Introduction

Family Planning (FP) recently re-entered the Government of Mozambique’s (GOM) radar as a key national health priority. According to the Family Planning National Strategy (2010), the GOM intends to increase the contraceptive prevalence rate from 14% in 2003 to 34% in 2015, annual coverage of new FP acceptors from 12.5% in 2008 to 20% in 2015, and met need for FP services from 47% in 2003 to 70% in 2015. To help the GOM achieve these targets, MCHIP began supporting the Ministry of Health (MOH) to integrate FP services into the Model Maternity Initiative, working closely with partners to increase the availability and quality of FP services, as well as promoting demand at the community level. The support of MCHIP to the MOH for FP is under MCHIP Objective 5: Assist in the development, implementation, and management of FP/RH services for selected health facilities.

MCHIP Intermediate Results and Program Activities

IR5.1 Strengthen national level capacity in FP

One important issue related to FP access is the guarantee of contraceptive methods availability at service delivery points while also guaranteeing women’s and men’s right to obtain and use the contraceptive of their choice. In order to address this issue, the MOH’s Central Warehouse for Medicines and Medical Supplies and the reproductive health (RH)/FP National Department created the Reproductive Health Commodity Security Task Force in 2005 to support the planning, forecast, acquisition and distribution of contraceptives among other RH commodities. MCHIP has been providing technical support to the Task Force on: 1) quarterly revision of provincial contraceptives requests; 2) quarterly provincial needs forecast and distribution plans (adjusting the requests made by provinces); 3) and national and provincial needs forecasting and distribution plans for syphilis tests. MCHIP has also provided support to:

- Develop information, education and communication (IEC) materials (posters, pamphlets, fact sheets), including a postpartum intrauterine contraceptive device (PPIUCD) video for training;
- Revise and update the National Family Planning Norms and Guidelines;
- Develop National Supervision Guidelines for FP services;
- Support the Head of FP Program on various issues related to the FP Program, including the development of FP presentations for different audiences, supporting the calculation of the target population (by province/district), and determining contraceptive needs and distribution plans by province for the National Maternal and Child Health (MCH) Weeks.

In 2013, MCHIP was elected Co-Chair of the FP Technical Working Group. In this role, MCHIP has been providing technical guidance to the group on the development of other important documents and guidelines, such as the Terms of Reference for a consultancy for the development of the FP Communication and Advocacy Strategy, National Guidelines for Community Distribution of Contraceptives, and the FP Acceleration Plan (completed and approved by the MOH in June 2014).
**IR5.2 Improved FP service capacity in Model Maternity Initiative (MMI) and CECAP facilities**

**Training** - MCHIP has been working closely with the MOH to promote the use of postpartum FP throughout the continuum of care, integrating these services into MNH and SRH services. In this context, MCHIP has supported the MOH to train 1,559 health providers through the Model Maternity Initiative in all FP methods except implants and IUD insertion. In addition, MCHIP has supported the MOH to train 150 health professionals from all provinces in postpartum and post-abortion FP, with a focus on PPIUCD.

Furthermore, the project provided financial and technical support to train 936 health professionals in FP and implants and interval IUD insertion for integrated services (Reproductive Health Outpatients Services).

**Supportive Supervision and Technical Assistance (TA) for Family Planning** - MCHIP has been providing support for integrated supportive supervision and technical assistance to health facilities involved in MOH’s the Model Maternity Initiative (MMI) and National Cervical and Breast Cancer Prevention Program to strengthen the provision of FP services. As of December 2014, MCHIP has supported 845 TA/supportive supervision visits for FP in a total of 143 facilities. During these TA/supportive supervision visits, MCHIP has identified a general need for balanced FP counseling at health facilities. To address this need, MCHIP has printed and distributed MOH FP counseling materials and IEC materials to MCH nurses and community health workers. In addition, MCHIP supported the development and printing of quality standards for FP services.

**IR5.3 Increased demand for FP services in MMI and CECAP facility areas through community mobilization**

In 2013, MCHIP played a leading role in supporting the MOH and the First Lady’s Cabinet to organize and implement the National Advocacy Meeting, which included the objective of discussing the importance of FP for the health of women and children and to reduce maternal and infant mortality, focusing on the establishment of integrated interventions to increase the demand and utilization of services and modern methods of FP. Nearly 400 participants attended the advocacy meeting, including spouses of Provincial Governors, community members, national and international NGOs, civil society organizations, representatives from the MOH and Provincial Health Directorates, UN agencies, bilateral donor agencies and implementing partners. The support provided by MCHIP included participating in steering committee meetings, preparing presentations and talking points, developing and reproducing IEC materials, as well as financial support for specific meeting costs. During this conference, MCHIP also set up and staffed an information/demonstration booth on FP and interventions implemented within the MMI. Because of the success of this activity, the First Lady’s Cabinet and the MOH requested MCHIP to replicate the information/demonstration displays during provincial advocacy meetings conducted with community members in Tete and Gaza provinces.

Also in preparation for the National Advocacy Meeting, MCHIP provided support to conduct a training of journalists from all provinces in the area of sexual and reproductive health (SRH), including maternal and newborn health, cervical cancer prevention (CECAP), and FP. This training aimed at equipping these journalists with basic technical knowledge and the use of common terminology for key aspects of reproductive health to ensure that more reliable SRH information will be disseminated to the public.

Since the beginning of the project, MCHIP has also supported the airing of over 3,000 radio spots on community radio programs in Portuguese and local languages. These radio spots include key MNCH messages, family planning messages, and information on diarrhea and cholera. Group education sessions at the community level have also been supported by MCHIP with more than 870,000 community members to discuss topics including: FP, antenatal care, post-natal care, CECAP, vaccination, humanized birth, nutrition, malaria prevention, the importance of having a companion during labor and delivery, signs of complications during labor and delivery, supplemental with folic acid during pregnancy, newborn care, signs of danger in newborns, PMTCT, sanitation and hygiene, correct use of latrines, treatment of water and hand washing, and prevention of diarrhea and cholera.
**Key Results**

Figure 1: Trends of Select FP Indicators, January 2012 to December 2014

![Graph showing trends of selected FP indicators from 2012 to 2014]

<table>
<thead>
<tr>
<th>Year</th>
<th>Family Planning First Visits</th>
<th>Total of Family Planning (First and Following Visits)</th>
<th>Couple Year Protection</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>154,686</td>
<td>394,699</td>
<td>104,217</td>
</tr>
<tr>
<td>2013</td>
<td>308,398</td>
<td>739,628</td>
<td>237,569</td>
</tr>
<tr>
<td>2014</td>
<td>458,324</td>
<td>958,440</td>
<td>317,650</td>
</tr>
</tbody>
</table>

- Figure 2: Trends of Selected FP Indicators, from 2012 to 2014

**Upcoming Plans**

MCHIP will continue to support the MOH to:

- Strengthen the MOH and DPS staff capacity to conduct supportive supervision and TA visits targeting balanced FP counseling and the insertion/removal of implants at selected CECAP/FP facilities;
- Organize and conduct a TOT in contraceptive logistics, and a 1-day provincial training of nurses and pharmacy personnel on forecasting and requesting contraceptives;
- Implement radio programs and support group education sessions to promote demand for FP and MNH services.