

FP Manual for National NGOs – Financial Flows for Family Planning 2013

The questionnaire covers 2013 family planning expenditures which benefited your country. This means that expenditures which were made abroad but used for a domestic purpose should also be included.

Deadline: 15 December 2014

What to include: family planning methods (e.g. condoms, pills, emergency contraceptives, diaphragms, IUDs, injectables, etc.) and services (e.g. counseling, female/male sterilization, prescription/provision of FP methods, etc.)

Currencies: kindly report all your figures in the local currency. In case you need to make conversions, kindly contact the project staff so that we can ensure consistency of the figures.

General development projects/programmes with a family planning component: development projects/programmes sometimes contain a family planning component. A general rural development programme may, for example, contain a family planning component. The amount requested in the survey is only the amount of money spent on family planning activities in this general development project/programme.

Filling in the survey:

Section A: Kindly provide the currency which was used in the survey and report total domestic expenditures on family planning financed by domestic and international sources.

Domestic sources: funding from national sources (central, subnational, local and municipal). Examples: Ministry of Finance, regional health offices, national foundations.

International sources: international donors encompassing foreign governments, UN organisations/agencies, international development banks, international NGOs, foreign foundations, foreign private for-profit companies or other international organisations/individuals.

Section B: **Only include project/programmes or activities which benefited family planning in the country! Activities funded abroad but which benefited FP activities in the country should also be included.**

Expenditures: for each project/programme or activity you should use a separate sheet in section B. Include expenditures made both locally and abroad which benefited local family planning projects/programs or activities. For example, condoms purchased abroad but distributed within your country should be included. Expenditures cover both recurrent expenses and capital investments made for family planning in 2013:

- *Recurrent expenses:* occur periodically to produce the FP services and which are fully consumed during the provision of the service. It includes salaries, FP methods and services and all operational spending, condoms, paper, electricity and contracted services such as security, or the production of quarterly dissemination of family planning-related information to the communities, patients, children, etc. *Only include recurrent expenses which were made in 2013.*
- *Capital investment:* acquisition of a capital good, also referred to as durable goods, which are used in the production of FP methods and services and last longer than 1 year. E.g. a car, furniture, computers, medical equipment, etc. *Only include capital investments acquired in 2013.*

Breakdown of FP expenditures – recurrent expenses:

- 1) Staff service costs: include the salaries of (medical) staff which directly provided a FP service
Salaries of supporting staff which do not directly provide FP services should be included under Program Management
- 2) Outsourcing of services: include any expenditures made for outsourcing services for FP
- 3) Contraceptives, medicine & other consumables: include any of these items which were purchased/provided for the purpose of FP.
- 4) Information, Education and Communication (IEC): a collective service in which e.g. media messages or advertisement campaigns target a group of people.
- 5) Policy Development and Advocacy: include FP-related policy work, sensitization of law makers, formulation of FP policies and laws.
- 6) Management Information System (MIS) and Health Information System (HIS): system used for analysing and enabling the strategic and operational activities within an organization (MIS) or for holding information regarding the health of individuals or activities conducted by organizations working within the health sector (HIS)
- 7) Monitoring, Evaluation and Research: include any M&E or research activities related to FP
- 8) Capacity building/training: include all training or capacity building activities for any of the specific items mentioned above.
- 9) Program management: include the salaries of decision makers or supporting staff regarding the optimization of service delivery to ensure the goals of the program are reached. It involves the planning, organizing, directing, and controlling of company resources and salaries of staff which did not provide direct FP services.
- 10) Operational costs: expenses associated with administering a business on a day to day basis. For example, costs related to electricity, fuel, rental of building or equipment, utilities, etc.

Breakdown of FP expenditures – capital investment (for durable goods lasting > 1 year):

- 1) Infrastructure and Upgrading of Facilities
- 2) Equipment: purchase of cars, computer and ICT products, office furniture and medical equipment

Question B8 can be filled in in two different ways. Ideally, you would fill in exact amounts under the column 'Amount' (figure 1). If you do not have exact amounts, you can estimate percentages and include those in the survey (figure 2). Kindly provide as detailed information as possible and make sure that the amounts add up to the total.

Figure 1: Availability of specific disbursed amounts (preferred approach):

A: Recurrent expenses
Recurrent expenses are those which occur to produce the FP services in your organization E.g. the distribution of condoms, quarterly dissemination of FP information to employees and the resources involved to provide those services.
Note: further explanation and examples for question B 8.1 - B 8.14 can be found in the manual

Expenditure by services

		Amount (A):	Percentage:
B 8.1	Internal service staff costs (for direct service provision)	100,000	
B 8.1.1	Of which: Out-Patient Services	70,000	
B 8.1.2	Inpatient Services	30,000	
		+	
B 8.2	Outsourcing of services	20,000	
B 8.2.1	Of which: Out-Patient Services	20,000	
B 8.2.2	Inpatient Services		
B 8.3	Contraceptives, medicine & other consumables (retailed and provided)	60,000	
B 8.4	Information, Education and Communication (IEC)		
B 8.5	Policy Development and Advocacy		
B 8.6	Management Information System (MIS) and Health Information System (HIS)		
B 8.7	Monitoring, Evaluation and Research		
B 8.8	Capacity building/training (for all categories mentioned above)		
B 8.9	Program Management Staff costs (non-service delivery)	20,000	
		+	
B 8.10	Operational expenditures		
B 8.11	Other: please specify: _____		
A: Recurrent Total:		200,000	100%

Figure 2: Specific amounts are not available thus you provide estimated percentages:

A: Recurrent expenses
Recurrent expenses are those which occur to produce the FP services in your organization E.g. the distribution of condoms, quarterly dissemination of FP information to employees and the resources involved to provide those services.
Note: further explanation and examples for question B 8.1 - B 8.14 can be found in the manual

Expenditure by services

		Amount (A):	Percentage:
B 8.1	Internal service staff costs (for direct service provision)		50%
B 8.1.1	Of which: Out-Patient Services		
B 8.1.2	Inpatient Services		
		+	
B 8.2	Outsourcing of services		10%
B 8.2.1	Of which: Out-Patient Services		
B 8.2.2	Inpatient Services		
B 8.3	Contraceptives, medicine & other consumables (retailed and provided)		30%
B 8.4	Information, Education and Communication (IEC)		
B 8.5	Policy Development and Advocacy		
B 8.6	Management Information System (MIS) and Health Information System (HIS)		
B 8.7	Monitoring, Evaluation and Research		
B 8.8	Capacity building/training (for all categories mentioned above)		
B 8.9	Program Management Staff costs (non-service delivery)		10%
		+	
B 8.10	Operational expenditures		
B 8.11	Other: please specify: _____		
A: Recurrent Total:		200,000	100%

Estimating FP expenditures: if a general project/programme/activity included a FP component, you are requested to estimate the expenditures which were made for FP only. You can make an estimate based on 1) time (amount of minutes spent on FP/total minutes * total cost) or 2) number of visits (number of visits related to FP/total number of visits * total cost of all visits) or 3) number of patients (number of FP patients/total patients * total cost). *E.g. if a 60 minute consultation on nutrition and family planning would cost a total of \$100 and if a health care worker discussed family planning for approximately 15 minutes, then the total FP consultation costs would be $((15/60)*\$100) = \25*

Kindly indicate in the final section called Remarks which method (e.g. time, number of visits/patients or any other method) you used for estimating the FP expenditures

Review your responses: please make sure the responses you have given in the survey make sense; the amounts add up to the total (and are the same in section A and section B where necessary), the percentages add up to 100%; and that the required information is fully entered.

Questions? If you need clarification or further information, please contact the project staff at ResourceFlows@nidi.nl

Thank you!