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# **FamPlan as a Strategic Planning Tool Nigeria**

*Thomas J. Goliber, Constella Futures*

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*Rachel Sanders, Constella Futures*

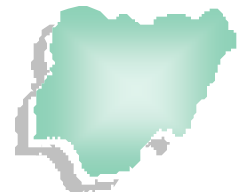
*American Public Health Association*

*Session 3353.0: Policy and Advocacy for RH: International*

*November 2007*

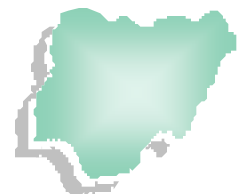
# Outline

- I. **The FamPlan Model**
- II. Context
- III. National Policy on Population for Sustainable Development
- IV. Implications of Reaching Population Policy Target
- V. Other FamPlan Results
- VI. Summary



# Methodology

In 2004, Nigeria adopted the ***National Policy on Population for Sustainable Development*** which includes a target to increase the modern contraceptive prevalence rate by 2 percentage points per year. The study uses the FamPlan module of the SPECTRUM suite of reproductive health models to explore the family planning program implications of this target.



# SPECTRUM Model

- 
- DemProj
  - RAPID
  - AIM
  - FamPlan

[www.policyproject.com](http://www.policyproject.com)



# FamPlan

## Version 4

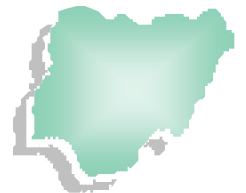
**A Computer Program for  
Projecting Family Planning  
Requirements**

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Spectrum System of

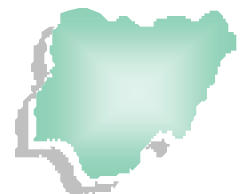
# What is wrong with this picture?

- Reproductive period, 15-49, is 35 years long
- From conception to birth is 9 months (0.75 years)
- $35 \text{ years} / 0.75 \text{ years per birth} = 47 \text{ births per lifetime}$
- Why don't most women have 47 births?

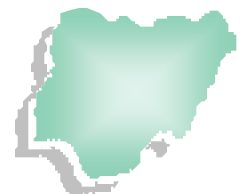
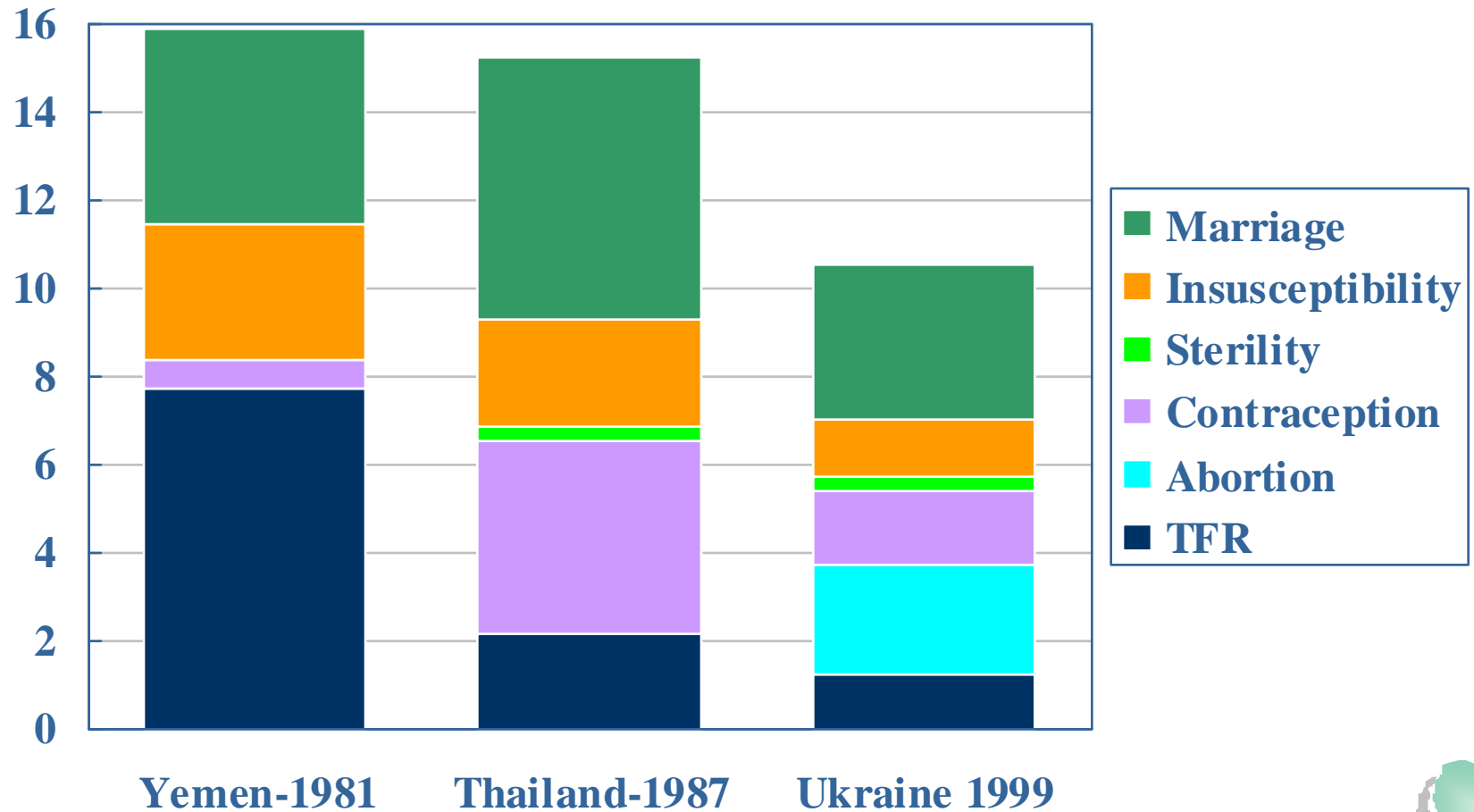


# Proximate determinants of fertility

- Proportion married
- Postpartum infecundability
- Abortion
- Pathological sterility
- Contraception



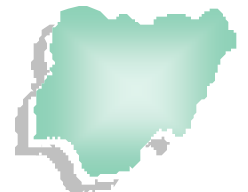
# Three examples





# Outline

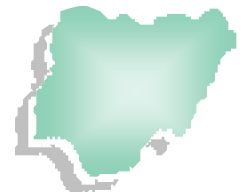
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# Fertility transition has lagged in sub-Saharan Africa

John Caldwell and Pat Caldwell (1987)

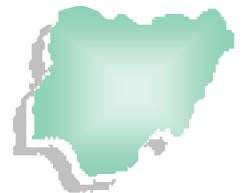
- Fertility decline would commence later in many sub-Saharan African countries than elsewhere in the developing world
- Once started, fertility transition would take longer than elsewhere



# ***Total Fertility Rate, 2007***

<b>Sub-Saharan Africa</b>	<b>5.5</b>
<b>Latin America</b>	<b>2.4</b>
<b>Asia (exc. China)</b>	<b>2.5</b>

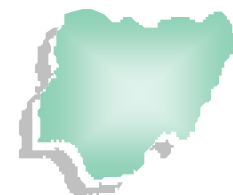
*Source: 2007 Population Reference Bureau Datasheet.*



# ***Modern Contraceptive Prevalence Rate, 2007***

<b>Sub-Saharan Africa</b>	<b>16%</b>
<b>Latin America</b>	<b>62%</b>
<b>Asia (excl. China)</b>	<b>47%</b>

*Source: 2007 Population Reference Bureau Datasheet.*

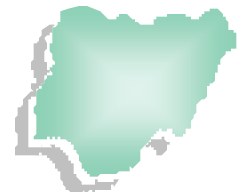


# Fertility remains high in Nigeria . . .

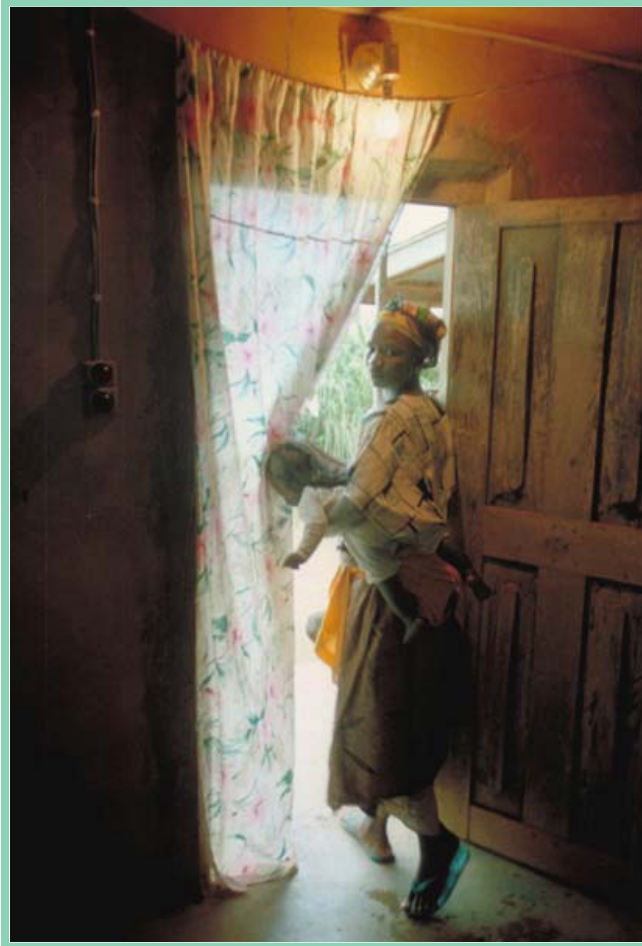


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- 1990 NDHS:  
6.0 children per woman
- 2003 NDHS:  
5.7 children per woman



# Contraceptive prevalence continues to be low . . .



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- Modern methods

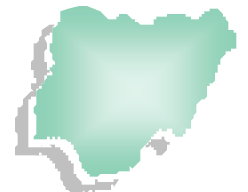
1990 NDHS 3.5%

2003 NDHS 8.2%

- All methods

1990 NDHS 6.0%

2003 NDHS 12.6%



# Nigeria

## *Population:*

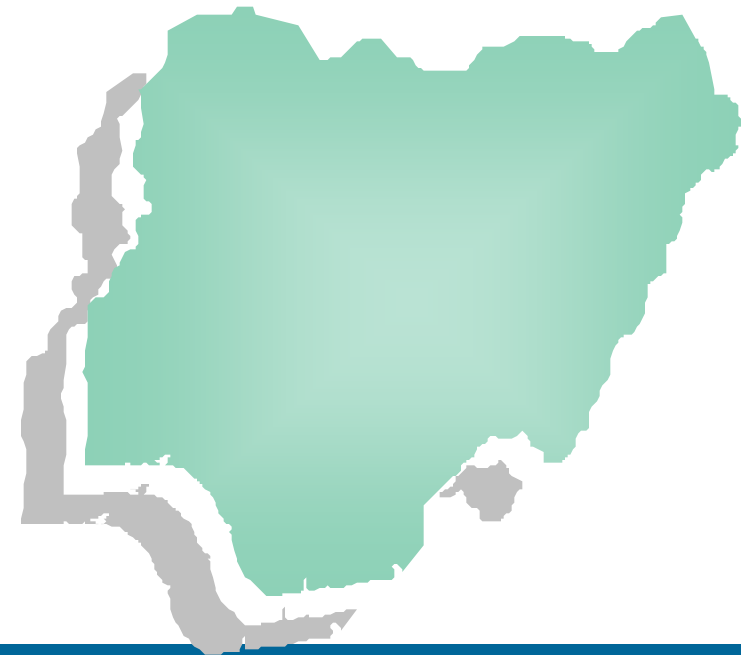
*2006 – 140 million*

*2050 – 282 million*

## *Ethnic Diversity*

## *Religious Diversity*

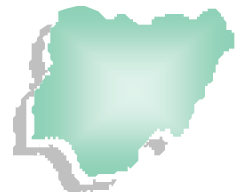
## *Oil Producing*



# Quotas versus Targets

Highly controversial leading up to International Conference on Population and Development in Cairo in 1994.

In some settings, national or regional targets were being translated into facility or personnel performance requirements.

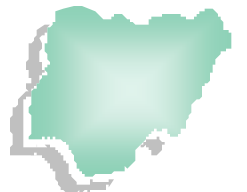




# Quotas versus Targets

Targets: Indicators for planning, monitoring, and evaluation purposes.

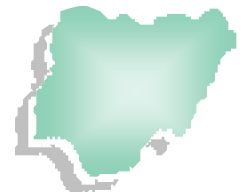
Quotas: Service provider requirements



# Quotas versus Targets

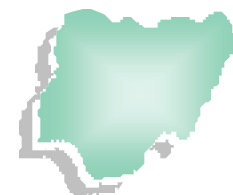
## Tiahrt Amendment

- Service providers or referral agents . . . Shall not be subject to quotas or other numerical targets of family planning acceptors or acceptors of a particular method.
- Restriction shall not be construed to include the use of quantitative estimates or indicators for budgeting and planning purposes.



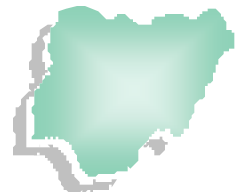
# Quotas versus Targets

Targets are useful tools to monitor and evaluate implementation of the National Policy on Population for Sustainable Development over time



# Outline

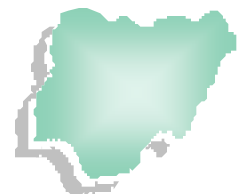
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# GOAL: Long-term Sustainable Development

## *Addresses*

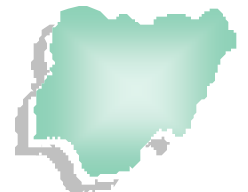
- relationships among population, social and economic development and the environment
- related issues of poverty, literacy, gender equity and other basic development needs



# 2004 National Policy on Population for Sustainable Development

## INTENT

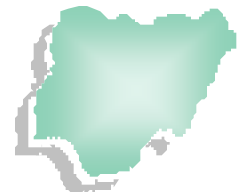
- Improve the standard of living and quality of life of the people
- Promote maternal, child and reproductive health
- Achieve a lower population growth rate by voluntary fertility regulation methods
- Address problems of internal migration and spatial distribution
- Prevent the spread of HIV/AIDS



# 2004 National Policy on Population for Sustainable Development

## INTENT

- Improve the standard of living and quality of life of the people
- Promote maternal, child and reproductive health
- **Achieve a lower population growth rate by voluntary fertility regulation methods**
- Address problems of internal migration and spatial distribution
- Prevent the spread of HIV/AIDS

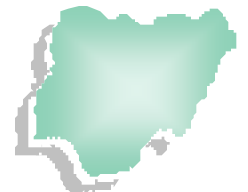


# 2004 National Policy on Population for Sustainable Development

**GOAL:** Progress towards a complete demographic transition in fertility and mortality

**OBJECTIVE:** Strengthen and expand a comprehensive family planning programme that ensures . . . uninterrupted access to a reasonable range of affordable contraceptive methods

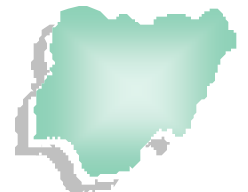
**TARGET:** Increase the modern contraceptive prevalence rate by at least 2 percentage points per year





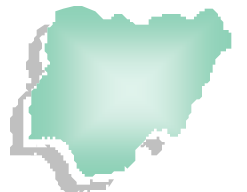
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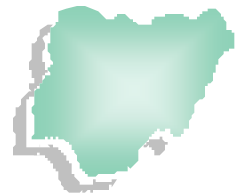
# Reaching the Policy target . . .

What happens if contraceptive prevalence rises by 2.0 percentage points per year from 2005 to 2035?

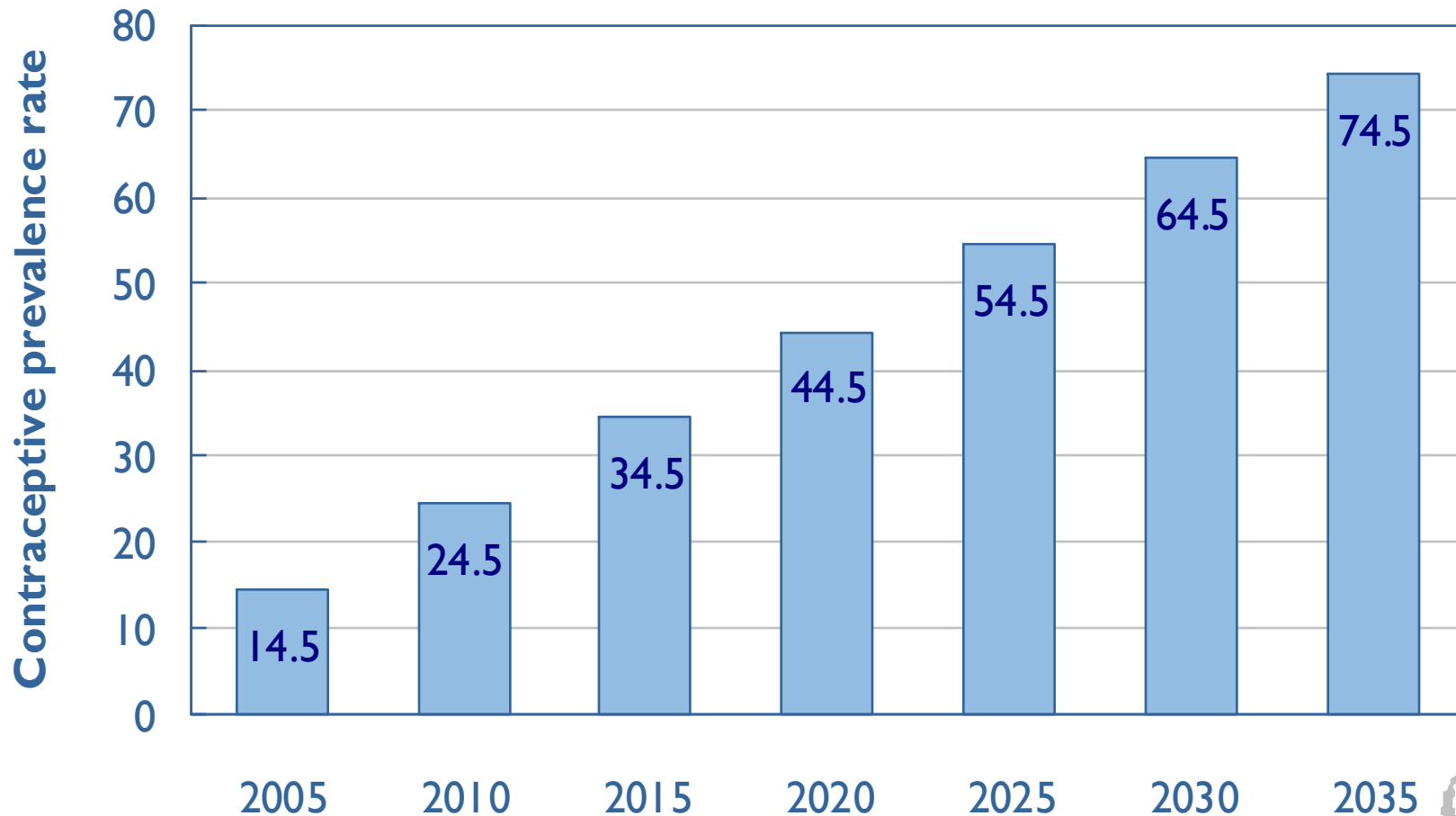


# Some key assumptions . . .

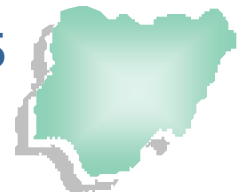
- Relative importance of traditional methods declines over time
- Period of post-partum infecundability declines with development of country



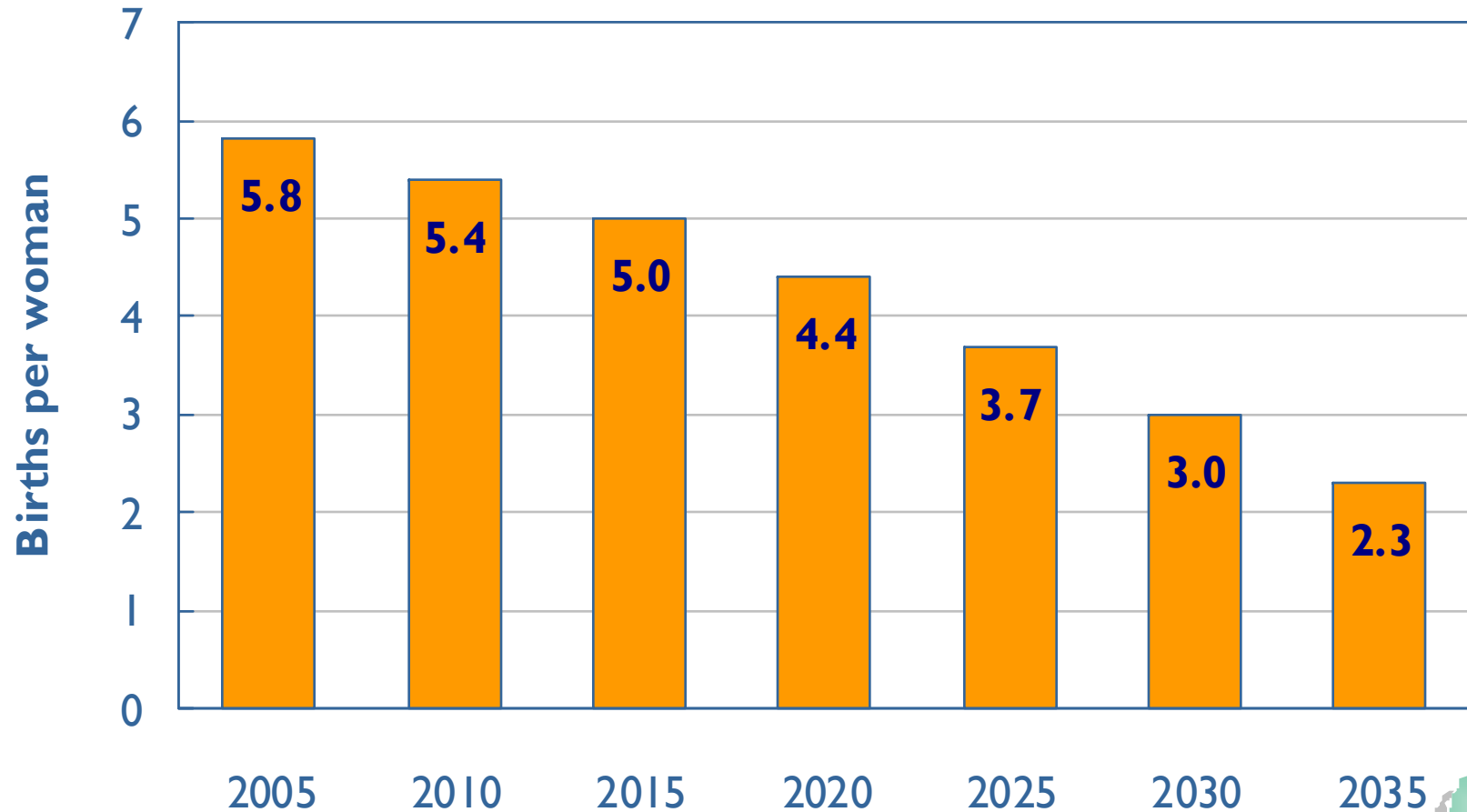
# Contraceptive Prevalence Rate



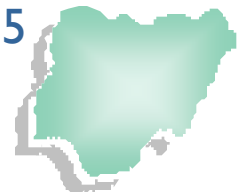
Contraceptive prevalence rises by 2.0 percentage points per year from 2005 to 2035.



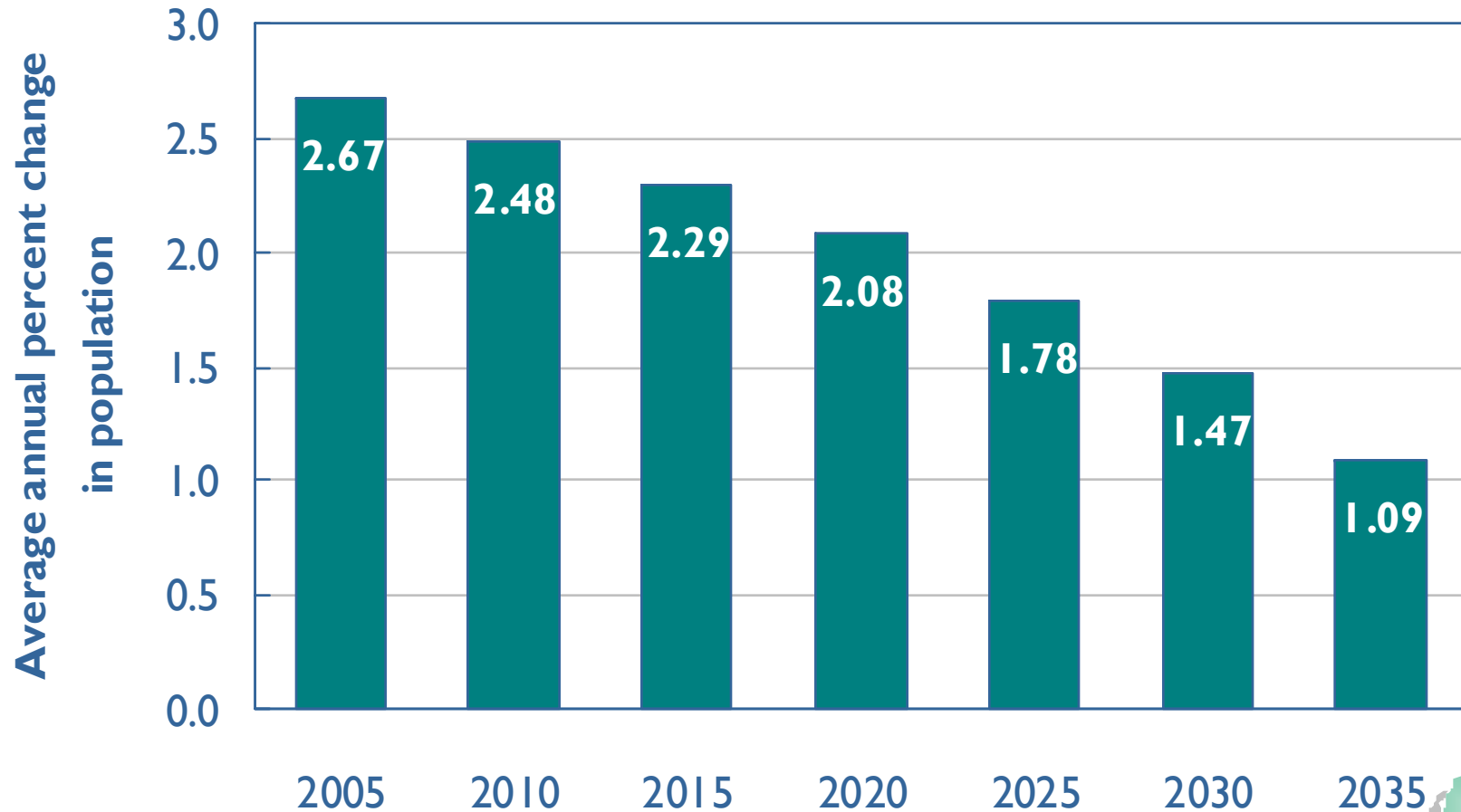
# Total Fertility Rate



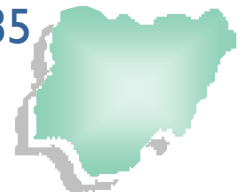
Contraceptive prevalence rises by 2.0 percentage points per year from 2005 to 2035.



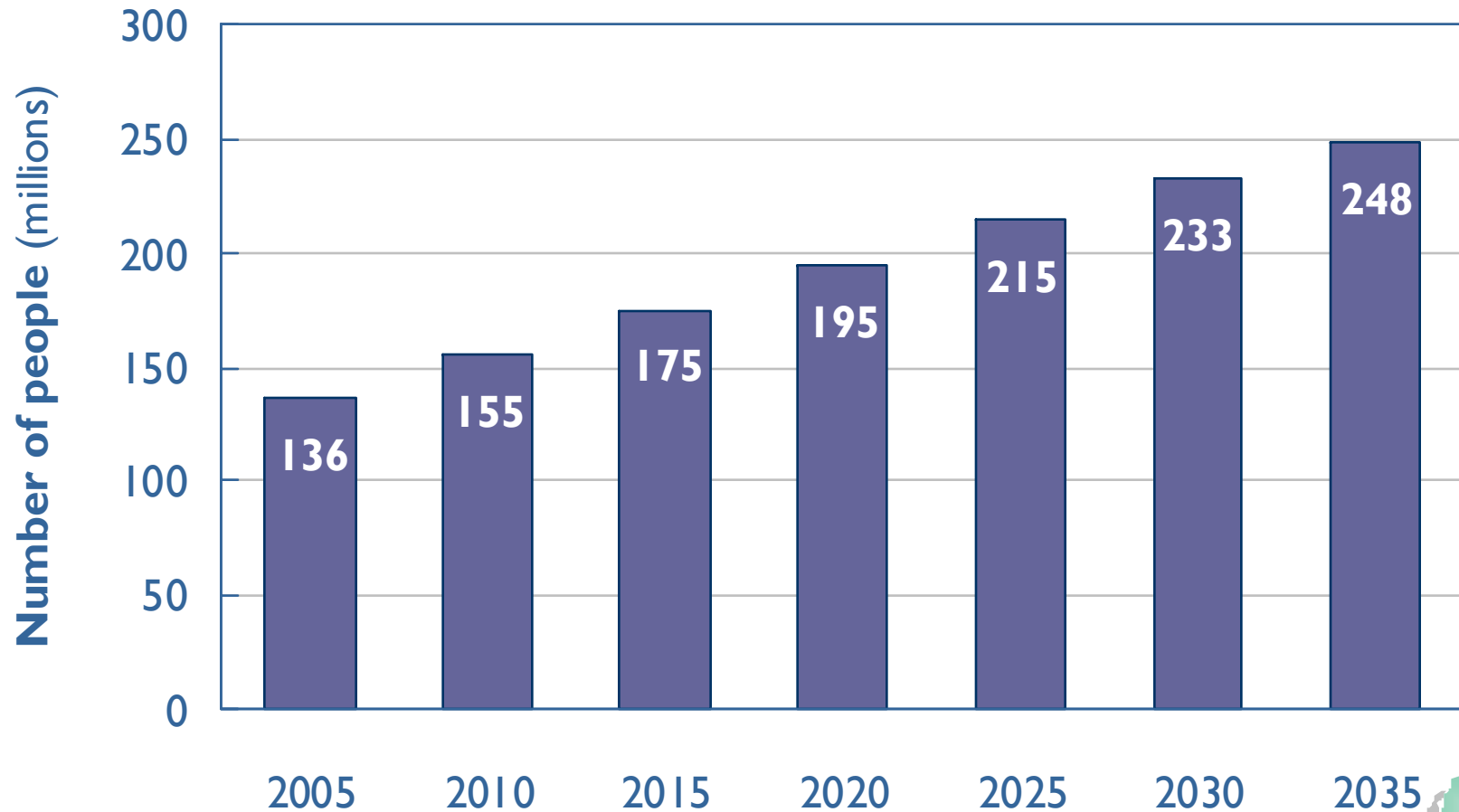
# Population Growth Rate



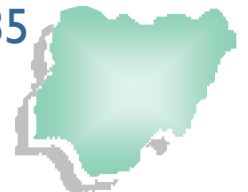
Contraceptive prevalence rises by 2.0 percentage points per year from 2005 to 2035.



# Total Population

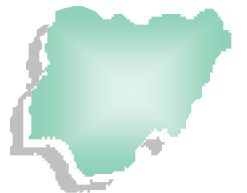


Contraceptive prevalence rises by 2.0 percentage points per year from 2005 to 2035.



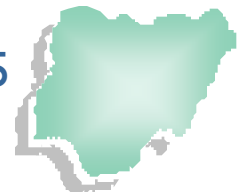
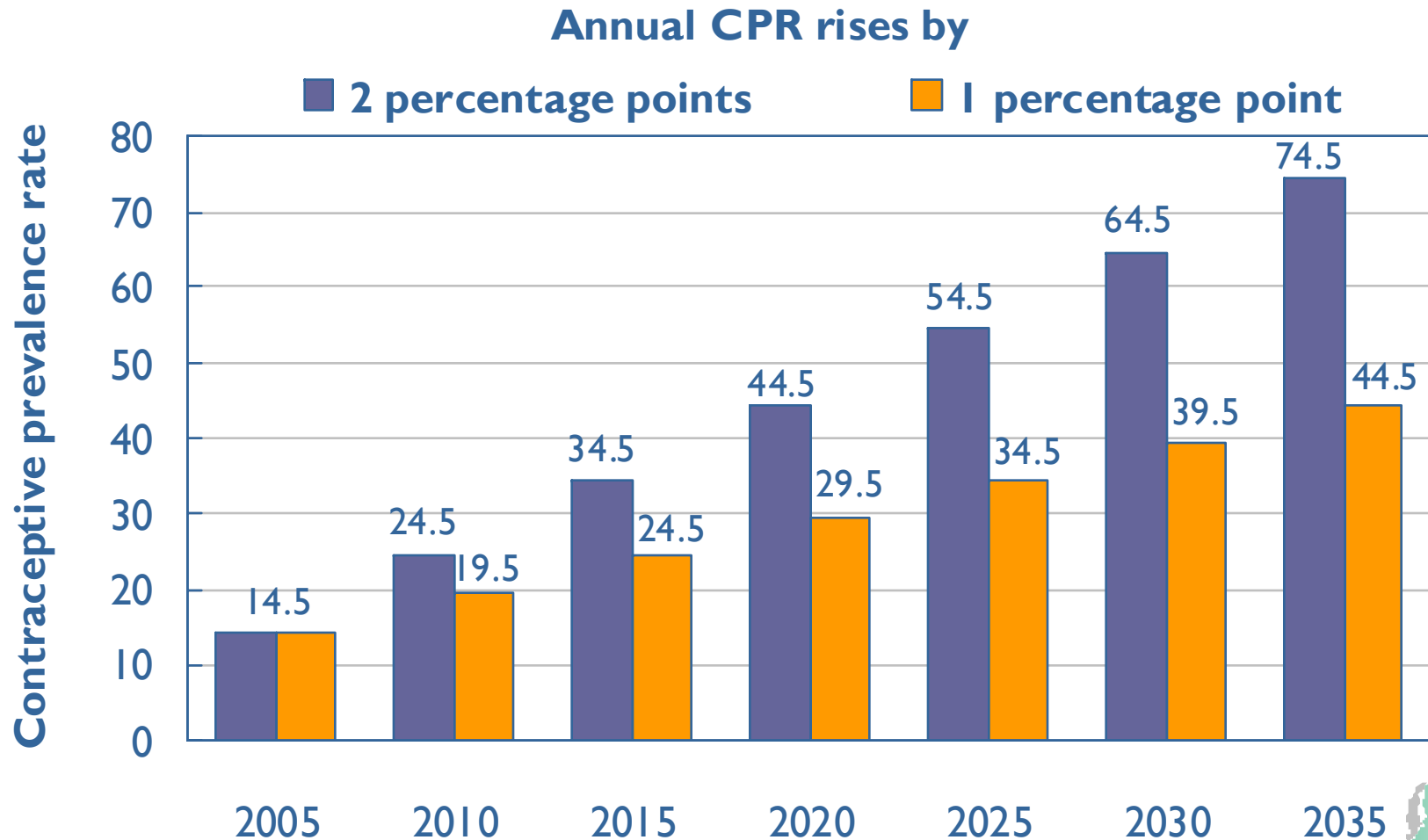
# Not reaching the Policy target . . .

*As a point of contrast, what happens if contraceptive prevalence rises by 1.0 percentage point per year from 2005 to 2035?*

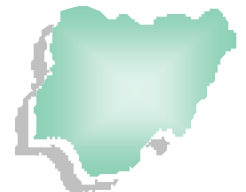
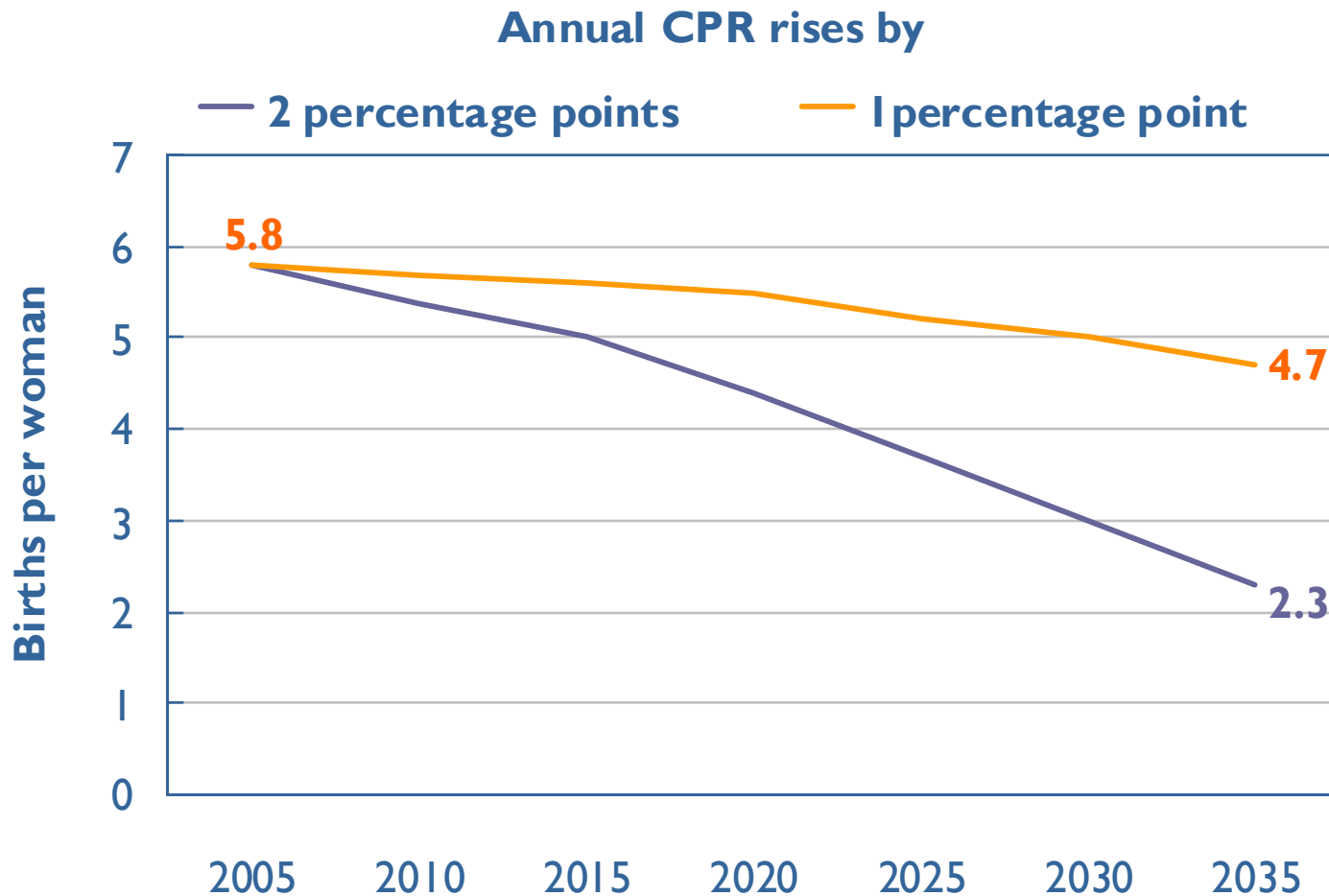




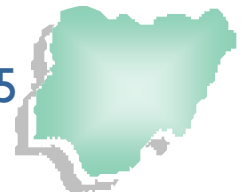
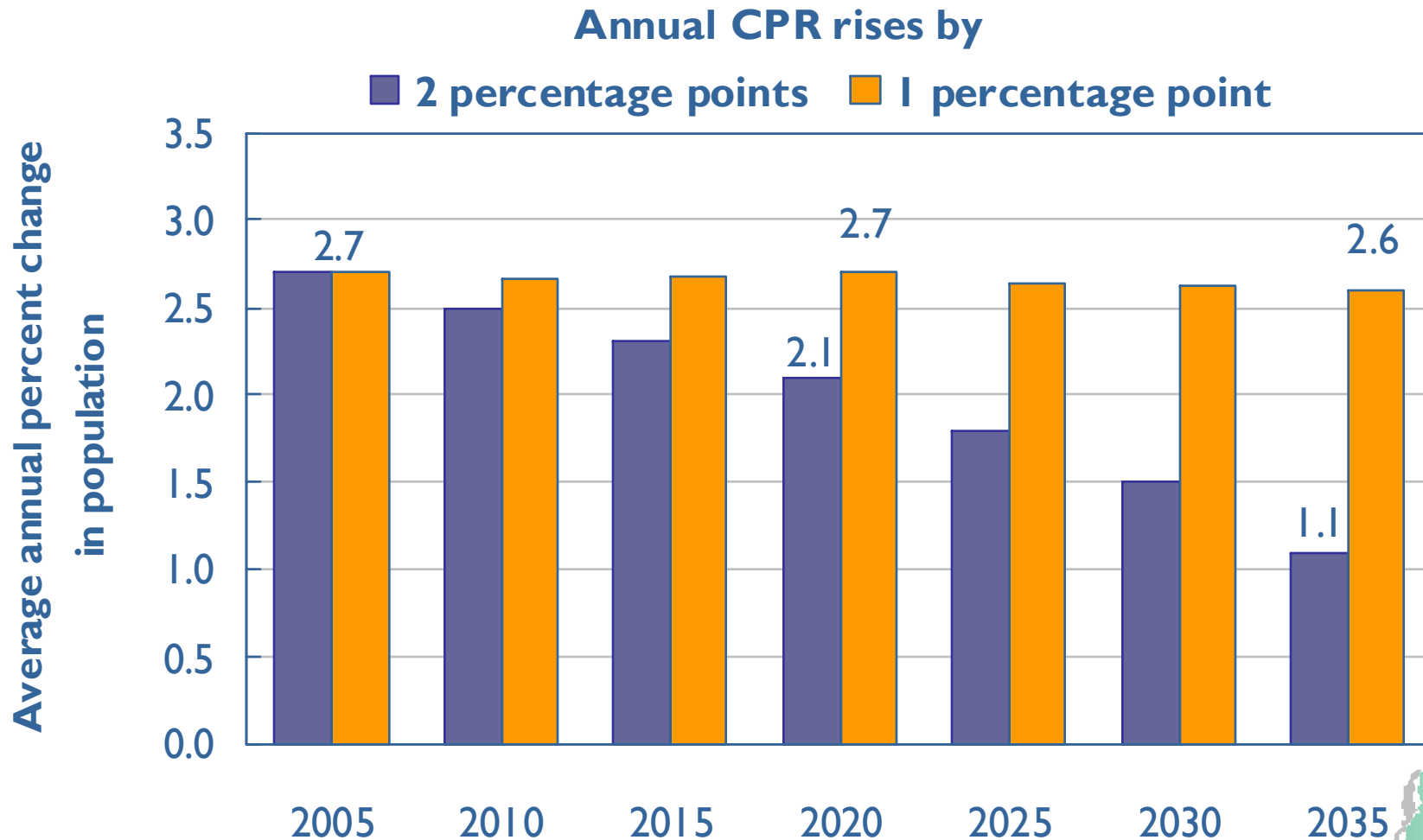
# Contraceptive Prevalence Rate



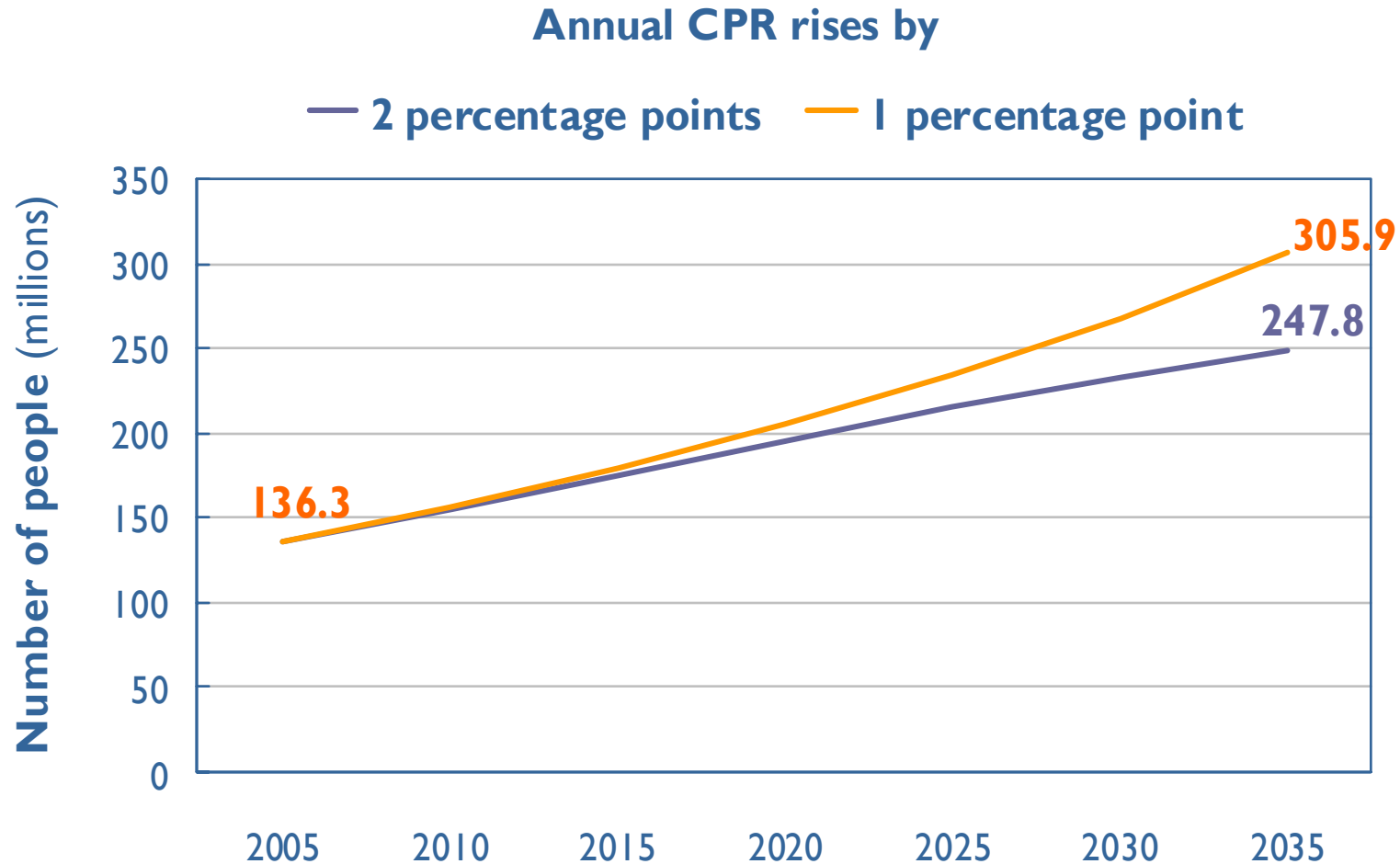
# Total Fertility Rate



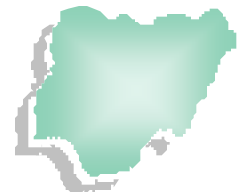
# Population Growth Rate



# Total Population

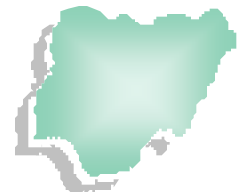


Contraceptive prevalence rises by 2.0 percentage points per year from 2005 to 2035.

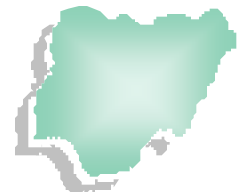
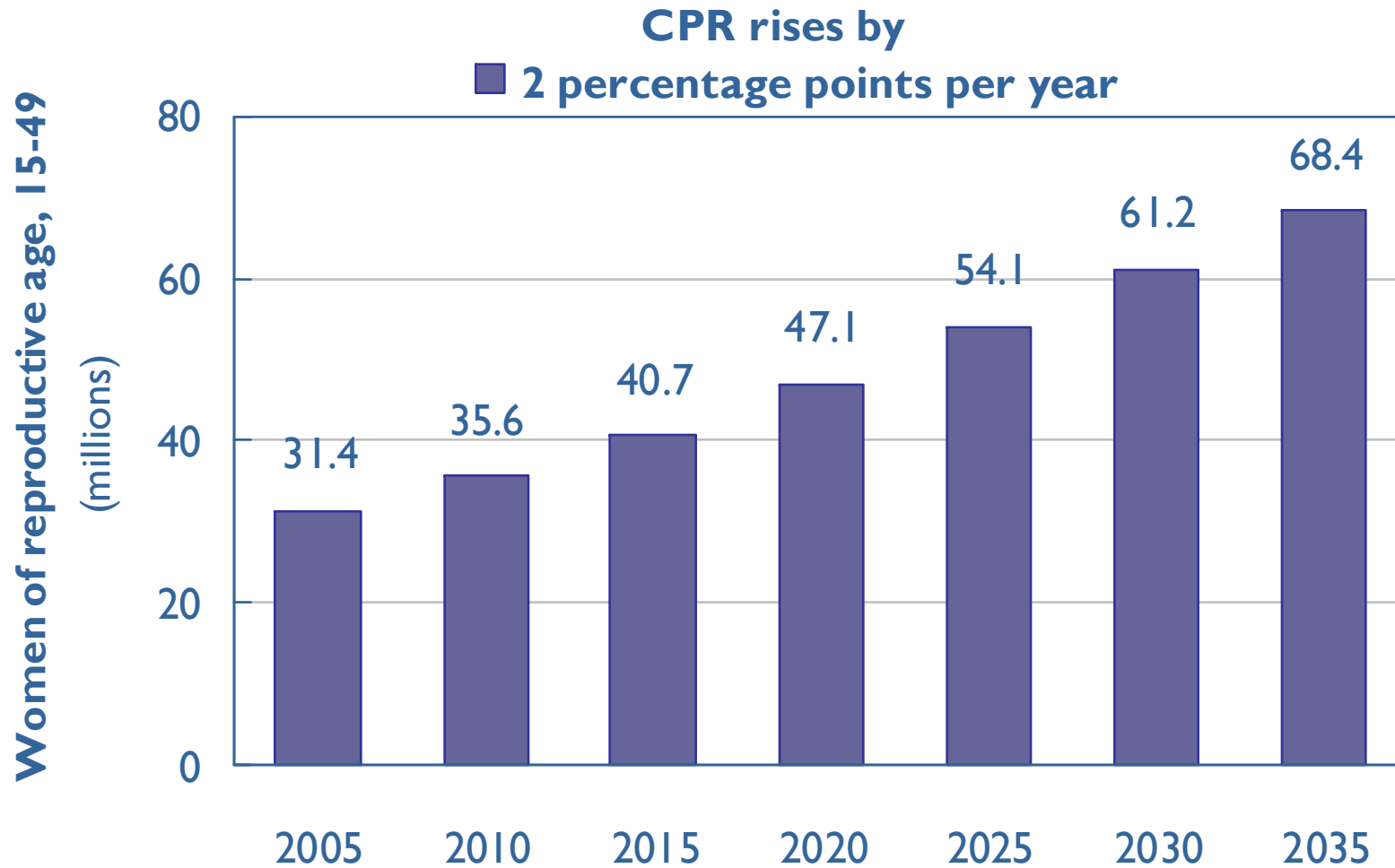


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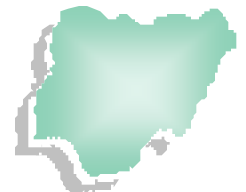
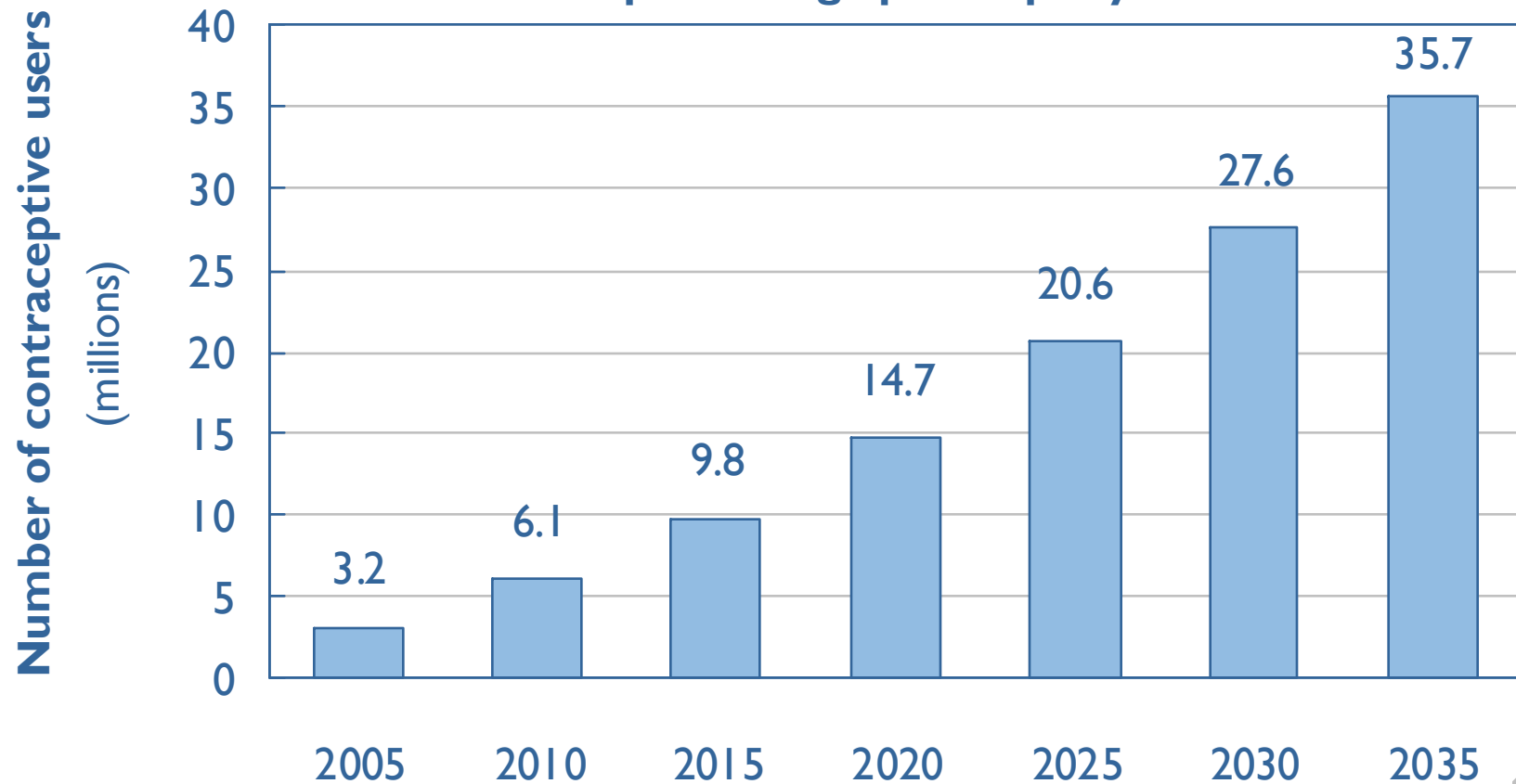
# Women of Reproductive Age, 15-49 years old



# Total Number of Contraceptive Users

CPR rises by

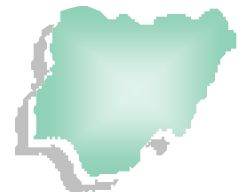
■ 2 percentage points per year



# Projected method mix . . .



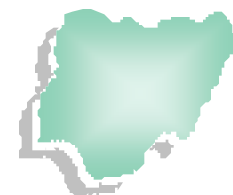
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# Injectables and pills will be dominant methods in future method mix

Method	2003	2020
Condom	15.2	6.9
<u>Injectable</u>	<u>16.0</u>	<u>38.4</u>
<u>Pill</u>	<u>14.4</u>	<u>31.3</u>
Other modern	8.0	9.4
LAM	11.2	3.2
Other traditional	35.2	10.8
<i>Total</i>	<i>100.0</i>	<i>100.0</i>

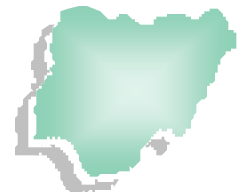
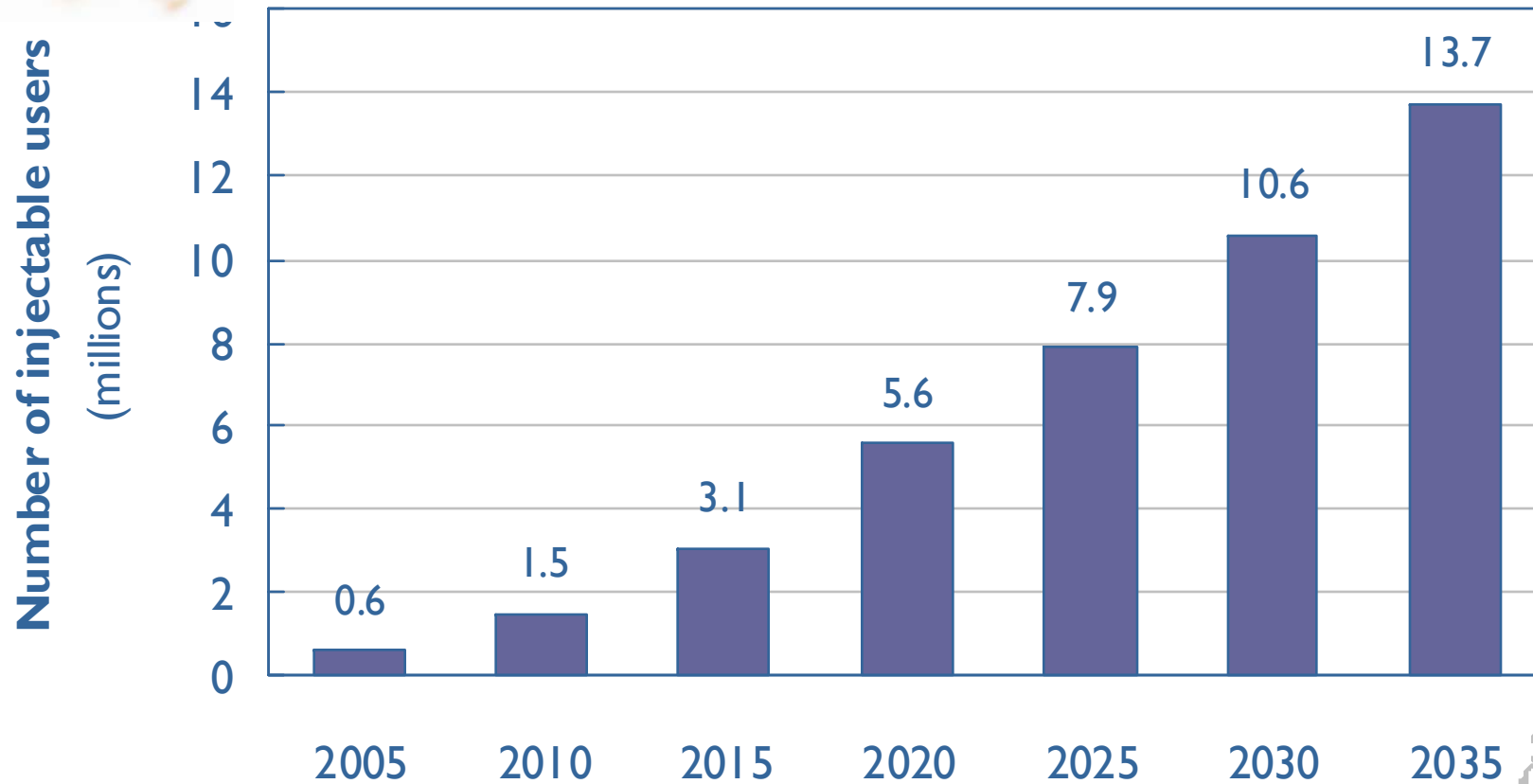


# Estimated and Projected Number of Injectable Users, 2005 – 2035



CPR rises by

■ 2 percentage points per year

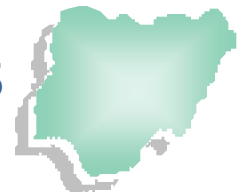
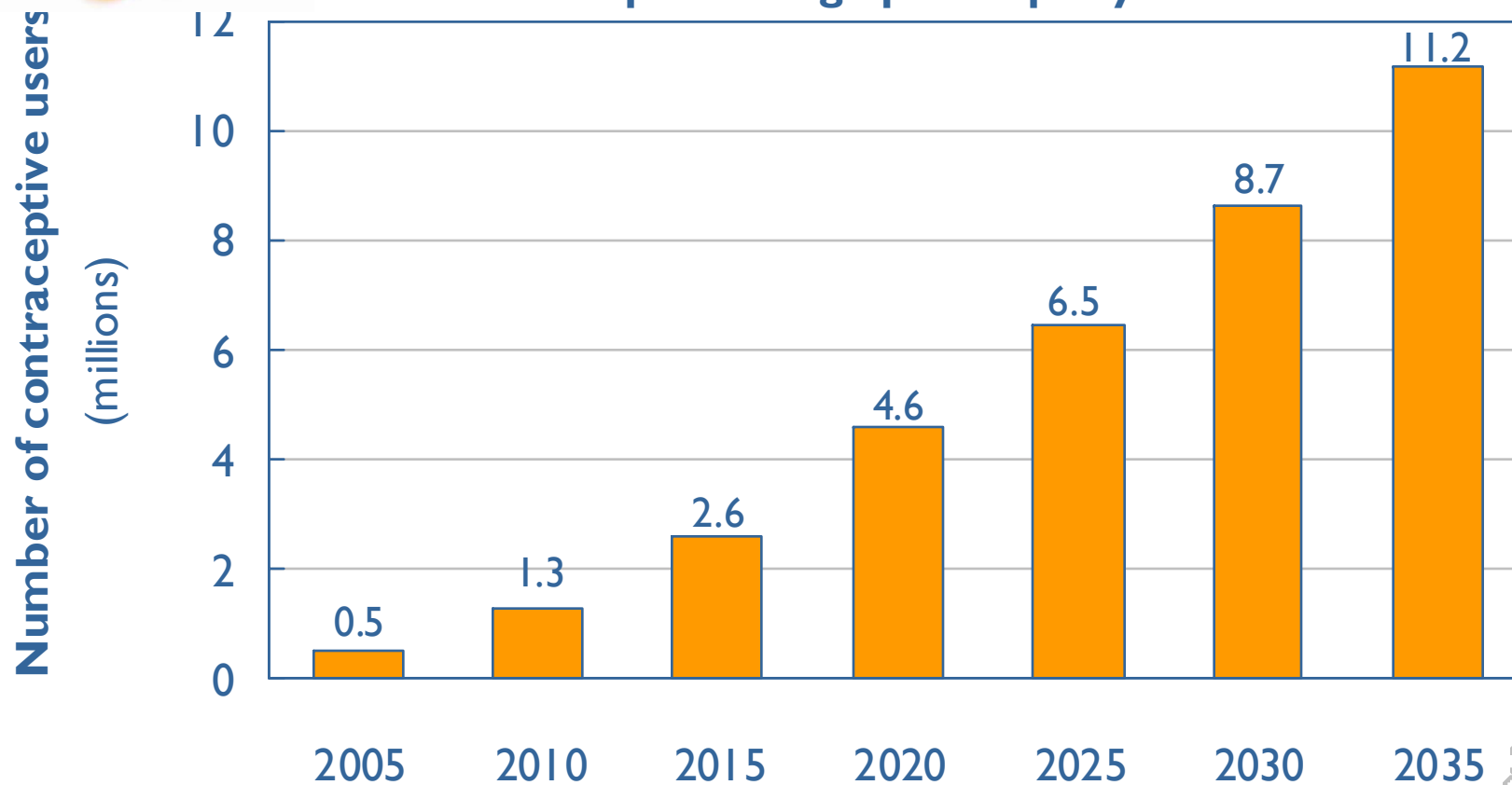


# Estimated and Projected Number of Pill Users, 2005 – 2035



CPR rises by

2 percentage points per year

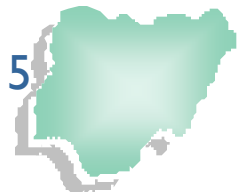
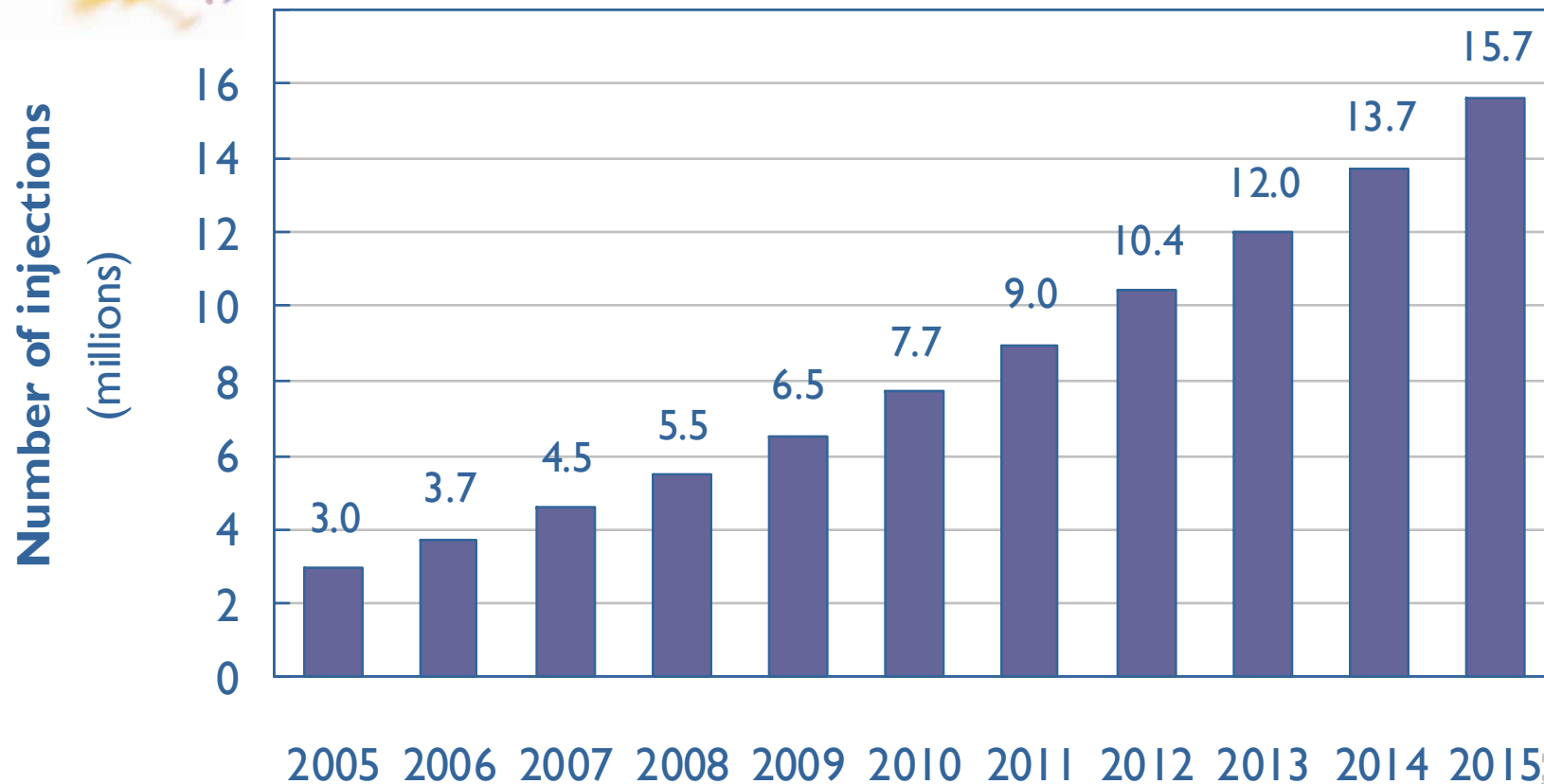


# Commodity Requirements: Number of Injections, 2005 – 2015



CPR rises by

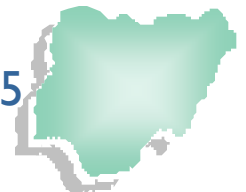
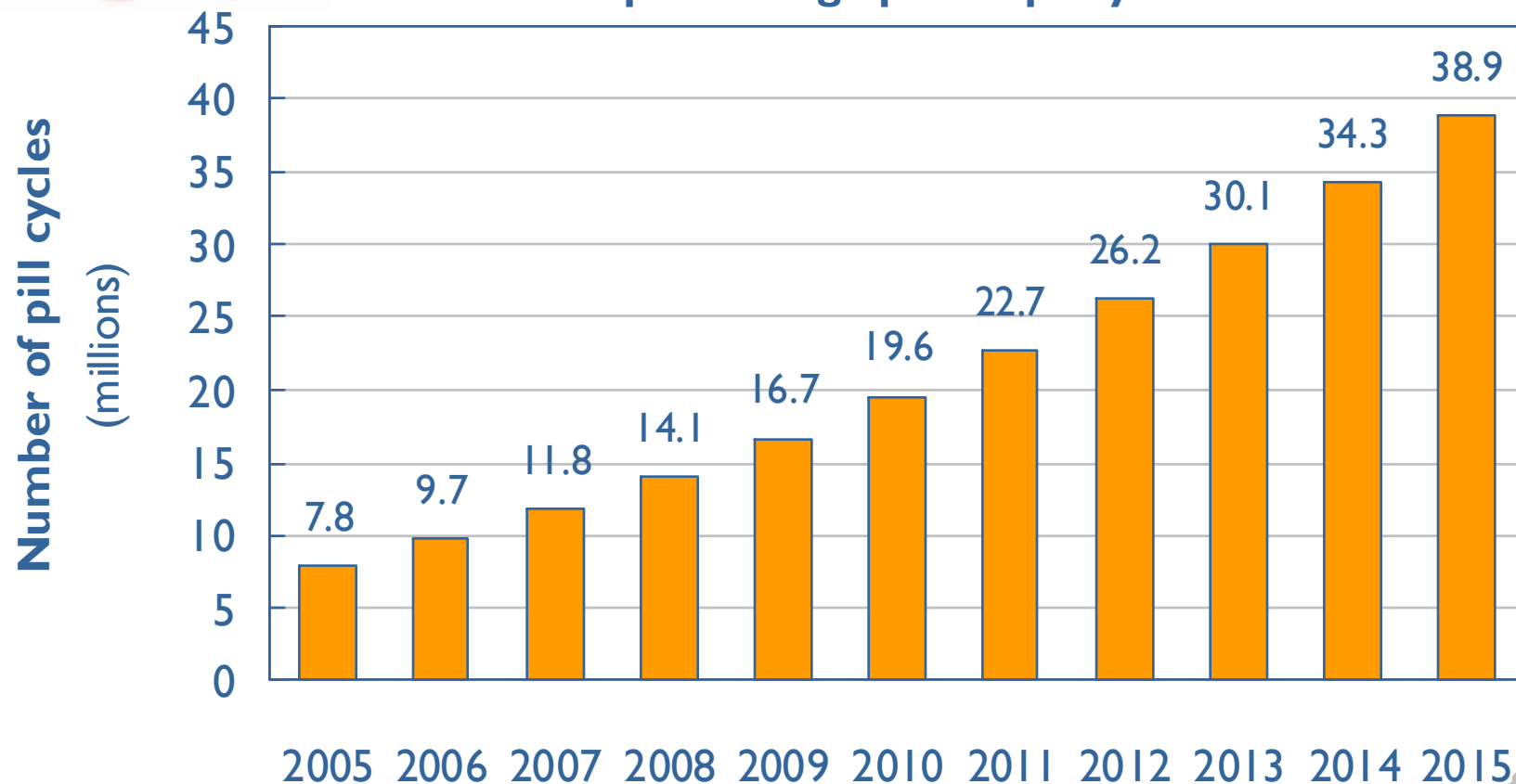
■ 2 percentage points per year



# Commodity Requirements: Number of Pill Cycles, 2005 – 2015

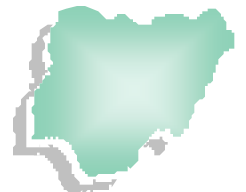
CPR rises by

■ 2 percentage points per year



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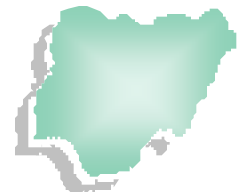
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# National Policy on Population for Sustainable Development



- Broad-based policy that notes complex interactions among population, social and economic development and the environment
- Still, sees achievement of a lower rate of population growth as essential for Nigerian development
- Sets ambitious targets for increases in contraceptive use



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# Strategic Planning for Population Policy Implementation

## *Will need to consider*

1. family planning programme requirements to meet stated targets
2. realistic strategic approaches to help satisfy family planning needs



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