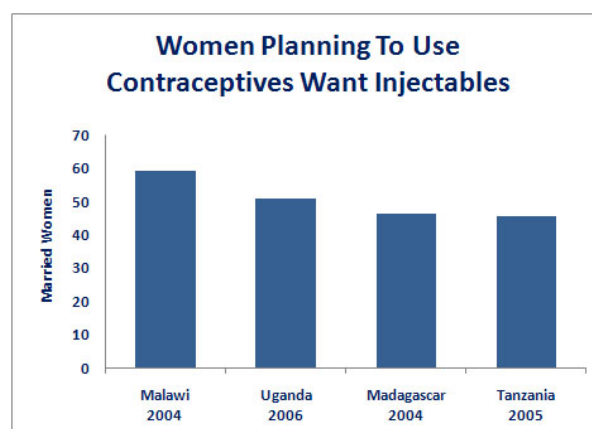


Taking Injectable Contraceptives To Villages

Injectables are Popular

Demand for injectable contraceptives, such as Depo-Provera, often called DMPA, increased rapidly over the past decade.¹ Injectables are an effective, low-cost, and safe family planning option that prevent unintended pregnancy and improve maternal health. Many women living in rural areas do not have access to injectables, which are often found only in clinics and hospitals.

Community-based distribution of injectables will increase access to and meet demand for family planning. Studies have shown that trained community health workers (CHWs) can safely provide injectables to women in underserved areas.²



Village Health Team Distribution is Safe

An expert review of scientific and programmatic evidence found that in community-based distribution programs worldwide, trained CHWs can screen clients effectively, provide injections safely, and counsel on side effects appropriately.² The review urges governments "...to support the introduction, continuation, and scale-up of community-based provision of progestin-only injectable contraceptives, especially DMPA."²

"(Evaluations) of injection safety by community-based providers demonstrate a high level of performance among these workers."

WHO, USAID, FHI³

Uganda Experience

- Injectables are popular. Nearly 60% of women in a pilot study for community-based distribution of injectables in Uganda were new users or previous users not currently using contraception.⁴
- Provision of injectables by paramedical personnel in Village Health Teams (VHTs) is safe. In Nakasongola District, no serious injection-related problems occurred when CHWs provided injectables to women, and the level of safety was similar to that of nurses providing injections in clinics.⁵

What Can Be Done

- ◆ Support training and supervision of VHTs to enable them to provide injectable contraceptives.
- ◆ Develop scale up strategy for VHTs to provide injectables in other districts of Uganda.
- ◆ Establish a task force to oversee the scale up strategy.

Sources

- ¹ Macro International Inc. MEASURE DHS STATcompiler. <http://www.measuredhs.com>, accessed 25 May 2010.
- ² World Health Organization, USAID, and Family Health International (FHI). Community-Based Health Workers Can Safely and Effectively Administer Injectable Contraceptives: Conclusions from a Technical Consultation, Research Triangle Park (NC): FHI; 2010.
- ³ Malarcher, S. on behalf of World Health Organization, USAID, and Family Health International. A Review of the Evidence Developed for a Technical Consultation on Expanding Access to Injectable Contraception, June 2009.
- ⁴ Family Health International. Scaling Up Community-based Access to Injectable Contraceptives in Uganda: Lessons Learned from Private and Public Sector Implementation, Uganda and Research Triangle Park (NC): FHI; 2009.
- ⁵ Stanback J, Mbonye AK, Bekiita, M. Contraceptive injections by community health workers in Uganda: a nonrandomized community trial. Bulletin of the World Health Organization, 2007; 85:768–773.

Other Resources

K4Health. Injectables Toolkit. (<http://www.k4health.org/toolkits/injectables>)

Family Health International. Family Health Research, Volume 1, Issue 2. Research Triangle Park (NC): FHI, June 2007. (http://www.fhi.org/en/RH/Pubs/fhr/v1_2/article2.htm)

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