

The National Composite Index for Family Planning (NCIFP)

UGANDA 2017 Scores and 2014-2017 Trendsⁱ

What is the NCIFP?

A tool that supports efforts of FP2020ⁱⁱ 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 family planning (FP) policies and program implementation based on 35 items that are 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.

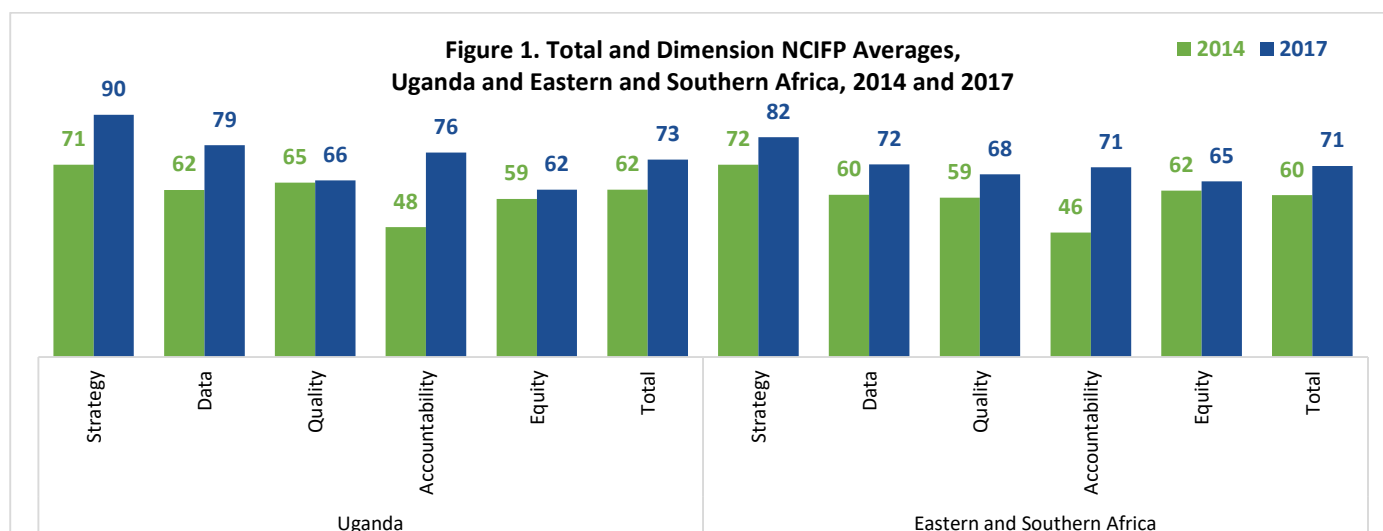
Equity - whether anti-discrimination policies exist, providers discriminate against special groups, the population has easy access to modern contraceptive methods (referring to STMs meaning short-term methods, or LAPMs meaning long-acting and permanent methods), and services are provided to underserved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

First undertaken in 2014, the NCIFP builds on the long-standing National Family Planning Effort Index (FPE). Avenir Health's Track20 project (funded by the Bill and Melinda Gates Foundation to assist countries participating in the FP2020 Global Initiative) collected NCIFPs in 2017 to assess national FP program status in 2017 and changes since 2014.

Uganda vs Eastern and Southern Africa (E&S AFR) Results

Figure 1 shows improving total NCIFP scores for Uganda between 2014 and 2017 (62 and 73 respectively) as well as for the region (60 and 71). Uganda's total scores were slightly higher than the region's in both years. All five dimensions averaged higher in both areas but rankings varied.

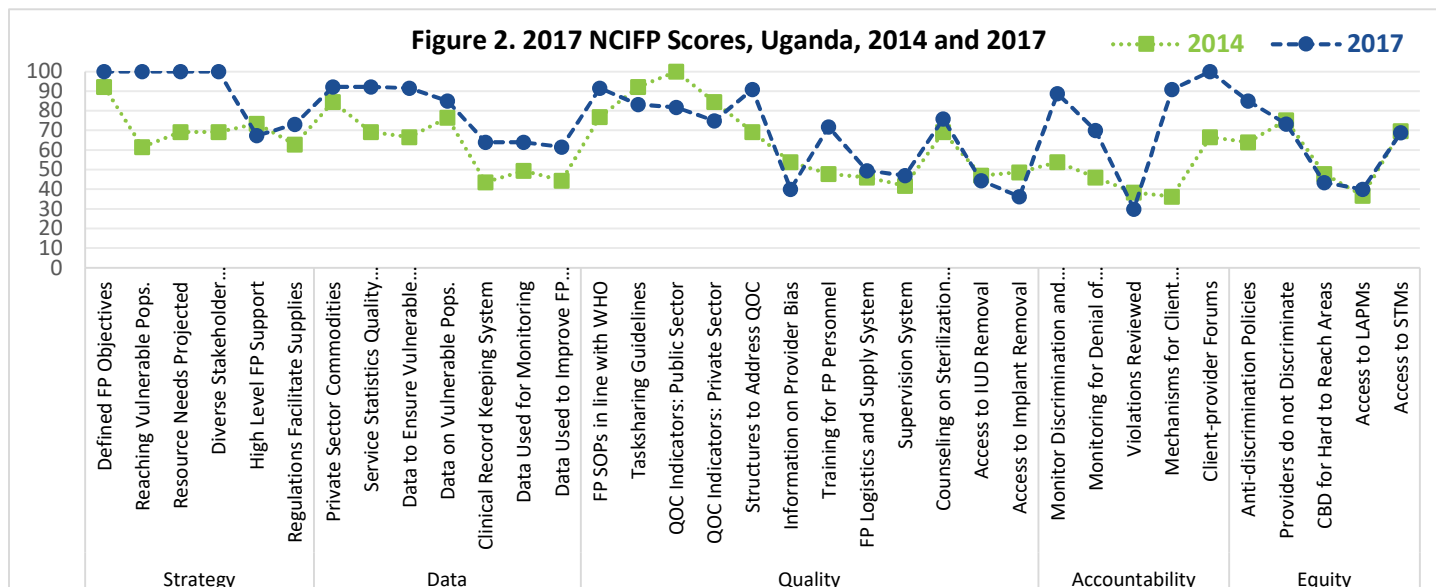
- Strategy was the highest rated dimension in both areas and years. 2017 scores rose, especially for Uganda.
- Accountability efforts, the lowest rated dimension in both areas in 2014, improved significantly by 2017.
- Equity ratings slightly improved for Uganda and the region. The dimension became the lowest ranked in both areas in 2017.
- The average for Quality hardly changed for Uganda (+1) compared to the region's more improved scores (+9).
- The country's average for Data increased sizably (+17) compared to that of the region (+12).



Individual NCIFP Trends, Uganda 2014 and 2017

Ratings of individual NCIFP items over time indicate which FP program activities are progressing well, stagnating, or deteriorating. Figure 2 shows that Uganda scored higher in 2017 for over 20 NCIFP items (with gains of at least +5 pts).

- **Strategy**- 2017 scores were perfect regarding the strategy's objectives, focus on vulnerable groups, estimated resource needs, and support for diverse participation. The score for regulations that facilitate contraceptive importation increased by 10 points to 73. However, the score declined regarding high-level program leadership.
- **Data** - Ratings of all seven items improved. 2017 scores were in the 60s for clinic recordkeeping/feedback to clients, data-based monitoring and program improvement while the four other items scored at least 85.
- **Quality** - Despite several items scoring higher, the dimension's practically constant average during the two years reflects FP experts' concerns about the quality of FP services in private and public facilities, the use of tasksharing guidelines, provider bias monitoring, and access to implant and IUD removal services.
- **Accountability** – The score for mechanisms to review violations slightly declined from 38 in 2014 to 30 in 2017 while ratings increased to 70 or even much higher for all other items.
- **Equity** - Except for the higher score given to anti-discrimination policies, the scores of individual Equity items hardly changed between 2014-2017, including scores in the 40s for CBD coverage and LAPM access.



Implications

Uganda's total fertility, maternal mortality, and teenage pregnancy rates remain among the highest globally. During the FP2020 Summit in London in 2012, the Government of Uganda pledged to a) execute an FP2020 Action Plan to address regional inequalities through capacity-building, community-based services, and interventions targeting young people and post-partum women; b) create an enabling policy environment for FP by passing the National Population Council Bill, mobilizing and increasing FP/RH resources, increasing FP/RH demand and use among the poor; c) foster government partnership with the-private sector to improve FP/RH services and logistics systems, and with CSOs and private groups for outreach and community-based services in hard-to-reach areas; d) improve FP evaluation through regular reviews and surveys to assess health and FP outcomes and services. In 2017, Uganda updated its FP2020 commitment to reduce unmet need among adolescents from 30.4% in 2016 to 25% in 2021. Through more and improved structures in hard-to-reach places, the Government also aims to expand its reach, method mix including long acting, reversible, and permanent methods. These commitments will contribute to the nation's ambitious goal to reduce unmet need for family planning to 10% and increase the modern contraceptive prevalence rate to 50% by 2020.ⁱⁱⁱ

Uganda's 2017 NCIFP ratings indicate that the country has made strides towards fulfilling various commitments to ensure achievement of the country's 2020 objectives. The NCIFP results also call for more stakeholder efforts to bolster FP strategy implementation through high-level leadership of the program and regulations that facilitate contraceptive importation and production; provide high-quality services through the use of tasksharing guidelines, QOC indicators in public and private facilities, and information to monitor provider bias; support mechanisms to review violations; and ensure equity through CBD coverage of underserved areas and populations and easy access to LAPMs along with access to IUD and implant removal.

ⁱ Suggested citation: Avenir Health Track20. "The National Composite Index for Family Planning (NCIFP): UGANDA 2017 Scores and 2014-2017 Trends". 2017 NCIFP Policy Brief Series (February 2019)

ⁱⁱ Family Planning 2020 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 120 million more women and girls to use contraceptives by 2020. See <http://www.familyplanning2020.org/>

ⁱⁱⁱ http://www.familyplanning2020.org/sites/default/files/Uganda_FP2020_Commitment_2017.pdf