

Implementation Story: India

Is it possible to increase family planning users in few months? Let's find out!!

15 September 2021



Moderator





Kate Graham Sr. Program Officer The Challenge Initiative

Today's Agenda

Opening & Welcome

Kate Graham

Sr. Program Officer

The Challenge Initiative



Maheen Malik

Hitesh Sahni

Amit Kumar

Samarendra Behera

Q&A

Kate Graham

Closing

Deepti Mathur





Before we Begin



Webinar will be recorded



Submit your questions anytime!

Q&A after all presentation



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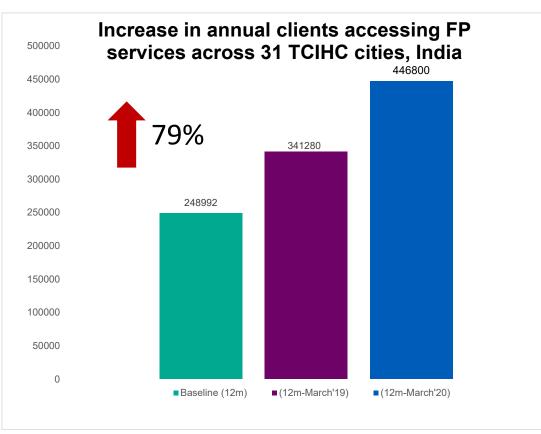


Download the handouts



Increased Client Volume







Meet the Presenters



Maheen Malik
Director of Field Operations, TCI
Baltimore

Maheen brings over 15 years of experience in providing technical leadership, multi-disciplinary technical advisory, strategic design, implementation, and monitoring and evaluation services for health programs in developing countries.



Hitesh Sahni Deputy Chief of Party, TCI India

Hitesh brings a rich experience of over 25 years working in various health domains and manages the operations of The Challenge Initiative for Healthy Cities (TCIHC) in India. He brings along with him a strong expertise in operations, program management and marketing & communications.

Prior to TCIHC, Hitesh has also successfully led NCD and TB programs.



Amit Kumar
Senior Implementation Lead, TCI India

Amit is an alumni of Xavier Institute of Social Service and holds around 18 years of work experience. He has intensively worked on the issues of Maternal & Child Health, Local Self Governance, HIV/AIDS and Women Empowerment issues.



Meet the Presenters



Samarendra Behera Manager, TCI India

Samarendra leads the management of TCIHC in UP. He has over 15 years of experience and has strong expertise in program management, government liaising, organizational and possesses hands-on-knowledge of working on reproductive health, urban health, and maternal and child health issues.



Deepti Mathur
Technical Learning Lead, TCI India

Deepti is the Technical Lead for Program Learning with TCIHC. A results-oriented professional with several years of experience in designing, planning and executing projects around issues that include family planning, reproductive health, pediatric and corneal blindness, eye banking, HIV/AIDS, and disability and education. In her current role, she stewards the knowledge management unit and drives critical components of TCIHC's qualitative data collection efforts.



What are the features of the FDS approach for spacing methods?

A B C D

Coaching & Community Mobilization

Community Preparation

Scheduling

c). D, C, A, B

d). D, A, B, C

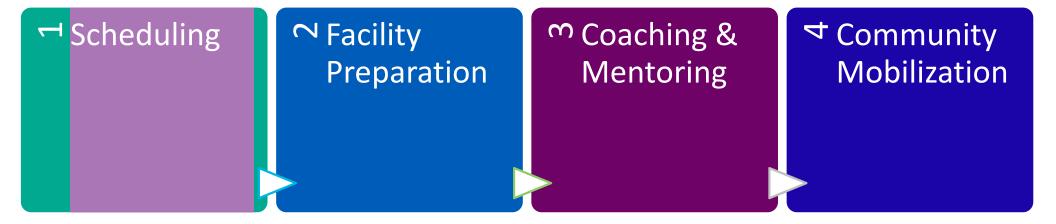
b). A, C, B, D



a). A, B, C, D

What are the features of the FDS approach for spacing methods?

CORRECT ANSWER - c). D, C, A, B





Maheen Malik





Director of Field Operations, The Challenge Initiative (TCI) Gates Institute



What is The Challenge Initiative?



- The Challenge Initiative (TCI) is a platform that enables local governments to scale up highimpact family planning approaches for the urban poor.
- TCI represents a highly innovative approach to development aid intended to strengthen the understanding of scale, impact, efficiency and sustainability.
- Since launching in 2016, TCI has demonstrated that its "Business Unusual" approach can change the way business is done in the development landscape.



What Are TCI's Guiding Principles?



Demand driven

Cities self-select to join TCI, bringing their own financial and human resources.



Local ownership and system readiness

Cities must be ready willing and able to address their challenges.



Right-fitting best-practice interventions

TCI simplifies proven interventions so it is easier and faster to implement, reaching more people, more places to have the same (or greater) impact.



Leveraging existing platforms

TCI works within existing government-led systems to harmonize strategies, funding and technical assistance, leading to cost-efficiencies with scale.



Coaching and TCI University

TCI uses a "Lead, Assist, Observe" coaching model to transfer capacity using <u>TCI University</u>, an online learning platform.



Near-time, real-time data for decision-making

TCI strengthens capacity to use data for problem solving and better decision-making.



TCI's Four Interlocking Tenets

SCALE	IMPACT	
Scale is achieved when many cities have implemented the TCI business model, and any city that wishes to use the TCI business model is empowered to do so. Illustrative indicators: Number of cities that have implemented TCI business model Population benefiting from TCI business model	TCI views impact as improvement of health outcomes and improvement in city health systems. Illustrative indicators: Change in health outcome in cities that implement TCI	
EFFICIENCY	SUSTAINABILITY	
TCI defines efficiency as the ability to deliver the greatest health impact for the lowest cost. Illustrative indicators: Cost per beneficiary to donors Cost per beneficiary to city governments	TCI's platform achieves sustainability if health outcomes continue to improve, and if health systems' improvements are maintained after graduation. Illustrative indicators: Health impact outcomes continue to improve after graduation for at least 2 years Health systems changes as measured by RAISE tool and scores remains at the same level or increases for at least 2 years after graduation	



TCI University

https://tciurbanhealth.org/tci-university/



TOOLKITS

The online collection of curated tools and approaches designed to help local governments implement their own evidence-based family planning or AYSRH interventions.



COACHING

In-person and virtual support to local governments to help them advance through the TCI three-stage process and successfully design and implement an evidence-based family planning or AYSRH intervention for optimal scale and impact.





COMMUNITY OF PRACTICE

A space open for all TCI stakeholders to connect and share knowledge and learnings related to scale, impact and sustainability of evidence-based interventions.



High-Impact Interventions by Hub

EAST AFRICA

- Whole-site orientation
- Integrated community outreaches
- Integrated in-reaches
- Post-partum family planning
- Advocacy for increased support
- Community health workers
- Pharmacy engagement

INDIA

Fixed-day static services



- Male engagement
- Urban ASHAs
- Planning & budgeting
- Nutrition days and outreach services

Universal referral

- Fixed-day service
- Demand generation
- Community health workers
- Post-partum family planning
- Mass media

NIGERIA

FRANCOPHONE WEST AFRICA

- In-reaches
- Whole-site orientation
- Advocacy at the sub-national level
- Mass media
- Patent & proprietary medicine vendors
- Social mobilization



Hitesh Sahni



Deputy Chief of Party TCIHC, India



TCIHC Fixed Day Service (FDS): An IBP

TCIHC entry selected from 110 global entries

TCIHC's entry the Only one to feature from India





Coaching across the Value-Chain



Coaching on Creating 'FP-Due list' can Elevate FP among ASHAs' competing priorities

ASHAs' competing priorities



System Gains



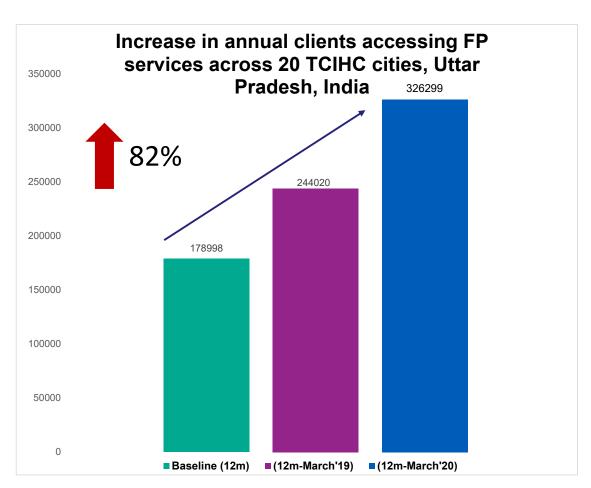
Increased Client Volume

Increased Method Choices



Increased Client Volume

Regularity of FDS is directly correlated to increase in client volume





Source: HMIS for all UPHCs and district level facilities, 12 months rolling Average; CYP adjusted methodology

Amit Kumar



Sr. Implementation Lead TCIHC, India



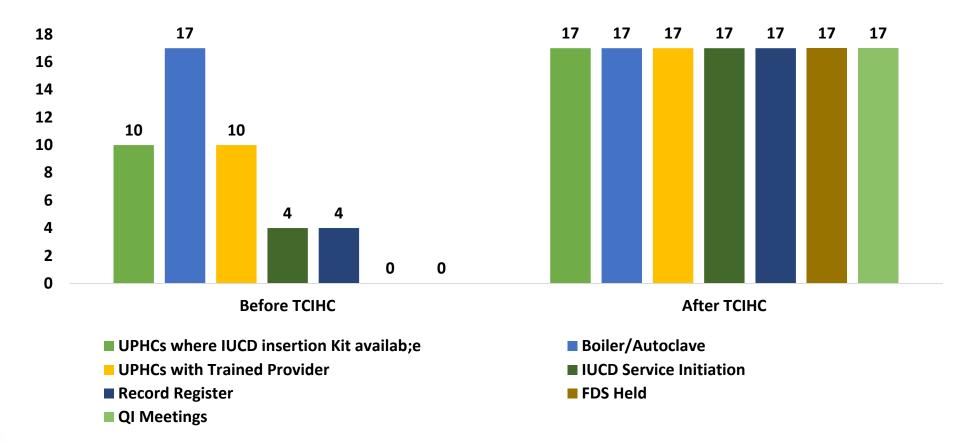
Creating Champions

"Family planning was the last thing on anyone's mind at our urban primary health centres. However, after observing and participating in the special FDS drive in 2018 facilitated . . . by PSI-TCIHC, I saw people coming in for family planning services. From that day onward, we regularly conducted FDS. And from August 2018 onward, we are conducting FDS."

—Urban health coordinator, Saharanpur

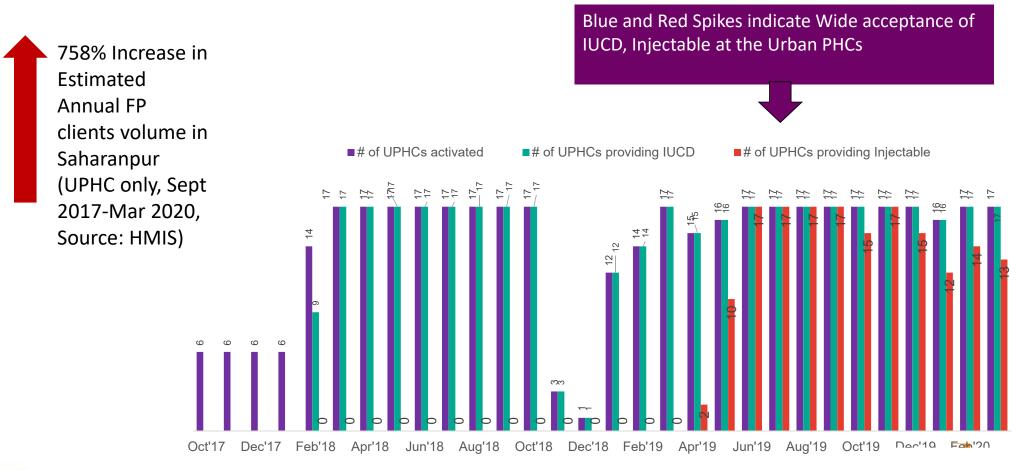


Before and After TCIHC Intervention



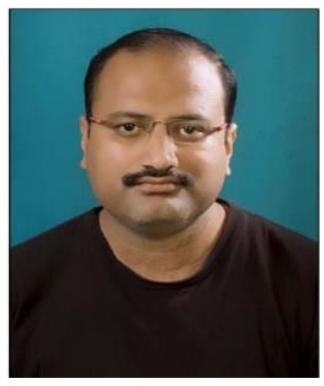


Improved Method Choices





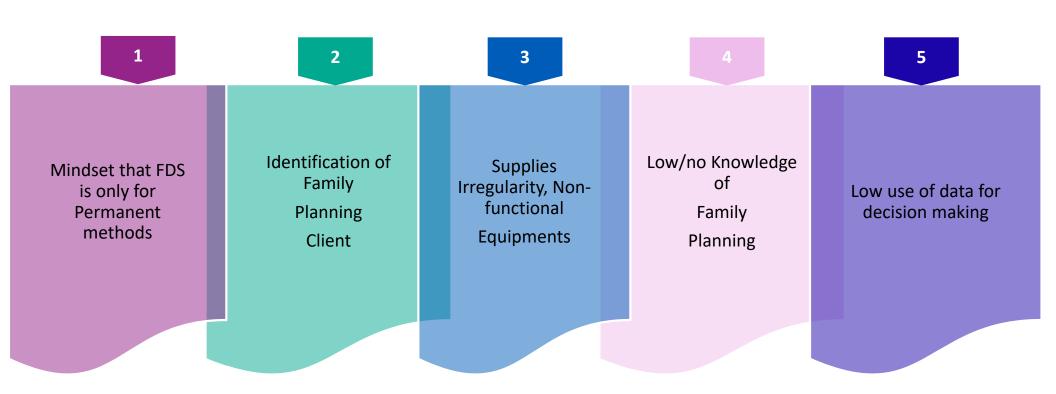
Samarendra Behera



State Implementation Lead TCIHC, India



Business Unusual





Demonstration of FDS

Name of UPHC, city	IUCD achieved on the day of Special FDS	Total IUCD inserted by that UPHC in that month	% contribution of this FDS in total FP by that UPHC
Bajardiha, Varanasi	42	50	84
Lallapura, Varanasi	20	28	71
Koniya, Varanasi	51	54	93
Pandeypur, Varanasi	23	35	66
Nagla bari, Firozabad	48	108	61
Hazipura,Firozabad	9	22	95
SantNagar,Firozabad	11	14	93
Total	204	311	66
Source: Project MIS			



Building the Blocks of the System



Estimating the right resource requirement through Mapping/Listing



Capacity building of providers on method mix



Boosting Demand by Coaching Community Health Worker on Prioritization



Timeliness and correctness of data (HMIS) for decision making



Private sector engagement strategy through accreditation initiated by at least one more state



Strengthened Supply Chain Management Quality Improvement



Improved governance



Building Leadership skills in each cadre



Leveraging PIP for Optimal utilization of resources



Seeking additional resources through PIP



Deepti Mathur



Technical Lead, Program Learning TCIHC, India



Closing Mantras







Questions & Answers

Before we close

Webinar Recording:

https://ibpnetwork.org/page/webinars

http://www.fphighimpactpractices.org

Websites:

www.who.int/reproductivehealth

www.fphighimpactpractices.org

Read the stories here:

https://ibpnetwork.org/page/implementation-stories





Thank you for your participation today!

