

## Why use this approach?

This approach offers women a one-window solution at the service provider level at both public and private sectors. A trained service provider can counsel women on all her family planning needs as well as treat her family members for their requirements. This approach ensures no missed opportunities for providing family planning information, counseling, and services.



### **STEP 1: Identify facilities as good candidates for integrated services**

Identify facilities that are high-volume sites, already serving the target audience of married women of reproductive age (MWRAs). Lady Health Volunteers (LHVs) are critical community health workers who are essential for counseling MWRAs on integrated services.



### **STEP 2: Select which services to integrate with FP**

This may include outpatient or inpatient clinical services, such as antenatal services, child welfare services, postnatal services, HIV service, curative services, labor wards, postabortion care services, etc.



### **STEP 3: Determine the appropriate level of integration**

Integration can be structural where some dedicated space (like a counseling corner) is created for family planning or functional where one uses whatever space exists to facilitate engagement with patients. Either way a trained and willing service provider is required.



### **STEP 4: Build the capacity of service providers**

Service providers should be trained according to Pakistan's national guidelines on family planning integration. This training can take place in the context of skills updates.



### **STEP 5: Equip integration services areas**

Identified integration service areas should be provided with relevant equipment, information, education, and communication (IEC) materials and job aids, commodities, and reporting tools.



### **STEP 6: Develop, print & distribute referral slips**

Depending on the level of integration decided upon. Referral slips might be necessary.