

The Ministry of Public Health and WHO take action to strengthen family planning services in Afghanistan

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Photo Caption: A team of WHO staff visiting Malayi and Rabia Balkhi specialized women hospitals in Kabul.

Postpartum family planning addresses the needs of women and couples who wish to delay having children as well as those who have reached their desired family size and wish to avoid future pregnancies. The first year postpartum is a crucial time to provide a wide range of family planning counseling and modern contraceptive methods to women in line with [WHO's Medical Eligibility Criteria \(MEC\) for Contraceptive Use, 5th edition \(2015\)](#) and [Selected Practice Recommendations for Contraceptive Use \(SPR\) 3rd edition \(2016\)](#).

How did Afghanistan do it, and how did the WHO Secretariat support Afghanistan?

- **Revision of national family planning guidelines** – Upon the Ministry of Public Health's request, WHO and partners updated the national family planning service delivery guidelines based on the most up-to-date WHO guidelines on family planning. WHO also supported document translation into local languages, conducted training of trainers (300 participants trained) on use of the updated guidelines and training materials, and

distributed 3000 [medical eligibility criteria \(MEC\) wheels](#) to doctors and midwives to support safe and effective use of contraceptives at different levels of healthcare delivery.

- **Establishment of postpartum and post-abortion family planning corners** – The established postpartum family planning centres in the 25 targeted health facilities have the highest institutional delivery rate and utilization of family planning services in the country. WHO supported training and orientation for management-level staff and health service providers on the importance of postpartum/post-abortion family planning corners and services in Herat and Kabul in 2020. Thirty-three service providers in the two provinces were trained on intrauterine device (IUD)/implant insertion and removal. All 25 health centres were equipped with IUDs, implants, the WHO decision-making tool for family planning and MEC wheels. A technical working group developed a checklist based on WHO guidance to regularly monitor and supervise the postpartum family planning corners to ensure quality family planning services [5]. Three supportive quarterly project monitoring and provider supervision missions were conducted in both provinces. Baseline assessment of the 25 health facilities, in Kabul and Herat provinces, conducted in 2019 showed that IUD and implant insertion kits were available only in 50% of facilities, implants were available in 13% of facilities, and counselling tools were available in 20% of the facilities. With WHO support, both provinces showed an increase in uptake of implants in 2021 compared to 2019; in Kabul province from 118 in 2019 to 1169 in 2021, and in Herat province from 28 in 2019 to 306 in 2021. Eighty-five per cent of healthcare providers demonstrated the knowledge and skills on postpartum and post-abortion family planning services and 80-90% met the standards as outlined in the family planning service quality improvement checklist. Although the COVID-19 pandemic significantly stunted implementation in 2020 and was followed by a change of government in 2021, mid-term evaluation of postpartum family planning corners was conducted between June and September 2021. The implementation data from 2019 to September 2021 analysed in quarter four showed that the corners are effective in reaching women and improving contraceptive uptake. The United Nations Population Fund (UNFPA), in consultation with WHO and the Ministry of Public Health, agreed to scale up the postpartum family planning corners in 40 additional health facilities in two additional provinces in Afghanistan.

WHO continues to support the Ministry of Public Health in implementing and monitoring postpartum family planning corners with the aim of accelerating quality and rights-based family planning services within the broader framework of UHC and the attainment of SDG targets 3.1, 3.7 and 5.6, and the GPW13 strategic priority to ensure one billion more people benefit from UHC

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- [5] Technical working group was comprised of representatives from Reproductive, Maternal, Newborn, Child and Adolescent Health (RMNCAH)/key family planning partners, the United Nations Population Fund, the United States Agency for International Development, Jhpiego, WHO, professional associations and implementing nongovernmental organizations.

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