



**International Seminar:**

# **Is access enough? Understanding and addressing unmet need in Family Planning**

***Nanyuki, Kenya, 14-16 May 2013***

Organized by:

**the IUSSP Scientific Panel on Reproductive Health**

in collaboration with

**the Strengthening Evidence for Programming on Unintended Pregnancy (STEP UP)**

**consortium, Population Council**

and

**the African Institute for Development Policy (AFIDEP)**

## **CALL FOR PAPERS**

**Deadline for submission: 20 December 2012**

Despite the prominence of unmet need as an MDG indicator for monitoring progress, and the focus of the July 2012 London Family Planning Summit on access to family planning services as the major constraint to reducing global unmet need, there is still vigorous debate about its definition, measurement, use as a programme indicator, and utility as a guide for programme interventions.

Women in developing countries who either want no more children or don't want a child in the next two years but are not using any method of contraception are defined as having an unmet need for contraception. Most broadly put, family planning programmes are intended to facilitate adoption by non-users with unmet need and to encourage continuation of use or prompt switching to another method in case of discontinuation among current users. But programmes' success in facilitating contraceptive adoption and continuation depends on how well they address the whole range of factors that tend to place women at elevated risk of unmet need. A disaggregated and in-depth analysis of unmet need can guide the development of policies and programmes specifically designed to reach women with unmet need. Illustratively, young married or unmarried sexually active women and men, postpartum women, and women who have recently discontinued use of contraception or have had an abortion may be at high risk of unmet need for reasons that differ from one subgroup to the next and from one setting to the next.

This seminar will bring together scientists, policy makers, and programme managers to present and discuss a range of issues relating to the definition, determinants and consequences of unmet need in family planning and programme interventions designed specifically to reduce unmet need in groups at high risk.

Key issues that will be addressed include:

- Unmet need – the concept, interpretation, and relevance to programmes, unmet need vs. demand
- Measurement issues relating to unmet need
- Levels, trends and differentials: across regions, countries, subpopulations, SES groups, marital and age groups
- Reasons for unmet need: programmatic, psychological, social (including spouses and other persons), health concerns, past reproductive experience (including contraceptive use), etc.
- The impact of programmatic interventions specifically designed to address unmet need
- Unmet need as a determinant of unintended pregnancy
- The relationship of unmet need for limitation and spacing/postponement to fertility decline, including birth interval analysis

Original abstracts/papers could be based on secondary analyses of Demographic and Health Surveys (DHS) and other survey data sources, longitudinal studies, case studies, evaluation of programme interventions, and other quantitative and qualitative data sources. Illustrative questions which might be addressed include:

- How do recent revisions of estimation procedures for unmet need affect levels and trends?
- What is the impact globally of unmet need on fertility (and more specifically, unintended fertility)?
- What has been the impact of unmet need on birth intervals?
- What is the relationship between contraceptive switching, discontinuation, and unmet need?
- How reliable are the stated reasons for unmet need in survey data (e.g. DHS)?
- To what extent is there spousal concurrence on unmet need and the reasons for it?
- To what extent is unmet need due to inadequate access to family planning supplies and services?
- How do factors which are related to unmet need for family planning shift over time as programme services are strengthened?
- What has been the success of IEC/BCC programme components in addressing unmet need?
- How has unmet need shifted in some of the recent African family planning programmes that have shown marked success; to what extent have programme components explicitly been targeted at the causes of unmet need?
- Do the young or the unmarried have higher levels of unmet need for contraception than others, and what are the factors underlying unmet need among these groups?
- Why is post-abortion contraception limited in many settings?

The above list is intended to reflect the breadth of issues appropriate to the IUSSP Panel on Reproductive Health. Despite the fact that unmet need has been addressed extensively, it remains a foundational issue in improving family planning programmes and measuring progress toward the MDGs. It merits additional international attention through this seminar. Abstracts/papers that are submitted must be original, describe data collection procedures, and use rigorous analytical techniques.

### **Online Submission**

The IUSSP Panel on Reproductive Health invites scientists, policy makers, and programme managers to **submit online by 20 December 2012** a short 200-word abstract and upload an extended (2-4 pp., including tables) or a full paper, which must be unpublished and not already submitted to a journal for publication. To submit, please fill out the **online submission form at: <http://archive-iussp.org/Activities/rep3/call12.php>**.

*[For technical issues related to accessing the IUSSP website and submission form, please contact Paul Monet ([monet@iussp.org](mailto:monet@iussp.org)) and Philippe Migrenne ([migrenne@iussp.org](mailto:migrenne@iussp.org))].*

Submission should be made by the author who will attend the seminar. If the paper is co-authored, please indicate the name of co-authors at the end of the abstract. The seminar will be limited to a maximum of 20-25 completed papers. The Panel will consider publication of a set of papers presented at the seminar.

The working language of the seminar will be English. Abstracts and final papers should therefore be submitted and presented in English.

Applicants will be notified whether their submission has been accepted by **20 January 2013**. In the case of acceptance on the basis of an abstract, the completed paper must be uploaded on the IUSSP website by **20 April 2013**.

Current funding for the Seminar is limited and efforts are under way to raise additional funds. At present IUSSP is unable to commit to support the participation of those invited to present papers. Applicants are, therefore, strongly encouraged to seek their own funding. Those who are applying for financial assistance from the IUSSP should indicate this by ticking the appropriate box on the online submission form.

For further information please contact Seminar Organizer Sarah Harbison ([sharbison@usaid.gov](mailto:sharbison@usaid.gov)).

### **IUSSP Scientific Panel on Reproductive Health**

Chair: Iqbal H. Shah

Members: John G. Cleland, Sarah Harbison, Ondina Fachel Leal, K.G. Santhya, and Eliya M. Zulu