



Costed Implementation Plan Resource Kit

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# Costed Implementation Plans (CIPs) for Family Planning

10-Step Process for CIP Planning, Development, and Execution

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Produced by:



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This resource was revised in 2022 by the CIP Technical Working Group, including technical contributions from Knowledge Success, Momentum Country and Global Leadership, and Track20.

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## Overview

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### About this Tool

This tool is part of a series of resources in the [Costed Implementation Plan \(CIP\) Resource Kit](#). It is intended to be the key reference resource for the entire CIP process, outlining the steps and associated tools for planning, developing, and executing a CIP. It includes links to the 19 tools and resources that make up the CIP Resource Kit. Annex A. CIP Phases, Steps, Activities, and Tools includes a compiled list of these tools and resources in the resource kit; Annex B. Additional Resources includes additional resources from a wide range of technical sources that can be used to support the CIP process.

### Intended Users of this Tool

Throughout the three phases of planning, development, and execution, the CIP process is highly participatory, involving a range of stakeholders and technical experts. The primary users of this tool are individuals and teams described in the [Costed Implementation Plans \(CIPs\) for Family Planning: Team Roles and Responsibilities for CIP Development and Execution](#) document—this includes the CIP’s Ministry of Health focal point, project manager, and monitoring and evaluation officer; the Technical Support Team; the CIP Task Force; the national family planning technical working group; CIP strategic advisory groups; and the Family Planning 2030 (FP2030) and Ouagadougou Partnership Coordination Unit.

### How to Use this Tool

The process outlined in this tool is based on established strategy planning approaches and principles; it is also based on collective experiences with planning, developing, and executing CIPs. As such, it is a living document and continues to be updated with new insights. This document should be used in concert with other tools in the [CIP Resource Kit](#).

## Introduction

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### The CIP Phases

The CIP process involves three sequential phases with overlapping steps:

1. **Plan:** The planning phase lays the foundation for CIP development and execution. It typically involves high-level family planning program decision-makers. The outcomes of the planning phase include: (1) government and stakeholder buy-in, (2) securing of human and financial resources for CIP development and commitments to support execution processes; and (3) a clearly defined timeline to guide the development process. A kick-off meeting with key stakeholders marks the completion of the planning phase and the onset of the development phase.
2. **Develop:** The CIP is developed in this phase, which lays the foundation for an immediate and smooth transition into execution. It typically involves a broad range of family planning stakeholders at various levels and across various sectors. The outcome of the development phase is a country-owned, government-approved CIP, which is officially launched and communicated to all relevant stakeholders. The kick-off meeting for CIP development marks the beginning of the development phase, while the formal launch of the CIP document marks the end of the development phase and onset of the execution phase.
3. **Execute:** CIP execution, conducted in this phase, refers to a deliberate set of processes and systems to operationalize the CIP for sustained action, ultimately leading to results. It typically involves a broad range of family planning stakeholders at various levels and across relevant sectors. The outcome of the execution phase is measured by the successful achievement of the results that a country (or subnational entity) wants to attain for its family planning program, i.e., impact on family planning and associated health and socio-economic goals. The formal launch of the CIP document marks the onset of the execution phase. The CIP's performance period end-date or the finalization of an end-line review marks the completion of the execution phase.

### The 10-Step Process: A Synopsis

This document outlines the recommended steps, activities, and tools involved in a full CIP process across the planning, development, and execution phases. To sustain momentum, it is advisable that all phases and steps be undertaken with no gaps. The 10 steps are presented sequentially, however, some steps can overlap between phases. Depending on a country's context, some steps may occur in a different sequence and the process is often iterative in practice. For example, after step 5—estimate costs and resource gap and iterate technical strategy—the team will likely revisit steps 3 and 4 to revise the technical strategy. Likewise, step 6—finalize institutional arrangements for execution—could occur during the CIP planning phase. Furthermore, some of the steps overlap between phases. For example, step 9—design and implement performance monitoring mechanisms—starts during the development phase, when performance indicators and targets are defined, and continues into the execution phase, when performance data are regularly collected and reviewed to inform programming.

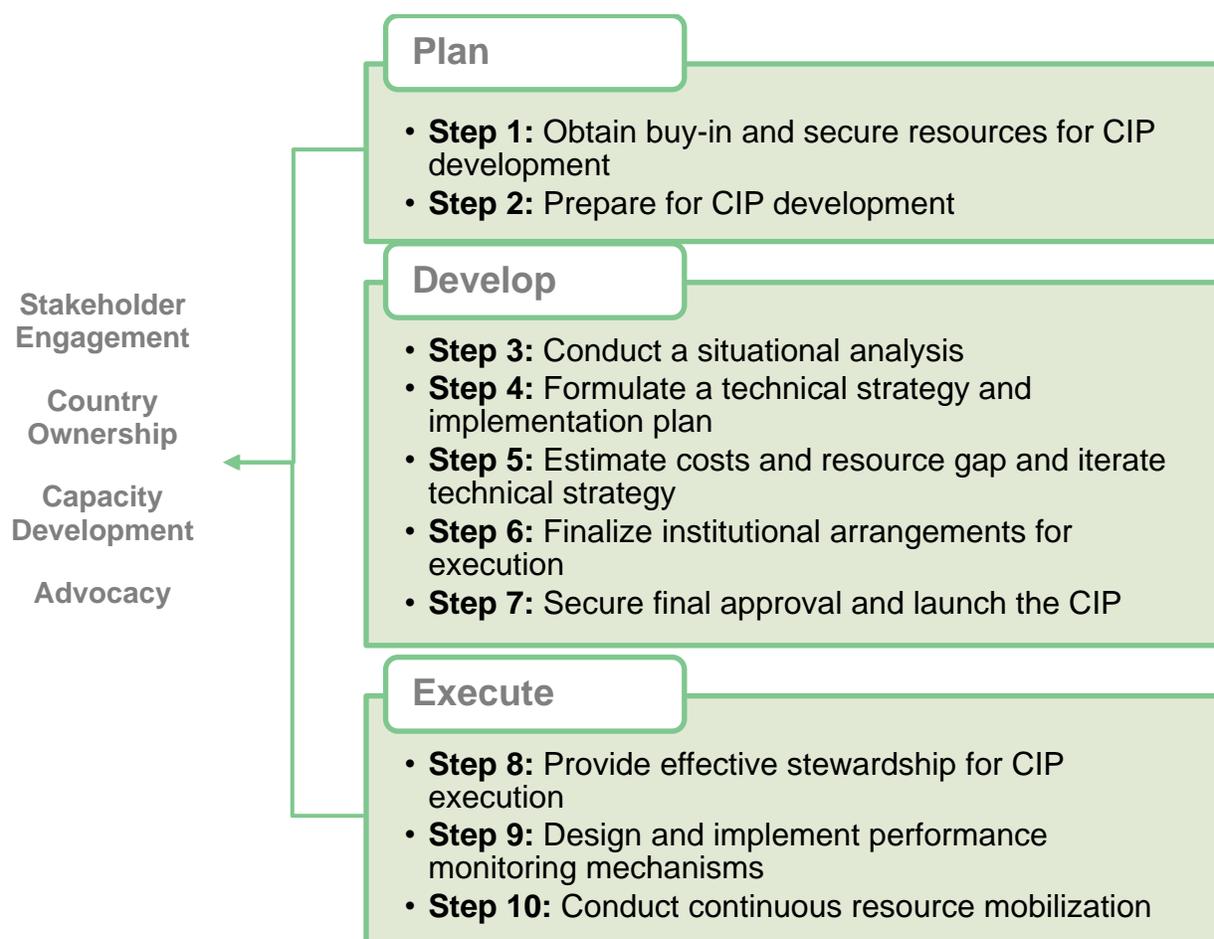
Overlapping steps across the phases can facilitate a continuous process. For example, a gap often exists between the development and execution phases. This gap can be closed by putting in place transition processes during the development phase and immediately after the formal

launch of the CIP. It is highly encouraged that the CIP Task Force, as the governance and decision-making body of the CIP development process, remains engaged during the transition from development to smoothly steer the plan into execution. Further, it is important to note that human and financial resources will be required, and should be assigned, to carry out different activities to facilitate the process throughout the three phases.

The CIP process will unfold differently in each country/subnational level. In many countries, a timeline of 6–12 months for the development phase is reasonable; however, many factors can influence the pace of this process. These factors include availability of stakeholders, including government representatives for the extensive consultation and validation processes, and ease of accessing essential information and data.

Figure 1 provides a summary of the 10-step process. Annex A. CIP Phases, Steps, Activities, and Tools provides a detailed table of phase descriptions, the 10 steps and related activities, and dedicated tools and resources. Annex B. Additional Resources provides additional resources and tools that can be used to support the development of a CIP across the 10-step process.

**Figure 1. 10-Step Costed Implementation Process**



## Aligning FP2030 Commitments and CIPs

Aligning CIPs with existing national, regional, and global commitments is important to avoid duplication of effort, ensure complementarity of action, and strengthen national partners' advocacy messaging for policy, budget, and implementation commitments to family planning. This is particularly the case for [Family Planning 2030 \(FP2030\) Commitments](#). Building on [the work of FP2020](#), which ran from 2012 to 2020, FP2030 is a global partnership for family planning that invites governments and other stakeholders to make formal commitments to advancing rights-based family planning. CIPs can be useful tools to support the operationalization and execution of existing FP2030 commitments or lay the groundwork for future FP2030 commitments. Countries should consider the following areas of alignment with FP2030 throughout the CIP development process:

- **Align the institutional arrangements involved in development, implementation, and accountability.** Often the same entity within the Ministry of Health will lead the CIP and FP2030 commitment development process. If this is not possible, ensure that whatever entity is leading, will lead, or has led the FP2030 commitment-making process is involved in CIP development, implementation, and monitoring. Involving both family planning technical working groups and FP2030 focal points in both processes will ensure mutual accountability.
- **Align geographic and population coverage.** CIPs often detail differentiated levels of support based on underserved geographies and populations. While commitments are less specific by nature, they often will highlight underserved areas (i.e., adolescents). Stakeholders should work to ensure that the same key geographies and populations are aligned across both the CIP and the FP2030 commitment.
- **Align goals, objectives, and strategies.** While the implementation time period will differ between CIPs (often a five-year timeframe) and FP2030 commitments (which go from the date of commitment until 2030), it is important to ensure that the CIP goal is in line with an existing FP2030 commitment or informs future FP2030 commitments. More information on setting a family planning goal for your CIP can be found in the [Guidance for Developing a Technical Strategy](#) resource. The strategies outlined in the CIP will often be more comprehensive than the FP2030 commitment, but efforts should be made to align the CIP strategic priorities and interventions with the specific commitments and strategies included in the FP2030 commitment, or ensure the CIP informs future FP2030 commitments. For instance, if “Improve access to adolescent- and youth-responsive health system for contraceptive use” is an existing FP2030 commitment, this will likely emerge as a strategic priority within the CIP.
- **Align performance tracking and indicators.** When selecting indicators in the CIP technical strategy, consider incorporating [FP2030 Core Indicators](#) to both align with existing or future FP2030 commitments, and utilize data that is already routinely collected in order to allow for frequent monitoring of progress.

## Cross-Cutting Elements

Stakeholder engagement, country ownership, capacity development, and advocacy are essential elements that cut across all three phases.

**Stakeholder engagement** aims to foster a government-led and country-owned plan developed with input from all stakeholders. A **country-owned plan** is one in which all voices are considered and stakeholders share responsibility and accountability for the plan. Different stakeholders can play key roles in the CIP process. For instance, engaging institutions that have long-term presence in the country—such as Indigenous institutions, the United Nations Population Fund (UNFPA), and the U.S. Agency for International Development (USAID)—can help support continuity with past strategies and government buy-in to the process. Ideally, during the CIP process, all stakeholders will work collectively to develop and implement rights-based family planning at the policy, program, and service-delivery levels, and coordinate and implement a unified family planning strategy. When coordinated, these key players can focus their momentum, resources, and energy on the same goals. This coordination can improve program performance, maximize the efficient use of limited resources, and facilitate the sharing of information to troubleshoot potential problems.

The government and stakeholder **capacity** to lead and manage the plan's execution process and monitor performance, among other areas, are fundamental for success. Gaps in capacity and resources should be assessed during the development phase, and efforts to build this capacity should be made part of the CIP execution process.

**Advocacy**, sustained over time, is a cornerstone to effecting change and ensuring CIP adoption and CIP execution. Advocacy is needed to garner high-level government buy-in and commitment, advance a common vision, mobilize resources for execution, and keep stakeholders focused on results. Resources to support advocacy across the process can be found in Annex A. CIP Phases, Steps, Activities, and Tools and Annex B. Additional Resources.

The CIP Resource Kit contains a number of tools specifically designed to be used at certain steps in the process. It also includes tools that are cross-cutting and are relevant across the CIP process. These cross-cutting tools are linked throughout this guide when they are particularly relevant and are also listed below.

#### **Cross-Cutting Tools and Resources:**

- [The 10-Step Process for CIP Planning, Development, and Execution](#)
- [CIP Factsheet](#)
- [Stakeholder Engagement for Family Planning CIPs: A Four-Step Action Framework to Meaningfully Engage Stakeholder in the CIP Process](#)
- [Team Roles and Responsibilities for CIP Development and Execution](#)
- [Rights-Sizing Family Planning: A Toolkit for Designing Programs to Respect, Protect, and Fulfill the Rights of Girls and Women](#)

## Phase I: Plan

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Since the CIP is a government-led, country-owned plan for which key stakeholders share responsibility and accountability, a decision to engage in the CIP process implies collective buy-in and a commitment to engage in a change process to reach the desired goals. This represents an opportunity for an adjustment in the way stakeholders work together to address family planning needs. As such, government and stakeholder buy-in/commitment is cultivated and secured in the planning phase. Also in this phase, initial identification and engagement of key stakeholders begins; the approach, tools, and techniques to be used are developed (i.e., the how, by whom, and when); and resources for the development of the CIP are secured.

### Step 1: Obtain Buy-In and Secure Resources for CIP Development

**Activity 1A: Arrive at decision to engage in the CIP process.** Engaging in a CIP is an investment, and countries should weigh the value a CIP might add to the current program against the resource commitment necessary to complete the process. Country stakeholders should make informed decisions to develop a CIP, taking into consideration the existence of other strategies, as well as the country's capacity and commitment to execute the plan, among other factors. [Deciding to Develop a Costed Implementation Plan](#) is a tool that can help to self-assess and reflect on readiness to develop a CIP.

Once the government determines that engaging in the CIP process would help define a more focused, detailed direction for the country's national family planning program, the government (usually the Ministry of Health [MOH] and sometimes with the Ministry/Division of Planning) takes ownership of the CIP and initiates the planning process. One or more individuals in the government may act as CIP champions to spearhead the buy-in process. Country stakeholders can [brief the ministry](#) about the benefits and rationale for a CIP, including essential factors that facilitate successful execution of the plan.

The process for securing buy-in involves (1) assigning several key country-level individuals that will lead the CIP Task Force and the CIP Technical Support Team, including an individual to act as the MOH focal point to lead the process (usually the director of the family planning unit at the MOH), a project manager to support overall coordination, communication, and logistical support (usually an MOH employee or consultant managing and coordinating the entire effort), and a monitoring and evaluation officer to facilitate access to and use of data to inform decision making; (2) engaging senior leadership at the ministry, and (3) designating resources (human and financial) to support the CIP process, including through execution, with financial resources sourced from the government and/or development partners.

**Activity 1B: Establish a CIP Task Force.**<sup>1</sup> The MOH forms a CIP Task Force representing a group of key stakeholders to provide oversight, guidance, resources, and expertise during the CIP development process. The group, usually consisting of 5 to 10 members, represents the governance and decision-making body for the entire CIP process. The CIP Task Force is chaired by the MOH focal point (leading the process) and includes the project manager and other key stakeholders. Task force members are usually selected by the MOH from an existing family planning technical working group (TWG) and should include individuals from the MOH, other relevant ministries, development and implementing partners, civil society, private sector stakeholders, and other influential family planning experts or champions in the country.

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<sup>1</sup> While the name "CIP Task Force" varies from country to country, the groups' functions remain the same.

Representatives from subnational levels may be included, as feasible. Consistent engagement between the CIP Task Force and the larger family planning TWG is critical to ensure that the TWG—which is responsible for CIP execution—understands, informs, and aligns itself to the CIP priorities. Once the CIP Task Force is formed, it takes charge of the next activity to secure adequate financial and human resources and to establish a CIP Technical Support Team.

**Activity 1C: Secure financial and human**

**resources for CIP development.** The CIP Task Force, led by the government, ensures adequate financial and human resources are available for the CIP’s development from multiple sources, including the government and development and implementing partners. *Financial resources* should cover all costs associated with CIP development, and these will vary depending on context and needs. Typical expenses include those associated with hiring of technical experts (consultants), convening meetings, transportation, procuring stationary supplies, and printing materials. In addition, skilled and available *human resources* need to be designated for the CIP process. For example, at least 25 and 50 percent of the MOH focal point’s and project manager’s time, respectively, should be dedicated to the CIP throughout the plan’s development period.

Given that the development of the CIP is labor-, time-, and resource-intensive over a period of 6–12 months, and requires a combination of essential skills and expertise, the CIP Task Force should consider hiring dedicated technical experts. Typically involving a team of 2–3 people (due to varied skill requirements), technical experts support the CIP Task Force to develop the plan following refined CIP development approaches and principles.

During this stage, it is also important to start planning for execution to facilitate continuity and ensure that transition into execution is managed in a systematic manner. Human resources should be planned and assigned to execution tasks, and financial resources should be secured to cover costs associated with CIP dissemination/communication, resource mobilization, and performance monitoring.

**Activity 1D: Make a formal request for CIP support.** The CIP Task Force determines if there is a gap in financial and human resources and makes a formal request for support to relevant development and implementing partners. Most countries that currently have CIPs, have received external funding and technical assistance.

**Step 1 Tools and Resources:**

- [Deciding to Develop a Costed Implementation Plan: Seven Considerations to Inform Country Decision-Making](#)
- [Communicating with Multisectoral Stakeholders about Costed Implementation Plans](#)
- [Making the Case for a CIP: PowerPoint Template](#)

“The CIP accomplished what had never happened before. And frankly, when this task force started happening, it was something very unique. We had never seen before the minister, the director general, and the secretaries sitting at the table. Not just from health but from the Population Welfare Department and the family planning NGO stakeholders. All at the same table discussing the quality of data.”

Dr. Tabinda Sarosh  
Country Director, Pathfinder, Pakistan  
[Family Planning Costed Implementation Plan Resource Kit: What We Heard](#)

## Step 2: Prepare for CIP Development

**Activity 2A: Form a CIP Technical Support Team (TST).** The CIP TST is a group of at least 5 individuals who perform the day-to-day technical tasks involved in the CIP development process, from conducting a situational analysis to formulating the technical strategy to costing the implementation plan. Led by the MOH focal point or designee, and guided by the CIP Task Force, core TST members spend at least half of their time working on the CIP during the active development period. The TST should have clear assigned roles, responsibilities, and reporting lines. A detailed description of the role and composition of the TST is found in the [Team Roles and Responsibilities for CIP Development and Execution](#) document. Because development of the CIP involves numerous individuals who need to work together as a team in short timeframes, it can be useful for the TST to co-locate, preferably within government offices, to gain easy and regular access to government staff and resources.

**Activity 2B: Define the CIP development process and timeline.** The TST develops a detailed description of the CIP development process, referred to as the CIP development timeline, which includes the scope, activities, process, approaches and tools, calendar, and available resources. Activities related to the management, coordination, and communication of the CIP process should also be reflected in the timeline; for example, the need for and scheduling of status meetings with the CIP Task Force and briefing meetings with MOH leadership should be included. An [Illustrative CIP Process Timeline](#) can be customized to the country context. The development timeline should reflect a government-led, country-owned, and inclusive process. The TST seeks input and approval of the timeline from the CIP Task Force before proceeding. The CIP Task Force reviews and concurs with the timeline, and confirms the availability of financial resources to implement it. The TST also seeks concurrence from the CIP Task Force on the scope of the CIP. Questions such as whether the CIP will reflect national and subnational implementation plans, or whether the CIP will be positioned as a multisectoral plan, need to be clarified in the beginning. After the CIP Task Force has established the details of what needs to be done and how, by whom, and using which resources, it is now time to engage a broader group of stakeholders of the family planning program and kick-off the development process.

**Activity 2C: Identify key family planning stakeholders.** The CIP is a highly participatory process involving different key stakeholders. The project manager uses the [Stakeholder Engagement for Family Planning Costed Implementation Plans](#) tool to guide the process, generating a stakeholder matrix (a list of stakeholders with their contact information and areas of technical expertise/contribution to the family planning program) to guide who and how each stakeholder should be involved in the CIP process. This matrix is a living document that is progressively elaborated throughout the CIP development and execution processes as additional information from stakeholders is gathered. As such, it is updated during activity 2D and step 3, and revised again in preparation for CIP execution in step 6.

**Activity 2D: Kick-off the CIP development process.** The CIP Task Force through the TST engages stakeholders as early as possible in the CIP development process, including making relevant players aware of the CIP effort and how they can be involved through a kickoff meeting. The purpose of the kickoff meeting is to formally notify all key stakeholders (CIP Task Force, TST, family planning technical working group members, and relevant development partners, civil society, youth, and other key stakeholders) that the CIP development process has begun, and to ensure there is a collective understanding of the rationale for the CIP, its development process, and engagement process. The kick-off meeting is a venue for stakeholders to share their expectations of the process and the CIP in general. Further, it allows stakeholders to initiate discussions around execution, which should be discussed early on. The kick-off meeting

occurs after identifying stakeholders to engage in the CIP process. The TST, therefore, first works with the CIP Task Force to identify relevant key stakeholders to involve in the development process, and then, captures the concerns/interests, expectations, and influence of the stakeholders. The project manager, who is responsible for the day-to-day running of the entire CIP development process, uses this information to develop a stakeholder engagement plan. The plan guides the TST on how stakeholders should be engaged and managed during the CIP development process.

Either before or during the kick-off meeting, the CIP Task Force should engage with the institutions (government and development partners) providing funding to the family planning program to provide adequate information on the available resources for both development and implementation of the CIP, their engagement, and anticipated future needs for financial resources, and the possible need for funding reallocation informed by the CIP prioritization process.

### Step 2 Tools and Resources:

- [Illustrative CIP Process Timeline](#)

## Phase II: Develop

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A kick-off meeting marks the onset of the development phase, leading to the finalization of a country-owned, government-approved CIP. Also during this phase, institutional arrangements, mechanisms, and tools to facilitate execution of the plan are put in place. The CIP development process, as outlined in the [Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans](#) and the [CIP Costing Tool and User Guide](#), is iterative and involves identifying and prioritizing key issues, defining results, identifying intervention activities to achieve the results, generating budgetary costs, identifying resource gaps, and outlining institutional arrangements for implementation. Advocacy, stakeholder engagement, and capacity building continue as cross-cutting elements throughout the development and execution phases.

### Step 3: Conduct a Situational Analysis

**Activity 3A: Gather information on the current family planning context, programs, and resources.** As part of the situational analysis effort, the CIP Technical Support Team (TST) engages in a systematic collection of data/information from various sources to inform comprehensive diagnosis of the family planning program. The TST may use an analytical framework to conceptually organize the situational analysis process, which is composed of five elements: context analysis, beneficiary profile analysis, current/desired state analysis, resource mapping, and program performance analysis. If a country has a recent comprehensive review of the family planning program, such as an end-line review from a past

In Burkina Faso, the roadmap began with a review of the previously written CIP. “We made a summary of the state of the priority challenges by strategic axis, the challenges that have been taken up, the challenges that have been reduced, and the challenges that persist. We had a total of 19 challenges, of which it was estimated that 13 were reduced and six persisted.” That was the starting point of the new process.

Simplice Toe  
PROMACO, Burkina Faso  
[Family Planning Costed Implementation Plan Resource Kit: What We Heard](#)

CIP, the TST may prioritize areas or questions to explore during the situational analysis based on gaps, areas of improvement, or opportunities noted in the existing review. In this context, a situational analysis may not need to exhaustively cover the full scope of areas related to family planning, but rather be guided by key strategic questions or gaps from past CIP implementation. The TST collects information using three methods: desk review, secondary data analysis, and expert consultations.

The TST first collects data from various sources and conducts a desk review and secondary statistical analysis of relevant data, reports, and documents to assess the current family planning status, policies, programs, and financing. This includes assessment of adherence to rights-based family planning principles and standards. Guidance on the scope of information gathered includes, but is not limited to the following (for more detailed guidance and resources on conducting a situational analysis, refer to [Guidance for Developing a Technical Strategy](#)):

- Centralized data (from Demographic and Health Surveys or DHS, commodity reports, global funding information from the Netherlands Interdisciplinary Demographic Institute, etc.)
- National and subnational policy and program documents (such as population policy, commodity security plan, etc.)
- Data and reports from the ministry (from the health management information system, the ministry financing family planning/reproductive health, etc.)
- Data and reports from in-country partners and donors (on family planning program activities, current funding levels, planned investment, programming type, monitoring and evaluation reports of their programs, location of program activities, etc.)
- Data from previous CIPs, including performance monitoring data or dashboards and end-line review reports.
- Data on current funding for family planning and resources that may be available to support activities outlined in the CIP (how much is currently being budgeted or spent on family planning; who is investing in and implementing family planning programs; what interventions are being funded; and where the investment is going by geographic location).

The next task is to gather information from expert consultations. The purpose of these consultations is to enrich data that has been collected during desk review and secondary data analysis, and further diagnose and analyze the family planning situation. This exercise follows several sub-steps, as further described.

First, the TST works with the CIP Task Force to classify stakeholders—generated from the stakeholder matrix developed in activity 2C—according to their technical expertise to form 5–6 strategic advisory groups (SAGs). The types of SAGs differ from country to country, but typically they are focused around the key family planning programming/CIP thematic areas: demand creation, service delivery, commodity security, policy and enabling environment, stewardship, management and governance coordination, and financing. Sometimes, policy and advocacy, stewardship, management and coordination, and financing are grouped together under enabling environment. Further, service delivery may be broken down into private sector, facility-based family planning, and community-based family planning. Finally, in some cases, youth is its own SAG to ensure optimal focus on this group, especially in circumstances where they encompass the majority of the reproductive age population. It is, however, advisable to limit the number of

SAGs to a maximum of 6–7. Some issues, such as human rights and equity, are cross-cutting and should be represented in each of the SAGs.

Second, the TST holds several rounds of SAG consultations to arrive to a prioritized list of strategic issues facing the program. During the first round of SAG meetings, stakeholders discuss the current family planning context, challenges, opportunities, and priorities. These discussions, captured by the TST, add to the desk review and secondary statistical analysis.

**Activity 3B: Conduct information review, synthesis, and analysis.** The TST engages in a systematic review and analysis of information and data collected in activity 3A. Gathered information is classified around thematic areas and sub-topics/issues. Typically, the CIP includes the seven core thematic areas (mentioned previously), which can be further modified, or additional areas can be added to meet the country's family planning programming structure or priorities. As noted above, cross-cutting issues including youth and rights and equity, should be reflected in the analysis of priorities.

Depending on whether a country is building on existing strategies, systematic analysis may encompass all components of the family planning program and related sectors in the country, including supply-side and demand-side barriers (such as bottlenecks or other barriers), along with policy barriers to reducing unmet need for family planning, as well as enabling factors.

**Activity 3C: Prioritize issues and analyze root causes.** Based on the analysis of information from activity 3B, the TST works with expert stakeholders to identify the root causes of the issues and tag those that are a priority for deeper analysis. A human rights framing can help identify root causes and constraining factors. Through facilitated workshops, the TST works with the SAGs to prioritize issues (as explained in [Guidance for Developing a Technical Strategy](#)) that are of utmost importance to address within and across the thematic areas. The problem analysis is a vital stage of CIP development, as it guides all subsequent analysis and decision making on priorities. At the completion of this activity, stakeholders and the TST should have a comprehensive description of the problems and their associated root causes, and a list of critical opportunities and bottlenecks. They will also have identified key contextual factors to keep in mind as they consider how the problems can be resolved.

As the situational analysis is being conducted, writing for the CIP document can begin.

### Step 3 Tools and Resources:

- [Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans](#)

### Step 4: Formulate a Technical Strategy and Implementation Plan

**Activity 4A: Set or refine the family planning goal.** In most situations, the family planning goal is set as part of international commitments (such as FP2030 or ICPD) or in national strategic plans. For cases in which a specific family planning goal has not been set, the TST consults with the government and conducts projection exercises to define a goal. Different tools available to formulate a family planning goal are described in [Guidance for Developing a Technical Strategy](#). For the CIP, it is important to use a metric that is: (1) realistic—can reasonably be attained within the specified period and confines of available resources and (2) able to meaningfully inform projections of the number of all women that need to be reached with services and information to meet the overall goal. In situations where a goal is set but is unable to meaningfully inform CIP development—for example, when the goal is not specific,

measurable, achievable, realistic, and time-targeted (SMART)—the TST also consults with the government to refine the goal. After the family planning goal is set, the team forecasts the annual rate of change in the modern contraceptive prevalence rate required to reach the goal and the number of users required to reach the goal. Several forecasting tools are available for this task, including the [Family Planning CIP Costing Tool](#), [Reality Check](#), and [FamPlan](#). As the goal is being set, it is important to situate the goal in the context of ensuring that programming adheres to rights-based standards and principles.

**Activity 4B: Define results and prioritize outcomes and interventions.** The TST works with the SAGs to develop a results framework that details the results and outcomes that comprise the entirety of the family planning program needed to achieve the family planning goal. Development of the framework is informed by the root cause analysis conducted in activity 3C, suggested solutions collected during the information gathering process under step 3, the family planning goal to be achieved, and the review of country-level and international evidence-based and rights-based practices. The TST ensures that the strategy is aligned to the [Comprehensive Human Rights-Based, Voluntary Family Planning Framework](#), which includes the 10 components of FP2020's [Rights and Empowerment Principles for Family Planning](#): agency and autonomy, availability, accessibility, acceptability, quality, empowerment, equity and non-discrimination, informed choice, transparency and accountability, and voice and participation.

The TST works with the SAGs to identify and prioritize appropriate interventions that facilitate achievement of outcomes and results in the results framework. Intervention strategies selected need to be feasible, relevant for the country and/or subnational context, rights-based, and evidence-based. The TST and SAGs should ensure best practices and innovative, [high-impact practices](#) are included to maximize success and optimize use of resources.

As the results framework is being developed, strategic priorities will emerge that require focused implementation, financial resource allocation, and enhanced oversight and performance monitoring during CIP execution. Strategic priorities should address the bottlenecks identified during the problem analysis and priorities should represent (1) solutions to bottlenecks and/or (2) enabling interventions that go beyond the “business-as-usual” work of the family planning program to accelerate achievement of the outcomes, results, and family planning goal. These strategic priorities can either be displayed in a one-page CIP map or within the results framework using colors, symbols, or text to identify them.

**Activity 4C: Validate the results chain and strategic priorities.** During the development of the results framework, the TST works with monitoring and evaluation officers and other stakeholders who are knowledgeable on the in-country family planning data systems to ensure that the results and strategic priorities are SMART. If they cannot be reasonably measured, then progress cannot be determined, and outcomes, outputs, and strategic priorities should be reconsidered. Additionally, at this stage the TST reviews the overall quality of each result chain, ensuring they are causally linked, evidence-based, and reasonably complete.

**Activity 4D: Select indicators and estimate targets.** Once stakeholders have developed the results framework, based on agreed-upon interventions and including strategic priorities, the next step is to assign indicators and estimate targets for the outcomes and outputs. Data collected for indicators provide evidence that a certain result has or has not been achieved. Measurable targets are indicative estimates of the results (outcomes and outputs) to be achieved by implementing specific interventions. Indicators and targets can be qualitative or quantitative and are used to establish inputs for costing and benchmarks for performance monitoring. In certain cases, some of the performance targets are already set and included in

other national strategic documents. The TST should review existing targets and either adopt them or ensure as much alignment as possible with CIP targets.

The TST assigns indicators to the family planning goal, outcomes, and strategic priorities. The [Family Planning and Reproductive Health Indicators Database](#), Track20, and PMA Data provide a comprehensive listing of the most widely used and validated indicators for evaluating family planning programs. When possible, indicators should utilize data that is already routinely collected to allow for frequent monitoring of progress. After identifying indicators, targets can be set. Quantifying realistic and reliable targets is a complex process, and ideally includes knowledge of baseline values and performance standards to be reached to meet the desired goal. Historical benchmarks established in past program reporting, program evaluations, and studies can be used to estimate the baseline (some of which may have been gathered as part of the situational analysis). However, in most cases, baseline values are difficult to get or are out of date, and performance standards are not well articulated. In such circumstances, quantification is typically based on past experience and expert judgment. The goal is to improve accuracy of the target estimate, because guess estimations can lead to over- or under-estimation of costs and make performance monitoring exercises less meaningful.

Forecasting commodity requirements is part of the performance target-setting process, intended to generate the annual estimates of the quantity of contraceptive commodities needed to meet the family planning goal. The TST uses tools such as the [Family Planning CIP Costing Tool](#), [Reality Check](#), [CastCost](#), and [PipeLine](#).

**Activity 4E: Develop implementation plan with activities and sub-activities.** Once the results framework has been completed and validated, the next task is to develop an implementation plan to describe how results will be achieved through implementation of specific activities. The implementation plan includes information on the results (outcomes and outputs) by thematic area, intervention activities and sub-activities to generate the outputs, target estimates, indicators, and a timeline for implementation (see Appendix 14 in the [Guidance for Developing a Technical Strategy](#)).

The TST works with the SAGs to list activities necessary to carry out the prioritized interventions to achieve the outputs defined under each outcome, and then detail sub-activities and schedule them according to timing and coordination needs. The TST works with the SAGs to develop the implementation plan by performing the following tasks: (1) defining intervention activities, (2) detailing and sequencing sub-activities, and (3) refining and validating the implementation plan. The implementation plan forms the basis for costing the plan, where the TST will define inputs of the activities and assign resource estimates. Depending on the needs, resources, and bandwidth, the TST may decide to develop an implementation plan for the first two years, rather than the entire five-year CIP period. This is a lighter touch approach and allows for the detailed activities to be revisited after two years of implementation.

**Activity 4F: Refine and validate the technical strategy.** The technical strategy includes the results framework with strategic priorities and associated implementation plan. Refinement and validation of the technical strategy is a highly iterative, continuous process throughout the development phase and involves different stakeholders and technical experts. After the implementation plan is finalized, the TST and monitoring and evaluation officer reviews the indicators formulated under activity 4D to assess if the indicators need to be refined to aid in ensuring regular performance monitoring of the full technical strategy. Activity 4F involves final refinement and validation of the strategy before costing begins. The TST presents the strategy for each thematic area to the corresponding SAG for review, and the full technical strategy for

final review by the CIP Task Force. During this time, the substantive portion of the CIP document is edited and polished for presentation to the stakeholders. This process often overlaps with step 5, as costing and mapping existing resources is essential to refining and validating the technical strategy.

**Activity 4G (optional): Align with the subnational level.** In most contexts, full subnational CIPs are not necessary if regional variation is appropriately considered in the national CIP. Results from the situational analysis can help countries determine the level of geographical variation needed in the CIP. In some cases, there may be subnational levels with larger programmable budgets or external resources. In this case, additional local priorities can be added to their workplans or longer-term development plans. If specific subnational plans are desired, the TST defines regional/district objectives based on an analysis of the respective issues and challenges in that geographical area. A decision to reflect subnational level plans should be made in Phase 1 of the CIP process as additional resources and time may be required to accomplish this task. District or state meetings are held for regional and/or district health leaders to define subnational targets to promote decentralized investment in and ownership of the CIP. Next, district/state leaders gather information on resource needs to meet subnational targets, and initial regional objectives based on the national targets are developed. A second district or state meeting may be held for regional/district health leaders to present their budgets and service delivery information and agree to subnational progress targets against the CIP goals.

**Activity 4H (optional): Estimate impact.** The TST can use [ImpactNow](#) to calculate the overall impact of implementing the CIP and achieving the contraceptive prevalence rate and method mix goals, as well as gains in maternal and child deaths averted, unintended pregnancies, and financial savings to the healthcare system because of increased family planning uptake. This information can be included in the CIP so that the government and other stakeholders have a clear understanding of the benefits of investing in family planning, in addition to family planning being a human right, and, thus, arguments to bolster specific funding requests from government and donors.

#### Step 4 Tools and Resources:

- [Guidance for Developing a Technical Strategy for Family Planning Costed Implementation Plans](#)

#### Step 5: Estimate Costs and Resource Gap and Iterate Technical Strategy

The costing process for the CIP involves determining financial resource requirements for the activities stipulated in the implementation plan (developed in step 4E). The CIP uses the activity-based costing method to estimate annual costs of each activity. The [Family Planning CIP Costing Tool and User Guide](#) is a user-friendly Excel-based tool developed specifically for generating cost estimates for CIPs. By entering the unit cost, projected method mix, population size, and inputs required to implement the activities, this tool estimates the total cost of the CIP. Activity 5A to 5F describe key tasks involved in the costing and financial gap analysis processes using the CIP Costing Tool. If the TST has decided to create a two-year rather than a five-year implementation plan, Annex 15 in the [Guidance for Developing a Technical Strategy](#) provides options for using the CIP Costing Tool and other approaches to forecast a full five-year cost.

**Activity 5A: Estimate common unit costs.** The tool identifies numerous items for costing commonly required for scaling up family planning. These include meeting and training costs, some human resource costs, costs related to common demand-generation channels, and

logistics management costs. Additional items to be costed can be added to capture all inputs necessary for the activities in the plan. The TST determines the unit costs of these items based on partner and stakeholder interviews, document review, and market analysis. Contraceptive costs and associated consumables costs are obtained from the MOH, or the donor/partner responsible for procuring family planning commodities. These compiled unit costs are then entered into the “Costing Inputs” worksheet in the tool. The process of collecting unit costs can be time-intensive, and hence the TST should start collecting unit cost data in the situational analysis stage, step 3.

**Activity 5B: Input quantity of units required to achieve plan objectives.** The TST calculates the cost of contraceptive commodities and consumables needed for the CIP by populating the CIP Costing Tool with population statistics, the current method mix, and the CIP objectives. Activities included in the implementation plan are entered by thematic area, and each activity is disaggregated into a sub-activity or concrete action that needs to occur (e.g., a meeting or an item to be procured). The number of units required to complete each action are calculated from the target estimation (activity 4E) and entered into the appropriate year in the tool, as defined by the activity timeline (activity 4E).

Based on the above inputs, the tool calculates the total resource requirements for the entire plan, as well as for each specific thematic area, by plan year and the full term of the plan. These totals are reported on the “Cost Summary” worksheet of the costing tool.

**Activity 5C: Review and validate cost estimates.** Next, the costing is reviewed for inconsistencies across all items, and the finalized cost estimates are reviewed and validated by the SAGs and CIP Task Force. Sometimes, changes during costing review may affect activities and targets, and hence the implementation plan may need to be realigned to match the cost estimates.

**Activity 5D: Conduct CIP financial gap analysis.** During the situational analysis, the TST may have mapped existing resources for family planning programming to ground the technical strategy. Building on this initial mapping, conducting a gap analysis of the CIP helps countries estimate the financial gap between the costs associated with implementing detailed CIP activities and the annual funding commitment by government and donors to support the plan’s implementation. This gap analysis provides the evidence necessary for policymakers and partners to advocate for and mobilize additional resources—both locally and globally—and helps governments and stakeholders identify the activities most crucial for achieving the country’s family planning objectives and commitments. The exercise involves collection of data from the government, donors, and partners, through a combination of interviews and questionnaires, on the activities described within the CIP that they intend to support. The gap analysis can be conducted using the same [CIP Costing Tool](#) by inputting the coverage of commodities, consumables, and sub-activities currently in donor, partner, and government budgets. The results of the gap analysis provide stakeholders with information on thematic areas that are over- or under-funded and the magnitude of the over or under funding, and provides donors with information on where resources can be shifted or additional resources that need to be allocated to support the government to achieve its strategic priorities.

The CIP gap analysis can be effective as part of initial CIP development as it allows the TST to use the information to iterate the technical strategy and realign it if needed. The gap analysis can be conducted for a limited number of years (especially if a two-year implementation plan was developed) or for the full five years of the plan. If a CIP gap analysis is conducted for the full five years, it should be updated annually as additional data on donor, partner, and

government allocations become available. The gap analysis provides more data on specific areas of concern when conducted after partners have already developed specific workplans but can also be used to advocate for activity alignment when conducted prior to partner workplan finalization.

“CIPs must reflect actual funding streams and programing, from government and donors, and we must also develop budget scenarios to be able to respond to budget shortages.”

Modibo Maiga  
Palladium, HP+, West Africa  
[Family Planning Costed Implementation Plan Resource Kit: What We Heard](#)

**Activity 5E: Realign technical strategy to ensure reasonable cost.** Conducting a CIP financial gap analysis (activity 5D) can highlight key entry points for advocacy for both increased investment and better alignment of government and donor resources to the CIP activities. However, advocacy asks are more likely to be successful if they are realistic. If the CIP budget surpasses the entire health budget in the country, it likely needs to be revised. If even the first years of the CIP are less than 50 percent funded, the CIP would likely benefit from reprioritization of results, outcomes, and outputs (activity 4B) and/or revision of the implementation plan. The TST can rework decisions made in step 4 to ensure the CIP has a reasonable cost and a realistic advocacy ask for increased investment.

**Activity 5F: Revise and validate final cost and resource gap.** Following potential realignment in activity 5E, the finalized cost estimates and the finalized resource gap are reviewed and validated by the SAGs and CIP Task Force.

#### Step 5 Tools and Resources:

- [Family Planning CIP Costing Tool](#)
- [Family Planning CIP Costing Tool User Guide](#)
- [Annex 15 of Guidance for Developing a Technical Strategy](#)

#### Step 6: Finalize Institutional Arrangements for Execution

In this step, institutional arrangements that define roles and responsibilities of various parties, as well as mechanisms for execution of the CIP are determined. These arrangements are articulated in the CIP and define how the CIP will be implemented, coordinated, and monitored during the execution phase, and by whom. Institutional arrangements are developed in parallel with the development of the technical strategy, primarily involving the project manager and the CIP Task Force, with advisory from the TST. It is highly recommended that preliminary consultations on institutional arrangements occur during the planning phase, in step 1. Further, any needs for additional resources and capacity development to facilitate an effective execution process are identified during the situational analysis exercise in step 3, and interventions reflected in the implementation plan.

**Activity 6A: Define a stewardship and accountability structure.** The project manager works with the MOH focal point and the CIP Task Force to define oversight and accountability responsibilities, and roles and responsibilities of key actors as they relate to CIP execution. The worksheet [Stewardship for CIP Execution](#) can support the CIP Task Force to understand the stewardship functions as they apply to CIP execution and help them define how these functions will be carried out, and by whom. The CIP Task Force should assign stewardship for the CIP to one government institution to prevent ambiguity of authority and accountability. Further, the ministry should assign an individual to be the designated focal point person for the CIP, and if possible focal points for each thematic area. A monitoring and evaluation officer should also be

assigned to the CIP to manage the performance monitoring process. In countries where administrative and managerial authority have shifted to the subnational levels (such as states, counties, regions, provisions, and districts), the governance structure should define the role of the subnational officials and how they will function with the central-level ministry.

**Activity 6B: Define coordination mechanisms.** The project manager works with the MOH focal point and the CIP Task Force to define how stakeholders will coordinate efforts to facilitate joint planning, pooling of resources, decision making, and sharing of information and responsibilities. To the best extent possible, existing committee structures should be leveraged to facilitate coordination at national and subnational levels. In some cases, existing mechanisms need to be reformed or revitalized to improve coordination efforts.

**Activity 6C: Identify capacity development and implementation support needs.** Capacity development and resource needs for the government to lead CIP execution are identified and planned. This may involve conducting a capacity assessment of various institutions tasked with implementation roles on their human and operational capacity to fulfill those roles and responsibilities. Working through the *Stewardship for CIP Execution* worksheet will also help the CIP Task Force identify capacity development needs. Key functions during CIP execution include coordination, performance monitoring, resource mobilization, advocacy, and stakeholder engagement. Ideally, this activity should be conducted during step 4 so that resource requirements for capacity development can be accommodated in the implementation plan and costed.

#### Step 6 Tools and Resources:

- [Stewardship for CIP Execution: Considerations for CIP Stakeholders](#)
- [Team Roles and Responsibilities for CIP Development and Execution](#)

#### Step 7: Secure Final Approval and Launch the CIP

In this step, several activities are undertaken to shepherd the final CIP into launch stage. As communication is a key factor in aligning the CIP for execution, a comprehensive dissemination plan is developed to ensure that stakeholders know exactly what role they are expected to perform to execute the plan. It is highly recommended that any needs for additional resources to facilitate CIP dissemination be reflected in the implementation plan.

**Activity 7A: Review and approve the CIP.** The government and the CIP Task Force review and validate the final CIP. They submit the CIP to the appropriate government entity for approval, following government protocol and procedures.

**Activity 7B: Develop a dissemination plan and materials.** The project manager develops the dissemination plan for the CIP and estimates the number of documents to be printed. In addition, the project manager develops simplified, short dissemination materials, such as an executive plan summary, the CIP map, and a PowerPoint presentation, for easy sharing with partners and implementers (e.g., at the central level). Other relevant dissemination/advocacy-related publications are produced at this time.

“In Kenya, we intend to have a national launch with 50–60 people, then proceed to the CIP at the county level. We have created a popular version (only four pages) which will be posted to social media and other platforms as part of our dissemination.”

Dr. Geoffrey Okumo  
Options Consultancy Services, Kenya  
[Family Planning Costed Implementation Plan Resource Kit: What We Heard](#)

**Activity 7C: Produce and print the final document.** The TST hands over the final copyedited and formatted CIP document to the project manager to facilitate printing and dissemination.

**Activity 7D: Hold an official launch event and dissemination activities.** The project manager works with the MOH focal point and the CIP Task Force to organize an official national launch of the CIP. Subnational launch events should also be considered. The project manager also works with family planning stakeholders to disseminate the CIP nationwide.

## Phase III: Execute

“The CIP is not complete once launched. Technical assistance is needed after the CIP launch when implementation happens. We need strong and reliable management systems. The CIP needs to be disseminated; sub-national planning and implementation are vital, especially in decentralized countries.”

Modibo Maiga  
Palladium, HP+, West Africa  
[Family Planning Costed Implementation Plan Resource Kit: What We Heard](#)

The formal launch of the CIP document marks the end of the development phase and onset of the execution phase. In this final phase, the government undertakes a systematic process to steward the execution of the CIP while regularly monitoring progress toward desired results, and ensuring optimal levels of resources (financial, human, and technical) are available and efficiently managed. The government also nurtures sustained commitment from all key stakeholders responsible for leading and managing execution, emphasizing the notion of shared ownership of the plan. Because the CIP is a living document, CIP execution should be dynamic and include periodic review and revision of the CIP based on results and changes in the internal and external environment, such as funding trends and global commitments. The steps that follow are not sequential, but

rather done concurrently to bring about execution. The steps are organized around the [four key elements for execution of family planning CIPs](#), which reflect factors that drive or hinder execution of strategies, plans, and policies.

### Step 8: Provide Effective Stewardship for CIP Execution

During the planning and development phases, the stewardship and accountability structure as well as the coordination mechanisms are defined. In this step, these structures become functioning entities/processes, put into motion and sustained over time.

**Activity 8A: Implement effective and efficient coordination mechanisms.** The MOH focal point works with the project manager to either set up the entities for which institutional arrangements were described in the CIP or improve functioning of existing coordination mechanisms. Although in many contexts some level of a coordination mechanism already exists, they often lack the robustness necessary to facilitate the processes for effective CIP execution. These shortcomings need to be identified and addressed soon after the launch. A [CIP Execution Country Assessment Checklist](#) can be used to assess which areas need improvement relative to the functioning of coordination mechanisms.

**Activity 8B: Lead and manage the execution process.** The MOH focal point works with the CIP Task Force to ensure that the stewardship and accountability structures at all levels are effectively providing the leadership and management function that is needed. First, they ensure roles and responsibilities are clearly articulated and assigned to individuals/teams within respective institutions. The worksheet [Stewardship for CIP Execution](#) can support the CIP Task

Force to understand the stewardship functions as they apply to CIP execution and help them define how these functions will be carried out, and by whom. This may include assigning technical focal points for each of the CIP thematic areas: demand creation, service delivery, commodity security, policy and enabling environment, stewardship, management and governance coordination, and financing. Second, they establish and maintain concrete working relationships between government institutions. Third, they put in place a systematic process to keep the CIP continuously visible to senior leadership within the government so they are actively engaged, provide support, and engender accountability for results at all levels. Further, the focal point works to create a common vision and purpose to help stakeholders commit to a partnership approach to execution, and to help stakeholders stay focused, productive, and inspired throughout the duration of the plan.

**Activity 8C: Integrate CIP into existing annual work planning, or if necessary, develop annual joint workplans.** As needed, the government and partners develop and execute joint annual workplans with detailed quarterly or semi-annual plans submitted to the government for review and oversight. The MOH works with stakeholders to ensure that appropriate emphasis is placed on strategic activities that contribute to the priority results. The CIP Task Force advocates to government, donors, and implementing partners to ensure that strategic activity gaps are prioritized to be filled.

**Activity 8D: Engage at the subnational level to facilitate the execution of the CIP.** The MOH and CIP Task Force can engage sub-nationally to disseminate the CIP and ensure CIP strategic priorities, interventions, and activities are integrated into their planning processes. In countries where administrative and managerial authority has shifted to subnational levels (such as states, counties, regions, provisions, and districts), roles and accountability processes may be transferred to subnational administrative units. This may include the development of subnational plans for CIP targets, dissemination, capacity building for implementation and administration, and, in some countries, entire CIPs for those subnational levels.

### Step 8 Tools and Resources:

- [Four Key Elements for Execution of Family Planning Costed Implementation Plans](#)
- [CIP Execution Country Assessment Checklist](#)
- [Stewardship for CIP Execution: Considerations for CIP Stakeholders](#)

### Step 9: Design and Implement Performance Monitoring Mechanisms

During the development phase, performance targets and indicators are defined, and key results for performance monitoring are selected and outlined in the results framework or a separate CIP map. During the execution phase, the focus shifts to setting up and implementing a system (people, tools, and process) to enable performance monitoring, including data collection processes/tools and people to manage the process, together with mechanisms for routine reviews and decision making. The system to monitor CIP performance, alongside key results, indicators, and targets are articulated in a [performance monitoring plan](#). The different processes for CIP performance monitoring are explained in the [Performance Review Process Guide](#).

**Activity 9A: Set up performance monitoring tools and process.** The designated person to oversee performance monitoring efforts (i.e., the monitoring and evaluation officer) works with the MOH focal point and project manager to set up performance monitoring tools to support in-country CIP performance monitoring efforts. Setting up the tools involves assigning indicators to key results in the results framework or CIP map that can be measured in short time frames. These indicators track progress in achieving key milestones on a more frequent basis, for

example, on a quarterly or semi-annual basis. All indicators chosen should be available at least annually. These key performance indicators, articulated in a priority results achievement chart, together with the key results and performance targets set in step 4 are inputs for the CIP performance monitoring tools. Tools available to support CIP data collection, management, and visualization include an Excel-based [Costed Implementation Plan Performance Dashboard](#) and a web-based CIP performance monitoring database with a built-in dashboard.

**Activity 9B: Regularly collect performance data.** The monitoring and evaluation officer coordinates data collection from different sources and enters them, or assigns members of the CIP Task Force to enter them, into the CIP dashboard or other data collection system on a regular schedule, such as on a quarterly or semi-annual basis. Data on key performance indicators are collected to assess progress in plan implementation and toward attaining key results.

**Activity 9C: Hold regular performance reviews.**

The monitoring and evaluation officer reviews and analyzes data on a regular basis and presents reports according to an agreed upon communication section of the performance monitoring plan. The dashboard tools, explained in activity 9A, provide automatically generated performance reports including charts and graphs. The MOH focal point and the monitoring and evaluation officer convene regular performance review meetings (on a quarterly or semi-annual basis), inviting key stakeholders to jointly review and discuss performance reports and address challenges in execution. Performance reporting can also be conducted during existing technical working group meetings. Performance reports are also communicated to senior government leadership on a regular basis through in-person meetings, presentations during MOH management meetings, or official memos.

“Nigeria’s national CIP was called the National Family Planning Blueprint. We hold strategy meetings every month with the government leaders on the family planning plan, we call it Blueprint technical meeting. We look at what is happening in the country, what is happening to the implementation of the Blueprint and where are issues and how do we mitigate if there are challenges? How do we move forward or if there is any new thing coming, how do we get more aligned into the more coordinated structure?”

Sada Danmusa  
Development Outcomes and Support  
Center, Nigeria  
[Family Planning Costed Implementation  
Plan Resource Kit: What We Heard](#)

**Activity 9D: Review and revise.** Throughout the entire process, the CIP is fine-tuned through dedicated periodic review and decision-making. In addition to periodic meetings (at least once quarterly or semi-annually) by the family planning technical working group to collaboratively address day-to-day challenges of activity implementation, an annual review and planning workshop is held to analyze progress, assess whether the priority objectives are adequately being addressed through the strategic activities, and make modifications as necessary to the plan to ensure that the country stays on track to meet or surpass its family planning goal.

**Activity 9E: Conduct a CIP end-line review.** During the last year of the CIP, an end-line review is conducted to pinpoint the programmatic and institutional successes and lessons learned to inform a new round of the CIP. Various methodologies have been used and a [guide for CIP stakeholders](#) is available with proposed methodology and examples of evaluation tools, agendas for stakeholder meetings, and outlines for end-line review reports.

## Step 9 Tools and Resources:

- [Monitoring Performance of Family Planning CIPs: Guidance for Establishing and Implementing Mechanisms to Track Progress Towards Results](#)
- [CIP Performance Dashboard, User Guide, and Video Series](#)
- [CIPs for Family Planning: Performance Review Process Guide](#)
- [Conducting a CIP End-Line Review: A Guide for CIP Stakeholders](#)

## Step 10: Conduct Continuous Resource Mobilization

While resource mobilization happens throughout Phase I and Phase II; it is key to ensuring implementation of the CIP during Phase III. Holding government entities, donors, and partners committed to implementing interventions and activities in the CIP is of utmost importance for CIP execution. While resource mobilization is context specific, [some successful approaches for mobilizing resources in different contexts](#) can be adapted for implementation throughout step 10.

**Activity 10A: Mobilize resources for the CIP:** During the situational analysis and costing stages of CIP development, the TST will have identified existing and potential sources of funding for the CIP at both the national and subnational levels. Findings from the assessment should have informed the development of the CIP. However, CIPs always have a financial gap and resources must be mobilized throughout the life of the CIP. Likewise, given the frequently changing local and global nature of family planning financing, the CIP Task Force needs to have strategies to ensure they can respond to changes. Rather than advocating for a large single funding package that covers all gaps in the plan, resource mobilization efforts should be focused on key results, articulated either in the results framework or a CIP map. The availability of resources should be discussed in the regular review meetings (activity 9C) and annual resource mobilization can be conducted during annual work planning processes (activity 8C).

**Activity 10B: Conduct family planning budget tracking.** Budget tracking assesses the government's and other stakeholders' contributions to family planning efforts, and informs resource mobilization efforts. Civil society partners should conduct government budget tracking at least once a year and budget advocacy on a continuous basis.

**Activity 10C: Regularly update the financial gap analysis:** Knowledge of CIP financing gaps informs resource mobilization. The [Family Planning CIP Costing Tool](#) can be used in step 5 to conduct a gap analysis exercise to determine the financial gap for contraceptive commodities and for activities per thematic area in the CIP. But since donors and partners rarely have budget projections for more than two years, the gap analysis exercise should be updated annually. The annual results of the gap analysis provide stakeholders with updated information on thematic areas that are over- or under-funded and the magnitude of the over or under funding, and provides donors with information on where resources can be shifted or additional resources that need to be allocated to support the government to achieve their strategic priorities.

**Activity 10D: Conduct ongoing advocacy.** Throughout CIP execution, advocacy efforts to foster an enabling environment, mobilize resources, and gain visibility are planned and coordinated among all partners and the government. This may include the development of key messages, presentations, and briefs disseminating the objective of the CIP strategic activity, funding gaps, and expected outcomes if the gap is closed.

**Step 10 Tools and Resources:**

- [Approaches for Mobilizing Resources for Family Planning Costed Implementation Plans: Examples of Success](#)
- [Family Planning CIP Costing Tool](#)
- [Family Planning CIP Costing Tool User Guide](#)

## Annex A. CIP Phases, Steps, Activities, and Tools

Phase	Cross-cutting themes	Step	Cross-cutting tools and resources
All	Stakeholder Engagement Country Ownership Capacity Development Advocacy	All	<i>The 10-Step Process for CIP Planning, Development, and Execution</i> <i>CIP Factsheet</i> <i>Stakeholder Engagement for Family Planning CIPs: A Four-Step Action Framework to Meaningfully Engage Stakeholders in the CIP Process</i> <i>Team Roles and Responsibilities for CIP Development and Execution</i> <i>Rights-Sizing Family Planning: A Toolkit for Designing Programs to Respect, Protect, and Fulfill the Rights of Girls and Women</i>

Phase	Phase Description	Step	Activity	Tools and Resources
Phase 1: Plan	<p>This is the planning and set-up phase for CIP development and implementation. It establishes the rationale for CIP development and seeks to secure government and stakeholder buy-in. If governments desire technical assistance for plan development, a formal request is made and approved by a development partner such as USAID, UNFPA, or the Bill &amp; Melinda Gates Foundation. Also in the planning phase, the CIP development process, approach, tools, and techniques are defined (i.e., how, by whom, and by when) and resources for CIP development are secured.</p> <p>A kick-off meeting with key stakeholders marks the completion of the planning phase and the onset of the development phase.</p>	Step 1: Obtain Buy-in and Secure Resources for CIP Development	Activity 1A: Arrive at decision to engage in the CIP process	<p><i>Deciding to Develop a Costed Implementation Plans: Six Considerations to Inform Country Decision-Making</i></p> <p><i>Making the Case for a CIP</i></p> <p><i>Communicating with Multisectoral Stakeholders about Costed Implementation Plans</i></p>
			Activity 1B: Establish a CIP Task Force	
			Activity 1C: Secure financial and human resources for CIP development	
			Activity 1D: Make a formal request for CIP support	
		Step 2: Prepare for CIP Development	Activity 2A: Form a CIP Technical Support Team	<p><i>Illustrative CIP Process Timeline</i></p>
			Activity 2B: Define the CIP development process and timeline	
			Activity 2C: Identify key family planning stakeholders	
			Activity 2D: Kick-off the CIP development process	

Phase	Phase Description	Step	Activity	Tools and Resources
<p>Phase 2: Develop</p>	<p>This phase involves defining the goal for the CIP and establishing the results framework of outcomes and outputs that will contribute to this goal. Priority issues, interventions, and activities that drive the results framework will be clarified holistically in the implementation plan, and strategic priorities are summarized in a CIP map. As programmatic activity targets are set, cost estimates are generated. Phase II also includes identifying institutional arrangements for implementation, developing a performance monitoring plan, and continuing advocacy to maintain support for coordinated CIP implementation.</p> <p>This phase is complete when the CIP is launched at a formal event.</p>	<p>Step 3: Conduct a Situational Analysis</p>	<p>Activity 3A: Gather information on the current family planning context, programs, and resources</p>	<p><i>Guidance for Developing a Technical Strategy for Family Planning CIPs</i></p>
			<p>Activity 3B: Conduct information review, synthesis, and analysis</p>	
			<p>Activity 3C: Prioritize issues and analyze root causes</p>	
		<p>Step 4: Formulate a Technical Strategy and Implementation Plan</p>	<p>Activity 4A: Set or refine the family planning goal</p>	
			<p>Activity 4B: Define results and prioritize outcomes and interventions</p>	
			<p>Activity 4C: Validate the results chain and strategic priorities</p>	
			<p>Activity 4D: Select indicators and estimate targets</p>	
			<p>Activity 4E: Develop implementation plan with activities and sub-activities</p>	
			<p>Activity 4F: Refine and validate technical strategy</p>	
			<p>Activity 4 (optional): Align with the subnational level</p>	
<p>Activity 4H (optional): Estimate impact</p>				

Phase	Phase Description	Step	Activity	Tools and Resources
Phase 2: Develop	(see above)	Step 5: Estimate Costs and Resource Gap and Iterate Technical Strategy	Activity 5A: Estimate common unit costs	<i>Family Planning CIP Costing Tool and User Guide</i>  <i>Guidance for Developing a Technical Strategy for Family Planning CIPs (Annex 15)</i>
			Activity 5B: Input quantity of units required to achieve plan objectives	
			Activity 5C: Review and validate cost estimates	
			Activity 5D: Conduct CIP financial gap analysis	
			Activity 5E: Realign technical strategy to ensure reasonable cost	
			Activity 5F: Revise and validate final cost and resource gap	
		Step 6: Finalize Institutional Arrangements for Execution	Activity 6A: Define a stewardship and accountability structure	<i>Stewardship for CIP Execution: Considerations for CIP Stakeholders</i>  <i>Team Roles and Responsibilities for CIP Development and Execution</i>
			Activity 6B: Define coordination mechanisms	
			Activity 6C: Identify capacity development and implementation support needs	
		Step 7: Secure Final Approval and Launch the CIP	Activity 7A: Review and approve the CIP	—
			Activity 7B: Develop a dissemination plan and materials	
			Activity 7C: Produce and print the final document	
			Activity 7D: Hold a launch event and dissemination activities	

Phase	Phase Description	Step	Activity	Tools and Resources
Phase 3: Execute	<p>In this phase, the CIP is executed, monitored, and managed. This phase also involves ensuring sustained commitment from leaders and stakeholders at all levels who are responsible for leading and managing plan implementation, resource mobilization, and advocacy. A performance monitoring mechanism is implemented to assess progress toward goals.</p> <p>Because the CIP is a living document subject to periodic review and revision based on results and changes in the environment, this phase is complete when the period of performance for the CIP ends.</p>	Step 8: Provide Effective Stewardship for CIP Execution	Activity 8A: Implement effective and efficient coordination mechanisms	<p><i>Four Key Elements for Execution of Family Planning CIPs</i></p> <p><i>Stewardship for CIP Execution: Considerations for CIP Stakeholders</i></p> <p><i>CIP Execution Country Assessment Checklist</i></p>
			Activity 8B: Lead and manage the execution process	
			Activity 8C: Integrate CIP into existing annual work planning, or if necessary, develop annual joint workplans	
			Activity 8D: Engage at the subnational level to facilitate the execution of the CIP	
		Step 9: Design and Implement Performance Monitoring Mechanisms	Activity 9A: Set up performance monitoring tools and process	<p><i>Monitoring Performance of Family Planning CIPs: Guidance for Establishing and Implementing Mechanisms to Track Progress Towards Results</i></p> <p><i>CIP Performance Dashboard, User Guide, and Video Series</i></p> <p><i>CIPs for Family Planning: Performance Review Process Guide</i></p> <p><i>Conducting a CIP End-Line Review</i></p>
			Activity 9B: Regularly collect performance data	
			Activity 9C: Hold regular performance reviews	
			Activity 9D: Review and revise	
			Activity 9E: Conduct a CIP end-line review	

Phase	Phase Description	Step	Activity	Tools and Resources
Phase 3: Execute	(see above)	Step 10: Conduct Continuous Resource Mobilization	Activity 10A: Mobilize resources for the CIP	<i>Approaches for Mobilizing Resources for Family Planning Costed Implementation Plans: Examples of Success</i>  <i>Family Planning CIP Costing Tool and User Guide</i>
			Activity 10B: Conduct family planning budget tracking	
			Activity 10C: Regularly update the financial gap analysis	
			Activity 10D: Conduct ongoing advocacy	

## Annex B. Additional Resources

This table lists additional resources and tools that may be useful during the CIP development process. These resources are additive to the CIP Resource Kit and are organized by the three phases of the CIP process, along with a cross-cutting section that lists resources that may be used across the three phases.

### Cross-cutting Tools

Tool	Steps	Description
<a href="#">Smart Advocacy Toolkit</a>	All	These SMART advocacy resources provide a compendium of best practices and tools to refine a strategic vision, identify and motivate key players, take action, manage and overcome setbacks, and monitor and evaluate success. Used together, they provide a comprehensive roadmap to develop, implement, and evaluate a focused advocacy strategy from start to finish.
<a href="#">Meaningful Youth Engagement and Partnership in Sexual and Reproductive Health Programming: A Strategic Planning Guide</a>	All	This Strategic Planning Guide is intended to lead program managers, planners, and decisionmakers through a strategic process to meaningfully and effectively engage and partner with adolescents, youth, and/or youth-led organizations on sexual and reproductive health programs and initiatives. Meaningful adolescent and youth engagement and partnership is defined as an “inclusive, intentional, mutually-respectful partnership between adolescents, youth, and adults, whereby power is shared, respective contributions are valued, and young people’s ideas, perspectives, skills, and strengths are integrated into the design and delivery of programs, strategies, policies, funding mechanisms, and organizations that affect their lives and their communities, countries, and the world.” Meaningful adolescent and youth engagement and partnership is a right for adolescents and youth and can improve the quality and responsiveness of sexual and reproductive health programs and policies, in turn leading to improved development outcomes.
<a href="#">FP2020 Rights and Empowerment Principles</a>	All	Created by the FP2020 Rights and Empowerment Working Group, this resource outlines a common understanding of rights principles as they relate to 10 dimensions of family planning.

### Phase 1 Tools

Tool	Steps	Description
<a href="#">Policy Checklist: Essential Elements for Successful Family Planning Policies</a>	Step 1	This checklist, developed by the USAID-funded Health Policy Project, draws from lessons learned and best practices moving from policy to action. It is meant to provide guidance to stakeholders on how to contribute to a policy environment that supports countries to fulfill their FP2020 (now FP2030) commitments. The tool allows users to compare current policies with the best practices discussed in this document, to assess whether current policies need to be revised or better implemented, and whether new policies should be developed.
<a href="#">Aligning Strategic Documents to Foster a Common Vision for Family Planning</a>	Steps 1 and 2	Health Policy Plus recently conducted a review of several countries' CIPs and Global Financing Facility (GFF) GFF RMNCAH-N investment cases to examine how family planning priorities were reflected in each and interviewed stakeholders to understand how they were involved in the GFF process. This document reflects the findings from the review and shares recommendations for key actions on how to best harmonize priorities for family planning across and in the development of both the GFF investment case and CIP.

### Phase 2 Tools

Tool	Steps	Description
<a href="#">FP Goals</a> and <a href="#">FP Goals Lite</a>	Steps 3 and 4	FP Goals is an innovative model designed to improve strategic planning. The FP Goals model combines demographic data, family planning program information, and evidence of the effectiveness of diverse interventions to help decisionmakers set realistic goals and prioritize investments across different family planning interventions. The full FP Goals model is not currently publicly available, but the interactive FP Goals Lite model can demonstrate how initiating or scaling up different interventions might affect a country's modern contraceptive prevalence rate among all women of reproductive age. This tool is meant to provide a quick glance at results based on select interventions. It does not replace the more robust results you would get from a full application of FP Goals. If you are interested in a full FP Goals model application for your country, contact Track20. Learn more about Track20 models and approaches at <a href="http://www.track20.org">http://www.track20.org</a> .

Tool	Steps	Description
<a href="#">The Supply-Enabling Environment-Demand (SEED) Assessment Guide for Family Planning</a>	Step 3	This guide can be used to help program managers and staff determine strengths and weaknesses in family planning programs. It identifies programmatic gaps that require further investment or more in-depth assessment prior to (re)designing programmatic interventions. It is grounded in EngenderHealth’s SEED Programming Model, a holistic programming framework based on the principle that sexual and reproductive health programs will be more successful, sustainable, and accountable to the communities they serve if they comprehensively address the three interdependent and mutually supportive components of sexual and reproductive health programs: supply, the enabling environment, and demand.
<a href="#">The WHO Health Systems Framework</a>	Steps 3, 4	A conceptual framework for health systems strengthening that is not family planning-specific but helpful framing for essential health system building blocks and overall goals and outcomes of a health system.
<a href="#">Comprehensive Human Rights-Based Voluntary Family Planning Framework</a>	Steps 3, 4	A framework to aid understanding the components of rights-based family planning. An accompanying program assessment and planning tool provides practical guidance for assessing family planning programs through a human rights lens. Such an assessment serves as a foundation for designing or improving client-centered family planning programs that apply human rights standards and principles at all levels of the healthcare system.
<a href="#">Approach for Diagnosing Inequity in Family Planning Programs</a>	Step 3	Methodology to diagnose inequity in family planning programs (1) for a diverse range of disadvantaged subgroups, (2) for various programmatic components of family planning, and (3) at national and subnational levels. Replicable across countries through Health Policy Plus’s open source code, the approach enables users to easily transform demographic and health survey data to develop evidence for policy, financing, and programmatic decisions at national and subnational levels. This tool requires that users have <a href="#">downloaded and installed R</a> , a free software environment for statistical computing and graphics.
<a href="#">Family Planning Market Analyzer</a>	Steps 3 and 4	The Family Planning Market Analyzer combines data from Demographic and Health Surveys and FP2020’s projections of modern contraceptive prevalence rate (mCPR) to allow users to explore potential scenarios for a total market approach (TMA). The tool can be used to inform TMA discussions by providing key results linked to probing questions—for example, if the private sector doubled its role in implant provision, how many more services would need to be provided?

Tool	Steps	Description
<a href="#">Strategic Pathway to Reproductive Health Commodity Security (SPARHCS): A Tool for Assessment, Planning, and Implementation</a>	Steps 3 and 4	The Strategic Pathway to Reproductive Health Commodity Security (SPARHCS) is a tool to help a country identify and prioritize key commodity security issues; assess current capacity for commodity security among country or regional programs, systems, and policies; and shape commodity security strategic plans. SPARHCS identifies relatively strong and weak elements of a family planning program in multiple areas: capital, coordination, capacity, commitment, and context. SPARHCS has three models that can be adapted to local settings and implemented over periods from 3 to 18 months.
<a href="#">Proposed Indicators to Measure Adherence to and Effects of Rights-Based Family Planning</a>	Steps 3 and 4	A mapping of potential rights indicators or areas of measurement of human rights and family planning based on recommendations from global stakeholders. This resource includes a table listing each proposed indicator or measurement, which of the 13 rights or rights principles the metric measures, the source of the metric, and under what thematic area it could be found in a family planning CIP.
<a href="#">Ensuring Human Rights in the Provision of Contraceptive Information and Services: Guidance and Recommendations</a>	Steps 3 and 4	These WHO guidelines provide recommendations for programs as to how they can ensure that human rights are respected, protected, and fulfilled, while services are scaled up to reduce unmet need for contraception. Both health data and international human rights laws and treaties were incorporated into the guidance. This guidance is complementary to existing WHO recommendations for sexual and reproductive health programs, including guidance on family planning, maternal and newborn health, safe abortion, and core competencies for primary healthcare.
<a href="#">Family Planning High Impact Practice Briefs and Strategic Planning Guides</a>	Step 4	High Impact Practice (HIP) briefs are designed to develop consensus around what works in family planning. The HIPs describe family planning practices that have demonstrated impact, are applicable across settings, and are scalable, sustainable, and cost-effective. HIPs are classified as either service delivery, enabling environment, social and behavior change, or HIP enhancements. Service delivery and social and behavior change HIPs are further categorized according to the strength of the evidence base for each practice—proven or promising.  Planning guides are intended to lead program managers, planners, and decisionmakers through a strategic process to identify the most effective and efficient investments to address the challenge or focus of their program. Guides are developed by technical experts and are intended to help planners identify which HIP or practice might work in a specific context. A guide that may be of particular relevance is <a href="#">Creating Equitable Access to High-Quality Family Planning Information and Services: A Strategic Planning Guide</a> .

Tool	Steps	Description
<a href="#">K4Health Toolkits for Family Planning</a>	Step 4	This collection of toolkits provides quick and easy access to relevant and reliable information on various family planning topics. The resources in the toolkits are selected by experts and arranged for practical use. Toolkits of particular relevance include the <a href="#">Community-Based Access to Injectables Toolkit</a> , the <a href="#">Healthy Timing and Spacing of Pregnancy Toolkit</a> , the <a href="#">Postpartum Family Planning Toolkit</a> , and the <a href="#">Family Planning and Immunization Integration Toolkit</a> .
<a href="#">Reality Check</a>	Steps 4 and 5	This tool helps users plan based on informed estimates of contraceptive need by examining the relationship between widely available demographic data (contraceptive prevalence and population) and numbers of family planning users, adopters, and commodities and caseload. It can be used for advocacy—helping users set realistic family planning goals by illustrating the resources required as well as the potential impact (e.g., averted unintended pregnancies, induced abortions, and maternal, infant, and child deaths) of realizing these goals. The tool requires minimal data inputs and can be used at the national and subnational levels of the health system. Reality Check is best used as a strategic planning and advocacy tool; donors, program managers, and planners can use the tool to set evidence-based family planning goals, estimate the potential impact of realizing these goals (e.g., averted unintended pregnancies, induced abortions, and maternal, infant, and child deaths) and anticipate the inputs necessary to reach them.
FamPlan: <a href="#">Web-Based Tool</a> and <a href="#">Desktop Tool</a>	Steps 4 and 5	FamPlan projects family planning requirements needed to reach national goals for addressing unmet need or achieving desired fertility. It can be used to set realistic goals, to plan for the service expansion required to meet program objectives, and to evaluate alternative methods of achieving goals. The program uses assumptions about the proximate determinants of fertility and the characteristics of the family planning program (method mix, source mix, discontinuation rates) to calculate the cost and the number of users and acceptors of different methods by source. FamPlan is available as a web-based or desktop application.

Tool	Steps	Description
<a href="#">Family Planning Estimation Tool (FPET)</a> and <a href="#">FPET Training Module</a>	Step 4	<p>The Family Planning Estimation Tool (FPET) was designed to produce annual estimates of mCPR, CPR, unmet need, and demand satisfied by modern methods using statistical modelling that incorporates all available data. FPET is unique in that it considers survey data, service statistics (where determined to be of adequate quality), and regional and global historical patterns of change to produce annual estimates beyond the last survey and into the future.</p> <p>The model was adapted from one used by the United Nations Population Division for estimating family planning trends for all countries in the world. The FPET model is an online tool that can be run for one country at a time and allows users to input their own data.</p> <p>The online FPET Training Module includes presentations, exercises, and handouts to help you get the most out of FPET.</p>
<a href="#">CastCost</a>	Steps 4 and 5	<p>The Contraceptive Forecast and Cost Estimate (CastCost) Excel spreadsheet is used to estimate the quantity and cost of contraceptives needed in a country for five years. These estimates are based on data from the country's Reproductive Health Survey or Demographic and Health Survey. CastCost can provide estimates of contraceptive needs for the country as a whole, for the public or private sector alone, or for individual service provider organizations. Although CastCost provides an estimate of the quantity of contraceptives needed and their cost, the decision of exactly what quantities of contraceptives to procure should be based primarily on logistics (usage) data. CastCost estimates can be helpful in validating the quantities suggested by a logistics-based forecast. CastCost can also be used to test different scenarios, such as projecting the cost if injectable contraceptives were to increase substantially in the next five years or the differences in cost of a particular contraceptive if it is procured from different sources, or to see the financial implications of different method mixes.</p>
<a href="#">Family Planning and Reproductive Health Indicators Database</a>	Step 4	<p>The Family Planning and Reproductive Health Indicators Database provides a comprehensive listing of the most widely used indicators for evaluating family planning and reproductive health programs in low- and middle-income country contexts. The database contains definitions, data requirements, data sources, purposes, and issues for core indicators along with links to other websites and documents containing additional family planning and reproductive health indicators.</p>

Tool	Steps	Description
<a href="#">ImpactNow</a>	Steps 4 and 5	<p>ImpactNow is an Excel-based model that estimates the health and economic impacts of family planning in the near term. It is designed to model the impacts of different policy scenarios and to compare the results of those scenarios in advocacy materials. It is designed to estimate the impacts of many "what if" questions about policy options in the two- to seven-year time horizon; for example, it could be used to estimate the impacts of meeting FP2030 commitments. The outcomes are focused on reproductive health metrics, as well as economic metrics, such as cost-benefit ratios and incremental cost-effectiveness ratios.</p> <p>ImpactNow was adapted from Marie Stopes International's Impact 2 in collaboration with the Health Policy Project, with support from USAID. The USAID-funded Health Policy Project authored the users' manual to help health analysts apply the ImpactNow model to estimate the health and economic impacts of family planning programs at national and subnational levels.</p>
<a href="#">OneHealth</a>	Steps 4 and 5	<p>OneHealth is designed to strengthen the development of national strategic health plans by facilitating health system analysis, costing, and financing scenarios. Its primary purpose is to assess public health investment needs in low- and middle-income countries. OneHealth offers planners a single framework for planning, costing, impact analysis, and budgeting and financing of strategies for all major diseases and health system components. It includes modules to support planning and costing components for the supply side of health systems (human resources, infrastructure, and logistics) and includes financial space analysis and health impact prediction.</p>
<a href="#">Are Resources Fulfilling Priorities for Family Planning? An Analysis of Allocations for Tanzania's Costed Implementation Plan</a>	Step 5	<p>This brief presents a case study of a gap analysis for Tanzania's second national family planning CIP for 2019–2023. Health Policy Plus conducted three gap analyses for each of the first three years of the plan using the <a href="#">Family Planning CIP Costing Tool</a>. These annual gap analyses specifically assessed (a) the extent to which CIP results and activities are adequately funded, underfunded, or over-funded, (b) the extent to which CIP activities for a given year are included in funded stakeholder workplans, and (c) geographic coverage of funded activities. Findings of the gap analysis, as well as recommendations, were shared and discussed during semiannual family planning implementer meetings.</p>

### Phase 3 Tools

Tool	Steps	Description
<a href="#">How-To Guide: Integrating Family Planning Interventions into District Implementation Plans in Malawi</a>	Step 8	<p>This guide outlines the approach used by Health Policy Plus in Malawi to facilitate CIP implementation at the district level by supporting the integration of priority CIP activities into district implementation plans. This guide was created with the intention of enabling others to replicate and refine it beyond the life of the project. The guide includes detailed information about the intervention process as well as lessons learned and tips for those seeking to adapt and/or replicate the intervention in the future.</p>
<a href="#">Monitoring Human Rights in Contraceptive Services and Programs</a>	Step 9	<p>This tool is intended for use by countries to assist with strengthening human rights efforts in contraceptive programming. The tool uses existing commonly used indicators to highlight areas where human rights have been promoted, neglected, or violated in contraceptive programming; gaps in programming and in data collection; and opportunities for action within the health sector and beyond, including opportunities for partnership initiatives.</p>
<a href="#">Family Planning Financing Roadmap</a>	Step 10	<p>The Family Planning Financing Roadmap is an online resource to help identify a sustainable pathway to achieve family planning goals through integrating family planning in health financing schemes and improving allocation and efficiency. The website allows family planning stakeholders to learn more about health financing concepts and how they relate to family planning and understand options for financing family planning given a particular country's context. The learning materials section—which includes introductory briefs, a glossary, and links to country-specific resources—provides users, who have limited time and health financing expertise, with a high-level introduction to health financing concepts and terms. The interactive roadmap identifies relevant family planning financing options based on a country's context and is available in English and French.</p>