

Zimbabwe National Family Planning Costed Implementation Plan (CIP) 2016 - 2020



Co-ordinating Framework

The GoZ through ZNFPC shall provide overall leadership in the implementation of this CIP in accordance with the Zimbabwe National Family Planning Council Act (Chapter 15:11) of 1985. Success in operationalising this CIP is dependent on multi-stakeholder participation in implementing specific interventions that fall within their respective mandates.

Background

The Government of Zimbabwe (GoZ), through the Ministry of Health and Child Care (MOHCC), is committed to widening access to family planning (FP) services. In July 2012 at the London FP2020 Summit, Zimbabwe pledged to increase access to quality modern contraceptives to couples, women and girls by 2020. In order to facilitate fulfilment of commitments made at this summit and operationalise the National FP Strategy, the National FP Costed Implementation Plan (CIP) 2016-2020 was developed. The CIP is aligned and in accordance to the Zimbabwe Agenda for Sustainable Socio-Economic Transformation (ZimASSET) and the Sustainable Development Goals (SDGs) 3; aiming at improving the health and wellbeing of all and SDG 5; focusing on achieving gender equality and empower all women and girls.

Resources Mobilisation Framework

The success of the CIP hinges on the ability to mobilise a considerable amount of resources in a short time and continuous basis throughout the implementation period.



Vision

Quality integrated family planning services for all by 2020.

Mission

To provide rights based and quality intergrated FP services through innovation and co-ordination.



Performace Monitoring and Accountability

Measuring performance against set targets in the CIP is central to generating essential information that will guide strategic investments and operational planning. The MOHCC will be responsible for this as well as bringing together additional resources to build a robust accountability framework for the programme.

Goals

65.6% to **68%**

Increase contraceptive prevalence rate (CPR) from 65.6% to 68% by 2020

22% to **12%**

Reduce teenage pregnancy rate from 22% to 12% by 2020.

Objectives



1. Establish a National FP Coordination, Monitoring & Evaluation Mechanism.



2. Increase the proportion of the national health budget that is allocated to the FP programme from 1.7 % to 3 %.



3. Reduce unmet need for FP services from 10 % to 6.5 %.

Appreciation goes to the following partners



Objectives



4 Increase availability of, access to and utilisation of SRH and HIV services by young people.



5 Increase knowledge of long acting reversible contraceptives (LARCs) among women and men from 46 % to 51 %.



6 Maintain stock-out levels of FP Commodities below 5 %.

Expected Results

Full implementation of the CIP will:

Prevent more than
3,000,000
unintended pregnancies by 2020

Avert more than
900,000
abortions by 2020

Avert more than
7,000
maternal deaths by 2020

Avert more than
33,000
child deaths by 2020.

The CIP: Five Strategic Areas of Implementation

The goals and objectives of the CIP will be achieved through effective and efficient implementation of interventions under five major strategic areas:



Enabling environment



Commodity security



Service delivery



Demand creation



Research, Monitoring and Evaluation.

Shift in the Method Mix

Increasing the use of LARCs is a priority under this plan. Modelling studies on the cost-benefit of FP have shown that if investments are made to increase uptake of FP and in particular LARCs; the health system will save up to US\$1.85 for each dollar spent on FP interventions. The implementation of strategic interventions to increase the use of LARCs will result in a progressive shift in the contraceptive methods mix.



With optimal use of FP, the health system will save up to

US\$1.85

for each dollar spent on family planning interventions

Strategic Priorities



Reducing teenage pregnancies



Providing FP, SRH & HIV services using an integrated approach.



Increasing utilisation of LARCs

Expected Results

Full financing and implementation of the CIP will result in:

65.6% to **68%**

An increase in the CPR among married women from 65.6% to 68%.

22% to **12%**

Reduction in the teenage pregnancy rate from 24% to 12%.

10% to **6.5%**

Reduction in unmet need for FP services from 10% to 6.5%.

Financial Resource Requirements in USD

	2016	2017	2018	2019	2020	Total Cost by Strategic Area	% of Total Cost by Strategic Area
Enabling Environment	814,801	881,923	245,941	255,439	251,353	2,449,457	1.4
Commodity Security	18,455,443	19,423,986	18,997,851	20,305,170	20,447,297	97,629,748	55
Service Delivery	6,115,748	6,979,232	8,754,349	9,035,970	5,984,885	36,870,185	20.8
Demand Creation	3,438,054	9,152,622	8,892,068	9,071,395	9,254,013	39,808,152	22.4
M&E	85,313	102,874	222,264	79,904	161,505	651,856	0.4
Total Cost Per Year	28,909,359	36,540,637	37,112,473	38,747,878	36,099,050	177,409,397	100
% Cost Per Year	16.3%	20.6%	20.92%	21.84%	20.35%		100