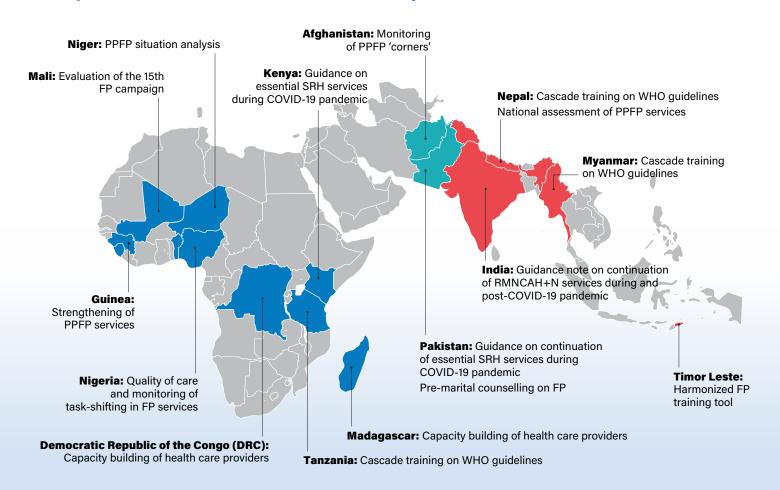


#### WHO FAMILY PLANNING ACCELERATOR PROJECT

#### Promoting quality and rights-based FP services

The WHO FP Accelerator Project continues to support partners and ministries of health (MoH) to accelerate quality and rights-based family Planning (FP) services within the broader frameworks of the Sustainable Development Goals (SDGs), universal health coverage (UHC) and the WHO 13th Global Programme of Work (GPW13). The project contributes specifically to attainment of SDG targets 3.1, 3.7 and 5.6, and to the GPW13 goal of 1 billion more people covered by UHC. The WHO FP Accelerator Project is coordinated by the Contraception and Fertility Care (CFC) Unit in the WHO Department of Sexual and Reproductive Health and Research (WHO/SRH) and implemented in collaboration with WHO's Regional and Country offices.

# Implementation of the FP Accelerator Project has commenced in 14 countries



# **COVID-19 AND FP**

# COVID-19 disrupted contraception and family planning services and demand

WHO declared coronavirus disease (COVID-19) to be a pandemic on 11th March 2020. To reduce the resulting community transmission, countries adopted emergency lockdown approaches to limit movement and interaction among citizens where feasible. In many places, this led to the disruption of various essential health care services including access to contraception and family planning (FP). Information was collected on the main ways COVID-19 has impacted FP service provision in the 14 Accelerator project focus countries. National approaches and WHO responses aimed at mitigating disruption of FP service provision were also assessed.

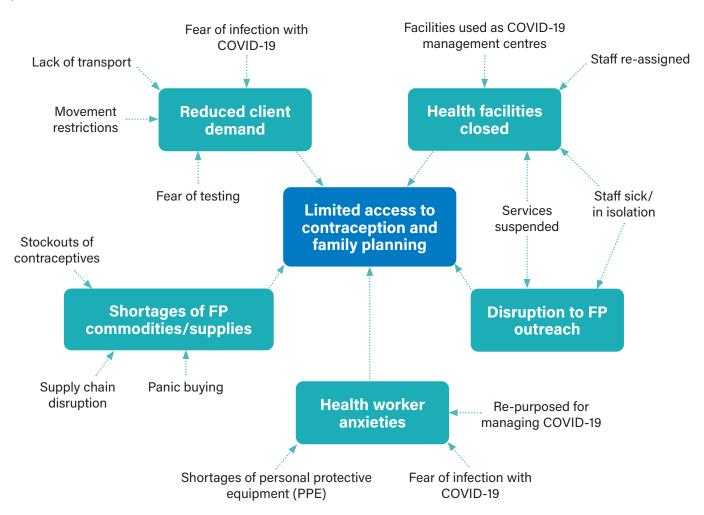


Figure 1. Impact of COVID-19 on contraception and family planning, services and demand

# Key resources to maintain essential FP services during COVID-19

- · WHO Essential health service guidance document (https://www.who.int/publications-detail/10665-332240)
- Q&A on Contraception/family planning during the COVID-19 pandemic (https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/contraception-family-planning-and-covid-19)
- Q&A on adolescents, youth (https://www.who.int/news-room/q-a-detail/q-a-for-adolescents-and-youth-related-to-covid-19)
- Q&A on coronavirus (https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub)
- Operational planning guidelines to support country preparedness and response (https://www.who.int/docs/default-source/coronaviruse/covid-19-sprp-unct-guidelines.pdf?sfvrsn=81ff43d8\_4)
- Recommendations for management of women during and after pregnancy, and breastfeeding (https://www.who.int/publications-detail/clinical-management-of-covid-19)
- Community-based health care guidance document (https://apps.who.int/iris/handle/10665/331975)

# **COVID-19 AND FP**

# National responses to ensure access to contraceptives and family planning

#### India

The most recent guidance note on reproductive, maternal, newborn, child and adolescent health plus nutrition (RMNCAH+N) services was published on 26th May 2020 by the India Ministry of Health. The Essential FP services include provision of all FP commodities: oral contraceptives, condoms, intrauterine devices, injectables, tubectomy, vasectomy, PPFP and post-abortion family planning (PAFP) services. FP providers have been trained on identifying COVID-19 symptoms, safe use of personal protective equipment (PPE), and case reporting. They are re-purposed to manage coronavirus cases. FP consultations are being provided through a helpline and telephone consultations.

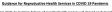
#### Kenya

As of 4th June 2020, Kenya reported 2216 COVID-19 cases and 74 related deaths. WHO has supported the development of service guidance to ensure continuity of national maternal and neonatal response, including FP services. Guidance is under development on RMNCAH at the community level, including standard message templates for community workers involved in telephone support.

#### Nepal

The first case of COVID-19 was reported in Nepal in mid-January 2020. The country was put under lockdown on 24th March 2020. A reduction of up to 40% in FP method distribution was observed. The WHO country office immediately activated an incident management system and collaborated with the National Health Training Centre on the translation of WHO COVID-19 training modules to facilitate wider dissemination to health care providers. Guidance was developed on ensuring continuity of RMNCAH services and support is being extended on the implementation of this guidance.

# Guidanne Note en Previolen of Empresiment, Merstraul, Newborn, Coldi, Addinesses Brain Fen Nurrisine (RNNCALIN), services during & post COVID-19 Panderine. Introducione and the second layer and all proposition, the gentine particul of Current loss register. In the control in the proposition of the superior and proposition the suggister controllation, remotion of the proposition of the superior and proposition of the superior controllation of the proposition of the superior of the proposition of different to the succession of the proposition of different to the succession of the proposition of different to the succession of the superior of the proposition of different to the succession w



capacity and burden of disease, and the COVID-19 transmission context (classified as no cozer, proportic, clusters, no community transmission). Maintaining population trust in the capacities that he that specified in the health facilities in the health system to safely meet essential meets and to centrol infection risk in health facilities in the year many many composities corressiving behinder and administration to public health administration of the proposities corressively behinder and empressive discourable proposities corressively behand and many control of the proposities corressively and control of the proposities corressively throughout an emergency, Infining direct mortality and advolving second service developer throughout an emergency, Infining direct mortality and advolving control of the proposities of

Analyses from the 2014-2015 table outbreak suggest that the increased number of deaths caused by measles, malaria, HIV/AIDS, and tuberculosis attributable to health system failures exceeded deaths from Ebola.

With a relatively limited COVID-19 caseload, health systems may have the capacity to maletal routine service delivery is addition to managing COVID-19 cases. When caseloads are high, and/or the health worldore is reduced due to infection of health workers, strategic shifts are required to ensure that increasingly limited resources provide maximum benefit for a population.

evidences of cluster or community transmission. The Government has locked down the couwith efforts to limit transmission through isolation of confirmed cases, quarantine of suspencases, community containment and social distancing.

regrants women do not appear more likely to contract the infection than the general population. Pregnancy Isted afters the body's immore system and response to viral infections in general, which can occasionally be relaxed to more severe symptoms and this will be the same or COVID-19. Care for pregnant and postnatal women is an essential service and should be lamned for along with other essential services.

to <u>Model</u>, and development partners have developed an intergency response in an intergency response in the global paindemic. Farryll Wilflare Division is the lead to recovered the production responsible for Preparedness and Response Plan aimed at continuty production health (Mill) services. The fill is sub-claster which respons to the Harth Cluster at Model Plan aimed at continuty to the production benefit in the sub-claster which respons to the Harth Cluster at Model Plan aimed at continuty and the sub-clast which respons to the Harth Cluster at Model Plan aimed at continuing and continuing care during pregnancy and children has below:

#### Nepal

#### Nigeria

The first COVID-19 case was confirmed on 27th February 2020. Lockdown was declared on 30th March 2020. FP commodities, initially not considered as essential services, were subsequently included. WHO is supporting the development of a guideline for pregnant women on continuity of services and a RMNCAH–COVID-19 continuation of services action plan.

#### **Pakistan**

Pakistan reported the first case of COVID-19 in Karachi on 26th February 2020. National lockdown was declared on 22nd March 2020. This impacted routine RMNCAH services including family planning provision. WHO supported the Ministry of National Health Services Regulations and Coordination in development of interim guidance on continuity of essential RMNCAH services.





# **COUNTRY NEWS**

# **FP Accelerator implementation continues**

## **Building capacity of health care providers**

#### Democratic Republic of Congo

A training-of-trainers was conducted among 30 provincial trainers from midwifery schools and 90 providers in three provinces (Kananga, Mbuji-Mayi and Tshikapa) in Kasai, focused on long-acting reversible contraceptive methods and the PPFP counselling tool.

#### Madagascar

The National FP Committee met in February 2020 to evaluate the Integrated Strategic Plan for Family Planning and Reproductive Health Products Security (2016-2020) and to make recommendations for the next five-year plan (2021-2025).

A training-of-trainers session was held for 21 reproductive health/ FP district managers on integrated FP curricula, which they will cascade in thier respective districts.



#### India, Myanmar, Nepal and Tanzania

Developed plans to cascade training on WHO guidelines to national midwives and obstetricians/gynaecologists. Workshops scheduled in May to July 2020 have been postponed due to the COVID-19 outbreak.

#### Postpartum family planning programme

## Nepal and Niger

Nepal and Niger commenced analysis of their national postpartum family planning programmes. A desk review was completed in Nepal. Following the analyses, recommendations will be made available to the ministry of health. In Niger, under the oversight of the Director of Family Planning, a technical committee of representatives of WHO, United Nations Population Fund (UNFPA), United Stated Agency for International Development (USAID), Pathfinder International and other implementing partners was established for conducting a situational analysis of PPFP programme in Niger. Data collection and analysis will begin in July 2020.



#### **Quality of FP services**

#### Nigeria

WHO is providing support to the Nigeria Federal Ministry of Health to improve the quality of care in family planning. An implementation guide is being developed in line with the health system-based WHO Quality of care (QOC) framework, WHO will initially support its implementation at a sub-national level through integration into existing monitoring initiatives.

#### Harmonized national document

#### Timor Leste

A national FP training tool has been developed based on the WHO Training resource package (TRP).

#### South-South learning exchange

#### Guinea, Nepal, Nigeria and Pakistan

These countries have embarked on S-S learning exchange to strengthen PPFP. Countries have identified learning objectives and are in discussion with mentors and implementing partners.

# **UPDATE FROM REGIONAL OFFICES AND HQ**

# **FP Accelerator Project monthly meetings**

A virtual meeting was held on 26th May 2020 to review the progress of the FP Accelerator Project. The meeting was attended by staff from WHO country offices, WHO Regional Office for Africa and South-East Asia, as well as headquarters. Participants shared observations of the impact on national responses to facilitate continuity of essential FP services.

A second virtual meeting was held on 23rd June 2020, during which countries gave an update on Accelerator progress. Countries will submit updated plans for 2020–2021.



- ➤ The WHO Regional Office for South-East Asia, UNFPA and the United Nations Children's Fund (UNICEF) published guidance on 'Continuing essential sexual reproductive, maternal, neonatal, child and adolescent health services during COVID-19 pandemic.' The set of two documents provide operational guidance and reviews practical considerations to countries for preparing a continuity plan for maintaining good quality and equitable RMNCAH services during the COVID-19 pandemic.
- WHO presented 'Implications of COVID for family planning services' and on 'WHO leadership, guidance, technical support and research' at the IBP webinar on COVID-19.
- ▶ WHO, the FP2020 partnership and the International Youth Alliance for Family Planning co-organized a live Q&A session on COVID-19 and SRHR for young people. Approximately 300–400 young people participated in the webinar, which took place on 14th May 2020 in English (with French translation).
- WHO contributed to a webinar organized by the Indian Academy of Paediatrics (IAP) on 22nd May 2020. Entitled 'Responding to the sexual and reproductive health needs of adolescents in the context of the COVID-19 pandemic,' the event had a particular focus on contraception.
- On 4th June 2020, the IBP Network and the FP2020 partnership hosted a webinar on family planning in humanitarian settings. The webinar highlighted the High Impact Practices (HIP) 'Family planning in humanitarian settings: A strategic planning guide' and featured speakers from FP2020, the International Planned Parenthood Federation (IPPF) East and South East Asia Regional Office, UNFPA Indonesia, and the Women's Refugee Commission. Over 250 participants joined the live webinar from around the world.



- **Nigeria:** Annual review and planning for the WHO FP Accelerator Project (August 2020)
- **Geneva:** Review lessons learned in strengthening PPFP services in countries (September 2020)



We invite you to post experiences and lessons learned during implementation of the FP Accelerator project with us.

# FAMILY PLANNING >>>> ACCELERATOR PROJECT

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#### **DISCLAIMER**

The content of this publication does not necessarily represent the views, decisions or policies of the World Health Organisation. Responsibility for the information and views expressed in the publication lies entirely with the authors. This newsletter is designed for those involved or interested in the FP-Accelerator project at WHO Headquarters, Regional and country offices. It features current and upcoming activities, accomplishments by the team and useful resources and will be distributed quarterly. We welcome submissions of project updates by any team member for inclusion in the next newsletter, scheduled for September 2020.

For more information, kindly contact: Dr Rita Kabra, WHO FP-Accelerator project manager, kabrar@who.int