

The National Composite Index for Family Planning (NCIFP)

MALAYSIA 2017 Scores and 2014-2017 Trendsⁱ

What is the NCIFP?

A tool that supports FP2020'sⁱⁱ efforts to improve the policy environment for family planning (FP), the NCIFP provides information on FP program activities that are not readily available in national demographic or reproductive health surveys or service statistics systems. The NCIFP measures the existence of FP policies and program implementation based on 35 items that fall under five dimensions: Strategy, Data, Quality, Equity, and Accountability.

Strategy – whether a national FP strategy/plan exists that includes quantified objectives, targets to reach the poorest and most vulnerable, projected resource requirements, and support for wider stakeholder participation. Also included are two items that affect strategy implementation: high-level leadership and regulations that facilitate contraceptive importation or production.

Data – whether the government collects/uses data on special sub-groups (e.g. the poor) and their access, private sector commodities, and the quality of service statistics. It also includes data-based evaluation and research to improve the program.

Quality – whether the government uses WHO standards of practice (SOP), task-sharing guidelines, and quality of care indicators in public and private facilities. Quality of care (QOC) also considers the adequacy of structures for monitoring QOC, training, logistics, supervision, IUD and implant removal, and informed choice, including informing clients about the permanence of sterilization.

Accountability – whether mechanisms exist to monitor discrimination and free choice, review violations, report denial of services, enable facility-level feedback, and encourage communication between clients and providers.

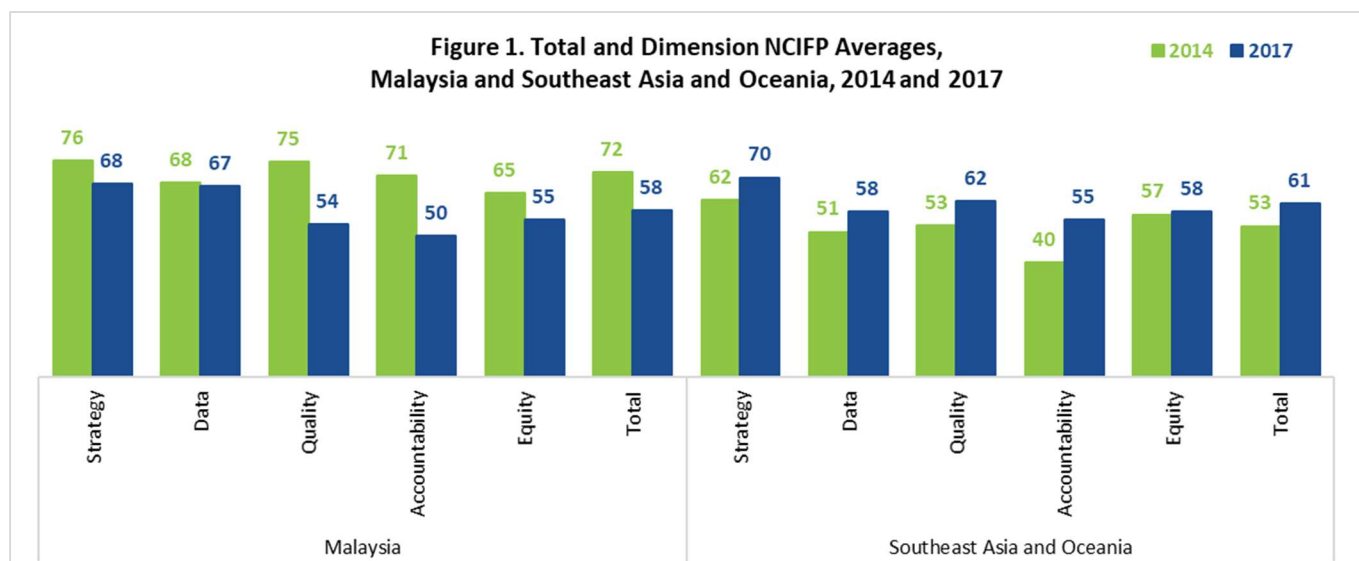
Equity – whether anti-discrimination policies exist, providers discriminate against special groups, the population has easy access to modern contraceptive methods (referring to STMs meaning short-term methods, or LAPMs meaning long-acting and permanent methods), and services are provided to underserved areas through community-based distribution (CBD).

First undertaken in 2014, the NCIFP builds on the long-standing National Family Planning Effort Index (FPE). In 2017 Avenir Health's Track20 project (funded by the Bill and Melinda Gates Foundation to assist countries participating in the FP2020 Global Initiative) administered a new round of NCIFPs to assess current national FP program status and changes since 2014. NCIFP data are intended for policy and planning use by each country's FP stakeholders.

Malaysia vs Southeast Asia and Oceania Results

Malaysia's total NCIFP score dropped from a high of 72 in 2014 to only 58 in 2017 compared to an increasing trend for the Southeast Asia and Oceania region (Fig. 1). Regional dimension scores also increased in 2017 while those of Malaysia declined (although Data decreased by only 1 point). Key dimension results follow:

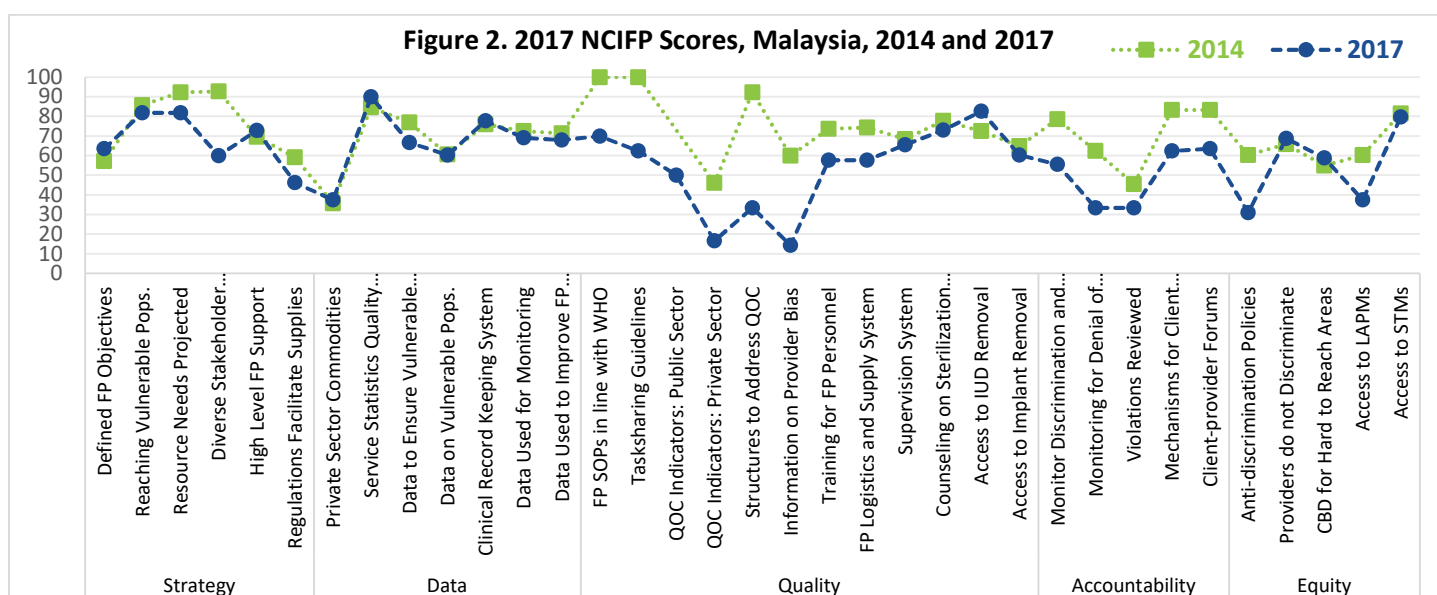
- Despite a declining average, Strategy remains the country's highest rated dimension in the two years studied.
- Accountability scored in the 70s in 2014 but dropped over 20 points by 2017, becoming Malaysia's lowest ranked dimension in 2017.



Individual NCIFP Trends, Malaysia 2014 and 2017

Individual NCIFP scores over time specify which FP program activities are progressing well, stagnating, or deteriorating. Figure 2 displays Malaysia's results for 2014 and 2017, with 2017 scores lower (by at least -5 pts) for most NCIFP items.

- **Strategy** - Scores point to the need for the national FP strategy to re-emphasize various key elements including diverse participation and regulations facilitating contraceptive importation or production, which dropped substantially from 2014 to 2017.
- **Data** - The ratings of most individual items did not change much from 2014 to 2017. However, the score dropped 10 points regarding whether data are used to ensure access among the most vulnerable.
- **Quality** - The scores of individual items reflect concerns about the declining quality of FP services, particularly regarding the use of WHO protocols and tasksharing guidelines and the adequacy of support functions such as clinic/community structures to monitor QOC (such as participatory monitoring), training, logistics, provider bias information, and quality indicators in the private sector. Only access to IUD removal rated higher in 2017 (N.B. Experts did not rate public sector quality indicators in 2014).
- **Accountability** - All individual items scored lower in 2017.
- **Equity** - Ratings hardly changed for CBD coverage in underserved areas, provider discrimination, and access to STMs, but 2017 ratings were lower for policies preventing discrimination against sub-groups and LAPM access.



Implications

The NCIFP results show Malaysia having lower scores in 2017 across most NCIFP components. The main reasons for the country's declining NCIFP scores are not evident and should be the subject of further study by local researchers. Underlying factors that could be examined include whether key decisionmakers and stakeholders regard the FP program primarily as a means to reduce fertility, to help women and couples plan childbearing, to support gender equality and women's empowerment, or to promote the health and welfare of women and families. Although Malaysia has already achieved 2.1 replacement fertility level, rationales based on reproductive health, rights, and gender remain valid for sustaining the national FP program. In 2014, the national contraceptive prevalence rate was 52% while modern FP use was only 34%.ⁱⁱⁱ Even back in 2010, a study^{iv} noted Malaysia's stagnating FP use, ethnic and regional differentials in FP prevalence and unmet need (including among high-parity and older women which argues for improved access to LAPMs), and the threat of HIV. The study recommended revitalization of the national FP program. Indeed, Malaysia's 2014 and 2017 NCIFP results reaffirm the points raised in the study just mentioned and also identify various other FP program components that should be considered by the country's FP stakeholders to ensure accessible, accountable, equitable and high-quality FP services in the country.

ⁱ Suggested citation: Avenir Health Track20. "The National Composite Index for Family Planning (NCIFP): M These challenges are for the country's FP stakeholders to discuss, identify their causes, and agree how best to address them to ensure achievement of national FP objectives. MALAYSIA 2017 Scores and 2014-2017 Trends". 2017 NCIFP Policy Brief Series (2019)

ⁱⁱ FP2020 is a global initiative through which governments, civil society, multilateral organizations, donors, the private sector, and the research and development community work together to enable more women and girls to use contraceptives by 2020. See <http://www.familyplanning2020.org/>

ⁱⁱⁱ World Fertility and Family Planning from <https://www.un.org/en/development/desa/population/index.asp>

^{iv} "Status of Family Planning in Malaysia" paper presented at the UNFPA - ICOMP Regional Consultation on Family Planning in Asia and the Pacific Addressing the Challenges 8-10 December 2010, Bangkok, Thailand.