

Stakeholders gather at Skyz Hotel in Kampala for the meeting. Photo credit Kiiza Nebath

On Thursday 11 July, GHE Consulting (GHE) hosted stakeholders of the Family Planning Benefits Card Program (FPBC) for a results dissemination meeting at Skyz Hotel in Kampala. Among the attendees were private- and public-sector representatives, and government officials, including Dr. Andrew Chakura of the Ministry of Health's Department of Reproductive Health, Germine Nakasaanya of Marie Stopes International Uganda, and Joseph Mwebesa of International Medical Link (IML) Uganda.

The FPBC program, led by GHE Consulting and supported by Grand Challenges Canada's Stars in Global Health initiative, ran from September 2017 through February 2018 in the Kamwokya II slum of Kampala. 200 females and 24 males participated in the program, which partnered with local pharmacies and medical centers to provide free sexual and reproductive health tools and services including condoms, implants, IUDS, injections, pills, diaphragms, guidance and counselling, pregnancy testing, HIV testing, referrals, and follow-up treatment to card holders. The effectiveness of the card was assessed using a controlled study, where one group received the card and another did not.

Young people across Uganda face barriers in accessing family planning tools and services, including distance to a health care facility, high cost, lack of knowledge, and high stigma associated with accessing services. As a result, there is a high unmet need for contraception among youth, leading to unplanned pregnancies resulting in unsafe abortions, and sexually-transmitted infections (STIs).

Overall, acceptability of the program was high among all demographics, at more than 80%. Injectables, pills, and implants were the most used forms of contraception among women, with

men primarily accessing condoms. A majority of study participants, over 90%, were aware of at least one family planning method both before and after the study. Participants were then followed up with for six months to assess changes in contraceptive uptake or unmet need for spacing of children. Interestingly, contraceptive use was higher among married users of the card. Many participants expressed gratitude for the benefits card and the opportunity to meet their family planning goals.



Dr. Andrew Chakura of the Ministry of Health's Department of Reproductive Health. Photo credit Kiiza Nebath

The FPBC program was also designed to assess the feasibility of a corporate social responsibility-funded insurance program. We approached key corporations in the banking and insurance sectors to support the program in scale-up through cash or in-kind gifts. If scaled nationally, we project that the FPBC program would be a highly cost-effective and innovative approach to health care. Lessons from the study should be considered by the government as it works to achieve universal health coverage for all Ugandans. With the high cost of insurance models, the engagement of the private sector provides an avenue and opportunity to generate financial support that can supplement government efforts.

The dissemination meeting presented an opportunity to share results from the FPBC program, discuss successes and challenges around implementation, and find synergy among various stakeholders working in sexual and reproductive health among young people in Uganda. A final report on the program is currently being prepared for publication.