Reflecting on our Strengths as we Expand our Collaboration

HIP Partners Meeting Report
April 15, 2021
Virtual Meeting
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Welcome and Overview

The meeting began with an orientation to the High Impact Practices (HIP) Partnership designed specifically for the 32 new partners, with long standing partners welcome to join as well. It is significant to note that the partnership more than doubled in size, increasing from about 30 partners to over 65 partners across 20 countries at the time of the meeting. Caitlin Thistle and Alex Mickler of USAID presented the principles that guide the HIPs, an overview of HIP briefs, planning guides, and other HIP products, how the Product & Dissemination (P&D) Team works together to bring products from ideas to completion, including dissemination, HIP measurement and implementation, and finally, HIP Resources. HIP Resources is a new and growing feature on the HIP website, and includes checklists for HIP implementation, and the WHO/HIP Matrix Tool, among others. To increase engagement during this virtual meeting, Ms. Thistle and Ms. Mickler used Zoom polls to ask HIP-focused trivia questions of the audience at different points in their presentation.

Click [here](#) to view a recording of this session.

Partner Networking

In an effort to keep the virtual meeting personable and allow new partners the opportunity to meet one another, time was set aside for partner networking in small groups before the main session began.

Welcome Remarks

Maria Carrasco of USAID provided welcoming remarks on behalf of the HIP Co-Sponsors. Dr. Carrasco presented the progress of HIP products to date, including upcoming publications of new and updated HIP briefs or strategic planning guides (SPGs), and plans for future updates. Dr. Carrasco also presented key web analytics that show increases in HIP outreach and visibility by global audiences. For example, the number of HIP website users has increased 300% since 2017, with about 78,000 users during fiscal year 2020. The HIP Webinars, a combined effort of the IBP Network and FP2030, have attracted over 800 live participants collectively, with even more recording views after the events. Finally, the HIP Newsletter is a new product launched in June 2020 and already has over 640 subscribers from 83 countries. For more information, see Appendix C.

Click [here](#) to view a recording of this session.

HIP Brief and Strategic Planning Guide Development

The HIP Development session of the meeting used a panel discussion format. Laura Raney of FP2030 introduced the three panelists: Ashley Jackson, Deputy Director of Expanding Effective Contraceptive Options (EECO) at Population Services International (PSI), Leanne Dougherty, Senior Implementation Science Advisor at Population Council, and Anne Pfitzer, Director of Family Planning at Jhpiego.
Ashley Jackson and team had recently submitted a concept note for an SPG on contraceptive product introduction that was accepted, and Ms. Raney asked her to elaborate on what the process was like for PSI, and how it brought value to the organization. Ms. Jackson explained how the SPG will lead users through the process of integrating HIPs as they introduce new contraceptive products and will be developed in collaboration with FHI 360 and PATH. In terms of added value for PSI, Ms. Jackson mentioned that she and her team were able to distill the most crucial information based on project learnings, which helped them sharpen their thinking on the topic. They sought feedback from other projects and experts, making the development of the SPG a collaborative effort.

Leanne Dougherty shared her experience of being part of a technical expert group (TEG) for the Couple Communication brief update, and how this brought value to her organization. Ms. Dougherty expressed that she appreciated the opportunity to connect with other experts in her field and learn new, emerging research. As part of the process, the technical experts surveyed peer reviewed articles to incorporate key ideas into the brief on different approaches associated with improved partner communication. Leanne said that coming from an organization that generates evidence, sometimes it can be hard to know how people are using the research shared. Coming together for one hour every couple weeks to think through the issues and evidence, helped her to understand where evidence gaps exist and how these can be addressed in the future.

Anne Pfitzer was asked to share her experience participating in a technical review of a HIP brief and how the process benefited her organization. Ms. Pfitzer reflected on how the website comment form has revolutionized the way the technical experts can receive and incorporate feedback into the HIP briefs. Previously, comments were only given via email to a select group who already knew about the development, but now it has evolved and allows the community to comment on drafts, which is very helpful. Jhpiego found it especially important to solicit feedback from reviewers externally for the Family Planning and Immunization brief, which expanded the reach of the open community feedback period. Ms. Pfitzer shared that this supported her organization and the larger community as a whole, in progress towards the effort of synthesizing the available evidence on what works in family planning, and grounding that evidence with individual empirical experience.

“Anyone can review or submit a technical review for a HIP, if there is a technical study that you know of, or some work that your organization is doing that is not reflected in the HIP that you think should be covered, there is room to add your voice.” - Laura Raney

Ms. Raney then asked Ms. Pfitzer to speak on Jhpiego’s experience using the HIPs to advocate for interventions in-country. Ms. Pfitzer explained that they were asked by Rwanda’s Ministry of Health to support the development of a costed implementation plan for adolescent sexual and reproductive health. The first step in this process was to conduct different situational analyses, including the review of health sector evaluation studies, consolidated recommendations as well as key points from different HIP briefs. Ms. Pfitzer and her team distilled overarching findings from other studies and pulled out key recommendations from the HIPs into a digestible format for Rwandan stakeholders to use during a workshop. To develop the strategic objectives of the costed implementation plan, the team aligned these with HIP recommendations, and brought hard copies of the HIP briefs with them to the workshop to aid their discussions.
During the question and answer period of the session, Ms. Pfizer shared an example she heard from the networking session, of when another organization received contributions from pastoralist communities that used the Family Planning and Immunization brief alongside animal husbandry work. This implementation context demonstrates how the HIPs can be adapted to different settings.

Click here to view a recording of this session.

**HIP Implementation**

During the HIP Implementation session, Nandita Thatte of the WHO/IBP Network presented three recent IBP activities and resulting products that integrate HIPs. These include:

- **IBP 2020 Survey on Dissemination and Use of WHO Guidelines and HIPs**: this online survey targeted IBP member organizations and individuals, with 77 countries represented in the results. Key takeaways from the surveys were that 49% stated they were extremely familiar or moderately familiar with the HIPs, while 20% stated they were not at all familiar with the HIPs. IBP also found that many people responded that they had used certain HIPs, but did not necessarily know them as branded HIPs. See Appendix C for more details on the survey results.

- **Linkages between HIPs and WHO Guidelines, and the WHO/HIP Matrix Tool**: the IBP Network/WHO recognized a voiced need from program implementers for better links between WHO Guidelines and program interventions. At the same time, in order to implement a HIP, implementers needed buy-in from governments and other stakeholders. Knowing that policymakers and leaders look to WHO for credible guidance, Ms. Thatte and colleagues aimed to strengthen the link between the two resources. The WHO/HIP Matrix Tool evolved from these needs, and serves to show how service delivery HIPs and family planning-related guidelines can be implemented side-by-side to inform service delivery.

- **IBP Implementation Stories**: This new series, developed in collaboration with WHO/IBP and Knowledge SUCCESS, shares 15 stories from 15 different countries who are implementing and scaling up HIPs and WHO guidelines. Collected from organizations globally who submitted concept notes, the winning submissions were provided a small stipend to write their story, which Ms. Thatte noted was essential to support documentation. The stories touch on a range of briefs and guidelines, and will be linked to the HIP website.

Contextualizing and tailoring the HIPs to different regional contexts is of utmost importance, Ms. Thatte noted as one of the key learnings of these activities. It is clear that HIPs are not implemented in isolation, but part of a larger package of interventions. Finally, documentation of successful implementation requires effort, and organizations should be compensated for taking the time to record these learnings.

Click here to view a recording of this session.
Partner Dissemination Opportunities

Elizabeth Tully and Natalie Apcar of the Knowledge SUCCESS project at the Johns Hopkins Center for Communications Programs (CCP), led this session to outline the various ways that HIP partners can contribute to dissemination efforts. Mrs. Tully explained that the HIP P&D team develops and disseminates monthly social media guides focused on specific HIP products and opportunities. These guides, comprised of about five-ten Tweets/social media posts, are sent to the Communications teams of HIP Partners so they can send them out through their organization’s channels, all using a common hashtag of #HIPs4FP. New partners began receiving these emails starting in March. HIP Partners are also expected to provide direct links from their organization’s website to the HIPs website, commonly known as a website referral. HIP Partners are also asked to include references of the HIPs in FP/RH-related meetings, subscribe to, share, and engage with the HIP newsletter and HIP webinars. The session featured the following partner spotlights, which highlighted experiences in contributing to dissemination efforts:

- Reana Thomas of FHI 360 spoke about promoting the HIPs across social media platforms.
- Laura Raney of FP2030 shared how her organization highlights the HIPs and other associated resources on their website.
- Stembile (Tembi) Mugore of WorldVision discussed her experience as a presenter on a HIP webinar and how it benefited her organization.

At the end of the partner spotlights, Ms. Apcar shared a Mural board, where participants could submit answers to the following prompts:

- What HIP dissemination technique(s) are you most excited to implement?
- What could we do to make dissemination easier for partners?
- Are there any other dissemination channels that we could be using?

The Mural activity showed that partners expressed willingness to support the social media and website referrals and share the HIP newsletter with colleagues in country offices. The activity also reflected excitement about the new WHO/IBP HIP Implementation Stories and other efforts to share country-specific examples of HIP implementation. Partners suggested that slide decks for each HIP could be useful for dissemination. Specific responses to additional dissemination channels included trying to reach civil society organizations and non-United States based channels.

Click here to view a recording of this session.

Closing Remarks

Ms. Thistle introduced Dr. Jameel Zamir of IPPF to provide closing remarks of the meeting. Dr. Zamir shared his enthusiasm for the opportunity to reflect on the success of the HIP Partnership over the course of the meeting. He acknowledged a significant success is marked by the fact that International Planned Parenthood Federation (IPPF)
member associations are increasingly using the HIPs globally and disseminating them within their own country networks.

Click here to view a recording of this session.
Appendix A: Agenda

Reflecting on our Strengths as we Expand our Collaboration
High Impact Practice (HIP) Partners Meeting
Thursday, April 15th, 2021

This meeting is intended for HIP partners to meet each other and engage in thoughtful discussion on the successes of the HIP Partnership, and how it can be strengthened. By the end of the meeting, partners will have gained:

- An understanding of their role as partners in the development and update of HIP briefs and other products
- Examples of HIP adaptation, implementation, and tools
- New ideas for sharing HIP updates and information within their organizations and externally

<table>
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<tr>
<th>Time</th>
<th>Session</th>
<th>Agenda</th>
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</thead>
<tbody>
<tr>
<td>8:00 - 8:40 am</td>
<td>Welcome and Overview</td>
<td>Welcome and background on the HIPs, including new processes, partners, and products. New Partners are highly encouraged to join. Presenters: Caitlin Thistle and Alex Mickler, USAID</td>
</tr>
<tr>
<td>8:40 - 9:00am</td>
<td>Networking</td>
<td>A chance for partners to meet each other and chat in small groups.</td>
</tr>
<tr>
<td>9:00 - 9:10am</td>
<td>Welcome Remarks</td>
<td>Maria Carrasco, USAID</td>
</tr>
<tr>
<td>9:10 - 9:50am</td>
<td>HIP Development</td>
<td>Moderator: Laura Raney, FP2030</td>
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<tr>
<td>9:50 - 10:10am</td>
<td>HIP Implementation</td>
<td>Presenter: Nandita Thatte, WHO</td>
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<tr>
<td>10:10 - 10:55am</td>
<td>HIP Dissemination and Engagement</td>
<td>Moderators: Elizabeth Tully and Natalie Apcar, Knowledge SUCCESS</td>
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<tr>
<td>10:55 - 11:00am</td>
<td>Closing Remarks</td>
<td>Jameel Zamir, IPPF</td>
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# Appendix B: Participant List

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<thead>
<tr>
<th>Name</th>
<th>Organization</th>
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<tr>
<td>Natalie Apcar</td>
<td>Johns Hopkins CCP</td>
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<td>Caitlin Thistle</td>
<td>USAID</td>
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<td>Liz Tully</td>
<td>Johns Hopkins CCP</td>
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<tr>
<td>Laura Raney</td>
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<tr>
<td>Robin Keeley</td>
<td>PATH</td>
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<tr>
<td>Alex Mickler</td>
<td>USAID</td>
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<tr>
<td>Jameel Zamir</td>
<td>IPPF</td>
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<td>Ados May</td>
<td>WHO/IBP Network</td>
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<tr>
<td>Emma Bassin</td>
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<td>Sara Mazursky</td>
<td>Johns Hopkins CCP</td>
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<td>Nandita Thatte</td>
<td>World Health Organization</td>
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<td>Carol Hooks</td>
<td>Manoff Group</td>
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<td>Laurette Cucuzza</td>
<td>Independent Consultant</td>
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<td>Jeannette Cachan</td>
<td>Howard Delafield</td>
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<td>Arzum Ciloglu</td>
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<td>Reana Thomas</td>
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<td>Eliza Basheer</td>
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<td>Emeka Nwachukwu</td>
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<td>Yvette Kruger</td>
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<td>Anne Stuart</td>
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<td>Danielle Harris</td>
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<td>Darby Major</td>
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<tr>
<td>Laura Baringer</td>
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<td>Ilene Speizer (she/her)</td>
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<td>Leanne Dougherty</td>
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<td>Meridith Mikulich</td>
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<td>Adenike Ayodele</td>
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<td>Leslie Patykewich</td>
<td>John Snow, Inc. (JSI)</td>
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<td>Frank Roijmans</td>
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<td>Anne Pfitzer</td>
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<td>Seth Marcus</td>
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Reflecting on our Strengths as we Expand our Collaboration

HIP Partners Meeting

April 15, 2021

Before we begin...

This meeting is being recorded

Please submit questions at any time via the chat box

Please introduce yourself, your organization, and where you are physically joining from in the chat box

Partner Networking

HIP Orientation

Welcome Remarks

on behalf of the HIP Co-Sponsors

Maria Carrasco
Senior Implementation Sciences Technical Advisor,
Office of Population & Reproductive Health, USAID
Phases of HIP Briefs

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<td>Social Marketing</td>
<td>Postabortion FP</td>
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<td>Educating Girls</td>
<td>Drug Shops and Pharmacies</td>
<td>Immediate PPFP</td>
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<td>Galvanizing Commitment</td>
<td>Domestic Public Financing</td>
<td>FP/Immunization Integration</td>
<td>Supply Chain Mgmt</td>
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<td>Policy</td>
<td>Digital Health-Providers</td>
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<td>FP/Immunization Integration</td>
<td>Strategic Social Accountability (New)</td>
<td>Digital Health-Systems</td>
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<td>FP/Immunization Integration</td>
<td>Strategic Social Accountability (New)</td>
<td>Enhancements</td>
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Upcoming Publication of HIP Briefs

- **May 2021**: Social Marketing, Drug Shops and Pharmacies, FP/Immunization Integration
- **Fall 2021**: SBC briefs: Individual Outcomes, Couple, Communication, Social Norms
- **Early 2022**: Leaders and Managers, Policy, Strategic Social Accountability (New)

Upcoming Strategic Planning Guides

- **Family Planning and Equity**
- **Meaningful Adolescent and Youth Engagement**
- **Contraceptive Product Introduction**
- **Family Planning for Persons with Disabilities**

The number of HIP website users have increased 300% since 2017

Website Users by Region FY20

- **Consortium**: Percentage change from previous year
- **North America**: 100% increase
- **Africa**: 42% increase
- **Europe**: 49% increase
- **Asia**: 27% increase
- **Oceania**: 11% decrease
- **North & South America**: 52% increase

*Of the Americas: North America: 48%; South America: 32%; Central America: 17%; Caribbean: 3%
HIP Webinars over past year

<table>
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<th>Webinars</th>
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<th>Recording views</th>
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<td>PAFP (FR)</td>
<td>121</td>
<td>120</td>
<td>241</td>
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<td>Task Sharing (EN)</td>
<td>144</td>
<td>65</td>
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<td>SCM (EN)</td>
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<td>SCM (SP)</td>
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<td>HIPs / WHO Guidelines Matrix (EN)</td>
<td>115</td>
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<td>Totals</td>
<td>808</td>
<td>642</td>
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HIP Newsletter

Since the newsletter’s launch in June 2020, over 640 FP stakeholders from 83 countries have subscribed to the HIPs newsletter.

Stay tuned for the April 2021 newsletter!

HIP Newsletter

Top Countries | # of Subscribers
---------------|------------------|
United States  | 259              |
India          | 28               |
Nigeria        | 23               |
Uganda, Kenya, United Kingdom | 20          |
South Africa, Burkina Faso, Pakistan, Peru, Ethiopia | 10+

HIP Implementation

Nandita Thette
Technical Officer, Department of Sexual and Reproductive Health, WHO

Partner Dissemination Opportunities

Liz Tully
Program Officer, Johns Hopkins CDP, Knowledge SUCCESS

Nettie Apcar
Program Officer, Johns Hopkins CDP, Knowledge SUCCESS
HIP Dissemination
Broadening Awareness of HIPs
- Meeting agendas

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HIP Dissemination
Staying Aware of HIP Updates
- Newsletter

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HIP Dissemination
Promoting HIPs Across Platforms
- Social media - monthly Tweets
- Website referrals

#HIPS4FP

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Rapid Fire
Partner Spotlight

Social media - monthly Tweets
- Process for engaging
- Why they engage
- Importance to their organization

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Rapid Fire
Partner Spotlight

Website referrals
- Process for engaging
- Why they engage
- Importance to their organization

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HIP Dissemination
Sharing Implementation Experiences
- Webinars
- Implementation stories

24
Webinars
- Process for engaging
- Why they engage
- Importance to their organization

HIP Dissemination
Commitments: What HIP dissemination technique(s) are you most excited to implement in your work going forward?

Recommendations: What could we do to make dissemination easier, more seamless?

Suggestions: Are there other dissemination channels that we could be tapping into?

Tell us on HIP

Closing Remarks on behalf of the HIP Co-Sponsors

Thank you!

Dr. Jameel Zainal
Director Programmes at International Planned Parenthood Federation (IPPF), East & South-East Asia and Oceania Region
What are the HIPs?

HIP Principles

HIP Products
HIP Briefs

Enabling Environment
Address systemic barriers that affect an individual’s ability to access family planning information & services.

Service Delivery
Improve the availability, accessibility, acceptability, and quality of family planning services.

Social and Behavioral Change
Influence knowledge, beliefs, behaviors, and social norms associated with family planning.

Enhancements
Approaches used in conjunction with HIPs to maximize the impact of HIP implementation or increase the reach.

HIP List

Service Delivery
- Community Health Workers
- Immediate Postpartum Family Planning
- Mobile Outreach Services
- Postabortion Family Planning
- Social Marketing
- Drug Shops and Pharmacies
- Family Planning and Immunization Integration
- Social Franchising

Enhancements
- Digital Health to Support Family Planning Providers
- Adolescent-Responsive Contraceptive Services
- Family Planning Vouchers
- Digital Health for Systems

Enabling Environment
- Domestic Public Financing
- Educating Girls
- Galvanizing Commitment
- Leaders and Managers
- Policy
- Supply Chain Management

Social and Behavioral Change
- Community Group Engagement
- Digital Health for SBC
- Mass Media

HIP Strategic Planning Guides

Strategic planning guides (SPGs) are intended to lead program managers, planners, and decision-makers through a step-by-step strategic process to identify the most effective and efficient investments in a family planning priority area.

HIP Papers

HIP discussion papers build upon various thematic areas that are central to the HIP Principles.

These collaborative papers reflect ongoing discussions from TAG meetings, as well as other topics of interest that do not classify as HIP briefs or SPGs, but are important to family planning programming.

HIP Webinars

Through an interactive dialogue, presenters and participants share experiences and examples of HIPs implementation.

Each webinar brings together experiences from the field, including government perspectives.

The webinars reflect the diverse experience in the field and are available in English, French, and Spanish.

Who’s Who in the HIP Partnership
About Us

The HIP Partnership includes various structures to ensure HIP products are developed, kept up to date, and disseminated widely.

Co-Sponsors

FP2030, IPPF, UNFPA, USAID and IBP/WHO serve as a secretariat to the HIP Partnership. Two representatives from each organization participate in monthly calls in order to:

- Set agendas for annual HIP Partners and Technical Advisory Group (TAG) meetings,
- Ensure coordination among various groups working on HIP activities,
- Select new members for the HIP TAG,
- Provide updates to partner organizations regarding ongoing and completed work and activities relevant to the HIP work,
- Select members of the HIP Technical Expert Groups,
- Discuss and approve new types of HIP products, and
- Support promotion and outreach of the HIP Partnership as necessary.

Technical Advisory Group (TAG)

The TAG includes 25 experts in family planning research and program implementation and provides overall technical direction to the HIPs.

- The TAG meets twice a year and is responsible for:
  - Reviewing all finalized HIP briefs to ensure the “practice” meets the criteria for HIP as set out by the HIP Partnership,
  - Reviewing HIP concept notes in order to prioritize no more than 2 per year for development into briefs/products,
  - Reviewing updated HIP briefs to ensure they continue to meet HIP criteria and standards of evidence; and
  - Refining and improving standards of evidence relevant to family planning programming.

Production & Dissemination Team (P&D)

The HIP P&D Team is responsible for:

- Producing and publishing new and updated HIP briefs and guides,
- Disseminating new/updated HIP briefs and guides via multiple channels,
- Collaborating with technical experts and country-level partners to produce webinars focused on HIP products,
- Producing and sharing the quarterly HIP Newsletter,
- Developing and maintaining external communications including the HIP website,
- Coordinating the translation of HIP products into French, Portuguese, and Spanish,
- Tracking progress and identifying solutions to challenges in communication and dissemination; and
- Strategically planning for HIP representation at global and regional conferences by proactively getting HIPs on the agenda, as appropriate, and/or coordinating delivery of physical copies of HIP materials.

Technical Expert Groups (TEG)

Technical Expert Groups (TEG) are comprised of family planning experts who serve as ongoing contributors to the HIP Partnership. TEGs lead thorough updates to existing HIP briefs and spearhead the development of new HIP briefs.

- Selected through an open application process by the HIP co-sponsors based on their technical expertise, qualifications, and relevant experience.
- Experts serve for at least two years and are sponsored by their organization
- TEGs include at least one expert based in the global south.
- Vacancies are announced when there is a need to form a new TEG for an upcoming HIP brief update, or when there is a need to replace outgoing members of an established TEG.

HIP Partners

The High Impact Practices in Family Planning (HIPs) are supported by over 65 organizations. These organizations play a vital role in developing, reviewing, disseminating, and implementing HIPs in family planning programs.

- Each organization is responsible for identifying at least one individual to serve as the Point of Contact (POC) for the HIP work. These individuals are responsible for:
  - Disseminating HIP information to relevant parties within their organizations;
  - Connecting key technical staff to relevant HIP work, such as brief review;
  - Attending annual HIP Partner's meeting; and
  - Participating in activities to identify priorities for the HIP Partnership.
Ongoing HIP Partners

New HIP Partners

Fast Facts

How does an idea become a HIP?

Brief Development Process

Strategic Planning Guide Development Process
How does the FP community engage with the HIPs?

Engage

HIP Measurement and Implementation

HIP Resources

Resources are being developed to support use of the HIP briefs. Some of these resources include:

- HIP PowerPoints
- HIP Checklists for Implementation Readiness
- WHO Guidelines and HIP Matrix
- HIP implementation stories
- Journal article & interactive webpage: Applications of the HIPs during COVID-19

Stay tuned for these resources and more!
Carolin Ekman works for the IBP Network Secretariat, based at WHO in Geneva, Switzerland. With her focus being on communications, social media and knowledge management activities, Carolin has been leading the development of the IBP Community Engagement Platform, which she now continues to manage in terms of content and community management. She has also been involved in the strategy refresh and rebranding of IBP. With 12 years across the UN system, NGOs and the private sector, Carolin has a broad and multidisciplinary understanding of various aspects of SRHR and its wider impact on wellbeing and sustainable development. Carolin holds a MSc in Media Technology/Journalism from the Royal Institute of Technology, Sweden, as well as a MSc in Marketing from Stockholm University, Sweden, and has also studied human rights, development and CSR in Australia and Switzerland.

Ados May is a Senior Technical Advisor at the IBP Network Secretariat. In that role, she provides technical leadership engaging the network member organizations on a variety of issues such as documenting effective practices in family planning, dissemination of high-impact practices (HIPs), and knowledge management. Prior to IBP, Ados was based in Johannesburg, as a regional advisor for the International HIV/AIDS Alliance, supporting a number of member organizations in Southern Africa. For over 20 years, she has worked on international development projects, engaging in capacity building, program design, technical assistance, and policy and program development. She has worked in the international NGO sector supporting a number of member organizations in Southern Africa over 20 years, in a number of international policy and program settings, including sexual and reproductive health.

Nandita Thatte leads the IBP Network Secretariat housed in the Department of Sexual and Reproductive Health and Research at WHO in Geneva, Switzerland. Her current portfolio includes institutionalizing the role of IBP to support the dissemination and use of evidence-based interventions and guidelines, strengthening the linkages between IBP field-based partners and WHO researchers in sexual and reproductive health, and informing the development of new evidence to support interventions and policies. Prior to joining WHO, Nandita was a Senior Advisor in the Office of Population and Reproductive Health at USAID where she designed, managed, and evaluated global family planning programs and supported regional and country offices in Latin America, West Africa, and Asia. She holds a Master’s in Health Science (MHS) from the Johns Hopkins School of Public Health and a Doctorate in Public Health (DrPH) from the George Washington University School of Public Health.

Just a Reminder...

- The HiPs are not new; They organize, provide consistency and consensus
- HiPs alone do not make a comprehensive FP program
- HiPs are most impactful when implemented in conjunction with other guidance and resources

Today we will highlight 3 IBP Activities

1. IBPs 2020 Survey on Dissemination and Use of WHO Guidelines and HiPs
2. Linkages between HiPs and WHO Guidelines
3. IBP Implementation Stories

1. IBP 2020 Dissemination and Use Survey

Methodology
- Online web platform - Survey Monkey
- Survey in three languages (English, French & Spanish)
- IBP member organizations & individuals

Survey Completion Rate
- Completion rate was 61%
- 587 total respondents and 360 survey completions
- English n=179; Spanish n=105; and French n=76
- Majority of Spanish speaking respondents were from Latin America; Majority of French speaking respondents were from Francophone West Africa
- We did have a significant number of respondents from Asia but have not broken that down yet
Use of digital technologies to support healthy sexual and reproductive behaviors.
Integrate trained, equipped, and supported community health workers (CHWs) to provide voluntary contraceptive counseling and services as part of post-abortion care.

Ministry of Health/Government
Develop and support capacity to lead and manage family planning programs.
Increase allocation and efficient use of domestic, public financing.

Social marketing to support distribution of family planning methods and supplies.

Independent Consultant
Writing grant/funding proposals
Development of technical briefs
In-Service clinical training
Pre-Service training
Strategic planning
Clinical practice
Program design
Other (please specify)

UN Agency
Inform policy decisions
Increased personal knowledge

Academia
Expanding personal knowledge
To support implementation
Program design
Networking
Clinical practice
Policy development
Clinical research
Donor Organization
Keep girls in school to improve health and development.

International NGO
Increasing family planning and immunization services: Integrate family planning and immunization services.

Regional Organization
To support implementation
Support mobile outreach service delivery

Local NGO/Civil Society Organization
Use vouchers to facilitate equitable access to and choice of voluntary contraceptive and health services.

Stakeholders
Do not provide training on how to use them

Other (please specify)
They do not address my programmatic needs

Organizations Represented

Overall Knowledge and Familiarity of the HIPs

Commonly Used HIP Evidence Briefs

Commonly Used Strategic Planning Guides and Enhancements

Reported Reasons for Use

Challenges to Use
Sources of Learning for HIP Products

2. Linkages between WHO Guidelines and High Impact Practices

- Program implementers focus on interventions
  
  "We program around interventions, not guidelines"

- Policy makers look to WHO for guidance, credible evidence and recommendations

  "We follow our MOH and WHO Guidance to support programming"

WHO/HIP Matrix Tool

Use of the WHO Guidelines & Tools alongside service delivery high impact practices in family planning

*Note the focus is on Service Delivery HIPs and WHO FP related Guidelines
3. IBP Implementation Stories

- A partnership between Knowledge SUCCESS and WHO/IBP Network
- Over 100 submissions; 15 stories selected; Stipend of $2500
- 15 countries 15 different organizations
- Included a range of HIPs and WHO Guidelines
- Capacity strengthening around documentation
- Launch on 20th April 2021

What have we learned about HIP Implementation?

1. HIP Products are valuable resources
   - Used for Advocacy, Expanding Personal Knowledge, Program Design, Support Implementation, Training
   - Challenges exist related to funding to implement the HIPs, language, and adaptation to cultural contexts

2. Regional variations exist and efforts to contextualize and tailor HIP dissemination and outreach is critical
   - For example, in LAC, EE HIPs are a top priority, while several SD and enhancement HIPs are prioritized in West Africa and South Asia
   - Investing in translation makes a difference in dissemination and implementation

3. Linking WHO Guidelines and HIPs can help advocate for use and strengthen implementation
   - HIPs network and connection with WHO continues to play a key role in the dissemination of the HIPs
   - WHO provides important credibility with MOH and HIPs provide pragmatic program interventions

4. HIPs are not implemented in isolation but often as part of a larger program or package of interventions
   - HIPs offer a pathway to document program implementation using a common definition and set of principles
   - Standalone HIPs may be less familiar to smaller organizations though the interventions themselves are well-known

5. Implementation and documentation require significant effort and organizations should be compensated
   - Technical and funding support to organizations with limited resources can provide diverse and valuable insights
   - Efforts should also include opportunities to build capacity for documentation