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**HEALTH POLICY
INITIATIVE**

The Allocate Model: Priority Setting for Reproductive Health Strategic Plans

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Purpose

- Assist countries to develop national reproductive health action plans
- Achieve greater efficiency in the use of RH funds
 - Between RH programs
 - Within RH programs

Outcomes

- Improved RH action plans, with increased efficiency of resource allocation
- Enhanced dialogue between national programs, donors and other stakeholders on RH priorities

Components of RH Action Plans

- Family planning
- Safe motherhood
- Post-abortion care
- HIV/STIs
- Adolescents

RH Action Plan: Jamaica

- Family planning
 - Goal: Decrease the number of unplanned pregnancies
 - Indicator: TFR of 2.5 by 2005
- Safe motherhood
 - Goal: Reduce incidence of maternal mortality
 - Indicator: Reduce MMR to 80 by 2005
- HIV/AIDS/STI
 - Goal: Reduce incidence of HIV/STIs
 - Indicator: AIDS cases, HIV prevalence, syphilis cases

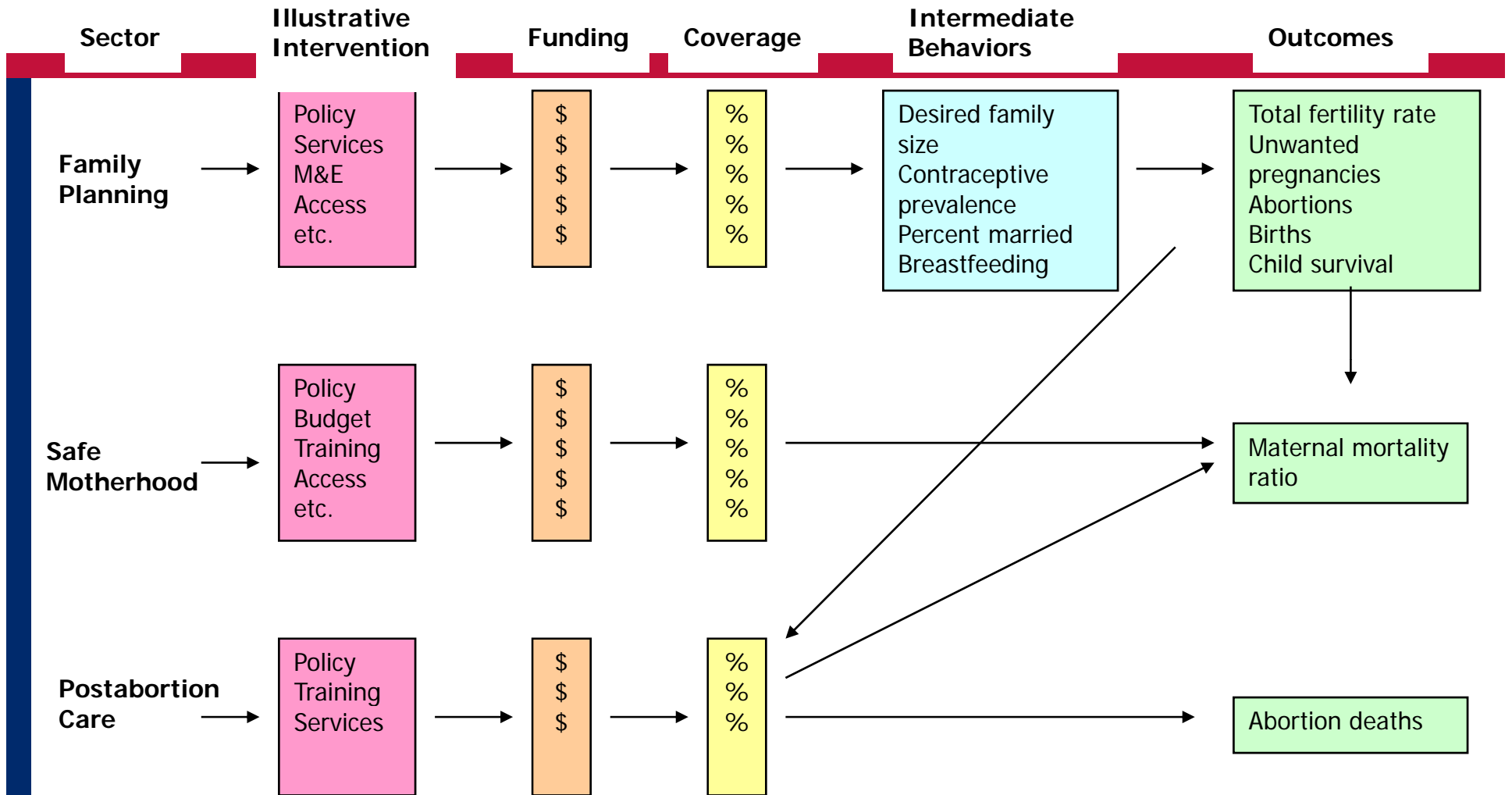
Key questions

- What goals are feasible?
- How will achievement of goals in one sector affect achievements in other sectors?
- How much funding is required to achieve the goals?
- How can we best utilize available funding?

Analysis tools

- FamPlan
 - What is needed to reduce unmet need or achieve a CPR or TFR goal?
- Safe Motherhood
 - How much can MMR be reduced?
 - What needs to be done to achieve maximum reductions?
- Post-abortion care
 - How can abortion related deaths be reduced by family planning and post-abortion care?
- Adolescents
 - What are the effects of FP, PAC programs on adolescents?

Resource Allocation for Reproductive Health Action Plans



Note: There is no separate component for adolescents. They will be examined separately within each component.

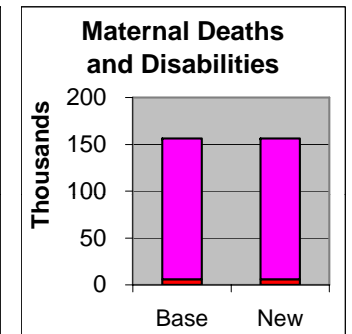
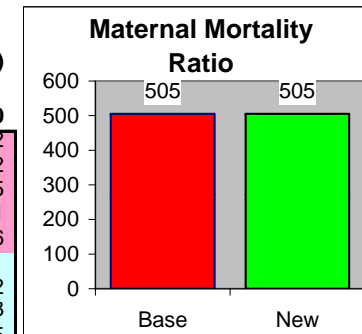
Safe Motherhood Model

Budget (Thousands)

Program Component	Current Annual Budget	Proposed Annual Budget	Implied Annual Budget	Proposed Annual Budget	Total (WHO MBP (97-01 SP))
Total Budget	\$ 29,990	\$ 29,990	\$ 29,990	\$ 29,990	\$ 68,970
Policy	\$ 60			\$ 60	\$ 552
Monitoring	\$ 340			\$ 340	\$ 552
Training	\$ 1,829			\$ 1,829	\$ 4,595
Health promotion	\$ 537			\$ 537	\$ 2,081
Private effort	\$ 30			\$ 30	\$ 166
Service delivery					
- Birth spacing	\$ 2,156			\$ 2,156	\$ 15,892
- FP for limiting family size	\$ 291			\$ 291	\$ 2,148
- Antenatal care	\$ 5,445			\$ 5,445	\$ 5,565
- Postabortion care	\$ 2,533			\$ 2,533	\$ 3,472
- Delivery with skilled attendance	\$ 2,047			\$ 2,047	\$ 4,760
- Postpartum care	\$ 381			\$ 381	\$ 800
- Emergency obstetric care					
- Hemorrhage	\$ 4,658			\$ 4,658	\$ 9,000
- Obstructed labor	\$ 1,891			\$ 1,891	\$ 4,000
- Sepsis	\$ 2,928			\$ 2,928	\$ 6,000
- Transport	\$ 715			\$ 715	\$ 1,500
Infrastructure/access					
- Antenatal care	\$ 1,066			\$ 1,066	\$ 2,000
- Postabortion care	\$ 201			\$ 201	\$ 400
- Delivery with skilled attendance	\$ 228			\$ 228	\$ 256
- Postpartum care	\$ 215			\$ 215	\$ 230
- Emergency obstetric care	\$ 2,439			\$ 2,439	\$ 5,000

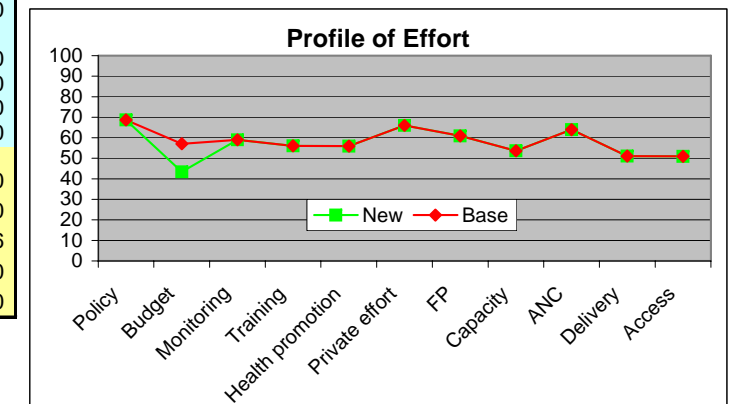
Scenario

None



Maternal deaths averted =
Cost per death averted =

0 Disabilities
% MMR red. 0%

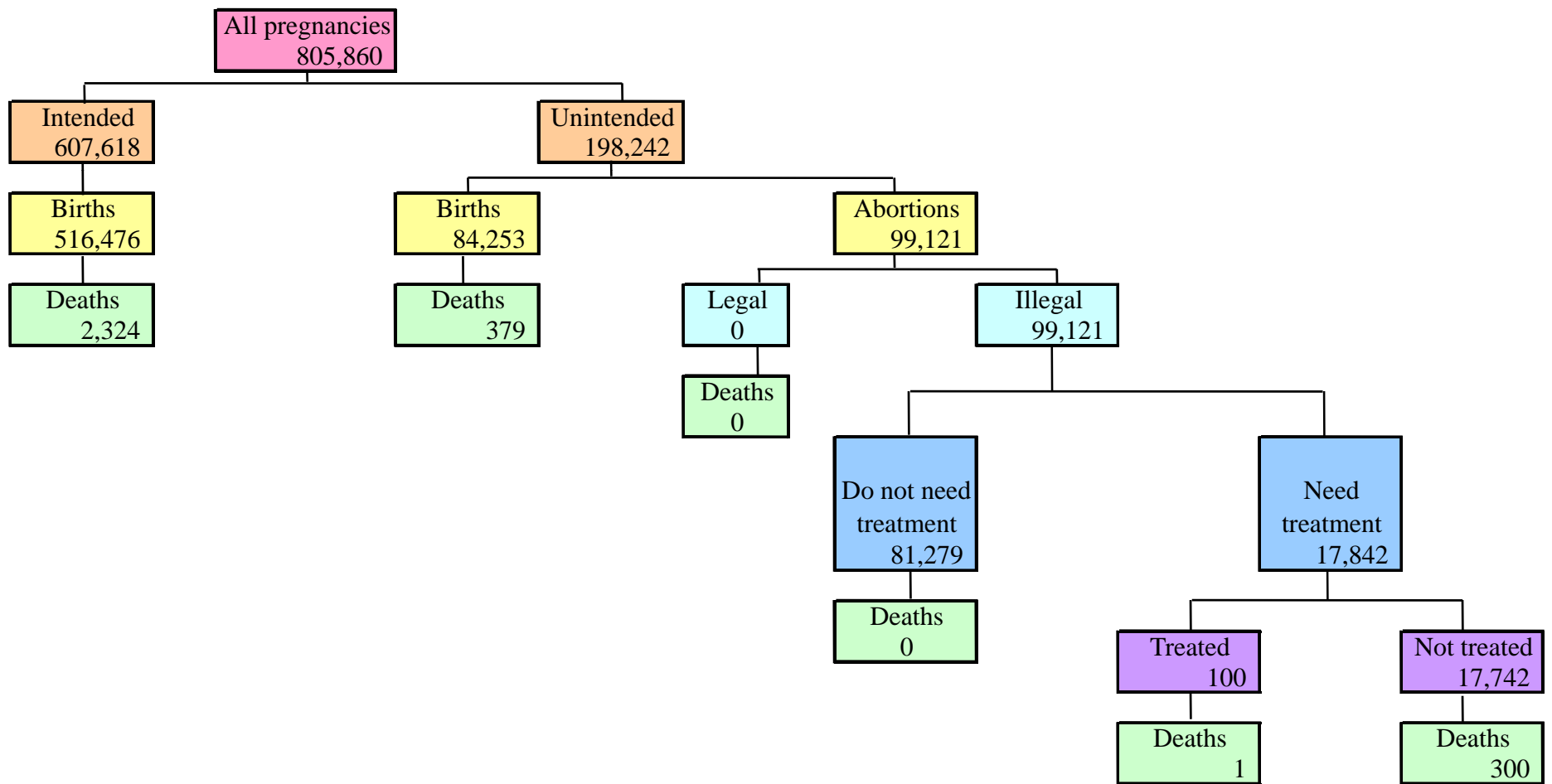


FamPlan Goals

- Reduce unwanted pregnancy
- Reduce unmet need
- Achieve TFR or CPR goal

Post-abortion care

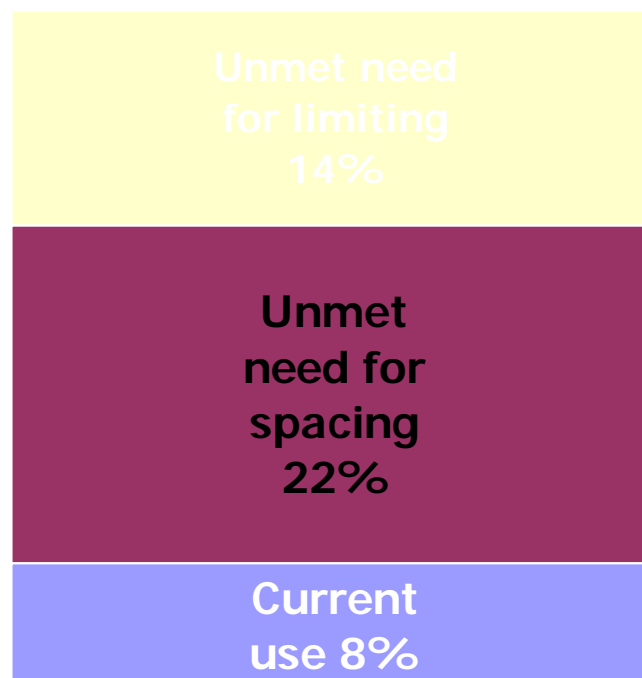
Post-abortion care model



Situation in Ethiopia

- TFR = 5.9
- CPR = 8%
- Unmet need = 36%
- MMR = 870 +
- Preparing to update National Population Policy and RH Action Plan

Demand for family planning



Population policy

- Current population policy
 - “Reduce TFR to 4 by 2015..”



Infant and child mortality

- Population policy
 - “Reduce maternal, infant and child morbidity and mortality..”
- Millennium Development Goal
 - “Reduce by two-thirds, between 1990 and 2015, the under-five mortality rate”



Reducing high risk fertility saves lives

Each year by eliminating all avoidable high risk fertility behavior we would avert ...

- 62,000 infant deaths
- 38,000 child (1-4) deaths
- 18% of all under five mortality

Maternal mortality

Every year ...

- Over 25,000 Ethiopian women and girls die from pregnancy related causes. (25% of all deaths to women 15-49)
- More than 500,000 suffer from pregnancy-related disabilities, including obstetric fistula.

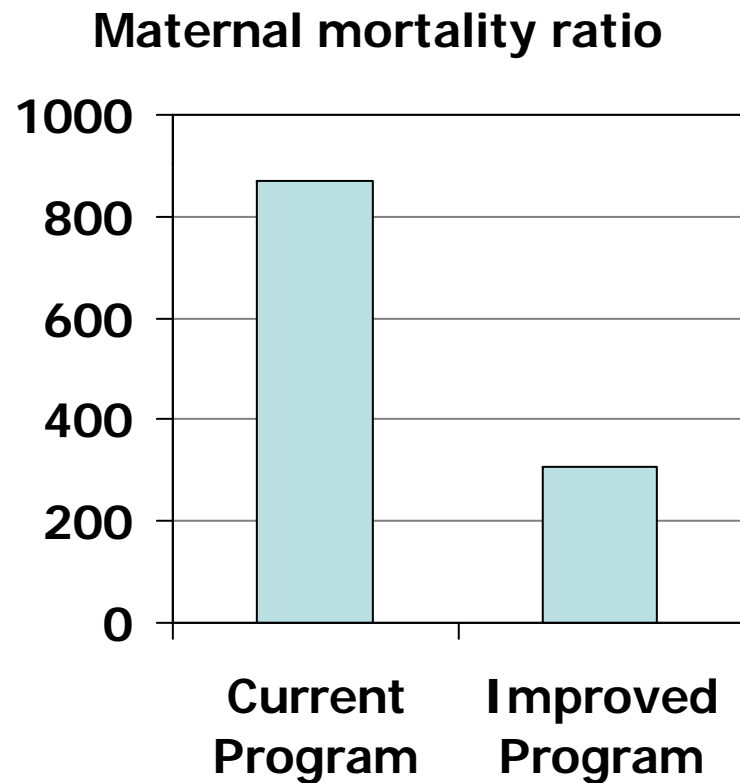
Maternal mortality goals

- Population Policy
 - “Reduce maternal, infant and child morbidity and mortality ...”
- Millennium Development Goal
 - “Reduce by three-quarters, between 1990 and 2015, the maternal mortality rate.”



Saving mother's lives

- Maternal mortality could be reduced by 65% by strengthening maternal health services and family planning to the level of Egypt



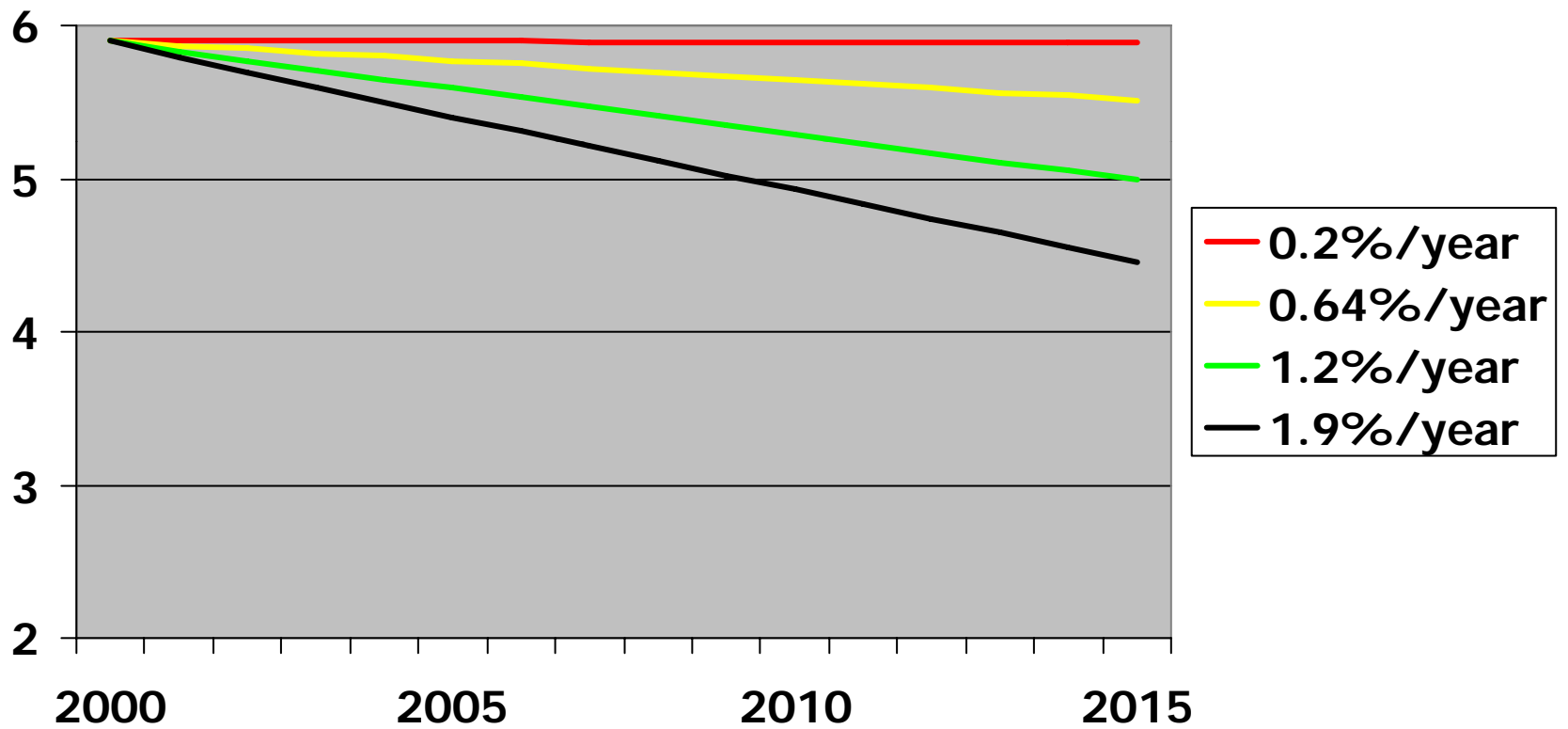
Key strategy questions

- TFR goal
 - What TFR would be achieved by meeting unmet need?
 - Is this achievable by 2015?
 - What should be the goal of the new population policy and RH action plan?

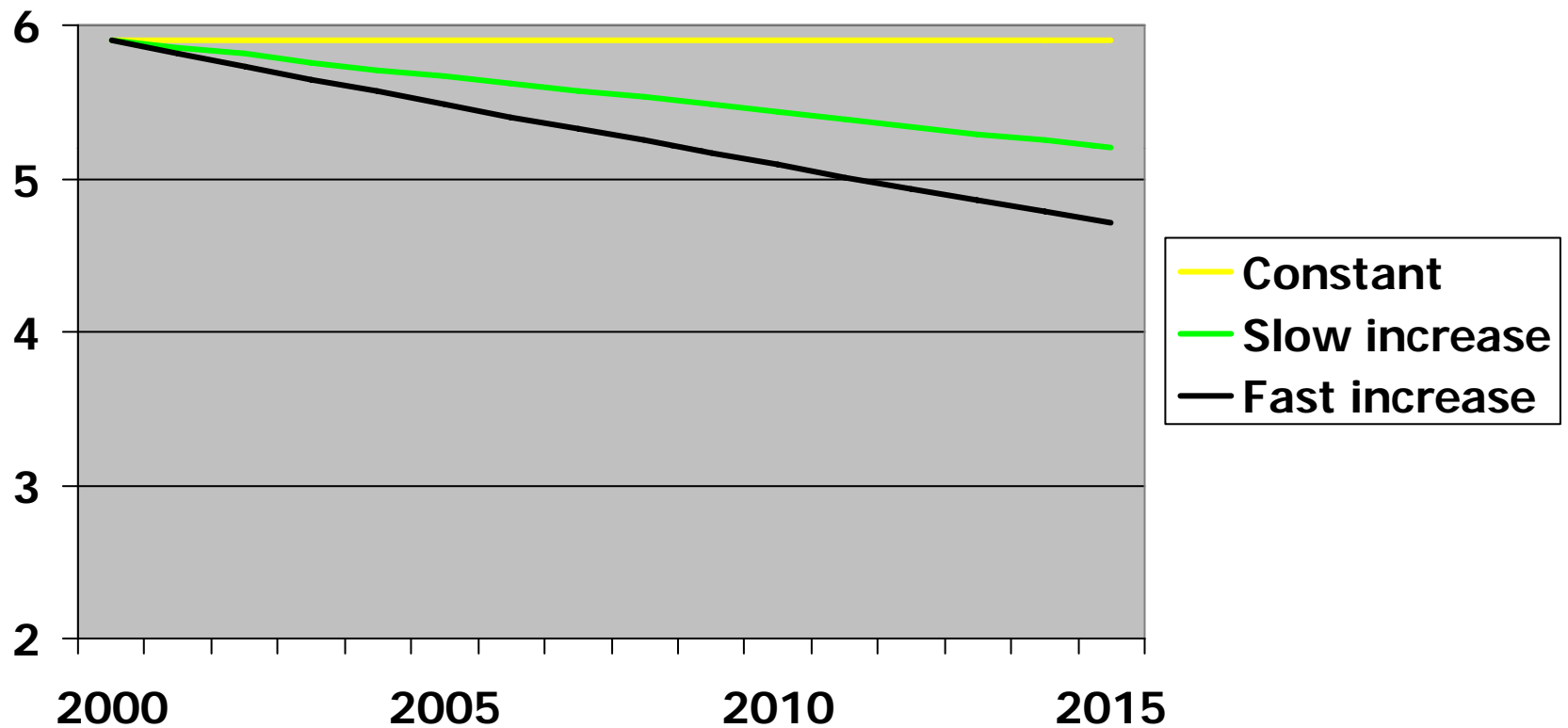
Key strategy questions

- Safe motherhood
 - How can we achieve the Millennium Development Goal by 2015?
- How much funding is required and how should it be allocated?

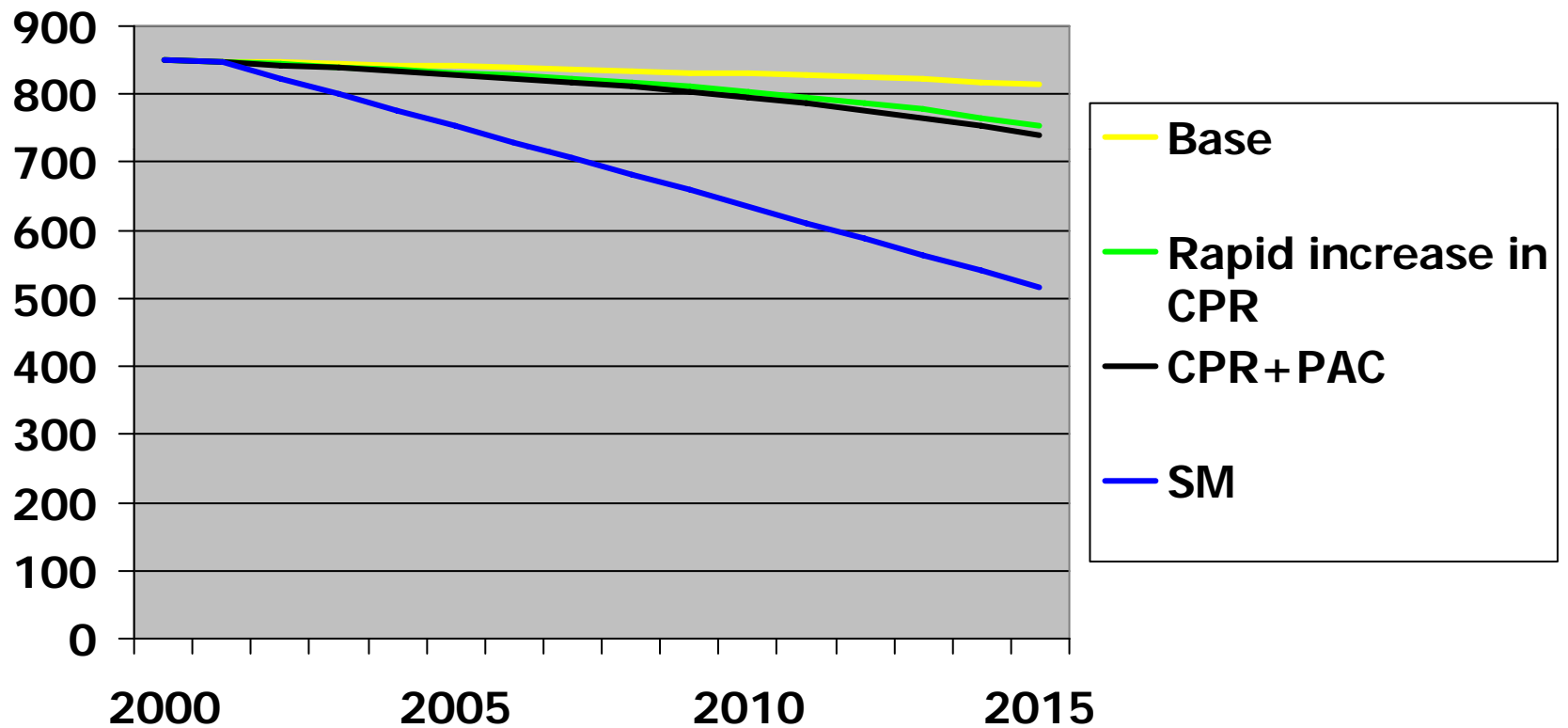
TFR under different scenarios about CPR increase



TFR under different scenarios about rise in age at marriage



MMR under different scenarios about CPR and PAC



Key questions

- Effect of prevalence growth on TFR
- Changes in FP method mix
- Changes in FP source mix
- Changes in age at marriage
- Effect of treatment for PAC
- Requirements to improve MMR
- Effect of expenditure limitation



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