

# The National Composite Index for Family Planning (NCIFP)

## Tanzania 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.

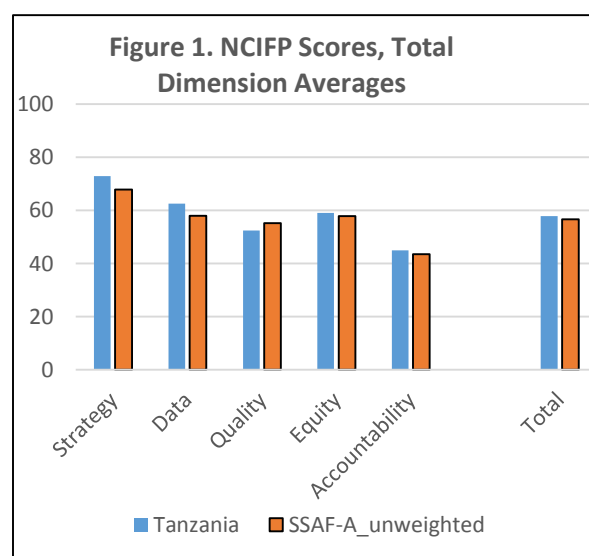
**Accountability** – whether there are 31) national, sub-national and facility-level mechanisms in place to monitor voluntary, non-discriminatory FP provision; 32-33) mechanisms to report denial of services in place and reviewed; 34) client feedback solicited, and 35) system in place to encourage dialogue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

The NCIFP builds on the long-standing *National Family Planning Effort Index* (FPE). In 2014, questionnaires of the two indices were fielded jointly in 90 countries by the Health Policy Project (implemented by Palladium with USAID funding) and Avenir Health's Track20 project (funded by 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 Tanzania results look like?

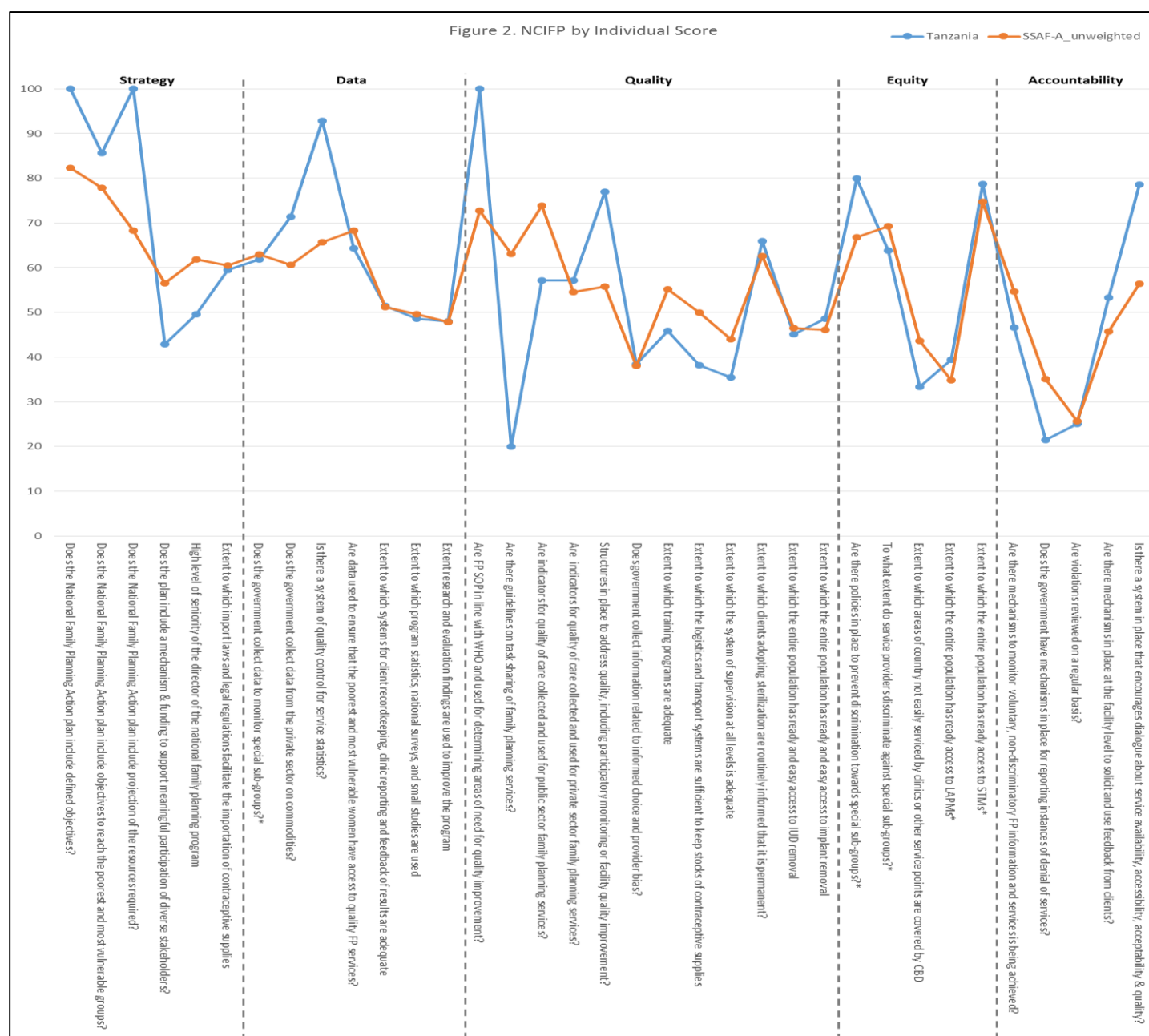
Tanzania's total score was only one point higher than the regional average for Anglophone SSAF (58 vs 57, Figure 1). The country also rated slightly higher than the region across all NCIFP dimensions except Quality.

Tanzania's scores for individual NCIFP items (Figure 2) tend to follow the regional pattern especially under Equity and Accountability. Tanzania scored 100 for its FP Strategy having defined objectives and projections of required resources, and for Quality efforts by using WHO-based standards. It also rated much higher than the region for the country FP Strategy aiming to reach the poorest, for Data on service statistics, for having a system in place to improve Quality, for the Equity item involving policies to prevent discrimination, and for Accountability by having systems in place for dialogue about accessibility and acceptability of services. Tanzania, however, received scores that were either below the 40s or notably lower than corresponding regional averages for several Quality items (existence of task-sharing guidelines; adequacy of training, logistics and supervision systems; information on informed choice and provider bias); for Strategy items regarding support for meaningful stakeholder participation and high level seniority of the national FP program director; for the Equity item on CBD coverage of underserved areas, and for the Accountability question on whether mechanisms exist for reporting instances of denial of services on non-medical grounds.



## Implications

The NCIFP provides qualitative information on how a country stands regarding factors - Strategy, Equity, Quality, Data and Accountability systems - that help make FP programs effective and widely supported. During the FP2020 Summit in 2012, the government of Tanzania pledged to increase contraceptive use to 60 percent and double the number of contraceptive users to 4.2 million by ensuring access to voluntary, high quality FP information, services, and supplies. Interventions include increasing resources to implement the National Family Planning Costed Implementation Program, implementing the National Costed One Plan II for Reproductive, Maternal, Newborn, Child and Adolescent Health (an update of the FP2020 Action Plan 2013-15) to address regional disparities through training, capacity-building, community-based services; giving priority to young people and post-partum women; public-private partnerships and training for service providers and local staff to improve commodity security, logistics systems, and method mix; and launching a country-wide communication campaign to address barriers to FP use. The 2014 NCIFP results confirm the importance of these interventions and the need to strengthen government's efforts to implement these interventions. The NCIFP results also point to many other issues affecting the FP program for discussion and appropriate action by Tanzania's stakeholders.



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

Suggested citation: Avenir Health. 2016. The National Composite Index for Family Planning (NCIFP): Tanzania 2014 Results. Track20 NCIFP Policy Brief Series

