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Engaging Private Sector Family Physicians to Expand Family Planning Services in Pakistan

P akistan faces significant population challenges, including a high population growth rate, stalled fertility transition, and stagnant contraceptive use. These challenges put immense pressure on the country's resources, infrastructure, and ability to provide quality healthcare and education to its citizens.

Recognizing the urgency of addressing these population issues, Pakistan has committed to raising its contraceptive prevalence rate (CPR) to 60% by 2030 under the National Plan of Action on Population Growth and FP2030 commitment.

However, traditional approaches to family planning service delivery have fallen short of achieving these ambitious goals. The public sector, which has historically been the primary provider of family planning services, has struggled to meet the growing demand and reach all segments of the population.

Despite an increasing reliance on private healthcare providers for general health services, the for-profit private sector, particularly family physicians, remains an untapped resource for expanding family planning services in Pakistan.

A longitudinal panel study conducted in Punjab in 2022 revealed that 60% of women procured family planning services from private facilities, compared to 27% from facilities of the Population Welfare Department and 14% from the Department of Health.¹ In particular, women of middle or higher wealth often prefer private healthcare providers but may not have access to comprehensive family planning services through these channels. This trend highlights the potential of the private sector in meeting the family planning needs of the population.

Previous research suggests that a total market approach, which involves coordinating efforts across public, private, and nongovernmental sectors, could be



Through a randomized controlled trial conducted in rural and peri-urban areas of Islamabad, this study demonstrated the feasibility and significant impact of an innovative approach for increasing access to and uptake of family planning services.

critical for reaching national family planning goals.

However, this approach has not been fully adopted in Pakistan, leaving a significant gap in service provision and missed opportunities for expanding access to family planning services.

Project Overview and Intervention Design

To address these challenges and explore the potential of engaging the private sector in family planning service delivery, a randomized controlled trial was conducted in two rural Charge/Qanoongoh Halka (Sihala and Tarlai Kalan) of Islamabad Capital Territory (ICT). These areas were chosen as they have experienced rapid development and demographic changes, with a population of mixed ethnic background, primarily Punjabi and Pashto.

¹ National Institute of Population Studies (NIPS) and UNFPA. 2023. Family Planning in Punjab: Progress, Challenges, and Opportunities—

A Call for Action. Islamabad: National Institute of Population Studies (NIPS) and UNFPA.

The study design involved 76 clinics with male physicians, randomly assigned to intervention

(38) and control (38) groups. The intervention package was carefully designed to address key barriers to family planning service provision in the private sector and included the following components:

- → Training of providers: Participating physicians received comprehensive training in rights-based and client-centered family planning counseling, contraceptive technology, and the use of WHO's medical eligibility criteria. This training aimed to equip physicians with the knowledge and skills necessary to provide high-quality family planning services and address common misconceptions.
- Provision of information, education, and communication (IEC) materials: Clinics in the intervention group were supplied with various IEC materials, including posters, brochures, wall charts, and LCD TV screens with inbuilt family planning messaging. These materials were designed to raise awareness among clients and facilitate discussions about family planning options.
- Supportive supervision and peer-to-peer support: Regular supervisory visits and group meetings were conducted to provide ongoing support to participating physicians. This component was

crucial in maintaining quality standards and addressing any challenges faced by providers.

→ Strengthening linkages with pharmacies and referral facilities: The intervention sought to create a comprehensive network of family planning service providers by establishing connections between participating clinics, local pharmacies, and referral facilities for long-acting reversible contraceptives and permanent methods. This approach ensured that clients had access to a full range of contraceptive options.

Digital Management Information System (MIS): A mobile phone-based MIS was implemented to collect daily data on family planning clients. This system allowed for real-time monitoring of service provision and facilitated data-driven decisionmaking.

The study was conducted over a seven-month period, from February 1 to August 31, 2023. Data collection methods included baseline and end-line surveys of participating physicians and pharmacies, daily MIS reporting of family planning client data, and qualitative interviews with physicians to gain deeper insights into their experiences and perspectives.

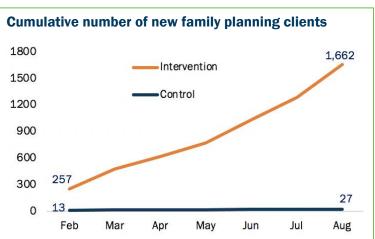
Key Findings

The study yielded several significant findings that demonstrate the potential of engaging private sector family physicians in family planning service provision:

Substantial increase in family planning service provision: The intervention had a dramatic impact on the availability and uptake of family planning services in participating clinics. At end-line, 96.6% of physicians in the intervention group reported providing family planning services, compared to just 15.2% in the control group. This represents a remarkable increase from the baseline, where only 3.4% of physicians in the intervention group and 9.1% in the control group offered any family planning services.

→ Higher volume of family planning clients: Physicians in the intervention group served an average of 239 family planning clients monthly, compared to a total of just 27 clients over the entire seven-month period in the control group. This stark difference highlights the intervention's effectiveness in creating demand for family planning services and improving access.

 Increased proportion of outpatients receiving family planning services: Overall, 5.6% of the total 29,900 outpatients seen by



physicians in the intervention group received family planning services during the study period. In contrast, only 0.09% of the 30,777 outpatients in the control group received such services. This finding suggests that integrating family planning into routine outpatient care can significantly expand access to these services.

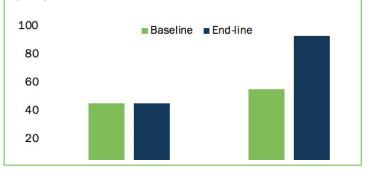
Enhanced male engagement: The intervention was particularly successful in engaging men in family planning. In the intervention group, 59.3% of family planning clients were men, compared to 37% in the control group. This increased male participation challenges the notion that family planning is primarily a woman's responsibility and demonstrates the potential for male physicians to play a crucial role in promoting male involvement.

Dispelling myths and misconceptions: The study effectively debunked several prevalent myths about family planning service provision in Pakistan. Contrary to popular belief, women were found to be receptive to receiving family planning services from male physicians. Additionally, the high uptake of services in periurban and rural areas demonstrated a significant demand for family planning in these settings, challenging the assumption that such services are only needed or wanted in urban areas.

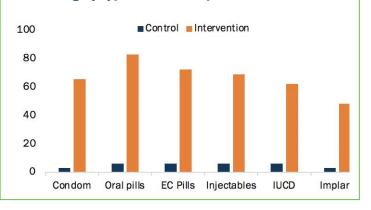
Successful implementation of the Total Market Approach: The intervention successfully linked private physicians, pharmacies, and public sector referral facilities, creating a comprehensive network for family planning service delivery. This approach led to increased contraceptive sales in participating pharmacies and improved access to a wide range of contraceptive methods for clients.

\rightarrow Improved skills and confidence of physicians:

Percentage of clinics with information, education, and communication (IEC) materials available at the clinic



Percentage of physicians providing family planning counseling by type of contraceptive



44 In my opinion, the best decision was to include male family physicians in the practice of family planning. General physicians are available everywhere, and clients including males and females seeking family planning often visit them. Unlike other consultants who may not have as much time for these patients, general physicians and small clinics offer easy access and build patient confidence for sharing personal issues. Therefore, both general physicians and patients will benefit from this research." [Age 30 years]

All physicians in the intervention group reported increased skills and confidence in providing family planning services as a result of the training and support received. In contrast, only three out of 33 physicians in the control group reported any improvement in their family planning-related skills.

Community diffusion of family planning information: The intervention resulted in a broader impact on community awareness, with an increasing number of people seeking information on family planning from physicians in the intervention group compared to those in the control group.

Policy Implications and Recommendations

- Scale up the intervention model: Given the significant impact observed in the study, it is recommended to scale up this intervention model to other regions of Pakistan, particularly areas with high unmet need for family planning. This expansion could potentially transform family planning service delivery across the country.
- → Integrate private sector engagement into national family planning strategies: The study demonstrates the untapped potential of the private sector in family planning service provision. National family planning policies and strategies should be revised to formally incorporate private sector engagement, with a focus on family physicians.
- Provide comprehensive training to private physicians: A nationwide initiative to train private physicians in family planning counseling, contraceptive technology, and rights-based approaches should be implemented. This training should be integrated into medical education curricula and offered as continuing education for practicing physicians.
- Distribute IEC materials widely: The study highlighted the importance of IEC materials in raising awareness and facilitating family planning discussions. A concerted effort should be made to distribute these materials to all clinics and pharmacies, both public and private, across the country.
- Promote male engagement in family planning: The success of the intervention in engaging male clients suggests that targeted efforts to involve men in family planning discussions and decisionmaking could yield significant results. Male physicians should be specifically trained and encouraged to address family planning with their male patients.

 Strengthen referral systems: Efforts should be made to establish and strengthen referral systems between private physicians, pharmacies, and public facilities to ensure comprehensive



This study demonstrates the significant potential of engaging private sector family physicians and pharmacies to expand family planning services in Pakistan.

The intervention model offers a sustainable approach to increase access to family planning, particularly in underserved areas, and can contribute substantially to achieving national contraceptive prevalence rate targets.

The findings of this study provide a strong rationale for policymakers and program implementers to seriously consider integrating private sector engagement strategies into national family planning efforts. By doing so, Pakistan can make significant strides towards addressing its population challenges, improving maternal and child health outcomes, and ultimately, enhancing the overall wellbeing and development prospects of its citizens.

physicians, pharmacies, and public facilities to ensure comprehensive family planning service provision. This includes improving access to long-acting reversible contraceptives and permanent methods.

- Utilize social media and community outreach: To further increase awareness and demand for family planning services, social media campaigns and community outreach programs should be developed and implemented in conjunction with private sector engagement efforts.
- Establish a network of family planning providers: Creating a network of private family physicians providing family planning services could facilitate peer support, knowledge sharing, and advocacy efforts. This network could also serve as a valuable resource for training and mentoring new providers.
- Conduct further research: While this study provides compelling evidence for the effectiveness of the intervention, additional research is recommended to test the model in different contexts. This includes replicating the study in urban areas and other provinces to build a more comprehensive evidence base.

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