

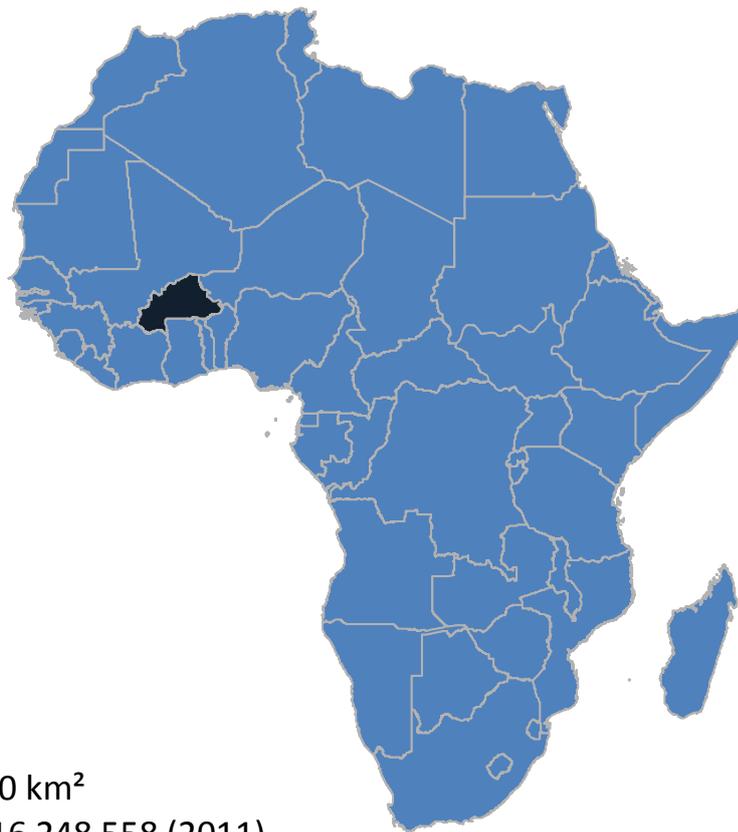
**MINISTRY OF HEALTH**

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**BURKINA FASO**  
**Unity, Progress, Justice**



## **Family Planning in Burkina Faso: Challenges, Perspective and National Commitment**



### **Key figures**

- Area: 274 200 km<sup>2</sup>
- Population: 16 248 558 (2011)
- Percentage of women amongst population: 52%
- Yearly average population growing rate: 3,1%
- Density : 59 habitants /km<sup>2</sup>
- GDP : 510 USD /inhabitant (2009)
- Share of population < 20: 57%
- Population living in rural areas: 75%

**July 2012**

## Burkina Faso faces urgent demographic and health challenges that require immediate action

Burkina Faso's demographic and health indicators show that the current situation calls for urgent change:

- High synthetic fertility rate: 6.0 children per woman;
- High population growth rate: 3.1 % per year;
- High fertility rate of teenagers (15-19 year old): 21%;
- Low modern Contraceptive Prevalence Rate: 15% with large unmet needs (23.8%);
- Very high maternal mortality rate with 341 maternal death for each 100 000 living birth (one of the highest in the world).

At currently observed prevalence rate, population would go from 16 million in 2010 up to 55 million in 2050. A voluntarist Family Planning policy, generating a yearly 1.5 percentage point (pp) increase of CPR, 2050 population would be 39 million. Even in this second situation, such a large population increase will slow down access of the poorest to proper health and education. A CPR increase higher than 1.5pp per year is necessary to allow economic growth to Burkina Faso and receiving the demographic dividend.

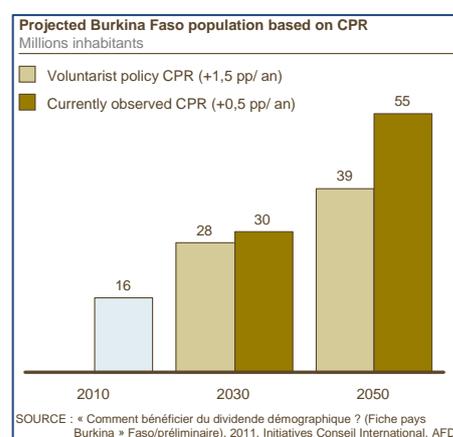


Figure 1: projected Burkina Faso population based on CPR between 2010 and 2050

## Facing such challenges, Burkina Faso has set ambitious goals: increase CPR from 15% in 2010 up to 25% in 2015

To limit population growth but also to prevent hundreds of maternal deaths, Burkina Faso has put Family Planning at the heart of its development priorities.

The country has set a goal of increasing CPR from 15% in 2010 up to 25% in 2015, or an increase of 2pp per year, representing 400 000 additional women using modern contraceptive methods in 5 years.

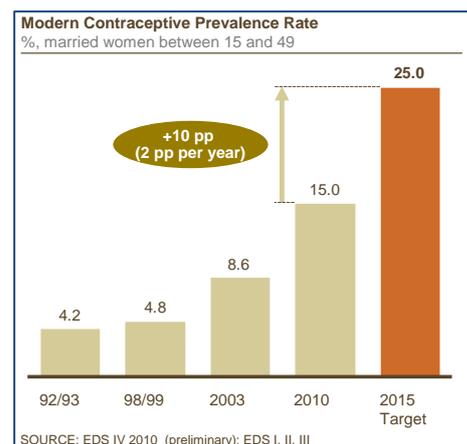


Figure 2: 2010-2015 Modern Contraceptive Prevalence Rate growth target

## **To support the country ambitions, Burkina Faso's government and civil society have prepared a national action plan**

For several years, the Ministry of Health and civil society actors have conducted a large number of initiatives to implement effective family planning policy and maternal health in the country. Yet, thanks to the mobilization generated by the Ouagadougou Conference in 2011 on "Family Planning in the context of Population and Development: the Urgency to Act" and the Mbour conference in Senegal with civil society actors across the region, a national action plan was built in November 2011.

To achieve quick and significant impact, Burkina Faso made two major choices for its implementation action plan strategy:

- Sequence activities to implement immediate high impact actions;
- Set regional CPR targets depending on their potential and characteristics (for instance level of urbanization, presence of highly populated peri-urban areas, volume of teenagers, presence of displaced populations and people with disabilities). Actions will be launched first in high potential regions.

The Ministry of Health, along with civil society actors, has identified five priority actions to launch:

- Stimulate demand and acceptance of Family Planning services through proximity activities, involving local religious, customary and administrative leaders;
- Eliminate contraceptive stock out in health access points by following inventory levels at every level;
- Reduce unmet needs by strengthening Family Planning services in existing health access points (counseling and clinical training, equipment and supplies);
- Extend rural and peri-urban population access to Family Planning services by strengthening Community Based services and proximity services;
- Follow the impact of the initiatives launched through a measuring and evaluation plan.

A first budget estimate made in 2011 forecasted a US \$38 million or EUR 26 million for the entire plan (2011-2015). The Ministry of Health and its partners continue to work on budget estimates as well as refine the action plan to make it operational and be able to measure its impact. Civil society and private health sector are fully associated to this effort.

## The Burkina government is committed to promote Family Planning service usage

Although Family Planning greatly rely on technical and financial partners, the government has decided to be deeply involved in this matter. Four commitments can illustrate the government's unconditional support to Family Planning development

- On a financial level, a budget line dedicated to contraceptive product procurement was created in 2008, and the government has funded this line on average with US \$1 million per year. The government is committed to maintaining this significant amount in the coming years;

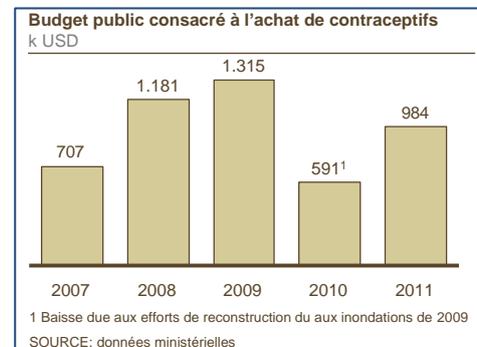


Figure 3: Evolution of public funding dedicated to contraceptive product procurement

- On an organizational level, the government has created a Community Health Direction, in charge of coordinating community based efforts;
- On a political level, the government is committed to support innovation by, for instance, studying a pilot introduction of depo-subQ in Uniject;
- On an impact measuring level, the government is committed in rigorously measuring and evaluating the plan implementation to ensure that targets are reached

Burkina Faso authorities are grateful for the efforts already provided by its partners and hope that they will continue supporting a sustainable human development of Burkinabe people.

Investing in Family Planning will support Burkina Faso in reaching the Millennium Goals Development, economic growth and fight against poverty.