

**Authors**

Maresh Karra  
Boston University

David Canning  
Harvard School of Public Health

Daniel Maggio  
Cornell University

**BU** Global Development Policy Center

HCI POLICY BRIEF 001 • 10/2/2021



**Maresh Karra** is an Assistant Professor of Global Development Policy at the Frederick S. Pardee School of Global Studies at Boston University and Associate Director of the Human Capital Initiative at the Global Development Policy Center. His academic and research interests are broadly in development economics, health economics, quantitative methods, and applied demography.

## Increased Access to Postpartum Family Planning Services Encourages Modern Contraceptive Use and Healthy Birth Spacing

### FINDINGS FROM THE MALAWI FAMILY PLANNING STUDY (MFPS)

MARESH KARRA, DAVID CANNING, DAN MAGGIO, MUGI GAO, BAGREY NGWIRA

Improving access to postpartum family planning services for new and expecting mothers increased contraceptive use by 5.9 percentage points. The result was driven by an underlying increase in long-term contraceptive use by 5.4 percentage points. Women who were offered improved access to postpartum family planning services were 42 percent less likely to have a second pregnancy during the two-year survey period.

**Researchers:** David Canning, Maresh Karra, Dan Maggio, Mugi Gao, Bagrey Ngwira

**Context:** Lilongwe, Malawi

**Sample Size:** Size: 2,143 pregnant and postpartum women, married, aged 18-35

**Timeline:** September 2016 to February 2019

This policy brief is jointly published with Innovations for Poverty Action. Visit <https://www.povertyaction.org/publications> for a full list of IPA publications.



[www.bu.edu/gdp](http://www.bu.edu/gdp)

HCI Policy Center  
Pardee School of Global Studies, Boston University

# Increased Access to Postpartum Family Planning Services Encourages Modern Contraceptive Use and Healthy Birth Spacing: Findings from the Malawi Family Planning Study (MFPS)

Women who become pregnant less than 24 months after giving birth face numerous risks to

their own health and the health of their child. As such, postpartum family planning services can help women to better space pregnancies and mitigate health risks. However, little is known about how postpartum family planning impacts women's contraceptive use, fertility choices and birth spacing.

In a [new policy brief](#), [Mahesh Karra](#), Associate Director of the Human Capital Initiative (HCI) at Boston University's Global Development Policy Center, and four coauthors analyze their results from a randomized controlled trial that provided new and expecting mothers in Lilongwe, Malawi with access to a range of postpartum family planning services between September 2016 and February 2019. The services consisted of a combination of home visits from a family planning counselor, free transportation to a family planning clinic and financial reimbursement for purchasing services from the clinic.

### Key Findings:

- Postpartum family planning services encourage contraceptive uptake.
- Women with greater access to postpartum family planning services are at lower risk of short birth spacing.

Drawing on the trial results, the researchers propose two key policy recommendations aimed at encouraging healthy birth spacing.

### Key Recommendations:

- Improving access to high quality postpartum family planning services would enable women and couples to more effectively time and space their next births.
- In practice, the effective provision of postpartum family planning and maternal health services face multiple barriers. The study shows though, that a comprehensive postpartum intervention can help overcome some of these barriers.

The researchers note that the positive effects of family planning services extend beyond health outcomes. When women live longer and healthier lives, they are more likely to achieve higher levels of education and participate in the labor force. Policies that increase access to both pre- and postpartum family planning can empower women and girls and bring a range of economic benefits to communities as a whole.

*This policy brief was jointly published by the Boston University Global Development Policy (GDP) Center and Innovations for Policy Action. [View a full list of GDP Center publications](#) and [view a full list of IPA publications](#).*

October 25, 2021