

A PLANNING AND ADVOCACY TOOL FOR STRENGTHENING FAMILY PLANNING PROGRAMS

Questions that Reality ✓ can answer...

- If past contraceptive prevalence trends continue, where will we be in 10 years?
- Are the Ministry of Health's recently set goals for modern method prevalence in the next five years realistic? What human and material resources will be required to achieve this goal? What would be the impact of achieving this goal?
- The national program is adding Sino-implant (II) to the method mix. If we have 100,000 adopters a year, how many removals can we expect annually?

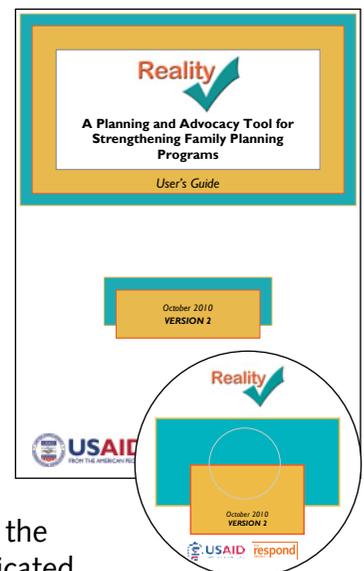
Projecting and quantifying contraceptive use is essential for setting realistic family planning service goals and planning for the resources a program will require in the future. Sound programming requires data so that the goals and activities selected are appropriate and evidence-based. But family planning program designers, managers, and implementers are often not equipped with the data or tools needed to make realistic programming decisions.

What Is Reality ✓?

Reality ✓ is an easy-to-use Excel-based tool developed by EngenderHealth (under The ACQUIRE Project) that can be used to generate data for evidence-based advocacy and strategic planning to strengthen family planning programs. The tool uses demographic data (contraceptive prevalence and population of women of reproductive age) to project the number of contraceptive users over a set time period. Based on that information, it can calculate the number of adopters (new users), commodity needs and costs, service delivery requirements, and couple-years of protection (CYPs). Reality ✓ also provides an estimate of the adverse reproductive health outcomes (unintended pregnancies, induced abortions, and maternal, infant and child deaths) that could be averted if a family planning goal were to be reached.

A key feature of the tool is that it enables users to quickly test multiple "what if" scenarios for a program, including whether current goals are achievable. It can help managers better understand the costs of continuing reliance on a particular method in a program, as well as the potential benefits of expanding method mix to promote use of more effective contraception. It can illustrate how reducing discontinuation affects the number of adopters, commodity needs, and service delivery capacity.

The tool can be used nationally and at lower levels in the health system. It is designed to be rolled out and replicated in diverse settings, particularly low-resource settings where other planning and advocacy tools are not available. It is best introduced and used in a workshop setting, so that stakeholders can generate relevant questions and scenarios to meet their particular context and needs and to increase their capacity to understand and use data for family planning strategy and resource development.



FOR INQUIRIES, PLEASE CONTACT:

The RESPOND Project
at EngenderHealth
440 Ninth Ave., 13th Floor
New York, NY 10001
Tel: 212-561-8000
E-mail: info@respond-project.org
www.respond-project.org

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

December 2010
© 2010 EngenderHealth

Where and How Has Reality √ Been Used?

EngenderHealth, through the ACQUIRE and RESPOND Projects, has worked with colleagues in several countries to apply the tool to programming and advocacy.

- Reality √'s first application was in Tanzania, as a tool for assessing the respective contributions of regions to the national contraceptive prevalence goal. The tool has been used to forecast commodity and resource needs for long-acting and permanent methods as part of annual national contraceptive quantification/procurement exercises.
- A Reality √ workshop in Uganda enabled district health management teams and Ministry of Health representatives to use data to inform sound decisions about family planning programming at the district level.
- In Ethiopia, projections using Reality √ provided evidence to support the Ministry of Health's decision to scale up hormonal implant services.
- Reality √ trainings brought together staff from multiple departments from Bangladesh's Directorate General of Family Planning (logistics, planning, clinical services, field services, management information systems) and the Ministry of Health & Family Welfare in joint discussions of how to achieve future family planning goals. The tool was instrumental in demonstrating the need to train additional health cadres to perform vasectomy in order to reach national goals.
- In Malawi, Reality √ was used in collaboration with The USAID/DELIVER Project in the Ministry of Health's annual forecasting exercise to project the numbers of family planning commodities needed for the upcoming two years. The family planning forecasting team used a combination of demographic, commodity logistics, and service data to generate estimates of current prevalence, to set evidence-based method-specific targets, and to plan the corresponding numbers of commodities required for 2011 and 2012.

The RESPOND Project is a five-year United States Agency for International Development (USAID) global project to expand family planning services and improve reproductive health in developing countries. Its overall objective is to increase the use of high-quality family planning services, with a focus on the informed and voluntary use of long-acting and permanent methods of contraception. The project provides global technical leadership to advance knowledge and support for these services among leaders and program managers at the international, regional, and country levels and supports quality family planning and other reproductive health services and information in selected countries.