



Executive Summary

Thirteen BMGF family planning (FP) grantees and sub-grantees in the Democratic Republic of Congo (DRC) responded to the third round of an FP CAPE survey to track the impact of COVID-19 on their activities. This brief includes descriptive information from all thirteen grantees and service statistics from four grantees.

Grantees resumed some of the activities that they postponed in March due to the pandemic, while respecting COVID-19 prevention measures. For example, they resumed advocacy activities, held workshops and trainings, and supported service delivery activities and mass FP campaigns. Grantees incorporated COVID-19 precautions and educational materials into their trainings and workshops and created messaging about COVID-19 for television.

Grantee service statistics shows the number of new FP users decreased between February and April, rebounded in May, and decreased again in July.

In Kinshasa, the number of FP methods distributed by health facilities (FOSA) and community-based distributors (CBD) declined between January and May, but increased in AcQual III-supported facilities in June. EngenderHealth and Jhpiego facilities saw declines in the number of clients between May and July.

In Kongo Central (KC), the number of FP methods distributed by FOSA fluctuated between April and June, while most methods distributed by CBD increased slightly between May and June.

Stockouts of most FP methods in Kinshasa increased between April and May, then decreased in June. FOSA in KC experienced increased stockouts of most methods between April and June.

DRC's COVID-19 status*

- ▶ # of positive cases: 10,659
- ▶ # of deaths: 272
- ▶ # of provinces affected: 21/26

August 2020 reopening:

- ▶ Reopening of churches
- ▶ Resumption of stadiums, night clubs and events halls
- ▶ Resumption of regular interprovincial migratory movements
- ▶ Reopening of ports, airports and borders

Data Summary

When comparing data trends from each source, please note the differences in geographies and the number of FOSA reporting data. Y-axes do not align between graphs in most cases. Other information to note:

Grantee	# Provinces (26 total)	# FOSA reporting (Jan.-June/July 2020)
AcQual III	2	77 (Kinshasa) 34 (KC)
DKT	18	FOSA and community-based distribution data are combined
EngenderHealth	1	67 (Kinshasa)
Jhpiego	1	16 (Kinshasa)

*As of September 29, 2020

Improved Enabling Environment (Advocacy, Capacity Building, Data Generation and Use)

Stopped activities	<ul style="list-style-type: none"> - PMA stopped holding/attending technical advisory group meetings.
Continuing activities	<ul style="list-style-type: none"> - AFP is continuing to track commitments made by government at the 4th National conference on the repositioning of family planning and to advocate for radio stations to provide free airtime for FP messaging in Lualaba province. - VillageReach continues to develop and validate their mapping of the contraceptive supply chain and to provide technical support to PNSR and PNSR's preparation for the review of the coordination of investments in the contraceptive supply chain in Kinshasa. - GEAS completed data analyses, exchanged results between the Kinshasa School of Public Health and Johns Hopkins University, and is preparing the report of their results. - PMA continued with the analyses and production of their online Dashboard, and the preparation of briefs and posters of Phase 1 results and held their results dissemination meeting on September 16, 2020.
Activities previously stopped that were able to resume	<ul style="list-style-type: none"> - AFP resumed some of their advocacy activities including advocating for the government to allocate and release funds for the purchase of contraceptives and advocating for the government in three provinces (North Kivu, South Kivu, and Lualaba) to make official declarations in favor of FP by October 2020. Their support of the preparations for the final evaluation of the 2014-2020 National Strategic Plan and the creation of the 2021-2025 National Strategic plan resumed in July 2020. - The annual workshop for provincial CTMP scheduled for April 2020 was held in July 2020. - Track 20 held their previously postponed consensus workshop in July.
Adaptations and new activities	<ul style="list-style-type: none"> - AFP supported the promotion of the reproductive health for mothers, newborns, adolescents and nutrition norms in the context of COVID-19 in Kongo Central in July. - PMA created a new survey about COVID-19 - https://app.powerbi.com/view?r=eyJrIjoiM2RmYzk0ODAtZjZjMC00NDY4LWE3ZjAtNjU5MjEwNmMyZjA4IiwidCI6IjI2ZWY3ZmQyLTJhN2YtNDEzNS1hMmU0LWRIOWFjZjE2OGIyYSIsImMiOiF9 <p>Adaptations due to COVID-19</p> <ul style="list-style-type: none"> - AFP and PMA moved in-person meetings/trainings online or held these events while respecting COVID-19 health and safety regulations.
Challenges	<ul style="list-style-type: none"> - PMA experienced difficulties with the internet when holding trainings. - VillageReach experienced delays and spacing of deliverables due to the overlap of activities towards the end of confinement and before lifting of the state of emergency. - AFP found it challenging to follow safety guidelines for in person workshops and meetings (i.e., wearing masks, physical distancing, hand washing).

Effective Service Delivery and Demand Generation Models

Stopped activities	<ul style="list-style-type: none"> - DKT postponed its joint supervisions of FOSA with PNSR and the Health Zones until October.
Continuing activities	<ul style="list-style-type: none"> - DKT continued to develop an E-Learning module in collaboration with their IT team and continued their normal service delivery activities, while respecting COVID-19 safety guidelines. - Bien Grandir continued to support the broadcasting of the family life education program through EDUC-TV by the Ministry of Primary and High Schools. They were also able to conduct an audit of program data of organizations involved in the implementation of Bien Grandir's pilot phase. - Jhpiego held a meeting to discuss the adoption of a sustainability plan with health zones and FOSA in July, a day of reflection with health sciences schools and the D6 in August and reviewed the D6's monitoring data. - AcQual III continued to support routine monitoring meetings of health zones, offered services in FOSA and by CBD, collected routine data and created reports.
Activities that were previously stopped that resumed	<ul style="list-style-type: none"> - DKT's postponed April meetings, such as training of clinic providers to provide services to youth in Kinshasa, training of youth providers in Kasai Orientale and Sud Ubangi, will take place in September while taking precautions to prevent the spread of COVID-19 (i.e., hand washing, mask wearing). - Jhpiego halted their provider trainings in March but were able to resume in May. - In August, Bien Grandir held a meeting with community-based organizations to restart postponed activities and were able to do so with out-of-school very young adolescents. However, they will wait to resume activities with students until the school year begins. - EngenderHealth resumed its mobile family planning clinic work and resumed support of service delivery at their supported sites. They were also able to resume their meetings for monitoring and planning new activities. - Tulane's resumed some of their institutionalization activities, a subset of activities under AcQual III and PROMIS. They restarted some of their supervisions and providing supplies to nursing schools in July 2020. In August, they resumed their mass campaigns.

Effective Service Delivery and Demand Generation Models Continued

Adaptations and new activities

- DKT trained their Bees on COVID-19 and its prevention. They also joined the COVID-19 group dedicated to the quick response of COVID-19.
- AcQual III produced two pilot programs for community FP service delivery in the context of COVID-19: Kinshasa (July 2020) and KC (August 2020). After these pilot programs, they decided to continue with Lelo PF activities while respecting COVID-19 measures. Campaigns not held in April-June will be held over the next four months.
- Tulane held workshops to produce guidance for sexual and reproductive health (SRH) and FP services during COVID-19 under their institutionalization activities. They trained nursing students and providers on these new guidelines before campaigns and provided equipment to help slow the spread of the virus.
- Bien Grandir prepared and recorded educational programs for very young adolescents so that lessons could be taught from a distance. They also supported communication activities that supported behaviors for the prevention of COVID-19 and the promotion of SRH of adolescents. They plan to do a formative study on the EDUC-TV approach.
- EngenderHealth provided handwashing kits and masks to their local NGO partner, REEJER.

Adaptations due to COVID-19:

- DKT and AcQual III added messaging about COVID-19 to their family planning messaging.
- EngenderHealth is training providers on self-injection of DMPA-SC and plans to also train CBDs. They are also using mobile and internet platforms (e.g., WhatsApp) for data collection and program monitoring. Individual site supervisions have been replaced by group supervisions at the BCZS sites to deal with common problems and avoid repeated site visits, while respecting COVID-19 spread prevention measures. They have also decreased the number of FOSA quality evaluations.
- During family planning campaigns Tulane's institutionalization sub-project briefs participants and students on COVID-19, provides COVID-19 protective equipment, and practices disease spread prevention precautions during service delivery activities.
- AcQual III's administrative activities resumed, with strict respect to COVID-19 prevention measures. They adapted their family planning messaging to include COVID-19.
- Under their institutionalization activities, Tulane shifted the timing of their family planning campaigns.

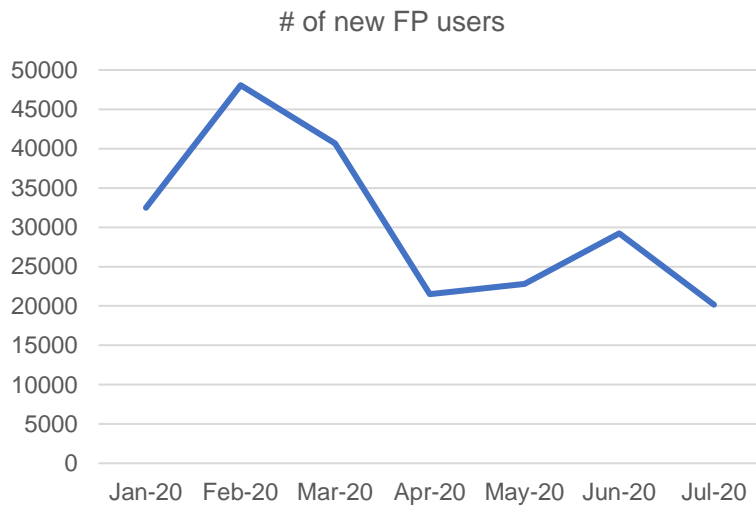
Challenges/Negative impacts

- All grantees experienced disruptions in activities due to the pandemic.
- EngenderHealth and AcQual III noted a noticeable decrease in use of health and FP services.
- DKT noticed that, as compared to the beginning of the pandemic, clients are returning to clinics for FP services.
- AcQual III noted difficulties in acquiring and the cost of COVID-19 protective equipment.

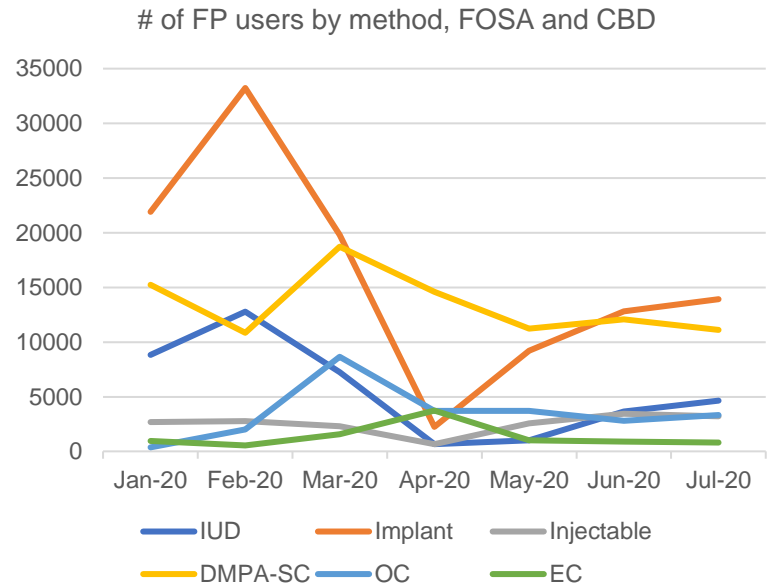
FP new acceptors and method use

DKT data show a decline in the number of new users of FP among all women and a decrease in the number of users by FP method between February and April, which corresponds to the first month and a half after the lock down due to COVID-19. The number of new FP users and users by method looks to have rebounded from May, particularly for IUD and implant users who also saw the biggest drops in April.

DKT, new FP user (all women)



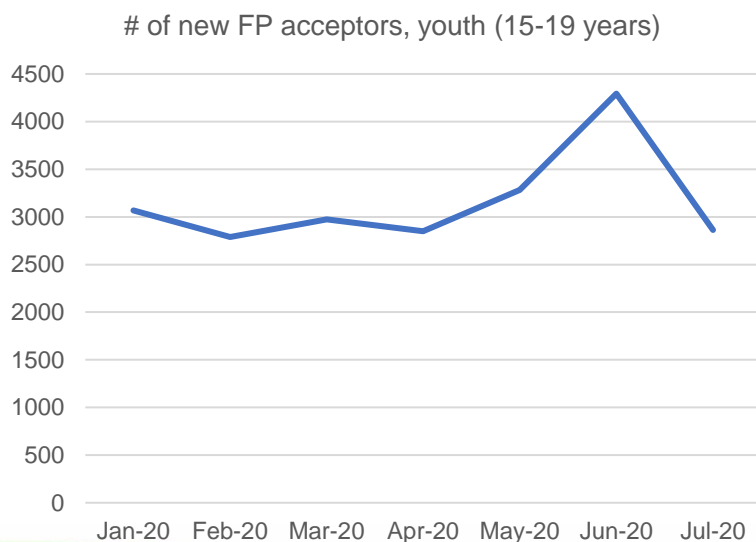
DKT, FP method use (all women)



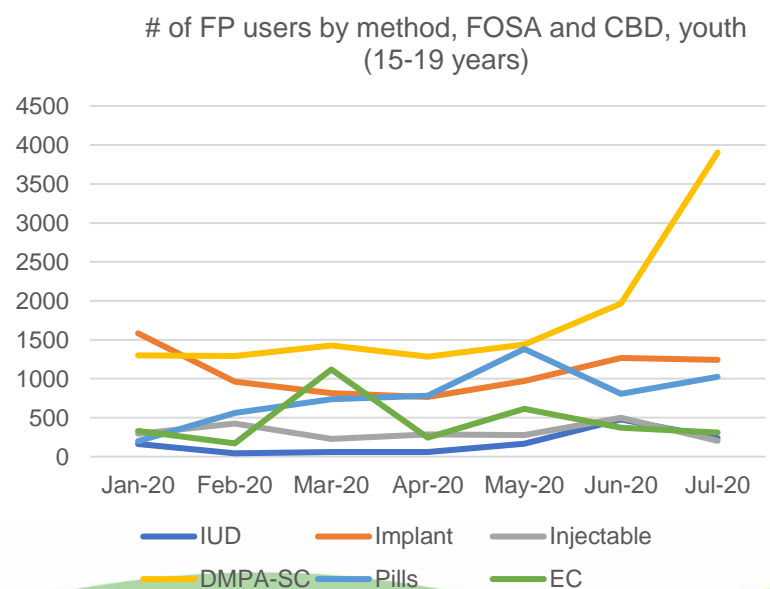
FP new youth acceptors and method use

DKT data on youth show relatively stable numbers of new youth FP acceptors from January through April, increasing in May, and peaking in June followed by a sharp decline in July. While the number of users by method fluctuated between January and July, the number of users by method as of July was similar to January levels, with the exception of a sharp increase in use of DMPA-SC and a smaller increase in pills.

DKT, new FP user (youth)



DKT, FP method use (youth)



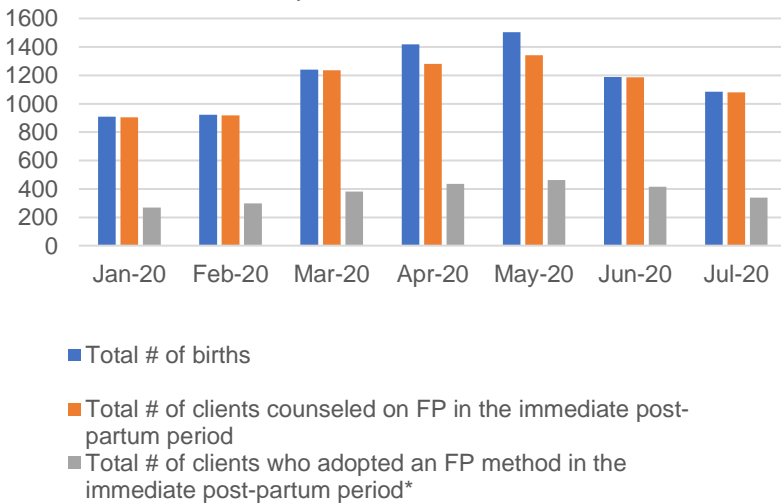
FP Counseling, and FP adoption, Kinshasa

Jhpiego data continue to show that about one-third of post-partum women counseled on FP adopted an FP method. Among post-abortion care clients, there was a noticeable decrease in clients in April and May, during the COVID-19 lock down period.

EngenderHealth data show an overall steady decrease in the number of clients between January and July.

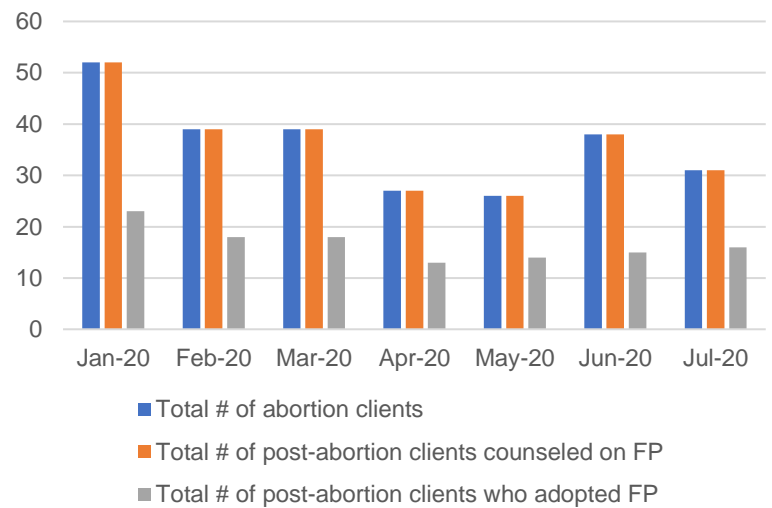
Jhpiego, Post-partum

of post-partum clients counseled on FP and # who adopted FP, Kinshasa FOSA



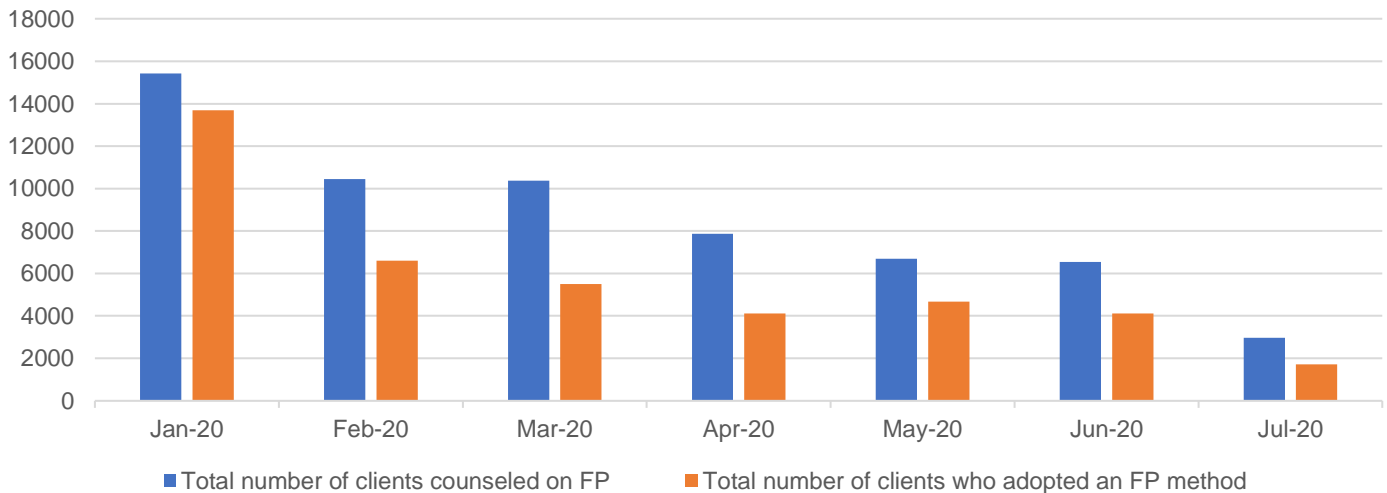
Jhpiego, Post-abortion

of post-abortion clients counseled on FP and # who adopted FP, Kinshasa FOSA



EngenderHealth

Number of clients counseled on and adopting FP methods, Kinshasa FOSA



*Post-partum FP adoption includes lactational amenorrhea method

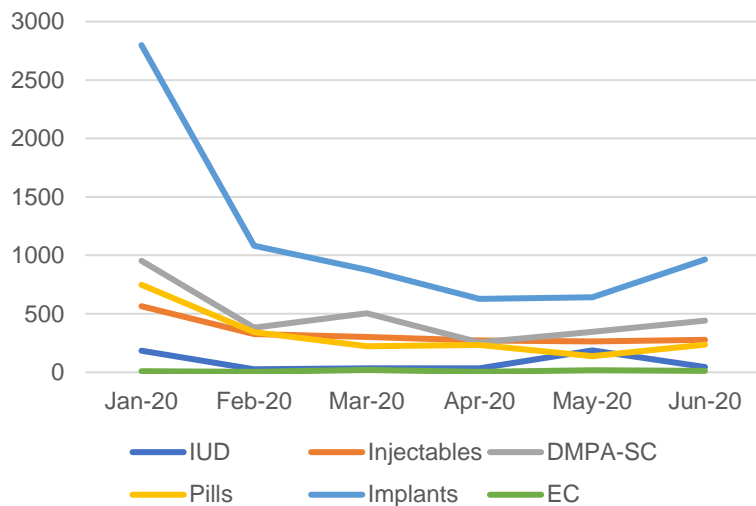
FP Method Use - Kinshasa FOSA and CBD

AcQual III saw declines in the overall number of methods distributed between January and May by FOSAs in Kinshasa and by CBD. The number of methods distributed by AcQual III CBD and FOSA show slight increases between May and June. EngenderHealth data show declines in the number of women using FP methods between May and July.

The number of post-partum FP users by method increased between January and May and is consistent with the increase in the number of births during that time period (see previous slide).

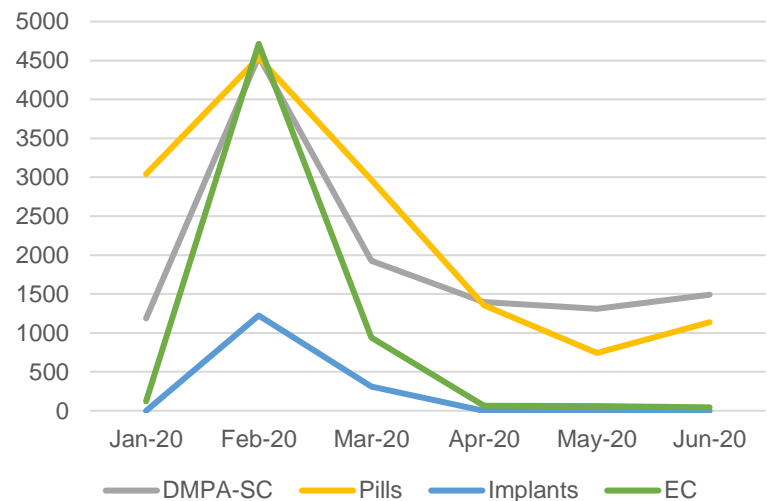
AcQual III, FOSA

of FP methods distributed by method, Kinshasa FOSA



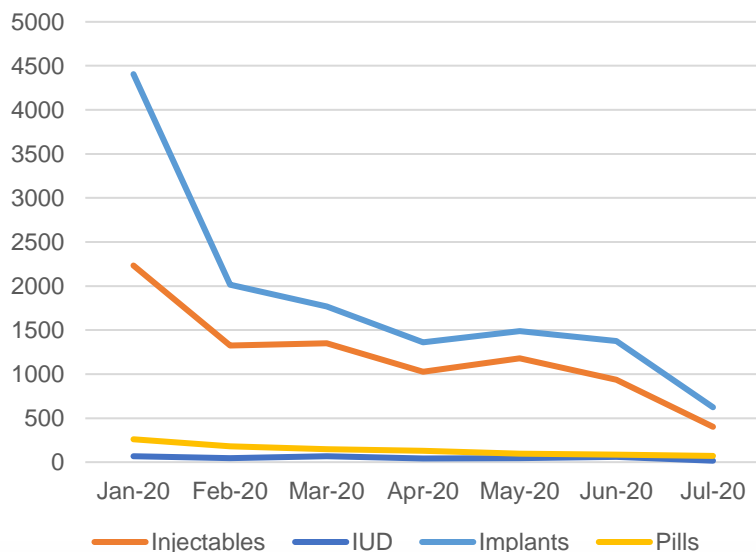
AcQual III, CBD

of FP methods distributed by method, Kinshasa CBD



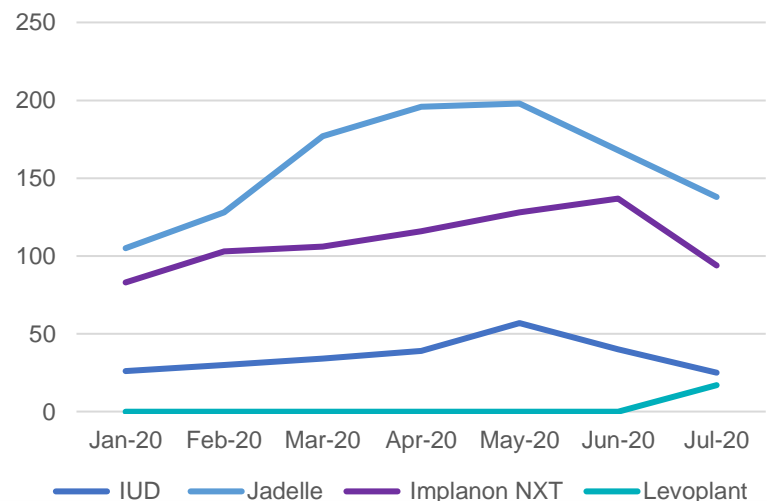
EngenderHealth, FOSA

of FP method users by method, Kinshasa FOSA



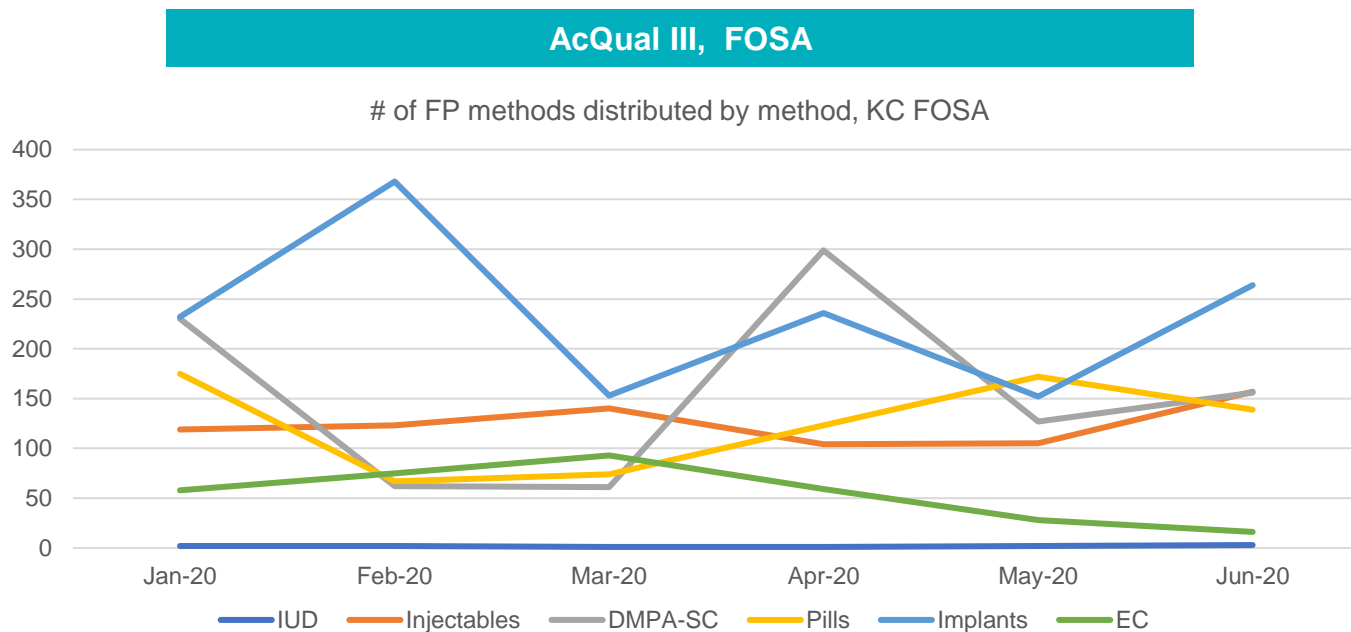
Jhpiego, FOSA/Hospital

of post-partum FP users by method, Kinshasa FOSA/hospital



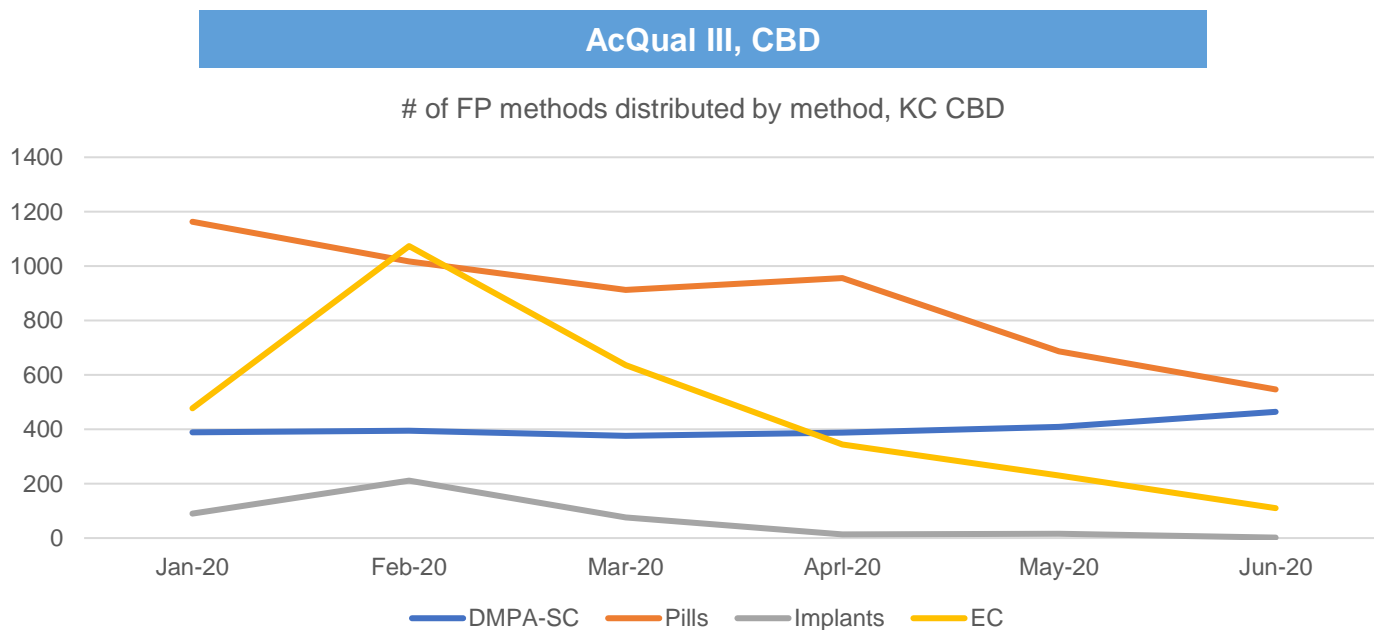
FP method use, Kongo Central FOSA

AcQual III data show fluctuation in method distribution between January and June with no clear overall trends.



FP method use, Kongo Central CBD

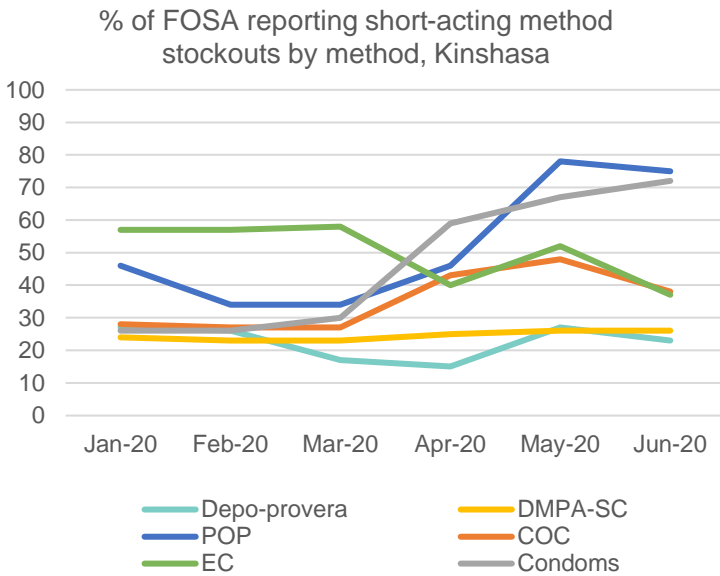
The number of implants, pills and EC distributed by CBDs decreased slightly between April and June. Distribution of DMPA-SC, however, increased slightly between May and June.



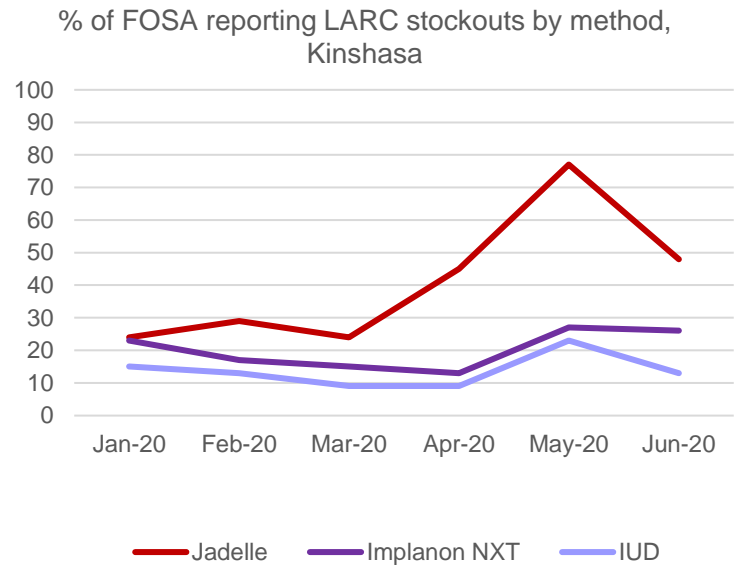
Stockouts*, Kinshasa

In general, stockouts of most FP methods increased between April and May and declined between May and June in facilities supported by AcQual III and EngenderHealth in Kinshasa. Stockouts remain high for progestin oral contraceptive pills (POP) and condoms in AcQual III-supported FOSA, for combined oral contraceptive pills (COC) and EC among CBDs, and for pills in EngenderHealth-supported FOSA.

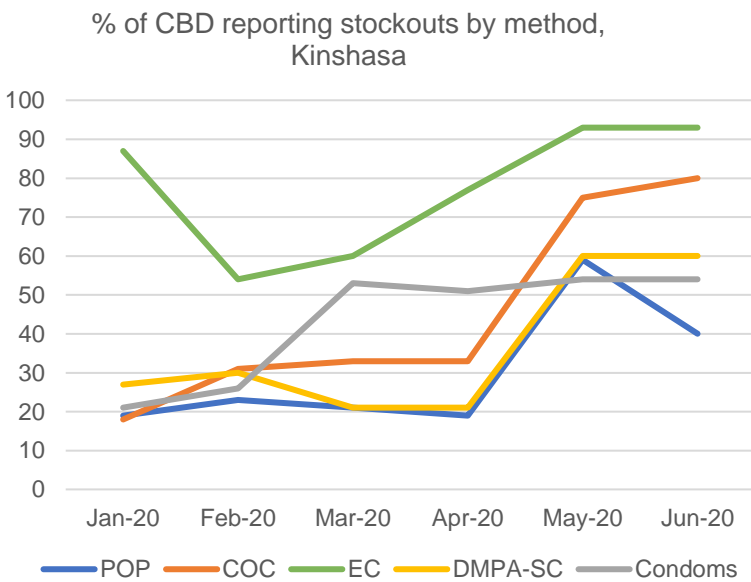
AcQual III short acting methods, FOSA



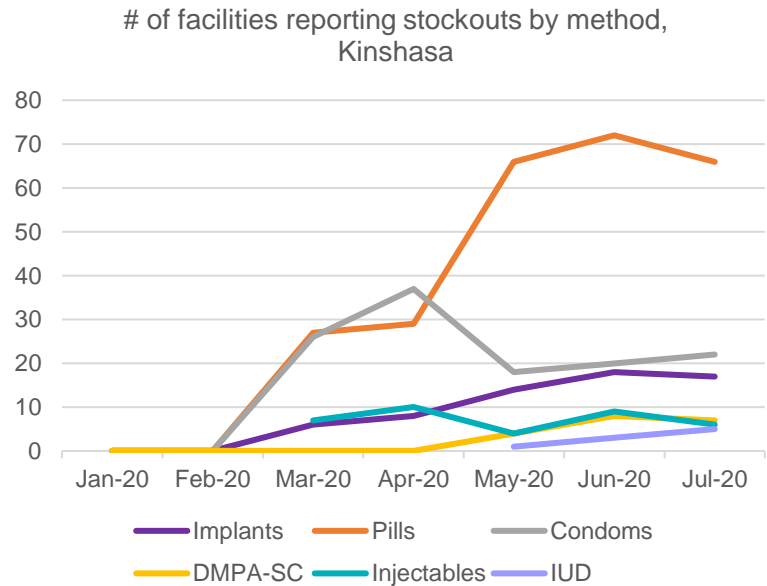
AcQual III LARC, FOSA



AcQual III, CBD



EngenderHealth, FOSA



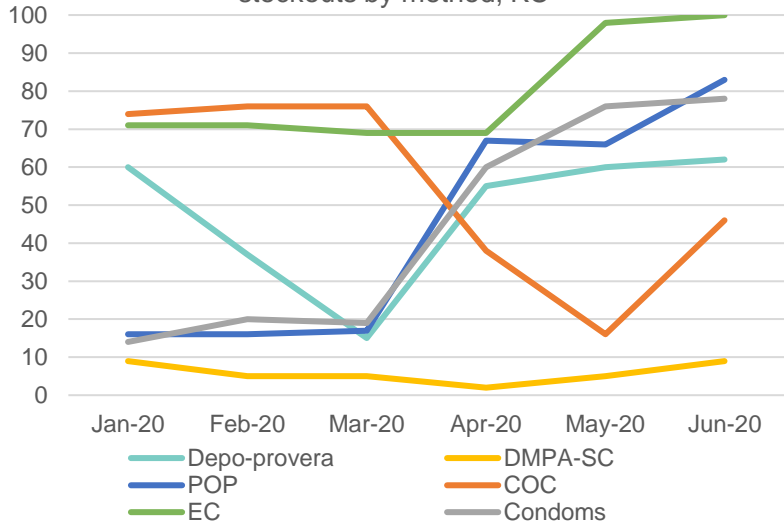
*Stockouts: A facility does not have any of a product in stock during the reporting month or ran out of the method during that month.

Stockouts, Kongo Central

FOSA in KC experienced increased stockouts of EC, POP, condoms and Jadelle between April and June. Most CBDs in Kongo Central reported stockouts of COC between April and June, although less CBDs reported stockouts of EC in June.

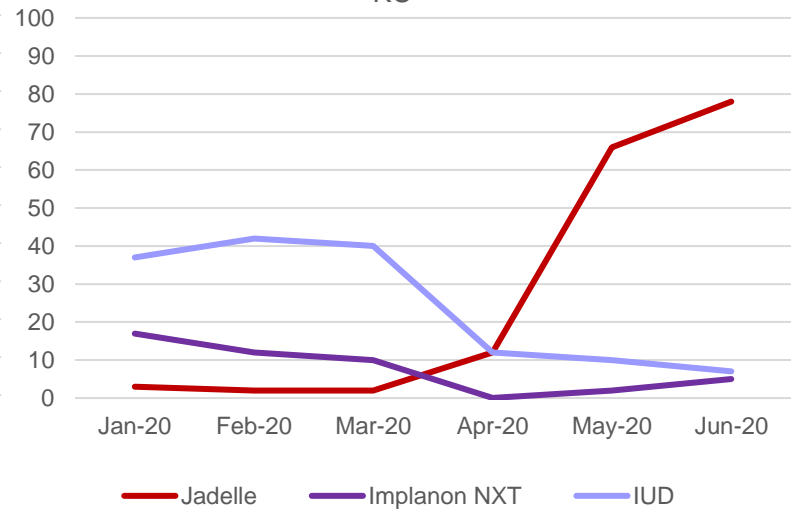
AcQual III short acting methods, FOSA

% of FOSA reporting short acting method stockouts by method, KC



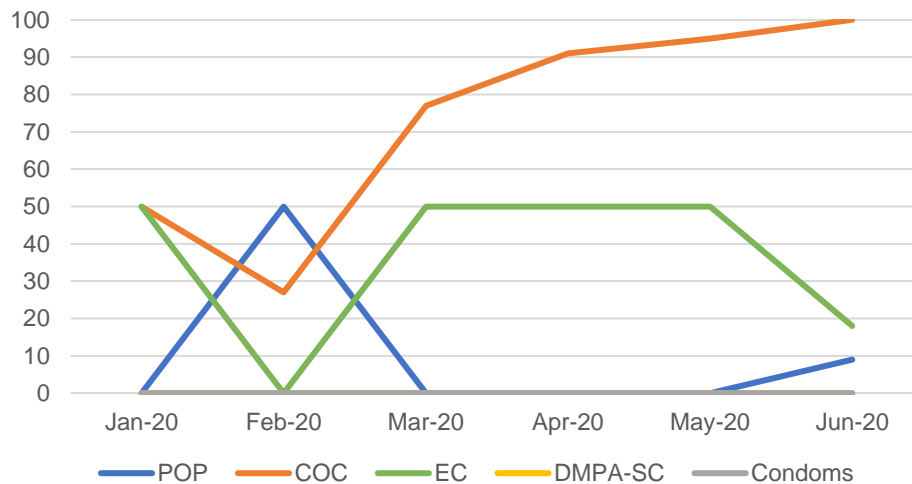
AcQual III LARCs, FOSA

% of FOSA reporting LARC stockouts by method, KC



AcQual III, CBD

% of CBD reporting stockouts by method, KC



This is the third of a series of planned updates on the impacts of the COVID-19 pandemic on the BGMF family planning portfolio in the DRC. We would like to thank all the BGMF FP grantees for their flexibility and timeliness in responding to our requests for data.