

*Response from Mir A, Pearson S, Masood I (J Pak Med Assoc. 2023; 73: 1374-82)*

## **Where there is a will, there is a way: Enhancing contraceptive uptake in Pakistan**

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The introduction of the article focuses on describing the background and setting the context for the 2007-2012 Family Advancement for Life and Health project. For a more recent review of knowledge gaps in family planning in Pakistan, readers are referred to the National Institute of Population Studies (NIPS) [Pakistan] and ICF. 2019. Pakistan Demographic and Health

Survey 2017-18. Islamabad, Pakistan, and Rockville, Maryland, USA: NIPS and ICF.

The current Census results and the latest Pakistan Demographic and Health Survey 2017-18 data reveal that Pakistan's fertility transition is significantly delayed compared to other countries in the region. This delay is accompanied by a high unmet need for family planning, resulting in a high incidence of unwanted pregnancies, a considerable proportion of short interpregnancy intervals, and a high maternal mortality ratio. Given these challenges, it is imperative to focus on improving access to family planning services.

The research employed a panel methodology, which proves effective in monitoring statistically significant changes over time. The analysis explored the relationship between the independent variable—program interventions and the dependent variable, i.e., contraceptive use, to ascertain if the interventions had an impact on contraceptive usage. A regression model was employed to control for other pertinent factors. The baseline and end-line surveys encompassed currently married women aged 15 to 49 years, along with a maximum of five husbands from each primary sampling unit.

A systematic stratified technique was utilized for the baseline survey to ensure a representative sample. The

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design of the sample aimed to measure changes in perception, attitudes, and practices of the same panel of women interviewed in the baseline survey, enabling a comprehensive assessment over time. The selection of the districts where the FALAH project was implemented was based on factors such as unmet needs, contraceptive use, and consultations with policymakers. The study instruments underwent thorough pretesting. The questionnaire includes validated questions on background and socio-economic characteristics, interspousal communication, reproduction and birth history, fertility preferences, intentions and family planning attitudes, FP adoption and practice, and contraceptive use history that are based on the questions used in the Pakistan Demographic and Health Survey.

Public sector facilities play a vital role in providing family reproductive health services, particularly for marginalized rural families. Therefore, a critical recommendation stemming from this research is to invest in enhancing the quality of public sector health facilities, enabling them to offer comprehensive family planning services and information.

Although not listed separately, the discussion includes recommendations for projects aiming to enhance contraceptive uptake, including (as a summary):

- Careful project design, to address key communication and service needs.
- Effective counselling and communication skills to address concerns about modern contraceptives.
- Focused efforts to reach 'hard-to-reach' and the most disadvantaged population groups.
- Client-centred training to improve the quality of services provided and its outcomes.

*Many thanks*  
Dr Ali Mir