



Success Story from Senegal Regional Meeting

Benin: Francophone Country Addresses CBA2I

Francophone West Africa Community-Based Family Planning (CBFP) Partners' Meeting

In March 2013, a delegation of Benin health officials along with eight other country delegations attended the Francophone West Africa CBFP Partners' Meeting held in Senegal. This landmark partners' meeting was held to advocate and build capacity for the introduction of CBFP, including community-based access to injectable contraception (CBA2I), as a global standard of practice in the Ouagadougou Partner countries.

The Senegal Ministry of Health and Social Action, Division of Reproductive Health and Child Survival, hosted the meeting in collaboration with the World Learning Grant Solicitation and Management (GSM) and FHI 360/PROGRESS project, with funding from the U.S. Agency for International Development (USAID). Another USAID project, Advancing Partners and Communities, supported the Benin delegation in attending the Senegal meeting.

The small country of Benin in West Africa with a population of just over 9 million people is about to embark on a major innovation in its family planning program, representing a milestone in CBFP for Benin and the region. Leading Ministry of Health (MOH) officials and partners are promoting a way to use nurse's aides, or aides-soignants, to provide the most popular contraceptive method in sub-Saharan Africa, injectable contraception, at the community level. Their successful advocacy effort came after the delegation attended the regional meeting on CBFP in Senegal.

Currently, women in Benin can only access injectable contraception at a health facility thereby limiting access to those who live in rural communities. The 2012 Preliminary Report of the Demographic Health Survey found that the contraceptive prevalence rate (CPR) for modern methods is only 6.8% in rural areas compared to 9.5% in urban areas. The national CPR for modern methods is 7.9%.¹

Since attending the Francophone West Africa CBFP Partners' Meeting, officials

from Benin have made great strides towards reaching their goal of having policy makers and the professional associations change policies to allow the provision of injectable contraception



at the community level by the end of 2013. The advocacy efforts of Benin's delegation from the MOH's Mother and Child Health Directorate (DSME), the International Planned Parenthood Member Association of Benin (ABPF),

¹ Preliminary Demographic Health Survey (DHS) 2012

Benin: The Next Emerging Frontier for CBA2I

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During a site visit as part of the Senegal regional meeting, Benin officials observed a community health worker demonstrating how she tracks follow-up visits with CBA2I clients.

trained aides-soignants to provide key high impact health services in remote communities and possibly have them serve as professional MOH community health agents. Being officially recognized by the MOH and having a training school will enable Benin's CBA2I program to be sustainable for the long term.

USAID/Benin, with support from the Advancing Partners and Communities project, also has reached out to USAID/Washington to discuss supporting an in-country CBA2I demonstration project. A demonstration project is an important and concrete step in supporting CBA2I because it often leads to a change in policy. Benin has moved quickly after the meeting and is likely to be the next country in West Africa to change policy and to scale up CBA2I through the cadre of aides-soignants cadre. Other Francophone West Africa countries that have recently conducted demonstration projects or changed their policy to allow for CBA2I include Guinea, Senegal, and Togo.

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Beninese Association for Social Marketing (ABMS), and the Network of Beninese Health NGOs (ROBS) have successfully led to the Director of the DSME exploring CBA2I by aides-soignants at community outreach sites. The USAID/Benin mission is also interested in supporting a CBA2I demonstration project. Often, these types of decisions are made after a year or even two years of advocacy, but Benin has reached this stage in just three months since the Senegal meeting.

Who are aides-soignants? Aides-soignants are based at health centers and are involved in regular outreach activities, which are a convenient platform for bringing family planning directly to the community. Currently, the aides-soignants cadre does not systematically receive formal pre-service training; instead, they receive on-the-job training, including in family planning. However, the recent opening of a national aides-soignants training school will enable the health system to deploy

The names of the Senegal and Benin organizations included in this brief are anglicized for an English-speaking audience. The official names are:

- Ministère de la Santé et de l'Action Sociale, La Direction de la Santé de la Reproduction et de la Survie de l'Enfant
- Direction de la Santé de la Mere et de l'Enfant (DSME)
- Association Beninoise pour la Promotion de la Famille (ABPF)
- Association Beninoise pour le Marketing Social (ABMS)
- Reseau des ONG Beninoises de Santé (ROBS)