

Implants Toolkit

Hormonal implants are small, thin, flexible plastic rods, each about the size of a matchstick, that release a progestin hormone into the body. Many clients are satisfied with them because they are safe, highly effective, long-acting, and quickly reversible. Implants require little attention after insertion, making them very convenient to use.

Three kinds of implants are highlighted in the Toolkit:

- Implanon
- Jadelle
- Sino-implant (II)

This Toolkit for health policy makers, program managers, and service providers contains reliable and relevant information about providing contraceptive implants, including the following:

- Essential knowledge about the method
- Relevant policies and guidelines
- Training resources
- Logistics information
- Program management guidance
- Service delivery guidelines and tools
- Communication materials
- Country experiences including implants in family planning programs employing strategies such as task sharing, mobile services, social franchising, integrated services, and more

If you have experience with the introduction or provision of hormonal implants, we invite you to tell us about it through the [feedback form](#), where you can also suggest new resources for the Toolkit.

What are K4Health Toolkits?

What is the purpose of this Toolkit?

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What are K4Health Toolkits?

K4Health Toolkits are electronic collections of carefully selected information resources on a particular topic for health policy makers, program managers, and service providers. They are based on a continuous publishing principle that allows them to evolve after publication to capture additional resources and to identify and fill remaining information gaps.

What is the purpose of this Toolkit?

Implants are a long-acting contraceptive method and one of the most effective reversible family planning methods ever developed. Despite their acceptability to women and their potential to significantly reduce the number of unintended pregnancies, they are underutilized. This Toolkit provides guidance and tools to update, expand or develop implant service provision programs. Expanding access to implants with high-quality services helps fulfill women's right to contraceptive choice and contributes to sustainable family planning programs.

Who developed this Toolkit?

Members of the Long-Acting and Permanent Methods (LA/PMs) Community of Practice developed this Toolkit, under the leadership of EngenderHealth, FHI 360, the Johns Hopkins

Bloomberg School of Public Health Center for Communication Programs, and the U.S. Agency for International Development. The 23 international reproductive health and family planning organizations forming the Implants Toolkit Working Group have expertise and experience in the areas of program planning, training, advocacy, marketing, research, policy, and logistics. The individuals and organizations hold a commitment to promoting evidence-based practices in reproductive health and believe that hormonal implants are a valuable component of family planning programs that add to women's contraceptive choice.

Members of the Implants Toolkit Working Group

Abt Associates Inc.

Academy for Educational Development

Bayer Schering Pharma AG

DKT International

FHI 360

EngenderHealth

EngenderHealth/RESPOND Project

ICF Macro

IntraHealth International

IntraHealth International/CapacityPlus Project

Jhpiego

Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs

Johns Hopkins Bloomberg School of Public Health/Knowledge for Health Project

Merck

PATH

Pathfinder International/Extending Service Delivery Project

Population Services International

Schering-Plough Corporation

Marie Stopes International

Meridian Group International, Inc.

U.S. Agency for International Development (USAID)

USAID | DELIVER Project

USAID | Health Policy Initiative

What types of resources are included?

This Toolkit was created to provide guidance and tools to update, develop or expand implant services in reproductive health programs. It contains:

- Tools and resources to help implement a variety of implant-related activities
- A compilation of the most up-to-date knowledge and best practices on implants
- Resources on the most up-to-date evidence from the World Health Organization and other international reproductive health organizations
- Case studies on implant-related activities from several countries

Who are the intended audiences?

The Toolkit is intended for use by:

- Policy makers and program managers who are interested in adding or improving existing implant services
- Providers, potential clients, teachers, and students who are interested in accurate information about implants

We invite you to suggest resources or adapt the resources in this toolkit to suit your local circumstances and languages.

How do I get started using this Toolkit?

Expanding access to and use of implants requires a holistic approach including accurate information; up-to-date policies and guidelines; quality training, supervision, and services; effective communication and marketing; and proper logistics. This Toolkit provides information on all these elements and contains tools and resources to help you implement a variety of implant-related activities.

To browse the contents of this Toolkit, use the navigation on the right to view resources related to programmatic topics relevant to family planning programs. Each section includes a list of a number of high-quality resources selected by the Implants Toolkit Working Group, further organized by sub-topic. Click on the title of the resource for more information about it, or click on the full-text link to get direct access to the full resource.

Some of the tools are readily available in an adaptable format (for example, Microsoft Word documents and PowerPoint presentations). We encourage you to alter and personalize these tools for your own use (please remember to credit the source). If you do use these tools or adapt them, we would love to hear from you. Please [e-mail us](#). (To make a comment about the Toolkit or suggest a resource, use the [feedback form](#).)

How can I suggest a resource to include in this Toolkit?

We invite you to contribute to evolving and enhancing this Toolkit. If you have developed or use quality resources that you think should be included in the Toolkit, please use the [feedback form](#) to suggest them. The Toolkit collaborators will review and consider your suggestions.

How can I make a comment or give feedback?

If you have comments about the Toolkit, please use the [feedback form](#). Your feedback will help to ensure the toolkit remains up-to-date and is continually improved. For example, you can share ideas about how you have used the Toolkit in your work so that others can learn from and adapt your experiences.



Related eLearning Courses:
Hormonal Methods of Contraception

Essential Knowledge



The Essential Knowledge section of the Implants Toolkit

provides key background and reference materials on contraceptive implants. These materials include research reviews, fact sheets, briefs, and frequently asked questions about implants. Advocates, program managers, and others can use these concise, digestible, and medically accurate information resources to communicate with colleagues, decision makers, donors, clients, and others about the effectiveness, safety, and benefits of implants as long-acting contraceptive methods.

Have a suggested resource or comment about this section of the Toolkit? Please visit our [feedback form](#).

Resources:

- **Sino-implant (II) Fact Sheet**

Contraceptive implants are a highly effective, safe, long-acting and popular contraceptive method shown to be acceptable to women worldwide. They are also ideal for women with limited access to health care services because they do not require regular resupply from a provider. With support from the Bill & Melinda Gates Foundation, FHI 360 provides technical assistance to facilitate the introduction of Sino-implant (II) ? a low-cost, highly effective

contraceptive implant ? in resource-constrained countries. This fact sheet provides an overview of FHI 360's Sino-implant (II) initiative.

- **Hormonal Implant Services: Delivering a Highly Effective Contraceptive Method Now Available at Reduced Cost**

This brief provides an overview of the key characteristics of contraceptive implants and explores service delivery considerations specific to provision of implants.

- **Jadelle® Contraceptive Implants (presentation)**

This presentation provides general information about Jadelle® and also explores its impact and covers important guidelines related to provision and use of Jadelle®.

- **Implants for Adolescents: An option worth considering for healthy timing and spacing of pregnancy**

This brief discusses the long-acting contraceptive implant and its potential advantages for adolescents. The contraceptive implant is often considered for use in women who have chosen to stop childbearing or those who are unsure of whether they want any children in the future. However, implants can be appropriate for all women, including adolescents who want to delay or space childbearing to ensure healthy timing and spacing of pregnancy.

- **Contraceptive Implants: Product Brief**

This peer-reviewed brief provides an overview of contraceptive implants, including effectiveness, current use, manufacturers, registration status, and cost. The goal is to improve information about underused contraceptive methods to improve women's and couple's access to a range of family planning methods.

- **Progestin Implant Fact Sheet**

This fact sheet contains information about the progestin implant for non-medical professionals.

- ## Essential Knowledge About Hormonal Implants

Hormonal implants are safe, highly effective, and quickly reversible long-acting progestin-only contraceptives that require little attention after insertion. Clients are satisfied with them because they are convenient to use, long-lasting, and highly effective. This review conducted by the Implants Toolkit Working Group presents the latest biomedical, social science, and programmatic knowledge about hormonal implants as of January 2010. The information pertains to all types of implants currently available (Jadelle®, Implanon®, and Sino-implant (II)®), unless otherwise specified.

- ## Frequently Asked Questions (FAQs) About Implants

This document provides answers to frequently asked questions about contraceptive implants, from a description of what they are, how they work, why should my program consider buying them, to programmatic questions, including those about procurement and costs of various implants. Full citations are provided for the sources.

Policy and Advocacy



Supportive policies lay the groundwork for family

planning service delivery. Advocates and decision makers need access to digestible, engaging syntheses of evidence in order to make the case for policies and national family planning guidelines that facilitate access to long-acting reversible contraceptive methods such as implants.

This section of the Implants Toolkit provides key advocacy briefs and tools that make the case for implants as safe and highly effective long-acting methods of contraception. These ready-to-use informational briefs can inform donors, policy makers, and other key stakeholders about the

benefits of offering implants and other long-acting and permanent methods.

This section of the Toolkit also houses international guidance on developing or updating family planning policies to support the provision of implants, as well as examples of strong family planning policies.

Visit the Service Delivery section of the Toolkit for a comprehensive list of service delivery guidelines.

Visit the Family Planning Advocacy Toolkit for general family planning advocacy guidance and tools.

Have a suggested resource or comment about this section? Please visit our [feedback form](#).

Resources:

- **Increasing Access to Family Planning in Ghana Through Policy Change: Task-Sharing to Enable Auxiliary Nurses to Provide Contraceptive Implant Services**

This policy brief explains how Ghana was able to increase access to implants by enabling auxiliary nurses to provide those contraceptive services.

- **Model List of Essential Medicines (18th Edition)**

The Model List of Essential Medicines from the World Health Organization presents a list of minimum medicine needs for a basic health care system and essential medicines for priority diseases. The Model List covers contraceptive methods, including implants. The type of implants mentioned in the Model List is a two-rod levonorgestrel-releasing implant. (See p. 23 of the full-text document.) The WHO Model Lists of Essential Medicines has been updated every two years since 1977.

For additional editions and languages, please click [here](#).

- **Costed Implementation Plans: Guidance and Lessons Learned**

A costed implementation plan (CIP) is a planning and management tool ? including cost estimations for multi-year action plans ? for achieving the goals of a family planning program.

Governments and partners can use a CIP to determine a program's priority goals, define targets for the programmatic inputs required to meet those goals, specify interventions and activities to meet the goals, determine the costs associated with the interventions and activities, advocate for resources for the plan, and monitor the activities specified in the plan.

A CIP is also a valuable tool in the context of Family Planning 2020 – the effort designed to sustain momentum from the 2012 London Summit on Family Planning. Working with ministries of health and other partners, PROGRESS helped lead the development of CIPs in Kenya, Nigeria (Gombe State), Senegal and Tanzania.

This booklet provides guidance on developing a CIP and discusses lessons learned from our experiences.

- **Implants for Adolescents: An option worth considering for healthy timing and spacing of pregnancy**

This brief discusses the long-acting contraceptive implant and its potential advantages for adolescents. The contraceptive implant is often considered for use in women who have chosen to stop childbearing or those who are unsure of whether they want any children in the future. However, implants can be appropriate for all women, including adolescents who want to delay or space childbearing to ensure healthy timing and spacing of pregnancy.

- **Contraceptive Implants: Providing Better Choice to Meet Growing Family Planning Demand**

Abstract: Contraceptive implants are extremely effective, long acting, and suitable for nearly all women—to delay, space, or limit pregnancies—and they are increasingly popular. Now, markedly reduced prices and innovative service delivery models using dedicated non-physician service providers offer a historic opportunity to help satisfy women's growing need for family planning.

- **Jadelle Implants - Press Releases**

This record provides links to several press releases focused on Jadelle implants.

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Strategies to increase use of long-acting and permanent contraception: Policy brief

The most effective methods of contraception are frequently the least available. These long-acting and permanent methods (LAPM) include the intrauterine device (IUD) and the progestogen implant, as well as male and female sterilization. The IUD and progestogen implant are reversible, and may also be referred to as long-acting reversible contraception (LARC). These methods are useful for couples wishing to space pregnancies. Male and female sterilization are permanent methods for couples who have completed childbearing. LAPM is used broadly to refer to all methods.

Training



Good contraceptive implants services require a

competent and well-prepared staff that can perform insertion and removal procedures and can help clients make an informed choice about implants. Implants can be made widely available through a variety of providers and venues. A number of cadres of health professionals, including nurses, nurse-midwives, clinical officers, and physicians, can safely provide implants. In Ethiopia, for example, health extension workers have been trained to insert and remove implants.

The Training section of the Implants Toolkit provides a range of implants-specific training resources, including the following:

- Guidelines, tools, and curricula for implants training and education
- Training materials on insertion and removal
- Multimedia instructional resources such as videos and posters

Have a suggested resource or comment about this section of the Toolkit? Please visit our [feedback form](#).

Resources:

- **IMPLANON NXT? (etonogestrel implant) -- Clinical Information and Training Workshop (educational slide kit)**

Clinical overview of IMPLANON NXT?, counseling information and instructions regarding insertion, localization, removal, and reinsertion processes.

These educational materials are provided for purposes of assisting in training healthcare providers in countries outside the United States on the insertion and removal procedures for IMPLANON NXT?. They do not replace a review of the Prescribing Information, which should be reviewed prior to administering or removing the product.

- **Implanon NXT: On-the-Job Training Course for Current Implant Providers Learning Resource Package**

This Implanon NXT OJT course, consisting of a one-day group activity followed by individual self-study and practice on the job, has been developed to prepare to transition existing implant providers to use Implanon NXT without requiring a prolonged training course. This approach is intended to minimize time away from the service delivery site and yet ensure that the implant provider has the new knowledge and skills required to competently provide Implanon NXT.

- **Checkpoints for Choice: A New Orientation and Resource Package for Ensuring Voluntary Family Planning Programs**

This resource package offers practical guidance on how program planners and managers, policymakers, donors, service providers, and community leaders can strengthen clients' ability to make full, free, and informed contraceptive choices within a rights-based context.

- **Providing Contraceptive Implants Learning Resource**

Package

This learning resource package provides health workers with a consolidated source for essential information on safe use of contraceptive implants, specifically on Jadelle, Sinoimplant (II), Implanon, and Implanon NXT (also known as Nexplanon).

- **IMPLANON? (etonogestrel implant) -- Clinical Information and Training Workshop (educational slide kit with video demonstrations)**

Clinical overview of IMPLANON?, counseling information and instructions regarding insertion, localization, removal, and reinsertion processes.

These educational materials are provided for purposes of assisting in training healthcare providers in countries outside the United States on the insertion and removal procedures for IMPLANON. They do not replace a review of the Prescribing Information, which should be reviewed prior to administering or removing the product.

- **IMPLANON? (etonogestrel implant) -- Reference Guide**

Reference guide summarizing IMPLANON? clinical information, insertion, localization, and removal instructions

This educational material is provided for purposes of assisting in training healthcare providers in countries outside the United States on the insertion and removal procedures for IMPLANON. They do not replace a review of the Prescribing Information, which should be reviewed prior to administering or removing the product.

- **IMPLANON NXT? (etonogestrel implant) -- Reference Guide**

Reference guide summarizing IMPLANON NXT? clinical information, insertion, localization, and removal instructions.

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be reviewed prior to administering or removing the product.

- **The Training Resource Package for Family Planning: Contraceptive Implants**

The Training Resource Package for Family Planning (TRP) contains curriculum components and tools needed to **design, implement, and evaluate training**. It offers essential resources for family planning (FP) and reproductive health **trainers, supervisors, and program managers**. The entire package is designed to support **up-to-date training on family planning and reproductive health**.

The **Implants** module is designed for the providers in developing countries who most often are tasked with providing FP services?primarily nurses and nurse-midwives, as well as primary care physicians?and assumes trainees will have at minimum level of clinical training.

The TRP was developed using **evidence-based technical information** from **World Health Organization** (WHO) publications:

- **Jadelle: Contraceptive Implants Up to 5 Years (insertion and removal flipchart)**

These flipcharts for providers gives illustrations and instructions for the insertion of Jadelle contraceptive implants. Jadelle is now provided with a disposable trocar that is sharp enough to penetrate the skin directly. Thus the disposable trocar can be used to puncture the skin and insert the rods, without the need for an incision.

- **Jadelle: Contraceptive Implants Up to 5 Years (insertion and removal posters)**

These one-page posters or flyers include photos and short instructions on how to insert and remove Jadelle implants. They are intended as a training tool to help providers who are being trained to insert and remove Jadelle implants remember the steps. They can also be used as a job aid for providers who have already been trained to insert and remove Jadelle implants.

- **Implanon Insertion Training Evaluation Report**

This report describes an evaluation by FHI 360, through the Program Research for Strengthening Services (PROGRESS) project, of a training to teach health extension workers in Ethiopia how to insert the one-rod implant Implanon. The training was conducted by the Integrated Family Health Program (IFHP) and the Ethiopian Public Health Association (EPHA) as part of the Federal Ministry of Health's effort to scale up the provision of Implanon in Ethiopia.

- **A Guide to Implant In-Service Training and Pre-Service Education**

In-service training can be used either to transfer knowledge and skills about implants to providers who did not get this in their pre-service education or to update the knowledge and skills of providers currently providing implants services (refresher training). This document provides guidelines that will increase the effectiveness of either type of training.

- **Jadelle Training Manual for Family Planning**

This manual was developed to provide family planning trainers and service providers with a concise source of up-to-date information on the levonorgestrel implant system, Jadelle. Developed by the manufacturer of Jadelle, it provides essential information about how to provide Jadelle safely.

- **Jadelle Insertion and Removal Video**

This video shows techniques for insertion and removal of Jadelle implants. The accompanying booklet provides descriptions and notes that correspond with the "insertion" and "removal" parts of the videos. Note that the video illustrates incision with a scalpel for insertion of Jadelle. However, Jadelle is now provided with a disposable trocar that is sharp enough to penetrate the skin directly. Thus the disposable trocar can be used to puncture the skin and insert the rods, without the need for an incision.

- **Jadelle Insertion Card**

This resource helps to visualize the length of Jadelle contraceptive implants.

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Checklists for Implants Service Delivery (PSI Global Quality Assurance Manual)

This document contains a set of checklists provided by Population Services International (and adapted from Jhpiego and manufacturer materials) to help their country programs assess providers' knowledge and skills in relation to implants service delivery. Also included is a facility audit checklist to ensure the proper supplies and instruments are available.

Program Management



Management of implants programs, as with any other health care program, involves organizing the program operations and staff to ensure smooth service delivery. The Program Management section of the Implants Toolkit includes information to help family planning program managers fulfill the essential management functions of an implants program. This section offers resources and tools on the following topics:

- Programming models & approaches, including task sharing
- Logistics and supply chain management
- Quality considerations, including supportive supervision, monitoring, and evaluation

Have a suggested resource or comment about this section? Please visit our [feedback form](#).

Programming Models & Approaches



approaches to providing implants. Implants can be made available in a variety of service delivery settings, including hospitals, clinics, and even mobile clinics. And, in many cases, task sharing can be employed so that different types of providers can offer services related to implant insertion and removal, including counseling.

The addition of long-acting contraceptive methods to any family planning program should be planned and implemented with sustainability and the potential for scale-up in mind. To gauge whether a program should be scaled up, it is important to understand the program costs, and cost-effectiveness; to have sustainable funding sources; to ensure there is enough of a demand for services to continue providing them; and to have buy in from key stakeholders, including the Ministry of Health, the communities in which the program will be available, and the health workforce.

The publications in this section of the Toolkit offer information on these various service delivery models, provide evidence supporting the practice of task shifting, or task sharing, to expand access to long-acting contraceptive methods, and set forth guidance for implementing the delivery of contraceptive implants. Several publications in this section can assist with incorporating sustainability measures into your program and planning for scale-up from the beginning of the implementation process. These include costing tools, assessments, and guides for scaling up family planning programs.

Resources:

- **Contraceptive Implants: Providing Better Choice to Meet Growing Family Planning Demand**

Abstract: Contraceptive implants are extremely effective, long acting, and suitable for nearly all women?to delay, space, or limit pregnancies?and they are increasingly popular. Now, markedly reduced prices and innovative service delivery models using dedicated non-physician service providers offer a historic opportunity to help satisfy women?s growing need for family planning.

- **Hormonal Implant Services: Delivering a Highly Effective Contraceptive Method Now Available at Reduced Cost**

This brief provides an overview of the key characteristics of contraceptive implants and explores service delivery considerations specific to provision of implants.

- **Costed Implementation Plans: Guidance and Lessons**

Learned

A costed implementation plan (CIP) is a planning and management tool ? including cost estimations for multi-year action plans ? for achieving the goals of a family planning program. Governments and partners can use a CIP to determine a program?s priority goals, define targets for the programmatic inputs required to meet those goals, specify interventions and activities to meet the goals, determine the costs associated with the interventions and activities, advocate for resources for the plan, and monitor the activities specified in the plan.

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This booklet provides guidance on developing a CIP and discusses lessons learned from our experiences.

- **Implants for Adolescents: An option worth considering for healthy timing and spacing of pregnancy**

This brief discusses the long-acting contraceptive implant and its potential advantages for adolescents. The contraceptive implant is often considered for use in women who have chosen to stop childbearing or those who are unsure of whether they want any children in the future. However, implants can be appropriate for all women, including adolescents who want to delay or space childbearing to ensure healthy timing and spacing of pregnancy.

- **Addressing Unmet Need for Long Acting Family Planning in Ethiopia - Uptake of Implanon and Characteristics of Users**

Objective: To describe women who accept Implanon from community health workers in Ethiopia and to assess whether community-based provision addresses unmet need for contraception.

Methods: Women who accepted Implanon during Implanon training in 4 regions of Ethiopia were asked about their characteristics and use of family planning. They were compared with clients accepting other methods and with women with unmet need nationally. Differences between groups were tested with chi-square, Fischer?s Exact, and t-tests as appropriate.

Results: Implanon acceptors were older (28.3 vs. 26.7 years) and less educated (1.7 vs. 2.3 years) than clients who selected other methods. Almost one quarter (22.9%) of all clients had never used contraception before and this was higher among clients who chose Implanon (23.1% vs. 16.4%, $p=0.04$). Acceptors were also less likely to be using contraception (70.8% vs. 77.3%, $p<0.05$) but all clients interviewed were more likely to be using contraception than the rural population (17%). Clients who accepted Implanon were younger (1.5 years) but more educated (29.3% vs 16.5% completed primary education) than women with unmet need for contraception nationally.

Conclusion: Provision of Implanon through community-health workers at the community-level is effective in reaching those women who have greatest need for contraception.

- **Scale-Up of Task-Shifting for Community-Based Provision of Implanon**

The Integrated Family Health Program (IFHP) is a five-year USAID-funded program to promote an integrated model for strengthening maternal and child health, family planning (FP), and reproductive health services for rural and underserved populations in Ethiopia. Led by Pathfinder International and John Snow, Inc. in partnership with the Consortium of Reproductive Health Associations, IFHP has pursued scale-up of community-based provision of Implanon since 2009. Active in four regions of Ethiopia, IFHP's Implanon scale up efforts support the government in enabling underserved rural communities to access this long-acting family planning (LAFP) method at the village level through task-shifting to Ethiopia's health extension worker (HEW) cadre. In August 2011, the project completed the second year of its four-year timeline. This technical brief presents scale-up progress to date, and recommendations for future efforts.

- **Organizing Work to Provide Implants**

This brief discusses some of the key issues to consider when developing a work flow for provision of implants.

- **Who Can Provide Implants?**

This brief gives an overview of the cadres of health professionals that can provide hormonal implants. Enabling various types of health care personnel to provide implants services helps to increase the availability and uptake of implants services.

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Implant Program Models

This brief provides an overview of diverse service delivery models for providing implants services.

Logistics



Throughout the world, even though the use of

contraceptive implants remains low, demand continues to exceed supply. An effective and efficient logistics system that can ensure continuous availability of the commodities needed is critical for the success of any family planning program, including those that offer hormonal implants.

The Logistics section of the Implants Toolkit provides resources for improving logistics system performance to maintain adequate supplies and equipment on hand, thus ensuring implants will be available where and when clients need them.

For general family planning resources related to forecasting, procurement, and other aspects of logistics and supply chain management, please visit our [Family Planning Logistics Toolkit](#).

Have a suggested resource or comment about this section? Please visit our [feedback form](#).

Resources:

- **Sino-Implant (II): Quality Evaluation Report**

The Sino-implant (II) Initiative has a rigorous quality assurance evaluation and monitoring program, implemented by FHI 360, to verify that Sino-implant (II) meets lot release specifications for the product. These reports expand on the results of the quality assurance evaluation and monitoring program conducted by year beginning in 2008.

- **Implants Logistics Overview**

This short overview provides basic guidance on supply chain considerations when managing hormonal implants.

- **Instruments and Supplies for Insertion and Removal of Hormonal Implants**

Stockouts of contraceptive commodities and other needed equipment, instruments, and supplies for family planning provision are commonly reported in service programs. Unavailability of either the method itself or of other needed instruments and supplies means that implants services are also unavailable. Thus, attention to logistics is critical, and must include instruments expendable medical supplies as well as the contraceptive implant itself. The table in this brief indicates which instruments and supplies are needed for both insertion and removal of the hormonal implants currently available: Implanon, Jadelle, and Sino-implant (II).

- **Medical Instruments and Expendable Medical Supplies Needed to Provide Long-Acting and Permanent Methods of Contraception**

This document provides lists of both medical instruments and expendable medical supplies needed to provide the long-acting and permanent methods of contraception: hormonal implants, IUDs, female sterilization via minilaparotomy, and no-scalpel vasectomy. Information was drawn from EngenderHealth medical/clinical staff and the *Surgical Instruments Catalogue* from Militex Instruments Company.

- **Instruments and Supplies Needed to Provide Clinical Methods of Family Planning**

List of supplies and instruments needed for each LA/PM method.

Monitoring, Evaluation, and Quality Improvement



There are many ways family planning programs can

work to not only maintain but also continually improve the quality of the contraceptive implant services they offer. Effective training, including periodic refresher training; supportive supervision; monitoring and evaluation; and good communication among administrative staff, providers, and clients are just a few means of quality improvement.

The resources in the Monitoring, Evaluation, and Quality Improvement section of the Implants Toolkit offer guidance and tools for assessing and improving the quality of implant provision services, including handbooks, indicators, interview guides, checklists, and more.

Resources:

- **Sino-Implant (II): Quality Evaluation Report**

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- **Management Information System: Data Collection Tool for Countries with High Volumes of Implants 2009**

This tool was developed by Marie Stopes International for use by its country programs that provide a high volume of IUDs or implants. The tool is intended to track IUD and implant-related indicators in order to identify potential problems with high discontinuation rates as well as to estimate levels of switching from short-acting to long-acting family planning methods. Included in the tool are indicators to track this information as well as an example data collection sheet.

- **Family Planning and Reproductive Health Indicators Database**

This site provides a comprehensive listing of the most widely used indicators for evaluating family planning and reproductive health programs in developing countries. The database contains definitions, data requirements, data sources, purposes, and issues for core indicators along with links to other websites and documents containing additional family planning and reproductive health indicators. The Indicator Database replaces the *Compendium of Indicators for Evaluating Reproductive Health Programs* (MEASURE Evaluation, 2002) and was developed and is managed by the MEASURE Evaluation Population and Reproductive Health (PRH) project. Although funded by the United States Agency for International Development (USAID), it applies to family planning and reproductive health programs sponsored by a variety of funding agencies, governments, or NGOs worldwide. Specifically, the database provides a menu of indicators to be used selectively as part of the evaluation of national programs, regional programs, and country projects. Users of the database are encouraged to use the indicators as a template for country- or project-specific indicators, to be modified as necessary.

- **Couple Years of Protection (CYP)**

From the U.S. Agency for International Development (USAID), this web page explains what couple years of protection (CYP) is, how it is calculated, and the CYP conversion factors that USAID uses for various contraceptive methods. For implants, USAID uses 2.0 CYP per Implanon implant and 3.5 CYP per Jadelle implant.

- **Checklists for Implants Service Delivery (PSI Global Quality Assurance Manual)**

This document contains a set of checklists provided by Population Services International (and adapted from Jhpiego and manufacturer materials) to help their country programs assess providers' knowledge and skills in relation to implants service delivery. Also included is a facility audit checklist to ensure the proper supplies and instruments are available.

Service Delivery



Ensuring good-quality implants services is a vital

component and foundation of any implants program. Services should be client-centered, meaning that services are tailored to clients' needs and meet medical standards.

This section of the Implants Toolkit includes information and tools to help service providers offer client-centered care, including the following:

- service delivery guidelines
- screening and counseling tools for providing clear, medically accurate information about implants and instruction about how to manage side effects and other concerns

Instructions for safe implant insertion and removal can be accessed in the Training section of the Toolkit.

Have a suggested resource or comment about this section? Please visit our [feedback form](#).

Service Delivery Guidelines

Up-to-date and evidence-based family planning guidelines help programs and providers offer quality services that are free from unnecessary requirements and medical barriers. The World Health Organization has issued and periodically updates global technical guidelines that cover how to provide contraceptive methods and to whom. National family planning and reproductive health programs can use the WHO global recommendations about contraceptive implants and other resources with international guidance as a basis for developing, reviewing, or updating their own national family planning guidelines on implants.

Resources:

- **Ensuring Human Rights within Contraceptive Service Delivery: Implementation Guide**

This implementation guide sets out core minimum actions that can be taken at different levels of the health system, and provides examples of implementation of the recommendations in the WHO guidelines.

- **Medical Eligibility Criteria for Contraceptive Use, Fifth Edition**

This document is part of the process for improving the quality of care in family planning. *Medical eligibility criteria for contraceptive use* (MEC), the first edition of which was published in 1996, presents current WHO guidance on the safety of various contraceptive methods for use in the context of specific health conditions and characteristics. This is the fifth edition of the MEC ? the latest in the series of periodic updates

This edition is divided into two parts. Part I describes how the recommendations were developed and Part II contains the recommendations and describes how to use them. The recommendations contained within this document are based on the latest clinical and epidemiological data. Several tools and job aids are available from WHO and other sources to help providers use these recommendations in practice.

- **Ensuring Human Rights in the Provision of Contraceptive Information and Services: Guidance and Recommendations**

These WHO guidelines provide recommendations for programs as to how they can ensure that human rights are respected, protected and fulfilled, while services are scaled up to reduce unmet need for contraception. Both health data and international human rights laws and treaties were incorporated into the guidance.

- **Hormonal Implant Services: Delivering a Highly Effective Contraceptive Method Now Available at Reduced Cost**

This brief provides an overview of the key characteristics of contraceptive implants and explores service delivery considerations specific to provision of implants.

- **Model List of Essential Medicines (18th Edition)**

The Model List of Essential Medicines from the World Health Organization presents a list of minimum medicine needs for a basic health care system and essential medicines for priority diseases. The Model List covers contraceptive methods, including implants. The type of implants mentioned in the Model List is a two-rod levonorgestrel-releasing implant. (See p. 23 of the full-text document.) The WHO Model Lists of Essential Medicines has been updated every two years since 1977.

For additional editions and languages, please click [here](#).

- **Family Planning: A Global Handbook for Providers, Implants Chapter**

The new handbook, Family Planning: A Global Handbook for Providers, offers clinic-based health care professionals in developing countries the latest guidance on providing

contraceptive methods. Primary features of the handbook include:

- First of its kind? developed through a unique, organized process, in which experts from around the world have come to consensus on practical guidance that reflects the best available scientific evidence.
- Expands and improves on its predecessor, *The Essentials of Contraceptive Technology*, by covering more methods and more related topics and strengthening the evidence base for its guidance.
- Covers more content, but still focuses on the essentials that family planning providers need to provide family planning clients with good-quality care.
- Written in plain terms and organized for quick reference, the book serves as a resource for all levels of health care providers.
- One of the **World Health Organization's (WHO) 4 cornerstones of family planning guidance**. Together, the 4 cornerstones support the safe and effective provision and use of family planning methods and can be used to develop national guidelines. As the fourth cornerstone, *Family Planning: A Global Handbook for Providers* offers technical information to help health care providers deliver family planning methods appropriately and effectively.
- Prepared through a unique collaboration among Johns Hopkins Bloomberg School of Public Health, the World Health Organization, the United States Agency for International Development and technical experts from over 30 organizations around the world. These and many more organizations have signed on as supporters of the book.
- Translations are available in seven languages (see links below) and planned for as many as 10 languages:
 - Arabic
 - Farsi
 - French
 - Hindi
 - Portuguese (Brazilian)
 - Romanian
 - Russian
 - Spanish
 - Swahili
 - Tajik

Hormonal Implants: Service Delivery Considerations for an Improved and Increasingly Popular Method

This technical brief focuses on service delivery considerations for hormonal implants. It touches on the following subjects: client eligibility, provider's ability to provide implants, placement, quality and access, counseling, return visits, continuation, removal, service delivery models, policy considerations, training, and commodity security and cost.

Who Can Use Implants?

Implants can be used by almost all women of reproductive age. This brief outlines the World Health Organization's Medical Eligibility Criteria for who can (categories 1 and 2) and cannot (categories 3 and 4) use implants.

- ### Follow-Up for Implants Users

Implants users do not need any routine follow-up visits until it is time to remove the implants. However, every client should be assured that she is welcome to return at any time—for example, if she has questions, problems or want another method; has a major change in health status; or thinks she might be pregnant. This brief provides information about follow-up for users of hormonal implants and how to help continuing implants users use their method successfully.

- ### Selected Practice Recommendations for Contraceptive Use (2008 Update)

This guide provides guidance on how to provide contraceptives, with the goals of maximizing effectiveness and managing side effects and other problems. The second edition contains 33 recommendations ranging from when to start a method, how to manage problems women experience using certain methods, how to provide emergency contraception, and what clinical exams to perform before a method can be initiated.

Screening and Counseling Tools

This section of the Toolkit provides job aids and counseling tools to help providers with the following tasks:

- screening clients for eligibility for use of contraceptive implants
- counseling clients on contraceptive options, including implants
- counseling clients on the management of contraceptive side effects
- addressing common myths and misconceptions about contraceptives, particularly implants

Resources:

- ### **Checklist for Screening Clients Who Want to Initiate Contraceptive Implants**

FHI 360 developed a simple checklist to help health care providers screen clients who have been counseled about contraceptive options and who have made an informed decision to use implants. This Implant Checklist is based on recommendations included in the *Medical Eligibility Criteria for Contraceptive Use* (WHO, 2004; updated 2008). It consists of 12 questions to identify medical conditions that would prevent safe use of implants or require further evaluation and assess whether a client may be pregnant, including questions to be reasonably sure that a client is not pregnant. Therefore, there is no need to use FHI's pregnancy checklist separately.

Also included is a link to a training guide designed for program managers, administrators, trainers, and service providers interested in learning how to use the screening checklist. As a training tool, the guide provides a four-to-six-hour curriculum for training service providers to use the checklist and collateral materials for use during the training. As a reference tool, the guide provides reference information to supplement the training. This information includes a collection of essential, up-to-date reference materials; recommendations for adapting the checklist to the local context; basic, evidence-based information on implants; and an annotated bibliography.

- ### **How To Be Reasonably Sure a Client is Not Pregnant**

The Pregnancy Checklist contains a series of questions to rule out pregnancy. These questions, based on criteria established by the World Health Organization (WHO) for determining with reasonable certainty that a woman is not pregnant, are also included in the COC, DMPA, IUD, and implant checklists, eliminating the need to use two separate checklists.

Although originally developed for use by family planning providers, the Pregnancy Checklist can also be used by other health care providers who need to determine whether a client could be pregnant. For example, pharmacists may use this checklist when prescribing certain medications that should be avoided during pregnancy.

Evaluations of the Pregnancy Checklist have been conducted in family planning clinics and

have demonstrated that the tool is effective in correctly identifying women who are not pregnant. Furthermore, studies in Guatemala, Mali, and Senegal have shown that use of the checklist by family planning providers significantly reduced the proportion of clients being turned away due to menstrual status and improved women's access to contraceptive services.

Also included is a link to a training guide designed for program managers, administrators, trainers, and service providers interested in learning how to use the Pregnancy Checklist.

- **Quick Reference Chart for the WHO Medical Eligibility Criteria for Contraceptive Use**

The World Health Organization (WHO) develops detailed criteria that health care workers can follow to determine which contraceptive methods are medically suitable for their clients. These criteria are based on the most current scientific knowledge about the effectiveness, risks, and benefits of various family planning methods, and they can help providers guide their clients in making safe and informed decisions. The WHO recently revised the criteria in response to recommendations made by an expert working group who met in Geneva, Switzerland, in April 2008.

FHI has created a quick reference guide, in the form of a chart, that summarizes the WHO's medical eligibility criteria for combined oral contraceptives, the injectable contraceptive depot-medroxyprogesterone acetate (DMPA), progestin-only implants, and copper IUDs. Unlike previous versions of the MEC Quick Reference Chart, the 2009 version includes a complete list of all conditions that the WHO classifies as Category 3 (usually not recommended) and Category 4 (should not be used).

- **Medical Eligibility Criteria Wheel for Contraceptive Use**

This wheel contains the medical eligibility criteria for starting use of contraceptive methods. It is based on the Medical Eligibility Criteria for Contraceptive Use (MEC), 5th edition, one of WHO's evidence-based guidelines. It tells family planning providers if a woman presenting with a known medical or physical condition is able to use various contraceptive methods safely and effectively. The wheel includes recommendations on initiating use of six common types of contraceptives.

- **Cue Cards for Counseling Adults on Contraception**

The set of cue cards is designed to help a range of community- and facility-based providers to counsel adults on their contraceptive options. The cue cards address: Implants, Male

Sterilization, Female Sterilization, Intrauterine Device (IUD), Lactational Amenorrhea Method (LAM), DMPA (injectables), Combined Oral Contraceptives (COCs), Progestin-Only Pills (POPs), Standard Days Method (SDM), Male Condom, Female Condom, and Emergency Contraceptive Pills (ECPs). The provider can use the front side of the cards to give information about all available options and, after the client chooses a method, the provider turns to the back side to give specific instruction on use.

- **Management of Side Effects for Implants**

Providers can follow simple approaches to manage side effects of implants. This involves informing women about what side effects to expect, providing reassurance that common side effects such as bleeding changes are not harmful, and encouraging women to return whenever they have questions or concerns. Brief, clear descriptions of the most common side effects before the implants are inserted reduces complaints and makes management easier. Counseling about bleeding changes may be the most important help a woman needs to keep using the method. This brief provides information on advice that providers can give to implants clients to manage side effects as well as how to manage reported side effects, which may or may not be due to the method.

- **Decision Making Tool for Family Planning Clients and Providers**

This flipchart is a decision-making aid for clients, a job-aid and reference manual for providers; and a training resource. With one page for the client and a corresponding page for providers, it has helpful pictures, key points and detailed reference information covering 14 family planning methods. It includes medical eligibility criteria, side-effects, when to start and how to use each method.

- **My Choice-It's Your Choice: Long-Lasting Family Planning Methods Flipchart**

This flipchart is intended for client counseling about the IUD (loop) and implants. This file includes selected portions about implants, which emphasize key benefits and side effects associated with this long-acting method, and includes quotes from Zambian women who are satisfied clients.

- **Hormonal Methods - Key Facts**

This job aid provides key information on hormonal methods, including implants, combined oral contraceptives, monthly injectables, long-acting injectables, and progestin-only pills. It provides information on:

- effectiveness
- when to start hormonal methods
- health concerns
- correcting mistakes
- managing side effects

Health Communication



An effective implants program not only focuses on quality

services, but also seeks to educate, raise awareness, and build stakeholder buy-in and client/community demand for implants services. This section of the Implants Toolkit contains information and tools to help policy makers, program managers, and family planning promoters build a supportive environment for implants, including resources related to behavior change communication (BCC). Additionally, the resources and materials can help reach many women who are reluctant to try implants because they are misinformed or need a trusted source of information.

This section of the Implants Toolkit includes general health communication guidance and tools (available on this page), as well as [communication materials on implants](#).

- For counseling tools, please visit the [Service Delivery](#) section of the Toolkit.
- For fact sheets and briefs that share basic information about implants, please visit the [Essential Knowledge](#) section of the Toolkit.
- To browse evidence of the impact of health communication on IUD acceptance and use, please visit the [Country Experiences](#) section of the Toolkit for [Experiences with Introducing Implants](#).
- For implants-specific advocacy tools, please visit the [Policy and Advocacy](#) section of the Toolkit.

To access general family planning advocacy materials, please visit the [Family Planning Advocacy Toolkit](#).

Have a suggested resource or comment about this section? Please visit our [feedback form](#).

Resources:

- **The P-Process: Five Steps to Strategic Communication**

This brochure highlights the steps within the P-Process, a framework designed to guide communication professionals as they develop strategic communication programs. This step-by-step road map leads communication professionals from a loosely defined concept about changing behavior to a strategic and participatory program with a measurable impact on the intended audience.

- **C-Modules: A Learning Package for Social and Behavior Change Communication**

This set of modules complements and consolidates what is already available in social change and behavior change communication application and makes it easy for facilitators to apply and access materials created by others. The modules:

- Focus on essential SBCC competencies during each of the five key stages to develop an effective SBCC program
- Rely on and feature a number of practical SBCC tools
- Use actual field examples for teaching
- Create opportunities for participants to apply what they learn to their own programs

This package is designed for staff of development programs in small and medium-sized organizations with varying degrees of experience in planning or implementing SBCC programs. Facilitators may tailor each module to the profile of learners as well as to the time available.

Communication Materials on Implants



flyers, leaflets, client cards, booklets, posters, and even a television spot offering concise, reader-friendly information on contraceptive implants. These materials can be used to educate providers, clients, decision makers, and community members about the use and benefits of implants for family planning. Several of these publications help potential clients compare family planning options in order to understand which contraceptive method is most appropriate for their needs.

Resources:

- **Health Education Materials for the Workplace Toolkit**

This toolkit contains three types of materials to provide family planning messaging specifically for workplaces, including mini-posters, handouts, and supplemental materials.

- **Jadelle: Contraceptive Implants Up to 5 Years (one-page flyer)**

This resource describes the lifestyle of a woman in which Jadelle contraceptive implants are ideal for in comparison to other contraceptive choices.

- **Jadelle: How to Use Jadelle?**

This resource for Jadelle clients provides a full summary of Jadelle and describes: how it works, its effectiveness, who should and should not use Jadelle, insertion & removal, expectations, breastfeeding, effect on bleeding patterns, and side effects.

- **Jadelle: Contraceptive Independence (brochure)**

Produced by Bayer HealthCare Pharmaceuticals, the manufacturer of Jadelle implants, this brochure provides information about the characteristics of Jadelle, including its duration of use, effectiveness, and mechanism of action.

- **Sino-implant (II): Questions and Answers for Clients**

Sino-implant client card that provides answers to commonly asked questions about this contraceptive implant.

- **Do You Know Your Family Planning Choices: Wall Chart**

This wall chart illustrates all contraceptive methods including Norplant and explains whether each method is temporary or permanent, its effectiveness, ease of use, and side effects. It also includes a chart which shows which methods are not advisable for certain health conditions (smoking, high blood pressure, breastfeeding, etc.). This chart updates and replaces previously published editions. It is published in several languages.

- **Sino-implant (II) Product Brochure**

Sino-implant (II) product brochure that provides information about this subdermal contraceptive implant, the manufacturer, approved and planned registrations worldwide, on-going product quality evaluation, distribution agreements and partners, and public sector pricing.

- **TRUST Implant Booklet**

DKT recently imported Sino-implant (II) from China into Ethiopia, marketed in Ethiopia as TRUST. DKT has developed this booklet, which contains basic information on method characteristics as well as information about programmatic considerations, provided in both English and Amharic.

- **Better Life Television Spot on Implants--Cambodia**

This television spot focused on implants in Cambodia may serve as an example which could be used in other country contexts.
English script forthcoming.

- **Zimbabwe Jadelle - Dual Protection Brochure**

This 4-page brochure discusses Jadelle implants, including their effectiveness, how they work, who can use and should not use the method, as well as possible side effects. Note: In the section "Who can use implants?", it could also be mentioned that women who are not breastfeeding can start using implants at anytime.

- **Implanon: A Safe and Effective Modern Contraceptive Method**

This 16-page brochure from Cambodia discusses the key benefits and side effects of the Implanon implants. The information is organized in a question and answer format and includes the story of a satisfied client, mention of the need to use condoms for dual protection, as well as referral to Sun Quality Health Providers for additional information and services.

- **Safe, Effective and High-Quality Jadelle Implant**

Published in English and Myanmar (Burmese), this brochure presents information on Jadelle implants, such as method characteristics, benefits, and side effects.

Country Experiences



Family planning programs that offer long-acting methods can

learn from each other's experiences to help set up new programs, strengthen existing programs, and avoid potentially costly pitfalls. This section of the Implants Toolkit includes country-specific experiences and lessons learned that focus on many of the topics covered in the Toolkit,

including:

- Programmatic models & approaches to providing implants, including task sharing, mobile services, social franchising, dedicated long-acting method providers, and integrated service delivery
- Experiences with introducing implants, including a variety of approaches to training service providers

Have a suggested resource or comment about this section? Please visit our [feedback form](#).

Programmatic Models & Approaches



A number of program models can be used to deliver

implants. This section of the Toolkit shares different countries' experiences with a range of family planning program models and approaches to providing implants, including task sharing, mobile services, dedicated long-acting method providers, social franchising, and integrated service delivery.

Resources:

- **Increasing Access to Family Planning in Ghana Through Policy Change: Task-Sharing to Enable Auxiliary Nurses to Provide Contraceptive Implant Services**

This policy brief explains how Ghana was able to increase access to implants by enabling auxiliary nurses to provide those contraceptive services.

- **Clinical Social Franchising Case Study Series:
PSI/Tanzania Familia Network**

This case study documents the experiences in social franchising of the ?Familia? network of private health providers, implemented by Population Services International (PSI) in Tanzania.

- **ProFam Urban Outreach: A High Impact Model for Family
Planning (Mali)**

This case study describes PSI's efforts to increase Malian women's access to long acting reversible contraceptives (LARCs) by integrating family planning counseling and services with routine immunization services.

- **Scale-Up of Task-Shifting for Community-Based
Provision of Implanon**

The Integrated Family Health Program (IFHP) is a five-year USAID-funded program to promote an integrated model for strengthening maternal and child health, family planning (FP), and reproductive health services for rural and underserved populations in Ethiopia. Led by Pathfinder International and John Snow, Inc. in partnership with the Consortium of Reproductive Health Associations, IFHP has pursued scale-up of community-based provision of Implanon since 2009. Active in four regions of Ethiopia, IFHP's Implanon scale up efforts support the government in enabling underserved rural communities to access this long-acting family planning (LAFP) method at the village level through task-shifting to Ethiopia's health extension worker (HEW) cadre. In August 2011, the project completed the second year of its four-year timeline. This technical brief presents scale-up progress to date, and recommendations for future efforts.

- **Scaling Up Community-Based Service Delivery of
Implanon: The Integrated Family Health Program's
Experience Training Health Extension Workers**

This publication describes the experience of the USAID-funded Integrated Family Health Program, a partnership between Pathfinder International and John Snow, Inc., to train Health Extension Workers in Implanon Insertions as one of four pilot programs under the Ethiopia Federal Ministry of Health's Health Extension Program in order to improve availability of long acting family planning.

- **Promoting Hormonal Implants within a Range of Long-Acting and Permanent Methods: The Tanzania Experience**

Hormonal implants are proving to be increasingly popular among Tanzanian women, according to national-level service statistics at public-sector health facilities. The reasons for this popularity include the hormonal implant's convenience, ease of insertion, and long-lasting effectiveness. Another factor contributing to the implant's success is that the method is being provided in Tanzania primarily by nurses (in addition to doctors), which means that it can be offered at health centers and dispensaries. One of the challenges to increasing the availability of implants has been ensuring sufficient commodities to meet demand—an issue that many family planning programs face. This brief describes EngenderHealth's approach for supporting the Tanzanian Ministry of Health and Social Welfare (MOHSW) in introducing and expanding access to long-acting and permanent methods of contraception (LA/PMs), focusing specifically on challenges and lessons learned related to hormonal implants..

- **MSI Mobile Outreach Services: Retrospective evaluations from Ethiopia, Myanmar, Pakistan, Sierra Leone and Vietnam**

Over the last two decades, MSI has pioneered innovative approaches to reaching men and women with high quality contraceptive services. A promising model which reaches areas where traditional health services cannot reach is the use of mobile outreach health teams. The MSI outreach model generally consists of a team of nurses, healthcare assistants, counselors and a driver visiting rural, hard-to-reach areas and providing a range of high quality contraceptive services. In 2009, MSI provided services to over 1,200,000 men and women through its outreach services.

To ensure that MSI mobile outreach services are consistently providing high quality services for poor women living in rural settings, MSI conducted a retrospective cohort study among women fitted with IUDs or implants to measure aspects such as demographic characteristics of women attending outreach, their satisfaction, and reasons for discontinuation.

Experiences with Introducing Implants



The case studies and briefs in this section of the

Toolkit describe the efforts of countries around the world to pilot or scale up provision of contraceptive implants within their family planning programs. In some cases, programs switched from providing one type of implant to another-- for those looking to space or limit their pregnancies. These publications examine acceptability of implants in different settings, describe training approaches and program models, and share results and lessons learned, which can be applied in programs throughout the world looking to introduce, revitalize, or scale up implants services.

Resources:

- **Taking Family Planning to the Village: Using Mobile Outreach Services to Increase Access to Family Planning in Rural Togo**

This case study describes PSI/Togo's approach to providing a broad range of FP options, with a specific emphasis on implants and IUD, in underserved rural areas through mobile outreach services for family planning and includes a presentation of key findings, challenges and programming considerations from initial program implementation.

- **Acceptability of Sino-Implant (II) in Bangladesh: Final Report on a Prospective Study**

This report describes the results of a noncomparative prospective 12-month observational study that was conducted at 10 study sites in Bangladesh. The aim was to assess the acceptability and effectiveness of Sino-implant (II) among 595 women who had the device inserted in June and July 2011. The report presents data collected at baseline and at follow-up visits at three months, six months, and 12 months following insertion.

Among the reports recommendations were that Sino-Implant (II) should be introduced into the national family planning program, as it is safe and effective and acceptable to Bangladeshi women. At 12 months, there were no serious adverse events or pregnancies due to contraceptive failure, and 89% of women were continuing to use Sino-implant (II), clearly indicating its acceptability. With a per-unit wholesale cost of approximately \$8, Sino-implant (II) should prove a good option for the Bangladesh family planning program.

- **Addressing Unmet Need for Long Acting Family Planning in Ethiopia - Uptake of Implanon and Characteristics of Users**

Objective: To describe women who accept Implanon from community health workers in Ethiopia and to assess whether community-based provision addresses unmet need for contraception.

Methods: Women who accepted Implanon during Implanon training in 4 regions of Ethiopia were asked about their characteristics and use of family planning. They were compared with clients accepting other methods and with women with unmet need nationally. Differences between groups were tested with chi-square, Fischer's Exact, and t-tests as appropriate.

Results: Implanon acceptors were older (28.3 vs. 26.7 years) and less educated (1.7 vs. 2.3 years) than clients who selected other methods. Almost one quarter (22.9%) of all clients had never used contraception before and this was higher among clients who chose Implanon (23.1% vs. 16.4%, $p=0.04$). Acceptors were also less likely to be using contraception (70.8% vs. 77.3%, $p<0.05$) but all clients interviewed were more likely to be using contraception than the rural population (17%). Clients who accepted Implanon were younger (1.5 years) but more educated (29.3% vs 16.5% completed primary education) than women with unmet need for contraception nationally.

Conclusion: Provision of Implanon through community-health workers at the community-level is effective in reaching those women who have greatest need for contraception.

- **Implanon Insertion Training Evaluation Report**

This report describes an evaluation by FHI 360, through the Program Research for Strengthening Services (PROGRESS) project, of a training to teach health extension workers in Ethiopia how to insert the one-rod implant Implanon. The training was conducted by the Integrated Family Health Program (IFHP) and the Ethiopian Public Health Association (EPHA) as part of the Federal Ministry of Health's effort to scale up the provision of Implanon in Ethiopia.

- **Introducing the Contraceptive Sino-implant (II)/Zarin in Sierra Leone**

In 2008, Marie Stopes Sierra Leone and BlueStar Sierra Leone, working in conjunction with the Ministry of Health Services, began a national expansion programme to provide contraceptive access to women in every chiefdom in the country. Central to the expansion plan was being able to offer all women an increased range of contraceptives to choose from when they desire to prevent or delay a pregnancy. Encouraged by demand for implants in other African countries, MSSL set about registering a contraceptive implant in conjunction with a range of partners including, the Ministry of Health Services, the Pharmaceutical Regulation Board, Pharm Access Africa Limited, Family Health International and the United Nations Fund for Population. The Zarin implant was selected thanks to the relative cost compared with other implants (see below) and its high quality. This case study gives an overview of the steps taken to register, introduce, and create demand for the product, as well as lessons learned throughout the process.

- **Marie Stopes International/Zambia Introduces Long-term FP in Remote Parts of Zambia**

Marie Stopes International/Zambia (MSIZ) is supplementing the government's efforts in the provision of family planning services in rural areas of Zambia. Both Rural Centres in Chiyawa and Sichili have not been offering long-acting methods because of lack of family planning training, supplies and instruments. MSIZ is the first organization to introduce long-acting family planning methods in both areas. MSIZ donated family planning instruments and supplies to the clinics and trained the health workers to provide long-acting methods. They also oriented community health workers to raise awareness in their communities about their contraceptive choices. "The response was so overwhelming," said Pamela Nyirenda, MSIZ Programme Assistant. "The only hindrance was lack of power supply in the area. The people in the communities now have an opportunity to choose what method they want unlike in the past where everyone was subjected to taking the short-term methods which were also in short supply." MSIZ has also been working throughout 2009 with Family Health International and Population Services International in Zambia to have Sino-implant (II) registered, which

was achieved in January. MSIZ will work with sites such as these to introduce Sino-implant (II) which has a disposable trocar and more appropriate for resource-poor settings.

Source URL: <https://www.k4health.org/toolkits/implants>