

Increased Access to Family Planning Services: A Community-Based Approach in Rural Haïti

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INTRODUCTION

In rural Haiti, the fertility rate is 3.9 children per woman (1). The Family Planning (FP) coverage in Haiti is the lowest in the western hemisphere, with only 34.5% of women having their needs for FP satisfied (1). The gap in unmet FP needs has been estimated at 35% by the Haitian Ministry of Health (MSPP) (1). MSPP states that the repositioning of FP constitutes one of the strategies to achieve the objective to reduce maternal mortality which is 359 /100 000 live births (2). As part of this strategy, Partners In Health (PIH), in Haïti known locally as Zanmi Lasante (ZL), has placed greater emphasis on improving access to FP services (3).

INTERVENTIONS

1. Meetings with institutional and community leaders to obtain their commitment to FP.
2. Trained 50 staff from 12 institutions in the ZL catchment area.
3. Monthly mobile clinics to 30 communities in remote areas to improve access to FP.
4. Increased FP staffing in 9 clinics.
5. Adopted an expanded FP strategy through increased availability and access to FP care in other services in hospital wards including: pediatrics, internal medicine, infectious diseases, nutrition, and post-partum maternity wards.
6. Added supply chain support for continuously available FP methods.



Lausedanise Alexis educating women on family planning in Petite-Riviere. Photo by L. Alexis ZL/PIH

METHODOLOGY

FP mobile clinics were held in 30 zones across two departments of Haïti. Churches, schools, homes, outdoor meeting areas, etc. were accessed for this purpose.

Data was reported on a monthly basis to the ZL / PIH Monitoring and Evaluation (M&E) team. The program ran from January 2017 through June 2018.

RESULTS	2016	2017	2018
All FP methods accepted	7710	10464	9668
<i>Long-acting methods</i>	2313	5784	5386
- Jadelle	1768	5090	4482
- Tubal Ligation	448	463	803
- Intra Uterine Device (IUD)	97	231	101
<i>Short-acting methods</i>	5397	4680	4282
Community-based distribution	12031	25238	32272
Facility-based distribution	22200	24483	21631
Implants inserted in the community	0	935	494

ADVOCACY AND IMPACT

Our results prove that health education can shift cultural beliefs around acceptance of contraception which benefit women and their families.

FP can improve women's lives both through the proven reduction of maternal mortality rate as a result of increased access to FP (5), as well as economically through the reduced financial burden on the household.

We continue to advocate for the support of this program, however, there has been a reduction in activities due decreased availability of funding, as evident in the reduction in community-based distribution between 2017 and 2018.

CONCLUSION

This innovative program expanded community-based distribution of FP from short-term methods, making available long-term methods to clients in remote communities.

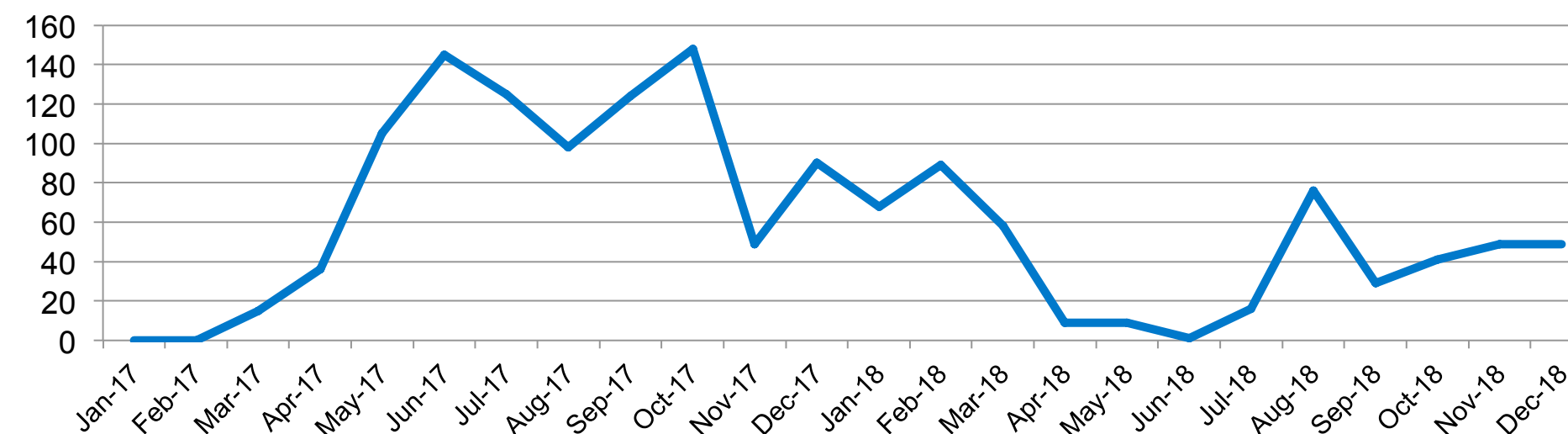
Implants have been inserted by providers at the community level in churches, schools, outdoor meeting areas, and private homes with no reported complications to date.

Future expansion of the program includes the development of educational curriculum in the secondary schools throughout the targeted areas.



Rosemie Lolagne educating women on family planning in subcommunal Mirebalais. Photo by R. Lolagne ZL/PIH

Community-Based Distribution of LARCs in the ZL Catchment Area (2017-2018)



Valecia Bruny places an implant in a patient's home in Crete Brulée. Photo by M. Jean-Baptiste ZL/PIH



Farah Nelson places an implant in a patient's home in Belladere. Photo by F. Nelson ZL/PIH

SOURCES: 1. RÉPUBLIQUE D'HAÏTI Ministère de la Santé Publique et de la Population (MSPP), 2016. Enquête Mortalité, Morbidité et Utilisation des Services EMMUS-VI. <https://dhsprogram.com/pubs/pdf/FR192/FR192.pdf> (accessed 6 Nov 2018).

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