

Family Planning Program

- **The Population Problem in Egypt:**
- Rapid population growth;
- Improper population distribution (over 97% of Egyptians are concentrated in about 4% of the total area of one million square kilometers) and
- Improper population characteristics (high illiteracy rate, high level of unemployment, high age dependency ratio, and high economic dependency ratio and the minor role of women in the development programs).

Family Planning Program

The national population policy has three main objectives:

- Decreasing the rate of population growth;
- Achieving better population geographic distribution.
- Promoting the population's characteristics.

Advantages of Family Planning

Support maternal and child health through:

- **Reducing the risks due to teenage pregnancy and late pregnancy**
- **Helping proper spacing between births**
- **Reducing the risks of multiparity**
- **Family welfare and better child care when having a suitable number of children.**

Family Planning Program

Goal of the Family Planning Program:

Support the national population policy in reducing the fertility rate (to reach the replacement level fertility by year 2017) and promoting the maternal and child health.

Family Planning Program

- **Specific Objectives of the Family Planning Program**
 - Increase the **contraceptive prevalence rate**; through the availability and accessibility of quality FP services
 - Increase the **demand** for FP services through IEC programs
 - Decrease the **discontinuation** rates for contraceptives through quality FP services
 - Decrease the **failure rate** for FP methods
 - Reduce the **unmet needs** for family planning

Requirements for Successful Family Planning Program:

(1) Presence of National Population and Health Policy:

- **Voluntary use of FP methods**
- **Avoid use of Sterilization and Abortion as FP methods**

(2) Availability and Accessibility of Family Planning Services:

- **Affordable prices and on voluntary basis.**
- **Ensure the availability of family planning services all over the country**

Requirements for Successful Family Planning Program:

(3) Availability of Contraceptive Methods:

- Ensure the availability of variety of methods of contraception to ensure free conscious choice by all couples. In Egypt the following contraceptive methods are available: IUD, Combined Oral Contraceptives (COC), Progestin Only Pills (POP), Injectables, condom and implants.

(4) Family Planning Quality Service Delivery:

- Capacity building/Training of family planning service providers
- Ensure that the FP clinics provide quality services according to the quality standards

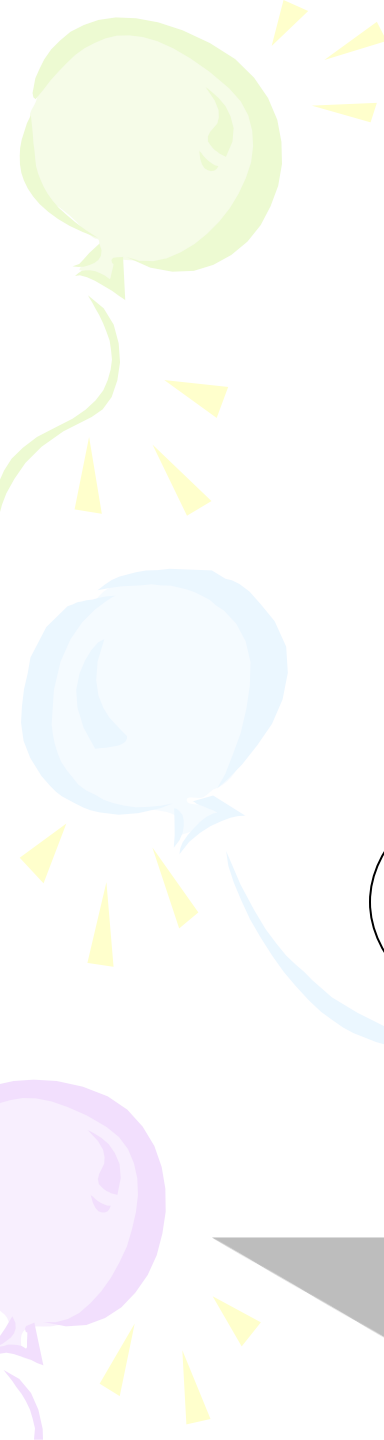
Requirements for Successful Family Planning Program:

(5) Increase Demand for Family Planning {Information, Education and Communication (IE&C)}:

- **Improve information communication and counseling services in family planning program through mass media, local community leaders and community workers.**

(6) Support the Research Program in Family Planning

- **Encourage the scientific community in the universities and institutions to participate in the research programs in family planning.**



Goal (Policy)
**Achieving the Replacement Level
Fertility by year 2017
(TFR 2.1)**

Strategic Objectives (Programmatic)

- Increase Contraceptive Prevalence Rate
- Decrease the Contraceptive Discontinuation Rate
- Decrease the Unmet Needs for FP

Objectives at Health Organizations' level

- Increase the number of FP clients/clinic
- Increase the Proportion of young FP clients (less than 25 years old)
- Increase the proportion of Low Parity (Less than three children) FP Clients

**MOHP
Resources
For FP
methods and
Services**

**Increase the
Percent of
Health Facilities
Providing
Quality FP
services**

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Evaluation of the Family Planning Program:

- **POLICY Level :**

1. Crude Birth Rate
2. Rate of Natural Increase
3. General Fertility Rate
4. Fecundity Rate
5. Age Specific Fertility Rate
6. Total Fertility Rate

Evaluation of Family Planning Program:

- Health Program Level
 - 1- Contraceptive Prevalence Rate
 - 2- FP discontinuation Rate
 - 3- FP method failure rate
 - 4- Percent of Women with Unmet needs for Family Planning

Evaluation of Family Planning Program

Organization Level (MOHP):

(FP Resources /input Indicators)

1. FP clinics/100,000 MWRA
2. PHC Physician /100,000 MWRA
3. PHC Nurse/100,000 MWRA
4. Community Worker/100,000 WRA

Evaluation of Family Planning Program

Organization Level (MOHP):

(Process Indicators measures how the resources are managed to optimize the output)

1. Percent of FP clinics providing quality FP services
2. Percent of physicians trained in basic FP (NSOP)
- 3- Percent of Nurses trained in basic FP (NSOP)

Evaluation of Family Planning Program

Organization Level (MOHP):

(Output Indicators: Measure the volume of utilization of FP clinics and the characteristic of utilizers):

1. Average Number of FP clients/clinic
2. Percent of young FP clients (<25 ys) to total FP Clients
3. Percent of low parity FP clients (<3 Children) to total FP clients



Thank for Professor Dr

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