

Contraceptive Security

Ready Lessons

4



Advocating for Sustained Commitment



U.S. Agency for
International Development

Contraceptive Security



Ready Lessons

Maintain commitment through ongoing advocacy for contraceptive security.

What Can a Mission Do?

- ✓ Identify and support policy “champions” in the public and private sectors.
- ✓ Provide training and other skills building for advocacy and media reporting on contraceptive security.
- ✓ Disseminate contraceptive security information.
- ✓ Encourage participation by the media and advocacy groups in contraceptive security planning and implementation.

Key Concept - Keep the Pressure On

Early gains for contraceptive security can be easily lost. In the face of competing health priorities, scarce resources, and shifting political winds, pressure can be kept on governments, donors, and others to not only remain committed to contraceptive security, but also to act in tangible, purposeful ways. Civil society organizations, the media, and “champions” within the private and public sectors can:

- help keep contraceptive security on the agendas of governments, the private sector, and donors,
- act as important sources of information for decision making, and

- act as “watchdogs” to ensure real progress is made, especially for the poor and vulnerable.

Access to contraceptives and condoms should be part of the broader health equity agenda, where the state (versus government) has a vital role not subject to political change. **National level advocacy** is important where governments are assuming greater responsibility for allocating health sector resources under sector wide approaches (SWApS). **Advocacy at the subnational level** becomes especially important when health sector reforms are decentralizing financing and delivery of health services.

Media Attention on Contraceptive Security Leads to Policy Change in Mexico



Until 2001, “buy Mexico” regulations for the use of public funds made it difficult for the public sector to purchase contraceptives from foreign suppliers. This, along with high local production costs, meant that state governments in Mexico were paying nearly twice as much for contraceptives as would be the case if they bought on the international market. Also, NGOs like MEXFAM and FEMAP, while not subject to “buy Mexico” rules, were also paying high prices due to their low volumes and lack of access to international suppliers.

The situation was highlighted by a Mexican official at “Meeting the Reproductive Health Challenge: Securing Contraceptives and Condoms for HIV/AIDS Prevention,” held in Istanbul in May 2001. Delegations to the meeting included journalists to galvanize media attention on reproductive health commodity security in developing countries.

A Mexican journalist who attended the meeting sent news bulletins from Istanbul about Mexico’s plight and the concern it raised for the country’s ability to finance its contraceptive needs. The story was carried by print and broadcast media in Mexico, raising awareness of the problem and of the cost savings that were possible through international procurement. In July 2001, federal health authorities declared contraceptive supplies a “national security” item, in the same category as vaccines and essential drugs, thereby releasing them from “buy Mexico” rules. States now have the option of buying from international suppliers using UNFPA as a procurement

agent. They can also participate in coordinated bulk purchases (along with NGOs), paying less than if each purchased directly.

Giving Contraceptive Security a High Profile

There are many ways for Missions to ensure contraceptive security is not left out of broader health advocacy efforts and civil society participation in health sector dialogues. Appropriate roles include raising awareness among the media and advocacy groups about contraceptive security as a national priority (framing the issue), helping them to cover it with credible information (developing content), and helping other stakeholders like government and NGO spokespeople to communicate with the media and advocacy groups (media relations). Missions can:

- Encourage the participation of journalists and civil society organizations in workshops, conferences, and other national and international events that address contraceptive security.
- Identify “champions” in key institutions in the public and private sectors (e.g., Ministries of Health and Finance, parliamentary committees, employer associations), and support them with information on contraceptive security trends and needs.
- Support journalism programs to include skills building for coverage of reproductive health and contraceptive security issues – what to write, how to write it, information sources, and target audiences.
- Convene forums and create networks that link the media and NGOs with family planning and contraceptive supply chain managers, service deliverers, and manufacturers and distributors.
- Provide data and information on contraceptive security to the media, NGOs, and other health advocates on a regular basis through fact sheets, roundtables and seminars, press conferences, and one-on-one briefings with columnists and editors. Direct them to credible information sources such as the websites for UNFPA (www.unfpa.org), The Supply Initiative (www.rhsupplies.org), and Population Action International (www.populationaction.org).
- Include contraceptive security messages in national seminars and reports for Demographic and Health (DHS) and Reproductive Health (RHS) Surveys. With little additional effort and using a tool

now being developed by USAID and CDC, analyses can be added that draw attention to the supply and financing implications of trends in contraceptive use.

- Draw attention to future financing needs for contraceptives and condoms under different donor funding scenarios. These analyses have been persuasive at global and national levels in garnering attention from governments and donors, mobilizing new resources from both, and catalyzing efforts at better coordination, assessment, and planning for contraceptive security.
- Involve the media and civil society organizations in coordinating committees for contraceptive security (see Lesson 1) and ensure they are active participants from an early stage in the development of contraceptive security plans.

Strengthening Local Commitment to Contraceptive Security in the Philippines



Efforts to increase contraceptive security in the Philippines face a convergence of challenges: declining support for family planning commodities from international donors, organized opposition to modern family planning, a predominately public sector program where users view contraceptives as an entitlement, a newly decentralized political environment, and decentralization of health service delivery.

There is, though, opportunity for local governments to assume greater autonomy for contraceptive financing and procurement. This fiscal and budgetary autonomy was vested in them by the Local Government Code of 1992 that sought to enable local governments to effectively respond to the basic needs and services of their constituents.

Local commitment to family planning already exists at some levels. To support and expand this commitment, a coordinated advocacy approach was implemented in the Province of Pangasinan. Sustained dialogues were first held with various civil society groups, key local government officials, and service providers. Evidence from community studies was used to identify benefits of family planning and to craft a unified advocacy plan for local chief executives to allocate budget resources for contraceptive procurement. Advocates for Better

Life in Pangasinan (ABLE) was launched in April 2003 as a multisectoral network that serves to advocate for access to and availability of family planning products and services as a basic need that local chief executives have to serve.

ABLE has expanded to ten municipalities, with affiliates trained in advocacy plan development. A series of budget analysis and planning workshops for municipal health and population officers, supplemented by ABLE-led grassroots advocacy events started in July 2003.

This two-track advocacy approach, i.e., internal advocates within local governments with gatekeeping roles in policy development complemented by civil society advocates among community-based groups, has helped expand and strengthen commitment to contraceptive supply. The result is a groundbreaking approach to financing not only of contraceptives, but of health services in general. Pangasinan Province now has nine municipalities joining the Provincial Government in allocating funds to procure contraceptives in 2004, from zero financing of contraceptives in the past. In addition, this is the first formalized joint response between the Provincial and municipal governments to maximize resources aimed at improving health services.

Further Reading

Bonk, K., Griggs, H., and Tynes, E. 1999. *The Jossey-Bass Guide to Strategic Communications for Nonprofits*. San Francisco, Ca.: Jossey-Bass Inc., Publishers. [A step-by-step guide to working with the media to, among other things, change public policy.]

Boyd, B., et al. 1999. *Networking for Policy Change: An Advocacy Training Manual*. Washington, D.C.: Policy Project/Futures Group International. (<http://www.policyproject.com/pubs/AdvocacyManual.cfm>). [A tool designed to be used in sections to assist NGOs and networks with the key building blocks for advocacy: network formation, identification of political opportunities, and organization of campaigns.]

Centre for Population and Development Activities (CEDPA). 1999. *Advocacy: Building Skills for NGO Leaders*. CEDPA Training Manual Series Vol IX. Washington, D.C.: CEDPA. (http://www.cedpa.org/publications/pdf/advocacy_english.pdf). [A three-day curriculum in skills building for NGO leaders to advocate for change in the reproductive health arena.]

Hegazi, S. and Khalifa, M. 2000. *Increasing the Coverage of Reproductive Health Issues in the Egyptian Press*. New York, N.Y.: Frontiers in Reproductive Health/Population Council, Washington, D.C.: Policy Project/Futures Group International. (http://www.popcouncil.org/pdfs/frontiers/FR_FinalReports/egyptmedia.pdf). [Reports on a project to enhance journalists' knowledge of population and reproductive health issues, increase and improve coverage of these issues in the Arabic press, and strengthen a network of journalists committed to covering reproductive health issues.]

Policy Project. 2003. *Human Rights and Reproductive Health Matrix*. Washington, D.C.: Policy Project/Futures Group International. (<http://www.policyproject.com/matrix/>). [Lists international human rights documents relevant to reproductive and maternal health, family planning, and HIV/AIDS; provides human rights obligation information for countries where the Policy Project operates.]

Population Communication Services (PCS). 1999. *"A" Frame for Advocacy*. Baltimore, Md.: PCS/Center for Communication Programs, Johns Hopkins School of Public Health. (<http://www.infoforhealth.org/pr/advocacy/index.shtml>). [A six-step guide for public policy advocacy covering analysis, strategy, mobilization, action, evaluation, and continuity.]

Salzman, J. 1998. *Making the News. A Guide for Nonprofits and Activists*. Boulder, Co.: Westview Press. [A how-to guide on how to get media attention, including how to stage a media event, generate news coverage, handle media attention, and act as a news source.]

Missions can also subscribe to *The Communicator*, a monthly USAID newsletter about communications and public relations work in population, health, and nutrition. To subscribe by email, send a blank message to Communicator@phnip.com with the word “subscribe” in the subject line.

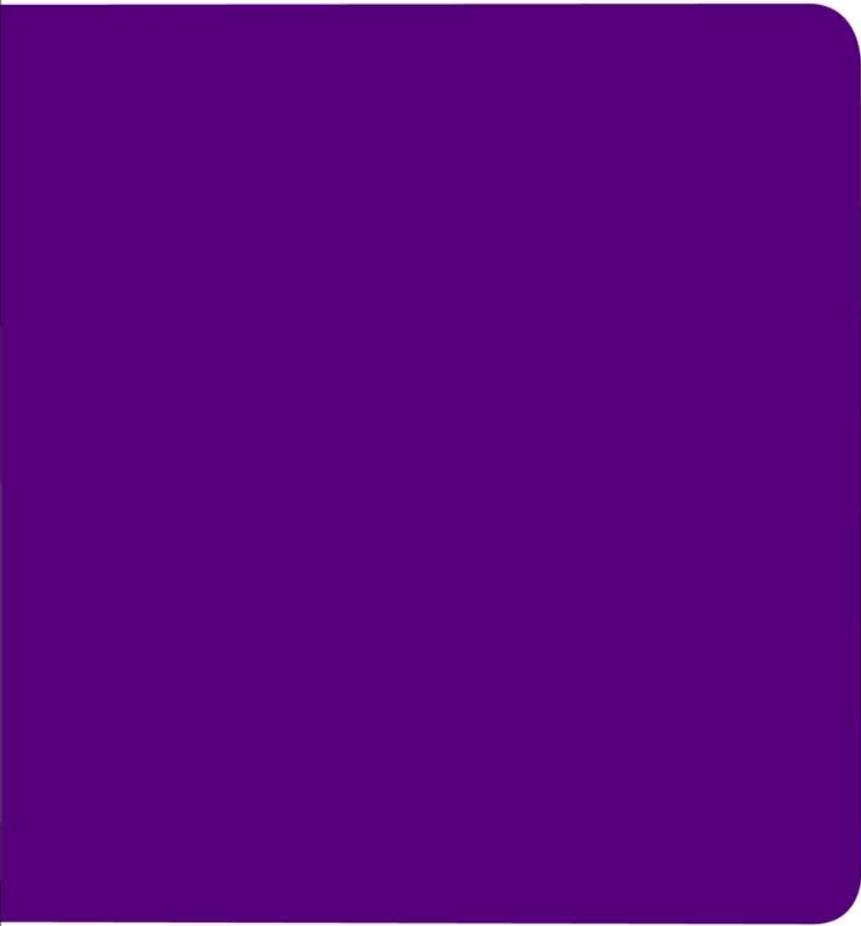
The USAID Contraceptive Security Team works to advance and support planning and implementation for contraceptive security in countries by:

- developing and supporting the use of appropriate strategies and tools for contraceptive security,
- improving decision making for contraceptive security through increased availability and analysis of data, and
- providing leadership at the global level.

The team provides technical assistance to Missions and partners in research and analysis, strategic planning and programming, monitoring and evaluation, and design and implementation of field activities. For further information, please contact:

Contraceptive Security Team
c/o Mark Rilling or Alan Bornbusch
Commodities Security and Logistics Division
Office of Population and Reproductive Health
Bureau for Global Health
USAID
Washington, D.C.
mrilling@usaid.gov or abornbusch@usaid.gov





Designed and produced by: INFO Project at the Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs