

Mali context analysis for accountability interventions to support the delivery of FP2020 commitments

This country brief is part of a series of briefs produced by Action2020, a consortium led by Christian Aid and implemented by Christian Aid, Plan International UK and the HIV/AIDS Alliance. It follows an in-depth investigation into the context and opportunities for civil society-led accountability on family planning in 10 countries, with a focus on the commitments made by Governments as part of FP2020's global initiative to meet the need of an additional 120 million new contraceptive users by 2020. Each brief provides a country-specific overview of the context for family planning commitments - the power, politics and potential for accountability interventions related to these commitments – and proposes recommendations for accountability interventions related to these commitmentsⁱ. A general note on Lessons Learned in FP Accountability accompanies this seriesⁱⁱ.

The right to enjoy full, free and informed access to contraceptive information, services and supplies is central to sexual and reproductive health and rights, as well as to the right to the highest attainable standard of health. These rights are universal, inalienable and indivisible, and States have a duty to respect, protect and fulfil these rights to the maximum of their available resources. There are a range of barriers and opportunities that either prevent or enable access to FP. Power, governance and accountability and women's participation and leadership all influence the outcomes and capacity of key actors to deliver for FP.

The Malian Government made commitments to increase access to Family Planning (FP) as part of FP2020 to take the measures within their remit to address some of these barriers. Implementation of FP2020 commitments has the potential to transform family planning provision, extending high quality services at scale and reaching the most marginalised. But entrenched institutional challenges and competing priorities in Mali are slowing progress. Accountability interventions can alter this trend by working with a range of actors so that governments and service providers are better able to meet the commitments they have made, leveraging a scale of impact which would be unachievable by alternative interventions.



Family planning context in Mali

- Unmet need for Family Planning: 26% (DHS V Mali 2012-2013)
- Contraceptive prevalence rate: 11.2%
- Total fertility rate: 6.1
- Maternal mortality ratio: 587 per 100,000 births (2015)

Source:

<http://data.worldbank.org/indicator/SH.STA.MMRT>

While the wider constraints to increase FP uptake in Mali limit the scope of social accountability interventions, there are still areas where accountability can play a significant role.

To achieve this, social accountability programmes must be 'strategic': pursuing multiple pathways to change, creating an enabling environment for collective action and linking citizen mobilisation to agents within governments with similar incentives³. Interventions must link citizens to authorities with the necessary capacity to enforce agreements in order to achieve substantial outcomes^{4 5}. When applied in tandem, these strategies may increase political incentives to act, and facilitate oversight and reflexive evaluation of barriers, gaps and opportunities for FP by all stakeholders.

FP2020 commitment:

Increase the rate of contraceptive use in Mali, moving from 9.9% in 2012 to at least 15% by 2018, through the reduction of unmet need for family planning and by targeting teens and young adults (ages 15 to 24).

Progress to date:

Contraceptive prevalence rate has increased at a rate of 0.6% per year since 2012, meaning that Mali will not meet its commitment at the current rate of progress. Limited data is available on ages 15-24, however among married adolescents (15-19) only 3.4% are using a modern contraception method and 55.4% have an unmet need. It is likely that unmarried adolescents have an even higher unmet need.

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Strategic accountability interventions in Mali

Effective accountability rests on an enabling governance environment where the state has both the capacity and incentives to respond, and where citizens are able to mobilise collectively^{6 7 8}. The context in Mali for family planning accountability is mixed. Support for participatory approaches and democratic engagement is growing. However, the environment remains conservative with limited opportunity for high profile civil society engagement, low institutional commitment towards family planning, and low the capacity of government and service providers to respond to citizens' demands.

Notwithstanding these challenges, progress accomplished in the field of democracy in the country, as attested by the existence of independent media and decentralization, and the subsequent transfer of power to local authorities, offers a model for the resolution of the issues of accountability identified. Approaches that seek to involve the communities at local level and to

monitor the delivery of community services, combined with lobbying of higher level authorities will be essential in taking the services to those who demand them.

The key pathways to effective FP accountability in Mali can be conceptualised as three overlapping components, outlined below. For interventions to be successful, they must start by identifying the prevailing drivers and political incentives/disincentives to develop smart, context specific strategies for securing change^{9,10}. It is likely that informal and technical channels will be most effective, alongside supporting nascent vertical accountability efforts.



Figure 1: Key Pathways to Effective FP Accountability

The following section explores the context and opportunities for action in Mali using these three pathways as a framework for analysis.

Enhanced citizens' voice and agency Problem Analysis:

Communities and stakeholders in Mali have a limited understanding of rights provided within national level policies and international agreements, including how to hold the government and service providers to account for these rights. Women's status remains low, and a conservative socio-cultural environment provides an overall frame for uptake and provision of services, in turn further restricting voice and agency for women and other marginalised groups. Socio-cultural norms around unmarried youth accessing to FP pose a challenge to Mali's focus on youth access within the FP2020 commitment, and raise questions as to whether youth policies and service provision will address the needs of all youth regardless of marital status.

To mitigate views that FP opposes the natural order of procreation, FP is referred to as Planning and Ideal Spacing out of Pregnancies for Health. Demand for FP remains low, with a survey in 2013 finding that nearly 60% of women of child bearing age did not express any desire to space out or limit childbirth and therefore, had no interest in FP¹¹. However, the relatively high unmet need demonstrates that demand exists.

Mali has implemented a decentralization policy for its health system since 1990. This decentralization of the health system was followed by the decentralization of the administration, beginning in the year 2000. These decentralization policies naturally create an enabling environment for local decision making in favour of FP, but they are also sources of challenges resulting from the new distribution of power at the local level. Women are traditionally excluded from decision-making bodies, and similarly, adolescents and youth have weak leadership capacities and virtually no voice in decision-making¹². In this context, political leaders tend to adopt conservative positions on FP prior to an election in order to win more conservative votes.

Recommendations for action:

- Given the decentralization of decision making in Mali, building the capacity of communities to carry out citizen actions can support FP gains. This can be achieved through with Community Health Association (ASACO) to develop their capacity to monitor stockouts, local budgets and to engage with service provision.
- The low representation by women and young people within decentralized processes suggests a need for greater attention to the relationship between gender and power, and the creation of spaces for female leaders to participate in decision making bodies on FP.
- Given the relatively low demand for FP, accountability interventions would need to identify and further stimulate pockets of demand as a precondition to productive and authentic citizen engagement.

Increased political space for state-citizen engagement Problem Analysis:

To date, Malian civil society has not undertaken sustained collective accountability interventions in the sphere of family planning. The space for civil society to undertake accountability is limited, although findings through Action2020 suggest that where organizations are able to build trust and establish credibility, it is likely that the government will be willing to take on board recommendations.

The Malian constitution of January 1992 guarantees freedom of speech and of the press. In practice, State influence over media is quite high, with State media reporting directly to the Ministry of Communication. Private media also experiences State influence through ownership by politicians, economic operators or due to reliance on State contracts. Community radio has somewhat more separation from politics. The potential to make use of media for accountability gains depends to some extent on having developed existing relationships between civil society groups and media as well as the level of challenge this would present to the State.

Evidence suggests that where the state is less able to offer credible incentives and sanctions, as is the case in Mali, accountability interventions are most effective when used to provide a venue to solve local level collective action problems. This will necessarily involve engagement with a more diverse range of actors (including state officials, local leaders, faith groups, local councillors and more)¹³.

In Mali, there may be particular value in working through coalitions which spread the risk of retaliation among members¹⁴, and strategies which support collaborative rather than contentious accountability styles may be more appropriate¹⁵. Understanding the formal and informal 'rules of the game', identifying the interests and motivations of duty bearers and building relations with pro-reform actors can lead to 'smart' accountability interventions.

There are several 'champions' for FP at various levels of government who have played a critical role in helping to ensure commodity security and demonstrated willingness to work to overcome stockouts and shortcomings in the current system. Religious leaders were also identified as potential allies, occupying both decision making and influencing positions with government, service providers and communities.

Recommendations for action:

- Accountability interventions that create space for dialogue between groups may be most effective in facilitating problem solving with regard to FP in Mali. Some examples include: public hearings, community monitoring, community report cards and community score cards.
- Use of the media may help to open up interface spaces and galvanise support for FP, providing this is done with consideration of the prevailing context for media. Whilst clarifying myths related to FP may be feasible, care would be needed in the framing of more testing accountability messages.
- Strategies to engage communities and gatekeepers will be key, as will adapting to the significant regional variations that exist. Religious leaders can be important pro-reform allies and can engage at multiple levels.

Open, inclusive, responsive and accountable institutions Problem Analysis:

The Malian Government has demonstrated its interest in meeting the unmet need for family planning. Alongside ratifying international conventions and treaties on FP, the 2002 Reproductive Health Law guarantees the right of women to freely seek contraception regardless of her age or marital status. However, there are gaps between legal and policy provision and implementation. The Reproductive Health Law has not been widely disseminated, and service providers continue to be harassed for distributing contraceptives to clients without the prior consent of third parties. Low awareness and social stigma means that few women have challenged the law's enforcement at service or policy level. To date there is also no clear strategy to reach youth despite being a focus within Mali's FP2020 commitment. Institutional accountability mechanisms at the local level are weak, particularly those that are meant to respond to the needs of youth and women.

FP is funded mainly (96.6%) by development partners, which raises questions about sustainability. The current health budget has decreased since 2002 and at 5.6%¹⁶ is far lower than the Abuja objective of 10%. To date, funding for The National Family Planning Action Plan is at \$24.9 million (75.4% of overall cost), leaving a deficit of \$8.1 million and political inertia undermines progress. Contraceptive stock outs are common and there is no specific line item in the Ministry of Health budget¹⁷ which hampers tracking the FP2020 target of a 5% increase in funding.

FP commodities are on the essential drugs list for government health centres, but many rural Malians do not have access to government health centres and so rely on the private sector, where commodities must be purchased. Healthcare coverage is low, with only 59% of the population having access to a health facility offering the Minimum Activity Package including RH/FP within a radius of 5 Km¹⁸.

The percentage of health facilities offering at least three methods of contraception (pills, injectable products, DIU or implant) is low at around 30.6%, with implications for women's right to quality and an appropriate method mix to reflect their FP choices. Infrastructure to deliver is insufficient in both quality and quantity, and staff distribution significantly disadvantages rural women, with 63% of health staff working for 22.5% of the population of the country in urban areas.

The political crisis in Mali poses an additional challenge. The 2012-2013 coup and occupation of the northern half of the country by separatist and jihadist armed groups continues to affect the country's stability. A process was initiated to restore constitutional order with the support of the international community. This was followed by presidential and legislative elections and the signing in 2015 of a peace agreement with the separatists. However, the disarmament and confinement of the rebels are still not effective and the security situation in the north remains precarious. The administration and the staff of health services are yet to be redeployed, in particular in Kidal. In essence, no government provided FP services exist in these regions. Moreover, given the crisis in which the country has found itself, the government has little bandwidth for other issues, much less controversial ones like FP.

Recommendations for action:

- Working with the supply side of accountability, actors can support progress by building the capacity of service providers to fulfill their RH/FP obligations, including through advocating for strengthened management and logistics skills of staff in charge of contraceptives, the creation of a specific budget line for FP commodities, and considering strategies to increase the proportion of contraceptives purchased by the State.
- Interventions might include engaging with the Ministry of Health to develop and publicly articulate its strategy for achieving FP2020 targets, and the Reproductive Health Law including details of the official pricing of contraceptives.
- Broadening the support base for FP may start by engaging with the Ministry of Youth to explore how it can support the particular

emphasis on the needs of youth within FP2020 commitments, and at a local level working in partnership with youth associations towards youth friendly RH/FP services.

Conclusions and general recommendations

To date, the lack of progress towards FP2020 commitments has not sparked citizen demand for accountability in Mali. While decentralization of services offers an opportunity for citizen-driven accountability at the local level, demand-driven approaches depend, by definition, on demand. With so few Malians interested in FP services, cultivating that demand will likely be a pre-condition to productive and authentic citizen engagement. Moreover, citizen driven accountability approaches will face additional obstacles that are unique to sensitive sectors such as family planning. In Mali, family planning services are likely to be most important to a small, vulnerable, and/or politically powerless subset of the population. Conservative culture will also likely undermine candid, public deliberation about government performance. In order to protect the confidentiality of FP service users, civil society will need to find creative ways to allow for service user feedback. In this context, traditional social accountability mechanisms, like score cards, social audits, and budget tracking tools will need to be carefully adapted in order to be relevant.

Pursuing accountability for FP in Mali will involve a multi-faceted strategy working at all levels. Building the capacity of civil society organizations to advocate for FP accountability is critical. This might include building the capacities of civil society to advocate for budget transparency and to monitor the RH/FP budget, developing shadow reports, and supporting civil society organizations to engage directly with elected officials and heads of services on commitments and progress to date, and to highlight disparities in service provision. Likewise, religious groups that are supportive of FP can be important allies, and it may be beneficial to strengthen their capacity to promote FP and to counter myths surrounding family planning.

There is much to build upon at the state level, with evidence of commitments to women's rights to full, free and informed access to family planning. At the same time, political will is limited. In this turbulent context with limited attention to FP, civil society will need to consider how to balance the urgency of action with the realistic possibilities of success and find ways to frame the issue that resonate with the broader issues under discussion. Significant progress may be made through working strategically with state actors to resolve supply side barriers that currently limit the capacity of institutions to respond.

ⁱ This brief is based on a full Country Context Analysis, available on request from Christian Aid and Plan International UK.

ⁱⁱ Also available on request from Christian Aid and Plan International UK.

³ Fox, J.A. (2007) The Uncertain Relationship Between Transparency and Accountability. *Development in Practice* 17(4): 663-671; and Fox, J.A. (2014) Social accountability: What does the evidence really say? GPSA Working Paper No. 1

⁴ Mansuri, G., & Rao, V. (2012). *Localizing Development: Does Participation Work?* Washington, DC: World Bank

⁵ World Bank (WDR) (2014) *World Development Report: Making Services Work for the Poor*. Washington, DC: World Bank

⁶ Wales J. and F. Smith (December 2014) Initial review – Evidence on social accountability in fragile states

⁷ Fox, J.A. (2007) The Uncertain Relationship Between Transparency and Accountability. *Development in Practice* 17(4): 663-671

⁸ Mansuri, G., & Rao, V. (2012). *Localizing Development: Does Participation Work?* Washington, DC: World Bank

⁹ O'Meally, S. C. (2013). *Mapping context for social accountability*. Washington DC: Social Development Department, World Bank

¹⁰ World Bank (WDR) (2014) *World Development Report: Making Services Work for the Poor*. Washington, DC: World Bank

¹¹ 2014-2018 Family Planning National Action Plan of Mali

¹² 2014-2018 Family Planning National Action Plan of Mali

¹³ Wales J. and F. Smith (December 2014) Initial review – Evidence on social accountability in fragile states

¹⁴ O'Meally, S. C. (2013). *Mapping context for social accountability*. Washington DC: Social Development Department, World Bank

¹⁵ Joshi, A. (2013). Context matters a causal chain approach to unpacking social accountability interventions IDS

¹⁶ Citizen budget of Mali, 2015 Finance Law

¹⁷ Ministry of Finances: Situational analysis of the implementation of BE as of 30-06-2015 _ Mali

¹⁸ 2011 Statistics Directory of 9 January 2013, Mali