



## SECTION 6

# FUTURE DIRECTIONS

As policymakers, advocates, and program implementers consider the future of family planning programs in SSA, our analysis identifies new opportunities that are emerging to drive equitable, data-based, and client-centered programs through 2030 and beyond:

**Highlight the connections between family planning and inclusive development to engage multisectoral policymakers in the FP2030 commitment process.** Ensuring that women in low-resource households remain a priority in family planning commitments over the next decade is vital. Under the FP2030 partnership, governments are encouraged to create [commitment vision statements](#) that clearly articulate their high-level ambitions for family planning by 2030 (or a country-specific timeline). Engaging multisectoral policy actors—including from ministries of planning and development, finance, and education—in the commitment-making process will help ensure family planning is a funded national priority, recognized as integral to development. National Population Councils (NPCs), which exist across SSA under the broad mandate of ensuring population dynamics are considered in national development goals and planning, are key champions to this effort. Regional platforms that support country-to-country knowledge sharing, including the recently launched Regional Collaboration Platform of NPC executive directors from participating SSA countries, are strengthening the collective voice and the impact of NPCs to influence policy agendas regionally and in their own countries.

**Integrate family planning as a key component in primary and universal health care strategies.** While the push to integrate family planning into primary health care services has been ongoing, the COVID-19 pandemic underscores the need for concerted policy advocacy to classify family planning as an essential primary health care service. As countries deal with the pandemic's economic ramifications, competition for scarce domestic resources is likely to increase. If domestic resources for family planning are diverted to other sectors, women in low-income households may disproportionately face the costs. Advocates, funders, and implementors can emphasize the impact and cost-effectiveness of family planning as an essential component of primary and universal health care schemes, helping to expand and protect access to these services.

**Create an enabling environment for continuous use of data to inform family planning policy and program decision-making.** Analysis of NCIFP scores in Section 2 of this report underscored the relationship between strong performance in data collection and use and family planning program progress. Increased data use, including DHS data on subnational trends, can and should inform national and subnational policy, financing, and program priorities. Greater use of data by local decisionmakers can accelerate through increased investment in HMIS, which generate country-owned and, often, hyper-local data. This investment in health information systems and infrastructure must include training for local policy and program decisionmakers to continuously analyze and use the data to inform program planning, implementation, and monitoring and evaluation. Additionally, decisionmakers can take advantage of proven and emerging digital tools and platforms that increase the speed of data collection, processing, and interpretation, such as [digital e-registries](#) that support efficient information processing by providers and more personalized care for patients. Programs should integrate [monitoring approaches](#) that enable continuous learning across all stages of design and implementation, enabling programs to respond quickly to new evidence. Creating and sustaining a culture of data use will support family planning decisionmakers to adapt and respond to local priorities and strengthen program resilience when shocks to the health system occur.

**Leverage digital technology to expand program reach and responsiveness.** The COVID-19 pandemic shed fresh light on the [critical opportunity to increase the impact and efficiency of family planning programs through digital technology](#). Incorporating digital health interventions in sustainable and scalable ways likewise strengthens program resilience in the face of unexpected challenges. Tools such as [MACRO-EYES Striata Forecast](#) are leveraging artificial-intelligence methods and data sources for more accurate, and therefore more cost efficient, contraceptive supply and logistics forecasting. Other digital health interventions, such as the [Rocket Health platform](#), are offering a convenient and private space to access sexual and reproductive health information and product delivery. Digital approaches such as the [PartME model, operating at scale in Ghana](#), can help decisionmakers establish or strengthen accountability platforms that promote ongoing dialogue with communities and clients, helping to ensure community feedback is regularly integrated in program decision-making.

**Invest in client-centered approaches and build systems for accountability.** Sustained program progress over the coming decade will be driven by investments that advance choice, autonomy, accountability, and quality of care in family planning. Nearly all countries scored themselves poorly in having systems where violations of choice or denial of services can be safely and regularly reported or platforms that can facilitate continuous engagement and feedback with communities. Centering the service user in family planning is further supported by improvements in comprehensive counseling, greater breadth of care options (including, but not limited to, self-care), and advances in program measurement that capture client choice and satisfaction. From research to implementation, greater use of community participatory research will help define programs and investments that better respond to client needs.

Between successful adaptations in responding to health system shocks and actualizing national commitments, the global family planning community continues to see sustained progress as we look to 2030. While the COVID-19 pandemic may have stunted some recent gains, it has also compelled policymakers, implementers, researchers, and general practitioners to look at family

planning access, data, and health care in new and innovative ways. Investment in robust systems for data collection and use, platforms for regular dialogue between communities and decisionmakers, adoption of proven digital solutions that generate programmatic efficiencies, and strategic cross-sectoral collaboration will strengthen the resilience of the program to shocks and support family planning service delivery that is more responsive to clients, ensuring progress is sustained in the decades to come.