

**Brief for  
Advance Family Planning: An Advocacy Project to Increase Access to  
Quality Family Planning Services  
September 2009**

Advance Family Planning (AFP) is an evidence-based, three-year effort designed to help developing countries achieve universal access to reproductive health (MDG 5b) by revitalizing family planning programs through increased and more effective funding, and improved policy commitments at the local, national, and global levels. AFP is supported by both the Bill & Melinda Gates Foundation and the David and Lucile Packard Foundation with combined grants totaling \$12 million.

**AFP Consortium**

Johns Hopkins Bloomberg School of Public Health  
African Women's Development Fund  
Partners in Population and Development  
Futures Group International

AFP's goal is to increase funding and improve policy commitments at all levels of national governments, among bilateral and multilateral donors, and the private sector. It will build on past investments and on-going activities in reproductive health advocacy, leadership development, knowledge generation, and innovative service delivery projects. The success of AFP will very much depend on effectively working with established reproductive health organizations such as DSW, MSI, PRB, IPPF, PAI, USAID, and UNFPA.

AFP will build on the momentum generated by the re-emergence of the U.S. and the continuing and growing interest of European donors. Additionally, there is increased recognition at the country level for the need to invest in family planning in order to improve health and achieve the MDGs. As such, AFP will undertake the proposed project to capitalize on the improving environment for family planning.

The project focuses on providing key policy makers with evidence of why family planning is a sound investment with demonstrable dividends in terms of health, socio-economic development, the environment, and other areas. The message and the messengers will reflect each country's situation and the interests of those policy makers.

In order to achieve its goals, AFP has developed three distinct, but interrelated objectives to strengthen Southern advocates and create sustainable advocacy platforms:

**AFP Countries**

Indonesia  
Tanzania  
Uganda  
Ethiopia  
India  
Kenya  
Nigeria  
Pakistan  
Senegal

- Objective 1: Mobilize and strengthen sustainable family planning/reproductive health advocacy with catalytic investments in Tanzania, Uganda, and Indonesia countries with potential for wider replication in other developing countries
- Objective 2: Strengthen existing family planning/reproductive health advocacy investments in India, Pakistan, Ethiopia, Kenya, Nigeria, and Senegal by providing cutting edge and highly specialized technical assistance
- Objective 3: ***Voices from the South***: Leverage voices of Global South champions regionally and globally to demand revitalization of family planning/reproductive health agenda to achieve MDG 5b and to create a platform for greater ***South-to-South*** cooperation

“... [it] is important to remember what is most basic in any of our lives. The ability to plan a family and to raise healthy children is certainly at the core of that. Ensuring that women have that freedom will be the policy of this Administration.”

*--Secretary of State Hillary Clinton  
Speech at PPFN in Houston, TX on  
March 29, 2009*

## AFP's Approach

**AFP's approach** is innovative. While other advocacy efforts have applied parts of AFP's modus operandi, we know of no other effort that combines all the elements proposed here.

### Local Champions:

AFP will set ***in motion an indigenous process*** of identifying local champions that have the stature and skill to effectively advance family planning among policy makers. They also need to have sufficient gravitas to be players at the regional and global levels. In some cases, persons selected will already be champions but will benefit from AFP's advocacy training. In other cases, they will be new to this area and will be business men and women, clergy, politicians, government and civil society executives, and entertainers. On the ground, AFP needs to be an indigenous undertaking. In Indonesia, Tanzania and Uganda, AFP will be guided by a core working group of local champions.

Focused Advocacy: AFP is policy maker-centric. We will concentrate our efforts on providing evidence to policy makers who control the resources--money, people, and commodities-- for family planning and how these resources will be employed. Increasing the visibility of family planning in a compelling way is indispensable. AFP will be focused in two ways. First, activities will center on increasing resources and improving the policy environment for family planning and reproductive health. While it may be appropriate in some settings to tie family planning to such important areas as girls' education or maternal survival, the ultimate aim is to increase access to high quality family planning services. Second, the focus is on policy makers involved with resource allocation and reproductive health policies.

Advocacy Opportunities: AFP hone in on concrete, discrete actions to achieve these objectives. AFP will not try to increase the generic priority of family planning, which other groups are doing, but identify advocacy opportunities that are amenable to influence, have concrete consequences, and are measurable. It will employ the SMART filter to identify significant and timely opportunities.

Since advocacy opportunities occur at the local, national, regional, and global levels, and since decisions made at one level impact on the decision-making process at other levels, AFP will work at all four levels.

Influencing over-extended policy makers means getting their attention. "Getting your foot-in-the-door" is often the most challenging part of advocacy campaigns. Many groups use **focused events** to grab policy makers' attention. Star-studded galas are widely used in the development field, especially the HIV/AIDS community. While an offer from Angelina Jolie to promote family planning would be eagerly accepted, AFP will rely on the attention-getting potential of such USAID-funded programs as the Demographic and Health Surveys (DHS), and Resources for the Awareness of Population Impact on Development (RAPID) analyses. The well-established DHS is now the primary method governments and donors track changes in health and reproductive health behavior. DHS is a key element in developing policies, planning programs, and understanding behavior. All nine AFP countries will have, or recently had, a DHS. Their results will be used to develop advocacy messages and coordinate events aimed at specific policy makers.

RAPID analyzes the interrelationships of population dynamics and a country's development prospects (e.g., how many new schools are needed to be built at the country's current rate of population growth). RAPID presentations are specifically designed for the busy policy maker and allow them to change modeling assumptions.

Working with collaborating partners and most importantly, local champions, AFP will link focused events to specific advocacy opportunities and policy makers. For instance, under AFP a RAPID for sub-Saharan

### **AFP Approach**

Local Champions  
Focused Advocacy  
Advocacy Opportunities  
Evidence Based  
Quick Wins  
Sustainability  
Advocacy Scorecard

**Specific**  
**Measurable**  
**Achievable**  
**Realistic**  
**Time bound**

Africa will be developed for the first time. There will be multiple versions of this RAPID, reflecting the interests and perspectives of policy makers in different countries and organizations. AFP will also encourage accurate media coverage of focused events. Local champions will be trained on how best to use DHS data and RAPID analyses to their best effect. Lastly, the influence of focused events has a very steep decay curve without efforts to sustain and amplify their messages. AFP follow-up activities will maximize the focused events' resonance.

Evidence Based: AFP assumes policy makers will act on compelling evidence that is presented in an accessible way and by a credible messenger. Our approach tailors messages to decision makers and is designed to change the way policy makers choose to enact and implement policies and allocate resources. AFP will identify and build the skills of local family planning champions to maintain a regular drumbeat of interaction and information to raise the profile and funding of family planning.

While we very much appreciate that many important decisions are not evidence based, we do feel that evidence does increase the probability of wise decisions. Evidence, complemented by powerful stories telling of how people's lives are affected, will be central to AFP's approach.

Quick Wins: Effective advocacy should convince policy makers not only of the desirability of achieving an objective, but also show concrete ways to achieve this objective. Quick wins are actions over which the policy maker has control and which can effect change during his/her tenure. In some cases, a quick win can be initiated by providing funds which are leveraged for scaling up a proven intervention. In other cases, changing policies can also be quick wins.

A core part of AFP is identifying quick but important wins, determining what policy makers' support is required to implement them, developing evidence-based advocacy messages for these policy makers, and helping family planning champions deliver these messages at a time they are most effective.

#### What is Unmet Need?

A woman has an *unmet* need for family planning if she is married, in a union or sexually active, and is able to conceive; wants no more children or does not want to have a child in the next two years; and is not using any modern contraception or is using a traditional method.

Quick wins are possible because of the very large number of women with an unmet need for family planning, estimated to be over 200 million women. While the difficulty of meeting this unmet need should not be underestimated, there is no doubt that the principal ingredient to effectively addressing this need is, quite simply, the lack of funds.

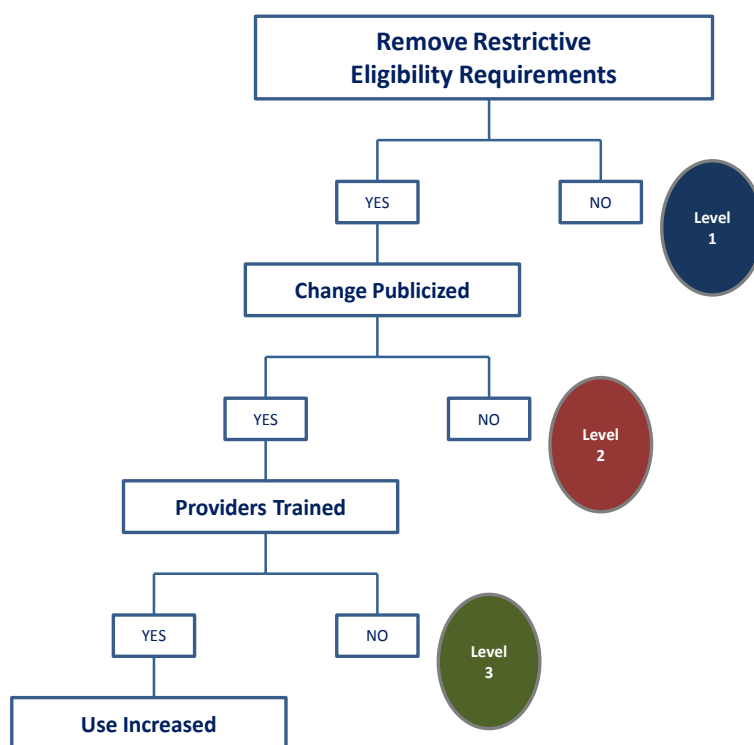
Sustainability: Sustainability has become a tired, compulsory bromide that receives little meaningful attention beyond soaring rhetoric. Contrastingly, it is the heart of this three-year effort. If at the end of this project, the activities do not receive sufficient support to continue, the long-term impact of AFP will be marginal. Effective advocacy will maintain a level of support to family planning to ensure access for future cohorts wanting and needing family planning services. From day one, the AFP Consortium will work hard to ensure sustainability.

Advocacy Scorecard: AFP's advocacy approach lends itself to a telling, unambiguous way to track its successes and failures. AFP will focus on specific, concrete advocacy outcomes: funding levels are increased or not increased; restrictive eligibility requirements for family planning continue or are not liberalized. AFP will keep a continuous updated, transparent scorecard for all advocacy opportunities as part of its monitoring and evaluation plan. Although the scorecard will track process and capacity building variables, such as the number of champions trained, its real value will be tracking what happens with the advocacy opportunities addressed by AFP.

One criterion for selecting advocacy opportunities is that they have a specific, concrete objective. The first thing recorded on the scorecard is the desired outcome for each advocacy opportunity engaged. At the most basic level, it will be easy to determine if the desired outcome is achieved. For example, the budget for family planning is increased, yes or no. This level of scoring will be collected for all opportunities. How much more information is collected for each opportunity will depend on the type of opportunity and other factors, most beyond the control of AFP.

## Advocacy Opportunity Levels

Three levels of data that can be collected for each advocacy opportunity. We illustrate below how a successful effort to remove eligibility criteria, such as marriage and number of children, which restrict access to family planning services. At each level, a binary outcome will occur. It is hoped and planned that these minimal data will be collected for all opportunities at all levels. Whenever possible, supplementary information will also be collected at each level.



*Level 1* The liberalization of the requirements may be partial, i.e., number of children requirement is lifted, but the marriage requirement retained.

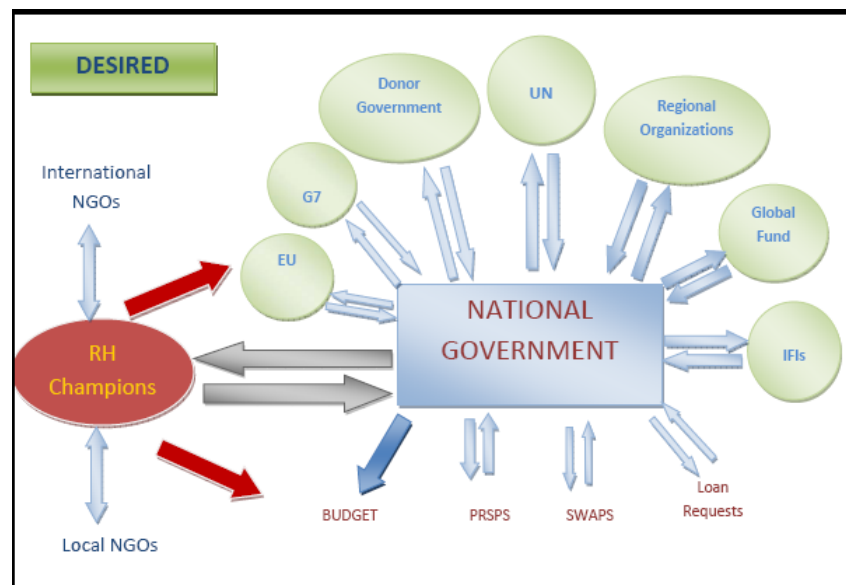
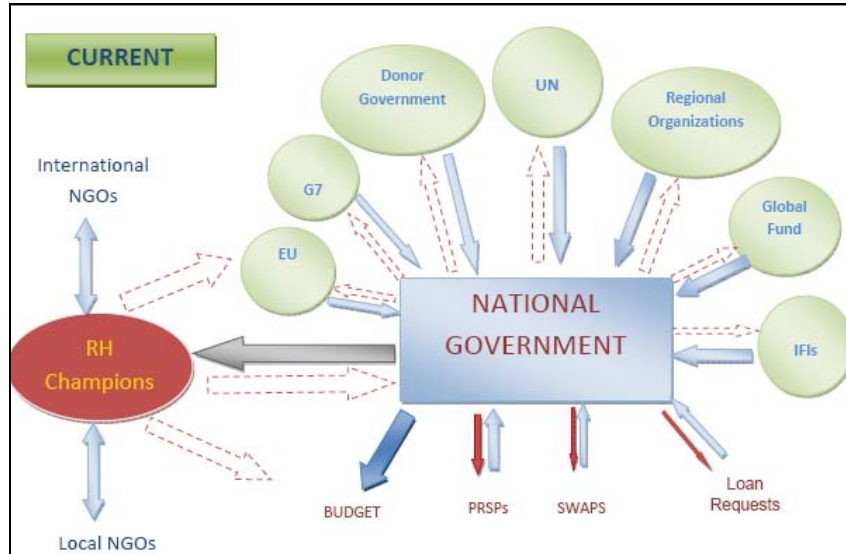
*Level 2* How new regulations are disseminated is important and includes such things as Ministry of Health notifications to all providers, mass media messages to the general public, and changes in training curriculum.

*Level 3* This level deals with the programmatic impact resulting from the changed regulations. Determining if some providers have been trained will be relatively easy to learn from service records of collaborating partners. Determining if all providers have been trained will be more challenging. One would also want to determine if an increase in contraceptive use or an improved method mix is as a result of the policy change. In programs with good and timely service statistics, this information could be collected. However, in most cases, details about this level of impact will be difficult to collect unless there is a serendipitous evaluation carried out by another group, like a DHS survey taking place several months after the policy change.

## Voices from the South

Since family planning will remain donor driven in much of sub-Saharan Africa for the foreseeable future, advancing family planning will not take place without donors increasing their priority for family planning and related areas. Furthermore, its rise in rank is unlikely to occur without developing countries voicing a need and desire for family planning support. Generating Southern calls for more donor resources is one of AFP's central aims and is graphically shown below.

## Current and Desired Country to Global Pathways



The “Current” graphic shows mostly thin family planning influence arrows emanating from national governments to donors and various global organizations. These arrows represent weak attempts to obtain funds for family planning from donors, either through funding mechanisms like SWAPs, or bilaterally. It also reflects little attempt to influence the global development agenda.

AFP’s objective is to change the strength and character of these influence pathways by sending a loud and coordinated message about and request for more resources for family planning, as shown in the “Desired” graphic.

The **South-to-South** initiative will not only provide a way to disseminate information among countries and address regional advocacy opportunities, but to help strengthen solidarity among Southern countries to increase “ownership” of family planning by allocating their own resources, crafting or enabling policies that increase access to products and services. It can also serve as a platform for strengthening the **Voices from the South** in demanding the revitalization of the family planning/reproductive health agenda. One of the unfortunate impediments to increasing the global and regional priority of family planning is the lack of requests for support in these areas by the very countries that need strong family planning programs the most, as shown by the observation of the Dutch diplomat to the UN. The collective **Voices from the South** articulated by a number of countries will have a better chance of being heard than a solitary one from a single country.

“We hear from European Governments. We hear from NGOs from the North. We *don’t* hear from the South, from the countries affected by our decisions.”

--Dutch diplomat to the UN

AFP will also help establish a sustainable African Women for Reproductive Health (AWRH) network. African women have always been a force to reckon with at the community level. In the past decade, they are becoming change agents at the national and global level as well. For example, the progress that has been achieved in fighting female circumcision has been the result of women-led activities. An African Women for Reproductive Health (AWRH) network will facilitate the political empowerment of women and advance family planning.

For more information about AFP, please contact Sabrina Karklins at [skarklin@jhsph.edu](mailto:skarklin@jhsph.edu).