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# Expanding Contraceptive Access for Postpartum Women through Competency Based Training: Learning from 2 States in Nigeria

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## Background

- 36% of births in Nigeria are delivered in a health facility. This rate is higher in the intervention states, Kogi and Ebonyi.
- 78.9% of women deliver in a health facility in Kogi and 59.6% in Ebonyi (DHS 2013).
- MCSP's baseline assessment showed that all women who deliver in a health facility go home without any form of contraception.
- Immediate postpartum family planning (PPFP) requires family planning (FP) counseling and provision around-the-clock in labor and delivery units. A lack of staff trained in PPFP, however, is the primary reason patients leave these units without immediate PPFP.
- MCSP, in collaboration with national and state ministries of health, developed interventions to ensure competent providers are available for PPFP counseling and provision.



## Program Interventions

- National FP learning resource package updated to include PPFP
- Capacity building of 637 health providers through competency based training to provide quality PPFP/PPLARCs care in 233 health facilities of Kogi and Ebonyi states
- Procurement and distribution of essential FP equipment, job aids, and posters
- Development of simple data collection tools
- Post-training follow-up, with continuing supportive supervision and mentorship

## Methodology

- Baseline facility assessment of 240 health facilities in Kogi and Ebonyi
- Developed 16 master trainers in PPFP/PPLARCs
- Training cascaded to 637 health care workers from 233 facilities using the competency based approach
- PPFP data collected from January 2016 to June 2018
- Review of voluntary pre-discharge PPFP acceptance using the data collected and analyzed post-insertion outcome

## Key Findings

- FP/PPFP counseling strengthened in 36 facilities by training health workers and dedicated counselors
- Increased voluntary pre-discharge acceptance of contraceptives (by method) in women delivering in health facilities:
  - Postpartum IUD – 1648
  - Implants – 4763
  - Lactational Amenorrhea Method – 7791
  - Progestin-only Pills – 76
  - Tubal ligation – 26
- Total of 14,304 women received voluntary pre-discharge PPFP
- 233 health facilities have competent PPFP providers
- Facilities equipped with essential equipment, commodities, posters, and job aids



- Quality of Care improved by continuing supervision and mentorship
- Increased access to contraceptive options through initiation of minilaparotomy under local anesthesia

## Lessons Learned

- Quality of care improved by continuing supervision and mentorship.
- Institutional deliveries provide an excellent opportunity for reaching immediate postpartum women with FP information and services.
- Skills practice and feedback on models and supervised clinical practice increase the confidence and competency of trained providers.
- Having trained, competent providers in labor, delivery, and postpartum units increases voluntary use of PPFP, including LARCs.
- Capturing data and close follow-up of acceptors of PPFP will reassure all stakeholders of the

## Women who voluntarily initiated PPFP method pre-discharge at MCSP-supported facilities trained in PPFP

