

Investing in Family Planning to Achieve Sustainable Development Goals in Nigeria

Key Actions for Federal and State Decision-Makers

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Overview

Nigeria's population is growing rapidly. Home to 192 million people, it is the most populous country in Africa and the seventh most populous in the world. If the current population growth rate of 3.2 percent is sustained, Nigeria will double its population size in about 21 years; by 2050, it will become the third most populous country in the world (United Nations, 2017). This momentous level of growth would pose many challenges to the country, increasing pressure on existing infrastructure and environmental resources while limiting opportunities for economic development. Unchecked growth would increase the youth population to unsustainable levels; already, more than half of the population is under the age of 19 (United Nations, 2017)—a demographic situation that puts the country at risk of wide-scale youth unemployment, civil instability, and slow development progress (Hussain et al., 2016).

Given that unintended pregnancies are an important driver of population growth, one way to mitigate these adverse effects and promote development is to invest in family planning. The links between family planning and development are increasingly gaining recognition, particularly in light of the

192 million people



Population growth rate **3.2%**

Population will **double** in 21 years



Sustainable Development Goals (SDGs)—an ambitious set of 17 goals and 169 associated targets to be met by 2030.

The SDGs establish global priorities related to poverty eradication, health, education, gender equality, and food security, and set out to tackle a holistic set of economic, social, and environmental objectives. Goal 3 on health and Goal 5 on gender include specific

targets on reproductive health and directly incorporate family planning as a key indicator (see Figure 1).

Investing in family planning can foster achievement of virtually all the SDGs (Starbird et al., 2016; Health Policy Plus, 2017). Increasing the use of voluntary family planning can help reduce population growth rates, which in turn can alleviate pressure on environmental, economic, and social resources and facilitate development (Cates, 2010; Petruney et al., 2014).

Nigeria's family planning situation has largely stagnated over the past decade, with limited improvements in key indicators such as modern contraceptive prevalence rate (mCPR). Furthermore, unmet need for family planning is increasing rather than decreasing (see Table 1). Although considerable progress has been made in improving the family planning policy environment in the past few years, challenges remain. In 2016, over one million pregnancies were unintended, indicating a high unmet need for family planning methods to help women achieve their intentions to limit or space births (FP2020, 2016). There are many reasons for this, including cultural and religious beliefs, poor knowledge of family planning, and limited access to a range of family planning methods.

Given the influence of family planning on the SDGs, this policy brief highlights key actions that decision-makers and other stakeholders at the federal and state level in Nigeria can take to tackle challenges that pertain to family planning awareness, demand, and use.

Key Action 1: Strengthen national leadership to catalyze subnational domestication of the SDGs

Achieving the family planning targets for SDGs 3 and 5 in Nigeria will require strong national leadership to foster ownership among decision-makers at national and

Figure 1. Sustainable Development Goals 3 and 5



subnational levels. Advocacy to raise the profile of family planning among key state-level leaders should leverage the SDG framework and align with existing national health policies such as the national Family Planning Blueprint, the Free Family Planning Commodity Policy, and the Task-Shifting and Task-Sharing Policy for Essential Health Care Services in Nigeria. Messaging should emphasize the benefits of family planning to sectors beyond health, including the economic sector, and the ways in which family planning can help a range of stakeholders achieve their own development objectives. Key

Table 1. Nigeria Family Planning Statistics

	2003	2008	2013	2017
Total fertility rate	5.7	5.7	5.5	—
Contraceptive prevalence rate (CPR)	13.3%	15.4%	16%	21%
Modern CPR (mCPR)	8.9%	10.5%	11.1%	14.7%
Unmet need	13.6%	15.7%	12.7%	19%

Sources: Nigeria Demographic and Health Survey 2003, 2008, 2013 and PMA2017/Nigeria, Round 2.

points should include ensuring sufficient funding for effective implementation of national policies, and strategic planning and prioritization. Policy- and program-level decision-makers at state and local government authority levels will need to determine the biggest challenges and priorities in their respective areas, identify approaches that would be feasible and appropriate, gauge realistic levels of improvement, and plan and budget for human and financial resources to achieve their aims.

Key Action 2: Decentralize family planning policies to better respond to state-specific needs

Over the past decade, Nigeria has considerably strengthened its family planning policy environment. Many of Nigeria's family planning policies are progressive and, if fully implemented, have the potential to drive progress on key family planning indicators (see Table 2). In 2011, the government committed to providing free family planning commodities at public facilities. In 2014, the national costed implementation plan—Family Planning Blueprint—was launched. And in 2017, at the Global Summit on Family Planning, Nigeria committed to increase contraceptive prevalence from 16 to 27 percent by 2020. Also of note is a task-shifting policy, which enables community health extension workers to provide long-acting and reversible contraceptives such as intrauterine devices and implants to improve family planning access and choice at the community level.

This strong policy environment, coupled with the inclusion of family planning in the SDGs, provides a window of opportunity to spur family planning investments. However, given the federal system in Nigeria, effective implementation of national policies at the state level will require localized approaches.

Ensuring that states allocate and release funds for family planning is a key priority. Few states have dedicated budgets for family planning, making it difficult to track funding commitments and plan for specific activities and commodities. Further, what is allocated is typically inadequate for meeting local needs. Funds for last mile distribution, for example—ensuring that family planning commodities get from a central warehouse to local health facilities—are often limited.

Systematic planning mechanisms, such as state-level costed implementation plans (CIPs), are valuable in helping identify priority needs, determine costs, and mobilize resources. The national CIP offers detailed information and strategies on family planning service delivery needs, mechanisms, and related financing requirements. Adapting this information to the state level can offer a better roadmap for achieving subnational family planning goals effectively and efficiently. While only five states have fully developed and launched their own CIPs, a sizeable proportion of states are in the process of doing so. States not yet involved in the CIP process could draw from existing

Table 2. Family Planning in Select Nigerian Policies

Policy	Year	Family Planning Snapshot
Family Planning Blueprint	2014	Aims to increase CPR to 36% by 2018 with the federal government committing US\$3 million annually from 2014–2018.*
Task-Shifting and Task-Sharing Policy for Essential Health Care Services in Nigeria	2014	Enables community health extension workers to provide long-acting and reversible contraceptives at the community level, expanding access and method choices.
Free Family Planning Commodity Policy	2011	Federal Government of Nigeria commits to provide family planning commodities free-of-charge to clients in public facilities.
Policy on Population for Sustainable Development	2004 (new policy forthcoming)	Aims to increase mCPR by two percentage points per year, decrease fertility rate by 0.6 every five years, and reduce annual population growth rate to 2% or lower by 2015.

* As of the 2017 Global Summit on Family Planning, the Nigerian government committed to 27% CPR by 2020 and increased federal government commitment to \$US4 million annually from 2017–2020.

state-level examples to prioritize similar adaptations of the national CIP.

To further aid in implementation of national family planning policies, advocates and other stakeholders should ensure that subnational decision-makers are able to access the policies, communicate their key aims and objectives, and understand how they apply to their respective states and communities, thus ensuring appropriate localized implementation. For example, the National Population Commission is leading the development of a new population policy that will replace the 2004 Policy on Population for Sustainable Development (see Table 2). The commission should ensure that the new policy, and any accompanying strategic implementation guidance, reaches state-level decision-makers and other key stakeholders in a format that is easy to understand, locally relevant, and applicable. This could be done by hosting knowledge-sharing events or creating and sharing compelling communications products in a variety of formats (e.g., videos, posters, booklets,

etc.). Key messages could include core policy aims, significant changes from previous versions, implications for service delivery, and lessons learned.

Key Action 3: Localize innovative domestic financing solutions for family planning

Despite the relatively positive policy environment surrounding family planning and reproductive health in Nigeria, funding is insufficient. Achieving the country's family planning goals per the Family Planning Blueprint was calculated to cost US\$603 million total from 2013 to 2018. That amount covers contraceptive commodity costs; service delivery; supervision, including monitoring and evaluation; demand creation; and supply chain management. At the 2017 Global Summit on Family Planning, the Nigerian government renewed and increased their commitment to providing funds for contraceptive commodities to US\$4 million annually. While this is an important commitment, the amount, even if fully released, falls short of the full cost needed

for commodities (in 2016 alone, the cost of all contraceptive commodities needed was estimated to be US\$15.4 million). Furthermore, donor funds typically supplement remaining commodity and programming costs. Since many donors are phasing out their family planning assistance in Nigeria, this funding model will soon be unsustainable. To sufficiently meet the family planning demand in Nigeria, creative and locally sustainable financing solutions will be essential in propelling the country closer to achieving SDGs 3 and 5.

Based on a federal government pledge to apply savings from 2005 IMF and World Bank debt relief gains to pro-poor projects, Nigeria is employing a conditional grant scheme to allocate money to the federal government, states, and local government areas to tackle development goals, including health. The government could explore additional options such as corporate social responsibility initiatives or innovative taxation schemes, such as applying revenue from alcohol and tobacco sales to the National Health Insurance Scheme—an approach that has been explored in the past, yet never implemented.

The government should continue to build on current family planning social marketing efforts, such as through provision of subsidized, branded contraceptives through retail outlets. They can also further expand public-private partnerships to reach users of modern contraceptives—60 percent of these users currently obtain their methods from the private sector (NPC and ICF International, 2014). New national guidelines from the Ministry of Health encourage private sector facilities to provide free public sector family planning commodities to increase access for typically hard-to-reach populations. Increased involvement of the private sector in scaling up family planning access can be further extended by

encouraging the expansion of the National Health Insurance Scheme to include coverage for family planning in private sector facilities, thus ensuring that its mandate to cover family planning for all Nigerians is fully executed.

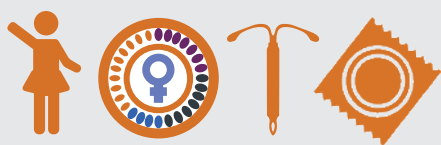
Continuing to embrace a total market approach, which considers the roles of all sectors in encouraging and cultivating greater sustainability of services and access over time, would help increase the role of the private sector to grow and meet the demand for family planning. Using a total market approach may also pave the way for pursuing other innovative financing schemes, such as blended financing, in which public resources are used to mobilize private sector funds. This concept adheres to Nigeria's renewed FP2020 commitment at the 2017 London Family Planning Summit to enhance collaboration with the private sector to better meet the challenges associated with commodity transport and tracking.

Key Action 4: Embrace the links between gender and family planning

The SDG framework clearly demonstrates the strong connections between gender and family planning. An important aspect of SDG 5—achieving gender equality and empowering all women and girls—is ensuring that women and girls have the agency to make their own decisions about when to have children and how many children to have. Therefore, promoting full access to and informed decision-making for family planning is essential—but success will require addressing various entrenched gender roles and expectations.

In Nigeria, as in many countries, evidence suggests that the more empowered a woman is, the more likely she is to adopt a modern family planning method (Corroon et al., 2014). Access to family planning empowers women and girls to make important life choices; it also contributes to gender equity by helping girls prevent

Links between Gender and Family Planning



Female empowerment leads to **increased use** of modern family planning methods



Access to family planning helps **prevent** early pregnancies, thereby **extending** years of education and earning potential



Male engagement leads to **acceptance** and **uptake** among women

early pregnancies and thereby extend their education and earning potential (Muralidharan et al., 2015). Further, when men are engaged in and supportive of family planning, acceptance and uptake among women increases (Ezeanolue et al., 2015). In Nigeria, promoting women's empowerment and male engagement remain major challenges.

Given the clear connections between gender equity and family planning, deeply rooted cultural norms and religious beliefs about the disparate roles of men and women can hinder progress. Despite shared values and goals, a disconnect often exists between advocates of family planning and advocates of gender equity at policy and programmatic levels. These communities of practice may have a limited understanding of how their issues interface and systematic coordination is typically limited, whether across government ministries or civil society organizations. For example, despite the existence of gender units across the ministries, as established under the 2006 National Gender Policy, roles

and responsibilities remain unclear and limited funding has impeded any significant collaboration on family planning. A forthcoming update of the National Gender Policy provides a renewed opportunity to make timely progress in this arena. Given the crosscutting nature of gender, advocates for family planning should leverage momentum from the policy launch and subsequent implementation discussions to highlight the links between gender and family planning and improve collaboration with proponents of gender equity.

Overall, efforts to reduce gender inequities will be paramount to helping Nigeria achieve its family planning goals and raise its global status on core gender equity indicators.

Conclusion

The largely positive family planning policy environment in Nigeria provides a solid backdrop for achieving family planning-related targets under the SDGs. Success in achieving these targets will require intentional and focused efforts to attain buy-in and understanding of how Nigeria

can achieve the goals nationally, and further adapt the goals to the subnational level. When existing national policies are well disseminated and understood at the state and local level, it is more likely that words will be put into action and sustainable financing solutions will be found to support policy implementation. Recognizing the interconnectedness of family planning and gender and finding mutually reinforcing ways to achieve shared goals is essential. By building on the foundation of the current policy environment, Nigeria can make a strong push to improve family planning use and make substantial progress toward achieving the SDGs.

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Health Policy Plus (HP+) is a five-year cooperative agreement funded by the U.S. Agency for International Development under Agreement No. AID-OAA-A-15-00051, beginning August 28, 2015. HP+ is implemented by Palladium, in collaboration with Avenir Health, Futures Group Global Outreach, Plan International USA, Population Reference Bureau, RTI International, ThinkWell, and the White Ribbon Alliance for Safe Motherhood.

This publication was produced for review by the U.S. Agency for International Development. It was prepared by HP+. The information provided in this document is not official U.S. Government information and does not necessarily reflect the views or positions of the U.S. Agency for International Development or the U.S. Government.