

WOMEN DELIVER 2013 CONFERENCE

Health Systems Issues with Postpartum Family Planning and Advocacy

Free Perinatal & Postpartum Contraceptive Services Decreases the Incidence of Unintended Pregnancy Among Rural-to-Urban Migrant Women in Shanghai

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Economic Development & Internal Migration

- Unbalanced economic development between rural and urban area in last 30 years in China has led to a vast internal migration
- People move from rural area to cities to seek jobs with higher income for a better life

In 2010, China:

Total Population: 1.3 billion

Internal Migrants: 0.3 billion

Overall Population of USA in 2000

In 2010, Shanghai:

Total Population: 19 million

Internal Migrants: 9 million

Overall Population of Senegal

Migrant women in city:

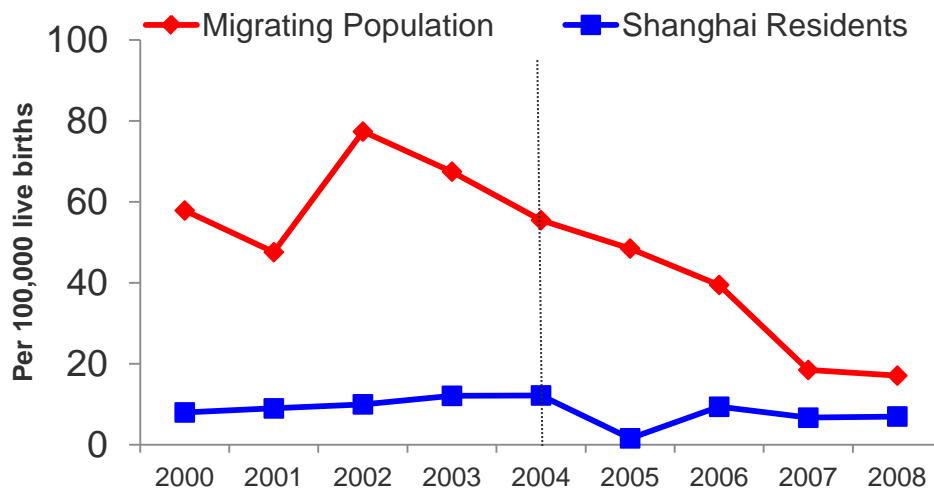
- Low social economic status
- Not involved in health insurance provided by city government



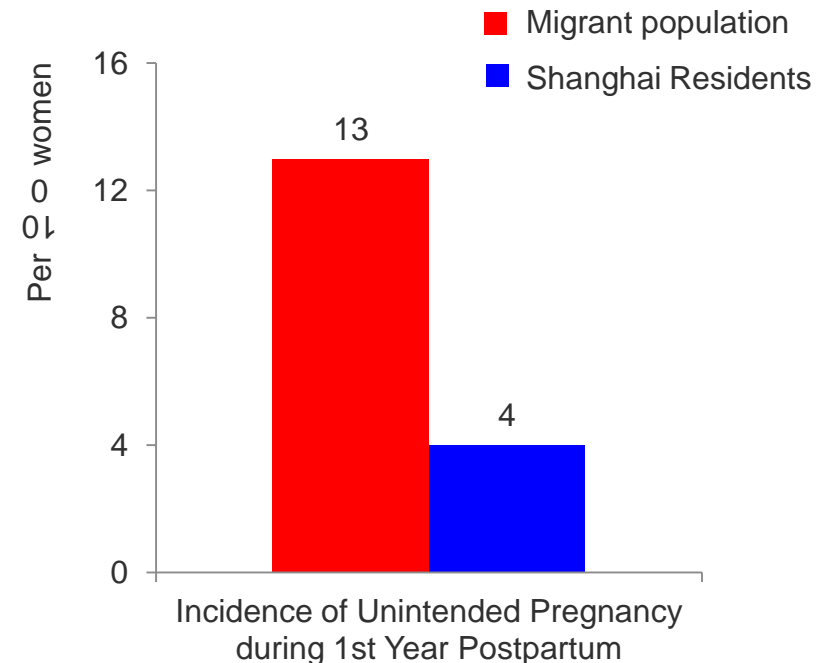
Pregnant woman, Dajing Lu market, Shanghai, China, 2007

Maternal & Reproductive Health of Migrant Women in Shanghai

- Improved maternal health care & family planning services for migrants since 2004: established maternal health center for impoverished migrant women & extended free family planning services to married migrant couples
- MMR decreased significantly since then
- **Postpartum unintended pregnancy remains high**



Maternal Mortality Ratio in Shanghai, 2000-2008



Why migrant women had such a high incidence of postpartum unintended pregnancy?

- **Delaying contraception use and subsequent exposure to unprotected sexual intercourse**
 - 86% unintended pregnancies resulted from non-use of contraception
 - Median month of contraception initiation vs. sexual intercourse resumption after childbirth: 7.5 month vs. 2 month
- **Low awareness and utilization of free family planning services:** 24% for awareness & <2% for utilization

Challenge:

How to improve migrant women's access to free family planning services, increase their early use of contraception after delivery, and decrease the high incidence of unintended pregnancy during the first year postpartum?

Study Design: A Prospective Study

Study project: Perinatal and Postpartum Contraceptive Services for Migrant Women (*Funded by Shanghai Municipal Population & Family Planning Commission*)



Study Site: Pu Jiang Community Health Center (The first and most widely used maternal health center in Shanghai)

Study Participants: Migrant women who gave birth from January to October 2006 & met inclusion/exclusion criteria

Study Groups: Intervention group (n=840) / Comparison group (n=852)

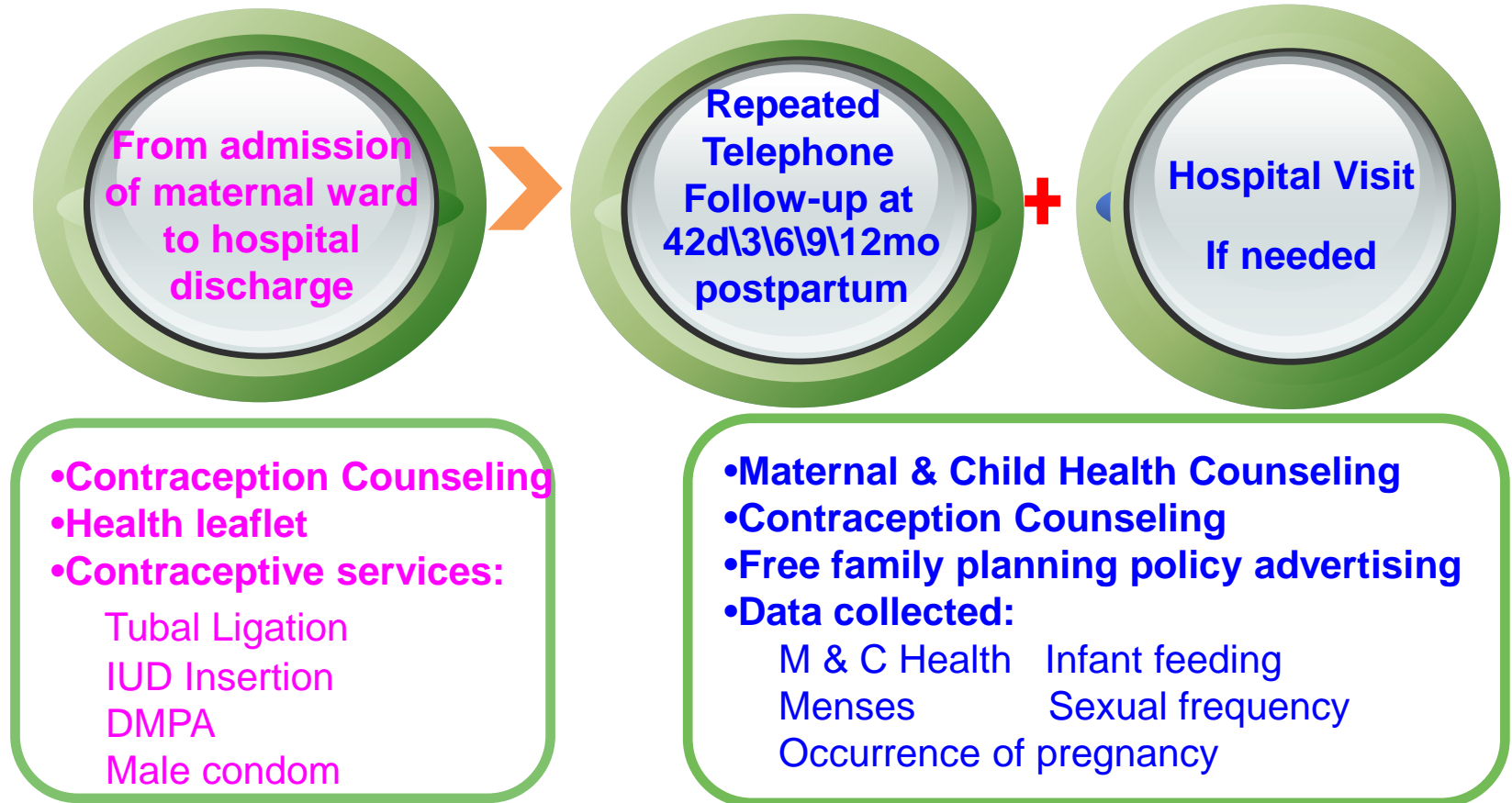
Study Period: From admission to the maternity ward during early labor to the end of first year postpartum

Study Endpoints: **Incidence of unintended pregnancy**

Time of contraception initiation

Contraception prevalence by the end of first year

Intervention Measures: Intervention group



Comparison group: Received the standard maternity care provided at the hospital but did not receive the contraceptive service and counseling provided by the project. During the enrollment at 6-month and 12-month follow-up telephone interviews, information was collected about M & C health, current contraceptive practices, and the occurrence of pregnancies following the index births.

Main Results:

➤ Effects of immediate and intensive contraception counseling prior to discharge and during postpartum :

1) Decrease the incidence of unintended pregnancy during first year postpartum
 (2.4 per 100 women year vs. 9.6 per 100 women year, $p < 0.05$)

2) Increase early use of contraception in intervention group: (both median months to contraception initiation & sexual resumption were 2 months)

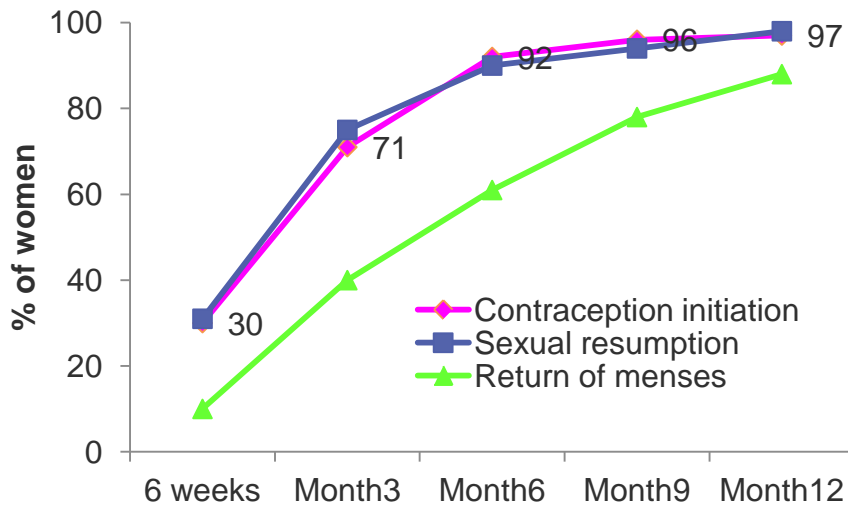


Figure Contraceptive initiation, sexual resumption, and menses return, by time, among women in intervention group.

3) Contraceptive Methods

- Increase the over all prevalence of contraception by the end of first year postpartum (97% vs. 63%, $p < 0.05$)
- Increase the prevalence of long term reversible methods (IUD+DMPA:47% vs.34%, $p < 0.05$)
- Increase partner's use of condom (39% vs.14%, $p < 0.05$)

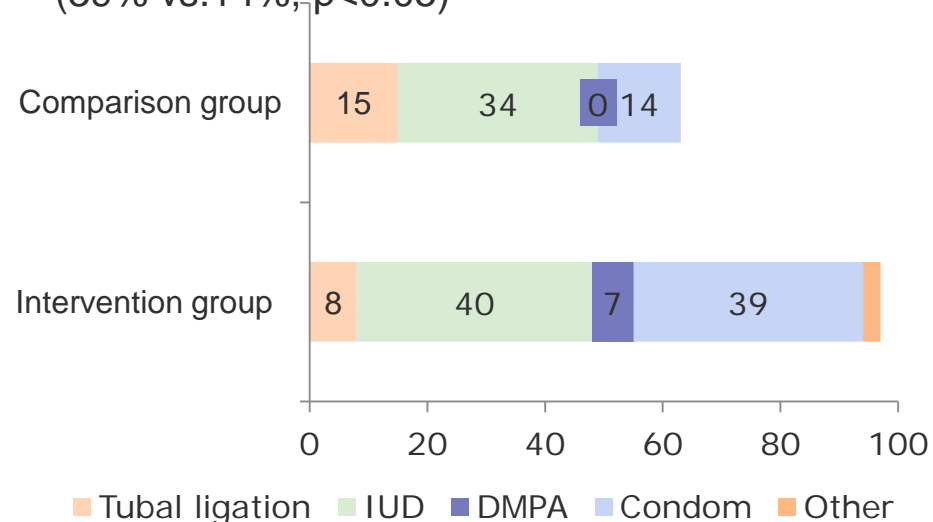


Figure: Contraceptive prevalence among women in intervention and comparison groups by the end of 1st year postpartum

Effects of Study Findings & Recommendations

❖ Study findings submitted to Shanghai Population & FP Commission

-- Recommended combining free FP services with delivery services in maternal health centers for migrant women to increase their access to & utilization of such services

Results:

- Shanghai government has expanded free FP services to all 24 maternal health centers in 2011
- FP workers have been assigned to each center to provide contraception counseling for migrant women, advertise free FP services and distribute free condoms

Future research:

- Need more evidence to support the application of integration of free FP services with vaccination programs for migrant infants in Shanghai to enforce the FP counseling during postpartum period
- Whether or not the mobile technology could become an economical way to advertise free FP service and RH knowledge among migrants