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RENEWING COMMITMENT TO THE FAMILY PLANNING PROGRAM 02 February 2019 Kabul, Afghanistan











European Union

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LIST OF ACRONYMS

Contraceptive Prevalence Rate	(CPR)
Costed Implementation Plan	(CIP)
Family Planning	(FP)
Helping Mothers and Children Thrive	(HEMAYAT)
Management Sciences for Health	(MSH)
Masters of Public Health	(MPH)
Ministry of Haj and Religious Affairs	(MOHRA)
Ministry of Education	(MoEd)
Minstry of Higher Education	(MOED)
Ministry of Economy	(MoEC)
Ministry of Finance	(MoF)
Ministry of Rural Rehabilitation and Development	(MRRD)
Modern Contraceptive Prevalence Rate	(mCPR)
Non-Governmental Organizations	(NGOs)
Reproductive, Maternal, Newborn, Child and Adolescent Health	(RMNCAH)
Social and Behavior Change Communication Strategy	(SBCC)
Sustainable Development Goals	(SDGs)
Total Fertility Rate	(TFR)
United Nations	(UN)
United Nations Population Fund	(UNFPA)
United States Agency for International Development	(USAID)
Voice of America	(VoA)
World Health Organization	(WHO)



BACKGROUND

Afghanistan's population, estimated at 29.2 million in 2017, with an annual growth rate of 2.03 percent, is among the fastest growing in the world. Afghanistan also has one of the highest Total Fertility Rates (TFR) in the world at 5.3 children per women (AfDHS, 2015). At that rate, the Afghan population is expected to double in 24 years. Due to the relatively high fertility, nearly half of Afghanistan's population (47 percent) is under the age of 15 and 16 percent is under five years.

Afghanistan's health sector has made remarkable progress over the last decade. This has translated into a decline in maternal mortality (661 deaths per 100,000 women in 2015 compared to 1,600 deaths per 100,000 women in 2002). Between 2003 and 2010, the promotion, delivery and utilization of Family Planning (FP) in Afghanistan improved, with the use of modern contraceptive methods increasing from 10 percent to 20 percent. However, the 2015 AfDHS indicates that the modern contraceptive prevalence rate (mCPR) has since remained static at 20 percent over the last eight years. Overall, 25 percent of currently married women have an unmet need for family planning.

Family planning is one of the key public health priorities identified in the National Health Policy and Strategy and Presidential Health Summit of 2017. The summit highlighted the low level of family planning use as a threat to maternal and child health, household incomes and national economic development.

The Ministry of Public Health (MoPH) of the Government of the Islamic Republic of Afghanistan has developed its Reproductive, Maternal, Newborn and Child Health (RMNCAH) Strategy, within which family planning has been integrated. As part of its FP 2020 targets, the MoPH is committed to increasing the Contraceptive Prevalence Rate (CPR) by 30 percent and reducing the unmet need for family planning by 10 percent.

In order to mobilize and rally the political commitment and leadership of government as well as coordinate with all partners, the Government of Afghanistan in collaboration with the United Nations Population Fund (UNFPA), World Health Organization (WHO), United States Agency for International Development (USAID) and other stakeholders organized a one-day national summit on family planning in Kabul on 2 February 2019.

The summit highlighted high-impact commitments, interventions and presentations on family planning from world-renowned leaders (especially champions from the Muslim world) and civil society leaders that showcased proven innovative solutions that have demonstrated success in diverse and dynamic contexts similar and relevant to Afghanistan.

OBJECTIVES

The overall objective of the National FP Summit was to mobilize and rally the political commitment and leadership of government and coordinate with all partners to enable focused investments to increase access to scaled-up quality family planning services in Afghanistan.

Specific Objectives:

- To mobilize and rally the political commitment and leadership of government for family planning, reposition family planning as a tool for national development and link it to achieving the Sustainable Development Goals (SDGs).
- Broaden and deepen networks of development partners, civil society, religious leaders, non-governmental organizations (NGOs) and the media; strengthen and build new strategic alliances and partnerships to bring local actions and solutions to scale and move the family planning agenda forward.
- To share experiences, lessons learned and good practices in promoting family planning based on examples from similar sociocultural contexts such as Muslim countries.
- To encourage cross-sectorial cooperation for improving the quality and coverage of family planning information and services.
- To ensure that family planning is more integrated into humanitarian response interventions.





The summit was expected to deliver the following major outputs:

- Enhanced awareness and renewed commitment of all relevant government ministries and departments, donor agencies, United Nations (UN) agencies, development partner agencies and other national and international organizations to support increased access to scaled-up quality family planning services in Afghanistan.
- The Government of Afghanistan, through the support of its development partners, to accelerate progress toward FP 2020 and the Global Strategy for Women's, Children's and Adolescents' Health (2016-2030) commitments and improve multi-sectorial coordination in this regard.
- Government, donors and development partners to enable focused investments to increase access to human rights-based quality family planning services in Afghanistan.

PARTICIPANTS

The event was jointly organized by the MOPH, UNFPA, WHO and the USAID-funded Helping Mothers and Children Thrive (HEMAYAT) Project and was attended by leaders from government and NGOs. The summit brought together relevant government ministries, donor and UN agencies, civil society, media, national and international NGOs and religious leaders. It drew more than 200 participants including high-ranking government authorities and other development partners.

SPEAKERS

Minister of Public Health

His Excellency Dr. Ferozuddin Feroz, the Minister of Public Health, highlighted a number of key indicators for family planning such as population growth, the fertility rate, proportion of the population below 15 years of age, changing trends in life expectancy and related challenges. Furthermore, Dr. Feroz stated that the prevalence of FP methods has increased from 10 percent (2003) to 20 percent (2010) but has since been stuck at 20 percent. The MoPH goal is to increase the prevalence rate to 30 percent. Dr. Feroz also indicated that "there is a need for further support from our international partners in order to promote a healthy generation."

"We do not want to stop births. We would like to encourage intervals between births (birth spacing) – this will automatically decrease maternal and child mortality. All families must use modern family planning methods in order to guarantee that the new generation of Afghanistan will be healthier." – Dr. Ferozuddin Feroz, Minister of Public Health.

First Lady of Afghanistan

The message from Her Excellency Bibi Gul Rula Ghani, the First Lady of Afghanistan, was delivered through a video recording. She emphasized the importance of birth spacing, breastfeeding for two or more years and mother and child health in line with Quran e Karim and Hadis.

"According to the Quran e Karim and the sayings of Prophet Mohammad Peace Be Upon Him, there should be at least two years of birth spacing between children to allow for breastfeeding. The two-year gap is very important for the health of the mother and child." – Her Excellency Bibi Gul Rula Ghani.



UNFPA Representative

Dr. Bannet Ndyanabangi, the Representative of the United Nations Population Fund (UNFPA) in Afghanistan, stated that the Family Planning Summit was part of a larger effort to improve women's and children's health. "It's about every woman, every child. It's about accelerating social and economic progress and it's about a new path to sustainable development." He focused on the role of family planning in saving the lives of women and children, empowering people, strengthening health systems, reducing poverty and contributing to the economic development of families, communities and nations.



Dr. Ndyanabangi said that the summit was a unique opportunity for enhancing awareness and renewing the commitment of the Government of Afghanistan to family planning as well as creating a strategic network of resources to support family planning in Afghanistan. He affirmed that the deliberations of the summit and exchange of ideas would help improve the lives of the people of Afghanistan.

Furthermore, he declared: "Now is a critical time to support the family planning program; commitments need to turn from words into action. We need to focus our efforts on the underserved, the poorest of the poor. To meet the demand for family planning, we must galvanize greater political and financial support. We must hold governments accountable for their commitments and champion innovation and access. Investing in voluntary family planning today will not only pay dividends now, but will also help history's largest generation of young people enjoy opportunities and forge a brighter future. Governments have the primary responsibility for protecting their citizens' reproductive rights. But donor governments also have a responsibility to help uphold these rights."

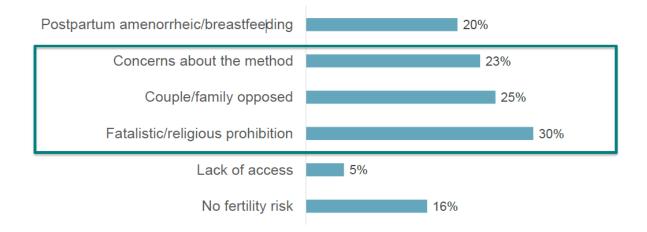
"Universal access to voluntary family planning services can reduce maternal deaths by as much as three quarters and infant deaths by a fifth. Investing in family planning is part of a larger effort to improve women's education, employment and socio-economic progress. It's about a new path to sustainable development." - Dr. Bannet Ndyanabangi, UNFPA Afghanistan Country Representative.

KEYNOTE SPEECHES

The Status of Family Planning in Afghanistan - by the RMNCAH Director

Dr. Zelaikha Anwari, the RMCAH Director at the MoPH gave a presentation on the current status of family planning in Afghanistan. She focused on population growth, TFR, mCPR, the unmet need for FP, the percentage of women who do not want any more children/who want sterilization, percentage of women who want another child after two or more years and the total demand for FP services.

Dr. Anwari said that "only 23 percent of married women aged 15-49 are using a FP method. The CPR is highest in the provinces of Herat, Kapisa, Nimroz and Paktika while the unmet need for FP services is highest in Badakhshan, Daikundi and Ghor." She highlighted the main reasons why people are not using FP services to include the following:



Dr. Anwari noted that CPR has increased from 10 percent (2003) to 20 percent (2010). Different surveys over the past two decades show fluctuations in the trends of CPR, although it has remained unchanged since 2010. She expressed concern about the stagnant CPR. She stated that the CPR will increase if the government can address the unmet need for FP services. Both the public and private sectors (at 47 percent each) are equally involved in the provision of FP services, but current progress towards the national FP goal (30 percent in 2020) is not satisfactory because the current rate will only lead to 23 percent.

She remarked that "CPR and maternal mortality are correlated. The higher the CPR, the lower the maternal mortality. For example, the CPR in Iran is 77.4 percent and maternal mortality is 24/100,000 live births while in Afghanistan, CPR is 20 percent and maternal mortality is 661/100,000 live births."

Dr. Anwari mentioned the development of national documents such as the Family Planning Costed Implementation Plan 2018-2022, Family Planning Socio-Behaviour Change Communication Strategic Plan 2019-2023, mechanism for public private partnership for provision of FP services, national FP service delivery guidelines, SOPs, job aids and training packages, expansion of services, evidence-based decision-making and government budget allocation for procurement of contraceptives as some of the key actions taken to meet FP needs.



"Family planning is not just a health issue – it is also about education, economics, human rights and protection. It therefore needs a multi-sectoral approach." – Dr. Zelaikha Anwari, Director of RMNCAH at the MoPH.

Cost-Benefit Analysis of Family Planning – by a UNFPA International Expert

Dr. Anderson E. Stanciole's presentation focused on the following points:

- The Return on Investment in Family Planning in Afghanistan
- Investments in Family Planning and the Demographic Dividend:

A Path to Sustainable Development

On the importance of investing in FP, Dr. Stanciole said that "family planning is one of the most cost-effective investments a country can make; it leads to more educated communities, a healthier population and wealthier nations. In addition, it saves lives, saves money and empowers societies."

Dr. Stanciole noted that mCPR remained static – at around 20 percent – from 2010 to 2015 and the unmet need for family planning was at 25 percent, which means that an estimated 1 million people were using modern family planning methods in 2015, of whom 175,000 were using long-acting or permanent methods. He added that "while Afghanistan has been making good progress in addressing maternal mortality, it is unlikely to reach the SDG target with the current rate before 2038."

According to Dr. Stanciole, increasing the mCPR to 30 percent by 2030 would increase the number of users of modern family planning methods to 2.4 million in total, with a corresponding increase in costs. He added that "in 2019, providing family planning services (which includes the cost of consultations, contraceptive commodities and removals where applicable) to around 1 million users is expected to cost the Government of Afghanistan USD 3.2 million."

He stated that it was estimated that a total investment of USD 52 million between 2019 and 2030 would yield USDS 238 million in direct health care savings, which means that there would be a 3.5-dollar return-on-investment for each dollar invested. Furthermore, net savings (avoided health care costs minus the cost of providing family planning) would increase from USD 11 million in 2019 to USD 20 million in 2030. Finally, the increased use of modern contraceptive methods would avert an estimated 7.1 million unintended pregnancies and 57,081 maternal deaths during the twelve-year period.

He asserted that Afghanistan had a great opportunity to take advantage of the demographic dividend – a temporary window of opportunity for faster development and economic growth which countries can experience in the course of their development path.

Dr. Stanciole recommended the following policy options:

- 1) Increase investment in voluntary family planning services. Continued and more investment is needed to reach the current family planning commitment of mCPR 30 and reduce the 10 percent unmet need by 2030.
- 2) Establish a sustainability plan to start procuring contraceptives with national funding. Consider using UNFPA procurement services, which provide access to WHO pre-qualified products at significantly lower prices.
- **3)** Consider the value of long-acting methods (implants and IUDs) versus short-acting methods (injectable, pills and condoms) as they are more effective in preventing unintended pregnancies and are likely to produce better value for money.
- 4) Invest in demand generation activities, which are a precondition for a successful increase of the mCPR.

PANEL DISCUSSION

Panel Discussion on Socio-economic, Human Rights, Women Empowerment, Education, Demographic Dividend and Health Aspects of Family Planning. The panel consisted of the following members:

His Excellency Dr. Ferozuddin Feroz

Title: Minister of Public Health

Education: MSc in Public Health Management from the London School of Hygiene and Tropical Medicine

MBA from the International Institute of Health Management Research, Jaipur, India

MD and specialization in general surgery

Author of health management and policy book

Experience: Minister of Public Health since 2015 with over 29 years' experience in the Afghan health system. He has also worked as advisor to the World Bank, USAID and DFID in Afghanistan.

Mr. Shir Ali Zarifi, PhD

Title: Director of the Curriculum Development Unit, Ministry of Education

Education: PhD in Law and Sharia, Master in Islamic Feqa and MA in Law and Sharia

Experience: Over 30 years' experience as a university professor, member of the Afghanistan Academy of Science and senior advisor to the Ministry of Education

Author of 13 books on Law and Sharia and author of the Family Planning Orientation Package for Religious Leaders.

Mr. Anderson Stanciole, PhD

Title: Technical Adviser, Health Economics, UNFPA

Education: PhD in Health Economics and Masters in Economics

Experience: Over 10 years' experience in global health economics and finance with organizations such as UNFPA, the Global Fund, Bill and Melinda Gates Foundation, the World Bank and the World Health Organization. Deep technical and leadership experience in health financing, cost-effectiveness analysis and portfolio management.







Dr. Paata Chikvaidze

Title: MO - Reproductive, Maternal, Newborn, Child and Adolescent Health, WHO, Afghanistan

Education: Dr. Chikvaidze obtained a MD and PHD degrees from the Tbilisi State Medical University and a MPH degree from the University of New York.

Experience: Over 18 years' experience in public health programs in Eastern Europe, Central Asia and the Eastern Mediterranean regions, and 14 years of clinical practice in reproductive endocrinology,

surgery and gynaecology. He has served in 14 countries at senior level leading programs on: reproductive, maternal and child health [including in emergency settings]; family planning and contraceptive technology; health policy analysis and reforms; institutional development and HR capacity building; community mobilization, public health promotion and youth health.

Publications: 22 research articles and 2 clinical manuals.

Dr. Sifatullah Habib

Title: Senior Program Manager for Health and Nutrition, European Union Delegation to Afghanistan

Education: MD, Kabul Medical University

Experience: Senior Program Manager for Health and Nutrition at the European Union Delegation since 2011. Dr. Habib has 27 years' experience in the Afghan health system. He previously worked for the TB Control Hospital, Afghan Red Crescent Society, International Federation of the Red Cross and Red Crescent Societies (IFRC), Sanayee Development Organization (SDO) and Futures Group International.

Dr. Zelaikha Anwari, Panel Moderator

Title: RMNCAH Director, MoPH

Education: MD, Kabul Medical University and Masters of Public Health (MPH) from the Institute of Management Sciences, Pakistan

Experience: RMNCAH Director since February 2015. Prior to that, she worked with Management Sciences for Health (MSH) in different key positions and contributed to developing over 40 health policies, strategies and other national documents; as well as managed the provincial health system strengthening program which focused on strengthening the leadership, management and governance capacity of provincial public health officers. In addition, from Dr. Anwari's graduation from Kabul Medical University in 1991 to



joining MSH, she led and managed different health related projects through working with reputable national and international organizations in Afghanistan and Afghan refugee setting in Pakistan.



The panel looked into access to, utilization of and the role of family planning services as well as their impact on economic development, SDGs and the demographic dividend in the present context of Afghanistan. Currently, approximately 80 percent of married women are not using family planning services in Afghanistan and there is a high rate of unmet need for family planning services. The contraceptive prevalence rate has been stuck at 20 percent over the past nine years.

The panelists also discussed the role of FP in improving health indicators and in the socioeconomic stability of the country and girl's access to education; FP from the point of view of Islam; new government policies and strategies that can guarantee a prevalence rate of 30 percent or above in Afghanistan and the financial commitment of the government in this regard.



Below is a summary of the panel recommendations:

- Approximately 1 million women are using FP services in Afghanistan. There is a need to
 increase the figure to 2.4 million in order to attain the desired goal. Since one third of
 the population is living in five major cities (Balkh, Herat, Kabul, Kandahr and Nangarhar),
 where acceptance of FP services is higher than in the rest of the country, services should
 be provided throughout the country, with a special focus on these provinces. Special
 focus on the five major cities will help in accomplishing the set goals within the given
 time frame.
- The MoPH should conduct a mapping of resources and overlaps, then allocate resources efficiently to unmet needs of FP. Since FP is a multi-sectoral activity, it is important to focus on integrating FP in other government programs such as the citizen's charter.
- Educating women will help in improving access to FP services.

- According to the five religions of the Afghan people, couples can plan their kids based on mutual agreement. Doctors should be consulted about the safety of FP methods with regard to the mother and child.
- Every family should have a FP plan pertaining to the number of children and the birth spacing between them. People should know that FP is based on the principals of Islam.
- A specific institution (which should comprise of doctors, religious leaders and social mobilizers) should be assigned with building awareness and providing FP services and access to modern FP methods to the people of Afghanistan.
- Without family planning, a demographic transition and a demographic dividend, it will be very difficult to have economic development. There is need to ensure that policy/ decision-makers understand the importance of investing in FP.
- The potential for achieving a demographic dividend and economic development is huge in Afghanistan. To ensure that it is realized, it is necessary to start thinking about how Afghanistan can become self-reliant. Investing in FP can save a lot of resources in the health sector and improve the overall health of the population.
- The government of Afghanistan is committed to providing financial resources for supporting FP activities in the country. Financial assistance will also be sought from development partners and off-budget projects will be coordinated.
- The cost effectiveness of FP services is an important aspect that needs to be kept high on the agenda. FP is an area where more gains can be made quickly to generate better results.
- It would be great if FP could be added to the curriculum of the Ministry of Education, so that boys and girls can learn about it in school.
- If the right communication tools and channels are used, the demand for FP services can be increased. However, it is important to keep in mind that change is not an overnight process. The support of religious leaders is needed to get the FP message out to people and build awareness.
- Men and mothers-in-law need to be involved as they are the decision-makers at the household level.
- To improve access to quality FP services and generate demand for such services, the MOPH developed a five-year FP Costed Implementation Plan (CIP) and Family Planning Social Behaviour Change Communication Strategy (SBCC) for Afghanistan. It is hoped that Afghanistan's development partners will continue their support for FP, especially funding the CIP and SBCC.
- It is also hoped that a high-level committee on FP will be established to take the agenda to the next level.
- FP is not the sole responsibility of the MoPH. Other stakeholders should also play a vital role.

A committee chaired by the Deputy Minister for Public Health will come up with an action plan for follow up on the implementation of the summit recommendations.

AWARD DISTRIBUTION TO 10 FP SERVICE PROVIDERS

Health care providers were selected from different categories of health services based on their outstanding performance in their catchment areas. They were selected as per the analysis of the FP service data of the Health Management Information System (HMIS) over the last six months. In order to recognize their performance, awards were distributed to the following 10 health care providers:

Name	Province
1. Dr. Fariba	Herat
2. Midwife Aaqela	Daikundi
3. Midwife Aatefa	Jozjan
4. Midwife Latifa	Ghor
5. Midwife Latifa	Nooristan
6. Midwife Nafisa	Punjsher
7. Midwife Sharifa	Urozgan
8. Midwife Sohaila	Badakhshan
9. Midwife Sumaya	Balkh
10. Bibi Kubra	Nangarhar



CLOSING REMARKS

His Excellency Dr. Ferozuddin Feroz delivered the closing remarks and revealed the brand logo and color for the Afghanistan FP Program. The new slogan is: Family Planning- Social Well-being (جامعـه). He stated: "My colleagues and I know the value of FP services. Therefore, we have included FP and nutrition in the design of the SEHATMANDI project. Our presence at today's gathering is part of our commitment and I hope that we, together with our stakeholders, will implement today's commitments." Finally, he thanked the event's donorsandorganizersaswellasthefront-linehealthserviceproviders.



MEDIA COVERAGE

Representatives of different media channels attended the summit. The following media channels broadcasted comprehensive reports of the summit:

No	Media Channel	Details
1	Shamshad TV	The MoPH is concerned about the number of births in the country as they may present a huge challenge in the future. The MoPH says that children below the age of 15 constitute half of the country's population. In addition, the population of Afghanistan is increasing every day and there is need to build awareness in this regard. For further details, please visit https:// www.youtube.com/watch?v=hcJZhFLNUEw
2	Voice of America (VoA)	MoPH: The rapid population growth is worrisome. The MoPH has started efforts for population control. At present, the country's population growth is just over 2 percent per year. The MoPH has expressed concern about the population growth in Afghanistan and communicated that the country will face serious issues if the process is not slowed down. For further details, please visit https://www.pashtovoa.com/a/population-growth-and-the- future-problems-in-Afghanistan-/4769896.html
3	Tolo News	The MoPH talks about the rapid population growth in the country and has indicated that Afghanistan has the highest population growth rate in the world. On average, every woman delivers five to six children. According to the MoPH, Afghanistan's population will double in the coming 24 years. The National Family Planning Summit is the name of the event at which the MoPH talked about the renewal of commitment for family planning. For further details, please visit

4	MoPH website	Afghanistan has the fastest population growth in the world. Today, the MoPH conducted the National Family Planning Summit in Kabul. The purpose of the summit was to renew the commitment of the responsible organizations and donors about the implementation of family planning program as well as building people's awareness in this regard. For further details, please visit http://moph.gov.af/fa/news/338640
5	RMNCAH webage	National Family Planning Summit 2019 The Government of Afghanistan organized the National Family Planning Summit with the participation of its national and international partners and stakeholders in the Government Media and Information Center, Kabul. For further details, please visit http://rmncah-moph.gov.af/blog/17/02/2019/fp-summit/
6	BBC	On average, every Afghan woman delivers six children. The Afghanistan Ministry of Public Health expressed concern about the increased number of births in the country and considers Afghanistan as one of the countries with the highest population growth rate in the world. The MoPH said that "on average, every woman delivers five to six children." Addressing the National Family Planning Summit in Kabul, the Minister of Public Health, Dr. Ferozuddin Feroz said that the rapid population growth and the high fertility rate will double the country's population over the next 24 years. For further details, please visit http://www.bbc.com/persian/ afghanistan47100900-
7	The Daily Afghanistan Ma	Minister of Public Health: On average, every Afghan woman delivers six children. Dr. Ferozuddin Feroz, the Minister of Public Health expressed concern about the increased number of births in Afghanistan and said that on average, every Afghan woman delivers six children. Addressing the National Family Planning Summit, Dr. Feroz said that "Afghanistan is one of the countries that has the highest population growth rate around the globe." For further details, please visit http://www.dailyafghanistan.com/national_detail.php?post_ id=146688

8	8am.af	Every Afghan woman delivers five to six children. MoPH officials indicate that "Afghanistan has the most rapid population growth rate in the world and on average, every Afghan woman delivers five to six children." At the National Family Planning Summit, on 2 February 2019, Dr. Ferozuddin Feroz said that the rapid population growth is worrisome, without considering the family planning program. For further details, please visit https://8am.af/wp-content/ uploads/8/02/2019am3045pdf
9	Afghan News Agency	The population of Afghanistan will double over the next ten years. The country's population growth rate shows that the current 30 million Afghan population will reach 60 million by 2030. At the National Family Planning Summit in Kabul, Dr. Ferozuddin Feroz, the Minister of Public Health stated that "according to MoPH estimates, the country's population will double over the coming 10 years." He added that "the country's population growth rate is 2.3 percent – which shows that the current 30 million Afghan population will reach 60 million by 2030." For further details, please visit http://afghannews.af/%D%86%9D%81%9D%88%9D%8B-3 %D%8A%7D%81%9D%8BA%D%8A%7D%86%9D%8 B%3D%8AA%D%8A%7D%-86%9D%8AA%D%8A-7 %D%8AF%DB8%C%DA%AF%D%8B%-1D%8AF%D%88%9D8 %A%8D%8B%1D%8A%7D%8A%8D%8B%-1D%85%9DB8%C- %D%8B%4D%88%9D%8AF
10	Ariana News	Lack of government support for Afghan women's fertility and high population growth Addressing the National Family Planning Summit, Dr. Ferozuddin Feroz, the Minister of Public Health, noted that "due to the high fertility rate and the rapid population growth rate, the country's population will reach more than 60 million in the coming 24 years." Dr. Feroz added that "due to the high fertility rate, about 47 percent of the country's population is below the age of 15 years." For further details, please visit https://ariananews.co/ news/%D%8AF%D%88%9D%84%9D%8AA-%D%8 A%8D%8A%7D%86%9D%84%9D%8AA-%D%8 A%8D%8A%7D%86%9D%8A%7D%-86%9D%8A%7D %81%9D%8BA%D%8A%7D%86%9D%8B%1D88%C- %D%886%9D%8A%7D%86%9D%8B%1D%8B%4D%8AF- %D%86%9D%81%9D%88%9D%8B%1D%8B%4D%8AF- %D%86%9D%81%9D%88%9D%8B%1D%8B%4D%8AF-

NATIONAL FAMILY PLANNING SUMMIT DECLARATION

At the end of the summit, the following declaration was signed by representatives of the relevant organizations.



National Family Planning Summit Declaration

Participants at the family planning summit held in Kabul on 2 February 2019 agree and commit to working together to achieve the following milestones:

- 1. Improving access to quality FP services and information by investing in demand generation and strengthening of community-based FP services.
- 2. Reduce the unmet need for family planning by 10 percent by 2020.
- 3. Strengthening the leadership and stewardship role of the MOPH FP department. This includes a commitment to improving the human resource structure of the FP department. To both coordinate and work in harmony with donors and partners and ensure the implementation of the RMNCAH strategy and FP costed implementation plan.
- 4. Ensure zero stock out of contraceptives in public health facilities and ensure availability and suffice of at least five methods of family planning in all public health facilities.
- 5. Increase government resources earmarked for procurement of contraceptives by 50 percent.
- 6. Strengthening private sector FP service providers' capacity on contraceptive technology and FP counselling to deliver quality rights-based FP services.
- 7. More focus on long-acting reversible contraceptives (IUCD, implants) in the SEHATMANDI project and include implants in the BPHS and EPHS essential medicine list as well as allocate funds for procurement.
- 8. Strengthening the institutional capacity of public and community-based service delivery points to increase choice of contraceptive methods and quality of care at all levels.
- 9. Engaging other sectors and ministries such as MOEd, MOHRA, MOHED, MoEC , MOWA, MoF and MoRRD to adopt family planning as a national development issue.
- 10. Strengthening partnerships and collaboration with stakeholders, including religious leaders, civil society, parliamentarians, women leaders, youth and traditional leaders for support, advocacy and making family planning information and services available, accessible, acceptable and affordable to all.
- 11. Improving data collection and analysis of disaggregated data for monitoring inequities and evaluating the impact of family planning for all.

- 12. Expanding pre-marriage counselling and providing newly married couples with counselling services which include family planning.
- 13. Encouraging greater participation of men in contraception and dispelling myths about male methods of contraception.
- 14. Strengthening logistics management information systems and developing an information system and strategy to capture data for contraceptive usage and demand for the total market.
- 15. Strengthening partnerships with organizations for introducing or further strengthening social marketing of family planning methods promotion, especially for underserved groups.
- 16. Improving the referral system inside health facilities between vaccination and nutrition to FP services.
- 17. Expanding the method mix by introducing subcutaneous injectable contraceptives SC-DMPA at facility and community level.

SIGNATURES

ANNEX 01: SUMMIT AGENDA

Time	Agenda item
08:30 – 09:00 am	Registration and Information
09:00 – 09:10 am	Recitation of the Holy Quran
09:10 – 09:30 am	Welcome Remarks
	H.E Minister of Public Health
	Reviewing of the agenda by the RMNCAH Director
09:30 – 10:00 am	Opening Remarks
	H.E the President or First Lady or Chief Executive
	H.E the Head of Parliament
	UNFPA Representative
10:00 – 11:30	Keynote address by national and international experts
	Status of Family Planning in Afghanistan – by the RMNCAH Director (30 minutes)
	Cost-benefit analysis of family planning – by a UNFPAinternational expert (30 minutes)
11:30 – 11:45	Tea Break
11:45 –12:30	Panel Discussion on Socio-economic, Human Rights, Women Empowerment, Education, Demographic Dividend and Health Aspects of Family Planning
12:30 – 13:00	Way forward and government and donor commitment
13:00 – 13:10	Award Distribution to 10 best performance FP service providers
13:10 - 13:30	Closing remarks by H.E the Minister of Public Health and announcement of brand logo and color for the Afghanistan FP program
13:30 – 14:30	Lunch and Prayer Break

WITH SPECIAL THANKS TO

- 1. Reproductive, Maternal, Newborn and Child Health (RMNCAH) Directorate
- 2. Family Planning Department and FP Technical Committee Meeting
- 3. National FP Summit Preparedness Committee
- 4. The United Nations Population Fund (UNFPA)
- 5. The World Health Organization (WHO)
- 6. The USAID-funded HEMAYAT Project
- 7. Afghan Family Guidance Association (AFGA)

