The ABC’s of Postpartum Family Planning

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CORE Elluminate Session
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Photo by Emmanuel Otolurin

Jhpiego in partnership with Save the Children, Constella Futures, The Academy for Educational Development, The American College of Nurse-Midwives and IMA World Health
Objectives

At the end of the session, participants will be able to discuss:

- Overview of PPFP
- Barriers to PPFP services and method use
- Key PPFP messages: HTSP, return to fertility, LAM and the transition, couples communication
- Integration of PPFP into MNCH programs: facility level services and the community
- Referral systems
- Resources
Definitions

- **Postpartum Family Planning:** The initiation and use of FP during the first year after delivery

- **Postpartum period:** traditionally 6 weeks after birth

- **Extended postpartum period:** For ACCESS FP, extend the postpartum period to include 1st year after birth to increase programmatic opportunities to reach families

Photo by Angela Nash-Mercado
Rationale for including postpartum family planning in MNCH and FP programs

- To achieve healthy maternal, perinatal, newborn, infant and child health outcomes, including reduction of maternal & neonatal mortality

- To address unmet need for FP among postpartum women
PPFP can contribute to reductions in maternal and child mortality

- **Maternal Mortality**
  - 32% “In the year 2000, family planning could have averted
    - 90% of abortion related and
    - 20% of obstetric related mortality and morbidity”

- **Child Mortality**
  - “1 million of the 11 million deaths in children <5 could be averted by elimination of interbirth intervals of less than 2 years. Effective use of postpartum family planning is the most obvious way in which progress should be achieved.”

  - Cleland et al. 2006 Lancet Series, Sexual and Reproductive Health Volume 368, Number 9549, 18 November 2006

Kenya- 23% of births are less than 2 years apart.
Barriers to PPFP service and method use

Lack of information
- Lack of awareness of health benefits of spacing
- Shifts in traditions that protected from pregnancy – postpartum abstinence
- Lack of knowledge about fertility return

Misconceptions
- Misconceptions about BF as a method of FP (LAM)
- Misconceptions about FP for BF women

Social support
- Spousal permission/clandestine use
- Co-wife competition
- Lack of support from MIL

Access to services
- Low mobility particularly for low parity women – 40 day period after a birth
- Mothers’ busy schedules influences access
- Referrals

Supportive environment
- Religious beliefs
Key content for PPFP messages

1. Healthy spacing of pregnancies
2. Mother’s risk for unintended pregnancy after a birth
3. LAM and the transition
4. Methods for BF postpartum women
5. Discussing and choosing a family planning method within the first month postpartum (couples communication)
6. Importance of postpartum care services - referral
Wait at least 24 months after a live birth before attempting the next pregnancy in order to reduce the risk of adverse maternal, perinatal and infant outcomes.

Wait at least 6 months after a miscarriage or induced abortion before attempting the next pregnancy in order to reduce risks of adverse maternal and perinatal outcomes.

Space Between Births Is Good for the Mother and the Baby

A couple should plan to take another child at least two years after their last child was born. This space helps ensure having a healthy baby and healthy motherhood. The couple will choose an appropriate family planning method for their family.

There are several ways of spacing births.
Choose one which is good for your family.

Visit the nearby health center and make consultations for more information.

Breastfeed Your Baby

"Mothers who wish to complete the breastfeeding duration for their babies should breastfeed them for full two years."

Sura Bakamah, Para 2, Ruku 13, Ayat 233

When there will be a newborn baby in your family, encourage the mother to breastfeed the newborn baby as soon as possible and to exclusively breastfeed him/her until he/she is 6 months old.

During this period, the baby does not need any other food or drink, even water.

★ Mother’s breast milk is the best food for a baby and it helps the baby to resist diseases

★ Breast milk is free of cost

★ Breast milk (breastfeeding) creates a bond of love between the mother and the baby

★ Breastfeeding helps space the next pregnancy

USAID does not necessarily agree with the opinions expressed in this leaflet.
A woman’s risk of pregnancy after childbirth

YOU CAN BECOME PREGNANT EVEN IF YOUR MENSES HAS NOT RETURNED!!

Delivery

Your risk of pregnancy increases as breastfeeding decreases and as time passes

6 months postpartum
(sooner if your menses has returned)

If you are ONLY Breastfeeding

If you are PARTIALLY Breastfeeding

6 weeks Postpartum

If you are NOT breastfeeding

3 weeks postpartum

If you are NOT breastfeeding
Lactational Amenorrhea Method (LAM): 3 criteria and the transition

Three criteria for a PP women to practice LAM

- Only breastfeeding
- No menstrual bleeding
- Infant is 6 months or less

Transition to another method should occur when ANY 1 of the 3 criteria changes
Postpartum contraceptive options

Message:
There are many FP methods with no affect on breastfeeding.

Adapted from the MAQ Exchange: Contraceptive Technology Update
Discuss & choose a PPFP method within the 1st month postpartum

Key barrier:
- Fear of discussion about family planning with husbands, yet husband is key decision-maker

Key Facilitator:
- Male support for spacing for economic reasons

Message: “Couples, discuss a family planning method before your baby is 1 month old and obtain more information from your health provider. An understanding between couples early on, can help prevent unplanned pregnancies.”
Importance of postpartum visits

Day 3
Day 14
6 Weeks
Opportunities for Integration of PPFP messages into MNCH programs at the facility and in the community
PROGRAMMATIC FRAMEWORK: PPFP IN AN INTEGRATED CONTEXT

FAMILY PLANNING
- ANC-FP messages-
- Immediate Post Partum Family Planning
  0-48 hours

MATERNAL HEALTH
- Birth Preparedness
  ANC
- Delivery care
- Immediate postpartum
  6-12 hrs
  3-6 days

NEONATAL & INFANT HEALTH
- Immediate Neonatal care
  6-12 hrs
- Later postnatal
  3-6 days

POSTPARTUM
- Postpartum FP
  6 wk visit
- Extended postpartum FP
  6 weeks to 12 months
- Immunization EBF
  6wks
- Immunization EBF
  10 wks
- Immunization EBF
  14 wks
- Infant feeding
  6 mo
- Immunization-Measles
  9 mo

Opportunities?
MNH and PPFP Behavior Change Communication Strategy and Channels of Communication

3 pronged approach:

1. Influence individual level behaviors through household counseling:
   - Channel: Counsel mothers, husbands and mothers-in-law during antenatal and postpartum period

2. Create a supportive environment:
   - Channel: Community based activities with religious and community leaders

3. Reinforce with print materials and existing mass media programs
## Reaching postpartum women through household counseling

<table>
<thead>
<tr>
<th>Messages</th>
<th>1st 5 months – pregnancy</th>
<th>7-8 months pregnancy</th>
<th>24 hrs Postpartum</th>
<th>5-7 days postpartum</th>
<th>4 months postpartum</th>
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</tbody>
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**Modifications to ACCESS-Nigeria MNH HH counseling schedule to integrate PPFP**
World Vision – “Timed and targeted counseling”
Pragati Child Survival Project in India

TIMED AND TARGETED MESSAGES

TIME

- Early Pregnancy
- Mid Pregnancy
- Late Pregnancy
- First Two Days
- First Month
- Fifth Month
- Eighth Month

TARGETED MESSAGES ON:

- Nutrition, parental care
- Nutrition, parental care, birth plans, infant feeding
- Infant feeding
- Infant feeding, vaccinations
- Infant feeding, vaccinations
- Infant feeding
- Infant feeding, vaccinations

TARGETED MESSAGES:

- Benefits and means of birth spacing and FP
- FP choices, plan for obtaining method if chosen
- FP reminder and referral
- FP users: follow-up specific to method. Non-users: review benefits, methods of FP
Male involvement

- Decision-making at the household level
- Creating a supportive environment through community-level advocacy activities

Photos by Angela Nash-Mercado
Creating a supportive environment for PPFP through community advocacy

Photo by Berengere de Negri

Photo by Angela Nash-Mercado
CHW referrals for FP at the facility

CHW screening & referral system:

- LAM screening & referral during HH visits (NC- 28, month 2-3 and 4-5 visits)

- CHWs ask women if they are still practicing LAM and if they would like to transition to another method.

- If the mother would like to use another method, CHW provides a referral slip for a facility convenient to her home.

Photo by Robin Anthony Kouyate
Postpartum Family Planning provides

- **A**
- **B**etter
- **C**hance and choice for Mothers’, infants’ and children’s health and survival!
Selected resources

PPFP Overview:

Healthy Timing and Spacing of Pregnancies:

Return to fertility:

Resumption of sexual activity:
Selected resources

LAM:

Spousal agreement on birth spacing:

Polygamy and contraceptive use:

BCC for FP:

Please visit the PPFP publications page on the ACCESS website for more resources: [http://www.accesstohealth.org/toolres/pubs.htm](http://www.accesstohealth.org/toolres/pubs.htm)