

Programming strategies for Postpartum Family Planning



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List of Acronyms

AIDS	Acquired immunodeficiency syndrome
ANC	Antenatal care
BCC	Behaviour communication change
BCG	Bacille Calmette–Guérin (vaccine)
CHW	Community health worker
CYP	Couple-years protection
DPT	Diphtheria-pertussis-tetanus
EBF	Exclusive breastfeeding
EPI	Expanded Programme on Immunization
FP	Family planning
FP/RH	Family planning/reproductive health
HIV	Human immunodeficiency virus
HMIS	Health management information system
HTSP	Healthy timing and spacing of pregnancy
iCCM	Integrated community case management
IEC	Information, education, communication
IMCI	Integrated management of childhood illnesses
IUD	Intrauterine contraceptive device
LAM	Lactational amenorrhoea method
LARC	Long-acting reversible contraception
MCHIP	Maternal and Child Health Integrated Program
MEC	Medical eligibility criteria
MNCH	Maternal, newborn and child health
MIYCN	Mother, infant and young child nutrition
PMTCT	Prevention of mother-to-child transmission
PNC	Postnatal care
PPFP	Postpartum family planning
PPIUD	Postpartum intrauterine contraceptive device
PPTO	Postpartum tubal occlusion
RCT	Randomized controlled trial
SDP	Service delivery point
SPR	Selected practice recommendations for contraceptive use
STI	Sexually transmitted infection
TO	Tubal occlusion
UNFPA	United Nations Population Fund
USAID	United States Agency for International Development
WHO	World Health Organization

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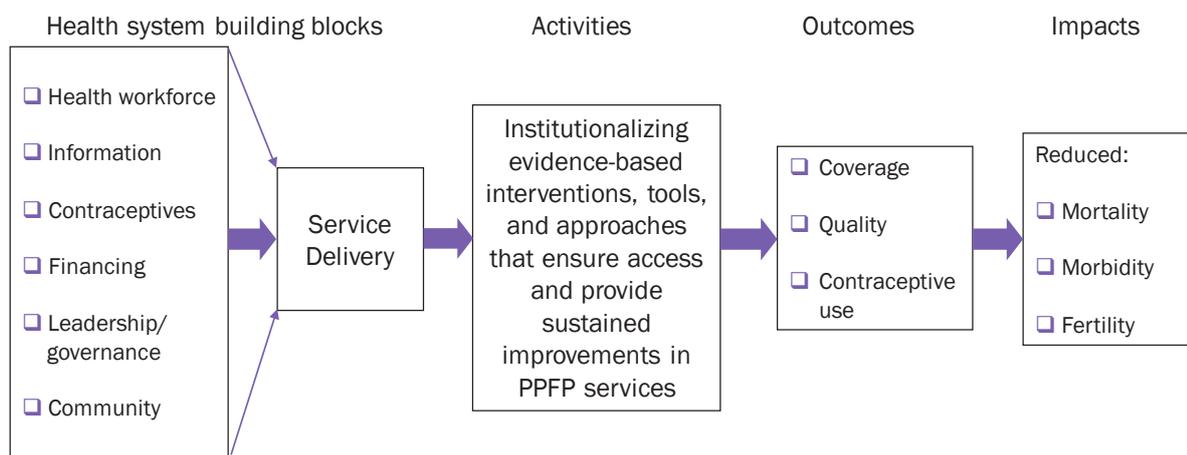
Preamble

Family planning (FP) is an essential component of health care provided during the antenatal period, immediately after delivery and during the first year postpartum (WHO 2009). Postpartum family planning (PPFP) is defined as the prevention of unintended pregnancy and closely spaced pregnancies through the first 12 months following childbirth.

This Programming strategies for postpartum family planning document was prepared to: 1) support the *Statement for collective action for postpartum family planning* (Annex 1), and 2) be used by programme planners and managers as a resource when designing interventions to integrate PPFP into national and subnational strategies.

PPFP should not be considered a 'vertical' programme, but rather as an integrated part of existing maternal and child health and FP efforts. Successful PPFP interventions require holistic and evidence-based programme strategies that contribute to strengthened health systems and sustained improvements in high-quality services that put people at the centre of health care (Figure 1).

Figure 1. PPFP programme model



The elements involved in designing a PPFP programme or intervention are the focus of this document. It is not, however, intended to be prescriptive or serve as a definitive 'how-to' for programme design and implementation. Users are assumed to have general experience in the design of family planning/reproductive health (FP/RH) programmes; this document provides additional support for PPFP programming. The content offers strategies that can be applied towards either developing a

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