

# The National Composite Index for Family Planning (NCIFP)

## CAMEROON 2017 Scores and 2014-2017 Trends<sup>i</sup>

### What is the NCIFP?

A tool that supports FP2020's<sup>ii</sup> 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 monitoring and program improvement efforts.

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

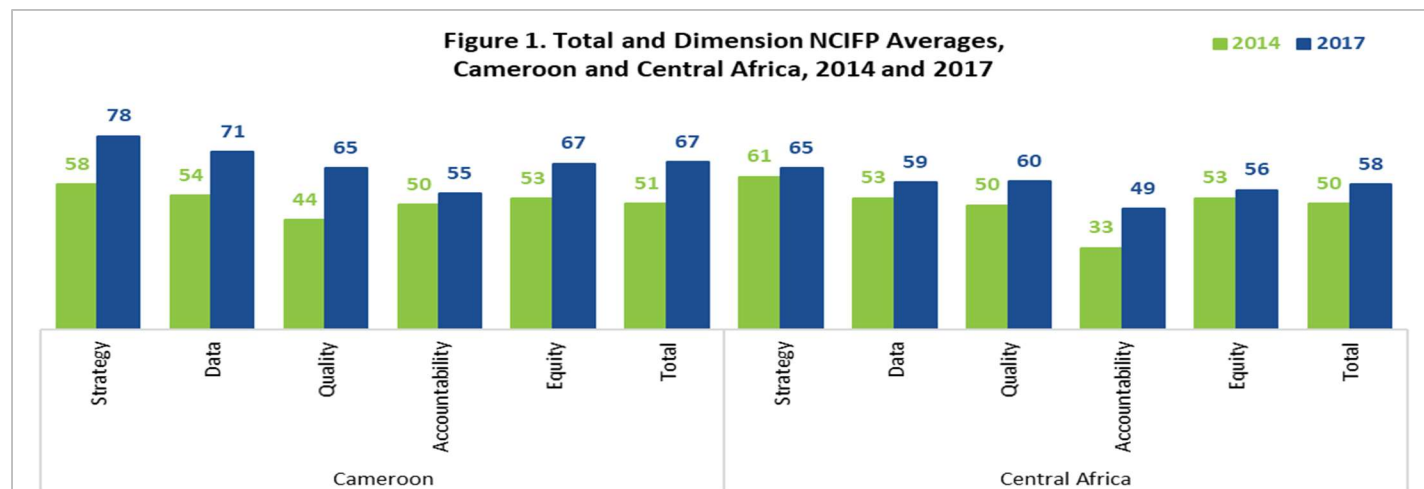
**Equity** - whether anti-discrimination policies exist, providers discriminate against vulnerable groups, the population has easy access to modern contraceptive methods (referring to STMs meaning short-term methods, or LAPMs meaning long-acting and permanent methods), and services are provided to underserved 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. The data are intended for policy and planning use by each country's FP stakeholders.

### Cameroon vs Central Africa Results

Figure 1 shows that Cameroon's total NCIFP score rose from 51 in 2014 to 67 in 2017 (+16 pts) while Central Africa's total NCIFP increased from 50 to 58 (+8 pts). Both Cameroon and the region also registered higher scores in all dimensions by 2017.

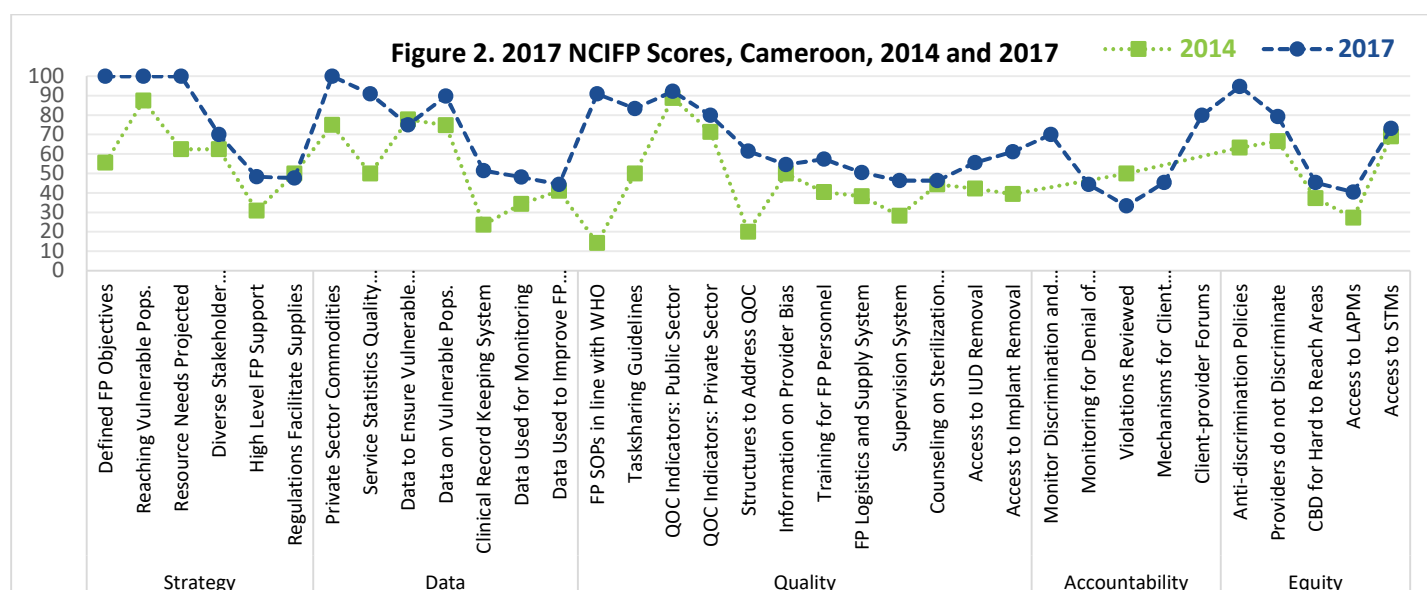
- Like most countries, Strategy was Cameroon's highest rated dimension in both years and for the region as well.
- Cameroon's lowest rated dimension was Quality of FP services in 2014 and Accountability in 2017. Accountability was the region's lowest scoring dimension in both years.



### Individual NCIFP Trends, 2014 and 2017

Scores of individual NCIFP items over time specify which FP program activities are progressing well, unchanged, or deteriorating. Figure 2 shows Cameroon with generally improved ratings for NCIFP items in 2017; 12 items had scores of 80 or above, but a nearly equal number had ratings only in the 40s or even lower (including one item, violations review, with a significant drop in score).

- **Strategy** – 2017 scores were perfect for the FP action plan specifying quantified objectives, vulnerable groups, and resource needs. Ratings improved for participation (70) and high-level support (48) but hardly changed for regulations facilitating contraceptive commodities (upper 40s).
- **Data** – 2017 scores were 90 or higher for data on private sector supplies, data on population sub-groups and service statistics quality control. Ratings improved to around 50 for clinical record-keeping/feedback and data-based monitoring but minimally changed for data use to ensure the most vulnerable have access (mid-70s) and to improve the program (mid-40s).
- **Quality** – All items scored higher by 2017, with the use of WHO SOPs and tasksharing guidelines improving significantly. These two items, along with QOC indicators in public and private sector facilities, had scores of 80 or higher, and were the highest rated Quality items in 2017. Clinic/community monitoring of QOC scored the second lowest in 2014 (20) but rose to 62 by 2017. Access to IUD and implant removal scored only around 40 in 2014 but improved to 56 and 61, respectively in 2017. Other 2017 scores included in the 50s for monitoring provider bias, logistics, and training and 46 each for supervision and sterilization counseling.
- **Accountability** – Most dimension items did not have 2014 ratings because respondents contended they lacked information about specific Accountability efforts in the country then. Only regular review of violations received a 2014 rating; its score of 50 dropped to 33 in 2017 (the lowest for the year). Other 2017 scores include mid-40s for reporting denial of services and having facility-level feedback mechanisms, 70 for monitoring discrimination and free choice, and 80 for provider-client communication.
- **Equity** – All items had improved scores by 2017, with policies to prevent discrimination against subgroups the highest rated (95) followed by monitoring discrimination by providers (79) and STM access (73). Although improved from 2014 levels, the lowest 2017 scores for this domain went to LAPM access (40) and CBD coverage of underserved areas (45).



## Implications

Cameroon committed to FP2020 in 2014. With its relatively high health expenditure per capita within the region, the country pledged to advocate for 5% increases annually in the budgets for reproductive health (RH) and FP, along with a line item for FP commodities. In 2017, Cameroon allocated a 200 million CFA budget line for FP commodities, a major step toward improving coordination and the supply chain. Despite these efforts, the Government's latest FP2020 report stresses that many challenges persist that limit its progress towards higher modern contraceptive use. The Government aims to subsidize FP services for the most vulnerable, especially the youth and women with disabilities; strengthen multisectoral commitment; disseminate RH/FP framework documents; implement and enhance key interventions such as community outreach; and improve support systems (logistics, training, and supervision); and ensure government and partner accountability in FP funding.<sup>iii</sup>

The NCIFP results for 2014 and 2017 echo the challenges that the Government identified in its latest 2020 report. The NCIFP data also specify other issues affecting the achievement of Cameroon's FP goals. These issues include the following: strategy-related items involving high-level leadership and regulations facilitating FP products; data use in program evaluation and management use of research findings to improve the program; quality-related items particularly monitoring provider bias, supervision, informing clients about sterilization being permanent, and access to IUD and implant removal; accountability mechanisms that include review of violations, denial of services on non-medical grounds, and client feedback mechanisms; and under Equity, CBD coverage of underserved areas and populations and the continuing lack of access to LAPMs.

<sup>i</sup> Suggested citation: Avenir Health Track20. "The National Composite Index for Family Planning (NCIFP): CAMEROON 2017 Scores and 2014-2017 Trends". 2017 NCIFP Policy Brief Series (2019).

<sup>ii</sup> 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 (<http://www.familyplanning2020.org/>)

<sup>iii</sup> For more information, see <http://www.familyplanning2020.org/cameroon>