

Family Planning Plus (FP+)

POLICY BRIEF

An effective, scalable family planning counseling intervention that reduces intimate partner violence and improves quality of family planning care and women's reproductive control.

Why address violence in routine family planning care?

Reproductive coercion (RC) describes a common set of behaviors that interfere with women's and girls' family planning method use or pregnancy decisions. RC is a distinct form of gender-based violence (GBV) that often co-occurs with intimate partner violence (IPV).

Women and girls who seek family planning services are more likely to experience both IPV and RC, with recent data from Uasin Gishu county indicating that 1 in 2 family planning clients report these forms of GBV. Family planning counseling provides a critical opportunity for confidential communication between female clients and providers about their relationships.

What is Family Planning Plus (FP+)?

FP+ is a family planning counseling approach that incorporates an evidence-based intervention (ARCHES) that addresses RC and IPV within the Balanced Counseling Strategy Plus (BCS+). The Kenya Ministry of Health (MOH) developed the FP+ counseling approach through a participatory design process with key stakeholders and piloted it in Uasin Gishu county. The FP+ approach is integrated in the MOH's standard 6-day FP provider training. Counseling is delivered by family planning providers using the FP+ mobile app and includes the three core ARCHES elements:

- 1 Counseling and screening for reproductive coercion (RC)** to reduce male partner or family member interference in FP use.
- 2 Counseling and screening for IPV without pressure to disclose**, including supportive, respectful, validating responses and offers of linkage to support services for those who choose to disclose.
- 3 Offer of an easily-concealable mini-booklet** with information on FP methods, RC/IPV, and local IPV support services for personal use or for sharing with family, friends, or partners.

What is the impact of FP+?

In a randomized-controlled trial of nearly 4,000 female family planning clients from 24 health facilities in Uasin Gishu county, FP+ (ARCHES integrated in BCS+) resulted in the following (compared to the standard BCS+):

✓	Increased family planning method uptake
✓	Increased quality of family planning care
✓	Increased confidence to use family planning in the face of RC
✓	Reduced IPV

The counseling addressing RC and IPV (ARCHES elements) took minimal time and cost to implement.



+84 seconds
for RC and IPV
counseling



+8.14 KES
per FP client

Additionally, the counseling elements addressing RC and IPV (ARCHES elements) were acceptable to clients and some even shared the information they learned with others in the community. As one FP+ client explained:



It is good for the provider to speak to the women [about violence] because once they are helped/supported, even the men will reduce the violence. The men will realize that the women are being supported and will know that they will be in for it should they violate any woman. This will reduce the violence."

Recommendations on Scaling FP+

The Kenya Ministry of Health is including FP+ in the Module 1 FP training for roll-out across Kenya in a county-led approach. Funding is being sought for a training-of-trainers across all 47 counties in a clustered approach (10 regional clusters). Post training-of-trainers, counties should work with local implementation partners to fundraise and budget for cascade training of providers and mentorship/supervision, including these costs in their annual work plans.



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