Getting On Track: Lessons Learned from Developing Costed Implementation Plans for Family Planning

Suneeta Sharma, Project Director
Health Policy Plus (HP+)
October 14, 2016
Health Policy Plus (HP+) is a five-year cooperative agreement funded by USAID. The project's HIV activities are supported by PEPFAR.

HP+ improves the enabling environment for equitable and sustainable health services, supplies, and delivery systems through policy development and implementation, with an emphasis on voluntary, rights-based health programs.
What is a CIP?

- Are concrete, specific plans for achieving the **goals** of a national FP program
- Detail the **program activities** necessary to meet national goals
- Detail the **costs** associated with activities
- Indicates the **resources** a country must raise domestically and from partners
## Countries with completed CIPs for FP

### West & Central Africa
- Benin*
- Burkina Faso*
- Cameroon*
- Côte d’Ivoire*
- Democratic Republic of the Congo
- Ghana*
- Guinea*
- Liberia (2016-17)*
- Mali*
- Mauritania*
- Niger*
- Nigeria (federal),* Gombe State, Kaduna State,° Lagos State°, Kano State (in progress)
- Senegal
- Sierra Leone (2016-17)*
- Togo*

### East & Southern Africa
- Burundi
- Ethiopia*
- Kenya
- Madagascar* (in progress)
- Malawi°
- Mozambique
- Tanzania
- Uganda
- Zambia
- Zimbabwe (in progress)

### Asia
- Bangladesh
- India
- Indonesia
- Myanmar°
- Nepal
- Pakistan (Sindh completed, Punjab and KP in progress)

* completed with support from HPP/ HP+
° completed with support from Palladium

# RHSUPPLIES2016
10-Step Costed Implementation Plan Process

**PLAN**
- **STEP 1**: Obtain Government and Key Stakeholder Buy in
- **STEP 2**: Detail Road map and Secure Resource For CIP Development

**DEVELOP**
- **STEP 3**: Conduct a Family Planning Situational Analysis
- **STEP 4**: Detail and Describe a Technical Strategy with Sub-Activism and Timeline
- **STEP 5**: Estimate Resource and Costs
- **STEP 6**: Identity Financing Gaps
- **STEP 7**: Secure Final Approval and Launch the Plan

**EXECUTE**
- **STEP 8**: Set Up and Manage Institutional Arrangement for Implementation
- **STEP 9**: Design and Implement Performance Mentoring Mechanism
- **STEP 10**: Develop and Implement a Resource Mobilization Plan

#RHSUPPLIES2016
Evolution of CIPs: Version 1.0

- Mainly supply-side focused
- Commodity costs included
- Little emphasis on:
  - Demand
  - Policy environment
  - Performance management
- Donors pledged some support
Evolution of CIPs: Version 2.0

- Stronger situation analysis
- Map to FP2020 commitments
- Detailed activity matrices, indicators, and targets

### Unintended pregnancies averted
- **Ethiopia**: 14,600,000
- **Zambia**: 3,500,000
- **Uganda**: 4,000,000
- **Nigeria**: 1,600,000

### Maternal deaths averted
- **Ethiopia**: 29,000
- **Zambia**: 99,000
- **Uganda**: 6,000
Evolution of CIPs: Version 3.0

Focusing on implementation of the plans, or execution

- **2012**: Ouaga Part. countries
- **2013/14**: Zambia, Uganda
- **2015**: Nigeria, Ghana, Malawi
- **2016**: Madagascar OP countries—round 2 of CIPs
7 Lessons we have learned from our experience developing and implementing CIPs
The right timing matters

• Adjust the length of the CIP process to maximize engagement
• Synchronize the CIP with other strategic processes taking shape in-country
• Take advantage of political momentum

Photos by UNFPA Uganda, Uganda State House
A truly consultative process contributes to overall success

- Actively engage stakeholders to foster commitment
- Capitalize on the synergies that a consultative approach elicits between stakeholders
- Assign clear roles and responsibilities at the start
For a CIP to act as an effective roadmap to achievement, it must be evidence- and reality-based

- Commit to honestly reflecting the FP program’s current weaknesses and challenges
- Set goals that are ambitious, but realistic to the country’s context
- Take time to complete an accurate, activity-based costing exercise
Incorporating best practices and cross-country learning can ensure high-quality, innovative programming

- Consider and include evidence-based best practices where relevant
- Ensure rights and rights principles are incorporated
CIPs need to be living documents

- Set systems and expectations that allow the CIP to shift and adapt as necessary to meet goals
- Schedule yearly reviews and adjust to shifts in country and global contexts

It is essential to widen the net to capture resource mobilization opportunities.
The CIP is not “done” at the launch

- Technical assistance often needed beyond the CIP launch
- More robust systems for CIP performance management needed
- Do not overlook the importance of disseminating the CIP
- Subnational planning and implementation is critical, particularly for decentralized countries
Additional resources

- HPP brief: “Getting it Right: CIP lessons learned”
- HPP brief: “Costed Implementation Plans: Strengthening Investments in Family Planning”
Health Policy Plus (HP+) is a five-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-15-00051, beginning August 28, 2015. The project's HIV-related activities are supported by the U.S. President’s Emergency Plan for AIDS Relief (PEPFAR). HP+ is implemented by Palladium, in collaboration with Avenir Health, Futures Group Global Outreach, Plan International USA, Population Reference Bureau, RTI International, the White Ribbon Alliance for Safe Motherhood (WRA), and ThinkWell.

The information provided in this document is not official U.S. Government information and does not necessarily represent the views or positions of the U.S. Agency for International Development.