Villagers laugh as they watch a group of actors perform a play about the benefits of family planning near Blantyre, Malawi. The festivities are part of a larger effort of the Adventist Health Service in Malawi to promote community-based family planning.

Making Injectables Available in Malawi

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Injectables More Widely Available in Communities

- In 2008, MOH approved Health Surveillance Assistants (HSAs) to provide injectable contraceptives
  - Phased-in approach starting in 8 districts
  - Training
  - Strong referral systems

- Initial evaluation:
  - 49% of clients were new family planning (FP) users
  - 70% of those who were previous injectable users switched to HSAs for convenience

Source: FHI draft evaluation
Role of Policy in Making It Happen

• Cornerstone of a strong, sustainable community-based distribution (CBD) program
  – Sets the stage for scale-up
  – Regulation
  – Financing

• Process that gathered years of experience and efforts into a successful advocacy push
  – Evidence-based process
  – Policy dialogue and advocacy champions
Context for Family Planning in Malawi

- FP success story in sub-Saharan Africa
- Strong FP policy environment
  - Reproductive Health Policy and Strategy
  - Road Map for Accelerating Reduction of Maternal Mortality
- MOH goal to increase CPR to 40%
- CPR has increased … but fertility still high
Need for CBD of Injectables in Malawi

- High unmet need for FP services, especially for injectables
- Poor geographic access to health centers in a largely rural country
- Human resource shortage in rural areas
Challenges

- Regulatory bodies strongly opposed CBD of injectables
- Are HSAs already overloaded?
- Can paraprofessionals safely administer injectable contraceptives outside the health center setting?
Seizing the “Policy Window”

- Cadre of paraprofessionals (HSAs)
- Ad hoc provision of injectables by HSAs in several districts
- Strong support by the RH Unit of the MOH
- Senior MOH staff changes
- Strong civil society participation
- Demonstrated feasibility and acceptability
- Policy dialogue to overcome objections
USAID-supported Multi-partner Efforts

• Research, evidence-based advocacy: Health Policy Initiative

• Training of HSAs, implementation of pilot, program guideline development: Community-Based FP and HIV/AIDS Services Project

• Logistics, training, reporting: DELIVER

• Evaluation of pilot: FHI
Future Directions for Scale-up

• **Challenges remain:**
  – Regulation of HSAs
  – Refresher training, quality monitoring
  – Sustainable financing for contraceptives, and particularly injectables

• **The future:**
  – Scale-up to all Malawi’s 28 districts
  – CBD agent/volunteer provision of injectables at the community level?