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Family Planning

The prevention of unplanned and unwanted pregnancies could help avert 20-35% of maternal deaths and as much as 20% of child deaths. MaMoni HSS is promoting scale-up of FP services as an essential part of comprehensive maternal, newborn and child health care (MNCH).

MaMoni HSS Project is assisting the Government of Bangladesh both at the national and district levels to increase access to and quality of integrated FP services throughout the MNCH continuum of care. Nationally, MaMoni HSS participates in key FP technical working groups and contributes to national policy and guidelines as part of the GOB's FP2020 commitment to increase utilization of FP services. At the sub-national level, MaMoni HSS is providing technical assistance to DGHS and DGFP in Sylhet and Chittagong -- two of the lowest performing divisions in the country with CPR rates less than 50% and the highest unmet need for contraception. In April 2014, the project has extended its work into parts of Barisal as well.

Key contributions include the following:

National Level Contribution:

National Policy and Strategy Development: The project provides technical assistance to the MOHFW, through the FP2020 Bangladesh Country Engagement Working Group (BCEWG) and the National Post-Partum Family Planning Working Group (NPPFPWG), to set national targets, strategies, and action plans to scale up and improve quality of FP services.

KEY FACTS

Total Fertility Rate	2.3
Modern Contraceptive Prevalence Rate (CPR)	54.1%
Unmet Need for Family Planning Services	12%

Developing National Guidelines and Training Modules: MaMoni HSS has supported the development of national curriculum on injectable contraception, development of counseling guidelines and job aides on family planning for community volunteers.

District level Contribution:

Integration of family planning services: The Project promotes integration of family planning services in the MNCH continuum at all levels of service provision. Special emphasis is given on improving access, quality and utilization of post-partum family planning (PPFP) services. MaMoni HSS supported capacity building of service providers on insertion of postpartum intrauterine contraceptive device (PPIUCD) by trained providers (FWVs and paramedics) from different levels of facility Community Volunteers (CVs) are engaged and oriented to provide FP counseling and referral for all FP services, including long acting and permanent methods.

Improving demand for FP services and addressing barriers: The community engagement and behavior change communication efforts focuses on addressing barriers to accessing FP services. MaMoni HSS uses multiple channels and methods to communicate FP

messages and to promote care seeking, including community meetings, counseling by community volunteers and referral, interpersonal communication by service providers, group BCC events etc.

Quality improvement: The project is supporting the integration, scale up & quality of FP services in all service delivery points of MOH&FW, particularly at the upgraded UH&FWCs. Quality improvement standards and tools have been developed and facility providers are oriented to benchmark their performance against these standards and identify areas where further capacity building support may be required.

Logistic Monitoring: In project areas, in coordination with DGHS & DGFP, MaMoni HSS regularly tracks and monitors availability of commodities to ensure continuous supply of modern short-term and long-term contraceptive methods in facility and community levels according to national guidelines. All methods, including IUCD, implants, and LAPM are available in UHC, MCWC and DH hospitals while barrier methods, oral hormonal contraception, short term injectable contraception are available at community level.

Strengthening information systems and use of data: The project closely supports the government to improve the collection, compilation, analysis and use of routine health information systems. As part of the process the project has supported revision of registers for antenatal care, postnatal care and delivery used by FWVs, CSBA registers, and FWA registers. MaMoni HSS staff also support government field staff from both departments in collecting quality data and entering them into the national database. The project also has introduced joint supervisory visit, SBMR & RRQIT for critical gap management in quality service delivery in the facility that includes FP services with emphasis to PPFP for improving Maternal & Child health.



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About MaMoni Health Systems Strengthening (MaMoni HSS) Project

The MaMoni Health Systems Strengthening (HSS) project is a four-year Associate Award under the global Maternal and Child Health Integrated Program (MCHIP). The focus of this project is strengthening the systems and standards for maternal, newborn and child health, family planning and nutrition (MNCH/FP/N) that will result in declines in maternal, newborn and child mortality in Bangladesh. The project supports the Ministry of Health and Family Welfare (MOH&FW) to introduce and leverage support for scale-up of evidence-based practices already acknowledged in Bangladesh.

MaMoni HSS is primed by Jhpiego in partnership with Save the Children (SC), John Snow, Inc. (JSI), and Johns Hopkins University (JHU)/Institute of International Programs (IIP), with national partners, International Centre for Diarrheal Disease Research, Bangladesh (icddr,b), Dnet, and Bangabandhu Sheikh Mujib Medical University (BSMMU).

The project covers 40 upazilas in six districts and serves around 12.2 million people. The six focus districts are Habiganj, Lakshmipur, Jhalokathi, Noakhali, Pirozepur and Bhola.

Contact Us

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