



Understanding Women's Preferences for and Use of Family Planning in Urban Malawi

The area of family planning is unique in that the patient, rather than the provider, is seen as the key decision-maker in determining the best course of treatment. As such, family planning programs strive to afford women and couples the greatest degree of choice over contraceptive methods, and consequently invest significant resources into providing patients with complete and accurate information. Counselors often consult with patients about their options, but little is known about how the information and contraceptive methods that are presented during counseling sessions shape the way women make informed choices about their preferred contraceptive methods.

In a <u>new policy brief</u>, <u>Mahesh Karra</u>, Associate Director of the Human Capital Initiative (HCI) at Boston University's Global Development Policy Center, and <u>Kexin Zhang</u> assess the results



of a 2019 study conducted with 785 married women from Lilongwe, Malawi. The study aimed to evaluate how user-centered counseling approaches to family planning would affect women's preferences for contraceptive methods and how these preferences were realized over time. Participants received a family planning counseling session with a trained counselor at their homes and were provided with free transportation to a family planning clinic for one month.

Key Findings:

- The contraceptive prevalence rate in urban Malawi is high, with 87.4 percent of the women in the sample using a contraceptive method as of their consultation.
- Injectables are the most commonly used method (44.7 percent), followed by implants (30.2 percent) and pills (7.2 percent).
- In urban Malawi, women's preferences for contraceptive methods are often not concordant with their actual method use. If given the choice, 36.7 percent would want to switch from their current method to another method.
- The reasons cited by those who wanted to switch methods, but had not yet done so were: "does not know enough about the method" (32.5 percent); "costs too much" (10 percent); "fear of side effects" (9.6 percent); and "preferred method not available" (9.2 percent).
- Notably, at the initial counseling session, 42 percent of women were using a contraceptive method that differed from their perceived ideal method, whereas at the final interview, 55 percent of women were using a method that was different from their ideal stated method.

Based on these findings, Karra and Zhang draw several lessons to inform future policies, programs and interventions aimed at improving family planning and reproductive health services for women in Malawi and elsewhere.

Policy Lessons:

- Women's stated and realized preferences for family planning are malleable and sensitive to a range of factors.
- Service providers need to be responsive to changes in women's choice of contraceptive method, and particularly women's desires to switch methods, even if it may come at a greater cost to them.
- To minimize costs associated with switching methods, service providers would benefit from conducting a more comprehensive initial counseling session with women.

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