



## FAITH-BASED ORGANIZATIONS STRATEGIC PARTNERS IN MEETING THE NEED FOR FAMILY PLANNING

Too many women are dying of pregnancy-related causes in Cameroon. Often, maternal deaths are due to poorly timed and closely spaced pregnancies, which can be avoided with family planning. Key studies, including one featured in the Lancet, estimate that 44% of all maternal deaths worldwide could be averted with family planning.

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Unfortunately, women do not have access to lifesaving family planning supplies when clinics and hospitals experience stock outs, a common occurrence in Cameroon. The Cameroon Ministry of Public Health made a commitment to reduce contraceptive stock outs and increase

the contraceptive prevalence rate from 16 to 30 percent. Faith-based organizations (FBOs) are ready and able partners with the Ministry of Public Health, UNFPA and CENAME to meet this goal, improving health and saving lives.

“Faith-based organizations are already key family planning providers in their communities, serving many women with a variety of methods.

#### SAMPLE OF FBOS PROVIDING FAMILY PLANNING IN CAMEROON

<b>CBCHS</b>	6 Hospitals, 28 Health Centers, 54 Primary Health Care Posts served 3,001,199 clients from 2012 to 2014. (These include inpatients, outpatients and deliveries).
<b>UEE</b>	500 clients received Family Planning services at 7 Health Centers in 2014.
<b>EELC</b>	3 Hospitals and 19 Health Centers served 7,106 clients in 2014 and 8,923 clients in 2015. (General consultation)
<b>PCC</b>	21 Health Centers, 6 Hospitals, served approximately 769 clients for family planning per month.

#### ADDITIONAL FAMILY PLANNING CLIENTS SERVED BY THE FOLLOWING FACILITIES

<b>EPC</b>	1 Hospital served 977 clients in 2014 and 897 clients in 2015.
<b>LEOPLAN</b>	5 Hospitals served at least 30 clients per month, for an average of 400 clients per year in 2014 and 500 in 2015.
<b>7th Day Adventists</b>	4 Health Centers and 1 Primary Health Post served 215 clients in 2014 and 522 clients in 2015.

## Association of Faith and Family Planning

Seven faith-based organizations came together to form an association to plan how we can avoid contraceptive stock outs and meet the family planning needs of our communities. This group consists of the Cameroon Baptist Convention Health Services (CBCHS), the Presbyterian Church

in Cameroon (PCC), Oeuvre Médicale --Union des Eglises Evangéliques au Cameroun (OMUEEC) Département de Santé, Eglise Evangélique Luthérienne du Cameroun (OSEELC), Eglise Presbytérienne Camerounaise (EPC), Seventh Day Adventists, and LEOPLAN.

## Why FBOs Are Key to Full Coverage

### REACH

Many faith-based facilities serve rural areas where the government does not reach. We are partners with the MOPH to provide family planning to those who do not have access.

### INFLUENCE

There are many taboos and cultural and religious barriers to family planning uptake, making the faith community an ideal advocate to dispel myths and change attitudes about lifesaving services in the religious community. No other community is as well positioned to help the MOPH increase family planning uptake.

### THE RIGHT METHOD AND THE RIGHT TIME

While we provide women with family planning services and receive supplies from CENAME, ACMS, and CAPP, we also face frequent stock outs of commodities, keeping us from providing a woman with the method she has selected. In one of our faith-based facilities recently, a woman who had nine children came in seeking a long-term method of family planning, but it was not available.

Unfortunately stock outs such as this one are all too common. Our facilities report frequent stock outs or expired products, meaning we may not be

able to give a woman the method of her choice. We want to offer our communities full choice in family planning methods and ensure women have methods that work for them and that they are most likely to use. Not all methods work for all women and situations. We want to partner with the MOPH, CENAME and UNFPA to achieve a consistent and full supply of family planning commodities.

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## Growing Population and Increasing Need for FP in Cameroon

Our population is continuing to grow and the number of women of reproductive age will increase, increasing the need for family planning commodities.

		CBCHS*	EELC*	PCC*	UEEC*
Commodities distributed last year (2015)	Depo-Provera	3662	3279	853	1102
	Emergency Contraception	20	-	-	-
	Female Condom	1118	1177	-	-
	IUD/DIU	620	1440	550	-
	Implanon NXT	317	-	-	-
	Jadelle	3413	2133	1385	123
	Male condom	126288	3561	4500	-
	Microgynon	4998	3610	1100	729
	Microlut	420	-	-	-
Commodities stocked out last year (2015)	Depo-Provera	49 days	-	44 days	-
	Female Condom	121 days	222 days	-	-
	Jadelle	93 days	-	10 days	-
	Microgynon	-	110 days	-	-
Commodity forecast for 2016	Depo-Provera	3819	4017	1177	1653
	Emergency Contraception	50	-	-	-
	Female Condom	1584	1667	-	-
	IUD/DIU	713	2087	660	-
	Implanon NXT	634	-	-	-
	Jadelle	4064	2260	1715	250
	Male condom	151546	4076	6000	-
	Microgynon	738	4110	1700	1236
	Microlut	768	-	-	-

\* CBCHS - Cameroon Baptist Convention Health Services | EELC - Eglise Evangélique Luthérienne du Cameroun | PCC - Presbyterian Church in Cameroon | UEEC - Union des Eglises Evangéliques au Cameroun

## Request to the Ministry of Public Health

1. We are requesting for member organizations of our Alliance of Faith-Based Organizations in Cameroon to be included in the National Supply Planning and Supply Chain of Family Planning Commodities in Cameroon.
2. We request that CENAME should donate overstocked products: microgynon, microlut and depo-provera to FBOs, so that these can be used up before they expire.
3. We request that FBOs be included in trainings on the use of new commodities in Cameroon.

### REFERENCE:

Ahmed, S., Li, Q., Liu, Li, Tsui, A.O. (2012). Maternal deaths averted by contraceptive use: an analysis of 172 countries. The Lancet, <http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2812%2960478-4/abstract>