



# **Consortium of Reproductive Health Associations (CORHA)**

## **Report On FP 2020 Accountability Project Stakeholders Meeting**

**Mado Hotel  
February 19/2020  
Addis Ababa, Ethiopia**

## **I. Introduction**

This report summarizes the outcomes of a half day stakeholders workshop that was organized by the Consortium of Reproductive Health Associations (CORHA) on February, 19<sup>th</sup> 2020 in Addis Ababa. The workshop was attended by family planning stakeholders from CSOs and Government of Ethiopia currently supporting FP2020 activities.

The overall aim of the workshop is to accelerate progress towards achieving FP2020 commitments in Ethiopia by moving forward on a common agenda. The specific aim of the workshop was to discuss and prioritize the key challenges facing FP2020 activities in Ethiopia for action by partners towards realizing the FP2020 commitments as well as put forward key actions to addressing identified barriers. The Motion Tracker progress report was presented during the workshop. The progress report documented the contributions of 12 CSOs to the FP2020 commitments during August/2019 - January, 2020. For more details about the topics and workshop methodology see the workshop agenda in Annex I.

## **II. Main goal, objectives and expected outcomes**

The main goal of the workshop is to accelerate progress towards achieving FP2020 commitments in Ethiopia by moving forward on a common agenda.

Specifically the workshop was aimed at:

- presenting the Motion-Tracker progress report during the last six months (August 2019-January 2020) to discuss partner contributions towards achieving FP2020 commitments
- get consensus and prioritize key challenges facing FP2020 activities in Ethiopia for action by partners towards realize the FP2020 commitment
- to identify key actions that CSO partners can do differently going forward into the post 2020 period

## **III. Meeting Organization**

The workshop was attended by 25 participants drawn from members of CORHA, the Ministry of Health and other major SRHR based civil society organizations and partners in Ethiopia. In the workshop, speeches were made, presentations were delivered and deliberations and actions were put forward for the realization of the FP2020 commitments.

The following sections outline the main discussion topics of the workshop and a summary of the critical areas of discussion in each session.

## Welcoming speech and introduction

**Ato Abebe Kebede**, Executive Director (CORHA) began his speech by thanking the participants for coming to the meeting. He noted that the Government of Ethiopia updated its commitment at the Family Planning Summit in London, in July, 2017. The Government made three interrelated commitments in 2017 to improve the health status of its youthful population, improve the distribution of FP commodities and consumables by enhancing the capacity of healthcare workers to manage the logistics system and the Pharmaceuticals Fund and Supply Agency (PFSA) and progressive increase of financing to family planning services.

He further noted that CORHA in partnership with US based Population Action International (PAI) and Ugandan based Samasha Medical Foundation recently commenced the FP2020 Accountability project that is implementing Motion Tracker- a customized dynamic framework for strengthening accountability and driving action by keeping commitments visible and highlighting progress while fostering participation, engagement, and ownership to address bottlenecks along the way.

He further noted the objective of the workshop is to accelerate progress towards achieving FP2020 commitments in Ethiopia by moving forward on a common agenda. Finally, he expressed his sincere appreciation to Dr. Tadele Kebede, Family Planning Team Leader, and Ministry of Health for his commitment and engagement throughout the preparation of the workshop.

## Keynote Speech

**Dr Tadele Kebede**, Family Planning Team Leader with Ministry of Health made keynote speech. The key points of his speech were summarised as follows:

- Ethiopia has a large adolescent and youth population who live in rural areas. Pronounced disparities in early marriage, early childbearing, and timing of first contraceptive use exist between urban and rural women;
- Although family planning coverage is rapidly increasing, unmet need for family planning is still high (21%). This requires attention by all FP stakeholders and addressing the missed opportunities. High unmet need is still the challenge in Ethiopia;
- Domestic funding for family planning service and commodities is still wanting and needs to be strengthened;
- Modern PPF uptake is 25% which is the lowest as compared to countries with very successful programs where uptake levels are around 60-70%.

- The National Composite Index on Family Planning (NCIFP) which used to understand the enabling and policy environment for family planning shows relatively better scores in areas of strategy and accountability but quality, equity and data needs to be improved
- Overall, Motion Tracker has a value-add to ensure accountability by CSOs as FP2020 looks to joint commitments among Government, CSOs and donor communities.

### Session 1: Motion Tracker progress report

**Mr Dejene** from CORHA presented the Motion Tracker progress report. His presentation had two sections. The first section looked at the overview of the Motion Tracker while the second section showcased the partner contributions and progress made towards FP2020 commitments. The key points raised during the presentation are summarised below:

- A total of 30 organizations were visited and 12 responded to the KIIs in the first round and both primary and secondary data sources were utilised.
- Commitment one has 19 process indicators. Of which 5 were achieved, 9 were on-track and no information was available for the remaining 5 indicators
- Commitment two has 17 process indicators. Of which 3 were achieved, 4 were on track and no information was available for the remaining 10 indicators
- Commitment three has 9 indicators. Of which 3 were achieved, 2 were on track and no information was available for the remaining 4 indicators

The frequently mentioned challenges/barriers to realizing FP2020 commitments included:

- Misunderstanding towards Comprehensive Sexuality Education (CSE) among government experts (CSE is viewed as promoting the right of sexual minorities and foreign cultural practices against the Ethiopian values and laws)
- Resistance or poor utilization of permanent FP methods due to misconceptions
- Gaps in AYPH services delivery
  - Lack of messages targeted to adolescents and youth.
  - Health care provider was not adequately trained to deal with youth
  - RH services are not accessible to adolescents and youth in education institutions
  - Lack of youth friendly services, including little access to sexual and reproductive health services, treatment or prevention of STI/HIV
  - No linkage between health institutions and education institutions
- Security issues
- Poor male engagement and support in family planning (religious, community and clan leaders)

- Inadequate commitment of healthcare workers to integrate Post-Partum Family Planning (PPFP) at facilities with high delivery caseload
- Minimal advocacy efforts to increase the total annual Government budget allocated for FP commodities

At the end of the presentation, a plenary discussion was conducted and the discussion was focused on the following:

- discuss barriers/ challenges and seeks to get consensus on 2-3 barriers to prioritize for action by partners
- how can we as partners do better or different if we want to realize country FP2020 commitments?

Key points from the discussion:

- Acknowledging the FP2020 is a partnership among government, civil society, multilateral organizations, donors, the private sector, and the research and development community, tracking the accountability of CSOs is essential and appreciated CORHA for the initiative.
- *How does the Motion Tracker work*→ The indicators are too many and some of the process indicators are purely the accountability of the government. How can we hold CSOs accountable or to account for whatever is the responsibility of government?
- The FP2020 has standard set of indicators to compare the progress across countries. The process indicators under the Motion Tracker cannot provide such comparison. Furthermore, the outcome and impact level indicators are most important for programme than process level indicators.
- CSO at global level made commitments towards FP2020, how far you track their contribution if they have any program in Ethiopia?
- To monitor the accountability of different sectors, there are other tools that include six indicators like Track 2020, PMA 2020. For example in PMA 2020, the CSOs contribution cannot be seen.
- What is the added value of Motion Tracker tool for FP2020 accountability beyond other monitoring track mechanisms such as Track20, PMA2020 and others?
- Rather than focusing on process level indicators why do not you focus on like developing shadow report/parallel reporting on family planning, as we are fast approaching to the target year
- Appreciate the initiative and appreciate those CSOs that responded to KII. Ministry of Health has been frequently asked what are the role and contribution of CSOs during progress review meetings. This is a very good opportunity to learn and share their roles and contributions

- Why too many indicators are having no information? Does it mean there is no CSO contributing towards those indicators or CSOs do not contribute to those indicators as they are solely government responsibilities?
- What mechanism do you have in place to verify the self-reported progress report?

CORHA team responded to the question raised and appreciate for the comments.

## Session 2: Key recommendations to address the barriers

**Ato Abebe Kebede** facilitated this session aimed at prioritizing the barriers and action planning towards realizing country FP2020 commitments. The following summarizes the key barriers and recommendations raised during the discussion:

- Ethiopia's commitment clearly focuses on adolescent and youth sect of the population. However adolescent and youth friendly services are poor in terms of coverage and quality. Efforts should be galvanized to expand YFS in all health facilities.
- Integrating FP into maternal health and post abortion services to ensure post-partum FP services is a quick win to realize the FP2020 commitments. Post-partum and post abortion family planning need to be areas of focus to move the FP2020 agenda forward.
- Ensuring 24 hours' services is still a challenge at facility level.
- In the efforts to address FP2020 target, focus should be given to private facilities. We need to have public-private partnership particularly to address FP commodity shortage like implants and capacity building of health workers. Emphasis should be given to expand family planning services in workplaces like in the industrial parks and flower farms where the majority of workers are women.
- Advocacy and strong communication strategy should be developed and implemented to increase domestic finance for FP within the framework of universal health coverage and integration of family life education/CSE in school curriculum.

During the session deliberations on the major challenges and possible actions to address the challenges were held at length and CSOs promised to integrate activities to address the priority challenges identified.

### Achievements and lessons learned

- The motion tracker is a complimentary tool to other FP 2020 tracking mechanisms. The motion tracker is purely used process indicators. The number of indicators seems too long, CORHA will

discuss with PAI and Samasha to discuss and revise the indicator list. CORHA believes that there are rooms for improvement

- This project has an added value in identifying gaps and success stories towards realizing the FP2020 commitment and contributes to the national progress report. The process indicators are equally worth following as impact indicators.
- CORHA under this project will track the activities of those CSOs which have running programs in Ethiopia. Hence, we will follow on commitment made by NGOs at global level and others contributing towards the national commitment.
- Participants were requested how they can do better or different to realize country FP2020 commitments. Although they cannot made commitment here now, there are few organizations promised to work in collaboration with CORHA to advocate on key actions raised during the discussion.

## Annex 1: Workshop Agenda

# Building a Common Agenda: Drive towards achieving Ethiopia's FP2020 Commitments

*Focusing our action through multi-stakeholder engagement and participation*

<b>TIME</b>	<b>ACTIVITY</b>
09:00 – 09:30	<b>Arrival and Registration</b>
09:30 – 09:45	<b>Introductions and meeting objectives</b> Mr. Abebe Kebede (ED, CORHA)
09:45 – 10:00	<b>Opening Remarks</b> <i>Dr. Tadele Kebede</i> <i>FP Team Leader, Ministry of Health</i>
10:00 – 10:45	<b>Presentation and Discussion of the Motion Tracker Progress Report (FY 2017/18 -FY2019/20)</b> <i>Dejene Getahun, CORHA</i> <i>Progress report</i>
10:45-11:30	<b>Tea/Coffee Break</b>
11:30-12:30	<b>Discussion on prioritizing barriers and recommendations to address the barriers</b> <i>Abebe Kebede, CORHA</i>
12:30-12:45	<b>Closing session</b> <i>Abebe Kebede, CORHA</i>
12:45-13:15	<b>LUNCH and DEPARTURE</b>

**Venue:** Mado Hotel, Addis Ababa



**Annex 2: List of participants**

<b>Name</b>	<b>Organization</b>
<b>Abebe Kebede</b>	CORHA
<b>Ahmed Wassie</b>	Mahibere Hiwot
<b>Amare Worku</b>	PADET
<b>Betelhem Bezabih</b>	CORHA
<b>Dejene Getahun</b>	CORHA
<b>Difabachew Setegn</b>	Family Guidance Associations of Ethiopia (FGAE)
<b>Dr Awoke Tasew</b>	UNFPA
<b>Dr Getachew Bekele</b>	Engender Health
<b>Dr Hailengaw Eshete</b>	Population Media Centre
<b>Dr Mesfin Worku</b>	AMREF Health Africa
<b>Dr Tadele Kebede</b>	FP team leader, MCH-N Directorate at the Ministry of Health
<b>Dr Wegen Shiferaw</b>	WHO
<b>Fekadu Jaleta</b>	DSW- Ethiopia
<b>Fentahun Alemu</b>	<u>Hiwot Ethiopia</u>
<b>G/Eyesus G/Michael</b>	Pro-poor
<b>Gemechis Shego</b>	UNFPA
<b>Henok Melese</b>	AIDS Healthcare Foundation (AHF)
<b>Maria Mamo</b>	<u>JHPIEGO</u>
<b>Mentuab Araya</b>	<u>Nutrition Plus</u>
<b>Mintiwab Gelagay</b>	JHPIEGO
<b>Mulu Fasigo</b>	Family Guidance Associations of Ethiopia (FGAE)
<b>Selamawit Engida</b>	Tamira
<b>Semenhe Fekadu</b>	CORHA

<b>Wubitu Hailu</b>	Kulich Youth Development Organization
<b>Yemane Guesh</b>	SYHLE
<b>Yenenesh Tarekegn</b>	dkt Ethiopia
<b>Zecharias Fasil</b>	<u>E.com</u>
<b>Zena Markos</b>	OSSHI