FAMILY PLANNING COSTED IMPLEMENTATION PLAN RESOURCE KIT: *WHAT WE HEARD*

MOMENTUM Country and Global Leadership

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ACKNOWLEDGMENTS

ABBREVIATIONS

CIP costed implementation plan

CPR contraceptive prevalence rate

CSO civil society organization

DHIS district health information system

FP family planning

FP2030 Family Planning 2030

HCD human-centered design

INGO international nongovernmental organization

LMIS logistic management information system

mCPR modern contraceptive prevalence rate

UNFPA United Nations Population Fund

USAID United States Agency for International Development

INTRODUCTION

Family Planning 2030 (FP2030) is the global partnership for family planning, building on the strengths and successes of FP2020. The new partnership is keeping the best of FP2020—the convening power of the partnership, the collaborative platform, the dedication to high-quality data and evidence, the unswerving commitment to the rights and needs of girls and women—while embracing changes that emphasize country leadership, inclusion, equity, transparency, and mutual accountability.[1]

FP2030 and partners are revising the Costed Implementation Plan (CIP) Resource Kit[2], created in 2015. Over the years, through continual learning processes, new resources were added. This report aims to strengthen the overall CIP model and inform revisions to the CIP Resource Kit. It is based on a human-centered design (HCD) process used to gather in-country experience designing, implementing, and monitoring past CIPs.

The CIP process is evolving, according to many who have followed it. As one person involved in a CIP process described, "During the first half of the FP2020 initiative, most CIPs did not use modeling data to set realistic goals. Few reflected current levels of funding or tied into other plans for the health sector, and many did not set clear priorities to inform donors or other funding." Whereas countries developed laundry lists of program interventions early on, we now find that plans are more strategic, using models such as FP Goals[3] to identify cost-effective interventions with the most significant impact. To ensure that the processes of both developing and implementing CIPs are as effective and streamlined as possible, stakeholders were interviewed about their experiences using the CIP Resource Kit to develop and implement CIPs at country and subnational levels. This report provides insight into their guidance.

WHAT IS THE COSTED IMPLEMENTATION PLAN RESOURCE KIT?

CIPs are multiyear actionable roadmaps designed to help governments achieve their family planning goals. CIPs are a critical tool in transforming ambitious family planning commitments—such as those made through FP2030 and the Ouagadougou Partnership—into concrete programs and policies. The CIP Resource Kit provides standardized guidance on the CIP development process and features tools for planning, developing, and executing a robust, actionable, and resourced family planning strategy. The current CIP process involves three sequential phases with

10-Step Costed Implementation Plan Process

PLAN

Step 1: Obtain government and key stakeholder buy-in and secure resources for the CIP

Step 2: Detail the roadmap for CIP development

DEVELOP

Step 3: Conduct a family planning situational analysis

Step 4: Define a technical strategy with subactivities and timeline

Step 5: Estimate resources and costs

Step 6: Set up institutional arrangements for execution

Step 7: Secure final approval and launch the plan

EXECUTE

Step 8: Provide effective stewardship for executing the CIP

Step 9: Design and implement performance management mechanisms

Step 10: Develop and implement a resource mobilization plan

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[1] FP2030. 2021. "Transition Report: Becoming FP2030." Family Planning 2030. https://www.fp2030.org/resources/transition-report-becoming-fp2030

[2] FP2030. 2021. Toolkit: Costed Implementation Plans. Family Planning 2030. https://fp2030.org/cip

[3] Track 20. "Family Planning Goals" http://www.track20.org/pages/our_work/innovative_tools/FPgoals.php

10 overlapping steps. Appendix A lists resources and tools for each step.

- **PLAN:** The planning phase lays the foundation for CIP development and execution. It typically involves high-level family planning program decision-makers. The outcomes of the planning phase include (1) government and stakeholder buy-in, (2) securing of human and financial resources for CIP development and commitments to support execution processes, and (3) a clearly defined roadmap to guide the development process. A kickoff meeting with key stakeholders marks the completion of the planning phase and the onset of the development phase.

- **DEVELOP:** During this phase, the foundation is laid for an immediate and smooth transition of the CIP into execution. CIP development typically involves multiple family planning stakeholders at national, regional, and district levels and across various sectors. The outcome of this phase is a country-owned, government-approved CIP, which is launched and communicated to all relevant stakeholders. The kickoff meeting for CIP development marks the beginning of the development phase, with the formal launch of the CIP document marking the end of the development phase and the onset of the execution phase.

- **EXECUTE:** CIP execution refers to a deliberate set of processes and systems to operationalize the CIP for sustained action, ultimately leading to results. It typically involves a broad range of family planning stakeholders at various levels and across multiple sectors. The outcome of the execution phase is the desirable results that a country (or subnational entity) wants to attain for its family planning program, that is, impact on family planning and associated health and socioeconomic goals. The formal launch of the CIP document marks the onset of the execution phase. The CIP's performance period end date marks the completion of the execution phase.

In each country, the CIP is intended to serve as the unifying, government-owned family planning strategy, guiding both national and donor investments. To date, 34 countries have completed at least one national CIP, eight countries have done two, and 58 subnational CIPs have been completed. Seventeen national CIPs were conducted in Asia and 28 in Africa. See Appendix B for the CIP country status.

METHODOLOGY

MOMENTUM Country and Global Leadership applied an HCD approach to collect and analyze the data for this report. HCD is a solutioning process that puts influencers and stakeholders at the center of every challenge and opportunity. A future vision is shaped by exploring what they desire and require.

Information was collected in the late fall/early winter of 2021 using an anonymous online survey with qualitative, open-ended questions. There were 20 responses, primarily representing international nongovernmental organization (INGO) staff who had worked on previous CIPs. We then held immersion-style conversations with 25 stakeholders from 11 countries to learn more about their experience developing and implementing CIPs. These were not prescriptive qualitative interviews but conversations that allowed for objective observation and active listening. This perspective provides the opportunity to pursue relevant topics that lead to discovering key insights. We also reviewed selected literature based on stakeholders' recommendations. The findings from these sources were synthesized into insights and recommendations to strengthen the CIP Resource Kit and process. Stakeholders included government officials, FP2020 focal points, donors, and representatives of INGOs, civil society organizations (CSOs), and academic and research institutions. Appendix C provides a list of people interviewed.

The report reflects "what we heard" and is presented through quotes from key stakeholders. Permission for attribution was sought from all stakeholders who participated in the immersion conversations. Quotes without attribution were either pulled from the anonymous online survey or represented a collective response. Insights

related to the resource kit itself and the process of developing a CIP are integrated throughout the report with the expectation that implementation challenges may be addressed with improvements to the resource kit. The paper is organized around the current sequential phases in the CIP Resource Kit and related outputs with recommendations to improve both the resource kit and the process at the end.

KEY INSIGHTS

Country-led CIPs have helped set a broad direction for countries' family planning programs, with significant buy-in from country governments and civil society. Although the resource kit is a valuable tool to many, it is viewed by some as cumbersome or flawed. It became apparent during the immersion conversations that many, even those who had led a country process, were not always aware of the tools available in the CIP Resource Kit. With an eye toward improving its usability while retaining those parts that have helped to advance progress toward family planning goals, here are some comments that reflect the general thinking of those we interviewed.

Photo by Mubeen Siddiqui for MCSP

WHAT WORKS

- Dr. Yaa Asante, National Family Planning Manager, Ghana: "It is critical to have a resource kit like this—everyone can know what needs to be done, how much it will cost, etc. The kit makes life easier, helped with resource mobilization and advocacy, and people took us more seriously—especially the donors."

- Halima Shariff, Johns Hopkins Center for Communications Programs (JHU/CCP), Tanzania: "The second CIP in Tanzania is more exciting because it's very evidence-based; it has strategic priorities. The partners can align themselves around those strategic priorities and do something about it at national- and subnational levels."

- Azra Fazal Pechuho, Minister of Health and Population, Sindh Province, Pakistan: "The nongovernmental organizations were working in silos. They were brought to a single table. Committees were formed where they give their input into every aspect of the CIP—this was new for us."

IMPROVEMENTS NEEDED

- Boniface Mbuthia, ThinkWell, Kenya: "Counties (subnational entities) drafted CIPs and, while their intentions were good, the implementation of the CIPs was never aligned to other planning and budgeting processes within the county."

- Akua Kwateng-Addo, USAID West Africa: "There's often a big gap between the strategy and operationalizing the plan. It would be helpful to have a more practical document so that countries can be more effective in implementation without having such long processes to develop the CIPs that often sit on the shelf."

- Sarah Fox, Options UK: "It is quite prescriptive. I see this as the gold standard. We know that we can never do this. We've got less time and less budget. But it was useful for me to be able to support the teams in Kenya and Nigeria and figure out a more realistic approach. It seems to me to be written as: You must do it this way."

Common themes that arose from the interviews included the need for both financial resources and human resources expertise to work through the lengthy process of developing a CIP successfully, and the awareness that a CIP should be a detailed blueprint for achieving realistic progress against family planning indicators rather than a wish list. Several respondents also noted that CIPs are too often donor-driven or donor-dependent to be truly useful. And without buy-in from the government, a CIP will languish due to the lack of political will to achieve its goals.

Other challenges included the lack of alignment: CIP planners need to align funding behind the most effective strategies to increase voluntary family planning availability, access, and uptake quickly and equitably. In Uganda, for example, the CIP costs ended up being larger than the nation's entire health budget. The use of data in crafting a CIP was tantamount, as was keeping people involved in consistently using the CIP once it was finalized. The process of creating an achievable CIP was only the beginning: Effective stewardship of the plan through its lifecycle was both a priority and a challenge for many.

INSIGHTS FROM THE CIP PROCESS

PHASE 1: PLANNING

OBTAIN BUY-IN

Although buy-in to the entire CIP process is integral to its successful use, far too often this basic step is either pro forma or unwieldy. However, when done thoughtfully and carefully, it can smooth the way to developing a CIP that includes the needs and skills of multiple stakeholders.

For those who struggled to gain buy-in, there were several factors that made it difficult. Chief among these was ensuring that the right people were invited to the table and stayed there throughout the planning process. Particularly frustrating for some was the rotating cast of stakeholders representing a ministry or NGO who arrived with little knowledge of what happened at previous meetings.

"To develop the CIP, you will need to involve the ministry in one way or another, so they can identify with the proposals," recalled Boniface Mbuthia with ThinkWell in Kenya. "The CIP needs to be integrated with other planning documents at both the national and subnational levels. Being a medium-term plan, it must be aligned to the midterm and short-term planning documents for implementation. This is how the proposals made will be applied."

Khadija Naithani, who worked on the Rwanda CIP, said, "The government was really engaged from the beginning. One of our challenges was turnover within the government. The point of contact in the government kept changing on us. I think it took us almost a year and a half to two years to actually have a final plan, because there was so much turnover in the government."

Shabir Chandio, USAID Pakistan, said that "the sexiest story for CIP" was the engagement of the private sector which, in Pakistan, largely means NGOs and civil society. "They were very much engaged since the beginning of the CIP, even when it was being drafted. They were part of the adopting process as well."

Bringing together stakeholders to work through the CIP process can be a positive experience, forming an alliance that will be sustained over time. As one stakeholder said, "The CIP was such a useful document because it was the first time that everybody had fed into something together." Several people mentioned that, as recommended in the CIP Resource Kit, once you have put together the group working on the CIP, you

need to look for who is missing. And one noted, "Who has ownership in the end and how do we make sure the right person or body is accountable? Treasury and finance need to be involved."

DEVELOP A ROADMAP

In Burkina Faso, the roadmap began with a review of the previously written CIP. "We made a summary of the state of the priority challenges by strategic axis, the challenges that have been taken up, the challenges that have been reduced, and the challenges that persist. We had a total of 19 challenges, of which it was estimated that 13 were reduced and six persisted. That was the starting point of the new process."

Simplice Toe,
PROMACO, Burkina Faso

The next part of phase 1 involves developing a roadmap, which can be tricky. It sometimes means educating stakeholders about family planning, as Nigeria's Dr. Sada Danmusa from the Development Outcomes and Support Center discovered: "You need to involve people from the planning department, but we realized they had very little to do with family planning. We started with, 'We want you to know what is happening in family planning.' That got them engaged."

There was some confusion about what "developing a roadmap" in fact meant. Some thought it involved creating a timeline for achieving the CIP process, whereas others thought it was the roadmap for implementation of the CIP. Some people seem to view the CIP document itself as the outcome, rather than the implementation of the CIP.

Developing a roadmap for action is integral for the CIP process to be worthwhile and, although previous efforts are useful starting points, they may also highlight deficiencies that need to be corrected.

If the buy-in part of phase 1 isn't successful, developing a roadmap can become even more difficult. Rwanda's Naithani recalled, "There were many different stakeholders engaged in the development of the strategy but with some agencies, some of the key decision-makers became involved later in the process and this resulted in a lot of rehashing and backtracking. If you don't get the right people involved throughout the process, it creates more work, and more revisions have to be made to the strategy before there is consensus."

SECURE RESOURCES

The development of a CIP is labor, time, and resource intensive for six to 12 months and requires a combination of essential skills and expertise and financial resources. "There are so many competing priorities that mobilizing resources can be a real challenge," said Alieu Jammeh from the United Nations Population Fund (UNFPA) who supported the CIP in The Gambia. Securing resources to conduct the CIP was generally tackled in an ad hoc manner. That may have had to do with the value that is placed on developing the CIP. Donors often provided financial assistance for technical support from consultants and INGOs.

PHASE 2: DEVELOPMENT

The CIP development process is iterative and includes identifying and prioritizing key issues, defining results, identifying interventions to achieve the results, generating budgetary costs, and outlining institutional arrangements for implementation.

The development phase involves determining the strategy and details that will turn a document into a plan. Yet there is confusion among some stakeholders about whether they are creating an advocacy or an implementation tool, or both. Many agree the CIP serves as an important advocacy tool while falling short as

an implementation tool. Akua Kwateng-Addo said, "It ends up just being an advocacy tool because there are these huge funding gaps that exist and require more attention. I'm looking at the CIPs; they're like 126 pages, 130 pages. Who's reading that? The current format needs to be revised to make the CIP more user friendly and practical." Others agreed that what should be a straightforward process that won't detract from their own work often becomes unimaginably long and complicated.

Recalled Halima Shariff: "It takes beyond six months. I'm sure government and other partners get exhausted through that process. And then the approval process takes a long time. And that is where you gauge the government commitment to the whole activity. They may be around the table, but then when you get them to sign off so that it can be disseminated, it becomes a whole other issue. I'm glad people are beginning to think about how we can make this process a bit easier and more linear."

CONDUCT SITUATION ANALYSIS

The situation analysis, often led by a technical support team or technical working group, compiles information about the country's current family planning situation, policies, programs, and financing. The data is then used to prioritize intervention areas and key activities. Respondents to the online survey cited the situation analysis as the most important step in the process.

Reliable data was cited as a significant barrier. However, it is important to note that the data issue is less related to the CIP process itself than to data sources. Issues emerged about the quality of the data, transparency, the need to include private sector data, and consensus on what data should be used for assumptions. Halima Shariff, JHU/CCP Tanzania, said, "While there are improvements in collecting and analyzing data, people don't trust the data. But numbers don't lie. We have a culture of collecting data but using data for decision-making hasn't gained momentum across all levels yet."

Obtaining necessary data to guide this phase of the process was viewed by many as complicated and time-consuming, whether it came from the district health information system (DHIS) or other sources. Nigeria's CIP consultant, Dr. Muktar Gadanya asked, "Could there be a guide as to what data sources to use and what are their quality issues? But a lot of the data sources are implausible when you juxtapose them with the demographic data."

It is challenging to plan and manage when there are parallel data systems. For example, Boniface Mbuthia said, "The logistic management information system (LMIS) doesn't talk to the DHIS—how do you extract and synchronize information from both systems? And who has access to what system? In the Kenyan context, we

Photo by Allan Gichigi for MCSP

have a mixed health system—public and private. So, we cannot ignore the private sector and we cannot take only the data that is available in the public sector."

There were concerns that the situation analyses comprised "cut and pasted" information from existing documents with little or no new analysis. Several respondents suggested that an investment case approach would be more helpful, especially sections highlighting return on investment. The new FP Goals tool, though not open source, may serve this purpose as it combines demographic data, family planning program information, and evidence

of the effectiveness of diverse interventions to help decision-makers set realistic goals and prioritize investments across different family planning interventions. Others suggested merging the situation analysis and technical strategy into one document, including situational analysis, results formulation, and activity planning with a set of building block templates that would lead to a solid design. Lastly, some countries conducted a political economy analysis, a methodology that explores not only the "what" but the "why" things happen. It is applied to unpack how power is used to manage resources. As such, it is especially valuable for exploring the role that political will has on enabling or undermining reform and progress.

DEFINE TECHNICAL STRATEGY

The technical strategy includes priority evidence-based interventions and time-phased activities that are executed throughout the CIP process. It also includes indicators for measuring results during execution.

"Prioritization is a big challenge. If everything is a priority, then nothing is a priority. You have everything in there, but a lot doesn't get funded in the final analysis," said Akua Kwateng-Addo. "The challenge of prioritizing activities is compounded by weak leadership (only the government can say no, and no one high enough would participate until the very end), lack of consistent participation in working sessions, and a lack of common understanding or even the establishment of defined criteria for prioritization, such as equity, impact, coverage, and cost effectiveness."

"With broad participation comes multiple agendas, and people tend to go deep on their individual thematic areas," said Gabrielle Appleford, Avenir Health. "You need to think about how things fit together. If you are going to talk about service delivery, you need to include demand creation." Lucky Namunyak, Kenya Youth Focal Point, shared, "Even with the new youth programming tool, it was important that I was there, championing the needs of adolescents and youth. The policymakers and decision-makers were shying away from the needs of young people. I felt like we were being left out. I just kept bringing up the needs of youth." Whereas several other respondents flagged the need for inclusiveness in both the team developing the CIP and the plan itself, others worry that a focus on a single issue or demographic can be detrimental. A respondent shared, "In one country, they were focused on disabilities, and went as far as suggesting that all health care providers learn sign language and how to read braille yet included nothing about quality of care in their technical strategy."

Having been involved in several CIP processes in Nigeria at the national and subnational levels, consultant Dr. Gadanya said, "Prioritization was difficult. It often becomes quite confusing. You want to choose approaches that get you more users, but you also want to address equity issues. It is a tricky one. Ideally, we must balance the need to be cost effective and address unmet needs and do equitable programming, regardless of whether that is an effective use of resources. I strongly feel a guide for how to prioritize would be important. And for me, I would very much like to see it addressing cost effectiveness alongside equity. We need to get more mileage for the dollar, but we need to also be equitable."

ESTIMATE RESOURCES AND COSTS

Estimating resources and costs should be part of an iterative process by which the team adjusts and prioritizes activities based on realistic estimated costs of implementation. Costing is considered one of the more challenging aspects of developing a CIP. It is often made even more difficult because of a lack of prioritization, lengthy activity lists, and unwieldy expectations about what is possible to achieve. There are issues concerning reliable data, confusion over which data (actual or modeling) to use for which calculation, and transparency from donors and partners. "If the partner does not communicate the information, the information may not be fully captured in the CIP," said Simplice Toe from PROMACO, Burkina Faso. The

biggest frustration, however, centers on alignment. The CIP is often not aligned with other country-level documents, and the costing exercise is not aligned with government budgeting processes or with realistic expectations of available funding.

"CIPs must reflect actual funding streams and programming, from government and donors," said Modibo Maiga, Palladium, West Africa, "and we must also develop budget scenarios to be able to respond to budget shortages." In addition, many donors get their financial envelopes on a yearly basis and therefore multiyear commitments cannot be made.

The newer CIPs place a stronger emphasis on activity-based costing, priority setting in targeted settings, subnational allocation, and the use of modeling to set more realistic goals. "For me," said Boniface Mbuthia, "the bigger picture discussion is on how the insights are integrated into government policy and how you ensure that a five-year plan is financed and has an implementation plan."

> "In Uganda, the prioritization was based on [FP Goals] modeling the impact on modern contraceptive prevalence rate (mCPR). We divided Uganda into regions because there were too many districts. It was a nice bottom-up approach—if you do more of this in this region, you'll get more mCPR. We could adjust levers based on this methodical approach. You could see how much better a nuanced approach could be in terms of the supply side, but also the demand side and mCPR and teenage pregnancy."
>
> **Gabrielle Appleford,**
> **Avenir Health**

IDENTIFY FINANCING GAPS

CIPs have the greatest impact when adequate resources—from a mix of domestic and external funding sources—are available to fully implement the entire range of activities outlined in the plan. The Family Planning CIP Gap Analysis Tool was developed specifically for identifying gaps in resources. It is meant to be used following an application of the Family Planning CIP Costing Tool, as data is drawn from this tool. However, few people were aware of the availability of these resources.

As noted by analysts at the Center for Global Development in a 2016 Report, *Aligning to 2020: How the FP2020 Core Partners Can Work Better, Together*, "Activities and costing laid out in most early CIPs typically did not correspond with real-world funding levels, modes of funding, or other health strategy documents. As a result, most of those CIPs were untrackable; it is nearly impossible to relate actual funding flows from donors and governments to the categories and priorities set out with the documents."[4]

"It's frustrating," said Nigeria's Dr. Gadanya, "It was never possible for us to do a funding gap analysis. You never seem to get that full information to conduct the funding gap analysis. Many of the partners won't share their funding information. The government never reveals complete data. Perhaps this has been successful elsewhere but not here. People need to be more open, there needs to be more transparency."

"As a donor, I just want to understand from the CIP what the country's priorities are, where the resources are going, and what the gaps are that need to be filled," said Akua Kwateng-Addo. "I want to know where we can contribute and make the most difference. I think the planning folks want to understand what they're buying and the benefits of investing in family planning. Ministries of finance often see health as a nonproductive sector, and we need to demonstrate the economic returns that derive from investing in family planning. The

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[4] Silverman, Rachel, and Glassman, Amanda. 2016. "Aligning to 2020: How the FP2020 Core Partners Can Work Better, Together." Washington, DC: Center for Global Development. https://www.cgdev.org/publication/aligning-2020.

CIP needs to communicate these returns—a medium-term vision that reads almost like an investment case as the rationale for investing in family planning. This is not often understood."

"If we do the strategy and then cost it, we're just stuck there," said Naithani in relation to Rwanda's experience. "We need to be practical; we need to go back and look at the strategy again and look at the prioritization and make it realistic, implementable." Others suggested that we need to build in a loop where we revisit the technical strategy and adjust our targets to ensure that it aligns with realistic budgeting.

ESTABLISH INSTITUTIONAL ARRANGEMENTS FOR EXECUTION

The existence of a CIP does not guarantee implementation. Execution must be a joint effort among a variety of partners. Proper management and delegation of responsibilities are crucial for smooth, integrated execution. Establishing institutional arrangements for execution is critical for bridging the development and execution phases. Stewardship is generally assigned to a government ministry and CIPs are typically implemented with guidance and direction from technical working groups. Some of these groups have a long history, whereas others were established in the CIP process.

SECURE FINAL APPROVAL AND LAUNCH PLAN

Once the CIP document is complete, the government and relevant stakeholders review and approve it. Organizing a public launch event has been an effective way to re-engage contributors and educate ground-level implementers about the plan's components, the positive impact of successful implementation, and their

Photo by Mubeen Siddiqui for MCSP

role in ensuring its success. The launch event is also an opportunity to raise awareness about remaining funding gaps and solicit commitments from partners to mobilize additional resources.

Geoffrey Okumu shared, **"**In Kenya, we intend to have a national launch with 50–60 people, then proceed to the CIP at the country level. We have created a popular version (only four pages), which will be posted to social media and other platforms as part of our dissemination." Dr. Gadanya described the subnational launch in Kaduna State in Nigeria, held in the Governor's house and attended by high-level national

stakeholders and an international UNFPA representative. The Governor was impressed by the presentation and significantly increased the resources available for family planning. There was also a strong media presence.

"I was so happy when we did the launch of CIP in Guinea," said Palladium's Modibo Maiga. "When I saw the Minister of Health in the room and the Minister of Finance and Economy, I said, wow, this is what we need. The guy who has the money is in the room. I think this is what kind of synergy we are looking for, the kind of leadership you want, the multisectoral approach. However, the CIP is not complete once launched. Technical assistance is needed after the CIP launch when implementation happens. We need strong and reliable management systems. The CIP needs to be disseminated; subnational planning and implementation are vital, especially in decentralized countries."

"The problem is dissemination," said Lucky Numanyak from Pathways Policy Institute in Kenya. "People are not conversant with the document at the national or county levels. Talk about the long process, the protracted reviews, the delays in approval, the big hotel-based launches with media representation and lunch: It seemed more like an end than a kickoff for implementation."

PHASE 3: EXECUTION

SET UP AND MANAGE INSTITUTIONAL ARRANGEMENTS (STEWARDSHIP)

The launch is a critical transition point. The consultant who has been leading the process often concludes the work assignment at this stage. The challenge is keeping the CIP on the agenda.

Many respondents said they completed the CIP, at least on paper, got it approved, and some even held launch events for it. Many said that an outside consultant—either from within the country or outside—wrapped up the process and walked away. Of the consultants interviewed, many said they didn't know what happened to the CIP once they left.

One respondent to the online survey said, "I think one of the biggest areas for improvement is that the investment in developing the CIP is greater than the investment in building capacity to execute it and achieve results. There are so many strategic plans sitting on bookshelves because program directors don't have the time, capacity, or resources to drive the performance and achieve the results."

On a positive note, most respondents spoke glowingly of the technical and thematic working groups that went through the process of developing the CIP. But, although those groups are meant to continue and function in a performance monitoring role, the reality is that many do not. Some respondents said they created shorter term operational plans in addition to the CIP, whereas others created dashboards with red/green/yellow light measures of achievement that assist with implementation and accountability. Samasha Medical Foundation in Uganda has had specific success with its *Motion Tracker*.

"The big challenge in implementing the CIP is how to implement the CIP," said Modibo Maiga. "Where do the resources come from? It's a very big document. You need to have an operational plan, led by a group of key stakeholders under the leadership of the government. It should be revisited regularly to see where we are." Other respondents agreed that it is critical to find one person—or a small group of people—who will shepherd the CIP over time. Unless that is done, the plan will likely languish somewhere as more immediate priorities surface.

> "I am fortunate to be assigned full-time in the execution of the CIP. We have the Sindh FP2030 Working Group with all relevant public sector organizations and development partners with expertise in the different thematic areas and make up 13 technical working groups."
>
> **Talib Lashari,**
> **Population Welfare Department,**
> **Sindh Province, Pakistan**

Regina Bash Taqi, Sierra Leone, lead consultant in the development of the CIP, recalled, "We have a record of implementing partners who are very committed to family planning. We call them into meetings. We're quite structured. Not everybody likes that, but for me doing it the first time, I liked the fact that the resource kit had all these structured processes that they tried in other countries that we could apply."

Dr. Tabinda Sarosh, Pakistan Country Director for Pathfinder, was happy with the coordinated working group that the CIP spurred, particularly in Sindh Province. "The CIP accomplished what had never happened before. And frankly, when this task force started happening, it was something very unique. We had never seen before the minister, the director general, and the secretaries sitting at the table. Not just from health but from the Population Welfare Department and the family planning NGO stakeholders. All at the same table discussing the quality of data."

Many other respondents point to the complexity of the "teams" working on CIP as both a reason to celebrate and a point of bewilderment. "One of the major problems that we have as a country is that we have policies and plans that are often not implemented," said Nigeria's Dr. Sada Danmusa. "They are largely kept on the

shelf. With the CIP, the technical support unit made implementation possible. Even with the government, sometimes you can't bring everybody under the same roof to go along with the same vision. But with a CIP you have a plan that is being followed and is being regularly reviewed."

Danmusa went on to say, "Nigeria's national CIP was called the National Family Planning Blueprint. We hold strategy meetings every month with the government leaders on the family planning plan, we call it a Blueprint Technical Meeting. We look at what is happening in the country, what is happening to the implementation of the Blueprint, and where are issues and how do we mitigate if there are challenges? How do we move forward or if there is any new thing coming, how do we get more aligned into the more coordinated structure?"

The length and breadth of the finished CIP can be daunting to many, even when an operational plan is in place. Breaking it into manageable pieces is a challenge that makes implementation much more straightforward. USAID's Akua Kwateng-Addo, said, "In Benin, when it [the data] was broken down to the regional level, we knew we could get behind that target. And it made it so clear, practical, and operational. People weren't so intimidated by the numbers. We had a realistic goal to work toward. When I find the CIPs to be most effective, you can translate that to practical knowledge and help regional directors and even district directors know that this is possible. We need to put the effort in and show how much it will cost. And, the donors can say, okay, in this region, I'm supporting this. This is how I can best support them."

On the other hand, one respondent said, "We had an indication that the CIP is not being used because the ministry was not that keen on reviewing it regularly. Documents like the CIP are not being integrated into the national family planning exercise. It simply becomes an academic exercise. The ministry is doing its own planning with partners."

MONITOR PERFORMANCE

Several respondents suggested that the CIP Resource Kit should feature an annual performance monitoring process that includes a review of existing resources, gaps, and priorities. Again, this is another example of people not being familiar with what is in the resource kit.

Most of the CIPs set aspirational rather than realistic targets, with no basis in rigorous modeling or historical trends.[5] As a result, even their full and effective implementation will not necessarily lead to achievement of the CIP goals within the designated timeline. The disconnect between the actual activities and cost figures on the one hand, and the monitoring framework on the other, sets countries up for failure. For example, Nigeria's 2014 CIP suggests that Nigeria aimed to more than double its all-methods contraceptive prevalence rate (CPR) by 2018, with an increase from 15 to 36 percent.[6]

Said Akua Kwateng-Addo, "We went into the CIP process with the government of Senegal DSR [Directorate of Reproductive Health and Child Survival] with a target of 42 percent CPR by 2015, which was overly ambitious and not realistic. Breaking down the inputs, using the Reality Check Tool, made the commodities, all the training, etc., to get to that 42 percent. The result was that the government had to rethink those targets to make them more realistic, bringing them down to half of the original target. The activities and targets were distributed regionally, making the plan clear, practical, operational, and much less intimidating. This is when I found that the CIPs were most effective."

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[5] Silverman and Glassman 2016. https://www.cgdev.org/publication/aligning-2020.

[6] Silverman and Glassman. 2016. https://www.cgdev.org/publication/aligning-2020.

"The Kenya team was aware that some of the country-level CIPs weren't that meaningful in terms of actually guiding decision-making, or they weren't used as a meaningful tool during annual work planning, for example," said Sarah Fox in a recent interview. "The CIP had a lot of buy-in when it was developed, but it didn't end up getting translated into actual implementation."

PLAN FOR RESOURCE MOBILIZATION

To arrive at a successful strategy for resource mobilization, the previous phases and steps of the resource kit must be carefully reviewed. Unless issues such as alignment, political will, and identifying financial gaps are adequately addressed (and even resolved), resource mobilization becomes an exercise in futility. "One of the things that the CIP envisioned was to improve domestic financing for family planning," said Boniface Mbuthia of Kenya. "This remains a pipe dream. Not necessarily because the CIP is bad, but because of the misalignment and other factors." Gabrielle Appleford of Kenya added, "Even when the CIPs exist in counties, that doesn't mean more money was allocated by the county to family planning. I would assume the ultimate purpose of a CIP is to back it up with financing so you can implement it, but that wasn't necessarily the case."

Photo by Allan Gichigi for MCSP

Sada Danmusa had a cheerier outlook: "Beyond just having that coordination, I think one thing that is supposed to link to that is alignment of resources. When you have a plan that is focusing on one vision and you have the strategies, it is much easier for stakeholders that have resources to be able to come and support and contribute into that main plan. It also helps us to mobilize more resources, avoids a lot of duplication, and makes sure that partners and other stakeholders that are supporting different things move a single agenda forward rather than everyone doing their own thing. We had some challenges with the big guys at the beginning. But later they were able to understand and see that this is a place they can provide leadership and they took it up and worked together with us to push the agenda forward."

USAID Pakistan's Shabir Chandio said, "The country has two streams of funding: one for development and a nondevelopment regular funding stream." He added, "The government is currently paying out of development funds for the CIP family planning interventions but hopes the CIP will soon be made part of recurrent budgets to increase sustainability."

RECOMMENDATIONS

The CIP Resource Kit has proven valuable to many of those we interviewed, and worthy of improving to most. We clearly heard that some thoughtful changes could make the development and implementation of a CIP more streamlined and useful. Additionally, there was a lack of awareness of the resource kit contents for many actively engaged in the CIP development process. Many of the recommendations in this report address challenges to developing and operationalizing the CIP as opposed to critiquing the resource kit itself. These challenges triggered recommendations that could be addressed through revisions to the resource kit. We have attempted to distill all the respondents' comments into a short list of recommendations that would have the most immediate impact on the kit and its ease of use:

- The resource kit should be simplified. It should provide a clear how-to and rationale. Each step could be narrative followed by a worksheet. Once the worksheet is completed, it is placed into a folder and becomes part of the draft plan.

- Broaden the dissemination and promotion of the CIP Resource Kit contents and availability, increasing the odds that most people who need it know about it.

- Present the situation analysis/technical strategy as a slide deck rather than a long narrative, making it more accessible to users.

- Merge the situation analysis and technical strategy steps.

- Develop a tool that reviews the advantages/benefits of methodologies such as the situation analysis, investment case, political economy analysis, and FP Goals analysis.

- Ensure tools are available that assist in the most challenging areas such as data use, costing, prioritization, and performance tracking.

- Provide guidance on the difference and benefits of cost effectiveness, equity, and impact.

- Bring back the reality check: Insert a loop in the stepwise process—strategize, prioritize, cost, back to strategy, priorities, and costing. Be practical and realistic.

- Align the CIP to other planning and budgeting processes at the national/subnational level.

- Decide whether the CIP is an implementation tool, an advocacy tool, or both.

APPENDIX A: CURRENT CIP RESOURCES AND TOOLS

PHASE	STEPS	TOOLS
PLAN	**Step 1:** Buy-in	• Costed Implementation Plans for Family Planning: The Basics • Policy Checklist: Essential Elements for Successful Family Planning Policies • Strategic Budgeting Process for Scale-Up of Family Planning: Costed Implementation Plans (CIPs) for Family Planning • Costed Implementation Plans: Guidance and Lessons Learned • Making the Case for a CIP: PowerPoint Template • Stakeholder Engagement for Family Planning Costed Implementation Plans: A four-step action framework to meaningfully engage stakeholders in the CIP process • Costed Implementation Plans for Family Planning: Standard Elements Checklist • Costed Implementation Plans (CIPs) for Family Planning: 10-Step Process for CIP Planning, Development, and Execution • Family Planning 2020: Rights and Empowerment Principles for Family Planning • Advocacy Resources
	Step 2: Roadmap	• Costed Implementation Plans (CIPs) for Family Planning: 10-Step Process for CIP Planning, Development, and Execution • Costed Implementation Plans (CIPs) for Family Planning: Team Roles and Responsibilities for CIP Development and Execution • Costed Implementation Plans for Family Planning: Standard Elements Checklist
DEVELOP	**Step 3:** Situation Analysis	• Stakeholder Engagement for Family Planning Costed Implementation Plans: A Four-Step Action Framework to Meaningfully Engage Stakeholders in the CIP Process • CIP Resource Kit: Useful Tools for Developing a CIP Technical Strategy
	Step 4: Technical Strategy	• Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans • CIP Resource Kit: Useful Tools for Developing a CIP Technical Strategy • Costed Implementation Plan Performance Dashboard User Guide and Tool • Four Key Elements for Execution of Family Planning Costed Implementation Plans: Approaches and Tools for Translating the Plan into Sustained Action and Results • Advocacy Resources • Essential Elements for Costed Implementation Plans: Social and Behavior Change Checklist
	Step 5: Estimate Resources and Costs	• Family Planning CIP Gap Analysis Tool and User Guide • Family Planning CIP Costing Tool and User Guide
	Step 6: Set up Institutional Arrangements	• Costed Implementation Plans (CIPs) for Family Planning: Team Roles and Responsibilities for CIP Development and Execution
	Step 7: Secure Final Approval and Launch the Plan	• Advocacy Resources • Stakeholder Engagement for Family Planning Costed Implementation Plans: A Four-Step Action Framework to Meaningfully Engage Stakeholders in the CIP process

PHASE	STEPS	TOOLS
EXECUTE	**Step 8:** Provide Effective Stewardship for CIP Execution	• Four Key Elements for Execution of Family Planning Costed Implementation Plans: Approaches and Tools for Translating the Plan into Sustained Action and Results • CIP Execution Country Assessment Checklist • Advocacy Resources • Stakeholder Engagement for Family Planning Costed Implementation Plans: A Four-Step Action Framework to Meaningfully Engage Stakeholders in the CIP Process
	Step 9: Design and Implement Performance Monitoring Systems	• Monitoring Performance of Family Planning Costed Implementation Plans: Guidance for Establishing and Implementing Mechanisms to Track Progress Towards Results • Costed Implementation Plan Performance Dashboard User Guide and Tool • Tracking Contraceptive Financing
	Step 10: Develop and Implement a Resource Mobilization Plan	• Advocacy Resources • Stakeholder Engagement for Family Planning Costed Implementation Plans: A Four-Step Action Framework to Meaningfully Engage Stakeholders in the CIP Process

APPENDIX B: STATUS OF COSTED IMPLEMENTATION PLANS

To date, 45 countries have completed at least one national CIP, eight countries have done two, and 58 subnational CIPs have been completed.

Country	One national CIP (34 countries)	Two national CIPs (8 countries)	Subnational CIPs (58 subnational)
Afghanistan	X		
Angola	X		
Bangladesh	X		
Benin	X		
Burkina Faso		X	
Burundi	X		
Cameroon	X		
Central African Republic	X		
Chad	X		
Côte D'Ivoire		X	
DRC	X		
Ethiopia	X		
Gambia	X		
Ghana		X	
Guinea	X		
Haiti	X		
India	X		
Indonesia	X		
Kenya		X	27
Kyrgyz Republic	X		
Lao PDR	X		
Liberia	X		
Madagascar		X	
Mauritania	X		
Mozambique	X		
Myanmar	X		
Nepal	X		
Niger		X	
Nigeria	X		26
Pakistan			5
Philippines	X		
Rwanda	X		
Senegal	X		
Sierra Leone		X	
Solomon Islands	X		
Somalia	X		
South Sudan	X		
Sri Lanka	X		
Tanzania	X		
Togo	X		
Uganda		X	
Vietnam	X		
Zimbabwe	X		

APPENDIX C: INTERVIEW CONTACTS

Country	Name	Email	Type	Organization/institution
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	Boniface Mbuthia	bmbuthia@thinkwell.global	INGO	ThinkWell
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