

# The National Composite Index for Family Planning (NCIFP)

## SOUTH SUDAN 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 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 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.

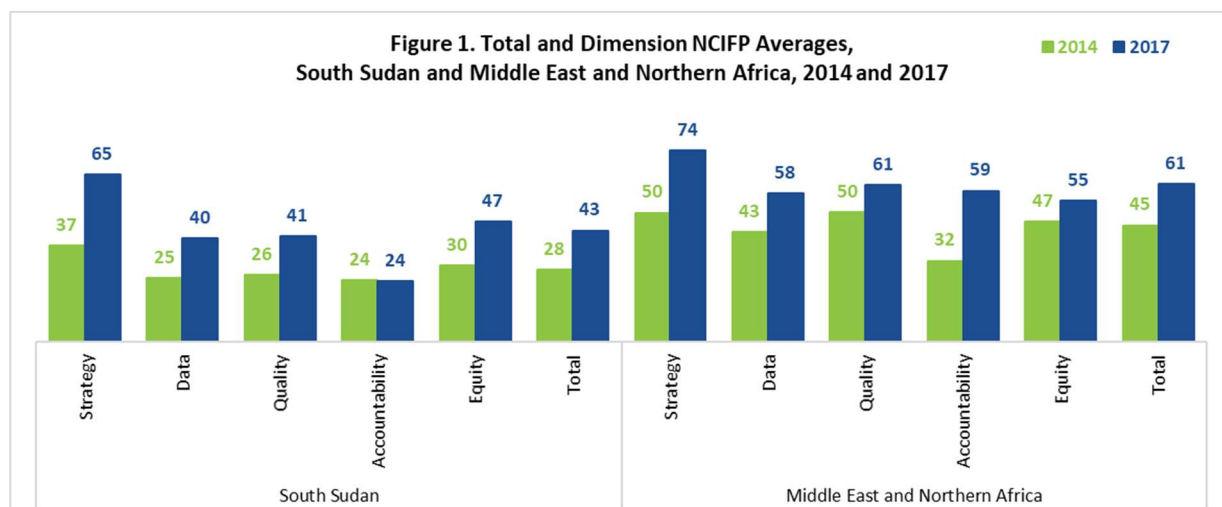
**Equity** - whether anti-discrimination policies exist, providers discriminate against special groups, the population has easy access to modern contraceptive methods (referring to STMs meaning short-term methods, or LAPMs meaning long-acting and permanent methods), and services are provided to underserved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

### South Sudan vs Middle East and North Africa (MENA) Results

Figure 1 shows that total NCIFP scores for South Sudan and the region increased from 2014 to 2017. Considering that the country became independent only in 2011 and the recency of its national FP program, the country's ratings were still below those of the region in both years. Dimension scores for each area improved during the years studied, except in the case of Sudan's Accountability average which was unchanged. South Sudan's averages for all five dimensions were also consistently lower than corresponding regional scores. Dimension rankings, however, varied between the two areas.

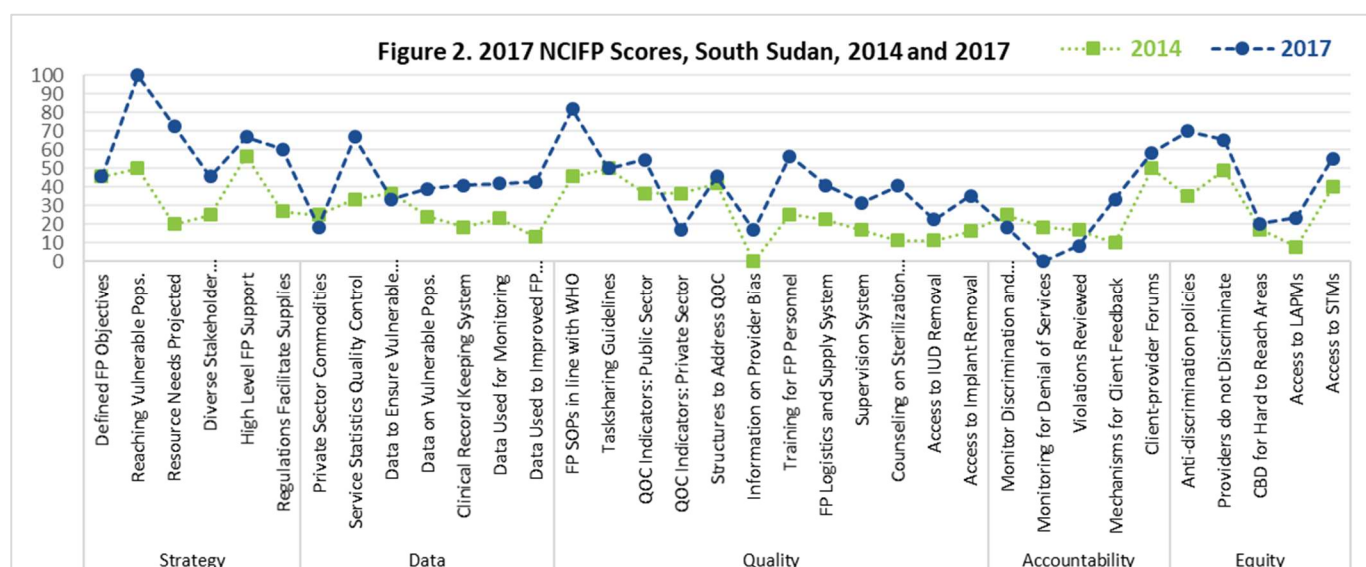
- For both years, Strategy was South Sudan's highest rated dimension while Accountability ranked the lowest.
- Strategy was also the MENA region's highest scoring dimension in both years (together with Quality in 2014). The region's lowest rated in 2014 was Accountability but the dimension's score rose in 2017 and Equity took over as the lowest ranked.



### Individual NCIFP Trends, 2014 and 2017

The scores of individual NCIFP items over time specify which FP activities are progressing, unchanged, or deteriorating. Figure 2 shows South Sudan with most items rated below 40 in 2014 but ratings improved for as many as 25 items in 2017.

- **Strategy** – Scores rose to 100 for the strategy’s focus on vulnerable groups, to 73 for estimating resource needs, to the 60s for high-level program leadership and regulations that facilitate contraceptive importation, and to about 40 s for the strategy’s support for diverse participation. The rating stayed at 45 regarding the strategy’s objectives.
- **Data** – The 2017 rating for service statistics quality control improved to 67. All other items scored only between 18 and 43, including two items - data on private sector supplies and the use of data to ensure the most vulnerable have access – that had slightly higher scores in 2014.
- **Quality** – The highest rated item in 2017 involved the use of WHO SOPs (82). Scores were in the 50s for the use of task-sharing guidelines, QOC indicators in public facilities, and the training system. 2017 ratings were in the 40s for clinic/community QOC structures, the logistics system, and sterilization counseling; in the 30s for supervision and access to implant removal; and no higher than 25 for information on provider bias, access to IUD removal and QOC indicators in private facilities. The last item scored 17 in 2017 compared to 36 in 2014.
- **Accountability** – The highest 2017 score under the dimension was 58 for client-provider dialogue followed by 33 for efforts to solicit client feedback at the facility-level. The ratings of three items - mechanisms to monitor discrimination and free choice, report denial of services, and review violations - declined to less than 20 in 2017.
- **Equity** – All five items improved in 2017: anti-discrimination policies (70), providers not discriminating against certain population groups (65) and STM access (55). Scores were still in the low 20s for LAPM access and CBD coverage.



## Implications

Since its independence in 2011, South Sudan has been trying to achieve normalcy after decades of war that displaced populations and destroyed physical and social infrastructure. These factors, along with gender inequality and misconceptions about FP, have severely limited access to high-quality reproductive health (RH) services including FP. With over half of girls married by age 18 and modern FP use less than 5% in 2016, South Sudan has one of the highest maternal and child mortality rates in the world. In 2017, the country committed to FP2020 by pledging to achieve 10% modern FP use by 2020 through rights-based, integrated RH services. Country efforts to build an enabling environment for FP include establishing RH line items in national and state budgets; capacity-building and task-shifting; CBD; public-private partnerships; supply management; implementation of key health policies and plans, including efforts to combat early/child marriage.<sup>iii</sup>

South Sudan’s 2017 NCIFP results indicate that various elements of the country’s FP program are being put in place or have moved ahead since 2014 despite numerous challenges that the young country faces. The NCIFP results also point out FP program activities with still low scores: the strategy’s objectives and support for diverse participation; data on the most vulnerable populations and regarding private sector commodities along with data-based monitoring and management use of data to improve the program; structures to ensure quality of care such as logistics, sterilization counseling, supervision, information on provider bias; various accountability mechanisms; equity efforts especially CBD coverage and LAPM access that includes IUD and implant removal. These challenges are for South Sudan’s key stakeholders to discuss and consider as the country develops and implements policies and plans to improve access to high quality FP services especially among the most vulnerable population sectors.

<sup>i</sup> Suggested citation: Avenir Health Track20. “The National Composite Index for Family Planning (NCIFP): SOUTH SUDAN 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. See <http://www.familyplanning2020.org/>

<sup>iii</sup> <http://www.familyplanning2020.org/South Sudan>