

NIGERIA COMMITMENT SELF-REPORTING QUESTIONNAIRE 2018



Thank you in advance for taking the time to complete this questionnaire.

The Family Planning 2020 (FP2020) Secretariat surveys all FP2020 commitment makers to gather updates on overall progress, major activities, and key areas of challenge in fulfilling commitments. We use these responses to support information and knowledge sharing and transparency among FP2020 commitment makers and the broader family planning community.

We look forward to publishing your response on your country's dedicated country webpage—<http://www.familyplanning2020.org/entities/nigeria>—on FP2020's website.

We request that you submit your response by **Friday, June 8, 2018**.

Please complete the attached Word document and submit to Martyn Smith on msmith@familyplanning2020.org with a copy to Holley Stewart on hstewart@familyplanning2020.org.

Should you have any questions or concerns, please contact Holley Stewart on hstewart@familyplanning2020.org or Rudy Shaffer on rshaffer@familyplanning2020.org

Thank you again for your commitment to improve the lives of women and girls through greater access to voluntary family planning. We look forward to your response.

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This year we have modified the questionnaire to include 1) the 2017 commitment and elements of Nigeria's original commitment that still stand, and 2) three standard questions we're requesting of all FP2020 commitment-making countries.

As you provide your updates below on each element of your commitment, kindly focus on progress made, any major challenges or barriers you faced, and share information on any key upcoming commitment-related milestones. **Please provide updates that reflect the July 2017- May 2018 period only.**

UPDATE QUESTIONNAIRE

COMMITMENT OVERVIEW

The Government of Nigeria in collaboration with its partners and private sector pledges to achieve a modern contraceptive prevalence rate (mCPR) of 27% among all women by 2020.

1. **COMMITMENT:** Ensure sustainable financing for the National Family Planning Program by
 - 1.1. Increasing its annual allocation for contraceptives to \$4M starting in 2018;
 - 1.2. ensuring total disbursement of \$56M to the states through its Global Financing Facility and IDA loans.
 - 1.3. Realizing the health financing goals laid out under the National Strategic Health Development Plan, the institutionalization of support for primary health services, and meet or exceed the Abuja Declaration health financing commitments.
 - 1.4. Investing in a robust accountability system to track and report actual domestic resources expenditures at national and state levels for the national family planning on annual basis.

In the space below, please provide an update on activities undertaken in 2017-2018 in support of these elements of your commitment:

Update 1.1 : MoU signed for US\$4mil between UNFPA and FMoH from 2018 to 2020 on 11th Sept 2017

Update 1.2: Ongoing efforts to liaise with World Bank funded Performance Based Financing Saving One Million Lives Performance for Result (SoML P4R)

Update 1.3: The National Health Act exists since 2014. Implementation modality has been agreed with Legislature. Pilot using Basic Health Care Provision Fund in Sept 2017 in 3 states and scale up to other states approved by the Senate in May 2018. His Excellency President Muhammadu Buhari GCFR has accented to 2018 Appropriation to enable implementation of the National Health Act for Basic Health Care Funding.

Update 1.4: UNFPA commissioned FP Resource Flow Survey in 2017 and FMoH National Health Accounts has included FP as subset of RH expenditures to be implemented and tracked in 2018

2. COMMITMENT: Improve availability of services and commodities by

- 2.1. Contributing to improved preparedness and response where humanitarian crises occur;
- 2.2. increasing the number of health facilities providing FP services in the 36 states + FCT from 9,500 as of 2016 to 20,000 by 2020;
- 2.3. Expanding the task-shifting policy and its implementation to include patent medicine vendors and community resource persons to expand access in difficult to reach areas and amongst disadvantaged populations;
- 2.4. Training at least 3,700 community health workers (CHWs) to deliver the range of contraceptives, particularly long-acting and reversible methods (LARMs) and supporting task shifting so CHWs in rural areas can provide multiple methods;
- 2.5. Building on the impact of market interventions;
- 2.6. Lowering the price of contraceptives through removal of import duties and other regulatory barriers;
- 2.7. Scaling up access to new contraceptive methods such as DMPA-SC in the public and private sectors;
- 2.8. Expediting the transformation of the public health sector last mile distribution of health commodities using integrated informed push models through involvement of the private sector capacity for optimization of transportation, haulage and tracking of commodities using electronic logistics management solutions.

In the space below, please provide an update on activities undertaken in 2017-2018 in support of these elements of your commitment:

Update 2.1: Number of health facilities providing FP services is now 11,829 as at 1st of June, 2018.

Current users of FP based on NHMIS data is 10,060,516 as at Dec 2017

Update 2.2: Ongoing effort to include DMPA SC in EML. The PPMVs' Tiered-Accreditation Bill has been passed by the National Assembly.

Update 2.3: Integrated last mile distribution process through NSCIP ongoing. Four warehouse hubs activated – Abuja, Lagos, Cross River and Sokoto

Update 2.4: Ongoing efforts to integrate FP in MISP document

Update 2.7: National Guidelines on DMPA-SC Introduction and Scale up has been finalised and will be launched/disseminated by the Hon Minister of 3rd of July, 2018 in Abuja.

3. COMMITMENT: Build partnerships to improve access by:

- 3.1. Investing in and working with local and international non-governmental organizations, civil society organisations, faith based organisations, traditional and religious leaders as well as other government line ministries and parastatals to address socio-cultural barriers such as preference for large families, religious restrictions, and women's lack of decision-making power
- 3.2. Leveraging community structures such as ward development committees around the 10,000-functional primary health care centres to promote behavioural change communication messages to foster positive perceptions about family planning.
- 3.3. Working with the Ministry of Youth and Ministry of Education to ensure that age appropriate information on sexual reproductive health is provided to young people through implementation of the *Family Life Health Education Curriculum* in and out of schools including investments in provision of youth friendly services in traditional and non-traditional outlets.

In the space below, please provide an update on activities undertaken in 2017-2018 in support of these elements of your commitment:

Update 3.1: Ongoing discussions at state level. Hon Minister launched and disseminated Christian and Islamic Perspective on Reproductive Health and Family Planning in collaboration with religious leaders and RMNCAH stakeholders across the country

Update 3.2: This will be implemented through Basic Health Care Provision Fund and PHC Revitalisation

Update 3.3: Plans to create a multi-sectoral platform to address this through Ministry of Budget & National Planning and Governors Forum. Ongoing discussions with Wellbeing Foundation to support this process.

Please respond to all parts of the following 3 questions:

1. How has your Government engaged civil society organizations, young people, and marginalized women and girls in decision-making about national family planning programs and policies?

a. What challenges have you faced in working with these groups? (please give examples)

- Poor funding adversely affects CSOs' programme implementation
- Inadequate data often delay development of advocacy kits as planned by the CSOs
- Inadequate information on the number and distribution of CSOs across the country.

b. How has this engagement supported reaching your FP2020 commitment?

- Government has incorporated the CSOs into its coordination and management mechanisms such as the NRHTWG and its subcommittees, thus creating enabling environment for CSOs to make inputs into the planning, implementation and monitoring of programmes and policy implementation.
- Government works with key partners to build capacities of CSOs in budget analysis and tracking as well as advocacy methods including the use of RAPID.
- CSOs are engaged in the training of media practitioners and peer groups to offer appropriate information on SRH.
- CSOs in collaboration with the FMOH developed a strategic advocacy agenda to create awareness among policy makers, and politicians, especially state governors that support FP2020

- The CSO advocate to state governments for the adoption of policies such as the Task Shifting Policy and Post Partum FP, particularly for first-time mothers.

c. Please share successes and/or lessons learned from these engagements.

- State governments are becoming more responsive to issues on SRH such as adoption and implementation of Reproductive Health Policy 2017 and development and implementation of FP CIP.

2. How is the Government integrating family planning into universal health coverage (UHC)-oriented schemes and what is/are the mechanism(s) being used or considered?

- Family planning services are included in the Minimum Basic Health Care Package to be provided using Basic Health Care Provision Fund
- Ongoing effort to finalise inclusion of FP service in different health insurance schemes

3. Did the FP2020 Focal Points participate in your country's 2018 data consensus meeting?

a. If so, what insights were gained?

Nigeria's 2018 consensus meeting is scheduled to be held on 4th July, 2018.

b. Were domestic expenditures data reviewed as part of the data consensus meeting? If so, please share insights and challenges you had in reviewing and validating these data.

The domestic expenditures data will be reviewed as part of the data consensus meeting of 4th July, 2018.

Please provide the following information on the Government's point of contact for this update:

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- Date: 28th June 2018