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Maternal and Child Health  
Integrated Program

# **Introduction of Postpartum Family Planning/Postpartum IUCD (PPFP/PPIUCD) Services among Saathiya Network of Private Providers**

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# Rationale for Involvement of Private Sector

- Growing middle class population in urban parts of India often attends private sector facilities for MH/RH services
- Public sector services not yet available in all urban areas as the National Urban Health Mission is yet to be launched
- Involvement of ob/gyns in the private sector helps dispel myths and misconceptions about PPIUCD within the ob/gyn community

# Goal and Objectives

## Goal:

- Strengthen provision of PFP services through the introduction of PPIUCD services to the private sector providers of the Saathiya Network in seven cities of Uttar Pradesh and Uttarakhand

## Objectives:

- Establish PFP/PPIUCD training centers in the Private Sector
- Introduce PFP/PPIUCD Services in the network of providers in seven cities of Uttar Pradesh and Uttarakhand
- Strengthen the quality of PFP service provision through implementation of customized service delivery standards
- Ensure regular supply of IUCDs (CuT-380A) at subsidized prices

# Saathiya Network

A network of Private providers developed under USAID supported Market-based Partnerships for Health Project (MBPH) to provide quality FP services to young married couples



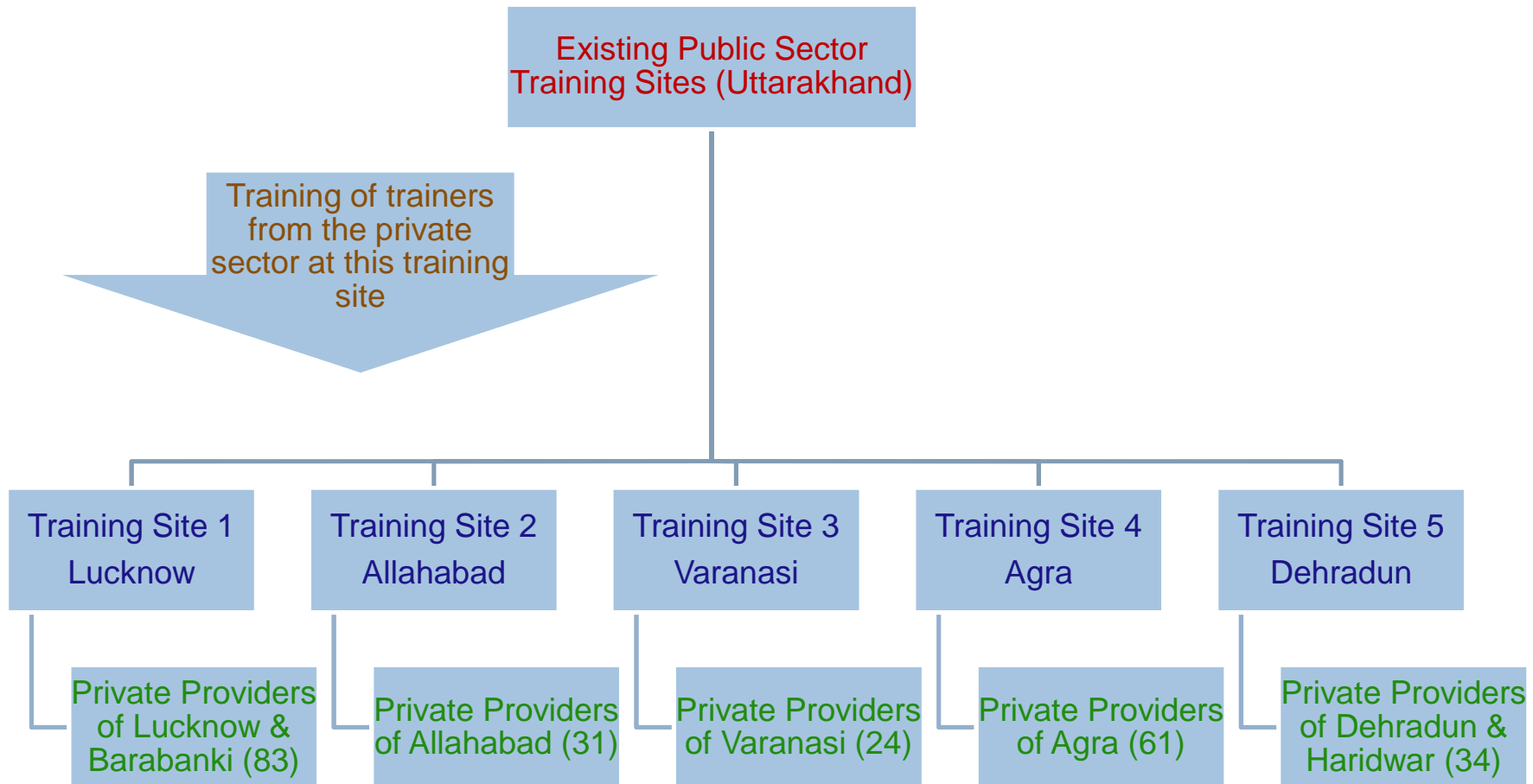
# Strategic Approach

- Advocate with private sector providers to dispel myths and misconceptions about PFP
- Collaborate with professional associations and champion providers
- Develop five private sector regional clinical training sites
- Develop private sector master trainers at these sites
- Develop customized clinical standards for private sector providers
- Develop a customized training schedule to suit private sector providers

# Strategic Approach, Continued

- Collaborate with IUCD manufacturer to ensure regular supply of CuT-380A (T-Kare) at lower prices
- Build paramedical workers' capacity for PPFPP counseling and infection prevention
- Develop and use local Behavior and Communication Change (BCC) materials to create awareness and demand for FP
- Build capacity of MBPH team to undertake supportive supervision visits

# Programmatic Approach for Trainings



# Development of Regional PFP/PPIUCD Training Sites among Private Providers

## Identification of potential training sites within the private sector:

- Facility assessment checklist utilized
- Conducted assessment of more than 17 private facilities to identify the 5 potential training sites
- Criteria for selection of training site:
  - Delivery Load of the facility
  - Availability of basic infrastructure such as privacy for counseling, IP practices, availability of OT etc.
  - Availability of training space
  - Willingness to conduct training and conduct follow-up visits with providers



# Development of PFFP/PPIUCD Training Sites, Continued

## Capacity building and facility strengthening activities:

- Conducted PFFP/PPIUCD clinical training and certification of the private providers by government training sites
- Built capacity of potential trainers on clinical training skills
- Conducted on-site and whole-site training on infection prevention practices and PFFP/PPIUCD counseling
- Strengthened the training site by providing Zoe Models and forceps for PPIUCD insertion

# Identification of Saathiya Providers for the PFFP/PPIUCD intervention

## Screening: Level 1

- In collaboration with MBPH, MCHIP screened 423 Saathiya Network Providers
  - Criteria's included: Minimum MBBS qualification (per GoI norms); Provision of delivery services
  - Identified 233 out of 423 potential providers

## Screening: Level 2

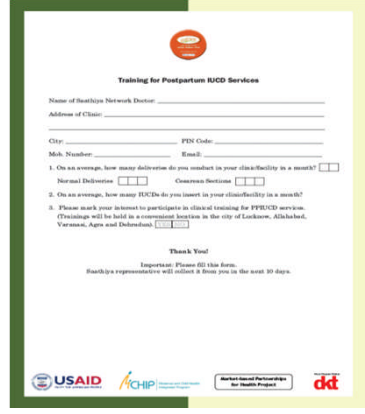
- In collaboration with MBPH, a “Mailer” was developed to seek interest for participation in the program
- Based on the feedback, the “Saathiya” providers were identified and invited for the training

# “Mailer” for the Saathiya Network of Providers

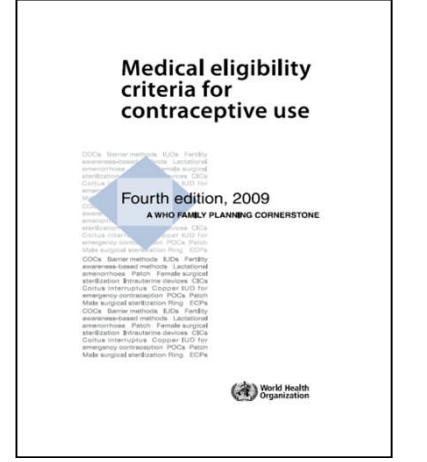
## Folder and Envelope



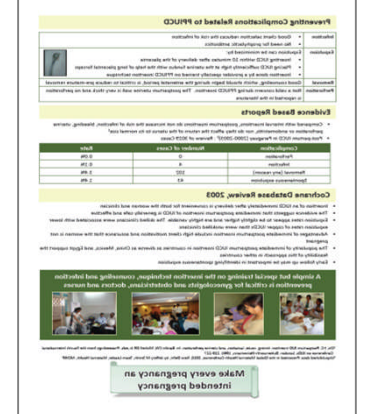
## Letter and Form



## WHO-MEC and PPIUCD Cochrane Review

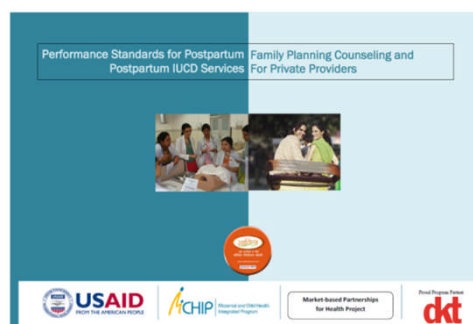


## Provider's Leaflet



# Quality Assurance through Service Delivery Standards

PPIUCD service delivery standards, customized for use in private sector, were developed in collaboration with the professional association - FOGSI.



Section	Area	Number of Standards
1.	General Counseling Skills; Counseling Clients on Family Planning during Antenatal or Interval period	17
2.	PPFP/PPIUCD counseling during early labour and postpartum periods	5
3.	Counseling during follow-up visit	1
4.	Service Provision for PPIUCD	10
5.	Management, IEC and Record Keeping	5
	<b>TOTAL</b>	<b>38</b>

# Interventions for Generating PFP Demand

- Developed BCC materials, in association with the MBPH team, for use by the Saathiya Network
- Included PFP/PPIUCD counseling in Saathiya Helpline (a toll free call center)

Provider's Leaflet



Poster

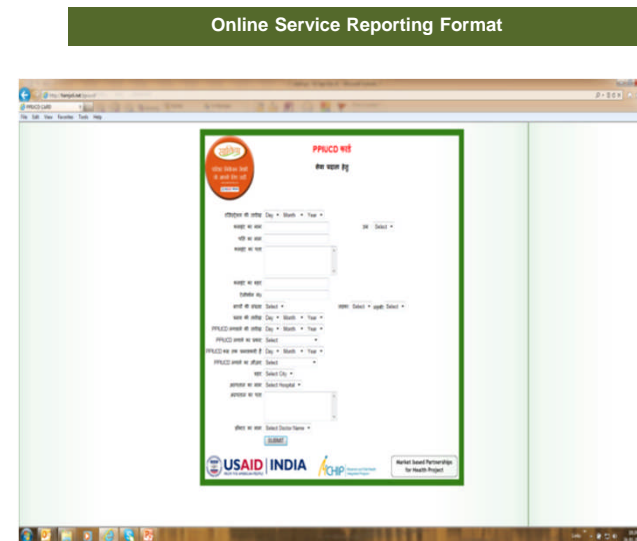


Flipbook for Counselors



# Establishment of Recording/Reporting System

- Developed Client Card for recording PPIUCD services, including follow-up visits
- Integrated reporting of PPIUCD Services into the existing online Saathiya reporting mechanism



# Collaboration with IUCD Manufacturer

MBPH team collaborated with DKT, India to support the following activities:

- Ensure a regular supply of CuT-380A at concessional rate (DKT India is providing 1 CuT380A free on purchase of one)
- Support the expenses for “Launch” of the intervention
- Support printing of BCC materials (expected)



Experience Sharing Workshop  
Supported by DKT

# Progress and Outcomes

- Established 5 PPFP/PPIUCD Training Sites
  - 3 Sites established by August and 2 Sites by Dec 11
  - 3 Sites initiated training in Sept. 11 and 2 in Jan. 12
  - Developed 11 trainers

Total No of Doctors Trained	Insertions Till Jan 12	Insertions Feb 12	Providers Initiated Services (Based on till March Report)
183	149	135	51

**Note: None of the private providers were providing PPIUCD Services before intervention**

- Collaborated with DKT India, IUCD manufacturer to provide CuT-380A at concessional rate



# Lessons Learned

- **Adaptation of training curriculum:**
  - Shortened the training time to 4 hours for 3 days
  - Trainings conducted in afternoons
  - More focus on Model and Clinical practice
- **Addressing “ Misconceptions/Myths and What’s in it for us?”**
  - Involving FOGSI to provide latest update on newest techniques and global evidence
- **Addressing “ How will we generate demand”**
  - Provision of IEC/BCC material
  - Including PFP Counseling in Saathiya Helpline
  - Capacity building of paramedics on PFP counseling

**Thank you!**  
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