



FAMILY PLANNING & POSTABORTION CARE IN EMERGENCIES IN NIGER

Chronic vulnerabilities in Niger related to food insecurity, malnutrition, epidemics and floods are being compounded by local conflict caused by non-state armed groups. Currently, 2.3 million people, almost half of whom are children, are in need of humanitarian assistance.¹ Of these, about 580,000 are women of reproductive age including 85,000 who are pregnant.¹ In Niger, the total fertility rate is 7.1 births per woman, and the lifetime risk of maternal death is one in 23.^{2,3} Access to family planning is limited, with only 18% of women using modern contraceptive methods.³

Save the Children's programs are responsive to protracted and acute emergencies. In 2017, we began support to five health centers, with two added in January 2019, in two districts to improve access to quality family planning and postabortion care (PAC) services in conflicted areas of the Diffa Region in Niger.

Our program has reached nearly 34,000 new family planning users between January 2017 and June 2019, with oral contraceptive pills and injectables being the most commonly used methods. Seven percent of new users have chosen a long-acting reversible contraceptive method. Not only are these methods more effective, they are often a good choice in humanitarian settings where supply chains may be disrupted. Through June 2019, 591 women have received PAC services. Of these PAC clients more than 90% were treated using WHO-recommended treatment methods (manual vacuum aspiration or misoprostol).

The number of new monthly family planning clients has more than doubled since the beginning of 2019



Niger Program Overview	Jan 2017-June 2019
Location	Diffa Region
Number of facilities	7
New family planning clients	33,988
PAC services delivered	591

1. UNFPA. 2016. *Niger Humanitarian Emergency*.
 2. World Bank. 2018.
 3. UNFPA. 2018. *World Population Dashboard Niger*.



Issa is a nurse at a Save the Children-supported facility in Niger. Our programs train providers, like Issa, to counsel clients on the full range of family planning methods and provide quality services.

Program Spotlight: Shifting Provider Attitudes

Provider attitudes have a significant impact on the quality of family planning and PAC services. Save the Children has conducted two values clarification and action transformation (VCAT) workshops for Ministry of Health partners and our own staff. At the end of both workshops, many participants shared that the exercises and discussions helped them to examine, and positively shift, some of their attitudes related to family planning and PAC over this very short period of time. The project is now incorporating VCAT exercises into provider trainings and partner and staff meetings.

Maintaining Trained Health Workforce in Highly Insecure Context

Due to the insecurity and a difficult work environment, health worker turnover is extremely high in Niger. To address this challenge, Save the Children places and supports three midwives in health facilities and, in collaboration with the Zinder Training Center, frequently conducts family planning and PAC competency-based training that is followed by intensive supportive supervision and coaching using checklists and tools on tablets. The tablet dashboard assists the supervisor in prioritizing who to supervise and in what topics. These approaches help ensure staff are trained and motivated to continue providing services in a challenging environment.

PROGRAM COMPONENTS

Service Delivery

Provide high quality family planning and PAC services

Improve health facility structure

Capacity Building

Train the trainers

Implement competency-based training

Conduct supportive supervision

Supply Chain Management

Provide family planning and PAC commodities and supplies

Expand contraceptive method mix

Develop linkages with existing Ministry of Health supply chain

Data for Decision Making

Analyze data at community and health facility levels to improve programs

Community Mobilization

Strengthen community structures and groups

Tailor and deliver key messages to diverse audiences to increase demand (e.g. women, men, youth, couples, and decision makers)

Partnerships and Advocacy

Partner with Ministry of Health

Collaborate with Ipas on training

Task-shift for provision of family planning and PAC services

Improve clinical training curriculum