



Family Planning and Immunization Integration Working Group

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Overview

Although family planning (FP) services for adult women (and men) and immunization services for infants and young children are critical components of primary health care, with overlapping contact opportunities during the first year postpartum and a shared goal of improving the health of the mother (and father) and baby, these services are often siloed as separate interventions. FP and immunization service integration is considered a “promising” High-Impact Practice (HIP) for FP.

This brief highlights key achievements of, lessons learned by, and recommendations from the FP and Immunization Integration Working Group during the over eight years since its inception.

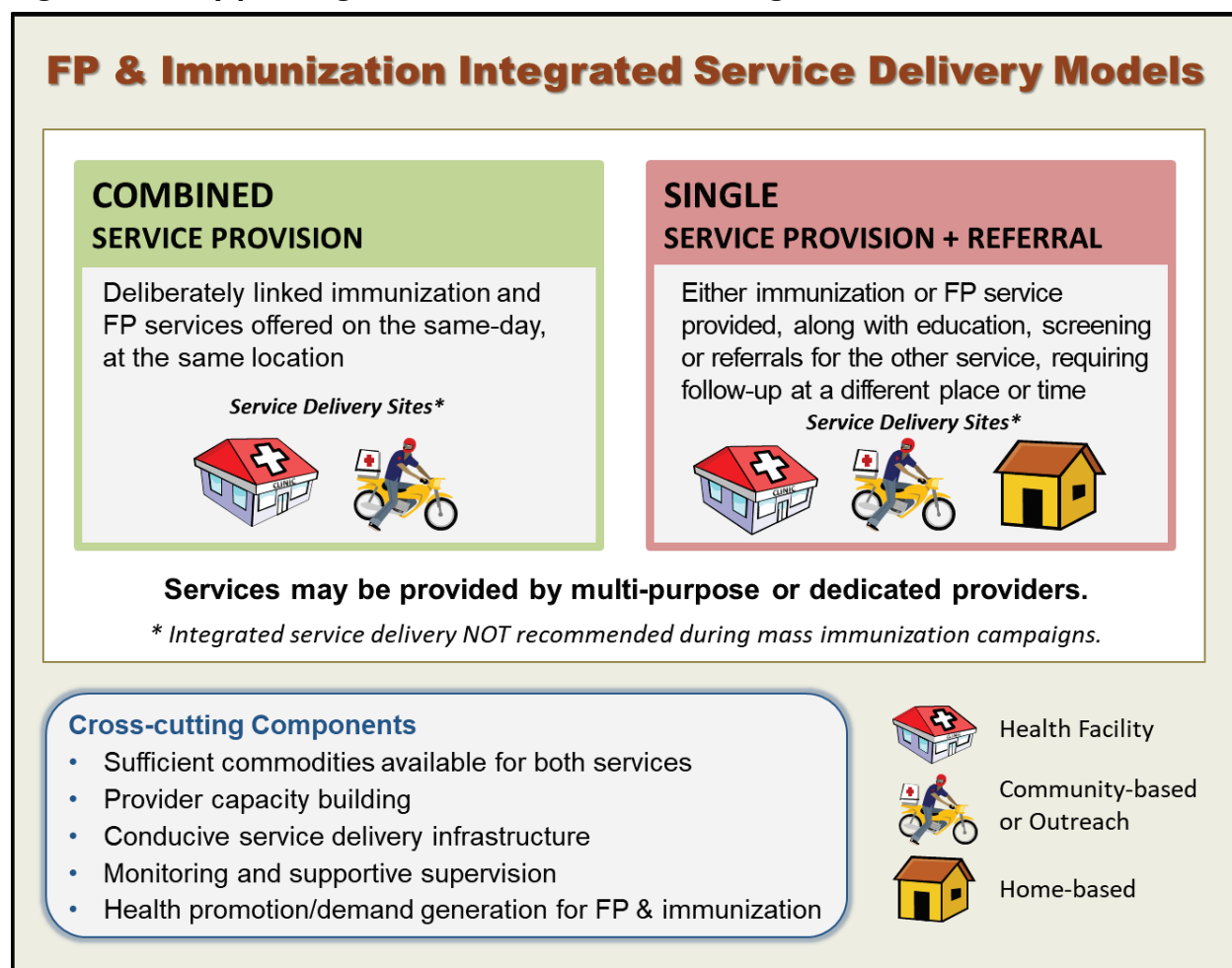
History of Working Group

The Family Planning (FP) and Immunization Integration Working Group formed in 2010—under the leadership of the USAID-funded Maternal and Child Health Integrated Program (MCHIP), and PROGRESS project. The Working Group’s mission was to share lessons and guidance from the field and research optimal ways to link or combine FP and immunization services in facilities and communities, in order to enhance both the reach and the effectiveness of these two interventions. The Working Group was created to serve as a coordination and discussion platform, providing a framework and repository for evidence, guidelines, and tools related to integration of routine immunization and family planning services. Membership is open to anyone working and interested in immunization; maternal, newborn, or child health; FP; or related fields. Most recently, the Working Group’s co-chairs were Pathfinder and the Maternal and Child Survival Program (the follow-on from MCHIP, [MCSP]) —funded by USAID and led by Jhpiego.

Vision and Models for Service Integration

The Working Group’s vision was to identify and promote effective, sustainable models of FP and immunization integration. Two models (Figure 1) for FP and immunization service integration were identified in the HIP brief: 1) **combined service provision** (offering both services at the same location on the same day); and 2) **single service with referral** (offering referrals for FP services during immunization visits for completion on a different day and/or at a different location.

Figure I. Family planning and immunization service integration models



Source: High-Impact Practices in Family Planning (HIP). 2013. Family planning and immunization integration services: reaching postpartum women with family planning services. HIP website. <https://www.fphighimpactpractices.org/briefs/family-planning-and-immunization-integration/>. Accessed March 15, 2019.

Since its inception, the Working Group focused on the following:

- Identifying effective models for the sustainable integration of services
- Improving accessibility to, and dissemination of, key resources and program learning
- Supporting more proactive efforts to link organizations working on FP/immunization activities and connect field staff
- Promoting engagement and learning exchange at national and regional levels
- Identifying and engaging champions at national, regional, and global levels
- Advocating for documentation of the effect of integration on immunization outcomes
- Helping to shape the research agenda
- Advocating for additional funding in for service integration
- Encouraging active, ongoing involvement of Working Group members, including additional immunization colleagues

Key Partners and Participants

The Working Group has most recently been co-chaired by MCSP and Pathfinder and meets semiannually in Washington, DC. Meetings bring together participants to provide technical and country updates, share resources and tools, and devote time to subgroup work to advance deliverables for the key areas of focus. Over the years, active participants have included USAID, World Health Organization, FHI 360, John Snow International, IntraHealth, International Planned Parenthood Federation, the International Rescue Committee, Save the Children, K4Health, Pfizer, Population Services International, World Vision, and representatives from other donors, implementing partners, and private sector groups. During 2017–2019, the FP and Immunization Integration Working Group and the Maternal, Infant, and Young Child Nutrition (MIYCN) and FP Integration Working Group (MIYCN-FP) convened several joint meetings.

Since its inception, the FP and Immunization Integration Working Group has hosted 14 meetings, including two joint meetings with the MIYCN-FP Integration Working Group. The number of participants and institutions represented at the meetings grew steadily over the years. For example, 29 participants from 15 institutions attended the first meeting in 2010, and 64 participants from 27 institutions attended the last FP and Immunization Integration Working Group meeting (not joint meeting) in 2017.

Community of Practice

The Working Group co-chairs facilitated an online community of practice to share key documents and event announcements. As of early 2019, the community of practice had 611 members representing 45 countries.

Subcommittees

The Working Group consisted of several subcommittees charged with advancing specific domains related to FP and immunization integration. These subcommittees focused on the following areas: **country engagement; global technical leadership; and monitoring and evaluation and research.** These subcommittees tracked projects working on FP and immunization integration at country level, developed advocacy guidance, gathered project materials to include in the toolkit, developed a behavior table for FP and immunization integration, and developed and updated an FP and immunization monitoring and evaluation brief. Subcommittee activity waned over the last few years as major accomplishments were achieved, linkages were made with the MIYCN-FP group, and joint meetings were convened.

Lessons Learned

Through dynamic collaboration with active partners over the last 8+ years, the Working Group has generated the following lessons learned to promote FP and immunization integration across primary health services:

- Integrate FP during routine immunization services, rather than during mass vaccination campaigns.
- Need evidence of win-win for both FP and immunization to drive progress; collect data on the impact of integration on immunization services.
- Political and community support are critical to the success of service integration.
- Health system issues (e.g., commodities, staffing, infrastructure) must be addressed.
- Referral messages should be kept simple.
- Ensure that clear and effective referral systems are in place.
- Experience with the integration of FP and immunization can contribute to a broader dialog on client-centered care, primary health care, and universal health care.

- While documentation of integration is critical in implementation research, a lighter touch may be needed once models of integration are taken to scale, though there is a remaining learning agenda on how to most effectively yet “lightly” achieve an aim of measuring that integration is indeed occurring.
- “Reducing missed opportunities” provides an area for convergence between immunization and FP stakeholders—this language resonates for both (e.g., presentations on “missed opportunities for immunization” surveys organized by the immunization group at World Health Organization).
- Ground service integration approaches in an understanding of local context and conduct formative inquiry.

Major Accomplishments and Key Legacy Resources

- **Family Planning and Immunization Integration HIP Brief:** The Working Group worked closely with USAID and implementing partners to develop the “Promising” HIP Brief on Family Planning and Immunization Integration Services: Reaching Postpartum Women with Family Planning Services,” which is available on the HIP for FP [website](https://www.fphighimpactpractices.org/briefs/family-planning-and-immunization-integration/). <https://www.fphighimpactpractices.org/briefs/family-planning-and-immunization-integration/>
- **Family Planning & Immunization Integration K4Health Toolkit:** A major accomplishment of the FP and Immunization Integration Working Group was the development of the Family Planning & Immunization Integration Toolkit, which is available on the K4Health [website](https://www.k4health.org/toolkits/family-planning-immunization-integration). This toolkit shares a variety of background documents and tools for linking routine immunization with FP services to improve maternal, infant, and child health outcomes, with a particular focus on evidence-based advocacy; service delivery implementation tools; social and behavior change communication; monitoring, evaluation and research; and country experiences. It is accessible for public use. <https://www.k4health.org/toolkits/family-planning-immunization-integration>
- **Global online forum:** In 2011, the Working Group hosted a two-week long global online discussion forum on “Integrated Service Delivery of Immunization and Family Planning.” The purpose of the forum was to highlight opportunities for integrated programming, present recent developments in FP and immunization integration, and discuss how to make integrated service delivery a win-win for both immunization and FP services.

Additional accomplishments include:

- Developing and disseminating an advocacy brief on FP and Immunization integration
- Developing and disseminating a bibliography on FP and immunization to highlight key research and program experiences
- Presenting at conferences and meetings (e.g., Core Group annual meetings, Global Health Conference, US government-sponsored FP-MNCH-Nutrition Integration Consultation, International Conference on Family Planning, and Global Health Mini-Universities)
- Cohosting webinars on FP and immunization integration with the Implementing Best Practices Initiative and Network for Africa
- Contributing to HIP’s map, which presented FP and immunization initiatives by country
- Contributing to HIP’s evidence repository, which outlined results from key studies

Contributions to the Evidence Base

In the years since the Working Group was formed, the evidence base on integrating FP and immunization has grown to include the following:

- Greater documentation of effect on immunization services (Rwanda, Liberia, Malawi, Philippines, etc.)
- Costing FP and immunization integration interventions (Rwanda)
- Learning around the “how” of integration, variety of integration models, systems considerations (Liberia)
- Integration indicators captured within monitoring and evaluation efforts (Liberia)

Future Directions

In January 2019, a meeting was convened with key stakeholders involved in the FP-Immunization Integration Working Group and the MIYCN-FP Integration Working Group. Participants recommended the merging of the two groups, given their natural convergence across technical areas, target populations, and timing of interventions, which have brought them together several times since their establishments. A new MIYCN-FP-Immunization Community of Practice is currently being launched to formalize the merger of the two groups.

Previous discussions in each group have converged around health systems considerations, operationalization of integration, and monitoring and evaluation of integrated services (including the experience with home-based records). This presents an exciting opportunity to continue to collaborate and share opportunities and challenges associated with expanding integrated FP, nutrition, and immunization services into broader life-course service delivery—from communities, to health facilities, from regional- to national-level advocacy.

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