

Scale up phase of Postpartum Intrauterine Contraceptive Device (PPIUCD)

Postpartum insertion of IUCD is a global initiative. It is a low-cost intervention that allows healthy spacing between pregnancies, thereby contributing to the reduction of maternal, infant and under-five child mortality. Worldwide the unmet need for spacing among postpartum women is very high. 95-98% of postpartum women do not want another child before two years – yet only 40% are practicing family planning. In short, 60% of postpartum women who want to space their pregnancy have an unmet need.¹

The popularity of Postpartum Intrauterine Contraceptive Device (PPIUCD) in countries as diverse as China, Mexico and Egypt supports the feasibility and acceptability of this approach.²

Maternal & Child Health Integrated Program (MCHIP) and others have successfully introduced PPIUCDs to more than 65,000 postpartum women around the world. India is scaling up PPIUCD services nationally, Rwanda now has PPIUCD services in each of its five regions, Kenya is targeting one district where midwives are providing PPIUCD services, Guinea recently documented that when providers gain confidence in PPIUCDs, they also increase the number of interval IUCDs.³

Background: Pakistan, with a population of 185 million and a Growth Rate (GR) of 2.0 percent, is the 6th most populous country of the world and estimated to become 5th by 2050. With an MMR of 276 per 100,000 live births and a CPR of modern methods at 26%, Pakistan has some of the worst maternal health indicators in the region. 48% women deliver in health facilities⁴ and leave without receiving counseling or family planning (FP) services. These women often return with an unintended and unwanted pregnancy.⁴ In Pakistan, PPIUCD services are being provided since last 4-5 years by the trained public and private sector healthcare providers. Majority of mothers and Skilled Birth Attendants (SBAs) in Pakistan are not aware that contraception can be adopted soon after delivery.

Advantages of PPIUCDs⁵

- *Highly-effective, low-cost FP method*
- *Deemed safe by the WHO for postpartum, lactating women*
- *Long-acting and reversible; alternative to sterilization*
- *Does not interfere with breastfeeding*
- *Convenient timing for mother and provider*
- *Simple for the user to maintain*
- *Fertility returns upon removal*
- *In comparison with interval IUDs, PPIUCDs involve fewer instruments and less staff time*
- *Timing of service provision increases the likelihood of client uptake*

PPIUCD Intervention by National Committee for Maternal and Neonatal Health (NCMNH)

NCMNH is the technical and advisory arm of The Ministry of National Health Services Regulations and Coordination, Government of Pakistan.

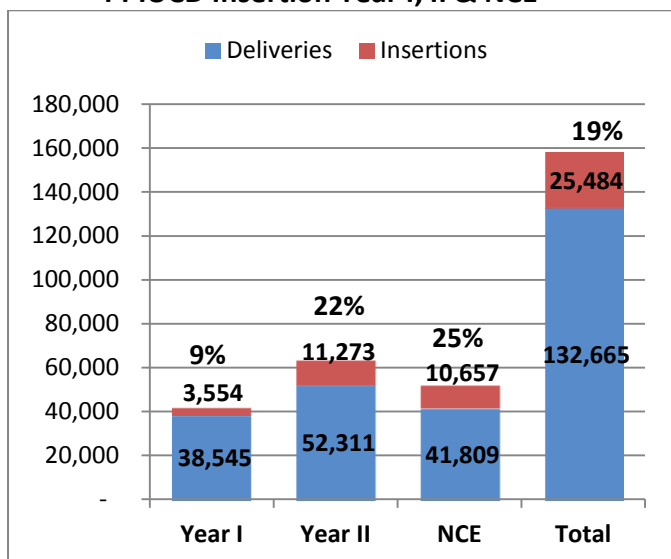
For improving maternal health and family wellbeing, spacing of pregnancies is one of the areas of NCMNH activities. In order to address the 20% unmet need for Family Planning⁴, NCMNH has been integrating provision of immediate postpartum contraception through Intra Uterine Contraceptive Device (IUCD) with existing delivery and Family Planning services of selected Hospitals. Postpartum intrauterine contraceptive device (PPIUCD) services can be offered to the couples as an effective, reversible and long-term contraception that can be opted for immediately after delivery.

In pilot phase (April, 2012 – September, 2013) this intervention was implemented in two hospital of Karachi, based on the successes & lesson learned a scale up intervention was developed for the postpartum intrauterine device in three cities of Pakistan.

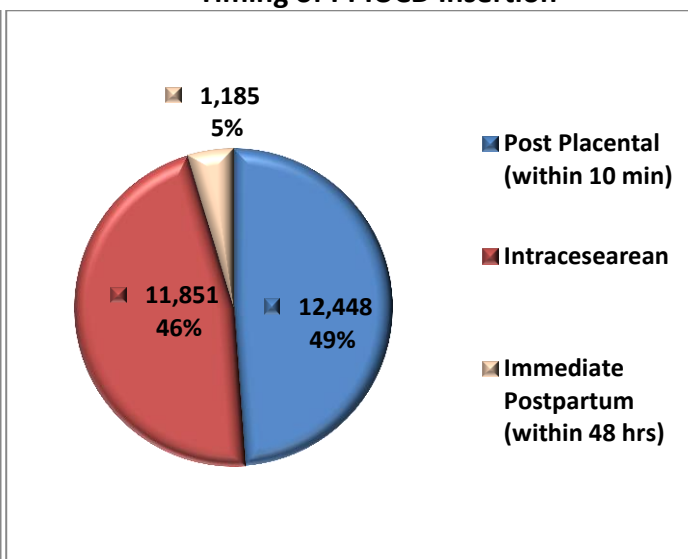
Scale up Phase (October, 2013 – February, 2016) 1,095 SBAs have been trained in PPIUCD services. Currently, 23 health facilities (14 in Karachi, 6 in Lahore and 3 in Islamabad) continue to work for PPIUCD services with NCMNH.

RESULT: Scale up phase (Period October, 2013 - February, 2016)

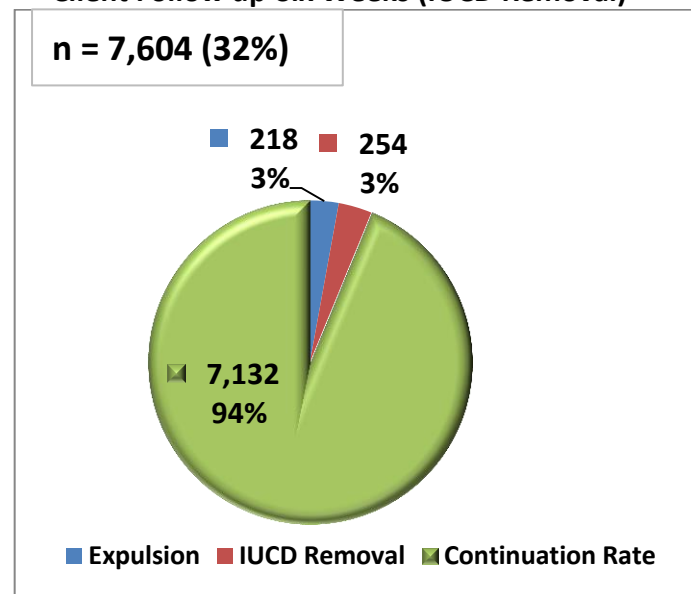
PPIUCD Insertion Year I, II & NCE



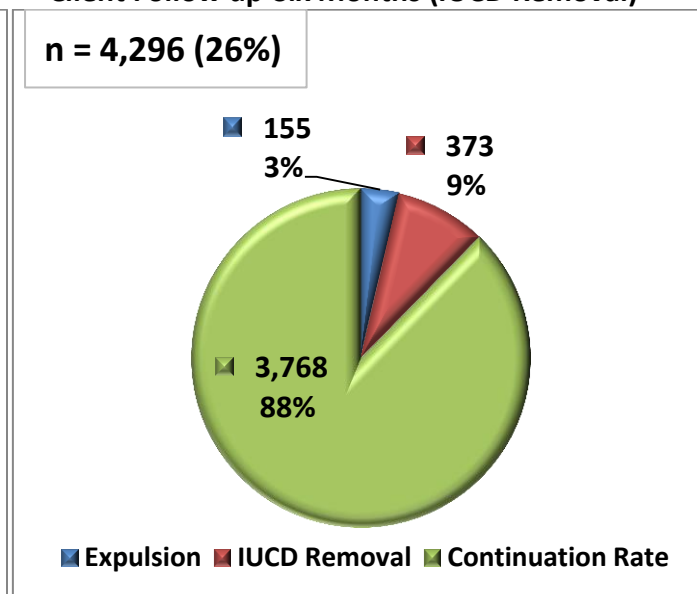
Timing of PPIUCD Insertion



Client Follow up-Six Weeks (IUCD Removal)



Client Follow up-Six Months (IUCD Removal)



At six weeks 23,773 women were due for follow up. 7,604 (32%) women could be contacted. Of those contacted, 5,749 (76%) had no complaints, 254 (3%) had IUCD removed due to various reasons and 218 (3%) were expelled. The six week continuation rate of those followed is 94%.

At six months 16,673 women were due for follow up. 4,296 (26%) women could be contacted. Of those contacted, 3,076 (72%) had no complaints, 373 (9%) had IUCD removed due to various reasons and 155 (3%) were expelled. The six month continuation rate of those followed is 88%.

References:

- Ross and Winfrey, Contraceptive use, intention to use and unmet need during the extended postpartum period, International Family Planning Perspectives, Vol. 27, No. 1, March 2001.
- Grimes DA et al. 2003. Immediate postpartum insertion of intrauterine devices. Cochrane Database of Systemic Reviews (1): CD003036.
- Program learning for postpartum intrauterine contraceptive device (PPIUCD) integration with Maternal Health Services. Programmatic experience from multiple countries.
- Pakistan Demographic & Health Survey (PDHS) 2012-13
- Best Practices for PPIUCD service delivery Population Services International (PSI) WHP Connection – Q3, 2012.