



# Disability Inclusion Helpdesk Report No: 138

Query title	Good practice examples on Value for Money incorporating consideration of equity in the analysis in Business Cases and Annual Reviews
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Query	To collect good practice examples from Business Cases (BCs) and from Annual Reviews (ARs) which show how equity can be incorporated into VfM analysis across a range of contexts that FCDO work in.
Enquirer	Equalities Impact Unit

Case Study: Scaling up Family Planning in Tanzania

### **Programme summary**

The <u>Scaling up Family Planning (SuFP) Programme</u> is a £55 FCDO million programme in Tanzania that is being implemented from 2017 to 2026. The Programme builds upon previous work by DFID to improve rural access to family planning by utilising an outreach model, delivering services, training rural health workers and ensuring that women in the hardest to reach parts of the country have access to a full range of family planning services.

This £55 million national programme aims to reach six million family planning users with comprehensive family planning services by programme-end, with continuing rural and urban outreach as well as under-serviced refugee camps and host communities. More specifically, this Programme intends to procure family planning commodities, strengthen the supply chain, and train public health providers. The Programme also targets greater access to family planning, better sexual and reproductive health information for youth and people with disabilities, and improved services for victims of sexual violence.

The Programme is implemented by three partners, Engender Health International, MSI Reproductive Choices and the United Nations Population Fund (UNFPA). It is implemented across 22 regions of Tanzania mainland and Zanzibar, in close collaboration with the Government both at national and local levels.

#### **Equity and VFM in SuFP**

The <u>Strategic Case</u> for SuFP highlights evidence and data gaps regarding the access of women with disabilities to family planning services. The Programme's decision to expand its focus areas to include women with disabilities is based on a recognition that it is likely women and girls with disabilities are currently excluded from, and neglected by, family planning services. Women and girls with disabilities are disadvantaged in access to services by their risk of lower literacy rates due to exclusion from education and stigma. This and other barriers are compounded by the lack





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of effort by service providers to understand their family planning needs and find cost effective ways to ensure they have access to family planning services. The Strategic Case accepts the need for innovation to target this underserved societal group.

The **Appraisal Case** places some emphasis on equity, acknowledging that the costs of delivering services to youth and people with disabilities can be higher (given the additional effort required to ensure youth and people with disabilities gain access to services), but accepting the additional costs are justified. Tanzania's family planning programme aims to reach the most marginalised rural communities and to expand coverage to women with unmet need.

The **Management Case** sets the expectation that the programme will monitor services provided to people with disabilities. Equity is not explicitly articulated across the VfM indicators; VfM Equity indicators on SuFP are as follows:

- Percent of young people reached through outreach services before they get pregnant.
- Proportion of people who are poor reached by the programme.
- Proportion of people with disability among people reached through outreach services.

The Programme also has an output indicator focused on the proportion of clients with disabilities reached with family planning services. This data is collected using the Washington Group questions. Using the data collected, the Programme was able to report in its 2024 Annual Review that is had exceeded the target for reaching people with disabilities. However, the Annual Review also reflected on disability data collection outside of the Programme and underscored a lack of relevant indicators in the health sector information system, suggesting that the system disincentivises effective integration of people with disabilities within routine services and limits reporting of services or lack of it to people with disabilities. Without better data, the Annual Review acknowledged there is still a way to go to integrate fully the provision of family planning services for people with disabilities into routine services. This finding reinforces the value of the Strategic Case focusing on women with disabilities despite evidence and data gaps.

### Key takeaways

- Data gaps exist regarding people with disabilities that can make establishing a 'do nothing' counterfactual and assessing feasible options difficult, but it is important that a lack of data does not preclude a focus on disability inclusion.
- Including a specific focus on people with disabilities in monitoring activities incentivises effective integration of people with disabilities in routine services.





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About Helpdesk reports: The Disability Inclusion Helpdesk is funded by the UK Foreign, Commonwealth, and Development Office (FCDO), contracted through the Disability Inclusion Team (DIT) under the Disability Inclusive Development Inclusive Futures Programme. Helpdesk reports are based on between 3 and 4.5 days of desk-based research per query and are designed to provide a brief overview of the key issues and expert thinking on issues around disability inclusion. Where referring to documented evidence, Helpdesk teams will seek to understand the methodologies used to generate evidence and will summarise this in Helpdesk outputs, noting any concerns with the robustness of the evidence being presented. For some Helpdesk services, in particular the practical know-how queries, the emphasis will be focused far less on academic validity of evidence and more on the validity of first-hand experience among disabled people and practitioners delivering and monitoring programmes on the ground. All sources will be clearly referenced.

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