The London Summit on Family Planning was a transformational moment. It inspired the FP2020 movement, and now, more than two years later, the global community is still inspired by the vision of expanding access to voluntary family planning to 120 million more women and girls in the world’s poorest countries by the year 2020. New political, financial and service delivery commitments continue to support the rights of women and girls to decide freely and for themselves whether and when to have children.
BURUNDI

The government of Burundi commits to repositioning family planning with the global objective of fostering sustainable development and addressing population growth and ensuring equal access to all women to the contraceptives of their choice and to quality services.

BURUNDI’S OBJECTIVES ARE TO:

- achieve CPR of 40 percent by 2015, representing an increase of 18 percentage points since 2010 and reach a CPR of 50 percent by 2020

- increase the number of acceptors of modern contraception from 322,312 in 2012 to 644,628 individuals 2015

THE GOVERNMENT COMMITS TO:

- explore the possibilities of integrating population, health and environment objectives into a single approach with a vision of improving family planning

- establish coordination mechanisms to improve the financial and active engagement by donors and an optimized fund allocation. Burundi seeks to create a national population board to coordinate all activities related to family planning, population and development

- improve the regulatory framework to improve public-private partnerships and expand family planning service points

- increase the budget line allocations for reproductive health and family planning and to increase donor and private-sector financing for family planning

- increase the annual government allocation for contraceptives to 10 percent each year from 2015 to 2020

- improve quality of family planning services by training health workers at the all public health sector facilities and by increasing access to services by establishing health posts for family planning in geographically inaccessible areas, including clinics run by religious organizations that do not offer modern contraceptive methods

- integrate services with other programs, such as immunization and HIV

- scale up community based services through community mobilization and provision of family planning methods including task shifting by training Health Promotion Technicians and community health workers (CHWs) to offer injections

- improve continuity of contraceptive use by training health workers to provide long acting reversible contraceptive and permanent methods

- generate demand by raising awareness of the importance of family planning. In particular to improve access to reproductive health and family planning information and services for adolescents and young people, via information and communication technologies and to invest in comprehensive sexuality education for the youth both in primary and secondary schools

- strengthen performance-based financing and extend it to the community level with the support of partners

CAMEROON

CAMEROON’S OBJECTIVES ARE TO:

- achieve the goal of the Strategic Plan of Reproductive, Maternal, Neonatal and Child Health for 2014-2020, which stipulates an increase in modern contraceptive prevalence from 16.1% to 30% by 2020

- reduce unmet needs for family planning from 17% to 10% by 2020

- ensure equitable access to quality family planning services to all women of childbearing age by respecting their choice

- increase by at least 5% each year budget allocated for the purchase of contraceptives

THE GOVERNMENT COMMITS TO:

- ensure the mobilization of the budget line for the actual purchase of contraceptives
• establish a subsidy mechanism for family planning services for the most vulnerable targets, notably adolescents/youth, and women with disabilities

• strengthen the multisectoral commitment to family planning

• disseminate the reproductive health/family planning framework documents available to Cameroon and implement the priority interventions chosen

• institutionalize the use of certain methods used in community outreach, notably the pill and injectable contraceptives

• conduct advocacy to increase the state’s budgetary allocation for RH to 5% per year by 2020, as well as the part allocated to family planning

• mobilize donors, including the private sector and civil society, to finance family planning

• ensure the commodity security of contraceptives so that the stock of contraceptives never runs out

• provide the full range of contraceptives by ensuring quality services, including family planning counseling, training, and supervision of health workers

• ensure the government’s and its partners’ accountability in terms of the funding for family planning

TOGO

TOGO’S OBJECTIVE IS TO:

• increase the CPR from 13.2 percent in 2010 to 24.3 percent in 2017

THE GOVERNMENT Commits TO:

• disseminate the national plan for repositioning family planning by June 30, 2015

• develop and adopt the implementing texts of the reproductive health law by December 31, 2014 and to disseminate the reproductive health law and its implementing texts by June 30, 2015

• develop a contractual arrangement strategy with the private sector for offering family planning services and to scaling up best practices in reproductive health/family planning

• provide a grant for the purchase of contraceptive products (F 500,000,000) and to seeking other mechanisms for financing family planning

• increase service coverage by taking into account private and associative structures offering family planning services, organizing family planning services for the benefit of isolated and marginalized groups, and improving the access of local populations to family planning methods through innovative strategies

• integrate adolescent-youth sexual and reproductive health services into the PMA (minimum package of services) of health structures and recruiting and training qualified personnel for offering quality services

• strengthen data forecasting and management to optimize the supply chain and to promoting contraceptive product supply chain excellence

• evaluate community-based distribution of services, including injectables, by December 31, 2014, reinforce results-based mechanisms for coordination, monitoring, and evaluation, and strengthen communication around family planning, particularly for key populations

• promote family planning with advocacy tools (RAPID, religious RAPID) and to institutionalize the national campaign for family planning

• ensure the commodity security of contraceptives so that the stock of contraceptives never runs out

• provide the full range of contraceptives by ensuring quality services, including family planning counseling, training, and supervision of health workers

• ensure the government’s and its partners’ accountability in terms of the funding for family planning

• conduct advocacy to increase the state’s budgetary allocation for RH to 5% per year by 2020, as well as the part allocated to family planning

• mobilize donors, including the private sector and civil society, to finance family planning

• ensure the commodity security of contraceptives so that the stock of contraceptives never runs out

• provide the full range of contraceptives by ensuring quality services, including family planning counseling, training, and supervision of health workers

• ensure the government’s and its partners’ accountability in terms of the funding for family planning

• conduct advocacy to increase the state’s budgetary allocation for RH to 5% per year by 2020, as well as the part allocated to family planning

• mobilize donors, including the private sector and civil society, to finance family planning

• ensure the commodity security of contraceptives so that the stock of contraceptives never runs out

• provide the full range of contraceptives by ensuring quality services, including family planning counseling, training, and supervision of health workers

• ensure the government’s and its partners’ accountability in terms of the funding for family planning
THE BRUSH FOUNDATION

The Brush Foundation works toward a future in which family planning worldwide is available, affordable, acceptable, effective and safe. The foundation’s mission is to support organizations that advance the freedom of reproductive choice; promote access to and utilization of direct family planning services; disseminate reliable information on reproductive health and choice; support effective, accurate and comprehensive adolescent education on reproductive health and sexuality; and work toward responsible public policies for reproductive health.

The Brush Foundation commits to contributing $30,000 toward global family planning efforts in 2014. Specifically, the foundation commits $25,000 to Pathfinder International and $5,000 to FP2020’s Rapid Response Mechanism to support grants that fill urgent gaps and unforeseen time-bound opportunities to accelerate progress toward expanding access to family planning information, services and supplies.

ENGENDERHEALTH

By expanding access to, strengthening demand for, and improving the quality of family planning services, EngenderHealth seeks to broaden voluntary use of contraception and increase informed decision making about family planning.

EngenderHealth will, in partnership with donors, program approximately $40 million in Western and Central Africa by 2020 to expand women’s access to and use of family planning services. Program activities will focus on Burkina Faso, Côte d’Ivoire, Guinea, Mauritania, Niger, Togo, Niger, and Nigeria as well as DR Congo.

In order to assist governments and other implementing partners in fulfilling their FP2020 commitments, EngenderHealth pledges to develop and apply with partners a framework that will guide the provision of family planning services, ensuring that they respect, protect, and fulfill individuals’ human rights. This framework, and accompanying tools, are envisioned to play a practical and instrumental role in ensuring that all family planning services are grounded in human rights.

In the United States, EngenderHealth commits to reaching at least 500,000 U.S. women through a dynamic communications and advocacy campaign that will inspire action in support of women in developing countries who want, but do not have, access to contraception and safe childbirth.