

mCPR (AW vs. MW) (year)	29% vs. 49.6%
FP2020 mCPR/CPR goal	70%
Unmet need (MW	23.5%
Demand satisfied (MW)	67.9%
*Track 20	

FP2020 Commitment	
Commitment objective2012: Rwanda commits to ensuring the availability of family plann services in each of the 14,841 Rwanda administrative village (Imidugudu) through delivery by the 45,000 community heat workers already in service. Rwanda will expand existing information and dissemination programs about family plann the general public and will increase awareness of the variou choices available. Focusing on convenience and reducing the frequency of visits to health providers, the government of R will introduce long-lasting contraceptive methods, including permanent ones, and high quality integrated family planning services in every hospital and health center.	
Policy commitment	
Financial commitment	
Programmatic commitment	 2017: 1. Disseminate, implement, and monitor its first-ever integrated RMNCAH Policy and FP/ASRH Strategic Plan at all administrative levels. 2. Program at scale post-partum family planning in health facilities by 2020. 3. Improve awareness and create demand for family planning among its population, including young people, so that, by 2024, total demand for FP will have increased from 72% to 82%. 4. Improve its rights-based FP programming by adding to its available method mix long-acting and reversible methods. 5. Use the evidence base of high impact practices to inform its policies, strategies and programmes to accelerate the attainment of its FP goals. 2012: Rwanda will ensure the availability of FP services in each of the 14,841 Rwanda administrative villages (Imidugudu) through delivery by the 45,000 CHWs already in service. There are also plans to expand existing FP communications programs to raise awareness of FP choices, and to introduce LAPMs and high-quality integrated FP services in every hospital and health center.

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National FP and ASRH Strategy's priorities

- 1. XX
- 2. XX
- 3. XX

Rwanda's FP2020 priorities

Please outline 4-6 clear priorities for the next 18 months. These priorities should be aligned with existing agreed focus areas, whether those be in a Costed Implementation Plan (CIP), an RH Strategy, a Health, and Development Strategy, or the like. If you developed a previous action plan in 2016, please review it to see which priorities/actions you will include from it in this new action plan.

- 1. Roll out the RMNCH policy and FP/ASRH strategy
- 2. Scale up the post-partum family planning (PPFP) in all health facilities in Rwanda to reduce missed opportunity for FP
- 3. Strengthen data quality assurance for FP and reporting for decision making
- 4. Expand high impact social and behaviour changes communication (SBCC) approaches to increase demand for FP services among youth
- 5. Mobile outreach with a focus on districts with health facilities that currently don't provide family planning
- 6. Leverage 2018 ICFP to advance FP agenda in Rwanda.

Focal Point, Secretariat, and Partners Actions

Priority #1: Roll out the RMNCH policy and FP/ASRH strategy

Focal Point Actions	Who	Timeline
1.1 Finalize the costed FP/ASRH strategy	Ministry of Health	By March 2018
1.2 Approve and disseminate the RMNCAH policy and the costed FP/ASRH strategy	Ministry of Health	June 2018

Secretariat Actions	Who	Timeline
1.1 Review submitted concept note or proposals for an RRM to disseminate the RMNCAH policy and costed FP/ASRH strategy.	FP 2020 secretariat	February 2018

Partner Actions	Who	Timeline
1.1 Support the finalization of the costed FP/ASRH strategy	Partners	By March 2018, Q1 2018
1.2 Disseminate the RMNCAH policy and the costed FP/ASRH strategy	Partners	June 2018, by start of Q3 2018

Priority #2: Scale up the post-partum family planning (PPFP) in all health facilities in Rwanda to reduce missed opportunity for FP.

Focal Point Actions	Who	Timeline
2.1 Review the ongoing PPFP approach including the use of qualitative data to inform scale up.	MoH/Rwanda Biomedical Center	On going, Q2
2.2 Scale up PPFP interventions in 10 remaining districts, in terms of training of health service providers in 10 districts	MoH/RBC	By December 2018
2.3 Ensure quality services through mentorship sessions	MoH/RBC	Ongoing through Q2 2019
2.4 Determine package of PPFP services to be integrated in Immunization and ANC services	MoH/RBC	By July 2018, end of Q2

Focal Point Actions	Who	Timeline
2.5 Ensure that the two PPFP indicators are captured in the HMIS	MoH/RBC	By June 2018, end of Q2
2.6 Expand/scale up PPFP services in private health facilities of Kigali	MoH/RBC	By December, 2018

Secretariat Actions	Who	Timeline
2.1 Review submitted concept note or proposals for an RRM about the private sector.	FP 2020 secretariat	February 2018

Priority #3: Strengthen data quality assurance for FP and reporting for decision-making.

Focal Point Actions	Who	Timeline
3.1 Provide supportive supervision to operationalize e- LMIS	MoH/RBC	Ongoing through Q2 2019
3.2 Monitor FP data quality at the health facilities	MoH/RBC	Ongoing through Q2 2019
3.3 Strengthen capacity of national and decentralized level to use routine data for program improvement and accountability	MoH/RBC	Ongoing through Q2 2019

Partner Actions	Who	Timeline
3.1 Provide supportive supervision to operationalize e- LMIS	Partners	Ongoing through Q2 2019
3.2 Mentor FP data quality at the health facilities	Partners	Ongoing through Q2 2019
3.3 Strengthen capacity of national and decentralized level to use routine data for program improvement and accountability	Partners	Ongoing through Q2 2019

Priority #4: Expand high impact social and behaviour change communication (SBCC) approaches to increase demand for FP services among youth

Focal Point Actions	Who	Timeline
4.1 Organize a campaign for prevention of teen pregnancies using Parent-adolescent communication sessions	RBC	By December 2018, Q4 2018

Focal Point Actions	Who	Timeline
4.2 Work with Ministry of Education to strengthen implementation of comprehensive sexual and reproductive health education programmes for youth in two districts of Western Province.	MOH/RBC	By December 2018, Q4 2018
4.3 Rollout SBCC approaches for youth like promotion of communication technologies to reach a big number of youth with sexual and reproductive health messages; e.g., mobile phones for reproductive health (M4RH technologies).	Ministry of Health/ RBC	Ongoing through Q2 2019

Priority #5: Mobile outreach with a focus on districts with health facilities that don't provide family planning

Focal Point Actions	Who	Timeline
5.1 Organize meetings at central and district level to prepare FP mobile outreach activities.	MoH/RBC	Jan 2018, Q1 2018
5.2 Mobilize communities on family planning using SBCC approaches including radio spots	MoH/RBC	Ongoing through Q2 2019
5.3 Provide outreach services in five districts of Western Province	MoH/RBC	December 2018, Q4 2018

Priority #6: Leverage 2018 ICFP to advance FP agenda in Rwanda.

Focal Point Actions	Who	Timeline
6.1 Provide technical and financial support to the Ministry of Health to have a permanent secretariat at the Ministry for the effective preparation of the Nov 2018 ICPF.	USAID UNFPA	January 2018, Q1 2018
6.2 Organize meetings of the national steering and related sub-committees, prepare or review abstracts, undertake logistics, etc. for the ICFP.	MoH/RBC	By Nov, 2018, Q4 2018
6.3 Host the Nov 2018 ICFP in Rwanda.	MoH/RBC	Nov 2018, Q4 2018

Secretariat Actions	Who	Timeline
6.1 Provide technical assistance during development of abstracts, as requested by focal points.	FP 2020 secretariat	Jan 2018, Q1 2018

Partner Actions	Who	Timeline
6.1 Participate in meetings of the national steering and related sub-committees, prepare or review abstracts, undertake logistics, etc., for the ICFP.	Partners	By Nov 2018, Q4 2018
6.2 Implement the Nov 2018 ICFP in Rwanda.	Partners	Nov 2018, Q4 2018

Looking Ahead:

Based on your understanding to date, are there any upcoming milestones, events, elections, or important moments coming up in the next 18 months? This forecasting will be useful to understand as activities are planned and to identify potential Rapid Response Mechanism opportunities in your country.

Funding Opportunities:

Based on the current FP budget and/or costing exercises done for your country's CIP, where do you anticipate there are going to be funding gaps in 2017/2018? And for which activities?

Rwanda FP strategic plan is not yet costed but, depending on the above actions, funding in 2018/2019 will be needed for:

- the dissemination of RMNCAH policy and FP strategic plan;
- SBCC and demand creation activities;
- the implementation of comprehensive sexuality education for in- and out- of school youth; and for
- scale up of PPFP interventions in all private facilities.