

# The National Composite Index for Family Planning (NCIFP) Philippines 2014 Results

## What is the NCIFP?

The NCIFP is a new tool developed to support FP2020's efforts to improve the enabling and policy environment for family planning. The NCIFP measures both the existence of policies and program implementation, using 35 individual scores organized under five dimensions: **strategy**, **data**, **quality**, **equity**, and **accountability**.

**Strategy** – whether the 1) national FP strategy/plan includes objectives that are quantified and 2) targets to reach the poorest and most vulnerable; 3) resource requirements are projected; 4) means to broaden participation among diverse stakeholders are supported; 5) seniority of FP program director; and 6) policies that facilitate contraceptive importation or local manufacturing.

**Data** - whether the government 7) collects data to monitor special sub-groups (e.g. the poor) and 8) availability data on private sector commodities; 9) quality control of service statistic in place; and 10) data used to ensure access by vulnerable groups; 11) adequate client record keeping in place; and 12-13) uses various data sources for program operations, monitoring and evaluation.

**Quality** – whether the 14) government uses WHO-based FP procedures; 15) has FP task-sharing guidelines; 16-17) has and uses quality of care indicators in public and private facilities, 18) has adequate structures in place to address quality, 19) collects information on informed choice and provider bias, 20) has adequate training programs in place, 21) logistics and transport systems insure sufficient stock, 22) adequate supervision system in place, 23) informed choice on sterilization, 24-25) access to IUD and implant removal.

**Equity** - whether 26) policies are in place to prevent discrimination; 27) extent to which service providers discriminate against special groups; 28) underserved areas are served by CBDs; and 29-30) the entire population has access to modern methods.

**Accountability** – whether there are 31) national, sub-national and facility-level mechanisms in place to monitor voluntary, non-discriminatory FP provision; 32-33) mechanisms to report denial of services in place and reviewed; 34) client feedback solicited, and 35) system in place to encourage dialogue between clients and providers.

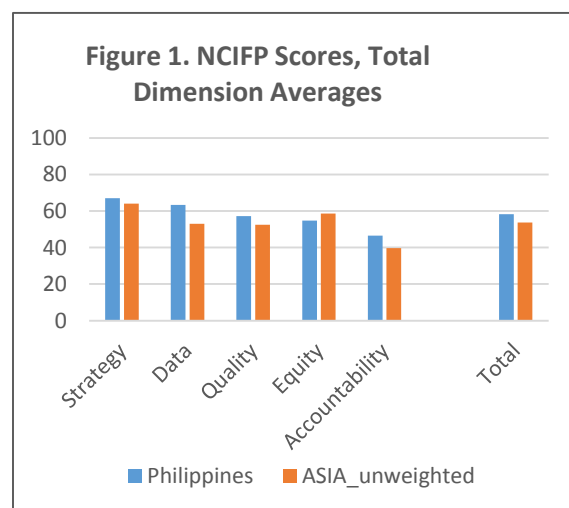
The NCIFP builds on the long-standing *National Family Planning Effort Index* (FPE). In 2014, the two questionnaires were fielded jointly in 90 countries by the Health Policy Project (implemented by Palladium with funding from USAID) and Avenir Health (with funding from the Bill and Melinda Gates Foundation). NCIFP data allow assessments of FP programs and can help stimulate discussions among stakeholders about factors that help make FP programs effective, widely supported and sustainable.

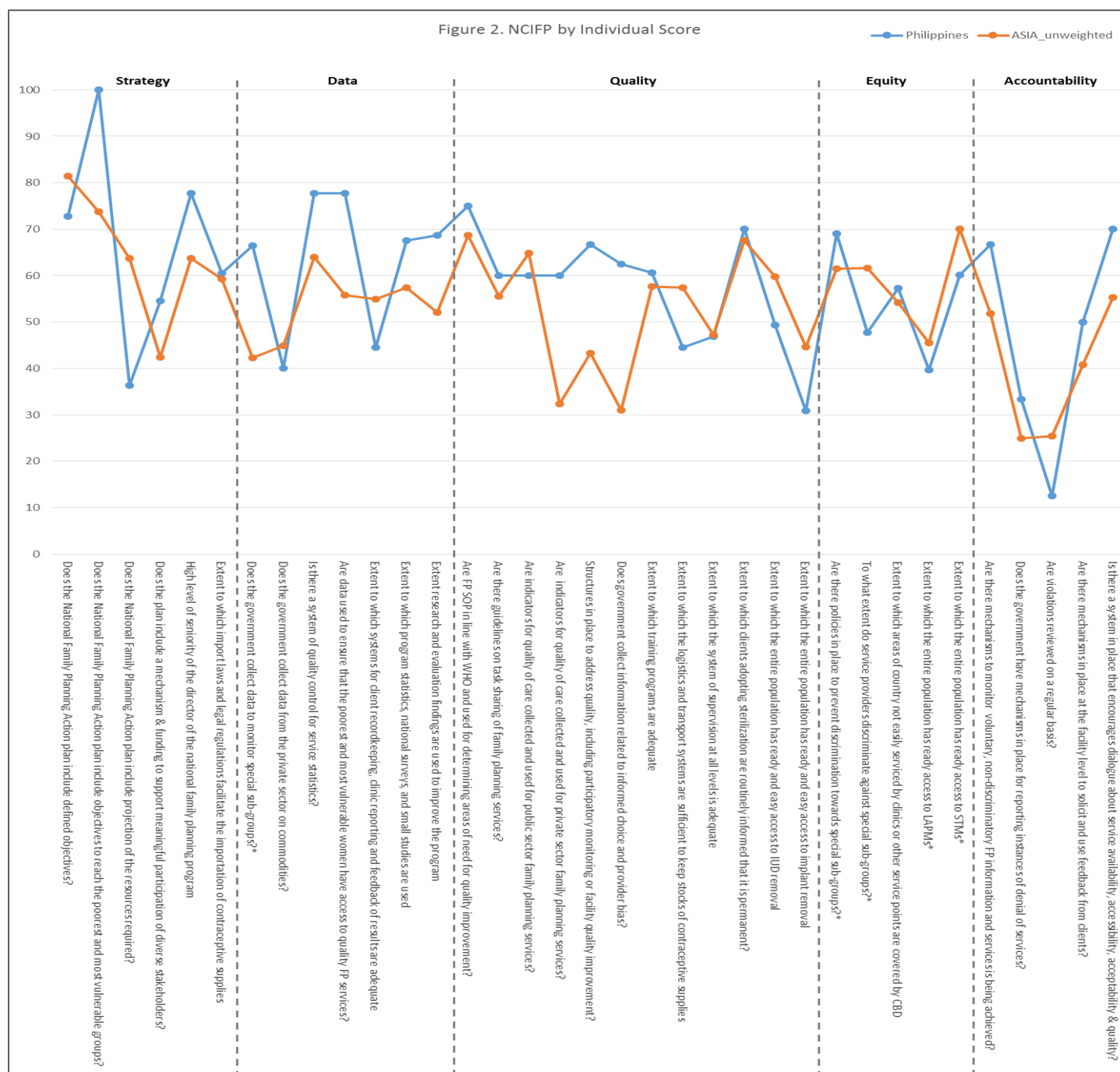
## What do the Philippines results look like?

The Philippines' total NCIFP score was higher than the average for Asia (58 vs 54, as shown in Figure 1). The Philippines also scored higher than the regional averages across the main NCIFP dimensions except Equity.

The Philippines followed the Asia pattern of individual item scores only to some extent even as the country tended to have higher individual item scores for several questions (Figure 2). The country scored 100 (meaning all respondents said 'yes') for the national FP action plan having objectives to reach the poorest and most vulnerable groups. Other items where the Philippines scored notably higher than Asia include seniority level of the national FP program director; service statistics and access to quality services among the poorest/most vulnerable; FP SOP based on WHO procedures; policies to prevent discrimination, and mechanisms to monitor voluntariness.

The country's lowest score (below 20) was for whether violations were reviewed on a regular basis. Other low scores (in the 40s or lower) went to the following questions: whether the national FP action plan includes projections of required resources, whether the government collects data on private sector commodities, to what extent the contraceptive logistics system sufficiently tracks stocks of supplies, whether there is ready access to implant removal, and to what extent the population has ready access to LAPMs.





## Implications

In 2012, the Government of the Philippines committed to the global FP2020 Partnership and emphasized that access to FP services and supplies is a fundamental and essential right that is key to inclusive growth and sustainable development. The Philippines pledged to establish a national policy on RH and population development, allocate funds to implement the policy, and commit \$15 million for family planning commodities for poor women with unmet need. Although signed into law in December 2012, the Responsible Parenthood and Reproductive Health Act (RP RH Act) was not implemented immediately due to the objection of ultra-conservative groups about its constitutionality. The Supreme Court upheld the law in April 2014 but required parental consent for minors. In early 2016, the Senate removed the line item for contraceptive purchase from the Department of Health budget. Moreover, in the latter part of 2016, the Supreme Court re-issued a temporary restraining order on government procurement and distribution of modern contraceptives pending Bureau of Food and Drug certification that specific such contraceptives are non-abortion. There is a need to assess whether the foregoing restrictions affect access, quality, equity and accountability of FP services in the country. The 2014 NCIFP results show the Philippines as achieving better than Asia for a number of FP policy and program issues. The NCIFP results and recent developments affecting the FP program in the country are issues for further discussion by country stakeholders.

Want to know more: Read the full NCIFP report and use the interactive data tool available at [track20.org](http://track20.org)