Injectables Toolkit

Community-Based Access to Injectables | Subcutaneous DMPA (depo-subQ)

Around the world, use of injectable contraceptives is rising dramatically—more than 40 million women worldwide currently rely on injectables. The increasing demand for injectable contraception challenges programs to expand access to and improve the quality of services. Expanding access to injectable contraceptives with high-quality services helps fulfill women’s right to contraceptive choice and contributes to sustainable family planning programs.

This Toolkit includes information about both progestin-only injectables and combined injectables for health policy makers, program managers, and service providers. Expanding access to and use of injectable contraceptives requires a holistic approach including:

- Accurate information
- Up-to-date policies and guidelines
- Quality training, supervision, and services
- Effective communication and marketing
- Proper logistics

In addition, this Toolkit provides information on community-based access to injectables, an effective strategy for increasing access to injectable contraceptives. You can also learn more about Subcutaneous DMPA (depo-subQ)—a lower-dose formulation of DMPA that is injected under the skin rather than in the muscle.

Learn more about Hormonal Methods of Contraception. Take the Global Health eLearning course (registration required).

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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.

Purpose and Audiences of this Toolkit

This Toolkit contains resources selected by K4Health staff to improve access to and quality of injectable contraceptive services. Audiences include:

- **Policy makers** will find research and information to help set national guidelines about injectables and plan for future changes in service delivery.
- **Program managers** will find information and job aids to help them develop a strategy to respond to the increasing demand for injectables.
- **Service providers** will find information and job aids to help them counsel about injectables, give safe injections, and safely dispose of used equipment.
- **Logistics managers** will find tools and resources to help maintain a steady flow of supplies and to respond quickly if shortages occur.
- **Communication professionals** can use the toolkit resources to explore strategies, media, and messages about injectables for potential users, current users, their partners, and communities.
- **Trainers** can review the latest training techniques and curricula for injectables.
- **Researchers** can create customized searches of scientific articles, photos, and other materials relating to injectable contraceptives.

Types of Resources in this Toolkit

This Toolkit provides a one-stop source for reliable, relevant, and usable information pertaining to injectable contraceptives. The resources were selected with health policy makers, program managers, and service providers in mind. For example, the Toolkit contains:

- Up-to-date background and reference materials to design evidence-based, state-of-the-art programs.
- Job aids and other tools to increase effectiveness and quality of program activities and services.
- Powerpoint presentations and other quality information resources that can be downloaded and adapted to better serve local circumstances and languages.
- Various publication formats including books, manuals, briefs, case studies, fact sheets, newsletters, pamphlets, posters, project reports, reviews, teaching and training materials, photos, tools, and job aids.
How to Use this Toolkit

To browse the content of this Toolkit, use the navigation to view resources related to key program topics. You can also use the search box if you know what you are looking for or have a specific item in mind.

Resources in this Toolkit can be downloaded and adapted for teaching and training, research, advocacy, policymaking, and program management purposes. Some of the tools are readily available in adaptable format (for example, Microsoft PowerPoint presentations or Word documents). 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.

Who Developed this Toolkit?

K4Health staff selected the resources based on a wide search for relevant published and grey literature from around the world.

Essential Knowledge

The Essential Knowledge section of the Injectables Toolkit provides policy makers, program managers, and service providers with key background and reference materials on injectable contraceptives, including fact sheets, research
reports, and information briefs. You can find information about both progestin-only injectables and combined injectables.

**Key Points about Injectable Contraceptives:**

- Injectable contraceptives are reversible, discreet, and highly effective, with a typical pregnancy rate of about 3% during the first year of use. Effectiveness depends on receiving reinjections on time.
- Injectable contraceptives do not prevent transmission of STIs including HIV. Condoms should be used along with injectables to prevent STI/HIV transmission.
- Fertility returns after discontinuing use of injectables, but it can be delayed several months.
- Common side effects of injectables include bleeding changes and gradual weight gain.

Have a suggested resource or comment about this section? Please visit our feedback form.

**Resources:**

- **Sayana® Press Fact Sheets**
  
  These fact sheets provide in-depth clinical information about Sayana® Press.

- **The Shot/ Depo-Provera Fact Sheet**
  
  This fact sheet contains information about Depo-Provera (DMPA) for non-medical professionals.

- **Feasibility of Administering Sayana® Press in Clinics and Communities**
  
  This operational assessment of Sayana® Press in Senegal examines the extent to which Sayana® Press facilitates the logistics of managing and administering injectable contraception and assesses whether providers in Senegal find benefits in this new presentation.

- **IMAP Brief Statement Comparing Injectable Contraceptives: Depot Medroxyprogesterone Acetate (DMPA) Versus Norethisterone Enanthate (NET-EN)**
DMPA and NET-EN are both progestogen-only injectable contraceptives. DMPA is the most widely used progestogen-only injectable and is also known as Depo, Depo Provera, Megestron and Petogen. NET-EN is also known as norethindrone enanthate, Noristerat and Syngestal. They are both available as an intramuscular injection, and DMPA is also available in some countries as a subcutaneous formulation (known as depo-subcu or Sayana Press).

Differences and recommendations are described in the report.

**Policies and Guidelines**

Many facets of health policy affect access to family planning services, including contraceptive pricing, security, funding, distribution, availability, and eligibility. In turn, access to quality family planning services and to a range of contraceptive options, including injectable contraceptives, affects a country profoundly by:

- Influencing the country’s rates of maternal and child morbidity and mortality
- Rates of mother-to-child transmission of HIV
- Gender equity and related social norms
- Economic state

Despite the critical role of policy in meeting populations’ contraceptive needs, outdated health policies and guidelines, provider bias, and a lack of knowledge about current medical eligibility requirements for injectable contraceptive use are common barriers to contraceptive access in many parts of the world.
Countries establish service delivery policies and guidelines on the provision and use of contraceptive methods to help programs and service providers provide contraceptives safely and effectively. The Policies & Guidelines section of the Injectables Toolkit provides the most recent international guidelines and recommendations from the World Health Organization related to family planning, including guidance specific to injectable contraceptives. Guidance documents from other international and national sources are also included. Programs can use these resources as a reference when periodically updating their own national guidelines.

Have a suggested resource or comment about this section? Please visit our feedback form.

Resources:

- **Family Planning: A Global Handbook for Providers**


  The book was prepared through a unique collaboration between editorial staff at the Johns Hopkins Bloomberg School of Public Health and technical experts from the World Health Organization (WHO), the United States Agency for International Development (USAID), and over 30 other organizations around the world (see Collaborating and Contributing Organizations). It is published by the Knowledge for Health (K4Health) Project, which is led by the Center for Communication Programs at the Johns Hopkins Bloomberg School of Public Health.

  The 2018 edition contains new recommendations from WHO, including guidance on topics such as intimate partner violence, task sharing, and serving clients with disabilities, a new section on how family planning providers should respect, protect, and fulfill the human rights of their clients, and ew job aids on whether to use the pregnancy checklist or a pregnancy test and on counseling women who want progestin-only injectables where HIV risk is high.

  Editions of the handbook are available on the web site in Arabic, Chichewa, Farsi, French, Hindi, Portuguese, Romanian, Russian, Spanish, Swahili, and Tajik.

- **How to Introduce and Scale Up Sayana Press (DMPA-SC in Uniject): Practical guidance from PATH based on lessons learned during pilot introduction**

  This document was created to support ministry of health and nongovernmental implementing
partners as they develop strategies and activities to introduce and scale up Sayana Press (generic: DMPA-SC in Uniject) in the hopes of expanding the contraceptive method mix and increasing access. The publication provides practical guidance based on results, evidence, and learning from the pilot introductions of Sayana Press in four countries in Africa.

Each section describes PATH’s experience during the pilot introductions and includes results, introduction tips and lessons learned, case studies, recommendations, and practical resources. This is an introduction planning resource most applicable to countries that have already decided to introduce Sayana Press; the guide does not cover the decision-making process itself.

- **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.

- **Expand Community-Based Distribution of Injectable Contraceptives in Kwara State, Nigeria: A Call to Action for Policymakers**

This policy brief advocates for the expansion of community-based distribution of injectable contraceptives in Kwara State, Nigeria and is targeted towards policymakers.

- **Hormonal Contraceptive Methods for Women at High Risk of HIV and Living with HIV: 2014 Guidance Statement**

This statement provides recommendations concerning the use of hormonal contraceptive
Training

As demand for injectable contraceptives increases, programs need more health care workers who can provide injectables. With proper training, many cadres of health professionals, including nurses, auxiliary nurse-midwives, physicians, pharmacists, and community health workers, can give contraceptive injections safely.

A successful training workshop for contraceptive providers requires careful planning and preparation. Organizers should invite participants who can then provide cascade training to other contraceptive providers working in clinical and community-based settings. Planners and facilitators should understand the learning needs of the participants and adapt training materials and methods accordingly. Supervisors should follow-up with supportive supervision after the training sessions to ensure quality service provision. Programs should conduct refresher training sessions once the participants have had a chance to apply their new knowledge and skills in their jobs.

The Training section of the Injectables Toolkit includes a variety of up-to-date training resources, such as job aids, training models specific to injectables, and competency-based curricula. These training materials cover a range of topics, including:

- Screening clients for medical eligibility for injectable contraceptive use
- Counseling clients on contraceptive options, correct use of injectable contraceptives, how to manage side effects, and other related issues
- Expanding contraceptive access through community-based family planning services
- Designing, implementing, and evaluating training for contraceptive service providers, supervisors, and program managers
- Giving safe injections and managing waste

For other related materials, including family planning screening and counseling tools, visit the Service Delivery
section of the Toolkit.

Have a suggested resource or comment about this section? Please visit our feedback form.

Resources:

- **Sayana® Press Training Materials**

  These training materials focus on the administration of the injectable contraceptive Sayana® Press for facility- and community-based providers, and were developed as part of the Sayana Press pilot introduction and evaluation project. For the original Word and PowerPoint files to customize for your training program, please email sayanapress@path.org.

- **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.

- **Global Health eLearning Center, Hormonal Methods of Contraception E-learning Course**

  This e-learning course provides information that program managers and clinic staff can use to improve the quality of care in providing hormonal contraceptive methods. It covers information on reducing medical barriers, ensuring safe use, and supporting continuing users of hormonal methods, including injectables. To take the course, you must first register for free on the Global Health eLearning Center site. After logging in, click on Courses in the left-hand menu and then click on Hormonal Methods of Contraception from the list of course offerings.
Ensuring high-quality services is vital to any family planning program that provides injectable contraceptives. A client considering starting a new contraceptive method needs to be informed of the most appropriate contraceptive options and then carefully screened to ensure she is medically eligible to use her chosen method. Injectable contraceptives are safe and suitable for nearly all women, including women who have or have not had children; married and unmarried women; and women of any age, including adolescents and women over 40 years old.

If a woman chooses injectables, her health care provider needs to counsel her about potential side effects and provide strategies to help her continue using the method effectively. For example, providers must be able to carefully explain the grace period before and after a woman’s scheduled reinjection date during which she can receive a reinjection and remain protected from unintended pregnancy. Counseling women about possible bleeding changes and other side effects of injectables is an important part of providing the method. Bleeding changes are among the most common method-related reasons for women discontinuing hormonal contraceptive methods. In addition to determining medical eligibility and counseling clients on injectables, service providers must also know how to give injections safely and how to properly store and manage injectables.

The Service Delivery section of the Injectables Toolkit houses counseling tools, job aids, and reference materials to help service providers perform the following tasks well:

- **Counsel** clients on a range of contraceptive options.
- **Screen** clients to determine whether they are medically eligible to use injectable contraceptives.
- Counter myths and misinformation about injectables with effective and accurate counseling messages.
• Instruct clients on the importance of returning on time for reinjections and on what to do if they miss their scheduled reinjection appointment.

Have a suggested resource or comment about this section? Please visit our feedback form.

**Counseling**

Effective family planning counseling is essential to contraceptive continuation. Providers of injectable contraception need to counsel their clients on the side effects and health benefits of injectables and other contraceptive methods so that clients can make informed family planning decisions. Family planning providers should also offer their clients strategies to initiate and continue using their methods effectively. Many providers will also need to address common myths and misconceptions about particular contraceptive methods.

This section of the Toolkit includes counseling tools to help family planning providers communicate effectively with their clients so that their clients receive an appropriate contraceptive method and understand how to initiate the method, continue use, manage side effects, and seek support if needed.

**Resources:**

• **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
Cue Cards for Counseling Adolescents on Contraception

The set of cue cards is designed to help a range of community- and facility-based providers to counsel adolescents and young people on their contraceptive options. The cue cards address: combined oral contraceptives, progestin-only pills, emergency contraception, male and female condoms, injectables, implants, intrauterine devices (IUDs), and the lactational amenorrhea method (LAM). The provider can use the front side of the cards to give information about all available options and, after the adolescent chooses a method, they turn to the back side to give specific instruction on use.

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.

Target Product Profile for a Longer-acting Injectable Contraceptive

This document outlines the desired target and the minimally acceptable target for various characteristics including: intended use, target population, contraindications, effectiveness, administration, dosage schedule, return to fertility, side effects, storage conditions, procurement price, and infrastructure.

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.

• **Do You Know Your Family Planning Choices? (Wall Chart)**

"Do You Know Your Family planning Choices? Your family planning provider can help. Please ask!" replaces the old wall chart by the same name and will continue to serve as a tool to comply with a requirement of the Tiarht Amendment. Available in English, French, Spanish, and Portuguese.

• **Comparing Effectiveness of Family Planning Methods**

This 1-page chart compares the effectiveness of various family planning methods, including injectables, and has a few key messages on how to make ones method more effective which could be useful to providers and program managers alike.

**Screening**

Once a family planning client has been informed of her contraceptive options, she must be carefully screened to ensure she is medically eligible to use her chosen method. This section of the Toolkit includes screening tools and job aids to assist family planning providers in determining their clients’ medical eligibilty for injectable contraceptives. These job aids are also helpful for training providers on service provision and improving communication between providers and clients.

**Resources:**
Family Planning: A Global Handbook for Providers

Evidence-based Guidance Developed Through Worldwide Collaboration Family Planning: A Global Handbook for Providers offers clinic-based health care professionals in developing countries the latest guidance on providing contraceptive methods. Chapters 4 and 5 focus on injectable contraceptives.

The book was prepared through a unique collaboration between editorial staff at the Johns Hopkins Bloomberg School of Public Health and technical experts from the World Health Organization (WHO), the United States Agency for International Development (USAID), and over 30 other organizations around the world (see Collaborating and Contributing Organizations). It is published by the Knowledge for Health (K4Health) Project, which is led by the Center for Communication Programs at the Johns Hopkins Bloomberg School of Public Health.

The 2018 edition contains new recommendations from WHO, including guidance on topics such as intimate partner violence, task sharing, and serving clients with disabilities, a new section on how family planning providers should respect, protect, and fulfill the human rights of their clients, and new job aids on whether to use the pregnancy checklist or a pregnancy test and on counseling women who want progestin-only injectables where HIV risk is high.

Editions of the handbook are available on the web site in Arabic, Chichewa, Farsi, French, Hindi, Portuguese, Romanian, Russian, Spanish, Swahili, and Tajik.

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. WHO periodically revises the criteria in response to recommendations made by an expert working group in response to new research findings.
FHI 360 created a quick reference guide, in the form of a chart, that summarizes the WHO medical eligibility criteria for combined oral contraceptives, the injectable contraceptive depot-medroxyprogesterone acetate (DMPA), progestin-only implants, copper intrauterine devices or a levonorgestrel intrauterine system (LNG-IUS). The 2016 version of the Medical Eligibility Criteria Quick Reference Chart includes a complete list of all conditions that 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.

- **Checklist for Screening Clients Who Want to Initiate DMPA (or NET-EN)**

  The DMPA/NET-EN checklist consists of questions designed to identify medical conditions that would prevent safe DMPA/NET-EN use or require further screening and assess whether a client might be pregnant. It also provides guidance and directions based on clients' responses. The English and French versions of the checklist reflect the latest medical eligibility criteria published in 2015 by the World Health Organization (WHO) and include guidance for providers whose clients may be eligible for emergency contraception. The checklist is also available in versions adapted for specific countries.

- **How to be Reasonably Sure a Client is Not Pregnant**

  The Pregnancy Checklist contains a series of questions to rule out pregnancy. These questions are based on criteria established by the World Health Organization (WHO) for determining with reasonable certainty that a woman is not pregnant.

- **Target Product Profile for a Longer-acting Injectable Contraceptive**
This document outlines the desired target and the minimally acceptable target for various characteristics including: intended use, target population, contraindications, effectiveness, administration, dosage schedule, return to fertility, side effects, storage conditions, procurement price, and infrastructure.

Program Management

In order to meet the increasing demand for injectable contraceptives with high-quality services, family planning programs need to be managed efficiently. The Program Management section of the Injectables Toolkit includes information and tools to help family planning program managers fulfill the essential management functions of an injectables program.

Continual quality improvement is key to effective family planning programs that offer injectables. Supportive supervision is essential to high-quality programming and safe injection practices, as is community and staff involvement in assessing and improving health services.

These resources will help program managers develop quality programs and strengthen existing programs by increasing their efficiency to meet rising demand for injectables. For information on community-based access to injectables, please visit the Community-Based Access to Injectable Contraceptives Toolkit.

Do you have a comment about this section or would you like to suggest a new resource or management topic? Please visit our feedback form.

Resources:

The *SEED*? Assessment Guide for Family Planning Programming is a comprehensive, easy-to-use tool to help program managers and staff determine strengths and weaknesses in family planning programs by identifying programmatic gaps that require further investment or more in-depth assessment prior to (re)designing programmatic interventions. The guide is primarily intended for use by high- or mid-level FP program staff in technical organizations, ministries of health, or donor agencies, though others working in the area of sexual and reproductive health could also find it useful.

**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.

**Logistics**

More than twice as many women are using injectable contraceptives today as a decade ago, and the numbers keep growing. Widespread and consistent access to contraceptives rests on effective organization and management of the supply chain and correct assessments of supply and demand. Many logistics guides emphasize that an effective supply chain must ensure the "six rights" for product distribution:

1. The right product
2. In the right quantity
3. In the right condition
4. In the right place
5. At the right time
6. For the right cost

Without these “rights,” programs cannot operate; in other words, “no product, no program.” Logistics management is complex, as contraceptive supply chains consist of many organizations, procedures, and people who must work together to accurately forecast demand and then order and deliver the appropriate quantity of contraceptives.

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

For general family planning resources related to procurement, logistics and supply chain management, check out our Family Planning Logistics Toolkit.

Do you have a comment about this section or would you like to suggest a new resource or management topic? Please visit our feedback form.

**Resources:**

- **Target Product Profile for a Longer-acting Injectable Contraceptive**

  This document outlines the desired target and the minimally acceptable target for various characteristics including: intended use, target population, contraindications, effectiveness, administration, dosage schedule, return to fertility, side effects, storage conditions, procurement price, and infrastructure.

- **IPPF Directory of Hormonal Contraceptives**

  This database provides information about hormonal contraceptive brands, composition, manufacturers, types, and the countries where they are available.

**Communication & Advocacy**
Effective communication activities are key to raising awareness about and acceptance of injectable contraceptives, motivating individuals to seek injectables, and helping clients to successfully use injectables.

Health Communication

Health communication encompasses information, education, and communication (IEC) and behavior change communication (BCC) efforts involve working with individuals, communities, and societies to develop context-appropriate, multilevel communication strategies to promote healthful behaviors such as the use of injectable contraceptives for family planning. IEC and BCC channels include the mass media; interpersonal communication, such as provider-client or peer-to-peer counseling; and community-based channels, such as household outreach, street theater, or local radio. Provision of a supportive environment that will enable people to access integrated services and sustain safer behaviors is essential to the success of any health communication effort.

Advocacy

Family planning advocates aim to influence reproductive health or family planning-related attitudes, laws, policies, or practices, usually focusing their efforts on decision makers. Advocacy actions can include, but are not limited to, documenting and sharing the effects of a problem or a policy decision; developing relationships with key decision makers; participating in forums, hearings, and key meetings; and using social or mass media to convey messages.

The Communication & Advocacy section of the Injectables Toolkit contains information and tools to help policy makers, program managers, and family planning promoters promote healthful behaviors such as the use of injectable contraceptives and other modern contraceptive methods to limit or space births and to reach women who are reluctant to try injectables because they are misinformed or need a trusted source of information.

- To access general family planning advocacy materials, please visit the Family Planning Advocacy Toolkit.
- For guidance on advocating for community-based access to injectables, please visit the Advocacy section of the Community-Based Access to Injectables Toolkit.
- Please visit the Service Delivery tab for counseling tools and job aids to enhance provider-client communication and dispel misinformation about injectables.

Do you have a comment about this section or would you like to suggest a new resource? Please
visit our feedback form.

Resources:

- **Sayana® Press Fact Sheets**
  
  These fact sheets provide in-depth clinical information about Sayana® Press.

- **Advocacy Pack for Subcutaneous DMPA**
  
  New advocacy resources to increase contraceptive access and choice with subcutaneous DMPA
  
  The Advocacy Pack for Subcutaneous DMPA (2017), developed by PATH in collaboration with international and national family planning organizations, equips advocates with information, data, and tools to support expanded access to this method, as part of a wide range of contraceptive options. Subcutaneous DMPA (DMPA-SC or Sayana® Press) is an innovative and easy-to-use injectable that is transforming contraceptive access, use, and choice for women and adolescent girls. The Advocacy Pack offers evidence-based, unbranded, customizable tools for advocates to use in their own strategy development and helpful handouts on the product to inform and influence decision-makers and others. It is available in English and in French.

- **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.
Strategic Communication Framework for Hormonal Contraceptive Methods and Potential HIV-Related Risks

The Health Communication Capacity Collaborative (HC3) developed this Strategic Communication Framework as a tool to assist country stakeholders in the adaptation and dissemination of information pertaining to hormonal contraception and HIV risk at regional, national, and local levels.

• Expand Community-Based Distribution of Injectable Contraceptives in Kwara State, Nigeria: A Call to Action for Policymakers

This policy brief advocates for the expansion of community-based distribution of injectable contraceptives in Kwara State, Nigeria and is targeted towards policymakers.

• Do You Know Your Family Planning Choices? (Wall Chart)

"Do You Know Your Family planning Choices? Your family planning provider can help. Please ask!" replaces the old wall chart by the same name and will continue to serve as a tool to comply with a requirement of the Tiarht Amendment. Available in English, French, Spanish, and Portuguese.

• Social and Behavior Change Communication (SBCC): Capacity Assessment Tool

C-Change developed the Social and Behavior Change Communication Capacity Assessment Tool (SBCC-CAT) in two versions—for use with organizations (to assess program and staff capacity in SBCC), and with donors and networks (to assess their own capacity and that of the partners they support and manage). Together with a facilitator, organizations can use this tool to determine their competencies in five areas:

1. SBCC Situation Analysis
2. SBCC Strategy Development
3. SBCC Materials Development
4. SBCC Implementation, and
5. SBCC Monitoring and Evaluation (M&E)

The tool follows a participatory three-stage process, ending with a discussion around findings and the development of a capacity strengthening plan. It can be used by any organization interested in improving the design, implementation and M&E of its health and development SBCC programs. By using this tool, donors and program planners can identify the strengths and weaknesses of current programs and define activities to strengthen and refocus programs to improve the overall quality of their SBCC efforts.

Country Experiences

The Country Experiences section of the Injectables Toolkit includes case studies and other publications describing country experiences with programmatic topics included in the toolkit. These include:

- Assessing demand for injectables and feasibility of introducing injectables in a particular country;
- Expanding access to injectables using a variety of service delivery models;
- Removing barriers to use of injectables.

These experiences will inform health policy makers, program managers, and service providers of the strategies, challenges, and lessons learned from initiatives that address the use of injectables within family planning programs.

Many reports are available that discuss the implementation of community-based distribution of injectables, as this approach has been found to be a safe and effective means for increasing accessibility of injectables and decreasing unmet need for family planning. To view these materials, please visit the Country Experiences section of the Community-Based Access to Injectable Contraceptives Toolkit.

Do you have a comment about this section or would you like to suggest a new resource or management topic? Please visit our feedback form.

Resources:
Research and Recommendations on the Delivery of Injectable Contraceptive Services by Patent Medicine Vendors in Rural Nigeria

This case study describes how one study explored the role of patent medicine vendors (PMVs) in delivering injectable contraceptives in four rural local government areas in Oyo state: Akinyele, Egbeda, Ido, and Ona-Ara.

Feasibility of Administering Sayana® Press in Clinics and Communities

This operational assessment of Sayana® Press in Senegal examines the extent to which Sayana® Press facilitates the logistics of managing and administering injectable contraception and assesses whether providers in Senegal find benefits in this new presentation.

Injectable contraceptives: Perspectives and experiences of women and health care providers in India

This report is the result of a study, conducted in 2011, that aimed to shed light on the feasibility and acceptability of making injectable contraceptives more widely available to women in India. It synthesizes the perspectives and experiences obtained from three study components: a retrospective survey of injectable contraceptive users, a survey comprising exit interviews with new contraceptive method adopters and in-depth interviews with health care providers. The study was located in the facilities and among the clients and health care providers of a range of reproductive health NGOs, including the Family Planning Association of India, Janani, Parivar Seva Sanstha and Population Health Services (India). The facilities were drawn from both urban and peri-urban areas of several states, namely, Bihar, Delhi, Jharkhand, Madhya Pradesh and Maharashtra, and were selected purposively on the basis of the volume of injectable contraceptive users served by each clinic in the two years preceding the study.

Community-Based Distribution of Injectable
Contraceptives: Introduction Strategies in Four Sub-Saharan African Countries

This report describes how community-based distribution of injectable contraceptives was introduced in Uganda, Madagascar, Nigeria and Kenya. It focuses on the lessons that were learned regarding: advocacy, choosing the setting, securing resources, training, ensuring quality, commodity management and process and outcome documentation.

- New Policy Allows Community Health Extension Workers to Provide Injectable Contraceptives in Communities

This brief describes a policy enacted by the Nigeria National Council on Health (NCH) that approved community health extension workers (CHEWs) to provide injectable contraceptives in communities and encouraged the Nigeria state Ministries of Health to scale up this practice.

Country Experiences with Subcutaneous DMPA (depo-subQ)

Introduction of depo-subQ in Uniject provides opportunities to both strengthen clinic injection services and extend injectable contraceptive delivery safely and effectively beyond the clinic. The publications available in this section of the toolkit share findings and recommendations for offering depo-subQ based on in-country assessments and experiences.

For more information on depo-subQ, please visit the main depo-subQ in Uniject page within this toolkit.

Resources:

- Strategies, Approaches and Tools Used to Introduce Next Generation Injectable Contraceptives in Resource Poor
Settings: Workshop Report Lessons Learned From Early DMPA-SC Programming

Uganda arguably has the foremost experience of rolling out DMPA-SC through its pilot introduction efforts that began in 2014 under the coordination of PATH. The country has seen tremendous success in distributing the product through CHWs and in piloting self-injection by women. As regulatory approval of DMPA-SC is granted in more countries, there is an opportunity to apply lessons from early adopter countries, such as Uganda, in order to ensure effective and efficient product introduction in those places. Towards this end, three service delivery organisations, International Planned Parenthood Federation (IPPF), Marie Stopes International (MSI) and Population Services International (PSI), held a joint operational learning workshop in Uganda, in June 2017, which was attended by 20 participants from 14 organisations and 11 countries, through the support of USAID. The aim of this workshop was to provide select country programmes and member associations with an immersive opportunity to learn from Uganda’s experience as they begin to incorporate DMPA-SC into their own services. This report summarises programming considerations, lessons learned and tips for implementation based on the experiences in Uganda and on global issues affecting DMPA-SC programming, in addition to the current status of DMPA-SC programming and future plans of workshop participants from MSI, PSI, and IPPF.

Expanding Contraceptive Service: Delivery-Community-Based Distribution of Injectable Contraceptives through CHWs in Mozambique

A safety and feasibility assessment of a community based distribution program of DMPA (Depo Medroxy Progesterone Acetate) in two districts in Mozambique. The study explores the effectiveness of training two groups of community-based agents, Agentes Polivalentes Elementares (APEs) and traditional birth attendants (TBAs), to administer DMPA.

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