

# The National Composite Index for Family Planning (NCIFP)

## Mauritania 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 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.

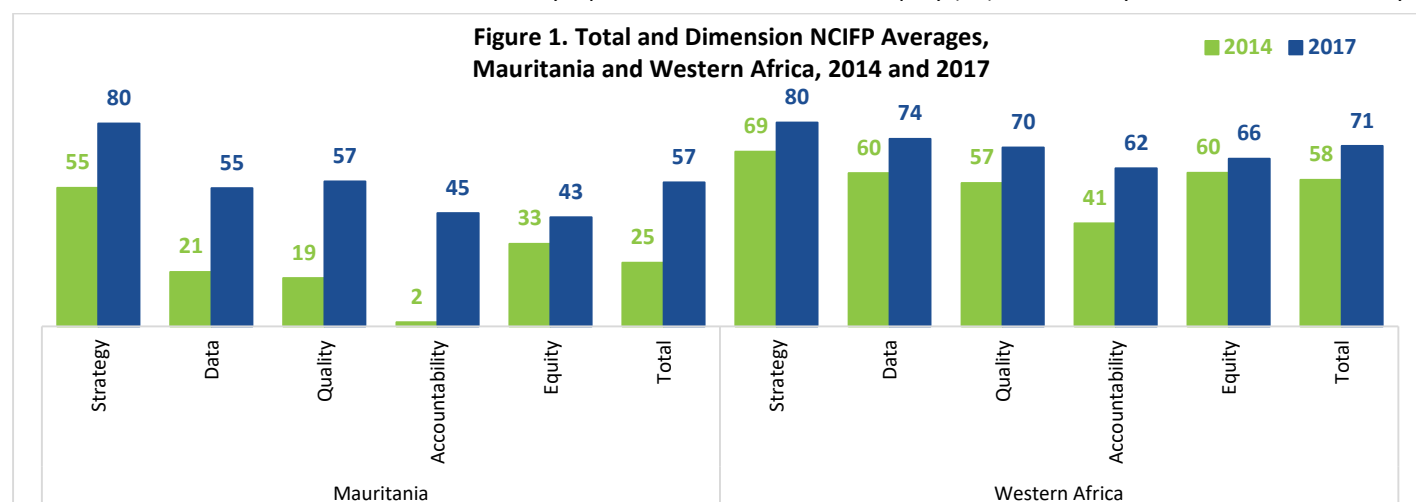
**Equity** – whether anti-discrimination policies exist, providers discriminate against special groups, the population has easy access to modern contraceptive methods (referring to STMs meaning short-term methods, or LAPMs meaning long-acting and permanent methods), and services are provided to underserved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

### Mauritania vs Western Africa Results

Mauritania's total NCIFP score of 25 in 2014 more than doubled to 57 in 2017 (Figure 1). With ratings much higher than the country, the region's total score rose from 58 in 2014 to 71 in 2017. Both areas averaged higher for all five dimensions. The region also outscored Mauritania for all dimensions except for Strategy, as both areas equally scored 80 in 2017.

- Strategy was the highest rated dimension in both areas and years.
- Accountability averaged the lowest for both areas in 2014 and for the region in 2017. Mauritania's Accountability average grew from 2 in 2014 to 45 in 2017, which was only 2 points above the score for Equity (43), the country's lowest ranked for the year.

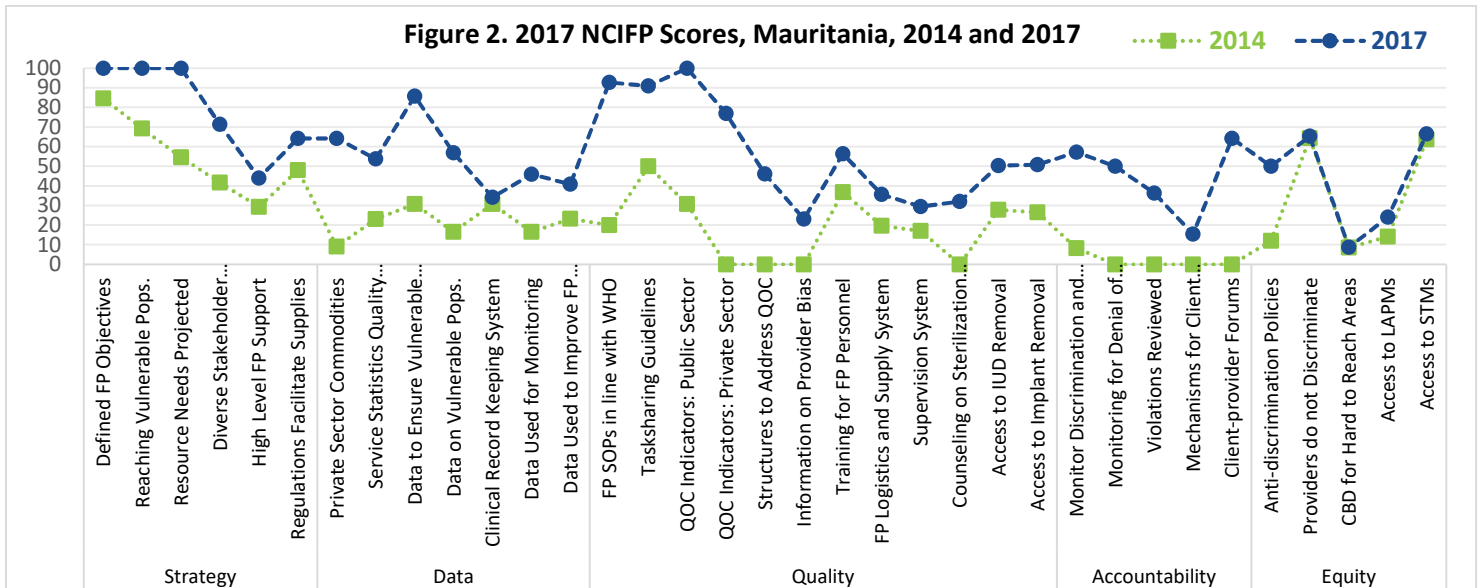


### Individual 2014 and 2017 NCIFP Scores

Ratings of individual NCIFP items over time specify which FP program activities are progressing, stagnating, or deteriorating. Figure 2 shows Mauritania with mostly low individual scores in 2014: almost 20 items were rated below 40 and eight items assessed as not existing. The country's 2017 ratings improved notably in 2017; four items scored 100, although most scores remained at low levels.

- **Strategy** – All items scored higher in 2017. Ratings included 100 for the strategy's defined objectives, focus on target groups, and estimated resource needs; 71 for support for stakeholder participation; 64 for regulations that facilitate contraceptive importation, but only 44 for high-level program leadership.

- **Data** – All items had improved scores in 2017: 86 for using data to ensure the most vulnerable have access; 64 for data on private sector commodities; 50s for information on population subgroups and quality control of service statistics; but only between the 30s to the 40s for clinic recordkeeping, data-based monitoring and program improvement efforts.
- **Quality** – All items had much improved ratings in 2017, with 90 or more for the use of WHO SOPs, tasksharing guidelines, and QOC indicators in public facilities, 77 for QOC indicators in private facilities, and 50s for the training system and access to implant and IUD removal. Although improving, 2017 scores were still between 23–46 for all remaining items, including clinic/community structures to monitor QOC, provider bias information, logistics, supervision, and sterilization counseling.
- **Accountability** – In 2014, four items were rated as non-existent. 2017 ratings indicate that some mechanisms are in place although at varying functionality levels: client-provider dialogue (64), discrimination and free choice monitoring (57) and mechanisms to report denial of services (50) but only 36 for violations review and 15 for client feedback at the facility level.
- **Equity** – Only anti-discrimination policies scored higher in 2017 (50). Ratings hardly changed for STM access (67), providers not discriminating against certain population groups (65), access to LAPMs (24), and CBD outreach to the underserved (9).



## Implications

Mauritania recently transitioned from focusing on “birth spacing” to “family planning”, gradually breaking taboos around contraception<sup>iii</sup>. Building on its commitment to the Ouagadougou Partnership, Mauritania joined the FP2020 initiative in 2013 and pledged to increase modern contraceptive use and reduce the fertility rate by increasing resources for FP and implementing the national FP action plan. 2017 was a pivotal year: Mauritania approved its first-ever reproductive health/FP law; the Ministry of Health allowed all qualified public and private health centers to offer contraceptives and postpartum counseling starting at the first prenatal visit; and the Government updated the country’s FP 2020 pledges. Emphasizing universal access for women and young people, Mauritania pledged to improve the supply of FP services by introducing new methods; providing FP services for postpartum women, adolescents and young married individuals in 100% of health facilities; developing the supply chain; and strengthening the institutional framework for FP. Government documents emphasize that Mauritania faces many challenges, including public education on FP and stockouts especially in remote areas of the vast desert country.

Mauritania’s efforts to strengthen its nascent FP program are confirmed by its high NCIFP scores regarding key elements of the national FP strategy, data initiatives to improve access among the most vulnerable, the use of QOC protocols and indicators in the public sector, and private sector involvement. The country’s much improved NCIFP scores from 2014 to 2017 also reflect experts’ recognition of the country’s notable efforts to establish or strengthen key program support services such as training, and access to IUD and implant removal. The NCIFP results also specify several low-scoring items: high-level FP program leadership; clinic recordkeeping and feedback to clients (a significant challenge considering high population mobility); provider bias monitoring, various accountability mechanisms including client feedback at the facility level; CBD coverage; and access to LAPM. These challenges are for the country’s stakeholders to discuss, identify underlying causes, and agree on appropriate action to build support for the national program and ensure achievement of the country’s FP, health, and development goals.

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