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**M**aternal and Child  
Survival Program

# Adding LARC in the Method Mix: Expanding Options for PAFP in Guinea

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**INTERNATIONAL CONFERENCE ON  
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# Background |

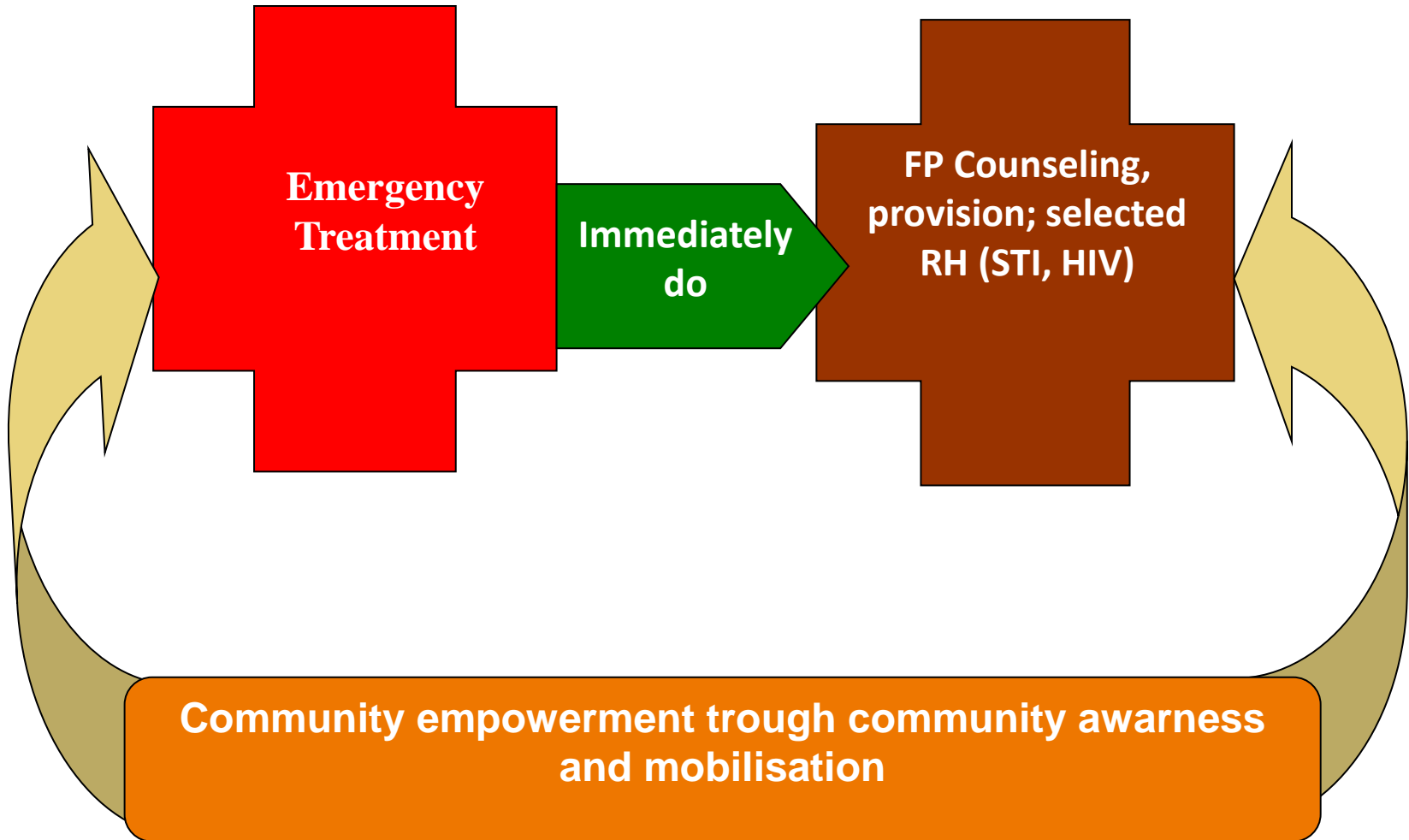
- Maternal mortality due to **abortion complications**: **17%** (hospital based data in 1998);
- **Contraceptive prevalence rate**: **7%** modern methods (**0.2%** for IUD, **DHS 2012**);
- **Postabortion care (PAC)**: One of strategies adopted by the Ministry of Health to address maternal mortality reduction due to abortion and increase the use of FP services;

# Background <sub>2</sub>

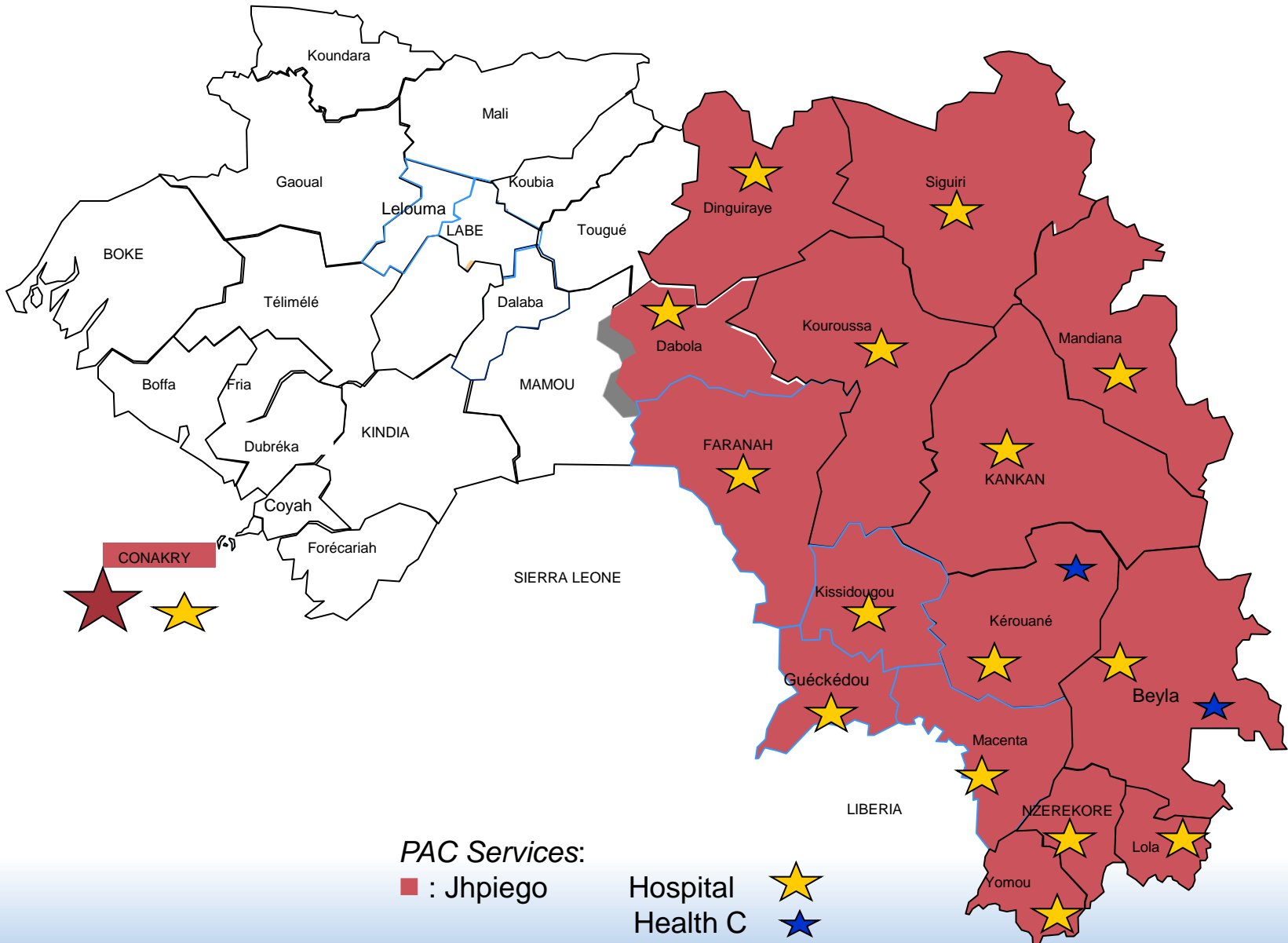
## Actions:

- Since 1998: MOH and partners including Jhpiego scaled up PAC services from 2 to 38 facilities
- 2008 - FP revitalization effort through expanding method choice with LARC
- 2011 - LARC offered at PAC service sites

# Background 3



# Methods/ PAC sites in the Project area



# Key interventions |

Advocacy to all key stakeholders about the importance of post abortion care and its contribution in reducing maternal morbidity and mortality and respond to unmet need for family planning

Prepare appropriate environment for PAC services: Development of policy, standards and protocols

Needs assessment in selected sites to guide startup of PAC services

Conduct training sessions on: Infection prevention; Counseling skills and family planning methods update; and MVA to manage abortion complications

Provision of equipment, job aids

Transfer of learning and supportive supervision

Establish a link PAC with other reproductive health services address other reproductive needs

Sensitization of the community for their participation in PAC activities

# Key interventions 2

## Training

All staff orientation

Training of PAC service providers in LARC

Training of trainers to decentralize and scale up the program in Guinea

## Supplies and equipment

Service startup

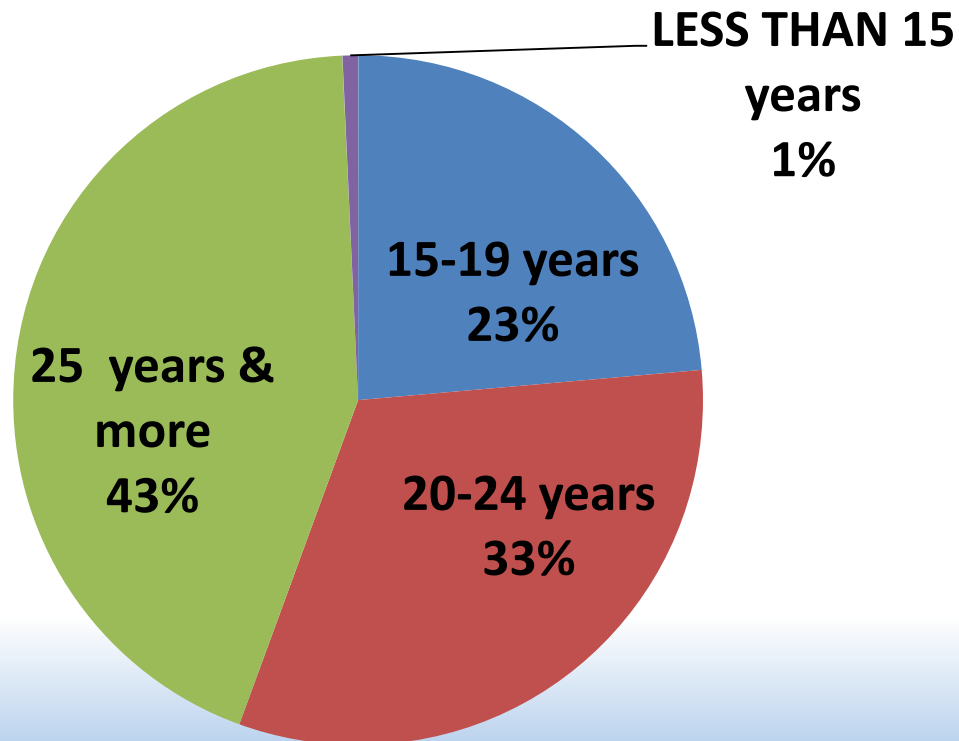
system to procure contraceptives in non-traditional place such as where PAC services are provided

# RESULTS I

From January 2011 to June 2015 for 24 sites:

- 8153 women benefited from PAC services

**% of PAC cases by age group**





# RESULTS 2

- **99%** of the 8153 patients (8097) were counseled on family planning and healthy timing and spacing of pregnancy
- **6559 (80%)** women left the service with one modern contraceptive method; (2012: 73%, 2014: 80%)
- **LARC** as a method of choice were selected by **29%** (IUD 24%, Implants 5%)
  - Use of LARC in postabortum period is increasing from 23% (2013) to 29% (2015)
- Pills are mostly used by **40%** of women (2014: 41%; 2013 45%)
- Injectables represent **22%** (2014 : 23%, 2013 25%)

# Conclusion

- 1 of 3 chose to use LARC and by extension a substantial number of women may desire timing their pregnancy and LARC provides that option
- When PAC providers are trained to offer LARC, this increases the method mix and choice available to women, as well as their utilization of long term contraception.
- Regular follow-up and supportive supervision help to improve the quality of PAC services.

**THANKS**

