

EGYPT'S COMMITMENT TO ENHANCE
FAMILY PLANNING



WITH

FP2020 GLOBAL
AND IN COLLABORATION WITH
UNFPA and USAID

The Government of Egypt, pledges to:

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

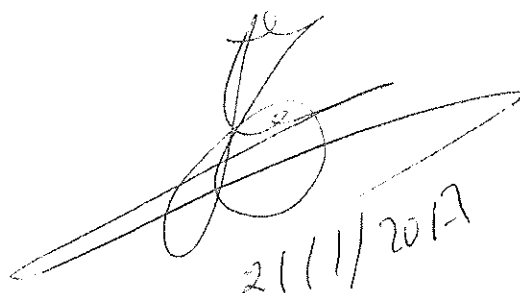
The Government of Egypt commits to:

Policy and political commitment

1. Adhering to the agreements to be made in the 2017 Cairo Declaration for Woman's Health.
2. Strengthening Ministry of Health and Population's (MoHP) commodity supply chain management system.
3. Launching the "Logo for Excellence" in family planning clinics considered centers of excellence in providing quality services.
4. Improving the quality of human resources and services to attract new users and increase couple years of protection from pregnancy provided by contraceptives in a year.
5. Implementing the recent ministerial decree for the Contraceptive Security Committee to secure the provision of contraceptive commodities.

Financial commitment

1. Increasing the national budget allocated to procurement of contraceptive commodities by 20-30% annually to secure a sustainable supply that correspond to national needs; budget for the year 2016/17 is 130 million Egyptian pounds.
2. Continuing the financial support provided by MoHP to physicians seconded to NGOs.

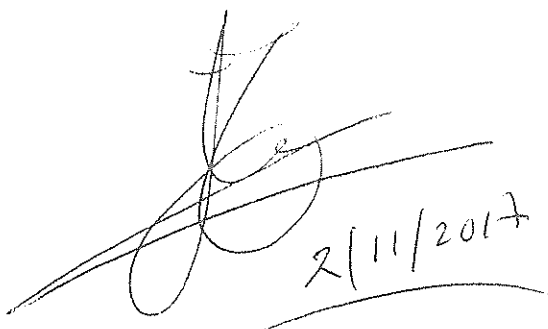

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3. In collaboration with the Ministry of Finance, creating specific budget lines for support of private physicians to remote areas.
4. Providing contraception free of charge to poor communities and populations in remote areas.

Programmatic commitment

1. Developing a national five-year plan to forecast future needs, procure and distribute resources accordingly.
2. Updating the national standards of practice according to recent WHO standards and build the capacity of service providers at all levels.
3. Improving the quality of counseling provided to clients through updating and widely disseminating FP counseling guidelines.
4. Upgrading the supervision system to monitor the quality of service and link it to the Health Insurance System.
5. Scaling-up partnerships with the curative sector, nongovernmental organizations and the private sector through providing them with national guidelines, training of service providers on updated standards of practice and provision of FP services.
6. Integrating family planning services with other primary health care services such as antenatal counseling and post-partum care, vaccination, and healthy child follow-up visits.
7. Designing and implementing operational research to explore the system gaps and accordingly implement relevant corrective actions.
8. Increasing acceptability of FP services by improving the knowledge of sexual and reproductive health and family planning through national campaigns, especially in remote areas.
9. Increasing demand for FP, through advocacy and media, and conducting health education seminars for women of reproductive age in health facilities or through counseling during home visits by community outreach workers.
10. Formalizing policies for provision of family planning services through task-sharing among different levels of health care providers especially in remote areas.
11. Addressing regions with poor indicators from the 2014 Demographic and Health Survey (total fertility rates greater than 3, unmet need greater than 13%, CPR less than the national average), such as rural Upper Egypt, through interventions that will improve those indicators and periodically evaluation the interventions to improve sexual and reproductive health.
12. Activating the post-service follow-up system to monitor existing users, discontinuation and change of methods, and unintended pregnancies, as well as activating the referral system at all levels.


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13. Improving postpartum and post abortion contraception by placing FP counselors in hospitals' departments of obstetrics and gynecology who will provide FP counseling and relay health messages.
14. Ensuring availability of contraceptive commodities at all levels of service provision, expanding and monitoring the use of contraceptives.

Prof. Dr. Ahmed Emad El Din

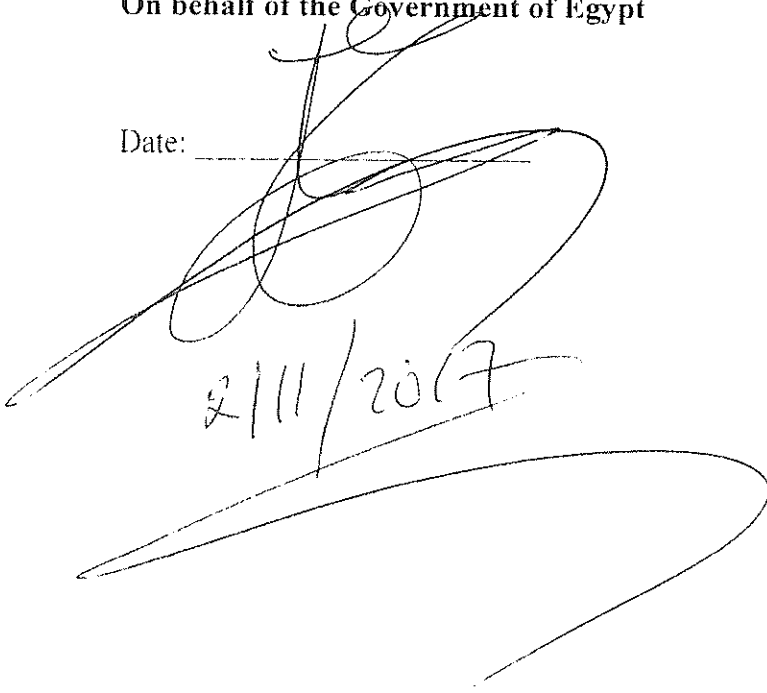
Minister of Health and Population

Ministry of Health and Population

Egypt

On behalf of the Government of Egypt

Date: _____



2/11/2017

Dr. Aleksandar Sasha Bodiroza

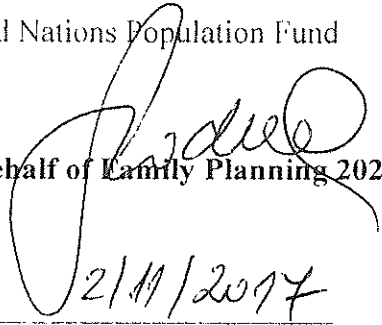
Representative

United Nations Population Fund

Egypt

On behalf of Family Planning 2020

Date: _____



2/11/2017