CBD outreach and LAPM access.



Implications

Ghana has long recognized FP as important in reducing maternal mortality and achieving benefits beyond health. The country joined the Global FP2020 Initiative in 2012 and since then, more stakeholders from public agencies, the private sector, civil society and faith-based groups, and the media are working to support the national FP program. Ghana has made significant strides in improving access to high-quality FP services and methods through efforts that include FP among services covered under national health insurance; providing FP services and commodities free of charge in public health facilities; increasing the health budget line for procurement of reproductive health commodities to reduce stock-outs and expand the method mix; improving provider training; prioritizing the poor and focusing on adolescents to reduce teenage pregnancy and childhood marriage; and supporting demand-creation.ⁱⁱⁱ

Ghana's high and mostly improved ratings across five FP program dimensions, including marks that ranged from 90 to 100, attest to the country's significant progress in improving the national FP program. The NCIFP results also point out a few relatively low-scoring items: mechanisms to review violations, CBD outreach to the most vulnerable groups of the population, access to LAPMs, and to some extent, the logistics system. The last three items are particularly striking considering current Government efforts to increase the budget for contraceptive procurement, and expand the method mix. These challenges are for the country's stakeholders to discuss, identify underlying causes, and agree on how best to address them and ensure that Ghana's efforts to strengthen the FP program continue well into the future.

ⁱ Suggested citation: Avenir Health Track20. "The National Composite Index for Family Planning (NCIFP): GHANA 2017 Scores and 2014-2017 Trends". 2017 NCIFP Policy Brief Series (2019)

ⁱⁱ FP2020 is a global initiative through which governments, civil society, multilateral organizations, donors, the private sector, and the research and development community work together to enable more women and girls to use contraceptives by 2020 (<http://www.familyplanning2020.org/>)

ⁱⁱⁱ <http://www.familyplanning2020.org/ghana>