

ADVANCING PARTNERS & COMMUNITIES SUMMARY SERIES

Increasing Access to High-Quality, Community-Based Family Planning Services: APC's Comprehensive Approach in Uganda

JUNE 2019

SPOTLIGHT on APC Uganda: Strengthening multisectoral approaches to increase access to high-quality family planning services

ACHIEVEMENTS AND PROGRESS RESULTING FROM MULTISECTORAL APPROACHES:

- Established collaborative structures and processes for health and non-health sectors to conduct district-level interventions.
- Received signed commitments from community, cultural, and religious leaders from health and non-health sectors in five districts to support and promote FP use and pregnancy-prevention messaging and measure their own progress quarterly.
- Launched district-led activities to reduce high fertility rates.

Introduction

Uganda's total fertility rate of 5.4 children per woman is among the 10 highest in the world (UDHS 2016). Uganda also has one of the fastest population growth rates globally. To mitigate these challenges, U.S. Agency for International Development's (USAID) Advancing Partners & Communities project (APC) aims to ensure that all Ugandans have access to high-quality, voluntary family planning (FP) services.

Interventions at the community level have given political, religious, and cultural leaders information about the importance of FP while building the capacity of local leaders and MOH staff to coordinate and structure a multisectoral approach to increase uptake and ownership of FP programs. APC Uganda is leading these multisectoral approaches in five districts (Agago, Buyende, Butaleja, Kyegegwa, and Rubirizi).

Effective and sustainable health interventions are coordinated, multifaceted, and multisectoral, and leverage the resources and expertise of the public, faith-based, and private health sectors. This is especially the case with FP activities, for which partnerships across health and non-health sectors have great potential to create demand for and improve delivery of FP services. Experience shows that success with FP can help programs in other sectors, such as education, environment, and economic growth, reach their goals.

APC Uganda's Multisectoral Approaches to Advancing Family Planning

In recognition of the importance of Ugandan stakeholder support for FP use, APC Uganda partnered with the Government of Uganda's Ministry of Health and the National Population Council (NPC) of the Ministry of Finance, Planning and Economic Development. In addition, APC Uganda developed the capacity of cultural and religious leaders and community gatekeepers to lead evidence-informed interventions to increase FP access and uptake in all five project districts.

Collaborative planning and decision-making among multiple sectors

In each of the five districts, APC Uganda applied FHI 360's System-Wide Collaborative Action for Livelihoods and the Environment (SCALE+). This consensus-building approach is well suited to complex situations where multiple structures play key roles in generating change. SCALE+ is an ideal way to introduce new stakeholders to the long-term benefits of FP interventions.

APC Uganda is also committed to the sustainability of its activities, which SCALE+ reinforces by supporting local stakeholders to facilitate and guide consensus-building, which enables the NPC and Ugandan Ministry of Health to engage key district-level actors in related disciplines. The stages of the SCALE+ process, as adapted by APC, include:

- Landscape analysis and capacity needs assessment
- Catalyzing coalitions and partnerships
- Creating collaborative and sustainable solutions
- Ensuring accountability for action
- Evaluating value

To begin the SCALE+ process, APC worked closely with the NPC to conduct a landscape analysis to identify potential FP stakeholders who would help determine FP interventions. Once identified, each district composed a multisectoral FP working group including

TOOLS AND RESOURCES

SCALE+

<http://scaleplus.fhi360.org/>

RAPID Model

<https://www.avenirhealth.org/software-mobile-rapid.php>

Social Norms Exploration Tool

<http://irh.org/social-norms-exploration/>

representatives of the district technical team; political, cultural, and religious leaders; and implementing partners. The working groups meet monthly and were chaired by the office of the district's chief administrative officer and have committed to remain active after APC project closes.

As a critical next step, the APC team trained key district officials, including the district planner, health officer, and biostatistician, on Resources for the Awareness of Population Impact on Development (RAPID) model. RAPID projects the social and economic consequences of high fertility and rapid population growth for such sectors as labor, education, health, and agriculture.

APC used RAPID as part of its effort to build multisectoral coalitions in support of FP, including engagement of nontraditional partners such as ministries of education and finance, religious and civil society leaders, and other government sectors. In Buyende district, for example, officials learned about the long-term scenarios related to health and education (Figure 1). Participants discussed how a lower fertility rate would result in higher-quality education services with less burden on the infrastructure. With no change in FP measures in this district, there will be continued high enrollment with less classroom space and poor pupil-teacher, -latrine, and I-desk ratios.

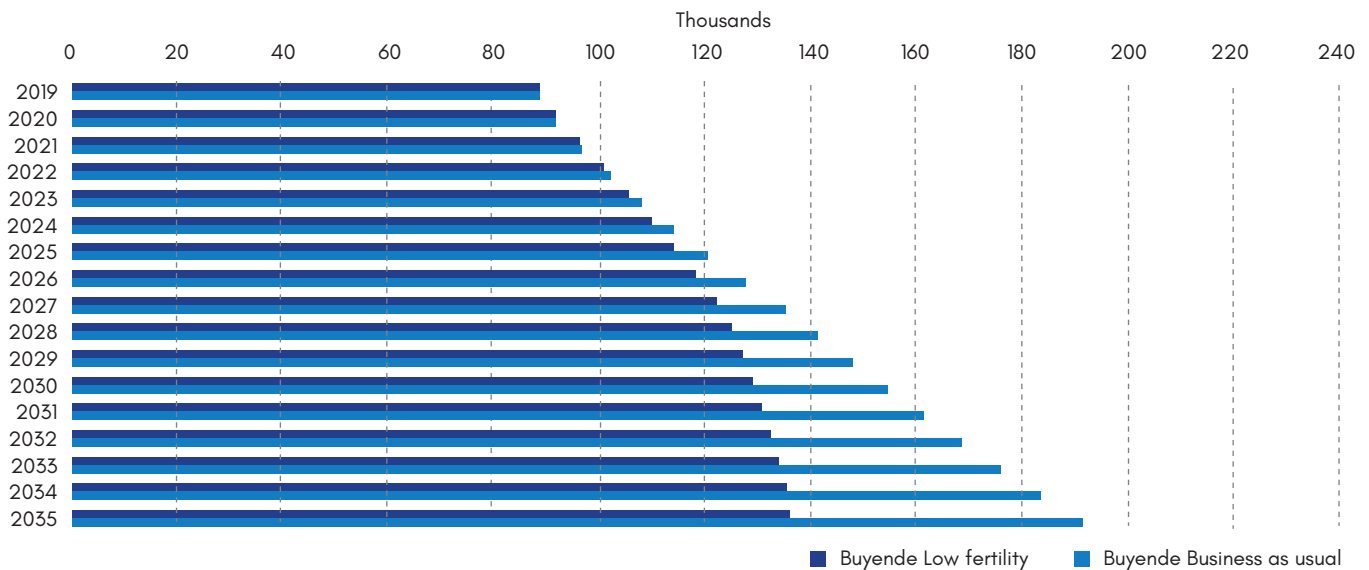
In addition to RAPID, hot-spot mapping and district health information system data were presented to show local officials the percentage of teenage pregnancy and the total fertility rate in their districts. The presentation of the data was reinforced by a social norms exploration exercise using the USAID funded PASSAGES Social Norms Exploration and Toolkit. The results helped participants understand how social norms influence behaviors that contribute to high teenage pregnancy rates and child marriage, and how negative attitudes toward modern contraceptives lead to high fertility rates.



Multisectoral FP working group working on RAPID modeling

Credit: Dennis Kibwola/FHI 360

Figure 1. Increasing Primary Student Population in Buyende, 2019–2035 (using RAPID Model)



A key outcome of planning among district stakeholders was a collaborative charter, developed, agreed on, and signed by religious leaders, political leaders, non-health sector participants, health workers, cultural leaders, and district technical teams. All five districts agreed to focus on and commit to activities to reduce teenage pregnancy, high fertility, and child marriage by disseminating FP information and linking community members to contraceptive access points.

Commitments to locally driven multisectoral and integrated interventions

Each APC district is now implementing a range of FP interventions led by the multisectoral working groups and included in the collaborative charters. Activities include mobilization and sensitization of community members and religious leaders on FP and the use of radio talk shows to share information and dispel myths and misconceptions about FP. Some districts, such as Kyegegwa, are focusing on activities to reduce desired family size, while Agago is introducing partnerships between the media and health workers to ensure accurate information on FP is reported. All districts are focused on changing social norms that contribute to high fertility rates. Below are additional examples of evidence-informed multisectoral activities supported by APC.

Emanzi Program

APC has supported district health leaders in several of its districts to implement Emanzi (“male role model” in Rukiga, the local language). Emanzi aims to improve relationships between women

and men, increase communication about sexuality and health, and promote shared decision-making. Village health team (VHT) members, work in pairs to facilitate this nine-session curriculum for groups of up to 15 men. In 2017, APC Uganda evaluated this program and found that men retained the information learned through the Emanzi and had lasting improvements in gender equitable attitudes. The multisectoral technical working groups in Agago, Kyegegwa, and Rubirizi implemented Emanzi in their districts because they identified male engagement as a critical factor in FP uptake and adolescent pregnancy. To date, more than 4,300 men, including more than 200 religious leaders have graduated from the program. Most of these groups continued to meet to discuss gender and health, and started income-generating activities to provide for their households.

Parenting Support Program

APC Uganda worked with the Tooro and Busoga Kingdoms to introduce parenting support and guidance in response to high indicators for teenage pregnancy, child marriage, adolescents with HIV, and children dropping out of school. The project facilitated discussions with kingdom officials, ministers, local leaders, and church officials on the best ways to implement parenting activities in the communities. Participants decided to vary the approach depending on the community, with emphasis placed on community dialogues with leaders and community members. Officials aim to mainstream parental support into other activities, promote role model parents to lead dialogues, and encourage girls to stay in school. Participants signed commitments at the end of these meetings to support approaches related to FP and agreed to supervise and monitor the community dialogues.

Table 1. Organizations and Innovation Grant Projects to Engage Youth in FP

District	Organization	Description
Agago	Action for Community Development	Peer cluster model: Train and support FP peer counselors, including in- and out-of-school youth, to lead dialogues on prevention of early marriage and pregnancy; link peer counselors to services through VHTs
Butaleja	Straight Talk Foundation	Pregnancy calculator - Ekimeza (debate): Facilitate discussions on income, unplanned pregnancy, and individual/family stability to help participants appreciate FP beyond health and birth control, and provide referrals to VHTs
Buyende	Health Development Initiatives	Peer-to-peer family planning model: Train and support young mothers to dispel FP myths and misconceptions among their peers through existing health and finance groups
Kyegegwa	Western Uganda Faith-Based Organization Networks	Youth Are Able and One Village at a Time models: Train and support faith leaders to reach young people and married adolescents with livelihood, life skills, and sexual reproductive health information
Rubirizi	EXP Momentum Uganda	Key influencers as advocates: Support advocates to engage gatekeepers on FP demand and uptake during community gatherings, radio broadcasts, service provider orientations, and market-day events; link to VHTs for referrals

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“Many of our people have surely neglected their parenting roles, and we believe this is the cause of many problems like school dropout of children, among others ... We are privileged to work with APC and staying committed to this cause.”

-DEPUTY PRIME MINISTER, TOORO KINGDOM

Innovative activities to support youth-oriented organizations

In 2018, to accelerate youth involvement in FP and improve knowledge, access, and use of reproductive health services, APC Uganda introduced innovation grants to support civil society organizations that engage youth. Twenty-two concepts were received in response to a call for applications. With support from USAID Uganda, APC facilitated a workshop during which the seven final organizations presented their innovations to a panel of judges. The five that were funded (one per district) engaged diverse group of stakeholders, such as religious leaders, to introduce and integrate FP concepts. A summary of each innovation grant appears in Table 1.

Conclusion

Multisector efforts focused on FP are still new in Uganda. These initial positive outcomes are important for convincing districts—and communities—of their value. A multisectoral FP WG is in place in each of the APC priority districts, with participation by grassroots implementers including religious and cultural leaders, FP champions, senior women teachers, Emanzi and parent role models, community development officers, and local council/political leaders. All five districts have committed to integrate FP into their work plans and budgets. Three districts have already committed funds for FP in the financial year 2019/2020.

In addition, all five districts are now using district-specific RAPID data models to provide statistics on population effects on the development of different sectors, and district leaders are using these data as a starting point to promote FP. The district chairpersons of Butaleja and Rubirizi have tasked their district health officers to give them health facility data to sensitize communities. NPC has found the RAPID model to be very effective, and it has decided to apply the model in each district. To date, it has introduced RAPID in 20 additional districts.

References

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