

The effects of a gender-equity and family planning counseling intervention on quality of contraceptive counseling and contraceptive use in rural India

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INTRODUCTION

CHARM2 Study (Counseling Husbands and wives to Achieve Reproductive health and Marital equity) intervention:

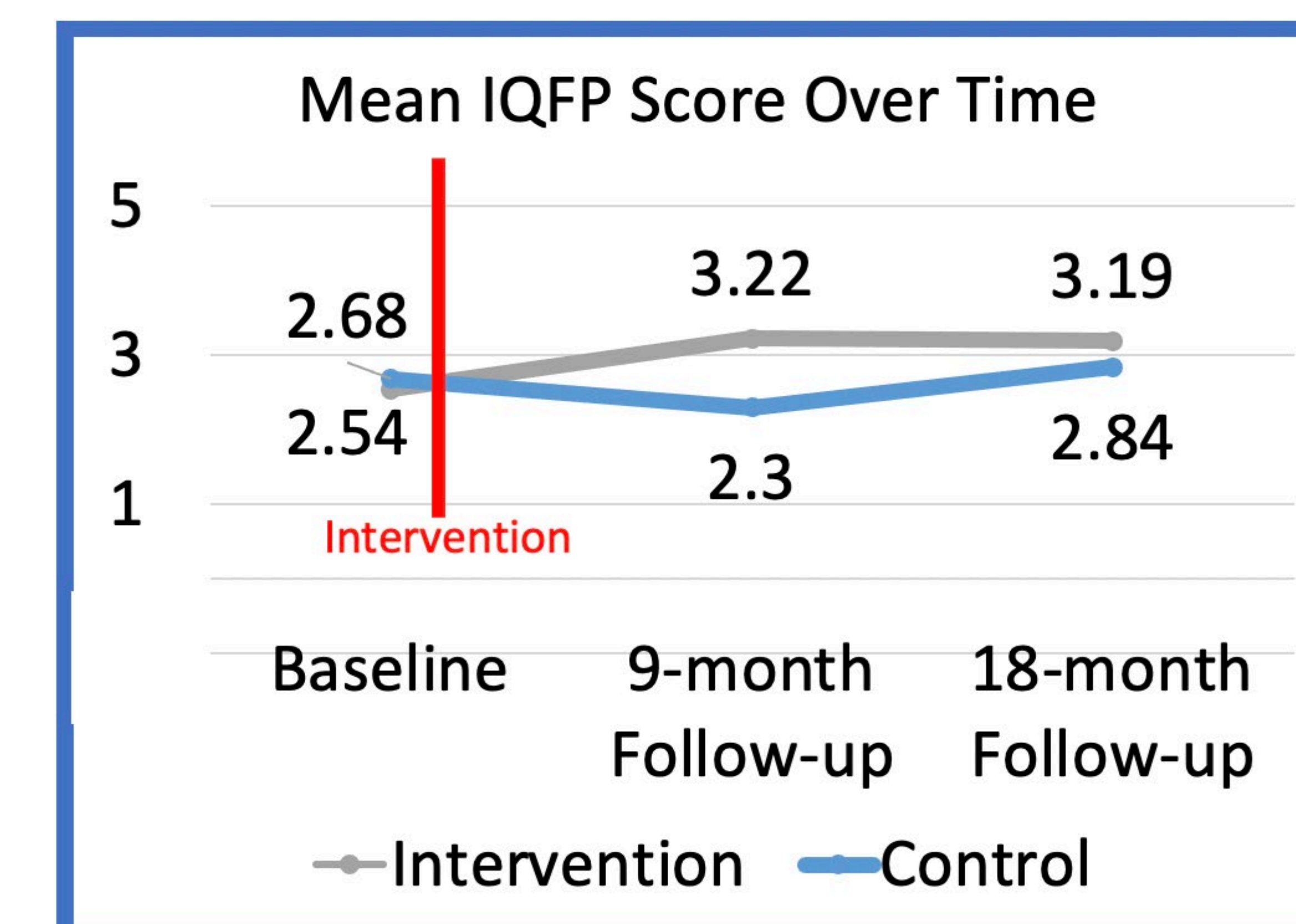
- Gender-synchronized, gender-transformative counseling
- Five 30-minute counseling sessions for married couples delivered over 4-6 months:
 - 2 male-only sessions with male provider
 - 2 female-only sessions with female provider
 - 1 joint couple session
- Person-centered counseling facilitated shared decision-making to guide family planning decision making, marital communication, and gender equity
- Delivered by providers within the local public health system, supplemented by local private providers
- Providers received 2-day training on gender equity, person-centered FP, and the CHARM2 intervention
- Tools included a visual flip chart and FP method cards
- Directly provided a broad array of contraceptive option

METHODS

- 2-armed cluster RCT in rural Maharashtra, India
- 1,201 young married couples; wife ages 18-29, non-sterilized
- Surveyed at baseline and 9- and 18-month follow-up
- Difference-in-differences mixed effects regression models to assess intervention effects on the interpersonal quality of family planning scale (IQFP)
- Mediation analysis assessing whether IQFP score mediated intervention effects on contraceptive use at 9-month follow-up

CONCLUSION

- The person-centered, gender-equity focused CHARM2 intervention **improved women's perceived quality of care.**
- Effects on quality of care **mediate observed effects of the intervention on contraceptive use.**
- FP interventions should focus on improving person-centered outcomes, such as quality of care, rather than contraceptive use targets.
- By focusing on improving person-centered care, interventions will improve contraceptive use among those who desire a method while meeting the holistic reproductive health needs of clients and couples.



RESULTS

- Significant improvements in reported quality of care, measured by 5-point average IQFP scale score
 - 9-month score increase of 1.0 points, 95% CI 0.6-1.5
 - 18-month score increase of 0.5 points, 95% CI 0.1-0.9
- Evidence of partial mediation of the intervention effect on increased contraceptive use at 9-month follow-up
- Indirect effect coefficient 0.29, 95% CI 0.07-0.50