

RESEARCH BRIEF

Validation of two quality of care measures: Results from a longitudinal study of reversible contraceptive users in India

There have been many efforts to measure quality and assess its effect on contraceptive uptake, contraceptive continuation, and other reproductive health outcomes including unintended and unwanted fertility and fertility reduction. The aim of this study was to validate process quality measures based on four quality of care (QoC) domains, and test their predictive validity related to contraceptive continuation among married women who voluntarily started a reversible contraceptive method (OCPs, injectables, IUD/postpartum IUD) in Haryana and Odisha.



Photo credit: Population Council

RECOMMENDATIONS



The 22-item measure is a more complete measure of process quality and can be used in special studies and can be used to train FP providers to offer high quality, voluntary contraceptive services.



The 10-item measure, a proxy for the 22-item measure, can be used in routine data collection and monitoring.



Building consensus around how to measure QoC is recommended for consistent tracking of QoC over time and across settings to ensure voluntary and high quality services.



Photo credit: Population Council

Bruce-Jain QoC framework in FP, published in 1990, brought attention to improving service quality, and measuring standards of contraceptive services. This study validated indicators in four QoC domains: respectful care, information exchange for method selection, effective use of the selected method, and continuity of contraceptive use and care.

FINDINGS

- A substantial majority of women reported being treated well by the provider (99.3%), having questions answered satisfactorily (90.8%), being told how to use their selected method (86.3%), and being able to ask questions (84.3%).
- Despite high quality on some indicators, few women received information on warning signs when using the selected method (37%), on methods that prevent HIV/STIs (37%), or on information without any one method being promoted (37%).
- Compared to women who received low QoC, respondents who received higher QoC were significantly more likely to continue using modern contraception—nearly three times as likely for the 22-item measure, and over twice as likely for the 10-item measure.

METHOD

A longitudinal study enrolled 2,699 married women (aged 15-49 years) in the states of Haryana and Odisha, who initiated voluntary use of a reversible modern contraceptive method. Analysis used interviews conducted within one-month of beginning a new episode of use and 3-month follow-up interview.

EVIDENCE

The Evidence Project uses implementation science—the strategic generation, translation, and use of evidence—to strengthen and scale up family planning and reproductive health programs to reduce unintended pregnancies worldwide. The Evidence Project is led by the Population Council

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