

POSTABORTION CARE

PAC
CONSORTIUM

**Working together for safe, accessible
and comprehensive postabortion
care around the world.**

Essential Elements of Postabortion Care: Service Delivery Barriers and Resources

**Prepared by the PAC Consortium
Service Delivery Task Force**

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Introduction

Barriers to comprehensive postabortion care (PAC) service delivery exist for each of the essential elements of the PAC model. During 2013, the Postabortion Care Consortium Service Delivery Task Force, with input from the membership, identified the most important service delivery barriers and identified resources to address those barriers. The task force plans to determine what gaps exist and address outstanding priority barriers with appropriate resources.

The following document provides strategies and tools to reduce barriers to service delivery. The list is not meant to be an exhaustive list of all resources related each barrier, but a compendium of tools that can be used by health workers and other professionals to overcome barriers to comprehensive PAC services.

Community and service provider partnerships	<ul style="list-style-type: none">• For prevention of unwanted pregnancies and unsafe abortion, mobilization of resources to help women receive appropriate and timely care for complications from abortion, and ensuring that health services reflect and meet community expectations and need
Counseling	<ul style="list-style-type: none">• To identify and respond to women's emotional and physical health needs and other concerns
Treatment	<ul style="list-style-type: none">• Of incomplete and unsafe abortion and complications that are potentially life-threatening
Contraceptive and family planning services	<ul style="list-style-type: none">• To help women prevent an unwanted pregnancy or practice birth spacing
Reproductive and other health services	<ul style="list-style-type: none">• Preferably provided on-site or via referrals to other accessible facilities in providers' networks

The barriers and resources are organized into categories based on the Essential Elements of PAC model.

Please contact Christopher Lindahl (clindahl@engenderhealth.org) to suggest additional resources for inclusion or to get involved with the work of the Service Delivery Task Force.

1. Community and service provider partnerships	
Barrier	Resource
A. Women unaware of where, why, and how to access PAC services	<p>Community Postabortion Care Project (COMMPAC) in Nakuru District, Kenya: Summary Report http://www.engenderhealth.org/files/pubs/acquire-digital-archive/5.0 community engagement marketing and communications/5.2 resources/5.2.2 studies/commpac kenya report final.pdf</p>
B. Low literacy rate among women	<p>Community Health Information Cards: Taking Action for Our Health http://www.respond-project.org/pages/files/6_pubs/bcc-materials/COMMPAC-BCC-Cards-FINAL-web.pdf</p> <p>Using Misoprostol Pills to Treat Incomplete Abortion http://www.ipas.org/~media/Files/Ipas%20Publications/MPACTK5FOE11.ashx</p>
C. Community members uninformed of about danger signs during pregnancy	<p>Community Mobilization for Postabortion Care in Kenya: Baseline Evaluation Report http://www.respond-project.org/pages/files/6_pubs/research-reports/Study2-COMMPAC-Baseline-Report-FINAL.pdf</p> <p>Tapping Community Opinion on PAC services http://www.k4health.org/sites/default/files/Tapping%20community%20opinion%20on%20pac%20care%20services.pdf</p>
D. Stigma surrounds PAC which keeps many women (particularly younger women) from seeking services	<p>Integrated Service for Women Seeking Postabortion Care in Kenya http://www.k4health.org/sites/default/files/End%20of%20Project%20Dissemination%20-%20Integrated%20Services%20for%20Women%20Seeking%20Postabortion%20Care%20Kenya.pdf</p> <p>Youth-Friendly PAC Training Materials http://www.pac-consortium.org/index.php/youth</p> <p>Assessment of Youth-Friendly Postabortion Care Services: A Global Tool for Assessing and Improving Postabortion Care for Youth http://www2.pathfinder.org/site/DocServer/YFPAC_assessment_tool.pdf?docID=13121</p> <p>Improving Abortion and Postabortion Care Services Using Community Survey Data in Ghana http://www.pathfinder.org/publications-tools/pdfs/Improving-Abortion-and-Postabortion-Care-Services-Using-Community-Survey-Data-in-Ghana.pdf</p>

1. Community and service provider partnerships

Barrier	Resource
	<p>Pathfinder International's Postabortion Care Programs http://www.pathfinder.org/publications-tools/pdfs/Pathfinder-Internationals-Postabortion-Care-Programs.pdf</p>

2. Counseling	
Barrier	Resource
A. Providers may not have the skills or time for counseling	<p>Counseling the Postabortion Client: A Training Curriculum http://www.k4health.org/sites/default/files/Counseling%20the%20postabortion%20client_Eng.pdf</p> <p>USAID Recommended PAC Training Resources http://www.postabortioncare.org/training/training4.shtml</p> <p>Enhancing Postabortion Care Counseling Skills: An Interactive Learning Tool, IntraHealth http://www.intrahealth.org/page/enhancing-postabortion-care-pac-counseling-skillsan-interactive-learning-tool</p> <p>Family Planning Counseling and Service Provision, STI Evaluation and Treatment, and HIV, Counseling and/or Testing http://www.k4health.org/sites/default/files/Participant%20Guide.pdf</p> <p>Woman-Centered Postabortion Care: Reference Manual (Second Edition) http://www.ipas.org/en/Resources/Ipas%20Publications/Woman-centered--comprehensive-postabortion-care--Reference-manual--Second-Edition.aspx</p>
B. Facilities do not ensure privacy and confidentiality during counseling	<p>Rights-Based Code of Ethics: FIGO Professional and Ethical Responsibilities Concerning Sexual and Reproductive Rights http://www.figo.org/files/figo-corp/Rights-Based_%20Code_of_Ethics_October%202003.pdf</p>
C. Provider stigma	<p>Improving Abortion and Postabortion Care Services Using Community Survey Data in Ghana http://www.pathfinder.org/publications-tools/pdfs/Improving-Abortion-and-Postabortion-Care-Services-Using-Community-Survey-Data-in-Ghana.pdf</p> <p>USAID Recommended PAC Training Resources http://www.postabortioncare.org/training/training4.shtml</p> <p>Postabortion Care Client-Provider Communication Materials http://www.postabortioncare.org/materials/RGCommunication.pdf</p> <p>Abortion Attitude Transformation: A Values Clarification Toolkit for Global Audiences http://www.ipas.org/en/Resources/Ipas%20Publications/Abortion-attitude-transformation--A-values-</p>

2. Counseling	
Barrier	Resource
	<p>clarification-toolkit-for-global-audiences.aspx</p> <p>Abortion Attitude Transformation: Values Clarification Activities Adapted for Young Women</p> <p>http://www.ipas.org/~media/Files/Ipas%20Publications/VCATYTHE11.ashx?utm_source=resource&utm_medium=meta&utm_campaign=VCATYTHE11</p>

3. Treatment	
Barrier	Resource
A. Discrimination against women seeking PAC treatment	<p>Postabortion Care Curriculum: Reference Manual http://www.postabortioncare.org/training/PAC_Manual.pdf</p> <p>WHO - Unsafe Abortion: The Preventable Pandemic http://www.who.int/reproductivehealth/topics/unsafe_abortion/article_unsafe_abortion.pdf</p> <p>Abortion Attitude Transformation: A Values Clarification Toolkit for Global Audiences http://www.ipas.org/en/Resources/Ipas%20Publications/Abortion-attitude-transformation--A-values-clarification-toolkit-for-global-audiences.aspx</p>
B. Clinical protocols do not link PAC with Emergency Obstetric Care (EmOC) (as part of maternal health)	<p>Managing Complications in Childbirth (section S-7-13) http://www.jhpiego.org/files/MCPC_English.pdf</p> <p>The National Road Map Strategic Plan to Accelerate Reduction of Maternal, Newborn and Child Deaths in Tanzania 2008 – 2015 http://www.unfpa.org/sowmy/resources/docs/library/R224_MOHTanzania_2008_Roadmap_MNCH.pdf</p>
C. Restrictions on provision of care by non-medical professionals and resistance to task sharing	<p>WHO Recommendations: Optimizing Health Worker Roles to Improve Access to Key Maternal and Newborn Health Interventions through Task Shifting http://apps.who.int/iris/bitstream/10665/77764/1/9789241504843_eng.pdf</p> <p>Safe Abortion: Technical and Policy Guidance for Health Systems http://www.who.int/reproductivehealth/publications/unsafe_abortion/9789241548434/en/</p>
D. Lack of tools to assess quality of PAC:	<p>Jhpiego Site Assessment of Maternal Health Services: Facility Assessment Tool http://www.jhpiego.org/files/SiteAssessMNH.pdf</p> <p>MEASURE Evaluation Population and Reproductive Health Project: Postabortion Care http://www.cpc.unc.edu/measure/prh/rh_indicators/specific/pac</p> <p>Postabortion care – A Reference Manual for Improving Quality of Care http://www.postabortioncare.org/training/Nepal_Reference_Manual.pdf</p> <p>Misoprostol Use in Postabortion Care: A Service Delivery Toolkit http://www.ipas.org/en/Resources/Ipas%20Publications/Misoprostol-use-in-postabortion-care--A-service-</p>

3. Treatment	
Barrier	Resource
assessment	delivery-toolkit.aspx
E. Lack of understanding of medical treatment with misoprostol, which can be used for PAC at the primary care level to expand services (in facilities that lack VA or surgical capacity); or as an additional treatment method option for women (where VA is available)	<p>Misoprostol for Treatment of Incomplete Abortions: Training Guide http://www.ipas.org/en/Resources/Ipas%20Publications/Misoprostol-for-treatment-of-incomplete-abortions--Training-guide.aspx or http://gynuity.org/resources/info/misoprostol-for-treatment-of-incomplete-abortion-a-training-guide/</p> <p>Misoprostol Use in Postabortion Care: A Service Delivery Toolkit http://vsinnovations.org/resources.html or http://www.ipas.org/ma/mpactoolkit</p> <p>Misoprostol for Treatment of Incomplete Abortion: An Introductory Guidebook http://gynuity.org/resources/info/guidebook-on-misoprostol-for-treatment-of-incomplete-abortion/</p> <p>Using Misoprostol Pills to Treat Incomplete Abortion http://www.ipas.org/~media/Files/Ipas%20Publications/MPACK5FOE11.ashx</p> <p>Clinical Updates in Reproductive Health http://www.ipas.org/en/Resources/Ipas%20Publications/Clinical-updates-in-reproductive-health.aspx</p>
F. Family planning/contraceptive services are not perceived as essential component of PAC service delivery	<p>Postabortion Care: Going to Scale http://www.fphighimpactpractices.org/sites/fphips/files/hip_pac_brief.pdf</p> <p>Post Abortion Family Planning: A Key Component of Post Abortion Care http://www.pac-consortium.org/attachments/article/69/PAC-FP-Joint-Statement-November2013.pdf</p>
G. Logistics system for supply of instruments, equipment and commodities for emergency care	<p>Steps for Performing Manual Vacuum Aspiration: Using the Ipas MVA Plus® and EasyGrip® Cannulae http://www.ipas.org/~media/Files/Ipas%20Publications/PERFMVA2E12.ashx?utm_source=resource&utm_medium=meta&utm_campaign=PERFMVA2E12</p> <p>MA Supply Guidance Tool http://ipas.org/en/Resources/Ipas%20Publications/MA-Supply-Guidance-Tool--zip--in-English--French-and-</p>

3. Treatment	
Barrier	Resource
(including MVA & misoprostol tablets)	<p>Spanish.aspx</p> <p>MA Supply Guidance Spreadsheet http://ipas.org/en/Resources/Ipas%20Publications/MA-Supply-Guidance-Spreadsheet.aspx</p> <p>MVA Sustainable Supply Workbook http://ipas.org/en/Resources/Ipas%20Publications/MVA-sustainable-supply-workbook.aspx</p> <p>Planning for Sustainable Supply of MVA Instruments: A Guide for Program Managers, Second Edition http://ipas.org/en/Resources/Ipas%20Publications/Planning-for-a-sustainable-supply-of-manual-vacuum-aspiration-instruments--A-guide-for-pro.aspx</p> <p>Stocking Facilities with MVA Equipment According to Caseload http://ipas.org/en/Resources/Ipas%20Publications/Stocking-facilities-with-MVA-equipment-according-to-caseload.aspx</p> <p>Inventory Management for Medicines Used in Abortion-Related Care: Facility Job Aid http://ipas.org/en/Resources/Ipas%20Publications/Inventory-management-for-medicines-used-in-abortion-related-care--Facility-job-aid.aspx</p> <p>Practical Guide for Selection of MVA Instruments http://www.postabortioncare.org/othertools/mva_instruments_guide.pdf</p> <p>Safe Abortion: Technical and Policy Guidance for Health Systems http://www.who.int/reproductivehealth/publications/unsafe_abortion/9789241548434/en/ http://apps.who.int/iris/bitstream/10665/70914/1/9789241548434_eng.pdf http://www.ipas.org/en/News/2012/June/WHOs-updated-safe-abortion-guidance-emphasizes-health-and-rights.aspx</p> <p>USAID Recommended PAC Training Resources http://www.postabortioncare.org/delivery/RGService.pdf</p>

4. Contraceptive and Family Planning (FP) Services	
Barrier	Resource
A. IUDs and other long-acting and reversible contraception (LARC) unavailable at time of PAC	<p>Implants Toolkit http://www.k4health.org/toolkits/implants</p> <p>IUD Toolkit http://www.k4health.org/toolkits/iud</p>
B. Maternal health providers not updated on FP knowledge or skills, and/or provider bias toward in favor of or against particular methods	<p>USAID Recommended PAC Training Resources http://www.postabortioncare.org/training/training4.shtml</p> <p>Update on LAPM in USAID Bulletin http://content.govdelivery.com/accounts/USAID/bulletins/736ce1</p>
C. Cost: LARC is prohibitively expensive	<p>Implant Toolkit http://www.k4health.org/toolkits/implants (The first 2 paragraphs discuss new partnerships between manufacturers of implants and donors to secure implants at reduced cost)</p>

5. Reproductive and other Health Services	
Barrier	Resource
E. PAC clients do not have access to relevant, integrated services such as: STI, HIV, GBV, cervical cancer screening and detection, and other RH services	USAID Recommended PAC Training Resources http://www.postabortioncare.org/training/training4.shtml