

The National Composite Index for Family Planning (NCIFP)

MEXICO 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 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.

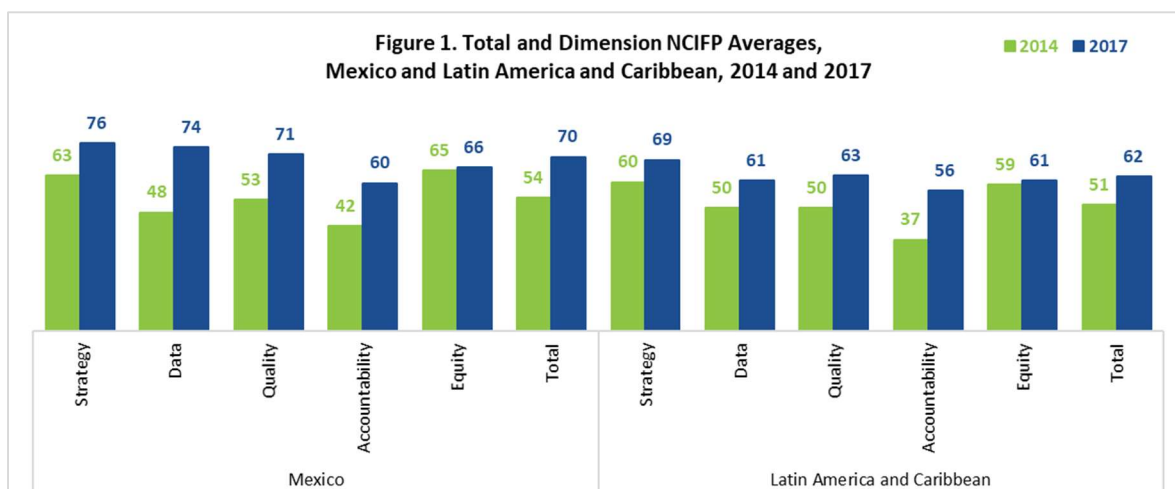
Equity - whether anti-discrimination policies exist, providers discriminate against special groups, the population has easy access to modern contraceptive methods (referring to STMs meaning short-term methods, or LAPMs meaning long-acting and permanent methods), and services are provided to underserved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

Mexico vs Latin America and Caribbean (LAC) Results

Figure 1 shows Mexico and the region with increasing total NCIFP scores between 2014 and 2017, although Mexico outscored the region in both years. Averages for all five dimensions also improved in the two areas although minimally for Equity.

- Mexico's highest rated dimensions in 2014 were Equity and Strategy. By 2017, its highest ranked were Strategy and Data. Accountability was the country's lowest rated in both years.
- The region's highest rated dimensions were also Strategy and Equity in 2014. Strategy was the LAC's sole highest ranked in 2017. Just like Mexico, the LAC's lowest ranked in both years was Accountability.

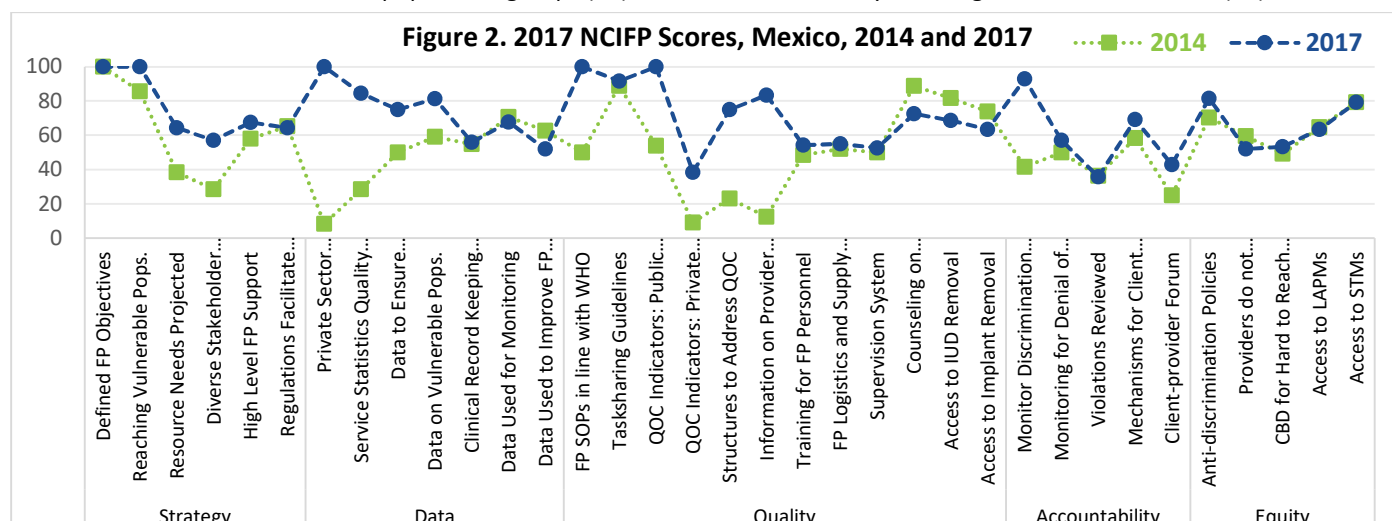


Individual NCIFP Trends, 2014 and 2017

Ratings of individual NCIFP items over time indicate which FP program activities are progressing, stagnant, or deteriorating. Figure 2 shows Mexico's NCIFP results for the two years studied. Almost 20 items were rated higher in 2017, including seven with scores of 90 or higher. Ratings hardly changed for nine items but declined for six NCIFP issues.

- **Strategy** – 2017 ratings included 100 for the strategy's objectives and focus on vulnerable groups; 60s for high-level support, estimated resource needs, and regulations for contraceptive importation; and 57 for diverse stakeholder participation.

- **Data** – 2017 scores included 100 for data on private sector commodities (from 8 in 2014); 80s for service statistics quality control and data on population sub-groups; and 75 for the use of data to ensure access among the most vulnerable. The rating for clinic recordkeeping/feedback stayed around 56 but fell for data-based evaluation (68) and program improvement (52).
- **Quality** – 2017 marks rose to 100 for the use of WHO SOPs and QOC indicators in public facilities; 92 for tasksharing guidelines; 83 for provider bias information; 75 for clinic/community monitoring structures; but only to the 50s for the training, logistics, and supervision systems, and to 38 (from 9 in 2014) for QOC indicators in private facilities. Scores, however, declined to 73 for sterilization counseling and to the 60s regarding access to the removal of IUDs or implants.
- **Accountability** – 2017 scores increased for mechanisms to monitor discrimination and free choice (93); solicit client feedback (69); report denial of services (57); and ensure client-provider dialogue (43). The rating stayed at 36 for violations review.
- **Equity** – 2017 ratings improved for anti-discrimination policies (82) and CBD coverage (53) but slightly declined for provider non-discrimination of certain population groups (52). Scores were relatively unchanged for access to STMs (79) and LAPMs (63).



Implications

Mexico's total population at present is about 127 million of which 35% are below 20 years of age.ⁱⁱⁱ The economy grew around 5% annually in the past decades but slackened to 2% in 2018. The poverty headcount based on the national poverty line was 42% in 2018.^{iv} The UNFPA Country Programme Document 2020-2024 cites numerous challenges that Mexico faces, including socioeconomic inequalities that affect youths, remote areas, and indigenous populations. Over 50% of young people have informal or precarious employment, limited access to social and health services, and are exposed to violence (60% of crime victims are aged 18-29 years), with women and girls disproportionately affected. Policy frameworks exist at the federal level in the areas of development, health, youth and women's rights, and gender equality but implementation lags, in part due to local institutional capacities. Maternal mortality, adolescent pregnancy, and gender-based violence are key challenges, especially in states where majority of indigenous people live. Mexico's total fertility rate is near the replacement level of 2.1 lifetime births per woman, but the adolescent fertility rate remains high. Around 40% of pregnancies are unplanned, half of which occur to adolescent girls. In 2017, over 11,000 births were recorded in the 10-14-year age group. Child marriage and early unions still occur, particularly among indigenous and rural populations, and are linked to adolescent pregnancy and sexual violence. Logistics management remains a problem. There is no specific budget line for modern contraceptives; not all supplies are procured centrally, resulting in increased cost. Mexico has strong federal institutions and technical capacities for data collection and analysis, but disaggregated data are not readily available. Capacities to generate and use spatial and time-bound information need to be improved at the subnational level.^v

Mexico's predominantly improved and many high NCIFP scores in 2017 reflect experts' recognition of the country's efforts to strengthen the national FP program. However, the ratings of some items declined, such as the use of data to monitor or improve the program, easy access to implant or IUD removal, and provider non-discrimination of certain population groups. Also, a few NCIFP items scored no higher than the 40s in 2017: the use of QOC indicators in private facilities, and regarding mechanisms to review violations and promote client-provider dialogue. These challenges, which indicate to some extent limited local capabilities, are for Mexico's stakeholders to consider in their efforts to improve access among the most vulnerable population sectors.

ⁱ Suggested citation: Avenir Health Track20. "The National Composite Index for Family Planning (NCIFP): MEXICO 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: <https://www.familyplanning2020.org/>)

ⁱⁱⁱ UN World Population Prospects, 2019 Revision. <https://population.un.org/wpp/DataQuery/>

^{iv} Mexico country profile from <https://data.worldbank.org/country/Mexico?view=chart>

^v UNFPA Country Programme Document (https://www.unfpa.org/sites/default/files/portal-document/DP.FPA_CPD_.MEX_.7.eng_.pdf)