

# Monitoring Service Delivery High Impact Practices (HIPs): Results from a partner mapping and indicator inventory in five countries

Poster # XXXXXX

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## OVERVIEW

- High Impact Practices (HIPs) in family planning (FP) are **evidence-based** practices identified by **global experts** that have demonstrated impact on increasing contraception uptake and related outcomes in varied settings.
- Identification of these practices has facilitated evidence-based consensus on **“what works” in FP in three categories**: 1) service delivery (Table 1); 2) enabling environment; and 3) social and behavior change.
- With a focus on service delivery HIPs, Data for Impact (D4I) and Research for Scalable Solutions (R4S)—two USAID-funded projects—sought to assess indicators in use for **tracking HIPs implementation in five countries**.
- Monitoring HIPs is essential to enable countries to make evidence-based decisions related to implementation and scale-up to **optimize investments**.

## APPROACH

- D4I and R4S gathered a list of **FP program indicators currently in use** related to service delivery HIPs. D4I undertook this activity in Bangladesh and Tanzania whereas R4S worked in Mozambique, Nepal, and Uganda.
- Participating partners listed indicators related to each HIP in an Excel-based form, which also requested: **indicator definition**, data source, **disaggregation**, whether digitally reported, levels of reporting, reporting frequency, reporting entities, and challenges.
- Across countries, we obtained information from **43 partners** and gathered a total of 498 indicators aligned to the eight service delivery HIPs (Table 2).
- The indicators can be categorized as follows: **input and output (69%)**, process (17%), and outcome/impact (14%) (Figure 1).

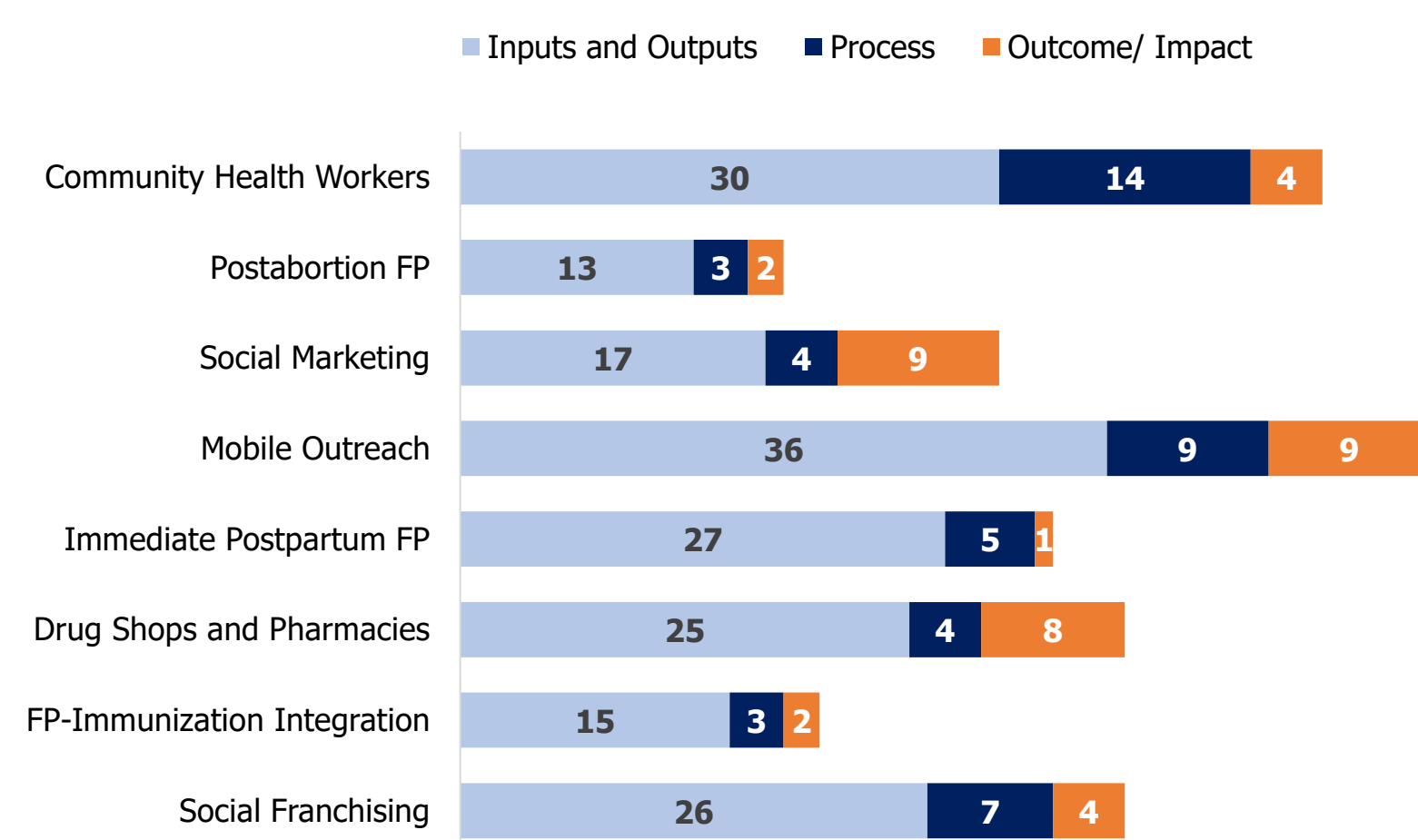
**Table 1. Evidence Suggests these Service Delivery High Impact Practices (HIPs) in Family Planning are What Works**

Service Delivery HIP	Definition
Community Health Workers	Integrate trained, equipped, and supported community health workers into the health system
Postabortion FP	Proactively offer voluntary contraceptive counseling and services at the same time and location where women receive facility-based postabortion care
Social Marketing	Use marketing principles and techniques to shape the provision of contraceptive services and products to improve access, choice and use, for target populations
Mobile Outreach Services	Support mobile outreach service delivery to provide a wide range of contraceptives, including long-acting reversible contraceptives and permanent methods
Immediate Postpartum FP	Offer contraceptive counseling and services as part of facility-based childbirth care prior to discharge from the health facility
Drug Shops and Pharmacies	Train and support pharmacies and drug shops to provide family planning information and a broad range of quality contraceptive methods
FP-Immunization Integration	Offer family planning information and services proactively to women in the extended postpartum period during routine child immunization contacts. The extended postpartum period is defined as the 12 months following a birth
Social Franchising	Organize private providers into branded, quality-assured networks to increase access to provider-dependent contraceptive methods and related services

**Table 2. Partner Reported Indicators for each Service Delivery HIP**

Number of indicators per HIP (deduplicated across partners within each country)	Bangladesh 4 partners	Mozambique 9 partners	Nepal 10 partners	Tanzania 4 partners	Uganda 16 partners	Totals 43 partners
Community Health Workers	5	38	27	3	54	127
Postabortion FP	0	6	12	0	25	43
Social Marketing	14	4	7	0	12	37
Mobile Outreach	2	17	19	3	47	88
Immediate Postpartum FP	4	12	15	7	12	50
Drug Shops and Pharmacies	1	2	12	8	37	60
FP-Immunization Integration	0	3	12	2	10	27
Social Franchising	4	10	13	0	30	57

**Figure 1. Indicator Types for each Service Delivery HIP, All Countries**



## CONCLUSIONS AND RECOMMENDATIONS

- Inconsistencies in partner understanding** of service delivery HIPs.
- Partners **rarely had the same indicators** for the same practices.
- Indicators often lack clear, detailed definitions, and most were FP program indicators that were **not specific to a HIP as written**.
- Some partners **reported the same set of all-purpose indicators** for multiple service delivery HIPs.
- Indicators were usually stored electronically, but **only a few were** said to be reported into a national health information system (**HMIS**).
- A **HIPs measurement framework is needed**; to this end, D4I, R4S, and the SMART-HIPs project (funded by the Bill and Melinda Gates Foundation) are working with stakeholders on such a framework.
- A HIPs measurement framework should include the establishment of **implementation standards** and harmonized, HIP-specific process and outcome indicators.
- We recommend that country-level stakeholders be supported in developing **creative solutions to collect and report the right data** for decision-making to support HIPs implementation and scale-up.

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### FOR ADDITIONAL INFORMATION ABOUT THE HIPs INITIATIVE



Homepage | HIPs  
(fphighimpactpractices.org)

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