FACTSHEET
FAMILY PLANNING 2020
NEW COMMITMENTS
2018

COUNTRIES
NEW: Egypt, Sri Lanka, the Kyrgyz Republic

ORGANIZATIONS
NEW: Copper Rose in Zambia, Promundo, Les Ailes Du Coeur
COUNTRIES

Egypt

The Government of Egypt committed to:

- Reduce unmet need for family planning from 12.6% in 2014 to 10.6% by 2020, and the 12-month discontinuation rate from 29% in 2014 to 24% by 2020.
- Increase the prevalence rate of all contraceptive methods among married women (CPR) from 58.5% in 2014 to 62.8% by 2020.

The Government of Egypt also pledged to adhere to the agreements made in the 2017 Cairo Declaration for Woman’s Health. The government will increase the national budget for contraceptive commodities by 20-30% annually to secure a sustainable supply that corresponds to national needs. The government is committed to providing contraception free of charge to poor communities and populations in remote areas.

Egypt will develop a national five-year plan to forecast future needs, procure and distribute resources accordingly, and will strengthen the Ministry of Health and Population’s commodity supply chain management system. The government also pledges to integrate family planning services with other primary health care services such as antenatal counseling and postpartum care, vaccination, and healthy child follow-up visits; to update the national standards of practice according to recent WHO standards; and to scale up partnerships with the curative sector, nongovernmental organizations, and the private sector.

Sri Lanka

The Government of Sri Lanka committed to:

- Increase the percentage of eligible families* who have their need for family planning satisfied with modern methods from 74.2% (DHS 2016) to 79.0% by 2025.

Sri Lanka’s family planning program has been integrated with maternal and child health services since the 1960s and is covered under the broader National Maternal and Child Health Policy of Sri Lanka. To improve family planning performance and address newly emerging challenges, the Ministry of Health, Nutrition, and Indigenous Medicine will develop a National Family Planning Policy in 2018. Necessary interventions will be implemented to address unmet need for contraception, strengthen and expand service delivery, promote a rights-based approach to care, and ensure the right of all women of reproductive age to quality family planning services. A multi-year costed implementation plan will be drafted in 2018 through a consultative process.

The Government of Sri Lanka pledges to include a budget line for reproductive health in the national budget of 2019. The Ministry of Health, Nutrition, and Indigenous Medicine will make adequate financial allocations for existing as well as new family planning interventions and will
procure the required amounts of contraceptive commodities. The current policy of free family planning services in the public health sector will continue for all temporary and permanent methods.

*The Government of Sri Lanka currently tracks family planning data in terms of “eligible families,” but the provision of family planning services does not exclude clients by their marital status, age, or gender.

**The Kyrgyz Republic**

The Government of the Kyrgyz Republic committed to:

- Strengthen political will in the implementation of the family planning program to achieve the Republic’s commitments under the Sustainable Development Goals.
- Finance family planning to ensure a reliable supply and reasonable use of modern means of contraception for vulnerable segments of the female population; and
- Provide quality health services for family planning through the implementation of WHO recommendations and raising awareness among the population about family planning.

The Government of the Kyrgyz Republic pledged to increase public funding for the purchase of contraceptives in 2019 by at least one million soms as compared to 2018. The government will develop a five-year plan to gradually increase public funding to meet the needs of 50% of women at high risk of maternal mortality by 2023.

The Kyrgyz Republic intends to develop a costed implementation plan for 2019-2030 to protect the health of women, newborns, children, and adolescents. The government is committed to increasing the contraceptive prevalence rate among women of reproductive age to 30% by the end of 2020.

**ORGANIZATIONS**

**Copper Rose in Zambia**

Copper Rose Zambia commits to:

- Training at least 100 peer educators who will work in youth friendly spaces increasing access to family planning services in Eastern, Copperbelt, Southern and Lusaka provinces of Zambia by 2020. The peer educators will be young people between 19 and 24 with a target outreach of adolescents and youth between 10 and 35.
- Providing information about family planning and linkage to services to at least 20,000 adolescents and youth in Zambia by 2020. CRZ will conduct workshops, awareness sessions and use mainstream media to engage young people to increase uptake of family planning services.
By working with partners, CRZ will provide youth friendly services by youth for youth whilst linking young people to services in second and third level facilities that may not be available at primary healthcare sites.

By committing to provision of youth friendly services, CRZ will be contributing to the FP2020 targets to ensure that young people have access to life saving prevention, treatment and care, where and when they need it.

**Promundo**

By 2020, Promundo commits to:

- Developing a “Getting to Equal” initiative to advance the conversation on the engagement of men and boys in sexual and reproductive health and rights (SRHR) and gender equality globally, contributing to the promotion of rights-based family planning to achieve FP2020 goals, Universal Health Coverage, and the Sustainable Development Goals.
  - This initiative will include: 1) A Call to Action brief providing guiding principles and key areas for strengthening global and national action on men, gender equality, and SRHR, with inputs from experts around the globe 2) A landmark report on men, gender equality, and SRHR showcasing trends, patterns, and gaps related to the ways in which norms and social pressures around masculine sexuality, fertility, and family size are associated with SRHR behaviors, couples communication, and decision-making; 3) A report with FP2020 and Hardee Associates analyzing Costed Implementation Plans and other national planning documents to assess to what extent male engagement is included, and 4) Evidence gathered from one-on-one interviews with approximately 20 FP2020 country focal points to understand challenges and successes of implementing male engagement and a rights-based family planning focus during the 2012-2020 period, and opportunities for greater male engagement and rights based FP implementation post-2020.

**Les Ailes Du Coeur**

Les Ailes Du Coeur commits to:

- Training 260 young leaders (18-30 years old) across DRC with relevant skills in evidence-based adolescent health advocacy and accountability to advocate at national and sub-national levels to make adolescent health, particularly sexual and reproductive health, a priority on roadmaps by 2020 (The DSCRP 2017-2021, the PNDS 2016-2020).
- Offering ongoing support to enable youth to gain the skills, knowledge, and resources they need to understand and advocate for comprehensive sexual and reproductive health and rights through sub-national workshops.
Then later, the 260 trained young leaders will conduct 40 advocacy activities addressing the suppression of barriers such as meetings with members of parliament on topics like age restrictions, parental or marital consent, talks with confessional leaders (churchmen and women) about access to comprehensive sexual education, integrated youth-friendly information and contraceptive and safe abortion services, roundtables with public and private sector on method restrictions based on parity, financial resources, to help prioritize Adolescents and Youth’s reproductive health and rights on the national agenda.