Assess challenges and opportunities for contraceptive security by making a joint diagnosis of the problems and strengths that exist in the system.

What Can a Mission Do?

✓ Generate support for a contraceptive security assessment.

✓ Help stakeholders to plan and implement it using SPARHCS.

✓ Disseminate the results and promote collaborative use of them for planning.

✓ Support a regular cycle of assessments for monitoring and evaluation.

Key Concept - Know Your Situation

In 2001, USAID and UNFPA launched an initiative to engage country partners, technical agencies, and other donors to create an analytical framework and diagnostic guide to assess and plan for reproductive health commodity security at the country level. Through a series of conferences and smaller working groups, SPARHCS (pronounced “sparks”) – the Strategic Pathway to Reproductive Health Commodity Security – was developed. SPARHCS is based on a conceptual framework that identifies critical areas of attention for reproductive health commodity security.1 As applied to contraceptives and condoms, the framework addresses:

- **contextual** issues which challenge or provide opportunities for ensuring full supply of contraceptives and condoms,

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1SPARHCS was developed for application to contraceptives, condoms, and other essential reproductive health commodities. Its use so far has been primarily for contraceptives and condoms.
• coordination of key stakeholders,
• capacity of human resources and health systems,
• commitment of governments, donors, and other key stakeholders,
• client access to and choice of contraceptives,
• capital or finance required for purchasing contraceptives and condoms, and
• contraceptive and condom availability.

SPARHCS supports countries in developing a strategic commitment and funded action plan for ensuring an adequate supply and range of quality contraceptives and other reproductive health commodities. It helps countries to:

• assess the status of their contraceptive security, and
• develop, implement, and monitor a commodity security strategy for selected products.

The diagnostic guide helps stakeholders to assess the present situation, understand expectations for the future, and take into account significant trends from the past. The timeframes used for gathering and analyzing information will vary. For example, commodity and financing requirements are typically projected three years out. Forecasts for longer periods will be less reliable, but longer timeframes may be good for contemplating systemic changes in health systems.

SPARHCS provides a “first-cut” diagnosis of a country’s contraceptive security in a way that catalyzes multisectoral thinking about how to improve it. It does not offer the tools for more in-depth analyses of specific components such as a logistics assessment or market segmentation analysis. Those tools, though, are available elsewhere and SPARHCS can help identify where more detailed analyses are needed.

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**Developing a Multisectoral Strategy for Contraceptives and Condoms in Nigeria**

In 2002, Nigeria’s Federal Ministry of Health (FMOH) convened a national meeting of reproductive health stakeholders to discuss the country’s logistics system and proposed work to strengthen it. A presentation of the SPARHCS framework prompted a broader discussion of related contraceptive security issues. As a result, key Nigerian decision makers agreed to conduct the first SPARHCS field test. The assessment would serve as the basis for a comprehensive contraceptive security strategy designed to address not only logistics but broader issues as well.
The assessment was a collaboration involving a national SPARHCS Committee, a SPARHCS Team, and international consultants. The Committee comprised 19 key stakeholders and decision makers working in reproductive health and included representatives of the FMOH, NGOs, donors, and other development partners. The SPARHCS Team consisted of 25 in-country experts representing a range of disciplines.

The assessment reviewed relevant documents and studies, and interviewed key informants, the FMOH, NGOs, donors, commercial and other private providers, and international development organizations. Key issues were identified and further assessments were prioritized to address knowledge gaps in specific commodity security related areas. For example, the team believed that an operational policy analysis would be useful to identify those policies that created the largest barriers to contraceptive security. Analyses of method mix, unmet need, and the funding requirements needed to meet Nigeria’s population goals were also recommended. The assessment ended with a planning day to present its results to the SPARHCS Committee for approval. A ten-member core working group was appointed to coordinate and monitor next steps.

In October 2003, the core group led a four-day Contraceptive Security Strategic Planning Workshop, convened by the FMOH. A broad range of stakeholders reviewed a draft contraceptive security strategy prepared by the core group and made final changes. The FMOH formally approved the strategy and the parliamentarian representing the National Legislative Committee on Population promised legislative support.

Members of the core group have become strong champions and advocates for contraceptive security as a result of this process and their ownership of it. Next steps will include disseminating the strategy country wide, presenting it to the National Legislative Committee on Population, and holding a donor’s conference to identify additional funding for the strategy.

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2See Lesson 4 for more on the need for contraceptive security champions.
Planning a SPARHCS Assessment

Although there is no single way to “do” SPARHCS, there are steps that a country can take to prepare for an assessment and adapt SPARHCS to their needs. A national committee or other multistakeholder group (see Lesson 1) can identify the need for the assessment, and be able to plan, convene, and help facilitate it. The group can:

• Develop a scope of work that details the assessment’s purpose. The SPARHCS framework and guide can be used to:
  ❖ conduct a baseline assessment exercise or diagnosis,
  ❖ guide a longer process of inquiry and strategic planning,
  ❖ launch or revitalize interest in efforts to increase and maintain contraceptive availability,
  ❖ build consensus around new priorities, or
  ❖ monitor, evaluate, and adjust ongoing activities.

• Identify the technical areas and sectors that will be addressed. While none of the components in SPARHCS should be excluded, the group may decide that some require less detailed consideration and others should be expanded.

• Outline how the assessment will be conducted. It may include desk reviews, key informant interviews, small group work, field visits to supply chain points and service delivery sites, and stakeholder workshops to present and discuss the findings.

• Define the logistical and technical support needed. The assessment could, to the extent possible, be conducted by local counterparts, along with staff from cooperating agency country offices, Mission and UNFPA staff, and local and outside consultants.

The time and level of effort required for a SPARHCS assessment will vary according to its purpose and scope. It may require as little as a few days, or extend over one to two weeks. Some data gathering and analysis – like contraceptive forecasts and demographic projections – may be done in advance for later review and discussion by stakeholders.

SPARHCS has been applied in countries that are more or less experienced in making progress towards contraceptive security. It has been used in countries at different stages of health sector reform, for example in integrating or decentralizing health systems. Jordan, Nigeria, Madagascar, Indonesia, Bangladesh, and Peru are some examples.
Using SPARHCS to Support Contraceptive Security in a Decentralizing Indonesia

Among the major challenges facing Indonesia’s family planning program is decentralization of BKKBN, the government’s coordinating agency for family planning activities. Local governments, numbering more than 420 districts and municipalities, will now have responsibility to manage and implement a family planning program that has been highly centralized for more than 30 years.

To build the capacity needed to address contraceptive security issues in this new environment, BKKBN and partners—comprising a central Contraceptive Security Team (CST)—have adapted and streamlined the SPARHCS framework and diagnostic guide for use by district stakeholders. The CST has developed a process where:

- District stakeholders are first introduced to the concept of contraceptive security, awareness is raised of the need to address contraceptive security at the district level, and the adapted diagnostic guide is reviewed.

- Two-person teams, composed of people from the public and private sectors, use the questions in the guide to collect data over two weeks. Each team focuses on one of five components: service delivery, policy, financing, logistics, supply.

- After data collection, a “District Contraceptive Security Assessment Workshop” is held to review the findings, compare the current situation in each component with a desired status, and create two priority lists according to how serious a component is in preventing a district from achieving contraceptive security and how able a district is to address a component on its own.

As the process is piloted in Central and East Java, it is apparent that the SPARHCS framework offers an excellent starting point for raising district-level awareness of contraceptive security and its components. The diagnostic guide can be adapted
and made feasible at local levels where there are few resources, enabling stakeholders to gain a realistic picture of their contraceptive security situation, challenges, and priorities. SPARHCS can thus support shifting responsibility and ownership for contraceptive security in a decentralized environment early in the process. The central level (BKKBN) can play the role of technical adviser for using SPARHCS and other contraceptive security tools. Districts can also support each other through district-to-district technical assistance and capacity building.
Further Reading


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:

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