

# Frontline Health Workers:

## **Expanding Utilization of Family Planning**

Every day, in a remote but densely populated village in the Amhara region of Ethiopia, Masreshah Abebe works to improve the health of her own community. As one of four certified health extension workers, Masreshah routinely walks from one end of her village to another – a trip that can take more than an hour – to reach her clients. As part of the Integrated Family Health Program supported by the United States Agency for International Development (USAID), Masreshah delivers sexual and reproductive health information and services to 1,700 households. "I track the number of women who use family planning," Masreshah says proudly. "There has been real change in the increased use of contraception since I came here four years ago. Two years ago, I was trained to insert Implanon [injectables are the most popular method, followed by pills]. Family planning has become a good practice, allowing couples to space their pregnancies. Before women practiced spacing, they experienced all kinds of problems. They would get married early, instead of going to school, and would often experience fistula."

The promotion of family planning by frontline health workers (FHW), like Masreshah, who increase access to preferred contraceptive methods, is essential to securing the health and well-being of women and girls. In 2012, 645 million women in developing countries were using modern contraception methods, preventing 218 million unintended pregnancies and averting 138 million abortions, 25 million miscarriages, and 118,000 maternal deaths. Enabling women to choose the timing of their first pregnancy and space later births can prevent up to 30% of the more than 287,000 maternal deaths that occur every year. If all babies were born three years apart, the lives of 1.6 million children under age 5 would be saved each year. Family planning also helps prevent the spread of HIV and other sexually transmitted infections.

Yet today, more than 222 million women in developing countries want to delay or stop childbearing but lack access to an effective method of contraception.<sup>3</sup> For these women and their families, FHWs could serve as an invaluable resource, providing education, counseling, and other essential family planning services within their local communities.

### U.S. Leadership Has Improved Family Planning Access

For more than five decades, the U.S. has played a leading role in global family planning efforts, providing about 50% of total donor funding. USAID advances and supports voluntary family planning and reproductive health programs in more than 45 countries, including 24 current priority countries, and has helped millions of women access the life-saving contraceptives they need to plan their pregnancies.<sup>2</sup>

Frontline health workers (FHWs) provide services directly to communities where they are most needed, especially in remote and rural areas. Many are community health workers and midwives, though they can also include local pharmacists, nurses and doctors who serve in community clinics.

#### U.S. Family Planning Leadership Leads to Progress

Frontline health workers supported by U.S. investments and technical leadership have helped drive major increases in modern contraceptive use in USAID priority family planning countries, including:<sup>5</sup>

- Ethiopia: 14% (2005) 29% (2011) between 2005 and 2011
- Kenya: 32% (2004) 39% (2009) between 2004 and 2009
- Madagascar 18% (2004) 29% (2009) between 2004 and 2009
- Malawi: 28% (2004) 42% (2010) between 2004 and 2010
- Tanzania: 20% (2004) 27% (2010) between 2004 and 2010
- Uganda: 18% (2006) 26% (2011) between 2006 and 2011
- Rwanda: 10% (2005) 45% (2010) between 2005 and 2010

## USAID-Supported Projects Strengthen Health Workforces, Expand Access to Family Planning

- 30,113 FHWs in Ethiopia were trained on community mobilization and behavior change communication in family planning and reproductive health (2008-2013)<sup>6</sup>
- 28,545 FHWs in Ethiopia were trained on family planning and reproductive health service provision and quality (2008-2013)<sup>6</sup>
- Health workers in 864 health facilities provided family planning services to national standards in Kenya, Mali, Namibia, Senegal and South Sudan (2012-2013)<sup>7</sup>
- 1,534 health workers in Kenya, Madagascar and Senegal were trained in family planning (2012-2013)<sup>7</sup>

<sup>1:</sup> The Guttmacher Institute. (2012) Adding It Up: Costs and Benefits of Family Planning Services. http://www.guttmacher.org/pubs/AIU-2012-estimates.pdf

<sup>2:</sup> USAID. Family Planning (2014) http://www.usaid.gov/what-we-do/global-health/family-planning

<sup>3:</sup> WHO. Family Planning Fact Sheet. (2013) http://www.who.int/mediacentre/factsheets/fs351/en/
4: Coleman et al. (2011) Family Planning and U.S. Foreign Policy. Ensuring U.S. Leadership for Healthy Families and Communities and Prosperous, Stable Societies. Council on Foreign Relations. http://www.cfr.org/maternal-and-child-health/family-planning-us-foreign-policy/p2468

<sup>5:</sup> USAID. (2013) Family Planning Overview. http://www.usaid.gov/sites/default/files/documents/1864/fp\_overview.pdf

<sup>6:</sup> Pathfinder International

<sup>7:</sup> IntraHealth International

### Frontline Health Workers Expand Access to Family Planning Services

FHWs represent an integral part of the global effort to broadly enhance access to sexual and reproductive health services. For many women, family planning services might be difficult to access because of geographic obstacles, sociocultural barriers, or both. FHWs, who are frequently from the communities they serve, help women overcome these challenges by bringing the family planning services they need, including injectables and implants, to their doorstep. To guarantee the safe delivery of these services, local health infrastructure must also be strengthened to ensure a reliable supply of health commodities and specialized medical care when needed.

FHWs serve as a critical resource, equipped to answer questions and address concerns about family planning. As trusted members of the community, they are aware of cultural sensitivities. FHWs are also making progress in increasing overall community support for contraceptive use, including among men, and improving understanding of the role contraception plays in preventing HIV and other STIs.<sup>8</sup>

### The Crucial Role of Frontline Health Workers in Family Planning



Current estimated global shortage of doctors, nurses and midwives needed to deliver basic services



Serving all women in developing countries that currently have an unmet need for modern contraception methods would prevent 79,000 maternal deaths and 1.1 million infant deaths.



More than 38,000 frontline health workers recently deployed in Ethiopia have driven a four-fold increase in modern contraceptive use.



Every \$1 invested in family planning services yields between \$2 and \$6 in subsequent social sector cost savings in Sub-Saharan Africa and up to \$13 in South Asia.9

#### How the U.S. Can Accelerate Progress

At the 2012 London Summit on Family Planning, the United States, with more than 70 other countries, donors, and civil society organizations pledged to address the significant unmet need for family planning worldwide by collectively reaching an additional 120 million women and girls in the poorest countries by 2020 with voluntary access to family planning. For this target to be achieved, health workforce strengthening, especially on the frontlines of care, must be a central focal point. By and large, the countries with the greatest unmet family planning needs also have some of the most severe health workforce shortages.

In order to accelerate progress and meet this commitment to expand access to family planning, the U.S. must increase its support for frontline health workers and maximize the impact of existing support for these crucial partners. To this end, the U.S. should develop and implement a more coordinated and comprehensive strategy on human resources for health (HRH) that outlines how it will contribute to strengthening the global health workforce to provide family planning-related and other essential health services. This plan should include a blueprint for an evidence-based, country led and owned, systematic approach to support recruiting, training, retaining, equipping and supervising frontline health workers across global health programs.

8: The Guttmacher Institute. 'I Am Who I Serve'—Community Health Workers In Family Planning Programs. (2010) http://www.guttmacher.org/pubs/gpr/13/3/gpr130308.html
9: Family Planning 2020.(2012) London Summit on Family Planning. http://www.familyplanning2020.org/images/content/old\_site\_files/London-Summit-Family-PlanningOverview\_V1-14June.pdf
10: Family Planning 2020. (2013). FP2020: Partnership in Action 2012-2013. http://www.familyplanning2020.org/images/content/documents/FP2020\_PartnershipInAction\_2012-2013\_lores.pdf
11: WHO. (2012) From Evidence to Policy: Expanding Access to Family Planning. http://apps.who.int/iris/bitstream/10665/75164/1/WHO\_RHR\_HRP\_12.19\_eng.pdf

#### **About Us**



The Frontline Health Workers Coalition is an alliance of United States-based organizations working together to urge greater and more strategic U.S. investment in frontline health workers in developing countries as a cost-effective way to save lives and foster a healthier, safer and more prosperous world.