The Effect of Postpartum Family Planning Integration within a Community-based MNH Program in Rural Bangladesh (Healthy Fertility Study)

PPFP Technical Meeting
May 27, 2013
<table>
<thead>
<tr>
<th>Indicators</th>
<th>BGD</th>
<th>Sylhet</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unmet FP need</td>
<td>17%</td>
<td>26%</td>
</tr>
<tr>
<td>CPR (any method)</td>
<td>56%</td>
<td>31%</td>
</tr>
<tr>
<td>TFR</td>
<td>2.7</td>
<td>3.7</td>
</tr>
<tr>
<td>Birth intervals</td>
<td></td>
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<tr>
<td>&lt;24 months</td>
<td>15%</td>
<td>26%</td>
</tr>
<tr>
<td>&lt;36 months</td>
<td>37%</td>
<td>57%</td>
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</tbody>
</table>

Data source: Bangladesh Demographic and Health survey 2007
Evolution of MNCH Packages

Designed a community-based maternal and newborn care intervention package and evaluated the effectiveness of the package using a cluster randomized design.

A home care package which involved CHW antenatal and postnatal home visits and management of sick newborn reduced NMR by 34% (Baqui et al., Lancet, 2008)

Newborn care

Postpartum FP counseling and contraceptive distribution
Study sites: eight unions in two sub-districts in Sylhet district, Bangladesh

Non-Random Allocation

**Intervention unions:** four
Enrolled women: 2247

**Comparison unions:** four
Enrolled women: 2257

Enrollment of women during <8 months of pregnancy

**Intervention clusters:**
MNH plus FP during ANC and Postpartum visit

**Comparison clusters:**
MNH ONLY during ANC and Postpartum visit

Follow the cohort through pregnancy to 36 months postpartum
Intervention Delivery Strategy

Service Delivery
Home visits by CHWs

- Counsel in antepartum and postpartum periods
  - Messages on LAM and transition, return to fertility, optimum birth spacing, and contraceptive methods
- Pregnancy surveillance and contraceptives dispensing
  - Household visits every two months to identify new MWRA and pregnant women
  - Pills, condoms, and injectables
  - Refer for other methods

Community mobilization: Conduct meetings with women, husbands, mothers, mothers-in-law and community leaders including religious leaders to raise awareness about PPFP messages

LAM Ambassadors: Local champions providing peer support, counseling and advocacy for LAM
## Selected Baseline Characteristics of Participant Women by Study Arm

<table>
<thead>
<tr>
<th></th>
<th>Intervention (n=2247)</th>
<th>Comparison (n=2257)</th>
<th>P-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Women’s age¹</td>
<td>26.5 (24.9-28.1)</td>
<td>26.6 (25.7-27.5)</td>
<td>0.753</td>
</tr>
<tr>
<td>Women’s education</td>
<td>4.5 (4.0-5.0)</td>
<td>4.1 (3.4-4.8)</td>
<td>0.026</td>
</tr>
<tr>
<td>(in years of schooling)¹</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Husbands’ education</td>
<td>4.1 (3.2-5.0)</td>
<td>4.0 (3.0-5.0)</td>
<td>0.783</td>
</tr>
<tr>
<td>Parity¹</td>
<td>2.2 (2.0-2.3)</td>
<td>2.2 (1.9-2.5)</td>
<td>0.653</td>
</tr>
<tr>
<td>Religion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muslim</td>
<td>2135 (95.0)</td>
<td>2080 (92.2)</td>
<td>0.270</td>
</tr>
<tr>
<td>Hindu/other</td>
<td>112 (5.0)</td>
<td>177 (7.8)</td>
<td></td>
</tr>
<tr>
<td>Ever contraceptive use before the index pregnancy</td>
<td>18.0%</td>
<td>21.1%</td>
<td>0.022</td>
</tr>
</tbody>
</table>

¹ Data are means (95% confidence intervals)
Contraceptive Use Rate at 3, 6, 12, 18, 24 and 30 Months Postpartum by Study Arm

- Statistically significant improvement in the contraceptive use rate in the intervention area during the high risk period of first 24 months after delivery
  -- 18% ever user before the index pregnancy to 46% at 24 months postpartum
  -- 21% ever user before the index pregnancy to 35% at 24 months postpartum

- High number of new users and a trend towards increased early adoption
The Probability of Becoming Pregnant by Postpartum 30 Months by Study Arm

The difference is statistically significant (P < 0.001)
## Effect of Integration on MNH Care: Selected Newborn Care practices by Study Arm

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<th>Intervention (%)</th>
<th>Comparison (%)</th>
</tr>
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<tbody>
<tr>
<td>Drying and wrapping of newborn within 10 minutes of delivery</td>
<td>50.4</td>
<td>44.1</td>
</tr>
<tr>
<td>Initiation of Breastfeeding within 30 minutes</td>
<td>56.6</td>
<td>46.8</td>
</tr>
</tbody>
</table>
Duration of Exclusive Breastfeeding by Study Arm

Duration of exclusive breastfeeding by study arm

- **Intervention**
- **Control**

Duration of Exclusive Breastfeeding by Study Arm

- Intervention
- Control

- Analysis time: 1, 3, 6
Challenges

- One in every five women’s husband stays abroad
- Women’s mobility is limited
- Misconceptions about return to fertility
Lessons Learned

HFS demonstrates:

1. Feasibility of integration of PPFP within a community-based MNH program.
2. Effectiveness of the model in increasing modern method use.
3. No notable negative effect on the delivery of MNH services.
4. The promotion of LAM had a positive effect on duration of exclusive breastfeeding.