Planning for the Future: Family Planning Scenarios to Advance Tajikistan’s Health and Economic Development Agenda

Managing Partner: EngenderHealth; Associated Partners: FHI 360; Futures Institute; Johns Hopkins Bloomberg School of Public Health Center for Communication Programs; Meridian Group International, Inc.; Population Council
Presentation overview

- An evidence-based planning and advocacy tool for family planning
- Two potential future family planning goal scenarios for Tajikistan
  - What will it take to achieve these goals?
  - What are the health benefits for women and families?
  - What will it cost?
- Two potential future family planning goal scenarios for Khatlon Oblast
- Questions and discussion
Reality Check: A planning and advocacy tool for FP programs

- Applies widely available demographic data to estimate resources needed to achieve a contraceptive prevalence rate (CPR) goal and impact of achieving that goal.
  - Guides users through multiple “What if” scenarios
    > What if past CPR trends continue?
    > What if we just maintain our current CPR?
    > What if we achieve a CPR goal of 45% by 2020?
    > What if we meet unmet need for family planning?
    > What if we increase CPR by 1.5% points annually?
    > What if we change the method mix?
  - Provides a flexible level of analysis: national, regional
CPR trends in Tajikistan

Percent of married women 15-49

- Any method
- Any modern method

2000 (MICS) | 2005 (MICS) | 2012 (DHS)
Regional variation in CPR

2012 CPR by region

Source: Demographic and Health Surveys
Planning for the future
Scenario 1:
Maintain current modern CPR among married women of reproductive age through 2020

Scenario 2:
Meet current unmet need by 2020, with a more balanced method mix
Current and future method mix

Source: Demographic and Health Surveys, Reality Check
Total family planning users by scenario

- **Baseline 2020**
- **Scenario 1**
- **Scenario 2 2020**

Source: Demographic and Health Surveys, Reality Check
What will the scenarios cost?

Annual contraceptive costs

- **Scenario 1**
- **Scenario 2**

*Source: Demographic and Health Surveys, Reality Check*
### Caseload at Baseline and in 2020

**Average number of clients per facility per month**

<table>
<thead>
<tr>
<th></th>
<th>Baseline</th>
<th>2020</th>
<th>2020</th>
<th>2020</th>
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<tbody>
<tr>
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<td>Scenario 1</td>
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Family planning prevents pregnancies

Unintended pregnancies averted

Source: Demographic and Health Surveys, Reality Check
Induced abortions averted

Abortion Averted

Source: Demographic and Health Surveys, Reality Check
Family planning saves lives

Maternal Deaths Averted (2013-2020)

Source: Demographic and Health Surveys, Reality Check
Khatlon Oblast

**Scenario 1:**
*Maintain current modern CPR* among married women of reproductive age through 2020

**Scenario 2:**
*Increase modern CPR by 1.5 points annually through* 2020, with a more balanced method mix
Baseline and endline CPR and method mix, Khatlon Oblast

Source: Demographic and Health Surveys
Commodity and supply costs (Khatlon Oblast)

Commodity Costs (2013-2020)

Source: Demographic and Health Surveys, Reality Check
Unintended pregnancies averted (Khatlon Oblast)

**Source:** Demographic and Health Surveys, Reality Check
Abortions averted (Khatlon Oblast)

Induced abortions averted (2013-2020)

Source: Demographic and Health Surveys, Reality Check
Conclusions

- Contraceptive prevalence in Tajikistan declined from 33% in the 2005 MICS to 26% among married women of reproductive age in the 2012 DHS.
- More than two-thirds of family planning users rely on the IUD.
- Due to projected population increases, maintaining the 2012 CPR through 2020 would require adding nearly 40,000 modern family planning users by 2020.
- Meeting unmet need for contraception would require adding more than 400,000 FP users by 2020 but would achieve a greater impact.
- Reality Check can help to establish realistic but ambitious national and regional goals.
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