Meeting Malawi’s FP 2020 Contraceptive Prevalence Goal: How Will We Get There?
National Post–FP 2020 Summit Meeting
Lilongwe, Malawi, January 23, 2013

Jane Wickstrom, MA and Melanie Yahner, MPH

Managing Partner: EngenderHealth; Associated Partners: FHI 360; Futures Institute; Johns Hopkins Bloomberg School of Public Health Center for Communication Programs; Meridian Group International, Inc.; Population Council
EngenderHealth’s Reality √ Tool

Two future scenarios of CPR growth using Reality √:
- What will it take for Malawi to reach its family planning goals?
- What is the impact in terms of service needs?
- What are the health benefits for women and families?
- What will it cost?

Programmatic considerations

Audience reaction to this information
What Is the Reality ✔ Tool?

- Provides program needs/impact data
  - Tests multiple scenarios in minutes → “What if…I change my CPR Goal?”
  - Flexible level of analyses: national, regional, district, site
- User-friendly
  - Excel-based worksheets, graphs
  - User’s Guide (English and French)
  - Minimal data requirements
    - CPR data
    - Population data
In Malawi, it is more appropriate to use ALL women in our analysis, since:

- Only 67% of Malawian women ages 15-49 are married.
- Family planning use in Malawi is not only among married women: 47% of sexually active unmarried women use contraception.
- So, nearly 90,000 women would not be counted — those sexually active never-married women (5.3%) or divorced/separated/widowed women (9.5%).

Projections of only married women would underestimate the resources and efforts needed to reach the 60% CPR goal.
Using “All Women” Captures Youth

- Malawian youth are sexually active:
  - 250,000+ Malawian women aged 15–19 are mothers or are pregnant (26%).
  - 190,000+ Malawian women aged 15–19 have ever used a modern family planning method (20%),
  - ≤90,000 Malawian women aged 15–19 currently use a modern family planning method (9%).

Photo by J. Wickstrom/EngenderHealth
Malawi’s Family Planning Success Story

Source: Multiple MEASURE DHS Surveys, All WRA
"Not All Family Planning Methods Are the Same"

The relative effectiveness of various methods at preventing pregnancy:

<table>
<thead>
<tr>
<th>Method</th>
<th>No. of unintended pregnancies among 1,000 women in 1st year of typical use</th>
</tr>
</thead>
<tbody>
<tr>
<td>No method</td>
<td>850</td>
</tr>
<tr>
<td>Withdrawal</td>
<td>220</td>
</tr>
<tr>
<td>Female condom</td>
<td>210</td>
</tr>
<tr>
<td>Male condom</td>
<td>180</td>
</tr>
<tr>
<td>Pill</td>
<td>90</td>
</tr>
<tr>
<td><strong>Injectable</strong></td>
<td><strong>60</strong></td>
</tr>
<tr>
<td><strong>IUD (CU-T 380A/LNG-IUS)</strong></td>
<td><strong>8/2</strong></td>
</tr>
<tr>
<td>Female sterilization</td>
<td>5</td>
</tr>
<tr>
<td>Vasectomy</td>
<td>1.5</td>
</tr>
<tr>
<td>Implant</td>
<td>0.5</td>
</tr>
</tbody>
</table>

Unmet need is still high, at 19% among all women aged 15–49.

More women want to limit births (28%) than space the next birth (26%).

The average age at which demand for limiting exceeds demand for spacing is 29 years of age.

Long-acting and permanent methods (LA/PMs) are underused.

Myths and rumors impede the use of all family planning methods.

But….family planning is considered a “norm” in Malawi, paving the way for increased use of modern methods.

**Scenario 1:** Continue current increase 1.7% annually

**Scenario 2:** Meet 60% goal by 2020 by increasing 2.7% annually + increase percentage LA/PM users.

*Note: Scenario #2 is 1.5 times the current annual CPR increase of 1.7% (among all women).*
Expanding Contraceptive Choices

Adding broad choices of methods will better suit couples diverse needs at each stage of their reproductive lives.
High Continuation Shows Popularity

% of women or men **continuing** family planning methods at one year (worldwide)

<table>
<thead>
<tr>
<th>Family Planning Method</th>
<th>% Continuation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tubal ligation</td>
<td>~100%</td>
</tr>
<tr>
<td>Vasectomy</td>
<td>~100%</td>
</tr>
<tr>
<td>Implants</td>
<td>94%</td>
</tr>
<tr>
<td>IUD</td>
<td>84%</td>
</tr>
<tr>
<td>Pill</td>
<td>52%</td>
</tr>
<tr>
<td>Injectables</td>
<td>51%</td>
</tr>
<tr>
<td>Periodic abstinence</td>
<td>51%</td>
</tr>
<tr>
<td>Condoms</td>
<td>44%</td>
</tr>
</tbody>
</table>

**Source:** The ACQUIRE Project. 2007. Reality √, from DHS data, worldwide
% All women of reproductive age

Source: DHS and Reality √ projections
Family Planning Prevents Pregnancies

Unintended pregnancies averted

Source: Demographic and Health Surveys, Reality √
Family Planning Saves Lives

Maternal deaths averted

- **Continue Current Increase (1.7%)**
- **60% Goal**

Source: Demographic and Health Surveys, Reality √
Family Planning Saves Lives

Infant deaths averted

Source: Demographic and Health Surveys, Reality √
Family Planning Saves Lives

Abortions averted

- Continue Current Increase (1.7%)
- 60% Goal

Source: Demographic and Health Surveys, Reality √
Programmatic Considerations
Total Family Planning Users by Scenario

Source: Demographic and Health Surveys, Reality √
## Caseload at Baseline and in 2020

<table>
<thead>
<tr>
<th>Service</th>
<th>Baseline 2010</th>
<th>Scenario 1 2020</th>
<th>Scenario 2 2020</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pill</td>
<td>34</td>
<td>62</td>
<td>102</td>
</tr>
<tr>
<td>Injectable</td>
<td>348</td>
<td>682</td>
<td>628</td>
</tr>
<tr>
<td>Male condom</td>
<td>52</td>
<td>113</td>
<td>124</td>
</tr>
<tr>
<td>Female condom</td>
<td>2</td>
<td>6</td>
<td>15</td>
</tr>
<tr>
<td>Implant</td>
<td>3</td>
<td>8</td>
<td>23</td>
</tr>
<tr>
<td>IUD</td>
<td>4</td>
<td>11</td>
<td>78</td>
</tr>
<tr>
<td>Female sterilization</td>
<td>52</td>
<td>141</td>
<td>188</td>
</tr>
</tbody>
</table>
What Will the Scenarios Cost?
Annual contraceptive, equipment, and supply costs

Source: Demographic and Health Surveys, Reality √
If Malawi meets the 60% goal by 2020:

- **IMPACT**
  > More than 16 million unintended pregnancies will be averted by 2020.
  > More than 84,000 maternal deaths will be averted by 2020.

- **RESOURCES:**
  > More than 1.7 million women will use short-acting methods.
  > More than 410,000 women will use IUDs or implants.
  > Nearly 800,000 women will rely on permanent methods.
  > Many more clients will have to be served (for example, 628 injectable clients per facility per month).
Programmatic Considerations for the Future

- The MOH recognizes that LA/PMs are key to program success and partners should continue to support this goal.

- Shifting the method mix will require investments in: training; services; stocks of IUDs and implants; supportive policies; demand generation; community involvement; and champions at all levels.

- Need to investigate the many reasons why injectables are popular. How can we apply lessons learned from injectable expansion?

- The price of Jadelle implants was recently lowered which opens opportunity for implant expansion.

- The Bellagio meeting on FP Rights and Choice declared that “choice may be at risk when one method has a 50% dominance.” In Malawi, injectables are 60% of all modern method use.
To meet the demand for family planning now, and in the future….

What will the Malawi program need to do?