

ACCELERATING CONTRACEPTIVE UPTAKE THROUGH POST-PREGNANCY CARE MODELS

June 2026

Duration: 2018 - 2026

Donor: Gates Foundation

Geographic Focus: Islamabad Capital Territory (ICT)

Partners: Deep K. Tyagi (DKT) International, Impact for Health International, Population Council, Population Services International, Health Services Academy

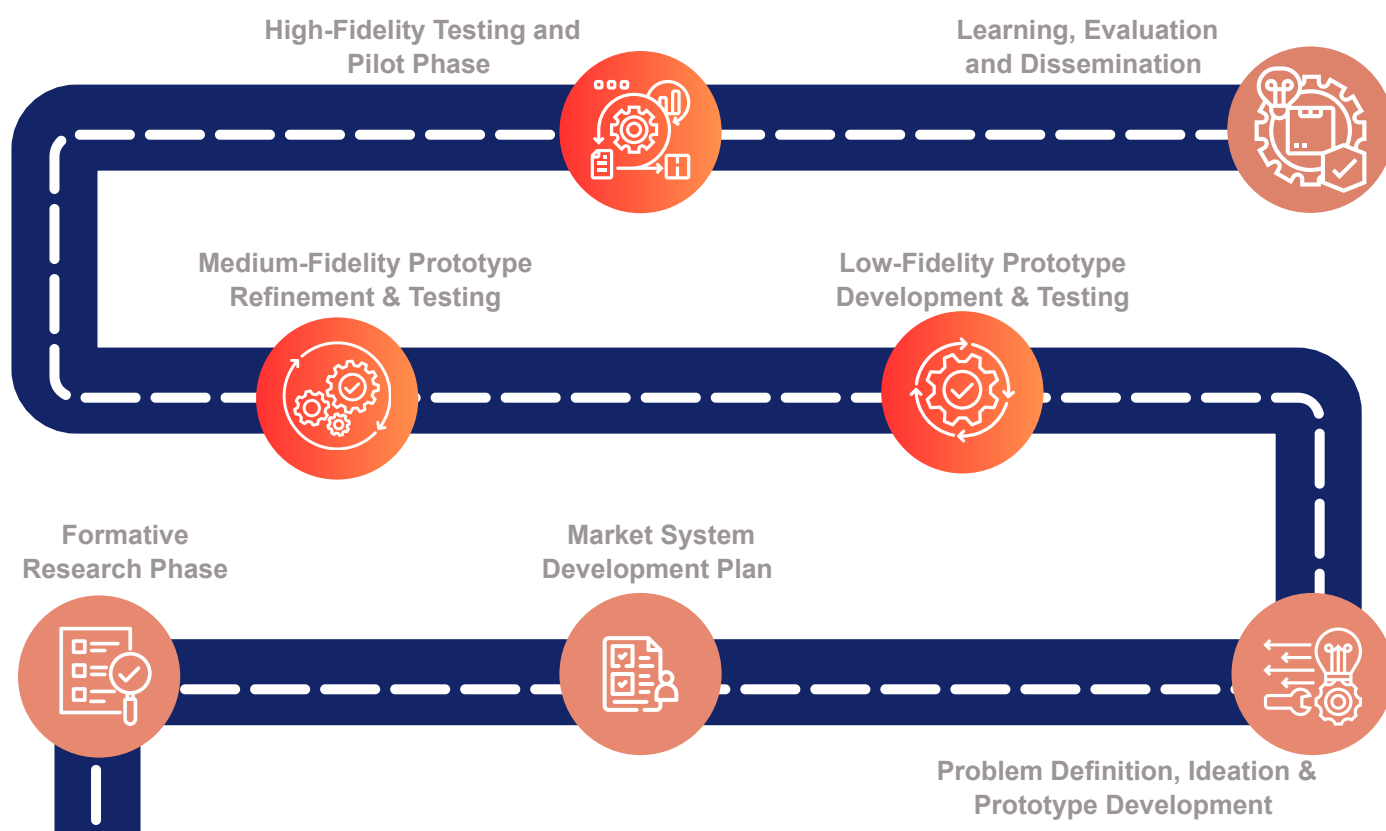
PROJECT INTRODUCTION

This unique research project aimed to test a combination of interventions to influence family planning uptake among women and men who purchase medication abortion pills from pharmacies and drug sellers. According to a recent study by the Population Council in Pakistan, the number of abortions rose from 2.2 million in 2012 to 3.8 million in 2023, with population growth accounting for about half of this increase. Post-abortion family planning services are less available compared to post-partum family planning, with notable gaps in information, counseling, and contraceptive method availability. Widespread social stigma surrounding medical abortion (MA) make this a largely invisible population that is difficult to reach. The challenge of this project was to understand the barriers they faced and determine how best to overcome them in locally relevant, culturally competent ways. To address this challenge, the project employed a user-centered design (UCD) approach to understand key factors at play and to test interventions aimed at reaching this target population with accurate information and services through appropriate channels.

PROJECT GOAL

To develop scalable, user-centered solutions to improve post-medication abortion family planning uptake and continuation and strengthening the post-pregnancy care ecosystem.

USER-CENTERED DESIGN APPROACH



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BARRIERS

Through formative research and an iterative process of prototype development and testing, the following barriers to accessing PAFP were identified for self-MA users:



Inconsistent counseling



Judgmental attitudes from healthcare providers



Pervasive myths and misinformation about contraception



Impact of economic pressures and inflation on healthcare providers and users



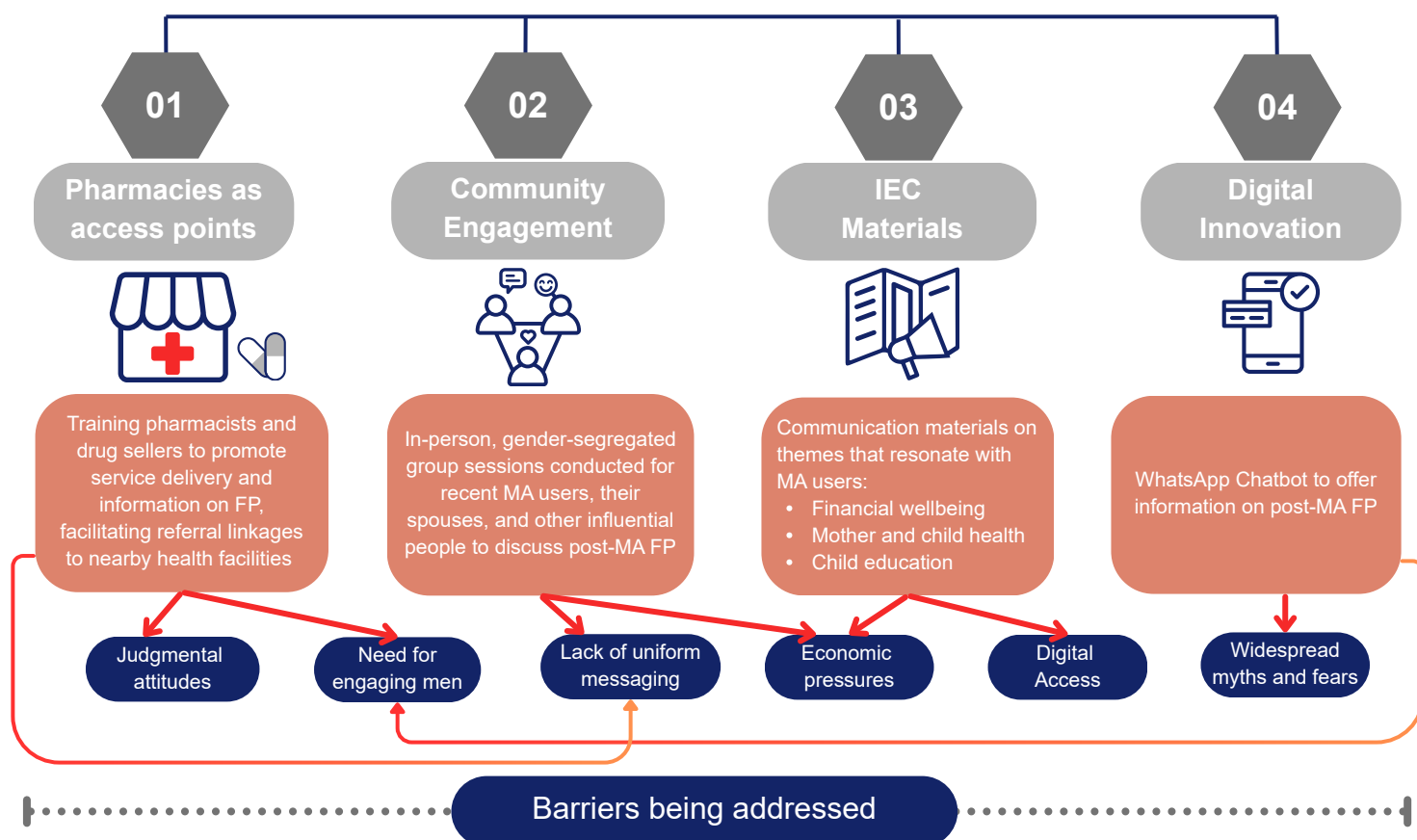
Insufficient male involvement



Limited digital solutions for private and confidential FP counseling, information and support

PILOTED INTERVENTIONS

The PMAC model, tested in urban and peri-urban areas of the country, aligns with the national family planning narrative of *Tawazun* and Pakistan's FP2030 targets to increase the country's modern contraceptive prevalence rate. The feasibility of a combination of four interventions was assessed through robust research involving intervention and comparison groups.



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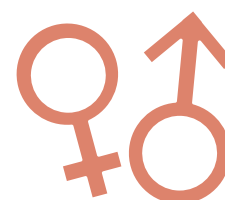
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KEY ACHIEVEMENTS



Piloted a scalable model for PAFP uptake and continuation in urban and peri-urban areas of the country.

Developed culturally sensitive approaches to reach men and women of reproductive age with targeted messages to influence their family planning decisions.



Generated unique insights about barriers faced by women accessing PAFP information and services outside health facilities and the role of key stakeholders influencing their decision-making.

Leveraged relevant communication channels and key community touchpoints, such as pharmacies, to promote family planning uptake and sustained use.



WAY FORWARD

This project offers a model of interventions and promising approaches for promoting post-MA uptake of FP, particularly in low-resource urban and peri-urban areas of Pakistan. Lessons drawn from this experience will help other stakeholders to adapt and replicate the good practices from this model, supporting scale-up of PAFP information and service delivery through coordinated efforts between the public and private health systems.

CONTACT US

For any project related information or queries, email us at: ipaspakistan@ipas.org.

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