FAMILY PLANNING IN THE LAC REGION: THE ACHIEVEMENTS OF 50 YEARS

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OBJECTIVES OF THIS ANALYSIS

• To document the dramatic changes over 50 years:
  • TFR and modern contraceptive prevalence (mCPR)
  • Social, economic, educational progress
• To analyze the catalytic role of governments, NGOs, USAID and others in advancing FP
• To identify key factors responsible for this progress:
  • Potentially applicable in other regions
• To outline remaining challenges for FP in the region
METHODOLOGY AND FORMAT

- Over 100 key informant interviews:
  - USAID, UNFPA, IPPF, others
  - MOH, Social Security
  - Civil society, NGO leaders
- Literature review
- Analysis of DHS, RHS, and national surveys

Availability of the findings:
- Overview report
- Executive summary
- 8 case studies:
  - Colombia
  - Dominican Republic
  - El Salvador
  - Guatemala
  - Haiti
  - Mexico
  - Nicaragua
  - Paraguay
TRENDS IN TFR: SELECTED LAC COUNTRIES 1986-2012

Source: Country Reports (DHS, RHS, and NS) and PRB data for 2012
MODERN CPR IN SELECTED LAC COUNTRIES 1986-2012

Source: Country Reports (DHS, RHS, and NS) and PRB data for 2012
ADOLESCENT BIRTH RATES: TROUBLING TRENDS

Despite increases in mCPR among adolescents in all countries:

- ABR has not decreased as rapidly for 15-19 year olds as for adult women

- 79 births/1,000 women 15-19 (surpassed only by sub-Saharan Africa)

- Higher ABR among poor adolescents than among the affluent
FP TIMELINE IN LATIN AMERICA AND THE CARIBBEAN

1960s

- IPPF mobilizes interest in FP
- USAID provides technical and financial support
- Clinics open in urban areas (pills, IUD, condoms)
- Governments remain cautious
FP TIMELINE IN LATIN AMERICA AND THE CARIBBEAN

- Expansion to CBD and CSM
- Introduction/expansion of permanent methods
- Governments increase role in services
FP TIMELINE IN LATIN AMERICA AND THE CARIBBEAN

- 1960s
  - Expansion of services (urban/rural)
  - Multiple actors, reinforced by USAID CAs
  - DHS/RHS in widespread use
  - Mexico City Policy

- 1970s

- 1980s
FP TIMELINE IN LATIN AMERICA AND THE CARIBBEAN

1960s
• Transition toward greater sustainability

1970s
• USAID begins phase-out of FP assistance

1980s
• Role of public sector increases

1990s
• Cairo - shift toward sexual/reproductive health
FP TIMELINE IN LATIN AMERICA AND THE CARIBBEAN

- **1960s**
  - Focus on contraceptive security

- **1970s**
  - USAID formalized the graduation process

- **1980s**
  - Increased role of UNFPA in procurement

- **1990s**
  - Public sector: leading source of contraception

- **2000s**
  - FP covered by insurance, social security, other
FP TIMELINE IN LATIN AMERICA AND THE CARIBBEAN

- TFR = 2.2
- mCPR = 67%
- Adolescent birth rate: 79 per 1000 women 15-19
- Only Guatemala and Haiti receive USAID bilateral FP support
TEN KEY FACTORS THAT INFLUENCED FP ACHIEVEMENTS IN THE LAC REGION
1. STRONG NGOS AND WOMEN’S GROUPS

• Pioneers and champions

• Alliances between government, NGOs, women’s groups and the private sector

• Current role: holding governments accountable
2. INCREASINGLY SUPPORTIVE SOCIO-POLITICAL AND POLICY ENVIRONMENT

- Widespread literacy and urbanization
- Pervasive radio and television changed norms
- Several countries recognized the right to SRH in their constitutions or legislation
3. SUSTAINED EXTERNAL SUPPORT

- Strong USAID investment 1965 to the late 1990s
- IPPF support to MAs; UNFPA – to governments
- Systematic graduation from USAID support in most countries
- Strategic investments in sustainability: contraceptive security and advocacy
4. COORDINATION BETWEEN GOVERNMENTS, CIVIL SOCIETY AND EXTERNAL AGENCIES

- Coordinating commissions and other mechanisms
- Umbrella groups to coordinate technical assistance
- DAIA (Spanish for “Contraceptive Security Committees”)

5. DEVELOPMENT OF KEY AREAS OF EXPERTISE

• Clinical and community-based service delivery
• Health systems management
• Information, education and communication
• Social marketing
• Contraceptive procurement and supply logistics
• Policy support for family planning
6. INFORMATION FOR DECISION-MAKING AND ADVOCACY

- Earliest programs focused on research
- Operations research
- Investments in information systems
- DHS since the 1980s
7. STRATEGIC COMMUNICATION

- Innovative use of communication channels
- 1969: Colombia’s use of radio
- 1970s: telenovelas (Mexico)
- 1970s-80s: social marketing campaigns
- By 1990s: increased used of strategic communication
- By 2000s: demand already high; less support to BCC
8. EVOLUTION OF FINANCING MECHANISMS

- NGOs - Diversification and cross-subsidization
- Public-private partnerships
- Government - health insurance systems that cover family planning
- Innovative legislation and regulation to mandate line items for contraception
9. EFFECTIVE ADVOCACY

• Supportive policy frameworks compared to some other regions

• Regulatory barriers to youth access and female sterilization (husband’s consent)

• Challenges to access to Emergency Contraception

• Increasingly strong advocacy coalitions
10. CONTRACEPTIVE PROCUREMENT

• Government procurement nearly universal

• Data on needs of marginalized groups used to mobilize governments

• Private sector initiatives (market segmentation)
REMAINING CHALLENGES AND RECOMMENDATIONS
HIGH FERTILITY RATES IN ADOLESCENTS
STRENGTHEN COMPREHENSIVE SEXUALITY EDUCATION
REDUCE GAPS IN FP ACCESS TO THE POOR, RURAL, OR INDIGENOUS
ENSURE CONTINUED COMMITMENT TO FP IN DECENTRALIZED SYSTEMS
CONTINUE TO BUILD CAPACITY FOR FP IN CONTEXT OF SR MATERNAL HEALTH
ENSURE AVAILABILITY OF INFORMATION FOR DECISION-MAKING
REFLECTIONS ON 50 YEARS
REFLECTIONS ON 50 YEARS
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