

SUPPORTING VOLUNTARY FAMILY PLANNING



IMPLICATIONS FOR PROGRAMMING

- DESIGN**
 Family planning programmes can operate independently, but it is better to integrate them in other programmes. For example, education programmes (sex education, consultations), health programmes (integrating family planning with health care), and prosperity and other programmes. Furthermore, parts of the programmes should be tailored to specific target groups e.g. people living in poverty, with disabilities, rural, youth, etc.
- IMPLEMENTATION**
 Using a mix of providers. For example, using NGOs, private sector actors, and local authorities who work together to provide and promote most common contraceptive methods. Everyone involved should be trained to improve quality and privacy and confidentiality, which is important to increase trust.
- MONITORING**
 Building information systems to understand constraints or risks, identify opportunities early on, data collection, data protection, and analytical capacities. Data should be disaggregated, including by age. Use monitoring to adapt approaches, ensuring no one is left behind.
- POLICY DIALOGUE**
 Improving governance and accountability, engaging with stakeholders at all levels to improve the political and social enabling environment.
- FINANCE**
 Where the funding comes from. The best approach is to increase domestic resources for family planning. Where donors need to contribute funds or NGOs are delivering programmes there should be a clear exit strategy for continuation after funding stops. Good Public Financial Management systems should be in place and could be supported, for decentralised authorities.