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# Manual Resource Flows for National Consultant UNFPA/NIDI Resource Flows and Family Planning Survey 2013

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## 1. Introduction

This manual consists of three parts, the first part provides general information which is applicable to both surveys, the second part refers to the Resource Flows Survey, and the third part refers to a new survey which covers detailed information on family planning expenditures in particular.

General contact details of the survey:

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# Manual Resource Flows for National Consultant

## General part

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## 1. Preparation of the fieldwork

In addition to the specific questionnaire and manual for the National Consultant (discussed below), this year's survey includes the following:

1. One set for the **public sector** (government departments) → **focuses on population activities AND family planning**
2. One set for the **non-governmental organisations** (NGOs, universities, foundations, etc.) → **focuses on population activities AND family planning**
3. Two sets for the **private sector**
  - b. Corporations (employers) → **solely focuses on FP (and not population activities)**
  - c. Insurance companies → **solely focuses on FP (and not population activities)**

We kindly ask you to photocopy the questionnaires and manuals and to distribute them to those government departments and national NGOs which are identified by you and UNFPA as potential respondents.

In case you have access to the Internet: all surveys and manuals can be downloaded from the Internet: [www.resourceflows.org](http://www.resourceflows.org) (the surveys are in Excel format, the manuals in Pdf format).

Steps and remarks regarding the preparation of the fieldwork:

- Study the surveys and manuals carefully.
- Discuss with the UNFPA Representative/Programme Officer, which government departments, insurance companies, corporations and national NGOs you should visit. Identify the persons you have to contact in these organisations.
- Note that often several government departments are involved in population activities.
- You only need to distribute the NGO folder to those national NGOs that are responsible for more than about one percent of the total funds for population activities in your country.
- It is important that **all** major NGOs, insurance companies, corporations and government departments in the field of population are included in the study. Coverage should be as complete as possible.

☞ In the past, national data were cleared by the UNFPA country offices. To encourage more serious involvement in the data collection process, and to avoid national data being challenged technically and/or politically, sign off should come from the respective national authorities for population. Therefore, once the completed questionnaires have been returned to you, you should discuss the figures with the national entity/entities responsible for clearing and signing off on the population data. Involve the UNFPA Representative/Programme Officer in the process. Kindly indicate the names of the responsible entities on the 'Upon Receipt'!

☞ **\*NEW\*** As of this year, we have added new questions on family planning to the regular Resource Flows government, NGO and consultant survey. Pay close attention that these questions are filled in by the respondents. In addition, there is a new survey for corporations and insurance companies – which strictly focuses on family planning. Please refer to the third part of the manual for more information.

## 2. Communication with the RF project during the process

This year the *primary contact* for all your inquiries, comments and questions regarding the survey and project will be NIDI. This is due to the fact that this year there are numerous changes in the surveys and manuals (due to the addition of family planning) and we want to keep close track of the whole process.

Please direct all your queries, comments and suggestions to NIDI. Please also send all completed questionnaires and the report of the national consultant to NIDI.

The contact details of NIDI are:

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 ***Deadline 15 December 2014***

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**Manual Resource Flows for National Consultant**

**UNFPA/NIDI Resource Flows Survey 2013**

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## 1. Introduction

The aim of the Resource Flows project (RF project) is to monitor progress in the implementation of the Programme of Action (PoA) adopted at the International Conference on Population and Development (ICPD) in 1994. The information collected is mainly used for advocacy and mobilisation of resources to ensure implementation of the Programme of Action and to plan for an effective response to the AIDS pandemic.

The Project tracks financial resource flows based on the “costed population package” as described in paragraph 13.14 of the ICPD Programme of Actions: 1) Family planning services; 2) Basic reproductive health services; 3) Sexually transmitted diseases and HIV/AIDS prevention; 4) Basic research, data and population and development policy analysis. The ICPD explicitly recognized (in paragraphs 13.17 to 13.19) that the “costed package” did not include all interventions necessary for the achievement of universal access to reproductive health. It has since become possible to cost and include some additional elements, particularly in the context of the Millennium Development Goals. This manual provides a description of the categories and examples of population activities monitored by the survey which go beyond ICPD para 13.14 to reflect the revised cost estimates produced by UNFPA<sup>1</sup>.

☞ To simplify reporting procedures and to harmonize resource tracking with UNAIDS, the survey does not collect information on expenditures for HIV/AIDS activities. This information will be obtained directly from UNAIDS.

**The term “population activities” in this survey refers to projects, programmes and activities in the following categories:**

1. Family planning services
2. Basic reproductive/maternal health services
3. Basic research, data and population and development policy analysis

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<sup>1</sup> See Report of the Secretary-General, *Flow of financial resources for assisting in the implementation of the Programme of Action of the International Conference on Population and Development*. E/CN.9/2009/5. Presented to the 42<sup>nd</sup> Session of the Commission on Population and Development, New York, March 2009.

## 2. Execution of the fieldwork

- Distribute the folders to the government departments and national NGOs identified. Try to identify one key person in each organisation to work with. Stay in contact with this person.
- Follow-up: after about one week, you should check the progress of each organisation (either visit or contact them by phone). If necessary, assist them in completing the survey. In the case of unavailability of respondents, or failure to co-operate, it is sometimes possible to make an estimate based on other information. For instance, some NGOs produce annual reports, in which a financial overview of the previous year is provided. If you cannot get information, make a note which organisations did not co-operate and if possible, give the reason for their lack of co-operation.

## 3. Check and completion of the information

☞ After you have received the completed survey from the respondent, it is necessary to carefully check all information to ensure that the respondent did not make errors. Are the surveys:

- **Complete:** was an answer given to each of the questions?
- **Consistent:** is the information always consistent with responses in other parts of the survey?
- **Plausible:** are the calculations correct? If applicable: are the exchange rates used valid?

*Please pay attention to:*

- **Double counting problems:** in some cases a project is reported by different respondents, e.g. a project can be funded by the Ministry of Health and be executed by a national NGO. The project will be counted twice. If you encounter this, please write on the project sheet where the project is reported elsewhere.
- **The distinction between domestic and international sources:** make sure that the financial information on the project/programme section (section C) of the “Government Department” survey pertains to domestic funds and excludes foreign aid (donor) money.

*Completion of the missing information:*

- **Estimating the population components as defined in this survey:** In case of government departments, it may happen that figures about expenditures are available for the health sector as a whole, but not for population activities. If you encounter this problem, try to make an estimate -together with the respondent- about what share of the total expenditures goes to these activities, for example, estimate what proportion of staff-time is dedicated to the activities.

If, in your opinion, there are errors in the survey, you should contact the respondent again to ascertain that the information is correct. If you make changes or corrections, always do so in consultation with the respondent. Add a small note to the survey in which you show what changes you have made. Indicate whether the respondent agreed with these changes.

## 4. Questionnaire for National Consultant

**Sections A and B** refer to the year **2013**

**Section A** concerns the National Budget. We would like you to gather general information concerning the national budget for population activities in your country. In particular we are interested in:

- (a) the ministry or department which is responsible for drawing up the national budget,
- (b) which part of the budget comes from domestic sources,
- (c) which part of the budget comes from international sources and
- (d) the distribution of the national budget over the several ministries or departments. Please pay attention to the consistency with the information at the national level: compare the answers of question B1 of the “Government Department” survey with the information you have gathered in the survey for the “National Consultant”, regarding the national budget for population activities.
- (e) the amount which benefit family planning

**Section B** requests a breakdown of private sector expenditures for population activities obtained from the different surveys. These can also be collected from secondary sources. Kindly provide the amount which was spent on population activities, how much of this amount was for family planning (in percentages) and from which source you collected this figure e.g. from an annual report, the survey, etc.

**Section C** requests preliminary estimates for the future expected National Budget for population activities for 2014 and 2015.

## 5. Preparation of the report

*Please make a summary report (of approximately 3-4 pages) that should at least contain the following topics:*

- **Relevant organisations:** an overview of the relevant government departments and national NGOs to which surveys were sent.
- **Response:** which organisations replied and which ones did not reply. If possible, give the reason for their inability to co-operate.
- **Quality and coverage:** give an overview of the quality and coverage of data.
- **Problems:** give a description of the problems you encountered regarding the data collection.
- **Private Sector:** if possible, include information on the role of the private sector as it relates to funding population activities in your country.
- **Relevant publications:** if possible, list three most recent publications on funding population activities in your country.
- **Suggestions for strengthening the monitoring of population activities:** we welcome your ideas or suggestions in order to improve the monitoring of financial flows.

The report, which needs to be attached to the surveys, should be verified for completion by UNFPA and handed over to the UNFPA Representative or Programme Officer. The report and surveys should be sent by the UNFPA country offices to NIDI for further data processing and validation.



## 6. Definitions of terms used in the survey

### **Domestic sources:**

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

### **Expenditures:**

The amount of money that has *actually been spent/disbursed* by your organisation for the project/programme in the given year.

**Financial year (FY):** the period when the accounting year starts. Figures for 2013 should be included. If you are reporting in FY (as opposed to calendar year), please include family planning disbursements made from 1 July 2012 and onwards. For example: FY July 2012-June 2013, September 2012-August 2013, December 2012-November 2013, February 2013-January 2014, April 2013-March 2014, June 2013-May 2014 can all be included. In case the financial year started before July 2012 OR after 1 July 2013, this should not be included and is considered to be FY 2012 (for any start date before July 2012) and FY 2014 (for start date July 2013 and onwards).

### **General development projects/programmes with a population component:**

Development projects/programmes sometimes contain a population component. A 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 population activities in this general development project/programme.

### **International NGO (Non-Governmental Organisation):**

Private not-for-profit organisation which operates *in more than one* country.

### **International sources:**

Financial resources provided by (donor) governments, multilateral organizations and agencies, development banks, NGOs, private foundations, universities, research institutes and individuals.

### **National NGO (Non-Governmental Organisation):**

Private not-for-profit organisation which operates *exclusively in one* country.

### **Private sector expenditures:**

Private sector expenditures are household out-of-pocket payments, companies' payments for personnel, private health insurance and non-governmental organizations' expenditures for households.

### **Project/programme expenditures:**

All expenditures directly attributable to a project or programme relating to (for instance):

- equipment
- transport
- communication
- training and IEC materials
- medicaments
- salaries of project personnel
- rent of the building, electricity

### **Umbrella organisation:**

A co-ordinating institution/agency that does not implement its own activities, but *only channels* funds.

## 7. Categories and examples of population activities

### Category:

### Examples of projects, programmes and activities:

#### 1. Family planning services:

#### Examples of category 1:

##### *Direct Service Delivery, Drugs, Supplies and Personnel Costs*

- Contraceptive commodities and service delivery

##### *Family Planning Programme and Systems Costs*

- Capacity-building for information, education and communication (IEC) regarding family planning and population and development issues
- National capacity-building through support for training
- Infrastructure development and upgrading of facilities
- Policy development and programme evaluation
- Management information systems
- Basic service statistics
- Focused efforts to ensure good quality care, including supervision and assessment
- Advocacy for family planning services

- Family planning projects
- Family planning information systems
- Construction/infrastructure of family planning clinics
- Rent, electricity of family planning clinic
- Soap series on TV about family planning
- Contraceptive procurement, warehousing and distribution
- Family planning training
- Salaries and incentive pay associated with family planning personnel

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## 2. Basic reproductive/maternal health services:

### *Direct Service Costs, Drugs, Supplies and Equipment*

- Information and routine services for prenatal care, normal and safe delivery, post-natal care
- Abortion (as specified in paragraph 8.25 of the ICPD document); management of post-abortion complications

### *Reproductive/Maternal Health Programme and Systems Costs*

- Information, education and communication (IEC) about reproductive health, human sexuality and responsible parenthood, and against harmful practices
- Adequate counselling
- Diagnosis and treatment for reproductive tract infections, as feasible
- Referrals, education and counselling services for pregnancy and delivery complications
- Provision of reproductive health information and services for people in humanitarian situations
- Sexual and reproductive health rights

## Examples of category 2:

- Antenatal care
- Basic childbirth care
- Basic newborn care (breastfeeding support)
- Delivery complications care (treatment of eclampsia)
- Emergency obstetric care (post-partum hemorrhage)
- Additional care for at-risk baby (resuscitation, very small baby care)
- Surgical repair of obstetric fistula
- Upgrading maternity wards
- Training of traditional birth attendants
- Refresher course for midwives
- “Safe Motherhood” programmes
- Eradicating female genital mutilation
- Screening/treatment of reproductive cancers, including breast, cervical and other reproductive cancers

## 3. Basic Research

- National capacity-building through support for demographic as well as programme-related data collection and analysis, research, policy development and training
- Support for population data collection; support to academic and other training institutions for population and development research and analysis and to national population planning units, population councils, and population commissions.

## Examples of category 3:

- Demographic and health surveys
- Population census
- Vital registration
- Sending staff to overseas training courses
- Setting up a demography department at a university
- Population research

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**Manual Resource Flows for National Consultant**

**UNFPA/NIDI Survey for Family Planning 2013**

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## 1. Introduction

Family Planning 2020 - a global partnership that supports the rights of women and girls to decide, freely, and for themselves, whether, when, and how many children they want to have – was started in 2012 and works towards enabling 120 million more women and girls to use contraceptives by 2020.

In order to estimate the additional resources needed for reaching the abovementioned goal, there needs to be a clear idea of how much is currently spent on family planning and the allocation of such resources. Information on these expenditures is limited, and therefore this exercise aims to create a comprehensive picture of family planning expenditures within a country. Expenditures on family planning from the public sector, private sector and NGOs will be gathered.

**The term “family planning” (FP) in the short questionnaires refers to projects, programmes and activities that offer the following methods and services:**

### Family planning methods:

- Male Condom
- Female Condom
- Pills
- Emergency contraceptives (pills)
- Injectables (all types – monthly and 3 months i.e. Depo Provera)
- Diaphragm
- IUDs (Copper T and other IUDs)
- Implants
- Standard Days Method (SDM)
- Other

### Family planning services:

Any services provided in relation to the first time provision or the continuous supply of any consumables. For example:

- Counseling on contraceptive methods and any other FP advice
- Consultation, diagnosis, monitoring health conditions, any FP clinical assessment
- Treating any FP medical need (as contraceptive side effects management)
- Female and male sterilization
- Prescription and provision of FP methods (first time or continued supply of FP methods)

Note: this questionnaire on FP does not include expenditures made to abortion-related services.

Steps and remarks regarding the preparation of the fieldwork:

- Study the surveys and manuals carefully.
- Discuss with others in the field which organizations you should visit or contact. Identify the persons you have to contact in these organisations.
- **UPON RECEIPT:**  
**Once you have a list of which organizations to contact, kindly fill in the upon receipt form and return it to NIDI as soon as possible. This form gives us an indication of which organizations you are planning to contact and the expected submission date of the surveys. You only need to submit one upon receipt, which includes all the organizations which are involved in population activities (this of course includes family planning organizations)!**

#### *Expenditures*

- The questions on family planning expenditures includes the amount of money that has actually been spent/dispensed by an organisation for family planning projects/programmes in the given year. Expenditures made both locally and abroad which benefited local family planning projects/programs or activities should be included. For example, condoms purchased abroad but distributed within your country should be included.

#### *Public Sector*

- Establish which Ministries provide family planning funding. For example, the Ministry of Health, Ministry of Social Affairs, Ministry of Women's Affairs, etc. Note that *several* government departments could be involved in such activities.
- See if commissions and parliamentary committees received any funding for family planning (e.g. for policy, advocacy or monitoring and evaluation).
- Universities or research institutes funded by the government should also receive the government surveys
- In case of a federal state distribute the survey to the most important self-governing states or regions. Ideally, you would want all regional governments to fill in the government survey and provide data on project level – but having information of the most important (e.g. the states with the largest cities in your country) regional governments is satisfactory. If this is not feasible, you should try to collect data from the central body (although it is very likely that this data will be aggregated and the level of detail will be limited).
- Pay close attention to public sector organizations which are involved in funding family planning activities!

#### *NGOs*

- Identify NGOs active in the field of population, including family planning. Those focused on maternal/reproductive health are of particular interest when trying to identify FP organizations.
- You could contact Family Planning Associations or regional organizations working on family planning within the country to find out which NGOs are relevant
- You only need to distribute the NGO folder to the larger NGOs in your country involved in population activities (including family planning)
- The NGO survey includes all non-governmental, not-for-profit organisations involved in population activities (including family planning). Therefore, this survey also applies to research centres not funded by the government, universities, foundations and other national organisations. In question A6 of this survey the respondent can indicate the type of non-governmental organisation e.g. research institute, university, NGO, etc.
- Include universities with relevant departments involved in health/population/family planning research and monitoring and evaluation

### *Insurance companies*

- See the ‘Note on Insurance Companies’ provided separately

It is important that **all** major NGOs, universities, government departments, corporations and insurance companies are included. Coverage should be as complete as possible.

We kindly ask you to photocopy or print the questionnaires and manuals and to distribute them to those government departments, universities, NGOs, corporations, foundations and insurance companies which are identified by you as potential respondents. If possible, you can of course easily email the surveys/manuals to the organization as well.

## **2. Execution of the fieldwork**

- Distribute the folders to all the organizations/departments/entities identified. Try to identify one key person in each organisation to work with. Stay in contact with this person.
- Follow-up: after about one week, you should check the progress of each possible respondent (either visit or contact them by phone). If necessary, assist them in completing the survey. In the case of unavailability of respondents, or failure to co-operate, it is sometimes possible to make an estimate based on other information. For instance, some NGOs produce annual reports, in which a financial overview of the previous year is provided. If you cannot get information, make a note which organisations did not co-operate and if possible, give the reason for their lack of co-operation.

## **3. Check the information**

After you have received the completed survey from the respondent, it is necessary to carefully check all information to ensure that the respondent did not make errors. Are the surveys:

- **Complete:** was an answer given to each of the questions?
- **Consistent:** is the information always consistent with responses in other parts of the survey?
- **Plausible:** are the calculations correct? If applicable: are the exchange rates used valid?

*Please pay attention to:*

- **Double counting problems:** in some cases the same project is reported by different respondents, e.g. a project can be funded by the Ministry of Health and be executed by a national NGO. The project will be counted twice. If you encounter this, please write on the project sheet where the project is reported elsewhere.
- **The distinction between domestic and international sources:** make sure that the financial information on the project/programme section (section B) of the “Government Short questionnaire on Family Planning expenditures” pertains to domestic funds and international funds.
- **The distinction between domestic and international expenditures:** make sure that the financial information on the project/programme section of the surveys pertains to projects/programmes which benefited *domestic* family planning purposes only. You can include *international* disbursements to FP projects/programmes as long as they had domestic benefits. For example, condoms purchased and paid for abroad but which are distributed within your country can be included.
- **Currencies:** Kindly encourage respondents to fill in the survey in the local currency. In case you have to convert, kindly contact the project staff so that consistency is ensured.

*Completion of the missing information:*

- **Estimating the family planning components as defined in this survey:** In the case of government departments (or other organizations), it may happen that figures about expenditures are available for the health sector as a whole, but not for family planning. If you encounter this problem, try to make an estimate – together with the respondent – about what share of the total expenditures

goes to these activities, for example, estimate what proportion of staff-time is dedicated to the activities. Further examples can be found in the manuals of each organization.

If, in your opinion, there are errors in the response, you should contact the respondent again to ascertain that the information is correct. If you make changes or corrections, always do so in consultation with the respondent. Add a small note to the survey in which you show what changes you have made. Indicate whether the respondent agreed with these changes.

Pay special attention to:

- Project/Programme section on family planning of the NGO, government and corporation surveys
  - Only expenses made in 2013 are included for both recurrent expenses and capital investment
  - Only expenses made for the local benefit should be included. For example, a program which bought condoms abroad but distributed them within the country should be included, but costs related to the purchase of condoms abroad and which are distributed abroad are not of interest.
  - Only expenses for family planning are included
  - Make sure that the total amount equals recurrent expenses plus capital investment

D 7. Amount spent/dispursed by your organisation for family planning in this project/programme in 2012:

Total Amount (A+B):	250,000
Of which: A. Recurrent expenses	200,000
B. Capital investment	50,000

- Make sure that all percentages add up to 100% where indicated
- Make sure that the totals of the Recurrent Expenses and Capital Investment make sense i.e. the amounts mentioned in the different categories (or sub-categories) add up to the total:

**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 D 8.1- D 8.11 can be found in the manual

Expenditure by services

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



*If any of the information is not answered correctly, please refer back to the respondent to solve the issue! Kindly keep the project staff informed on the progress of the surveys. Once all issues are solved and the surveys are completed, you can send the final surveys.*

## 4. Definitions of terms used in the surveys

### **Capital Investment:**

The acquisition of a capital good, also referred to as durable goods, which are used in the production of 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.*

### **Domestic sources:**

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

### **Expenditures:**

The amount of money that has *actually been spent/disbursed* by your organisation for the project/programme in the given year. ***Include expenditures made both locally and abroad which benefited local family planning projects/programs or activities***

**Financial year (FY):** the period when the accounting year starts. Figures for 2013 should be included. If you are reporting in FY (as opposed to calendar year), please include family planning disbursements made from 1 July 2012 and onwards. For example: FY July 2012-June 2013, September 2012-August 2013, December 2012-November 2013, February 2013-January 2014, April 2013-March 2014, June 2013-May 2014 can all be included. In case the financial year started before July 2012 OR after 1 July 2013, this should not be included and is considered to be FY 2012 (for any start date before July 2012) and FY 2014 (for start date July 2013 and onwards).

### **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.

### **Injectable:**

Form of contraception injected into a muscle to prevent pregnancy. Examples include Depo-provera (providing protection for 12 weeks) and Noristerat (providing protection for 8 weeks).

### **International NGO (Non-Governmental Organisation):**

Private not-for-profit organisation which operates *in more than one* country.

### **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.

### **Intrauterine Device:**

An intrauterine device (IUD) is a form of long-acting reversible contraception in which a T-shaped (copper, hormonal or other) device is inserted into the uterus.

### **National NGO (Non-Governmental Organisation):**

Private not-for-profit organisation which operates *exclusively in one* country.

### **Own income:**

Any income generated from own sources e.g. contributions, profits, user fees, interest earned on endowments, or forms of cost recovery.

### **Project/programme expenditures:**

All expenditures directly attributable to a project or programme relating to (for instance):

- transport
- communication
- training and IEC materials
- contraceptives
- salaries of project personnel
- rent of the building, electricity

### **Standard Days Method**

Standard Days Method (SDM) is a method to prevent pregnancy by tracking the menstrual cycle and abstain from unprotected vaginal intercourse during the most fertile days.

### **Umbrella organisation:**

A coordinating institution/agency that does not implement its own activities, but *only channels* funds.

### **Recurrent expenses:**

Recurrent expenses are those which 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.*

## **5. Preparation of the report**

*Once you have received all of the surveys or when the deadline of the data collection is approaching, please make an evaluation report (of approximately 3-5 pages) specific for family planning which should contain at least the following topics:*

- \* **Relevant organisations:** an overview of the relevant government departments and national NGOs to which surveys were sent.
- \* **Response:** which organisations replied and which ones did not reply. If possible, give the reason for their inability to cooperate.
- \* **Quality and coverage:** give an overview of the quality and coverage of the data.
- \* **Problems:** give a description of the problems you encountered regarding the data collection.
- \* **Private Sector:** if possible, include information on the role of the private sector as it relates to family planning activities in your country.
- \* **Relevant publications:** if possible, list three most recent publications on family planning activities in your country.
- \* **Suggestions for strengthening the monitoring of family planning activities:** we welcome your ideas or suggestions in order to improve the monitoring of financial flows.

*Please be as specific as possible!*

The report and surveys should be send to NIDI for further data processing and validation.

***We would like to thank you in advance for your kind co-operation. If you need clarification or further information, please contact the project staff at [ResourceFlows@nidi.nl](mailto:ResourceFlows@nidi.nl)***

## 6. Categories and examples of family planning activities

Category:	Examples of projects, programmes and activities:
<b>1. Family planning costs to include:</b>	<b>Examples of category 1:</b>
<b><i>Internal service staff costs (for direct service provision)</i></b>	
<ul style="list-style-type: none"><li>• Service staff costs (e.g. salaries) made related to the direct purchase/provision of personal services, such as inpatient and outpatient FP services. Salary costs NOT related to providing a FP service (e.g. operational management of a FP program) should be included under C 8.9 Program Management.</li></ul>	<ul style="list-style-type: none"><li>• Family planning projects</li><li>• Family planning consultation</li><li>• Supplying condoms</li><li>• Family planning information systems</li><li>• Rent, electricity of family planning clinic</li><li>• Pamphlets, books, articles or other educational/advertising methods informing individuals or communities about family planning including the ink, paper or other costs related to these items.</li><li>• Contraceptive procurement, warehousing and distribution</li><li>• Family planning training</li><li>• Salaries and incentive pay associated with family planning personnel</li><li>• Capacity-building for family planning services</li><li>• Hiring experts for providing FP services (outsourcing)</li><li>• Staff travel expenses</li><li>• Focused efforts to ensure good quality care, including supervision and assessment</li></ul>
<b><i>Outsourcing of services</i></b>	
<ul style="list-style-type: none"><li>• Costs related to the outsourcing of FP inpatient or outpatient services.</li></ul>	
<b><i>Contraceptives, medicine &amp; other consumables (retailed and provided)</i></b>	
<ul style="list-style-type: none"><li>• Purchase/provision of consumables such as contraceptives (e.g. implants, IUDs, condoms, pills, etc.), medicine (e.g. painkillers) or other consumables (e.g. cotton, gloves, gauze, antiseptic, etc.). It may include medicines in case they are related to FP. This category exclusively implies the delivery of the good.</li></ul>	
<b><i>Family Planning Information, Education and Communication (IEC)</i></b>	
<ul style="list-style-type: none"><li>• Purchase/provision of collective information, education and communication products such as media and advertising campaigns.</li></ul>	
<b><i>Policy Development and Advocacy</i></b>	
<ul style="list-style-type: none"><li>• Any policy work that is related to FP, sensitization of law makers regarding the importance of FP laws and policies and the formulation itself of FP laws and policies.</li></ul>	
<b><i>Management Information System (MIS) and Health Information System (HIS)</i></b>	
<ul style="list-style-type: none"><li>• Purchase/provision of information for management (associated to performance monitoring and assessment) and on health condition (e.g. morbidity and mortality) and health system processes (utilization/service provided and resources involved)</li></ul>	

### ***Monitoring, Evaluation and Research***

- Purchase/provision of routine and one-of-a-kind FP surveillance, evaluation or research services.

### ***Capacity building/ Training***

The strengthening of capabilities to plan, develop, implement and maintain effective FP services, including in-service training, initial training and refresher training.

### ***Programme Management***

Involves decision making 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 the staff.

### ***Operational costs***

- Expenses associated with administering an organization on a day to day basis. Some operational costs are fixed, meaning that each cost is identical from month to month, such as rent. However, other operational costs are variable and may go up or down from month to month, such as utilities.

### ***Other Programme and Systems Costs***

- Purchase/provision of services which are not included in previous categories or cannot be separately identified in any of them.

## 2. Family planning capital investment:

*Investment in durable goods which last more than 1 year and which are used for family planning purposes*

- Infrastructure and upgrading of facilities
- Purchase of long-lasting equipment

## Examples of category 2:

- Construction or renovation of facilities used for family planning methods or services e.g. warehouse, doctor's office, etc.
- Cars or other means of transport bought to serve family planning purposes
- Computers, software or other information systems e.g. electronic medical records
- Office furniture such as desks, chairs, etc.
- Medical equipment such as forceps, speculums, hospital beds, imaging and information displays/screens, medical lighting, MRI and other screening tools, etc.