



**Critical review of FP and PAFP policies in China and current practices of integrating PAFP into existing health service worldwide**


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## Outline

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## Background

- The importance of Post Abortion Care (PAC) and Post Abortion Family Planning (PAFP)
- The annual average induced abortion is increasing in China, of which one third of women had undergone repeated abortion
- The Chinese FP services are mainly provided by an independent FP system. PAFP services are often lacking in hospital settings
- The urgent need of a response of the health system to the health concerns associated with PAFP
- The first component of INPAC project




## Objective

- To review China FP policy & practice and international lessons in regard to integrate PAFP into existing health system in order to inform the future INPAC intervention in China
  - To review the laws, policies and regulations relating to FP and PAFP in China
  - To describe the status of provision, utilization and quality of FP and PAFP service
  - To analyze the factors associated with provision, utilization and quality of FP and PAFP service
  - To summarize the effects and lessons of integrating PAFP into existing health system worldwide

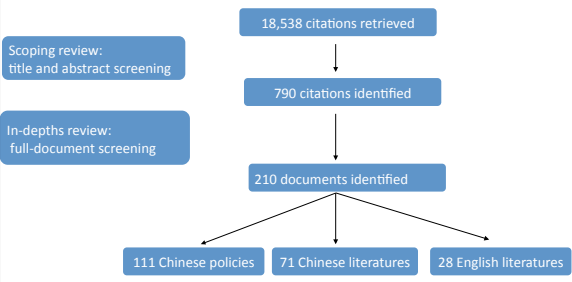


## Methods

- Systematic search for relevant published or unpublished (gray) literature
  - Scoping review
  - In-depth review
  - Data extraction




## Results



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graph TD
    A[18,538 citations retrieved] --> B[790 citations identified]
    B --> C[210 documents identified]
    C --> D[111 Chinese policies]
    C --> E[71 Chinese literatures]
    C --> F[28 English literatures]
    
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### Results (1)

- The Chinese national FP program advocates 'One Child Policy' in general, while allowing more children on condition.
- Several social security policies were developed to support this basic national FP policy.
- Advocacy of FP covers both married and unmarried population aiming at enhancing informed choice and reducing abortion rate.
- Free technical services mainly focus on married couples, while the relevant policy for unmarried and migrant youth is not fully developed.
- Legal abortion policy and other relevant welfare policies are to protect women's health who undergoes abortion.
- Policy on Post abortion family planning is absent.



### Results (2)

- Contraceptive prevalence rate for married women was 89.3% in 2011, but the figure for unmarried women was unclear due to lack of population based data.
- Repeated abortion rate varied from 19.0% to 57.9% depending on different study population.
- The reason for abortion is mainly no contraceptive use, its rate was between 38.7% and 64.9%.
- Unmarried and migrant youth and adolescent were mainly underserved population.



### Contraceptive practices in China

Contraceptive methods	China Family Planning Yearbook 2011	
	Number of people	%
IUD	130,191,804	53.50%
Female sterilization	74,902,321	30.80%
Male sterilization	12,633,075	5.19%
Condom	21,638,791	8.89%
Oral contraceptives & injectable	2,346,286	0.96%
Sub-dermal contraceptives	697,569	0.29%
Spemicide	433,618	0.18%
Other contraceptive methods	525,821	0.22%
Total	243,369,285	100%



### Results (3)

- Factors in relation to provision, utilization and quality of FP and PAFP service in China include:
  - Social factors: social policy, health services access
  - Individual factors: education level, gender, age, information/contraceptive access, and contraceptive behavior
  - Intermediary factor: physical environment, social support network



### Results (4)

- Worldwide experiences of integrating PAFP into existing health systems include:
  - External funding to the programs
  - Training of trainer (TOT) and on the job training of service provider
  - Expansion the range of contraceptive methods availability
  - Improving data collection including cost analysis in a few countries
  - Service guidelines provided to health professionals, supportive supervision at program sites to ensure quality of care
  - Leadership from government to strengthen PAC/PAFP service by revising or developing new national policy




### Results (4)

- Effects of PAC/PAFP intervention programs include:
  - Decreased abortion rates (n=2)
  - Improved modern contraceptive use (n=7)
  - Improved contraceptive acceptance (n=24)
  - Improved women's knowledge on sexual & reproductive health (n=2)
  - Women's high satisfaction rate with receiving PAC/PAFP services (n=5)



## Recommendations

- Supportive policy environment for PAFP
- Capacity building for service provider
- Continue efforts to improve PAFP service delivery
- Ensure the accessibility of multiple contraceptive supplies in hospitals
- Good records keeping at hospitals
- Adequate and regular supervision and monitoring




## Thank you for your attention!

More information please visit INPAC project website at:  
 English version: [www.inpacproject.org](http://www.inpacproject.org)  
 Chinese version: [www.pac-china.org](http://www.pac-china.org)