



The Long and Short of It: Long-acting and Permanent Family Planning Methods in the Private Sector



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Why focus on the private sector?

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On behalf of USAID's Office of Population and Reproductive Health, I would like to welcome you to the e-Conference on long-acting and permanent methods organized by the SHOPS Project. Today, I will discuss why the private sector is important in terms of use of long-acting and permanent methods.

The private sector provides up to half of all health care in developing countries. Most of this is through out of pocket payment. This is even true in Sub-Saharan African countries and it is true for family planning. The private sector includes NGOs, hospitals, private doctors, nurses, midwives, pharmacies, and drug shops. It includes both the non-profit and commercial sector. There are huge resource gaps in terms of what is needed to provide for the unmet need for family planning in developing countries. The public sector alone cannot meet all of this need. In many countries, private sector providers and pharmacies provide increased access to health services. Ministries of Health need to understand how to harness the potential of the private sector to help them meet their family planning programming objectives. Regulation, oversight, contracting out, and national health insurance may all be part of the strategy to utilize the private sector for long-acting and permanent family planning methods with government stewardship of this process.

Individual providers are often small and fractionalized. Franchising, or networking providers, provides a way to improve service quality and needed public health services, such as family planning. Training in long-acting and permanent methods - such as implants, IUDs, and female and male sterilizations - and access to affordable commodities and medical equipment can be an integral part of the design for a social networking scheme. Social franchising can be coupled with a voucher scheme to serve the poor. In fact, most of the developing world's social franchises began by adding family planning services.

Mobile outreach with long-acting and permanent methods has recently proved very successful in terms of providing private sector access in hard to reach areas and to marginalized populations. Marie Stopes International and Populations Service International have been instrumental in this work, but other NGOs such as APROFAM in Guatemala have also increased access to services through this strategy. In terms of demand side strategies, the private sector has been key to implementing innovative communication, outreach, and mobilization campaigns. New and innovative techniques with mHealth technologies are being tested that promise to drive down the cost of service delivery.

In most countries where USAID work in Latin America great success in family planning was achieved over the last 25-30 years in addressing unmet need in family planning. Initially, private sector providers, that were predominately IPPF affiliates, led the way creating access to family planning and to long-acting and

permanent methods such as female sterilization, IUDs, and, later on, implants. Uptake of these methods over time later encouraged governments to provide these services as the modern contraceptive prevalence increased and using contraception became a behavioral norm at the population level. Private pharmacies became important providers of oral contraceptives and condoms. A wide method mix is a key indicator of family planning quality, and without long-acting and permanent methods it is difficult to meet the needs of men and women in the developing world for family planning. Private sector provision of these methods is a key element of a successful and sustained family planning program.

In Latin America, the private sector access to long-acting and permanent methods were all part of the successful formula for sustained family planning programs. Ensuring that women and men throughout their reproductive health cycle would have access to methods that would help them achieve their reproductive intentions. This then contributed to increased investments in education for wanted children, increased levels of educational attainment for women, increased labor force participation by women, and increasing economic development.

I hope you will take the opportunity at this conference to learn how we can best utilize the power of the private sector to meet the needs of women and men in the developing world for long-acting and permanent family planning methods. Thank you.