About E2A

The Evidence to Action for Strengthened Family Planning and Reproductive Health Services for Women and Girls Project (E2A) is USAID’s global flagship for strengthening family planning and reproductive health service delivery. The project aims to address the reproductive healthcare needs of girls, women, and underserved communities around the world by increasing support, building evidence, and facilitating the scale-up of best practices that improve family planning services.

Awarded in September 2011, this project will continue for eight years, until September 2019. The project is led by Pathfinder International, in partnership with ExpandNet, IntraHealth International, Management Sciences for Health, and PATH.

WHAT WE’RE DOING

E2A’s efforts to strengthen the delivery of family planning and reproductive health services encompass three main areas:

- Expanding method choice and access to family planning and reproductive health services
- Addressing the family planning and reproductive health needs of youth
- Scaling up best practices

All E2A activities are implemented through a gender lens to ensure equitable service delivery to women, men, boys, and girls, with a focus on the provision of high-quality services that meet the unique needs of different populations. E2A works closely with governments, and regional and in-country stakeholders and implementers.

Expanding Method Choice & Access

Community-based family planning in DRC

In Democratic Republic of the Congo (DRC), working closely with the government and ongoing USAID-funded projects, E2A is managing the Community-Based Family Planning Program in Lualaba, Kasai Central, and Lomami Provinces. E2A has mobilized a robust cadre of 408 community-based distributors who deliver quality family planning services within an integrated package that includes information about and provision of water purifiers, oral rehydration salt and zinc. Community-based distributors are directly supported by nurses at health posts and centers, and zonal health management teams. The USAID mission-supported project has focused on increasing awareness and
demand for family planning services, and supporting male involvement and women's empowerment, as well as strengthening national, provincial, and zonal health systems.

**Community-based delivery of injectables through PMTCT**

In **Nigeria**, through the community activities of an existing prevention of mother-to-child transmission of HIV (PMTCT) program, E2A is building the capacity of community health extension workers, via task-sharing, to counsel on all family planning methods; offer and refill injectables; and refer to facilities for long-acting methods.

**Study on provision of implants by community health workers**

In **Nigeria**'s Kaduna and Cross River states, E2A is undertaking a study to assess the effects of community health extension workers providing implants on family planning uptake and method mix. The study aims to support a government-led policy shift that would expand community health extension workers' current family planning tasks to include provision of implants.

**Postpartum family planning**

In **Cameroon**, E2A implements a comprehensive postpartum family planning program for the Central Region, which offers a full range of contraceptive options to women, including young mothers. This program is implemented in partnership with the Ministry of Health, and offers voluntary family planning counseling and provision of a range of contraceptive methods with focus on immediate and extended postpartum care. To the extent possible, E2A addresses the family planning needs of women and girls by integrating family planning into other strategic services typically accessed before or after childbirth, such as antenatal care or immunization clinics.

**Including SDM in method mix**

In **Tanzania**, E2A is working with Pathfinder International in the Shinyanga region of Tanzania to integrate the Standard Days Method® (SDM) as part of the national response to reducing unmet need for family planning. The activity engages and builds the capacity of the public health system's community-based agents to offer a range of family planning methods, including SDM. More broadly, the activity strengthens family planning service delivery by ensuring that community-based agents are well integrated and supported by the district health system in the areas of supervision, commodity supplies, referrals, and reporting. The community-based agents use a mobile application that supports them to counsel on SDM within the full range of contraceptives offered.

**National postabortion care programs**

In **Burkina Faso, Guinea, Senegal** and **Togo**, E2A carried out an Assessment of Postabortion Family Planning in Four Francophone Countries. The assessment identifies barriers and facilitating factors to the provision of high-quality postabortion care (PAC) services, which include family planning counseling and methods, at select sites in these countries. Applying the assessment findings, E2A continues to strengthen PAC services in Burkina Faso by assisting with the development of a national PAC strategy and in Togo by training providers to deliver quality PAC services at several health facilities, with a focus on youth-friendly services and mainstreaming gender-responsive approaches.

**ACHAP grantees**

E2A awarded small grants and technical assistance to organizations that are members of the African Christian Health Associations Platform (ACHAP) in **Kenya, Uganda, and Ethiopia**. E2A assisted the grantees with creating quality-improvement teams to strengthen delivery of community- and facility-based family planning services. Religious leaders and community health workers were engaged to increase demand for services among men and women.

**Integrated Family Health Program**

In **Ethiopia**, the USAID-funded, Pathfinder International-led Integrated Family Health Program (IFHP) supports an integrated package of family planning/maternal, newborn and child health (MNCH) evidence-based interventions delivered across the continuum of care at family, community, and health facility levels, in support of the national Health Sector Development Plan. Operating in six regions of Ethiopia, this partnership with John Snow, Inc., the Consortium of Reproductive Health Associations, and other local organizations is currently implemented under the E2A agreement, and touches on all of E2A's focal areas: community-based services, youth, integration, scale-up, and gender. E2A has provided technical assistance to the project in diverse areas, including:

- assessing the sustainability of district-level health sector management approaches;
- training gender experts in streamlining male engagement;
- supporting IFHP's data analysis and documentation of its highly successful work in strengthening intrauterine contraceptive device provision and the community-based provision of contraceptive implants;
- conducting a study on provision of long-acting reversible contraceptives in youth-friendly clinics;
- conducting a study on how health extension workers use data for decision making.

E2A is also currently assisting the Government of Ethiopia with meeting its goal of eliminating obstetric fistula by 2020.
Training Resource Package for Family Planning (TRPFP)

E2A is building the capacity of the East, Central, and Southern Africa Health Community’s (ECSA) to demonstrate application of the TRPFP among providers and trainers in its member states. E2A has worked in close partnership with ministries of health and nursing and midwifery schools in Tanzania and Uganda to lead trainings on the TRPFP. During the trainings, participants built their skills in family planning counseling and communication and the use of competency-based methods to deliver family planning services.

Expanding method choice in Burundi

In Burundi, E2A worked closely with the national reproductive health program and USAID-funded, Pathfinder International-led Maternal and Child Health Program in Kayanza and Muyinga provinces to improve the quality of family planning services and broaden the contraceptive method mix, specifically by expanding the provision of Jadelle. E2A also strengthened integrated community-based services in Gitega, Makamba, and Rutana provinces before internal conflict ended E2A’s work in the country.

Youth

First-time parents

E2A has found, through an in-depth literature review, that family planning programs to date have largely failed to reach first-time parents with interventions that support them to space their pregnancies. Based on the literature review, a series of technical consultations with AYSRH experts, and learning from its own interventions with first-time parents, E2A is developing a framework that programs can apply to better reach this important population. While working on the framework, E2A is also testing and documenting innovative programmatic approaches for reaching first-time parents. For example, in Burkina Faso, y documenting and supporting the monitoring and evaluation of interventions led by Pathfinder International, E2A enhanced the evidence base for reaching first-time parents with interventions that encourage the healthy timing and spacing of pregnancy.

Behavior change for improved sexual and reproductive health

In Niger, working with Abdou Moumouni University in Niamey and Pathfinder International, E2A is applying a comprehensive behavior change approach that engages peer educators and student supervisors to lead behavior-change activities with students that focus on improved sexual and reproductive health. Because the students come from all parts of Niger and have relatively high mobility, they are well positioned to enhance awareness about sexual and reproductive health and increase demand for services across the country. At the same time, E2A is strengthening university health services so that they better address the sexual and reproductive health needs of young people, while working closely with the Ministry of Public Health to ensure sustainability of the intervention and to increase access to youth-friendly health services in Niamey and beyond.

Assessment of youth-friendly services

In Malawi, E2A assisted the government with a comprehensive national assessment of youth-friendly health services. E2A gathered data through focus group discussions with youth, parents, and community leaders, as well as interviews with clients, service providers, peer educators, community-based distribution agents, district health officers, NGO staff, health facility managers, and district youth-friendly health service coordinators to determine the quality and coverage of services. E2A also conducted youth surveys to assess the sexual and reproductive health behavior of those ages 10 to 24. Results are informing strategies to improve youth-friendly services in Malawi.

mCenas! study

In Mozambique, Pathfinder International and Dimagi, Inc., through the mCenas! Project, implemented a comprehensive text message-based program targeting youth (aged 15-24) with educational messages about sexual and reproductive health that focus on contraception. E2A conducted a study to generate evidence on whether mCenas! was acceptable and impacted the knowledge, attitudes, and self-efficacy of 880 male and female youth related to contraception. Results of the study show that: the mCenas! interventions contributed to an enhanced knowledge among young people about contraceptive methods and its effects. The results will be used to inform the development of similar SMS programs targeting youth.

Youth-friendly services guide

E2A, with Pathfinder International, has developed a new tool, which seeks to advance services tailored to young people’s needs. E2A’s youth-friendly services decision-making tool helps to guide program designers in selecting and adapting appropriate youth-friendly service delivery model(s), considering the country context, the target popula-

Saving Mothers, Giving Life

In Nigeria’s Cross River State, E2A, in partnership with the Saving Mothers, Giving Life initiative, is replicating a model for maternal and newborn health interventions, successfully piloted in Uganda and Zambia. The model constitutes a suite of evidence-based interventions to improve the quality and coverage of maternal and newborn health services, which are integrated with HIV services, to address the three delays to women accessing life-saving care: decision to seek appropriate care; reaching care in a timely manner; and receiving quality, respectful care at the facility, with a focus on time of labor, delivery, and the first 48 hours postpartum.
tion, the desired behavioral and health outcomes, the sexual and reproductive health services to be offered, and the needs and objectives for scalability and sustainability.

**Scale-up**

*Community of Practice on Systematic Scale-up*

E2A, with technical support from the IBP Initiative, leads a community of practice on the Knowledge Gateway, entitled *Systematic Approaches for Scale-up of FP/RH Best Practices*. The community of practice, with more than 1,700 members globally, aims to increase the use of systematic approaches for sustainably scaling up best practices that improve access to and quality of family planning and reproductive health services, placing particular emphasis on reproductive rights and choice. Learning is disseminated through webinars, shared tools and discussions, and during virtual and face-to-face meetings. Membership can be requested at: [https://knowledge-gateway.org/global/ibpmembers/scale-up](https://knowledge-gateway.org/global/ibpmembers/scale-up).

**HOPE-LVB**

In the Lake Victoria Basin region, which straddles Kenya and Uganda, E2A is assisting with scaling up an integrated Population, Health, and Environment model. The model is being implemented by the Pathfinder International-led *HOPE-LVB Project*. E2A is specifically assisting with systematically expanding and institutionalizing the model; ensuring rigorous monitoring and evaluation of the model and scaling-up process; and supporting policy and communications activities to raise the profile of HOPE-LVB, particularly among policymakers.

**E2A-STRIDES Improvement Collaborative**

In Uganda, E2A collaborated with the STRIDES Project and district health management teams to introduce an Improvement Collaborative for quality improvement and scale-up of a package of maternal and newborn health/family planning best practices at 46 health facilities in 10 districts. E2A then worked with STRIDES to expand the model to the community level, focusing on increasing demand for family planning services, particularly during the postpartum period.