Measuring Disrespect and Abuse in Family Planning: Are We Ignoring Negative Experiences?

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Background and Rationale

• FP programs have addressed quality of care for decades; yet, poor quality care continues
• Monitoring and measuring negative experiences needed to better understand contraceptive uptake and use and to promote accountability for voluntarism
• Review draws on literature on measuring disrespect and abuse (D & A) in maternal health to assess how well FP programs measure negative client experiences
Methods

- Conducted initial search of 7,000 articles to identify quantitative tools related to FP that addressed one of seven types of maternal health D&A constructs described by Bowser and Hill (2010):
  1. Non-Confidential Care
  2. Non-Dignified Care
  3. Non-Consented Care
  4. Discrimination
  5. Physical Abuse
  6. Detention in Facilities
  7. Abandonment of Care
Methods (continued)

• Identified 12 measurement tools related to four constructs.
  1. Non-Confidential Care
  2. Non-Dignified Care
  3. Non-Consented Care
  4. Discrimination

• Individual measurement items on each tool were mapped to the maternal health D&A constructs and measurement gaps for FP were identified.
Findings

• Significant gaps in measuring negative FP experiences remain.

• Tools identified do not provide adequate information to determine D&A in FP service delivery, nor do they allow evaluation of the impact of D&A on FP program outcomes.

• FP field needs validated tools to measure negative experiences to maintain program accountability and learn which, whether and to what extent negative experiences influence FP uptake and continued use.

• Sharing measurement tools across FP/RH continuum is valuable
Thank You

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