

# FAMILY PLANNING 2020 COMMITMENT

GOVT. OF MYANMAR

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The Government of Myanmar updated its commitment at the [Family Planning Summit in London, UK](#) on July 11, 2017.

The Government of Myanmar commits to:

- 1. Innovative financing solutions, especially for commodities:** Myanmar will explore innovative financing models such as Global Financing Facility (GFF) to ensure donor and national resources of \$3 – 5 million USD annually, incrementally for commodities and to ensure sufficient and timely availability of quality contraceptives for all the reproductive aged women of Myanmar. Myanmar will work with our development partners and UNFPA to procure high-quality contraceptives regularly and consistently and to expand the range of affordable modern contraceptive methods available to our women and girls.

In the fiscal year 2012-2013, Myanmar's Ministry of Health and Sports (MOHS) committed USD \$1.29 million for the purchase of contraceptives during the 2012-2013 financial period. The Government of Myanmar's investment in reproductive health (RH) commodities increased to 2.7 million USD in 2016 – 2017.

Myanmar pledges to increase the health budget to cover all women and eligible couples by 2020. The Myanmar Ministry of Health and Sports commits to working toward increasing the resources allocated to family planning in state budgets. The government is also committed to ensuring results-based management through new initiatives for effective fund flow mechanisms and internal auditing.

Procurement practices to enhance value for money to be explored with DPs. It is also important that all family planning programs are aligned to Myanmar's National Health Plan (2017-2021) implementation. MOHS commits that the Essential Package of Health Services (EPHS) has contraceptives especially Long Acting Reversible Contraceptives (LARCs) are positioned as part of EPHS interventions.

Myanmar aims to strengthen the policy of providing modern contraceptive methods by trained/skilled nurses, midwives and trained volunteers through better collaboration among multi-stakeholders. The Government of Myanmar also pledges to implement people-centered policies to address regional, social and gender-related barriers, including disparities and inequities between urban and rural and rich and poor populations in accessing affordable modern contraceptive methods.

In addition, Myanmar commits to expanding the forum of family planning under the umbrella of the Health Sector Coordinating Committee. The Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH) Technical Strategy Group has been formed by the MOHS under which is the Lead FP working group and lead RH Technical working groups together with Child health working groups function.

## Proposed Actions

- Ministry of Health and Sports and Ministry of Finance and Planning will discuss on national budget and investing more in health especially in FP commodities. The planning cycle begins in October 2017 for 2018-2019 budget.

- Since Myanmar has become GFF country in 2016, the Ministry of Health and Sports working with H6 and RMNCAH TSG will focus on ensuring at least 3million to 5 million USD is invested annually to ensure that RH Commodities are available.
- GFF funding as grant and loans will be tapped upon as part of health financing of national health Plan 2017-2021.

- 2. Strengthening supply chains and expanding the range of contraceptives available to women:** Ministry of Health and Sports will bring on board and work with development partners to strengthen the integrated national supply chain and ensure that no woman is left empty-handed, and that they will have informed choice of contraceptives at the last mile.

The Government of Myanmar will continue to strengthen the logistics management information system (LMIS), to ensure reproductive health commodity security through improved quantification, forecasting, and integrated procurement planning, supply, storage, systematic distribution, and inventory control.

To fulfill above commitment, there will be a roll out of a RH commodities logistic system training to midwives and health staffs in additional 4 States/Regions (out of 14 States/Regions), training on LARC method (Implant) and expansion throughout the country (now half of the country has been covered), collaboration among EHO and CSO, etc.

Introduction of new method for the women of Myanmar- Subcutaneous DMPA-Subcutaneous DMPA (Sayana Press) program is initiated in 2017 especially for women in hard to reach regions.

Responsible sector under Ministry of Health and Sports is Maternal and Reproductive Health Division. Focal point for UN agencies is UNFPA. MSI became the additional focal point for CSO and DFID is the focal point for donor agencies in 2017.

#### **Proposed Actions**

- MOHS to lead the expansion of townships and states and regions with integrated LMIS system. UNFPA –JSI continued support for expansion of LMIS. Contraceptive utilization data to be generated by the system to be collected and analyzed for accurate forecasting and procurement.
- In 2017-18 there will be acceleration of FP method mix and commodity security through expansion of RH-LMIS over more states and regions, namely Rakhine, Chin, Kayah and Kachin states where men, women and girls are reached at the last mile with a choice of contraceptives for family planning, including life-saving maternal medicines and contraceptives.
- With joint efforts it plans to offer women of reproductive age with a choice of contraceptives including the SC-DMPA (Sayana Press).

- 3. Empowering young people to thrive:** Myanmar will ensure adolescent and youth friendly health services including access to information on sexual and reproductive health for in-school and out-of school youth as well as contraceptive services.

2017 marks initiation of adolescent and youth sexual and reproductive health and rights program with focus on availability and access to information and contraception services. Youth mobile application “Love Question-Life Answer” developed aligned to Comprehensive Sexuality Education principles will be launched to young people in all states and regions to provide accurate sexual and reproductive health information and reference to services delivery points if young people should need it.

Adolescent and Youth Friendly Health services manual developed in Myanmar context is being disseminated and Basic health staff trained to provide youth friendly SASRH services including contraception.

Young people should be encouraged to speak about Sexual and Reproductive Health and Rights (SRHR) and empowered to have capacity for policy dialogue so that more young people will have information and knowledge, skills to communicate about SRHR in Myanmar.

#### **Proposed Actions**

- Myanmar hosted a national conference focused on family planning and reproductive health best practices in 2014 and the 8th Asia Pacific Conference on Reproductive and Sexual Health and Rights in 2015.
- Myanmar should send youth delegations to 9<sup>th</sup> APCRSRH in Vietnam in 2017.

- 4. Reaching the hardest to reach:** Myanmar will work with civil society organization, ethnic health organizations and private sector to make sure that women experiencing humanitarian crises or facing other socio-cultural barriers can access the contraceptive services and supplies that they need to protect their health.

In addition, Myanmar will implement a monitoring system to strengthen quality of care and ensure women have a full range of contraceptive options. Given gender inequality, including gender-based violence (GBV) and other forms of harmful or disenfranchising social and cultural barriers to accessing or making choices in SRHR and family planning, the MOHS – working together with UNFPA, development partners and other Ministries – is committed to rolling out standard operating procedures for preventing and responding to GBV, especially sexual violence, in an integrated approach. This will be linked to providing family planning services of choice for the women to decide if they need contraception.

The Government of Myanmar will review and revise its current Five-Year Strategic Plan for Reproductive Health and Costed Implementation Plan (CIP) for FP2020 through a consultative process, and Myanmar's family planning program will identify and address social and cultural barriers as well as regional disparities and inequalities in line with WHO revised guidelines.

The government also commits to improving availability in health facilities so that the method mix is improved, especially in offering use of long-acting reversible contraceptives and permanent methods as also offered adding to method of choice and ensuring quality of care.

Myanmar seeks to boost partnership with the private sector, civil society organizations, and other development partners including Ethnic Health Organizations for expanded service delivery in family planning.

#### **Anticipated impact**

- To **increase additional users** of contraceptives from current 4 million in 2016 to 17 million in 2020 as per CIP strategies.

#### **Proposed Actions**

- Introduction of new Method of contraception, Sub cutaneous DMPA, launched on 27<sup>th</sup> June. Will give priority to hard to reach regions in Chin, Rakhine, Shan, Kayin and Kayah regions where CPR is low and unmet need is high.

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*The following text is the commitment made by the Honorable Ko Ko Latt on behalf of the Government of Myanmar at the International Conference on Family Planning on November 15, 2013.*

The government of Myanmar views family planning as critical to saving lives, protecting mothers and children from death, ill health, disability, and under development. It views access to family planning information, commodities, and services as a fundamental right for every woman and community if they are to develop to their full potential.

### **Objectives**

1. Increase CPR from 41 percent to 50 percent by 2015 and above 60 percent by 2020.
2. Reduce unmet need to less than 10 percent by 2015 (from 12 percent in 2013).
3. Increase demand satisfaction from 67 percent to 80 percent by 2015.
4. Improve method mix with increased use of long acting permanent methods (LAPMs) and decentralization to districts.

### **POLICY & POLITICAL COMMITMENTS**

Myanmar aims to strengthen the policy of providing clinical contraceptive methods by trained/skilled nurses, midwives and volunteers through better collaboration among multi-stakeholders within the context of Nay Pyi Taw Accord. The government of Myanmar also pledges to implement people-centered policies to address regional disparity and inequity between urban and rural and rich and poor populations. In addition, Myanmar commits to expanding the forum of family planning under the umbrella of the Health Sector Coordinating Committee and to creating an Executive Working Group on Family Planning as a branch of the Maternal Newborn and Child Health Technical Strategic Group.

### **FINANCIAL COMMITMENTS**

In fiscal year 2011-2012, Myanmar committed USD \$1.29 million for the purchase of contraceptives during the 2012-2013 financial period. Myanmar pledges to increase the health budget to cover nearly 30 million couples by 2020. The Myanmar Ministry of Health & Sports commits to working toward increasing the resources allocated to family planning in state budgets. The government is also committed to ensuring results-based management through new initiatives for effective fund flow mechanisms and internal auditing.

### **PROGRAM & SERVICE DELIVERY COMMITMENTS**

Myanmar seeks to boost partnership with the private sector, civil society organizations, and other development partners for expanded service delivery. The government of Myanmar will continue to strengthen the logistics management information system to ensure reproductive health commodity security through improved projection, forecasting, procurement, supply, storage, systematic distribution, and inventory control. In addition, Myanmar will implement a monitoring system to strengthen quality of care and ensure women have a full range of contraceptive options.

The government of Myanmar will review and develop a five-year strategic plan for reproductive health through a consultative process, and Myanmar's family plan will address regional disparities and inequalities. The government also commits to improving the method mix with increased use of LAPMs.