Using Postpartum Systematic Screening for Family Planning and Immunization Integration: Feasibility and Opportunities for Future Expansion in Mozambique

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Background
- Mozambique’s maternal and neonatal mortality remains among the highest in the world, at 489/100,000 live births and 303,000 live births, respectively. (Demographic and Health Survey [DHS] 2011)
- Unmet need for family planning (FP) is 69% within 2 years postpartum.
- 45% of pregnancies occur before an interval of 24 months. (DHS 2011)
- Nationally, 70% of children receive DPT3 immunization during the first year of life. (DHS 2011)
- Integration of FP services with immunization provides an opportunity to reach women with FP services.

Hypothesis
- The use of a Postpartum Systematic Screening (PPSS) tool and referral process helps to improve the provision and uptake of FP services for women in their first year postpartum who come to the health facility for postnatal care, immunization, and other maternal and child health (MCH)-related services.

Objective
- Evaluate the feasibility of using the PPSS tool and approach for screening and referral of women to FP services in the context of Mozambique.

Methodology
- Cross-sectional study
- Pre- and post-intervention design
- Conducted in three health facilities in Maputo City selected purposively for their high volume of utilization of MCH services

Methodology, cont.
- Data collection:
  - The study used five tools for data collection:
    - Supportive standardized guidelines
    - Client exit interview
    - Provider interview
    - Monthly service statistics
    - Referral tracking system
- Data collection was conducted by contracted health care providers trained on the tools, methods, and PPSS approach.
- Quantitative analyses were conducted in SPSS 22.0.
- Intervention steps:
  - Conduct provider training, onsite support to adjust client flow, monthly supportive supervision visits, and implement a referral system.
  - Orient health care providers, including medical doctors, MCH nurses, and preventive technicians working in FP, immunization, and/or postnatal services, on the PPSS and referral tracking system tool.
  - Provide postpartum FP counseling and services to women who have delivered within the last 12 months and are not using any FP method.
  - Identify, refer, and offer FP methods and other relevant MCH services to women who have additional service needs.

Methodology (Tools), cont.
- MCHIP FP Postpartum Systematic Screening Instrument (Modified from FRONTIERS)

Results
- Of the 22,196 women who brought their children for immunization and postnatal care services from August 2013 to February 2014, 79% (17,510) were screened through PPSS for FP.
- Of those women, 22% (3,894) reached the FP clinic, and 72% (2,816) of these women received a FP method.
- The majority of the women who received a FP method, 87% (2,449), received the method on the same day.
- The referral process contributed 41% of the total number of new FP users at these facilities within 2 years postpartum.

Evolution of Number of Screened Women and the Proportion of Women Referred to FP Services by Month

Implications
- Study results demonstrate that the PPSS intervention was feasible, with the potential to increase uptake of FP utilization.

- The study also illustrated that introducing postpartum FP services did not have negative effects on the uptake of immunization or postnatal care services.
- Opportunities to integrate FP services with other MCH services should be actively explored by programs to increase uptake of FP in Mozambique.
- As a result of this study, the Ministry of Health of Mozambique approved the PPSS flowchart for referrals as part of national MCH algorithms.
- A second phase of the study was conducted at province level (Nampula Province) with similar results.
- Recently, a decision was made to scale up the use of the PPSS approach nationwide.

This poster was made possible in part by the generous support of the American people through the United States Agency for International Development (USAID), under the terms of the Leader with Associates Cooperative Agreement [HHS-A-00-08-00032-00]. The contents are the responsibility of the Maternal and Child Health Integrated Program (MCHIP) and do not necessarily reflect the views of USAID or the United States Government.