



Costed Implementation Plan Resource Kit



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Costed Implementation Plans for Family Planning

10-Step Process for CIP Planning, Development,
and Execution

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Produced by:



K4Health
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OVERVIEW

Between 2009 and 2014, 16 countries developed costed implementation plans (CIPs) for family planning. The international community has learned valuable lessons from these experiences, as well as the related work of various organizations and technical experts, including the USAID-funded Health Policy Project, implemented by Futures Group; FHI 360; and the Bill & Melinda Gates Foundation, among others. To translate these lessons and experiences into best practices for the wider family planning (FP) community, a recommended three-phase, 10-step CIP process has been prepared to guide policymakers through a CIP's development.

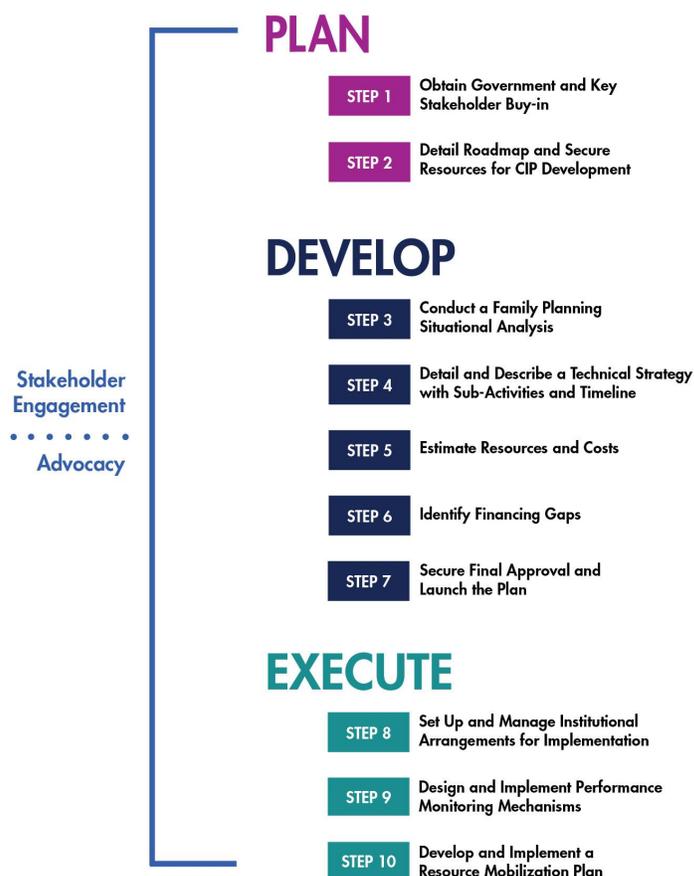
For those new to the process, this guidance details the full CIP process. For those familiar with, or already undergoing the process, it is possible to go directly to the tools needed. The tools can be accessed via the online [CIP Resource Kit](#), either on the page dedicated to the CIP phase in which the tool is used or on the Resources page. CIP tools and resources referred to in this document are hyper-linked to facilitate user access. For a list of the kit's content, see the "Applicable Tools & Resources" section of the table in Annex A.

When starting to conceptualize a costed plan, consider these **three sequential phases**:

1. **Plan**
2. **Develop**
3. **Execute**

Even when following the phases' **10 steps**, the CIP process will unfold differently in each country and at the subnational level; some countries will move through the steps at a rapid pace (4–6 months), and other countries will skip some steps or combine or re-order them to align with ongoing processes and their specific national context. In many countries, a timeline of 6–12 months is reasonable. Countries can benefit from developing a CIP even if they are unable to implement the full 10-step process as described in this document. Therefore, the step descriptions presented should be taken as guidance, as they illustrate a range of flexible, responsive processes that should be tailored to the country's context through iterative conversations between ministry staff and technical support providers who can advise based on other country experience. However, it is important to note that [stakeholder engagement](#) and [advocacy](#) are cross-cutting components essential to successfully moving through each phase. In particular, coordinated stakeholder action and communication should occur throughout all steps of the process.

10-Step Costed Implementation Plan Process



For a quick overview of the three CIP phases, see Annex A: CIP Phase Descriptions. For a graphical presentation of the CIP process, see Annex B: 10-Step Costed Implementation Plan Process.

PHASE I: PLAN

Government and stakeholder buy-in is cultivated and secured in the planning phase. Also in this phase, initial identification and engagement of key stakeholders is begun; the approach, tools, and techniques to be used are developed (i.e., the how, by whom, and when); and resources for the development of the CIP are secured.

Step 1: Obtain Government and Key Stakeholder Buy-In

Activity 1A: Arrive at decision to engage in the CIP process. The government determines that engaging in the CIP process would help define a more focused, detailed direction for the country's national FP program. The government (usually the Ministry of Health and sometimes with the Ministry/Division of Planning) takes ownership of the CIP and initiates the development process. One or more individuals in the government may act as CIP champions to spearhead the buy-in process. In some cases, prior to the final decision to move ahead with the CIP, development/implementing partners or other sources of technical assistance may work with the government to [brief the ministry](#) about the benefits and rationale for developing a plan. The process for securing buy-in also involves (1) assigning an individual to act as the [Ministry of Health \(MOH\) focal person](#) to lead the process, (2) engaging senior leadership at the ministry, and (3) designating government resources (human and financial) to support the CIP process.

Activity 1B: Make formal request for CIP support. Like any strategic planning process, the development of the CIP is labor-, time-, and resource-intensive, and it requires a combination of essential skills and expertise to successfully complete the CIP process. The process should involve government planning departments within relevant ministries; however, if government resources are constrained and/or expertise is inadequate, the government should request technical support for CIP development and/or funding from partners. Most countries that currently have CIPs (including Bangladesh, Benin, Burkina Faso, Cameroon, Cote d'Ivoire, Guinea, Kenya, Mali, Mauritania, Niger, Nigeria, Senegal, Tanzania, Togo, Uganda, and Zambia) received external technical assistance. Key stakeholders, such as donors and in-country partners, should be briefed on the decision to move ahead with a CIP, as well as the resources required, so they can provide crucial technical and financial contributions during the early stage of the process.

Activity 1C: Form [CIP Task Force](#). The MOH forms a CIP Task Force to temporarily assemble a group of key stakeholders to provide oversight, guidance, resources, and expertise during the CIP development process. The group represents the governance and decision-making body of the process. The CIP Task Force is chaired by the MOH focal person (leading the process) and includes a Project Manager (managing and coordinating the entire effort) and other key stakeholders, usually selected from an existing FP Technical Working Group (TWG) and/or development partners and influential FP experts in the country. The CIP Task Force steers the process forward to produce the CIP and facilitates the eventual transition into execution. At this stage, it is essential to secure adequate financial and human resources and identify the composition of a technical support team.

Activity 1D: Secure commitment for resources for CIP development. The government works with development partners to secure adequate human and financial resources for the

CIP's development from multiple sources (including from within the government). These resources should cover all costs associated with the plan's development. Additional resource mobilization may be required to support plan execution.

Step 2: Detail Roadmap and Secure Resources for CIP Development

Activity 2A: Form [CIP Technical Support Team \(TST\)](#). A TST is formed to carry out and monitor the day-to-day activities of the CIP process. The team should have clear assigned roles, responsibilities, and reporting lines. The team usually includes staff from the ministry and national and/or international consultants (including individuals with skills in costing). The TST is led by the Project Manager who reports directly to the MOH focal person. Because development of the CIP involves numerous individuals who need to work together as a team in short timeframes, it is advisable that the members co-locate, preferably within government offices, to gain easy and regular access to government staff and resources. For more information on the role of the TST, refer to the "[Team Roles and Responsibilities](#)" component of the toolkit.

Activity 2B: Develop the [process roadmap](#). The TST develops a detailed description of the CIP development process, referred to as the CIP roadmap, which includes the scope, activities, process, approaches and tools, calendar, and available resources. Activities related to the management, coordination, and communication of the CIP process should also be reflected in the roadmap; for example, the need for and scheduling of status meetings with the CIP Task Force and briefing meetings with MOH leadership should be included. The roadmap should reflect a country-led, country-owned, and inclusive process. The TST seeks input and approval of the roadmap from the CIP Task Force before proceeding. The CIP Task Force confirms the availability and source of financial resources to implement the roadmap.

Activity 2C: Identify and engage stakeholders. At this time, the TST works with the CIP Task Force to identify relevant stakeholders for engagement and begin drafting a stakeholder engagement plan. A [stakeholder matrix](#) is generated to guide future development of an engagement strategy for the CIP process. This matrix is a living document that is progressively elaborated throughout the CIP development process as new information and edits from stakeholders are gathered; as such, it can be revised again after launch of the CIP in Step 7. Early engagement of stakeholders is conducted, including making relevant players aware of the CIP effort and how they can be involved. A kick-off meeting is recommended, involving the CIP Task Force, TST, FP TWG members, development partners, and other key stakeholders to inform them of the project's initiation and the expected nature and level of their involvement, as well as to allow them to ask questions.

Applicable Tools and Resources

- [Costed Implementation Plans for Family Planning: The Basics](#)
 - [Costed Implementation Plans: Guidance and Lessons Learned](#)
 - [Strategic Budgeting Process for Scale-Up of Family Planning](#)
 - [Making the Case for a CIP: PowerPoint Template](#)
 - [Costed Implementation Plans for Family Planning: Standard Elements Checklist](#)
 - [Policy Checklist: Essential Elements for Successful Family Planning Policies](#)
 - [10-Step Process for CIP Planning, Development, and Execution](#)
 - [Developing CIPs: Team Roles and Responsibilities](#)
 - [Illustrative CIP Process Roadmap and Sequencing](#)
 - [How to Advocate for FP Policies and Commodities](#)
 - [Stakeholder Engagement for Family Planning Costed Implementation Plans](#)
 - [Family Planning 2020: Rights and Empowerment Principles For Family Planning](#)
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PHASE II: DEVELOP

The CIP is developed and planning begins for the transition into execution, Phase III. The [development process](#) is iterative and cyclical and involves identifying key issues, defining the results, identifying intervention activities to achieve the results, and generating budgetary costs. It also includes outlining institutional arrangements for implementation, developing a performance monitoring mechanism, and conducting advocacy.

Step 3: Conduct an FP Situational Analysis

Activity 3A: Gather information on the current FP context. The TST engages in a systematic collection of data from various sources to inform understanding of the past and current status of the FP program. The TST first conducts a desk review to assess the current FP status, policies, programs, and financing and conducts a stakeholder mapping exercise (donors and civil society organizations). In this activity, the TST collects and conducts quantitative and qualitative content analysis of all data, reports, and documents, including centralized data (Demographic Health Surveys or DHS, commodity reports, global funding information from the Netherlands Interdisciplinary Demographic Institute, etc.); national policy and program documents (population policy, commodity security plan, etc.); data and reports from the ministry (health management information system and ministry financing of FP/RH); and data and reports from in-country partners and donors (current funding levels and planned investment and programming, type, and location of program activities, etc.). The data include, but are not limited to, basic indicators and analysis drawn from the country's DHS on family planning status (contraceptive prevalence rate or CPR, method mix by region, education, wealth, urban/rural, etc.)

At this stage, the stakeholder matrix developed in Activity 2C is further elaborated as additional information is generated. The TST then [interviews](#) all relevant stakeholders including the government, donors, nongovernmental organizations, and partners. These interviews could be conducted one-on-one or as group consultations based on various relevant themes (contraceptive security, advocacy, youth, integrated services, social behavior change and communication, etc.). Regardless of the interview methodology, the interviews should also capture the concerns/interests, expectations, and influence of the stakeholders. The Project Manager, who is responsible for the day-to-day running of the entire CIP development process, uses this information to develop a stakeholder engagement plan. The plan guides the TST on how stakeholders should be engaged and managed during the CIP development process. For example, key stakeholders are categorized according to their technical expertise to form strategic advisory groups (SAGs), which the TST will consult regarding their respective thematic area throughout the CIP development process.

Activity 3B: Conduct information review, synthesis, and analysis. The TST engages in a systematic review and analysis of information and data collected in Activity 3A. Analysis of secondary statistical data is performed at this stage. Gathered information is classified around thematic topics and sub-topics/issues. This includes a systematic analysis of all components of the FP program and related sectors in the country, including supply-side and demand-side barriers (bottleneck or otherwise) to reducing unmet need for family planning. As the situation analysis is developed, writing for the CIP document can begin; this text will be progressively elaborated, detailed, and edited throughout the process.

Activity 3C: Prioritize issues and analyze root causes. Based on the analysis of information from Activity 3B, the TST works with expert stakeholders to identify the root causes of the issues and tag those that are a priority for deeper analysis. Through facilitated workshops, the

TST works with the SAGs to prioritize thematic areas based on agreed-on criteria. The problem analysis is a vital stage of CIP development, as it guides all subsequent analysis and decision making on priorities.

Step 4: Detail and Describe a Technical Strategy with Sub-Activities and Timeline

Activity 4A: Set or refine the FP goal. In most situations, the FP goal is set as part of national strategic plans. In cases where a specific FP goal has not been set, the TST consults with the government and conducts projection exercises to define a goal. Similarly, in situations where a goal is set but is unable to meaningfully inform CIP development—for example, when the goal is not specific, measurable, achievable, realistic, and time-targeted (SMART)—the TST also consults with the government to refine the goal. After the FP goal is set, the team uses projection tools to forecast the (1) required annual rate of change in CPR to reach the goal; (2) regional-, state-, or district-level goals; and (3) number of users—including new acceptors—required to reach the goal.

Activity 4B: Develop a results framework. The TST works with the SAGs to develop a results framework that defines the specific outcomes and outputs needed to achieve the FP goal. Development of the framework is informed by the root cause analysis conducted in Activity 3C, suggested solutions collected during the information gathering process under Step 3, the FP goal to be achieved, and the review of country-level and international evidence-based practices. The TST ensures that the strategy is based on a [rights-based framework](#). The results framework is then reviewed, and the government and other relevant stakeholders (SAGs and CIP Task Force) identify the priority results. This process helps determine what should/can (or should not/cannot) be included within the FP program's scope according to set criteria.

While identifying the priority results, stakeholders also identify priority strategies for CIP implementation, financial resource allocation, and performance monitoring. Prioritized strategies form the basis of the implementation plan, which describes causality and attribution among inputs, activities, and the results (outputs, outcomes, and impact). During the prioritization process, several factors may be beyond direct control of the FP program but have the potential to influence success. These factors, together with uncertain events (i.e., risks), are identified; and further review of the framework is conducted to ensure that possible contingency activities/interventions are included in the framework. Best practices and innovative and [high-impact practices](#) across all activities are also considered to maximize success and optimize use of resources. At this stage, the implementation plan is in draft form, as further work is needed to detail the activities, inputs, and indicators before the costing process begins.

Activity 4C: Estimate targets. Based on activities in the logframe, the TST estimates annual targets for outputs, such as the number of commodities to be procured and number of providers to be trained. The estimation of the current method mix (if no recent DHS is available) is estimated based on currently available service delivery and commodity consumption data. The TST then forecasts commodity requirements based on demographic projections and projects future method mix based on program activities in the CIP and through regional comparison. Estimation of targets is ideally conducted when baseline data are available. If unavailable, expert judgment is used to generate estimates with clear justification and assumptions. The annual targets represent performance targets to be monitored annually and later in the CIP process to estimate costs in Step 5.

Activity 4D: Define and schedule activities. The TST further elaborates the implementation plan by working with the SAGs to define intervention activities, detail sub-activities, and schedule them according to timing and coordination needs.

Activity 4E: Define indicators. Based on the estimated targets in Activity 4C, quantitative and qualitative indicators are defined to measure progress/performance of CIP execution.

Activity 4F: Refine and validate plan. The refinement and validation activity is highly iterative to produce the final draft of the CIP. The TST presents the draft plan with objectives, activities, targets, indicators, inputs, outputs, and outcomes to stakeholders for final review, refinement, and validation. During this time, the substantive portion of the CIP document is edited and polished for presentation to the stakeholders.

Activity 4G: Estimate impact. The TST then uses ImpactNow to calculate the overall impact of implementing the CIP, including gains in maternal and child deaths averted, unintended pregnancies, and financial savings to the healthcare system as a result of increased FP uptake. This information is included as an appendix to the CIP so that the government and other stakeholders have a clear understanding of the benefits of investing in family planning and, thus, arguments to bolster specific funding requests from government and donors.

Activity 4H (optional): Align with the subnational level. If specific subnational plans are desired, the TST defines regional/district objectives based on an analysis of the respective issues and challenges in that geographical area. District or state meetings are held for regional and/or district health leaders to define subnational targets to promote decentralized investment in and ownership of the CIP. Next, district/state leaders gather information on resource needs to meet subnational targets, and initial regional objectives based on the national targets are developed. A second district or state meeting may be held for regional/district health leaders to present their budgets and service delivery information and agree to subnational progress targets against the CIP goals.

Step 5: Estimate Resources and Costs

Activity 5A: Estimate common unit costs. The Family Planning CIP Costing Tool has identified numerous common costs necessary for scaling up family planning. These defaults include meeting costs, human resource costs, and costs related to common demand-generation channels. Additional unit costs can be added as necessary to address all unit types captured in the plan. The TST determines the unit costs of these common items based on partner and stakeholder interviews, document review, and market analysis and then populates the “Costing Inputs” worksheet of the CIP tool. Contraceptive costs and associated consumables costs are obtained from the Ministry of Health, or the donor/partner responsible for procuring FP commodities, and then entered into the “Contraceptive Costs” worksheet.

Activity 5B: Input quantity of units required to achieve plan objectives. The TST populates the Family Planning CIP Costing Tool with information from the results framework. Activities are entered by thematic area, and each activity is disaggregated into a sub-activity or concrete action that needs to occur (e.g., a meeting or an item to be procured). The number of units required to complete each action is calculated from the target estimation (Activity 4C) and entered into the appropriate year, as defined by the activity timeline (Activity 4D).

Activity 5C: Complete costing. Based on the above inputs, the Family Planning CIP Costing Tool calculates the total resource requirements for the entire plan, as well as for each specific thematic area, and is reported by plan year and the full term. These totals are reported on the “Cost Summary” worksheet of the costing tool.

Activity 5D: Review costing. The costing is then reviewed for inconsistencies across all items, and the finalized costing is reviewed and validated by the FP TWG and government.

Step 6: Identify Financing Gaps

The [Family Planning CIP Gap Analysis Tool](#) is an Excel-based tool used to calculate the existing gap between resource needs and resources allocated for each thematic area in the CIP. While it can be used to calculate the funding gap for the full term of the CIP, it is typically most useful in estimating the short-term gap (1–3 years), as most governments and donors are unable to confirm funding allocations beyond that period. To improve the capacity of local governments to conduct this analysis without additional technical support in future years, the TST shares the final tool with each country and engages planning officials within the appropriate ministry throughout the process.

Activity 6A: Collect information on projected funding for family planning. The TST collects information from the government, donors, and partners on anticipated funding for family planning, as well as the specific allocation of resources for each FP thematic area (as identified in the CIP) and the forecasted FP commodities through a combination of interviews and questionnaires.

Activity 6B: Compare projected funding levels to the resource requirements identified in the CIP. The Family Planning CIP Gap Analysis Tool is designed to be used in coordination with the costing tool; the annual cost of the CIP, disaggregated by thematic area, can be transferred directly from the costing tool to the gap tool. The TST inputs the information received from government and donors to identify any gap between funding required and resources allocated for each thematic area during each year of the plan.

Activity 6C: Review estimated funding gaps. The TST presents the results of the gap analysis to the government, donors, and FP TWG. This process provides stakeholders with information on which of the thematic areas are underfunded and by what magnitude, as well as provides donors with information on where additional resources may be allocated to support the government to achieve their strategic priorities.

Step 7: Secure Final Approval and Launch the Plan

Activity 7A: Review and approve the CIP. The government and relevant key stakeholders review and approve the final CIP. The protocol and procedures for the approval of government plans are followed.

Activity 7B: Develop a dissemination plan and materials. The Project Manager develops the dissemination plan for the CIP and estimates the number of documents to be printed. In addition, the Project Manager develops simplified, short dissemination materials, such as an executive plan summary, for easy sharing with partners and implementers (e.g., at the central level). Other relevant dissemination/advocacy-related publications are produced at this time.

Activity 7C: Produce and print the final document. The TST hands over the final CIP document to the Project Manager; and the document is copyedited, formatted, and printed according to the dissemination plan.

Activity 7D: Hold a launch event. The CIP is launched and disseminated country-wide.

Applicable Tools and Resources

- Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans
 - [Useful Tools for Developing a CIP Technical Strategy](#)
 - [Family Planning CIP Costing Tool & User Guide](#)
 - [Family Planning CIP Gap Analysis Tool & User Guide](#)
 - [How to Develop and Execute a Performance Monitoring Plan \(PMP\) for a CIP](#) (coming soon)
 - Four Key Elements for Execution of Family Planning Costed Implementation Plans
 - [How to Advocate for FP Policies and Commodities](#)
 - [Stakeholder Engagement for Family Planning Costed Implementation Plans](#)
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PHASE III: EXECUTE

In the final phase, the CIP is executed, monitored, and managed. Execution involves three steps that occur in tandem to ensure a sustained commitment from leaders and stakeholders (at all levels) responsible for leading and managing plan implementation, resource mobilization, and advocacy and monitoring progress toward goals. Because the CIP is a living document, CIP execution should be dynamic and include periodic review and revision based on results and changes in the internal and external environment.

Step 8: Set Up and Manage Institutional Arrangements for Implementation

In this step, the institutional mechanisms are developed that define “how” and “by whom” the CIP will be implemented, coordinated, and monitored as the plan execution begins. In addition, advocacy for CIP execution and stakeholder engagement continues.

Activity 8A: Organize an implementation coordination mechanism. During the development phase, the institutional arrangements for implementation are identified and described in the plan. At this stage, the focus is to (1) translate the institutional arrangements described in the CIP into functional entities and (2) set up a coordination mechanism among many stakeholders to guide the plan’s implementation. For example, this may involve deliberate actions to ensure that all participating institutions operate in a manner that contributes to the broader CIP. For example, other government ministries contributing to the CIP should be well-informed of their roles and mechanisms in relation to the Ministry of Health’s work. In addition, terms of reference for the FP TWG may be reviewed and refined to reflect implementation of the CIP; focal points may be assigned for the effective coordination of different thematic areas; and monthly coordination meetings and semi-annual CIP review meetings may be scheduled and supported by the government and partners. The stakeholder engagement plan developed in Phase I is also reviewed and aligned to the needs and objectives of Phase III.

Activity 8B: Develop a subnational implementation plan. At this stage, the approach for subnational implementation and accountability is developed to facilitate complete roll-out of the CIP. Roles and accountability are translated to subnational administrative units. This may include the development of subnational plans for CIP targets, dissemination, and capacity building for implementation and administration.

Activity 8C: Identify capacity-building and implementation support needs. Capacity-building and resource needs for the government to lead CIP execution are identified and secured.

Activity 8D: Develop annual joint workplans. The government and partners develop and execute joint annual workplans, with detailed quarterly performance/progress reports and plans submitted to the government for oversight.

Activity 8E: Review and revise. Throughout the entire process, the CIP is fine-tuned through dedicated periodic review and decision making.

Step 9: Design and Implement Performance Monitoring Mechanisms

Activity 9A: Develop a performance monitoring mechanism. Building on existing performance monitoring mechanisms in the government, the TST develops a system to monitor CIP execution on a semi-annual or annual basis. Data on outputs, expenditures, and resources mobilized are collected to assess progress in implementation, in addition to progress in

commonly tracked [FP indicators](#) such as the CPR, unmet need for family planning, and others. Indicators developed in Step 4 form the basis of the performance monitoring system, and progress is measured against the targets generated from Activity 4C. Furthermore, the resources mobilized or expended to produce results are tracked and compared to cost targets developed in Step 5.

Activity 9B: Design data collection tools. The TST may choose to create simplified tools to track indicators on outputs, expenditures, and resources mobilized as described above. These simplified tools could be based on the roadmap developed for ongoing data collection and tracking within the government, as well as provide easy performance monitoring and accountability in line with current global and national guidance.

Activity 9C: Roll out the performance monitoring system. The performance monitoring system is implemented (includes data collection, analysis, and reporting against indicators). A reasonable (non-burdensome) and capacity-relevant data collection and monitoring and evaluation plan is aligned with global, rights-based standards (e.g., CIP indicators aligned to national information management systems; the FP2020 Performance, Monitoring, and Accountability measures; and World Health Organization indicators). Progress reports are communicated to senior government leadership via appropriate tools (e.g., the Reproductive, Maternal, Newborn, and Child Health Score Card).

Step 10: Develop and Implement a Resource Mobilization Plan

Activity 10A: Develop and implement a resource mobilization plan. A CIP resource mobilization plan is developed and implemented. Messages and materials that communicate the expected positive outcomes of a fully implemented CIP may be developed to support mobilization efforts.

Activity 10B: Conduct ongoing advocacy. Advocacy efforts to foster an enabling environment, mobilize resources, and gain visibility are planned and coordinated among all partners and the government. Budget tracking is also performed to assess the government's contribution to FP efforts.

Applicable Tools and Resources

- Four Key Elements for Execution of Family Planning Costed Implementation Plans
 - [How to Develop and Execute a Performance Monitoring Plan \(PMP\) for a CIP](#) (coming soon)
 - [Tracking Contraceptive Financing](#)
 - [How to Advocate for FP Policies and Commodities](#)
 - [Stakeholder Engagement for Family Planning Costed Implementation Plan](#)
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ANNEX A. CIP PHASE DESCRIPTIONS

	PHASE I: PLAN	PHASE II: DEVELOP	PHASE III: EXECUTE
Description	<p>This is the planning and set-up phase for CIP development and implementation. It establishes the rationale for CIP development and seeks to secure government and stakeholder buy-in. If governments desire technical assistance for plan development, a formal request is made and approved by a development partner such as the United States Agency for International Development, United Nations Population Fund, or Bill & Melinda Gates Foundation. Also in the planning phase, the CIP development process, approach, tools, and techniques are defined (i.e., the how, by whom, and by when are described) and resources for CIP development are secured.</p> <p>This phase is complete when the outputs have been achieved.</p>	<p>This phase involves defining priority issues, interventions, and activities and generating cost estimates. It also includes identifying institutional arrangements for implementation, developing a performance monitoring plan, and continuing advocacy to maintain support for coordinated CIP implementation.</p> <p>This phase is complete when the CIP is launched at a formal event.</p>	<p>In this phase, the CIP is executed, monitored, and managed. This phase also involves ensuring a sustained commitment from leaders and stakeholders at all levels who are responsible for leading and managing plan implementation, resource mobilization, and advocacy. A performance monitoring mechanism is implemented to assess progress toward goals.</p> <p>Because the CIP is a living document subject to periodic review and revision based on results and changes in the internal and external environment, this phase has no defined end period.</p>

	PHASE I: PLAN	PHASE II: DEVELOP	PHASE III: EXECUTE
Activities	<p>Step 1: Obtain Government and Key Stakeholder Buy-in</p> <p><i>Activity 1A: Arrive at decision to engage in the CIP process</i></p> <p><i>Activity 1B: Make formal request for CIP support</i></p> <p><i>Activity 1C: Form CIP Task Force</i></p> <p><i>Activity 1D: Secure commitment for resources for CIP development</i></p> <p>Step 2: Detail Roadmap and Secure Resources for CIP Development</p> <p><i>Activity 2A: Form CIP Technical Support Team</i></p> <p><i>Activity 2B: Develop the process roadmap</i></p> <p><i>Activity 2C: Identify and engage stakeholders</i></p>	<p>Step 3: Conduct an FP Situational Analysis</p> <p><i>Activity 3A: Gather information on the current FP context</i></p> <p><i>Activity 3B: Conduct information review, synthesis, and analysis</i></p> <p><i>Activity 3C: Prioritize issues and analyze root causes</i></p> <p>Step 4: Detail and Describe a Technical Strategy with Sub-Activities and Timeline</p> <p><i>Activity 4A: Set or refine the FP goal</i></p> <p><i>Activity 4B: Develop a results framework</i></p> <p><i>Activity 4C: Estimate targets</i></p> <p><i>Activity 4D: Define and schedule activities</i></p> <p><i>Activity 4E: Define indicators</i></p> <p><i>Activity 4F: Refine and validate the plan</i></p> <p><i>Activity 4G: Estimate impact</i></p> <p><i>Activity 4H (optional): Align with the subnational level</i></p> <p>Step 5: Estimate Resources and Costs</p> <p><i>Activity 5A: Estimate common unit costs</i></p> <p><i>Activity 5B: Input quantity of units required to achieve plan objectives</i></p>	<p>Step 8: Set Up and Manage Institutional Arrangements for Implementation</p> <p><i>Activity 8A: Organize an implementation coordination mechanism</i></p> <p><i>Activity 8B: Develop a subnational implementation plan</i></p> <p><i>Activity 8C: Identify capacity-building and implementation support needs</i></p> <p><i>Activity 8D: Develop annual joint workplans</i></p> <p><i>Activity 8E: Review and revise</i></p> <p>Step 9: Design and Implement Performance Monitoring Mechanisms</p> <p><i>Activity 9A: Develop a performance monitoring mechanism</i></p> <p><i>Activity 9B: Design data collection tools</i></p> <p><i>Activity 9C: Roll out the performance monitoring system</i></p> <p>Step 10: Develop and Implement a Resource Mobilization Plan</p> <p><i>Activity 10A: Develop and implement a resource mobilization plan</i></p> <p><i>Activity 10B: Conduct ongoing advocacy</i></p>

	PHASE I: PLAN	PHASE II: DEVELOP	PHASE III: EXECUTE
		<p><i>Activity 5C: Complete costing</i> <i>Activity 5D: Review costing</i></p> <p>Step 6: Identify Financing Gaps <i>Activity 6A: Collect information on projected funding for family planning</i> <i>Activity 6B: Compare projected funding levels to the resource requirements identified in the CIP</i> <i>Activity 6C: Review estimated funding gaps</i></p> <p>Step 7: Secure Final Approval and Launch the Plan <i>Activity 7A: Review and approve the CIP</i> <i>Activity 7B: Develop a dissemination plan and materials</i> <i>Activity 7C: Produce and print the final document</i> <i>Activity 7D: Hold a launch event</i></p>	

	PHASE I: PLAN	PHASE II: DEVELOP	PHASE III: EXECUTE
Outputs	<ul style="list-style-type: none"> • Government and key stakeholder buy-in • Roadmap for CIP development (a detailed description of the plan that includes scope, activities, process approaches and tools to use, calendar, resources, etc.) • Established CIP Task Force, with clear assigned roles, responsibilities, and reporting lines • Adequate human and financial resources committed to complete the CIP development process • Stakeholder matrix 	<ul style="list-style-type: none"> • Continued stakeholder engagement • Agreed-on, defined FP goals • FP situational analysis • Logic framework • Technical strategy, including detailed activity plan and timeline for interventions • Activity cost estimates • Funding gap analysis • Defined institutional mechanisms for CIP execution at all levels, including subnational and across stakeholder groups • CIP dissemination plan • “Final” CIP as a living document • CIP launch event 	<ul style="list-style-type: none"> • Continued stakeholder engagement • Resource mobilization plan • Coordinated advocacy strategy/plan • Joint annual workplans • Performance monitoring mechanism • Performance/progress reports • Capacity building
Applicable Tools & Resources	<ul style="list-style-type: none"> • Costed Implementation Plans for Family Planning: The Basics • Costed Implementation Plans: Guidance and Lessons Learned • Strategic Budgeting Process for Scale-Up of Family Planning • Making the Case for a CIP: PowerPoint Template • Costed Implementation Plans for Family Planning: Standard Elements Checklist 	<ul style="list-style-type: none"> • Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans • Useful Tools for Developing a CIP Technical Strategy • Family Planning CIP Costing Tool & User Guide • Family Planning CIP Gap Analysis Tool & User Guide • How to Develop and Execute a 	<ul style="list-style-type: none"> • Four Key Elements for Execution of Family Planning Costed Implementation Plans • How to Develop and Execute a Performance Monitoring Plan (PMP) for a CIP • Tracking Contraceptive Financing • How to Advocate for FP Policies and Commodities • Stakeholder Engagement for Family Planning Costed

	PHASE I: PLAN	PHASE II: DEVELOP	PHASE III: EXECUTE
	<ul style="list-style-type: none"> • Policy Checklist: Essential Elements for Successful Family Planning Policies • 10-Step Process for CIP Planning, Development, and Execution • Developing CIPs: Team Roles and Responsibilities • Illustrative CIP Process Roadmap and Sequencing • How to Advocate for FP Policies and Commodities • Stakeholder Engagement for Family Planning Costed Implementation Plans • Family Planning 2020: Rights and Empowerment Principles For Family Planning 	<p>Performance Monitoring Plan (PMP) for a CIP</p> <ul style="list-style-type: none"> • Four Key Elements for Execution of Family Planning Costed Implementation Plans • How to Advocate for FP Policies and Commodities • Stakeholder Engagement for Family Planning Costed Implementation Plans 	<p>Implementation Plans</p>

ANNEX B: 10-STEP COSTED IMPLEMENTATION PROCESS

10-Step Costed Implementation Plan Process



