

TESTED SOLUTIONS FOR

# Quality Family Planning Counseling



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# Promoting Quality Family Planning Counseling

Despite recent gains in the use of modern contraceptives around the world, many women are still dissatisfied with their family planning methods and discontinuation remains high. In close collaboration with health workers, postpartum women, implementers, and policymakers in Malawi, we developed a package of evidence-based, low-cost solutions using *behavioral design*.

Findings from a pilot test showed the solutions increased provider knowledge about postpartum family planning, improved provider attitudes towards method switching, and increased family planning referrals.







# How to Use This Guide

This tool guides you through the *how-to* of the solutions so you can see if you may want to adapt and implement these solutions in your own setting.

- 1** Learn more about the 4 different solutions that were tested
- 2** Consider how these could be useful for your programming
- 3** Download the actual files of the solutions for implementation
- 4** Read more about the formative research or pilot test results

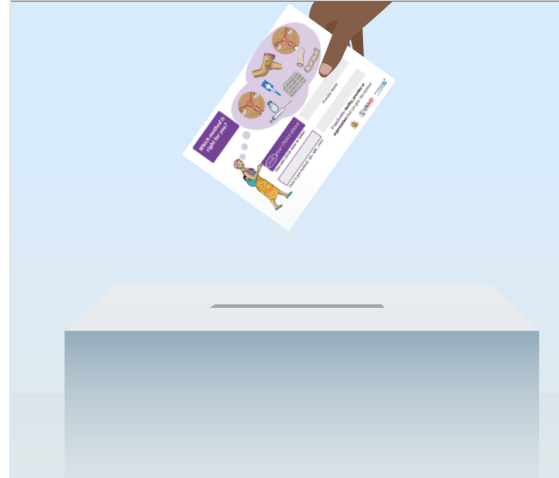
# Tested Solutions



## Group Counseling Tool

An interactive, gamified counseling tool, including dice and method discussion cards.

[EXPLORE](#)



## Method Referral Card and Drop Box

A card given when a woman's method is unavailable or when she has not yet decided and a drop box for redeemed cards.

[EXPLORE](#)



## Antenatal Care Handout

A visual discussion handout for FP counseling with pregnant women and a plan-making prompt to promote postpartum FP uptake.

[EXPLORE](#)



## Postpartum Family Planning Reference Guide

A behaviorally-informed reference sheet for providers to use when discussing family planning methods.

[EXPLORE](#)





# Group Counseling Tool

Gamifying family planning counseling to ensure quality, unbiased guidance

During family planning counseling, providers typically discuss every method, but they may do so in ways which are intentionally or unintentionally biased. They may spend more time talking about certain methods, describe different attributes of each method or consistently introduce certain methods first, focusing attention on those methods. This makes it difficult for women to compare their options, and many women end up choosing a method that doesn't meet their unique needs.

**The interactive Group Counseling Tool helps providers share information on methods with women in an engaging, unbiased and comparable way. The tool ensures providers give women the information that matters most to them, helping them make the best FP choice.**

*“[The Group Counseling Tool] was so enjoyable and very educative...the women were so engaged and answered questions freely”*

– **PROVIDER**

*“Group counseling [tool] has reduced workload for me. It summarizes all information and I reach out to all women at once with adequate info.”*

–**PROVIDER**

# How the Group Counseling Tool Works



1

Provider asks women to roll a colored dice to decide which method will be discussed first.



Randomizes the order in which methods are discussed.

2

Based on the color rolled, provider describes the method without naming it.



Ensures women assess methods on their characteristics instead of preconceptions tied with the method name.

3

The women roll the colored dice again to decide the next method to discuss.



Exposes women to information on all methods, not just methods they think they are interested in.

4

Provider reads the same type of information about each of the methods.



Enables women to compare across methods and choose one that best suits their needs.

5

Provider asks the women to guess which method was described, and then reveals the method.



Helps women learn about new methods and not be biased towards methods they know.



# Group Counseling Tool

## Considerations for Adaptation and Implementation

- The Tool can be used for group health discussions before FP, ANC, PNC, immunization, community outreach, or any time when women congregate to wait for services.
- The Tool can be used with small or large groups. If feasible, breaking women into smaller groups (i.e., 10-20 clients) may facilitate increased discussion.
- The Tool can be hung up or placed on the floor like a mat. Wherever it is placed, women should be able to see the method pictures and descriptions.
- The Tool should be implemented in coordination with existing one-on-one family planning counseling tools, and should not replace traditional individual FP counseling.
- Health workers should closely read the information on the Tool and not add extra information. Health workers should answer the clients' questions but also refer them to individual counseling.

## Materials

[DOWNLOAD TOOL](#)[DOWNLOAD CARDS](#)[EXPLORE MORE TESTED SOLUTIONS](#)





# Method Referral Card and Drop Box

Helping women follow through to access their chosen FP methods


There are many reasons why a woman might not be able to take up a method on the same day as her consultation. Providers might not be trained to deliver her desired method, or it might be out of stock. When this occurs, providers often send women away and tell them to return to the facility later, without giving specifics about when or where to return.

**The Method Referral Card helps ensure that women get their desired method through a simple tracking system.**

*“A woman who is not sure what she wants is given the card to think about it at home, then she returns with a decision.”*

**—PROVIDER**





# How the Method Referral Card and Drop Box Works

1

If the woman knows what she wants, provider circles the method and writes where and when to get it.



Helps women remember where and when they can get their desired method.

2

If the woman isn't sure, she can think about her choice and circle the method when she's ready.



Facilitates a discussion on method options and empowers the woman to make a choice for herself.

3

Provider tells the woman to bring the card to the facility when she's ready for her method.



Prompts women to make a plan to get their desired method.

4

Provider writes their own name on the card.



Acts as an accountability mechanism for referring providers.

5

When they return for their methods, women leave Cards in the Drop Box to be counted.



Ensures providers know when women follow through on their referrals.



# Method Referral Card and Drop Box

## Considerations for Adaptation and Implementation

- All partners who deliver FP services in a particular area can be involved with the referral system, and all partners should be aware that women may come to them with Cards.
- Drop Boxes can be placed at a variety of locations where women receive FP services, such as at facilities, in outreach clinics, or at immunization clinics.
- Providers should encourage women to continue taking their current methods correctly, or take up alternative short-term methods while they wait to get their method of choice.
- Providers can use the Postpartum Family Planning Reference Guide when discussing method options with postpartum women who are unsure of what method they want.
- Facility staff should decide how often they would like to open the Drop Box to review redeemed cards.

## Materials

[DOWNLOAD CARD](#)

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# Antenatal Care Handout

Planning ahead for postpartum family planning during pregnancy

Providers should begin to discuss FP with women during pregnancy and help them make a plan to take up their method of choice postpartum. However, ANC providers are often too focused on the immediate health concerns of pregnancy to spend adequate time on FP.

**The Antenatal Care Handout helps providers facilitate a conversation about FP early, so that women will have time to think about their postpartum needs and plan ahead to take up FP postpartum.**

*“It is quick and it is really helping begin a conversation about family planning. Women are even demanding for it because it is helping them discuss [postpartum family planning] with men. We have even run out of it.”*

**—PROVIDER**



# How the Antenatal Care Handout Works

1

Provider gives the handout during ANC and asks the woman to start thinking about FP.



Helps providers begin the conversation about postpartum FP.

2

Provider asks the woman to select **3 or more** methods to consider and when she'd like to take up FP.



Expands the number of methods a woman will consider and helps her plan ahead.

3

At a next visit, provider asks if she has decided on a method and when she would like it.



Prompts conversation about FP multiple times before delivery.

4

If the woman has chosen, provider ticks the box indicating her choice.



Helps women commit to taking up FP, and reminds them when they decided to take it up.

5

Providers in the labor ward, postnatal care, or immunization ask women about their choice.



Facilitates take up by involving providers at different touchpoints.



# Antenatal Care Handout

## Considerations for Adaptation and Implementation

- The Handout should be administered to pregnant women during ANC in their third trimester, and referenced across two or more ANC visits.
- The Handout should be given to women at the same time as any other materials or handouts given during ANC.
- In a context where women use health passports (or other women or child health documents), the Handout can be inserted near the ANC or delivery section.
- Providers should use the prompt in tandem with the Postpartum Family Planning Reference Guide when discussing when particular methods can be administered in the postpartum period.

## Materials

[DOWNLOAD HANDOUT](#)

[EXPLORE MORE TESTED SOLUTIONS](#)





# Postpartum Family Planning Reference Guide

Ensuring accurate method information for the postpartum period

Providers often assume that a postpartum woman must wait to resume family planning until a certain amount of time after her delivery (e.g., 6-weeks). However, many family planning methods can be taken up immediately—within 48 hours—and when each method can be taken up differs by method.

**The Reference Guide visually shows when methods become available in the postpartum period. This makes it easier for providers and women to understand the differences between methods.**

*Before using the solutions, most antenatal care providers only told women they could take-up FP six-weeks after delivery, and almost none mentioned immediate postpartum FP. However, when we observed providers using the Handout and Reference Guide, 78% told women that they could receive a family planning method within 48 hours of delivery.*



# How the Postpartum Family Planning Reference Guide Works

1

Provider has the Reference Guide available during ANC, postnatal, or FP consultations.



Reminds providers of when each method is available postpartum, and that some methods are available immediately.

2

Provider shows women the different **times when methods are available** by pointing to images depicting the postpartum journey.



Enables women to consider times in the postpartum period when they can take up different methods.

3

Provider shows women **all of the methods available** to them during specific moments postpartum.



Allows women to visually compare across methods when choosing one that might suit their needs.



# Postpartum Family Planning Reference Guide

## Considerations for Adaptation and Implementation

- The Reference Guide should be laminated and used alongside existing tools, and should be referenced by providers when using the Antenatal Care Handout.
- A primary copy of the Reference Guide should be stored in a safe location in the facility, so that it can be copied for staff as needed.
- Any provider involved in postpartum FP counseling, including community health workers who do outreach, should have a copy of the Reference Guide.
- A large version of the Reference Guide can be hung up in facility waiting areas, or other locations where women congregate.

## Materials

[DOWNLOAD GUIDE](#)

[EXPLORE MORE TESTED SOLUTIONS](#)



A black and white photograph of a woman with short dark hair, wearing a light-colored t-shirt, sitting at a desk and working on a small object with her hands. In the background, a baby is visible, and there are various items on the desk, including boxes labeled 'asta' and 'epse', and a wall covered with papers and charts.

# Additional Resources

## LEARN MORE:

- **Piloting Solutions to Encourage Quality FP**  
Results from the pilot evaluation
- **Feasibility Study Insights**  
Results from a 3-week implementation study
- **Encouraging Counseling that Promotes Meaningful Choice**  
Summary brief on formative research and solutions
- **Handoff Package for Postpartum FP and Improved Counseling**  
Implementation guide and supporting materials

# All women deserve family planning methods which suit their evolving needs.

For more information about our tested solutions to improve  
Quality Family Planning Counseling, contact the  
**ideas42 Global Health Team** at [gh@ideas42.org](mailto:gh@ideas42.org)

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