

Advocacy Wins 2009-2016



JOHNS HOPKINS
BLOOMBERG SCHOOL
of PUBLIC HEALTH

Bill & Melinda Gates Institute for
Population and Reproductive Health

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Advance Family Planning (AFP) is an advocacy initiative comprising more than 20 partner organizations working to increase the financial investment and political commitment needed to ensure access to quality, voluntary family planning through evidence-based advocacy.

Local decisionmakers—especially those at the subnational level—have more power than ever before to make budgetary and programmatic decisions that affect family planning. Reducing unmet need for family planning means engaging these local decisionmakers and persuading them to take action.

We focus our advocacy efforts on the discrete policy and funding decisions critical to advancing family planning in a given setting. Once achieved, these incremental changes—termed “**advocacy wins**”—demonstrate progress and accelerate momentum toward long-term goals.

The advocacy wins are categorized by:



Budget Allocation

**\$ refers to US dollars.*



Policy Improvement



Visibility Gain

Since 2009, Advance Family Planning has contributed to more than **450 advocacy wins** across all levels of government. **64%** of the wins increased budgets for family planning, **19%** improved policies to expand contraceptive access and choice, and **17%** gained visibility for family planning.

AFP's advocacy approach focuses attention on opportunities for action that have the highest potential for success in the near term. We use a **SMART—Specific, Measurable, Attainable, Relevant, and Time-bound—**approach to connect near-term advocacy strategies and wins with broad, long-term goals. The approach transforms the way family planning champions maximize their time and funds to effectively persuade those in power to take action.

FOCUS COUNTRIES



BANGLADESH*



BURKINA FASO



DEMOCRATIC REPUBLIC
OF THE CONGO (DRC)



INDIA



INDONESIA



KENYA



NIGERIA



SENEGAL



TANZANIA



UGANDA

2016 PARTNERS:

Équilibres et Populations, Health Promotion Tanzania, Johns Hopkins Center for Communications Programs, International Planned Parenthood Federation, Jhpiego, Marie Stopes International, Palladium Group, Partners in Population and Development Africa Regional Office, Pathfinder International, Population Foundation of India, Reproductive Health Uganda, Réseau Siggil Jigéen, Tanzania Communication and Development Center, Tulane International, United Nations Association of Tanzania, Yayasan Cipta Cara Padu

*Advocacy wins not included as work began in late 2016.

2016	
The national budget allocation for the purchase of contraceptives increases to 500 million CFA (\$813,200) from 375 million CFA (\$609,900) on June 21.	
On September 20, the mayor of Léo commune prioritizes family planning in his communal development plan.	
Prime Minister Thiéba recommends integrating sexual and reproductive health modules into curricula for students aged 10-24 in a policy statement to parliamentarians on February 5. A majority of the country's 125 parliamentarians voted to prioritize it on the Prime Minister's policy agenda.	
2015	
The Commune of Bobo Dioulasso adopts first-ever budget allocation of 1 million CFA (\$2,000) for family planning services on March 10 to be included in its Municipal Development Plan 2014-2015.	
2014	
The Minister of Health signs a Memorandum of Understanding with Équilibres & Population on November 8 authorizing a task-sharing pilot project for family planning services.	
16 mayors sign a written commitment on October 29 to include family planning in their communal development plans.	
On October 22, Mayor of Kindi commune allocates 250,000 CFA (\$500) for family planning in his communal development plan (CDP) and calls on all Association of Municipalities of Burkina Faso mayors to include family planning in their CDPs.	

DEMOCRATIC REPUBLIC OF THE CONGO

REACH:
10 provinces

2016



DRC establishes six Provincial Permanent Technical Multi-sectoral Committees on Family Planning in the provinces of Kongo-Central (March 2), Kasai-Central (April 26), Bas Uele (August 25), Bas Tshopo (August 31), Lualaba (September 16), and Sankuru (October 20). A total of ten committees have been formed over two years.



For the first time, the DRC National Assembly votes unanimously in favor of a budget request for the “purchase of contraceptives” to be included in the Ministry of Health’s annual budget. The national commitment is approved during the September – December 2015 parliamentary session, resulting in an allocation of \$3.5 million.

2015



Contraceptive products purchased with government funds (\$300,000) are officially distributed to beneficiaries (health zones and partners) by the Ministry of Health on July 7.

<p>Following the lead of the National Permanent Technical Multisectorial Committee on Family Planning (CTMP), provinces in the DRC establish CTMPs. North Kivu province's working group launches first on June 12. South Kivu's launches on June 18. Katanga's launches on June 29.</p>	
<p>The Prime Minister signs a decree on March 6 officially recognizing the national Permanent Technical Multisectorial Committee on Family Planning (CTMP), which has been a strong family planning driver. The working group is comprised of local government, civil society, and faith-based organization leaders.</p>	
<p style="text-align: center;">2014</p>	
<p>A proposed Reproductive Health Law favorable to family planning is put on the docket of the National Assembly plenary session for consideration as a replacement for the antiquated law in place.</p>	
<p style="text-align: center;">2013</p>	
<p>The government makes a Family Planning 2020 commitment at the International Conference on Family Planning, Addis Ababa, November 15 pledging \$1 million for the purchase of contraceptives for the first time.</p>	

INDIA

REACH:

17 districts in 3 states

2016



In September, Ambuja Cement Limited, a leading cement producing company in India, incorporates family planning for the first time into its corporate social responsibility program—the Ambuja Cement Foundation (ACF). Ambuja Cement signed a contract of INR 38,830 (\$586) to deliver family planning techniques and training to 23 ACF staff, who have a reach of 11,500 people.



In September, Jharkhand government releases INR 5,534,000 (\$83,848) to procure family planning equipment for all health facilities across 24 districts.



52 urban primary health centers in Lucknow district begin intra-uterine device (IUD) services. 56 out of 78 staff nurses are trained in IUD insertion between December 2015 and March 2016. 2,836 women receive IUD services between January and June 2016.



States establish family planning advocacy working groups to enhance the quality of local family planning program and services. Jharkhand establishes one state and two district working groups in April. In Bihar state, six districts with the most urgent need (Araria, Gopalganj, Jehanabad, Kishanganj, Sheohar, and Siwan) form working groups by April. Six districts in Uttar Pradesh (Firozabad, Mainpuri, Mau, Pratapgarh, Sultanpur, and Unnao) also establish working groups.

2015

Uttar Pradesh National Health Mission adds 1,500 new male health cadres to the family planning workforce as counselors for non-scalpel vasectomy on September 3.



Beginning August 7, Jehanabad District offers weekly quality sterilization services by implementing Fixed Day Static Services at health centers and hospitals—a shift from the camp approach.



State Innovations in Family Planning Services Agency (SIFPSA) approves establishment of district working groups (DWGs) in three districts of Uttar Pradesh: Agra, Jhansi, and Lucknow. Of the 3 districts, Agra was the first to establish its DWG on June 11.



2014

Population Foundation of India signs a Memorandum of Understanding in February with SIFPSA to review and revise the Uttar Pradesh state population policy.



On October 25, Uttar Pradesh government approves and funds new quarterly family planning program review meetings at the divisional and state level for FY2014/15.



INDONESIA

REACH:
52 districts in 6 provinces

2016



The National Population and Family Planning Board (BKKBN), the Ministry of Health, and the Indonesian midwives and OB/GYN associations sign a formal agreement on October 24 to expand the number of assessors of midwives trained in IUD and implant insertion and develop a joint plan to accelerate post-training assessments in 2017.



The Minister of Health issues a ministry decree on October 18 to include interval tubal ligation services in the national health insurance program. With the decree, all modern methods of contraception are now covered under the program.



West Kalimantan Province BKKBN allocates their 2016 provincial budget to support their district working groups' advocacy plans in 12 districts for the 2016 fiscal year, ranging from IDR 100-150 million (\$76-150) per district per year. All remaining 13 districts in West Kalimantan adopt the AFP advocacy approach.



Bengkayang district's family planning budget increases to IDR 532,600,000 in 2016 (\$48,418) from IDR 491,010,000 in 2015 (\$44,637).



Kuningan district's family planning budget increases to IDR 1,895,003,000 in 2016 (\$172,273) from IDR 1,744,996,000 in 2015 (\$158,636).



Karawang district's family planning budget increases to IDR 1,346,480,000 in 2016 (\$122,407) from IDR 1,129,370,000 in 2015 (\$102,670).

<p>On January 27, 2016, the Karawang District Head issues a decree instructing all village heads in Karawang to revitalize their family planning teams and allocate village funds.</p>	
<p>162 villages in Karanganyar province increase their village budget allocations from IDR 1-5.5 million per village per year (\$75 to \$550) to IDR 1-32.37 million (\$76 to \$2,472) to support family planning programs at the village level by December 2015.</p>	
<p>The Bengkayang District Head recruits 17 new family planning field staff in 2015.</p>	
2015	
<p>District family planning budgets increase in 2 districts in FY2014/2015 fiscal year.</p> <ul style="list-style-type: none"> • Karanganyar by 13.3% to 1.1 billion IDR (\$173,575) • Karawang by 32.6% to 1.4 billion IDR (\$102,670) 	
<p>Karanganyar District Mayor signs an endorsement letter on January 27 instructing 162 Village Heads to allocate funds for family planning; 93 villages confirm allocation of funds, ranging from \$75 to \$550.</p>	
2014	
<p>District family planning budgets increase in 4 districts in FY2014/2015.</p> <ul style="list-style-type: none"> • Bandung by 51% to 11.7 billion IDR (\$994,000). • Bogor by 62% to 25 billion IDR (\$2.13 million). • Karanganyar by 37% to 1 billion IDR (\$77,523). • Karawang by 19.7% to 1.3 billion IDR (\$95,897). 	
<p>271 villages in Bandung allocate a portion of their village budgets to family planning activities: 5-15 million IDR (\$400 to \$1200) per village.</p>	

	<p>Family planning field workers, midwives associations, local universities, and religious leaders sign partnership agreements with district working groups in Karanganyar.</p>
	<p>20 work places agree to provide referrals for LAPM in Pontianak district, expanding private sector workplace commitment to family planning for a total of 45 workplaces in FY2013/14.</p>
	<p>Karanganyar District government allocates 15 million IDR (\$1,500) per year to support operations of its district working group, the first self-funded AFP Indonesia working group.</p>
	<p>Under the Government of Indonesia's KB Kencana Program, AFP Indonesia expands to an additional 30 districts in four provinces on a cost-share basis with BKKBN: \$231,000 from AFP and \$1.2 million from BKKBN.</p>
<h2>2013</h2>	
	<p>District family planning budgets increase in 5 districts in FY2013/2014 fiscal year:</p> <ul style="list-style-type: none"> • Bandung by 14% to 7.7 billion IDR (\$748,000). • Bogor by 48% to 15.4 billion IDR (\$1.5 million). • Karanganyar increases family planning budget to million IDR (\$28,644). • Karawang increases family planning budget to 6.2 billion IDR (\$80,113). • Pontianak by 14% to 4.9 billion IDR (\$477,000).
	<p>Over 100,000 Nurse Midwives who provide three-quarters of all family planning services are included as "covered" providers under the 2014 universal health insurance scheme, creating an important protection for rural women's access to contraception.</p>

<p>District mayors in Karawang and Bogor districts issue mayoral decrees to institutionalize AFP-initiated district working groups, creating a sustainably funded mechanism to use evidence to guide district planning and budgets.</p>	
2009 – 2012	
<p>District family planning budgets from 2011 increase in two districts in FY2012/2013:</p> <ul style="list-style-type: none"> • Bandung district by 20% to 6.74 billion IDR (\$710,000). • Pontianak district by 60% to 4.31 billion IDR (\$454,000). 	
<p>270 Bandung village leaders allocate a village budget for family planning for the first time.</p>	
<p>25 companies in Pontianak commit to implement workplace family planning counseling and/or services.</p>	
<p>Pembinaan Kesejahteraan Keluarga (PKK, a local women's organization) field workers and Posyandu midwives train on counseling for LAPM.</p>	
<p>Maternal health care social insurance program (Jampersal) includes subsidies for intrauterine devices and implants.</p>	

2016	
	Radio Kaya and Radio Ranet in Kwale county commit to run weekly segments on family planning as a contribution to improving the lives of the people of Kwale. As of October, segments begin airing, triggering stories across multiple sub-national and national platforms.
	In October, Tharaka Nithi County initiates a data capture and tracking mechanism for community-based distributors of Depo-Provera. [®] It shows that 26,792 women have received the injectable contraceptive since the 2011 task-sharing policy was implemented.
	In June, the Council of Governors agree on a mode of procurement for family planning commodities. Procurement will be managed centrally, with funds disbursed to county revenue accounts/treasury, but earmarked for counties as appropriation in aid.
	In June, several counties increase their 2016/17 family planning budgets: <ul style="list-style-type: none"> • Kwale allocates \$100,000 to family planning for the first time. • Tharaka Nithi increases its budget to \$93,000 from \$34,750. • Siaya increases it to \$50,000 from \$20,000. • Kitui increases it to \$790,000 from \$160,000.
	Migori, Kwale and Makueni Counties each establish family planning technical working groups in June.

<p>The Kakamega County family planning working group mobilizes \$90,000 to conduct a five-day family planning outreach event for young people on May 28. Forty percent of the 1,377 clients who attended chose to receive contraceptive implants.</p>	
<p>For the first time, in April, Makueni County allocates \$200,000 for family planning in the 2016/17 budget.</p>	
<p>The Council of Governors establish a health advisory team that includes family planning champions in January. Thirteen county first ladies commit to being family planning champions.</p>	
2015	
<p>Kenya's <i>Reproductive, Maternal, Newborn, Child and Adolescent Health Investment Framework</i> for the Global Financing Facility includes family planning.</p>	
<p>The National Council for Population and Development establishes and convenes a National Family Planning Advocacy Technical Working Group as a result of the AFP East Africa Accelerating Contraceptive Choice meeting.</p>	
<p>Four counties (Kakamega, Kitui, Siaya, and Tharaka Nithi) allocate approximately \$246,300 towards family planning for the first time in FY2015/16.</p>	

2014



Four county ministers of health and stakeholders approve five-year costed family planning strategies for their respective counties (Kakamega, Kitui, Siaya, and Tharaka Nithi) in August.



The National Treasury budgeting guideline for 2014 includes family planning.



Facilitation of 20 trainers on community-based distribution of Depo Provera in Elgeyo, Marakwet County and for peer educators at Jomo Kenyatta University. Trainees subsequently train 500 community health workers.

2013



National dissemination of policy and training guidelines for community-based distribution of injectables brings 47 counties in Kenya together in task-sharing for family planning.

2012



Ministry of Public Health issues policy guidance permitting community-based distribution of contraceptive injectables in high-need areas.

2016	
Kwara State increases its family planning budget by 90%, from 2.1 million Naira (\$10,500) in 2015 to 4 million Naira (\$20,000) on April 7.	
Plateau State allocates 5 million Naira (\$25,125) for reproductive health and family planning implementation in the 2016 state health budget in April. This is the first time the state allocates for family planning separately, in addition to the reproductive health budget.	
2015	
Kwara State develops a costed implementation plan for family planning by September.	
In August, Gombe State approves 17 million Naira (\$85,400) for the FY2016 family planning and reproductive health budget.	
2013	
Adamawa State allocates 1 million Naira (\$6,100) for family planning logistics and adopts permanent budget allocation for family planning logistics in the 2013 budget.	
2012	
Adamawa State Governor commits 40 million Naira (\$256,000) in the 2013 budget for contraceptives to be delivered to 237 service delivery points and in 8 cluster centers in 21 local government areas.	
Bauchi State advocates secure a copy of the state budget for the first time and organizes a follow-up budget tracking workshop that results in the State Budget Officer agreeing to commit resources for family planning commodity distribution.	

2016	
	In October, three mayors allocate 1 million CFA (\$1,700) for family planning activities.
	In August, the Mayor of San Noutaire allocates 2 million CFA (\$3,400) for family planning activities
	In June, civil society and government collaborate to create a platform to leverage the Global Financing Facility and ensure involvement in all phases of the advocacy process.
	In February, nine mayors allocate a portion of their budgets to family planning activities, ranging from 1 million CFA (\$1,700) to 5 million CFA (\$8,600) per commune.
	In January, the national budget for the purchase of contraceptives increases to 300 million (\$484,200) from 100 million CFA (\$161,400).
	On February 24 a prefectorial order authorizes a multi-sectoral committee for family planning to track mayors' commitments at the commune level in Thiès.

2015

The Mayor of Derklé allocates 1 million CFA (\$1,700) to family planning on November 5.



The Mayor of Tivaouane Diacksao allocates 2 million CFA (\$3,400) towards family planning on October 5.



The Mayor of Ndiarème Limamoulaye allocates 1 million CFA (\$1,700) towards family planning for the two health posts in the commune on September 17.



The Mayor of Golf Sud commune allocates an annual amount of 2 million CFA (\$3,400) towards family planning for the four health posts in her purview on August 28.



North Pikine Mayor Amadou Diarra signs a commitment letter on January 5 to invest 10 million CFA (\$18,300) of the 2015 budget to purchase family planning products for the commune's two health posts.



2014

Djidah Thiaroye Kao's Mayor allocates 1 million CFA (\$1,900) to two health posts for family planning in Pikine Health District for the first time.



Mbao's Mayor allocates 1 million CFA (\$1,900) to the purchase of contraceptive commodities for Pikine Health District health posts.



2016



In June, the national family planning 2016/17 budget increases to 5 billion Tsh (\$2.3 million) from 1.6 billion Tsh (\$1.1 million).



In June, Tanzania's Parliament moves to endorse a special provision in the Public Procurement Act (2016) that will fast-track life-saving health commodities including contraceptives in the procurement and distribution process. The Tanzania Law Reform Commission chairman had endorsed the special provision on March 22.



In May, AAR Insurance Tanzania Limited, the country's largest private health insurance company, adds family planning into its benefits package. As a result, AAR Health Care Tanzania clients renewing after May 2016 have coverage for family planning services worth up to 300,000 Tsh (approx. \$138) annually.



In April, 30 Local Government Authorities (LGAs) allocate a total of 215,160,672 Tsh (\$98,000) for family planning in four regions in the Lake and Western zones, with some LGAs increasing their previous family planning allocations.

2015

AAR Insurance Tanzania Limited, one of the main private health insurance companies in the country, integrates family planning into its Wellness Services Plan in September.



Three rural districts make budget allocations for family planning in the Lake Zone. Serengeti District and Tarime Town Councils allocate \$10,600 and \$2,500, respectively, from their own sources for the first time and Musoma Rural District Council more than doubles its family planning allocation from the previous year to \$7,600.



2014

The government initially allocates 2 billion Tsh (\$1.15 million) for family planning for FY2014/2015 from its own funds, an increase of 100% (\$577,000) from FY2013/2014. At the end of FY2014/2015, the government confirms it released more than twice this amount—a total of 5 billion Tsh (\$2.2 million)—on procurement and distribution of family planning commodities and supplies.



The Family Planning 2020 Costed Action Plan (FY2013/2014) launches.



3 private insurance schemes agree to include family planning in their insurance packages for 2014.



Biharamulo District approves its first ever-budget allocation for family planning, allocating 30.1 million Tsh (\$17,500) of its own funds for the FY2014/2015 budget.



	<p>Chato District approves its first-ever budget allocation for family planning, allocating 5.6 million Tsh (\$3,300) of its own funds for the FY2014/2015 budget.</p>
	<p>Ngara District increases its yearly family planning budget allocation by 7% to 14.7 million Tsh (\$8,500).</p>
	<p>Five Higher Learning Institutions in Shinyanga sign a Memorandum of Understanding to provide sexual and reproductive health information and services for their students.</p>
<p style="text-align: center;">2013</p>	
	<p>The government endorses Framework Contract to ensure timely procurement and supply of contraceptives in the country.</p>
	<p>New guidelines allow non-governmental organizations (NGOs) to directly access the Medical Stores Department for contraceptive commodities.</p>
	<p>Parliament of Tanzania approves the FY2013/2014 Ministry of Health and Social Welfare request of \$621,700 for family planning equipment, a 50% increase from \$310,900 in FY2012/2013.</p>

2009-2012

National government increases FY2011/2012 family planning budget 3.5-fold from FY2010/2011.	
The government includes family planning as a target in the Mid-term Expenditure Framework.	
Vodacom provides a small grant to the Kisarawe District Council to support skills building of LAPM service providers.	
A Tanzanian gold mine agrees to integrate family planning referrals into existing healthcare services for staff.	
Media houses provide free space and airtime for family planning issues.	
Two districts increase their family planning budgets: <ul style="list-style-type: none"> • Kinondoni District, from 0.07% to 1% of its health budget • Kisarawe District, from 0% to 5% of its health budget 	
Kisarawe District integrates family planning into their strategic plan (2012-2016) for the first time.	
Government develops operation guidelines on integration of family planning, HIV, and maternal and child health services.	
The government updates national Family Planning Guidelines and Standards of 1994 that places emphasis on family planning integration and quality of services.	

UGANDA

REACH:
27 districts

2016	
	Mukono district inaugurates a 30-member District Family Planning Advocacy Committee on September 14. Ten family planning advocacy working groups are established and trained in AFP SMART.
	In August, the Dokolo district local government decrees that health facilities dedicate one day per week to provide adolescents with sexual reproductive health information and services, including family planning. Kabarole district commits to invest in the redistribution of family planning commodities from low demand areas to high demand areas.
	In a letter co-signed by local political, religious, technical, and cultural leaders on August 17, Arua district commits to prioritize and advance family planning by scaling up family planning activities and increasing district funding for family planning.
	The Government of Uganda prioritizes family planning in its five-year Global Financing Facility business investment plan. Through the National Population Council, the government agrees to host a comprehensive family planning tracking framework.

<p>Seven districts allocate funds for family planning:</p> <ul style="list-style-type: none"> • Mayuge increases its fiscal year 2017/18 family planning allocation to UGX 5 million (\$1,392) from UGX 2 million (\$557). • Mbale allocates 4% of locally generated revenue, which was UGX 460 million (\$136,095) the year prior. • Mubende district allocates UGX 15 million (\$4,438). • Kanungu district allocates UGX 30 million (\$8,875). • Rakai allocates UGX 30 million (\$8,352) of its local revenue for fiscal year 2017/18 to family planning. • Soroti allocates UGX 6 million (\$1,775). • Zombo allocates UGX 5 million (\$1,479). In addition, Kibaale and Kamwenge districts commit to have family planning reflected in each of their work plans and 2017/18 budgets. 	
2015	
<p>African Women Leaders Network and Reproductive Health Uganda's advocacy on May 26 results in an immediate allocation of UGX 10 million (\$4,000) in FY2015/2016 by Nebbi District leaders.</p>	
<p>In March the Ministry of Health endorses three family planning indicators to be included in the Output Budgeting Tool for prioritizing family planning at the subnational level.</p>	
<p>The Ministry of Health signs a Memorandum of Understanding on January 30 to implement an alternative distribution strategy of family planning commodities to the private sector.</p>	
2014	
<p>Government of Uganda launches a \$235 million Costed Implementation Plan 2015–2020 to scale up family planning on November 27.</p>	

	Gulu District leadership passes a policy resolution for uniform messaging on family planning.
	District leaders in Gulu, Mbale, and Mubende commit to increase family planning allocations from their local revenue base following the National Conference on Family Planning.
2013	
	Parliament of Uganda passes bill establishing a National Population Council to provide strategic direction on population policy and commodity security.
	The Ministry of Health permits trained clinical officers in private NGOs and public facilities in five districts to perform tubal ligations, increasing access to family planning services in rural areas.
2009–2012	
	The government increases its family planning budget allocation by approximately \$600,000 in FY2009/2010 to \$3.3 million in FY2011/2012.
	National Medical Stores allows private family planning providers to access contraceptive supplies.
	Ministry of Finance waives taxes on contraceptives in 2012.
	Registration of Norigynon on the national essential medicines list to increase family planning method mix.
	Ministry of Health incorporates community-based distribution of injectables into policy guidelines.

REGIONAL



PARTNERS:

African Women Leaders Network for
Reproductive Health and Family Planning (AWLN),
Partners in Population and Development
Africa Regional Office

2015



Nyeri County in Kenya launches the Nyeri County Reproductive Health and Family Planning Strategy 2015-2025 on August 24. The County Executive Secretary of Health verbally commits to allocate 10% of the county's health budget to family planning.

2014



The Director of the Central Medical Stores in Zanzibar, Tanzania directs 66 staff at the Ministry of Health across all 10 districts to be re-trained in November. Re-training contributed to a 70% drop in family planning commodity forecasting errors.



The outcome document of the 47th Session of the United Nations Commission on Population and Development in April includes strong language on family planning from AWLN recommendations in country and regional position papers.



AWLN members in Zanzibar, Tanzania, successfully advocate the Director of the Central Medical Stores to issue a directive for all family planning service providers at facilities in two districts—Unguja North and Pemba—to undergo re-training in the management of the Zanzibar Integrated Logistics Systems.



The Government of Uganda increases funding for family planning from \$3.3 million in FY2012/2013 to \$6 million in FY2013/2014.

<p>In line with Family Planning 2020 commitments, the Ministry of Health in Malawi increases the family planning budget 130% to MWK 60 million (\$151,000) in FY2014/2015.</p>	
<p>2013</p>	
<p>The Network of African Parliamentary Committees on Health (NEAPACOH) align country action plans with Family Planning 2020 to increase budget commitments to family planning and reproductive health.</p>	
<p>2009–2012</p>	
<p>African country delegates are held to their countries' commitments on family planning, reproductive rights, and the Maputo Plan of Action at the Commission on Population and Development meetings.</p>	
<p>Pan-African Parliament pass a motion to work with African governments to meet Abuja Declaration Commitment.</p>	
<p>The Ghana National Health Insurance Scheme Bill put before Parliament includes family planning commodities.</p>	
<p>The G8 Muskoka Declaration includes family planning (in collaboration with Partners in Population and Development Africa Regional Office).</p>	
<p>The Global Strategy on Women's and Children's Health includes family planning in accountability measures.</p>	

	The World Bank World Development Report adds reproductive health as an area of emphasis.
	Ekiti State leaders in Nigeria prioritize family planning and allocate \$50,000 to train antenatal care providers in family planning.
	African Union extends Maputo Plan of Action for 5 years (2011-15).
	Organization for African First Ladies Against AIDS adds maternal health and family planning to their mandate.
	Eastern Africa Reproductive Health Network (EARHN) mainstreams family planning advocacy in national plans.
	The Southern and East African Parliamentary Alliance of Committees on Health (SEAPACOH) develops country-level action plan in line with relevant Family Planning 2020 commitments. (In collaboration with SEAPACOH).
	Mukono and Mayuge Districts in Uganda integrate family planning as a cross-cutting issue in their development plans for FY2011/2012 and FY2012/2013.



GLOBAL

2012

World Health Organization adds contraceptives to priority medicines for mother and children in December.



World Health Organization includes family planning in guidance on task-shifting for Maternal Newborn and Child Health in December.





OPPORTUNITY FUND

The Opportunity Fund is a small grants program that helps advocates seize opportunities to accelerate Family Planning 2020's success at district, state, national, and regional levels.

PARTNER:

PAI

BENIN

In August 2014 the Ministry of Health allocates 100 million CFA (\$193,000) for contraceptives in the 2015 budget, more than doubling the 2014 budget.



BURKINA FASO

For the first time, municipalities in the Sahel region allocate for family planning in their five-year development plans (2015-2019): Kelbo (3.7 million FCFA or \$5,500) and Dori (2.3 million FCFA or \$4,600) on February 2013, 2015.



Inspired by Kelbo and Dori, the municipalities of Tin-Akoff and Boundore budget for family planning in their 2015-19 development plans, allocating 1.2 million FCFA (\$2,400) and 1.3 million FCFA (\$2,660), respectively.



ETHIOPIA

Amhara Regional Health Bureau increases budget for health from \$7.6 million to \$9 million in November 2013.



Tigray Regional Health Bureau increases budget for health and family planning in November 2013.



KENYA



Two counties approve multi-year, costed family planning and reproductive health strategies in April-May 2015. Busia County's is a 3-year, KES 2.3 billion (\$24 million) reproductive health strategy (2015-2017). Homa Bay County's is a 5-year family planning strategic plan (2015-2019) of KES 1.8 billion KES 1.8 billion (\$20 million).



Both counties establish family planning technical working groups and begin implementing key elements of their respective strategies. Busia County includes "the percentage of women of reproductive age practicing family planning" among its health indicators.



Kitui County allocates \$162,000 for family planning for the first time in its 2015/16 budget.

MALI



The Council of Bougouni commune and 10 communes therein allocate for family planning for the first time in the 2016 budget for a combined total of 25 million FCFA (\$50,000).



In August 2014, 15 districts expand provision of tubal ligations at the community level, in accordance with Mali's new national procedures for reproductive health .

MAURITANIA



On October 6, 2016, the Council of Ministers of the government of Mauritania approves the text of a new Reproductive Health Bill submitted by the Minister of Health.

<p>In May 2014, the government approves the first-ever budget allocation of 15 million MRO (\$50,715) for reproductive health supplies, including contraceptives, for the 2014 health budget.</p>	
SENEGAL	
<p>On June 12, 2015, the Ministry of Health and Social Action authorizes the first prescription of the pill by community health workers (<i>relais communautaires</i>) serving in ten out of the 14 regions in Senegal.</p>	
SOUTH SUDAN	
<p>In September 2016, the health committee of Imotong state approves a new budget line for family planning within the Ministry of Health. The local government awaits the national and state budget allocations in November 2016.</p>	
TOGO	
<p>Minister of Health approves the Manual of Procedures for implementing this task-sharing policy in June 2016.</p>	
<p>The Government of Togo passes a revised Community-Based Intervention National Policy on February 13, 2015, which includes the first prescription of the pill and distribution of injectables at the community level.</p>	

ZAMBIA



In 2016, for the second year in a row, the government increases its allocation by five percent from its own funds for reproductive health supplies, including contraceptives. In fiscal year 2014, the government allocates ZMW 12 million (approx \$2 million) for the procurement of reproductive health supplies. Funds have been fully spent each year since.



Ministry of Health approves a task-sharing policy in January 2016, allowing community health workers to provide injectable contraception.



15 Members of Parliament issue sign a public statement calling for the Ministry of Health to include a budget line for adolescent sexual and reproductive health, pledging to support it during the budget debate.



In March 2016, the Ministry of Local Government commits to review guidelines for use of constituency development funds for family planning and youth programming at district level.



AMPLIANDO EL ACCESO

Ampliando El Acceso, or “Expanding Access” is a one-year, independently funded project. The project seeks to expand access to contraceptive information and services for youth in Colombia, the Dominican Republic, and Mexico by strengthening local advocacy efforts.

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COLOMBIA



In November 2016, the Rionegro municipality establishes and trains a group of youth sexual and reproductive health and rights leaders on advocacy and communication strategies to monitor and evaluate the implementation of a youth-friendly services model.



On May 31, 2016, the Secretary of Health in the municipality of Rionegro formally adopts technical recommendations to implement youth-friendly services in its Development and Health Plan (2016-2020).



In May 2016, Rionegro formed an intersectional technical commission and adopted a youth-friendly services model in the hospitals and colleges of the municipality.

DOMINICAN REPUBLIC



In September 2016, the Minister of Health presents the Contraceptive Counseling Care for Youth Protocol to the National Health Service, the media, and civil society. The protocol will ensure health care providers in all public and private health facilities in the country deliver quality and confidential sexual and reproductive health care for young people and develop an appropriate budget.

In June 2016 the Ministry of Health validates a protocol for adolescent services, which emphasizes sexual and reproductive health and incorporates social monitoring as an accountability mechanism.



MEXICO

On August 17, 2016 health authorities from the states of San Luis Potosi, Oaxaca, and Hidalgo authorize the opening of 13 facilities within health centers for the implementation of the social monitoring tools by youth health promoters.



On June 7, 2016, the Director of the Ministry of Health's National Center of Gender Equality and Reproductive Health endorses implementing a social monitoring model to improve youth access to contraception. Mexfam will pilot the model in three states.



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Advance Family Planning

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