

# FP2020 Commitment 2019 Update Questionnaire MOZAMBIQUE



The FP2020 Secretariat surveys FP2020 commitment makers annually to track progress made, activities undertaken, and challenges faced toward fulfilling commitments. We kindly ask you to complete the FP2020 Commitment 2019 Update Questionnaire for Mozambique, by **5 July 2019**. Your responses support greater information and knowledge sharing, transparency, and accountability among the growing number of FP2020 commitment makers and the broader family planning community. As in previous years, we will share your responses on your country's dedicated country webpage (<http://www.familyplanning2020.org/mozambique>) so in-country and global stakeholders alike can follow Mozambique's progress in reaching the ambitious goals set on behalf of the women, girls, families, and communities in your country.

FP2020 commitments can be achieved with coordinated actions across multiple sectors and partners at various levels. We hope this will be an opportunity for you to engage with your country focal point team, including youth focal point, and family planning stakeholders in country to jointly review progress.

Please note that the self-reporting process complements the national family planning data consensus workshops that take place during the same time period. If the data consensus workshop for Mozambique is scheduled after **5 July 2019**, please let us know so we can discuss how to align the commitment reporting deadline to ensure results from each process are compatible.

Please complete the attached Word document and submit to Martyn Smith [msmith@familyplanning2020.org](mailto:msmith@familyplanning2020.org) and Krista Newhouse [knewhouse@familyplanning2020.org](mailto:knewhouse@familyplanning2020.org) with a copy to Onyinye Edeh [oedeh@familyplanning2020.org](mailto:oedeh@familyplanning2020.org). Should you have any questions or concerns, please contact Onyinye on [oedeh@familyplanning2020.org](mailto:oedeh@familyplanning2020.org).

Additionally, the Core Conveners of FP2020 are currently gathering input to build a shared vision for family planning post-2020. We look forward to learning from your response and appreciate your partnership in delivering on the promise that is FP2020.

Thank you for your time and effort to fill out this questionnaire and provide useful information for the broader partnership.

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The questionnaire includes 1) the 2017 revitalized commitment and elements of Mozambique's original commitment that still stand, and 2) seven standard questions to all FP2020 commitment-making countries.

As you provide your updates below on each element of your commitment, kindly focus on:

- **Progress made** and **key challenges or barriers** you faced, during the **July 2018 - June 2019 period**.
- Please also include information on **any key upcoming commitment-related milestones**.
- Lastly, we invite you to reflect on progress per commitment through a **self-assessment**.

## SECTION I: QUESTIONNAIRE FOR COMMITMENT UPDATE

### COMMITMENT OVERVIEW

Mozambique commits to: 1) increase the use of modern contraceptive methods for adolescents (15-19 years old) from 14.1% to 19.3% in 2020; 2) provide FP services (information and contraceptives) in all secondary schools by 2020; and ensure that 30% of all health public facilities use electronic stock management information system including contraceptives by 2020.

1. **COMMITMENT:** Increase the use of modern contraceptive methods for adolescents (15-19 years old) from 14.1% (2015) to 19.3% in 2020.

*a) Please provide an update below on achievements made in July 2018 - June 2019 in support of these elements of your commitment, including any key upcoming commitment-related milestones:*

### Check Points:

**Anticipated Impact:**

Around 315.654 adolescent girls using modern contraceptives in 2020.

**Proposed Actions:**

1. Approval of the School Health and Adolescent Strategy and development of the action plan
2. Scale up FP services (information and contraceptives) at community level targeting out of school girls
3. Support FP outreach activities at schools (regular mobiles brigades)
4. Assure quality of services provided by supporting providers in service and pre-service training
5. Adolescents SRH/FP demand creation activities

- 1.1. The School Health and Adolescent Strategy's Action Plan, is in process of approval.
- 1.2. The community-based family planning services through CHWs are still ongoing as planned. During this period, a total of 1300 new CHWs were trained. The number of CHWs providing FP services at community level in Mozambique grew from 4584 to 5685, representing up to a 30% increase in 2018.
- 1.3. The school-based FP intervention has also registered progress. It has contributed to 402.579 new users of FP in 2018, which represents 16% of the total new FP users in Mozambique, which is considered notable progress taking into account the nature of our population pyramid which has over 66% of people from 10-24 years.
- 1.4. During this period, a total of 1.930 health providers were trained in FP provision with a focus on long-acting reversible methods countrywide, including permanent methods.
- 1.5. As the training curricula for maternal and child health (MCH) nurses is being revised, the national FP technical working group, included under the revision, updated information regarding FP such as Implanon NXT, Sayana Press, WHO medical eligibility criteria for contraceptives use, Postpartum FP, and much more information related to the topic.
- 1.6. Multiple and coordinated activities were conducted to increase the demand of FP/SRH services among adolescents, such as FP, SRH rights and choice awareness campaigns using home-based visits model, community and school fairs and services provision, digital health platforms which include Alo vida, Rapariga Biz, mCenas, and many others through media channels (TV, radio, outdoor messaging, newspaper, etc..).
- 1.7. Awareness campaign and SRH services focused on access to contraceptives among adolescents during the week celebrating World Contraceptive Day

***b) Please mark X below how you assess progress toward elements of your commitment:***

**Achieved OR On-Track (X) / In-Progress OR Off-Track ( )**

*c) If you marked “In-Progress” OR “Off-Track” in the above question, what are the key challenges or barriers you face in achieving these elements of your commitment?*

2. **COMMITMENT:** Provide family planning services (information and contraceptives) in all secondary schools by 2020.

*a) Please provide an update below on achievements made in July 2018 - June 2019 in support of these elements of your commitment, including any key upcoming commitment-related milestones:*

**Check Points:**

***Anticipated Impact:***

Around 63,131 (20% of the commitment 1) adolescent girls using modern contraceptives in 2020.

***Proposed Actions:***

6. Approval of the School Health and Adolescent Strategy and development of the action plan.
7. Support FP outreach activities at schools (regular mobiles brigades).
8. Adolescents SRH/FP demand creation activities.

*b) Please mark X below how you assess progress toward elements of your commitment:*

Achieved OR On-Track (X) / In-Progress OR Off-Track ( )

*c) If you marked “In-Progress” OR “Off-Track” in the above question, what are the key challenges or barriers you face in achieving these elements of your commitment?*

3. **COMMITMENT:** Ensure that 30% of all facilities in the country use the electronic stock management system for managing commodities including contraceptives by 2020.

*3.1. The system was piloted in 30 HF in 2016. At the end of 2017, as a result of the activities conducted in this area, a total of 157 health facilities were implementing the e-LMIS, which exceeds the initial target of 129 facilities. In 2018, the e-LMIS started in the additional 297 health facilities. Up to June 2019 e-LMIS is implemented in 895 HFs (above the 2020 target)*

*a) Please provide an update below on achievements made in July 2018 - June 2019 in support of these elements of your commitment, including any key upcoming commitment-related milestones:*

**Check Points:**

***Anticipated Impact:***

Stock outs of contraceptives reduced to 40%.

***Proposed Actions:***

9. Finalization of the pilot phase of the electronic stock management system (129 health facilities)
10. Expansion of the electronic stock management from 100 health facilities to 450 by 2020

*b) Please mark below how you assess progress toward elements of your commitment:*

Achieved OR On-Track (X) / In-Progress OR Off-Track ( )

*c) If you marked “In-Progress” OR “Off-Track” in the above question, what are the key challenges or barriers you face in achieving these elements of your commitment?*

## **SECTION II: STANDARD QUESTIONNAIRE**

*Please respond to all parts of the following seven questions:*

- 1. How has your country integrated adolescents and youth representatives, and/or representatives from marginalized groups (e.g. lowest-income, people with disabilities, out of school, minority groups, remote or displaced populations, etc.) into the FP2020 Focal Point team and/or country’s FP technical working group or country engagement working group?**

Country FP2020 Youth focal point is integrated within the FP TWG and Adolescents Health TWG assure space for this group to have an effective participation

The *Programa Geração Biz* (PGB) implementation under the coordination of Youth and Sports Ministry with activities for in-school and out of school adolescents.

- a. If yes, how has this engagement influenced achieving your FP2020 commitment? Please also share successes and/or lessons learned from these engagements.

SRH and contraceptives provided as a service package for in school and out of school adolescents  
Challenge: parents' consent came at the end of 2018 as a request from the Ministry of Education and Human Development.

- b. If not, what challenges have you faced in working with these groups? (Please give examples)

**2. How is your Government integrating family planning into universal health coverage (UHC)-oriented schemes and what is/are the mechanism(s) being used or considered? What specific actions were taken in the past year surrounding integration?**

Family planning integration in other services was introduced in country in 2015 and up to now the process is working well and providers committed to the clients. Contraception is a free of charge service in public sector, regardless of the level of care and method.

As for the existing gaps and challenges the Government is continuously reinforcing efforts to face them and improve.

FP Integration is institutionalized at country level with specific guidelines, data logbooks, and staff trained in all provinces since 2016.

At the moment the program is in process to integrate the form to capture data of Integrated FP services into the MOH HMIS because up to now it is manually collected.

**3. Has your Government organized the 2019 data consensus workshop?**

- a. If yes, did the FP2020 Focal Points participate in your country's 2019 data consensus workshop? If so, what insights were gained?

YES.

Two of them were absent, and all focal points were present.

One with the provinces (44) and partners (8) where the FP program had a five-year evaluation 2014 to 2018.

The second was attended by 19 partner's members of TWG, where the discussion was focused on FP estimates analysis, followed by a presentation to the National Public Health Director and after consensus it was presented at a high-level meeting led by the Minister of Health, Dr. Nazira Abdullah.

In both meetings recommendation were focused in (i) maximize access to FP information and methods both at community level through APEs and within the HFs in other services including Postpartum and post abortion; (ii) work at community levels and involve other sectors in FP

discussions to overcome methods misinformation and myths mostly regarding to LARC with emphasis to IUD.

- b. Were domestic expenditure data reviewed as part of the data consensus meeting? If so, please share insights and challenges you had in reviewing and validating these data.

YES. Government contribution is still below 10%. The country at the moment decided to acquire generic contraceptives due to its cost and as group it is expected that the Government increase their share overall expenditure data

4. In the past year, were any efforts made to improve resilience and/or emergency preparedness of family planning systems in country?

Family planning program is an on-going activity, institutionalized and occur routinely as long as contraceptives are available in country. During the self-report period the country discussed and approved introduction of generic contraceptives due to financial concerns when buying brands. These options will contribute to program sustainability.

Efforts are in motion to have FP/contraception training curricula integrated not only for MCH nurses but for other healthcare courses trainees such as doctors, clinicians and non-clinicians as well in pre and in-service trainings.

During the self-reporting period the country faced climate disasters that affected 4 provinces (Sofala, Cabo Delgado, Tete and Manica) where community including healthcare staff lost everything and were placed in resettlement camps. The program and partners had to rapidly work on a contraception package of services with methods availability to face the situation due to women and girls vulnerability to transactional sex, sexual violence, and even method discontinuation.

5. **Has your country allocated GFF resources to your FP program? If so, how has this benefitted your work?**

YES. FP program has the DLIs 1, 2 and 3 to contribute to the increase the accessibility and quality of the services. The disbursement is still in process however activities in course aim to reach FP 2020 goal.

DLI1 – is focused on institutional deliveries, and within the self-reporting period 11 percent of women had postpartum method inserted, IUDs (total deliveries 1,191,569 and total of women with IUD inserted 130,988).

DLI2 – is focused in SRH information and services at secondary schools, and within the self-reporting period 230 teachers were trained in SRH issues and contraception which contributed to have adolescents in schools informed and counseled about contraceptive methods.

DLI3 – measures CYP. This indicator reflects the whole FP services efforts along the country: FP integration data at community and HF services including Gynecology and Maternity.

DLI10 – Family Planning added to the APEs (CHWs) curricula in 2015. Around 5000 APEs trained and offering FP information, counseling, providing referrals to Health Facility for FP and providing as well contraceptives at community level.

**6. Have you worked to improve quality of care/rights based family planning in your programs?**

- a. Do your family planning programs provide a broad range of contraceptive methods (long-term, permanent, or short acting)? Do you provide comprehensive information and counseling on all available methods, including information on any risks or side effects?

YES. FP program provide a broad range of contraceptives methods in public sector free of charge to clients. Country FP program has adopted WHO guidelines on contraception which assures comprehensive information and counseling on contraceptive methods.

- b. To ensure a user-centered approach, do clients get a chance to provide feedback after clinic visits either through questionnaires, surveys, or suggestion boxes?

NO. This activity is not standardized. Some sites with partners support provide client exit interviews after the service, and its data is shared among the national TWG to use to improve services quality.

- c. Are your clinics open to improve accessibility and availability of services?

YES.

**7. FP2020 and partners are currently gathering input to build a shared vision for family planning post-2020, in consultation with stakeholders at the country and global level. Have you had an opportunity to participate in any way in this consultation process (e.g. online survey, consultative calls, etc.)?**

YES

Country focal points had the opportunity to discuss in-country family planning and everyone contribution moving forward to the 2020 goal and how to position as a country including possible challenges post-2020



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