

INVESTING IN FAMILY PLANNING TO ACCELERATE PROGRESS TOWARD THE SDGs

The Ouagadougou Partnership aspires to reposition family planning across nine Francophone West African countries—Benin, Burkina Faso, Côte d’Ivoire, Guinea, Mali, Mauritania, Niger, Senegal, and Togo. Starting in 2016, the partnership committed to reach an additional 2.2 million women and girls with modern methods of contraception by 2020. With just one year left to realize the regional goal, and only a few more to achieve objectives outlined in national family planning costed implementation plans, more domestic resources must be allocated and spent on these programs. Doing so would help satisfy women’s and men’s need for modern methods of contraception and accelerate progress toward achieving health, economic, and other development gains, which are reflected in the global Sustainable Development Goals (SDGs).



INCREASED DOMESTIC RESOURCES NEEDED

Domestic resources for family planning programs across the nine countries are not keeping pace with aspirations for increased use; government funding is falling below need, and allocated funds are not being released in full or on time.



BENEFITS OF FAMILY PLANNING EXAMINED

HP+ quantified the benefits of accelerated family planning use across the nine countries. The results show that if growth in modern contraceptive use is accelerated—as opposed to following historical growth rates—progress toward achieving the SDGs would be dramatically boosted.

REDUCED FOOD INSECURITY—SDG 2

Through its impact on population dynamics, family planning helps decrease food demands and alleviates strain around food supply and production.



REDUCED MATERNAL MORTALITY—SDG 3

Contraceptive use results in fewer and less risky pregnancies, such as those that occur when the mother is too young or old, are spaced too closely, are at high parity, or would have ended in an unsafe abortion.



INCREASED USE OF SAFELY MANAGED SANITATION—SDG 6

Family planning—through its impact on population size and growth—decreases water and sanitation requirements, reducing strain on governments. Smaller families enable parents to invest household resources in improved sanitation facilities.



Greater contraceptive use could lead to:

- **21%** reduction in food insecurity
- **50 million** people who would no longer be food insecure
- **27%** reduction in the maternal mortality ratio
- **15%** increase in safely managed sanitation service use

(on average across nine countries by 2030)

BENEFITS FROM ACCELERATED USE OF FAMILY PLANNING: PERCENT CHANGE IN SDG INDICATOR BY 2030

SDG Indicator	Benin	Burkina Faso	Côte d’Ivoire	Guinea	Mali	Mauritania	Niger	Senegal	Togo
Decrease in prevalence of moderate or severe food insecurity	14%	17%	16%	9%	36%	30%	36%	24%	11%
Decrease in maternal mortality ratio	27%	30%	19%	16%	32%	11%	61%	17%	25%
Increase in proportion using safely managed sanitation	14%	7%	12%	16%	20%	8%	37%	11%	13%

ADDITIONAL DEVELOPMENT GAINS

The benefits of accelerated family planning efforts across the region are vast and touch on additional SDGs. By investing domestic funds in programs to accelerate uptake of modern contraceptives, Ouagadougou Partnership countries could achieve great progress as a region.



12.8 million
fewer people below the international poverty line



8% increase in the proportion of children achieving minimum reading proficiency at the end of primary school



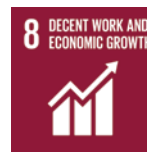
5% decrease in prevalence of stunting among children under 5 years of age
= 5 million fewer stunted children



5% increase in the proportion of the population using safely managed drinking water services



17%
decrease in under-5 mortality rate



1 percentage point boost in annual growth rate of real GDP per person

HOW TO ACHIEVE THESE BENEFITS

Achieving these gains requires increased domestic resource mobilization efforts. Review of funding for contraceptive commodities shows that in 2018, of the seven countries for which data is available, government contributions ranged from 117,000,000 FCFA (USD 202,000) in Senegal to 1,300,000,000 FCFA (USD 2,248,220) in Burkina Faso—significantly less than was contributed by donors. In an era of declining donor funding, countries will need to mobilize additional resources to fund not only commodities but also the full range of supply and demand-creation activities.

Domestic funding allocations and expenditures reflect a government's commitment to its family planning program, and by extension, the health and wellbeing of mothers, children, and families. In order to realize the aspirations of women and families, as well as to move countries closer to achieving SDG milestones by 2030, Ouagadougou Partnership countries must increase domestic funding levels for their family planning programs.

Specifically, these countries should:

- Leverage their family planning costed implementation plans when designing annual programs and activities
- Allocate an increasing share of the national budget for family planning, including activities beyond basic commodity security
- Ensure timely and full release of allocated funds for family planning program components
- Be accountable for the milestones articulated within costed implementation plans as well as commitments made at the 2012 and 2017 Family Planning Summits

HP+ applied the Family Planning-Sustainable Development Goals model to project benefits presented for each country based on two scenarios. The first projects development gains that could be achieved if growth in modern contraceptive use follows historical trends; the second projects gains achievable if family planning efforts are accelerated. For ambitious commitment countries, HP+ assumed that modern contraceptive use reached the goal level by 2030. For less ambitious commitments, uptake reached the goal level and then grew by an annual 1 percentage point until 2030. Both scenarios assumed the same socioeconomic future. More about the Family Planning-Sustainable Development Goals model and methodology can be found at: www.healthpolicyplus.com/fpSDGs.cfm.

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