

Increasing Access to Family Planning Outside the Clinic Walls: DMPA Provision by Community Health Workers in Ethiopia

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³Venture Strategies Innovations



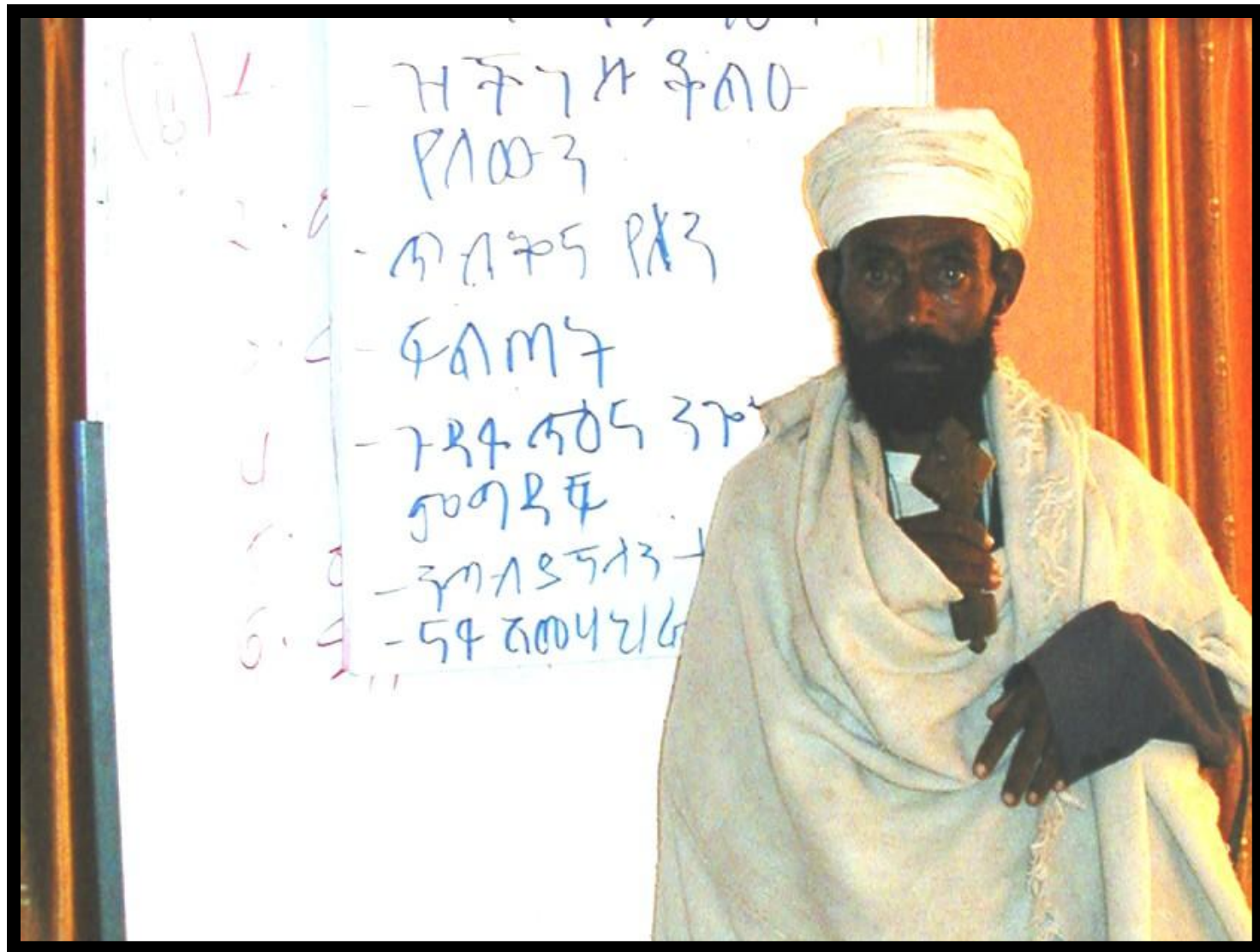
Contraceptive Prevalence in Ethiopia

- ❖ High rates of unmet need for contraception (34%)
- ❖ Only 11% of rural women are using modern contraception
- ❖ Women in Ethiopia prefer injectable contraceptives
- ❖ Low CPR in rural areas partially due to limited access to health facilities



Community-based distribution (CBD) of family planning

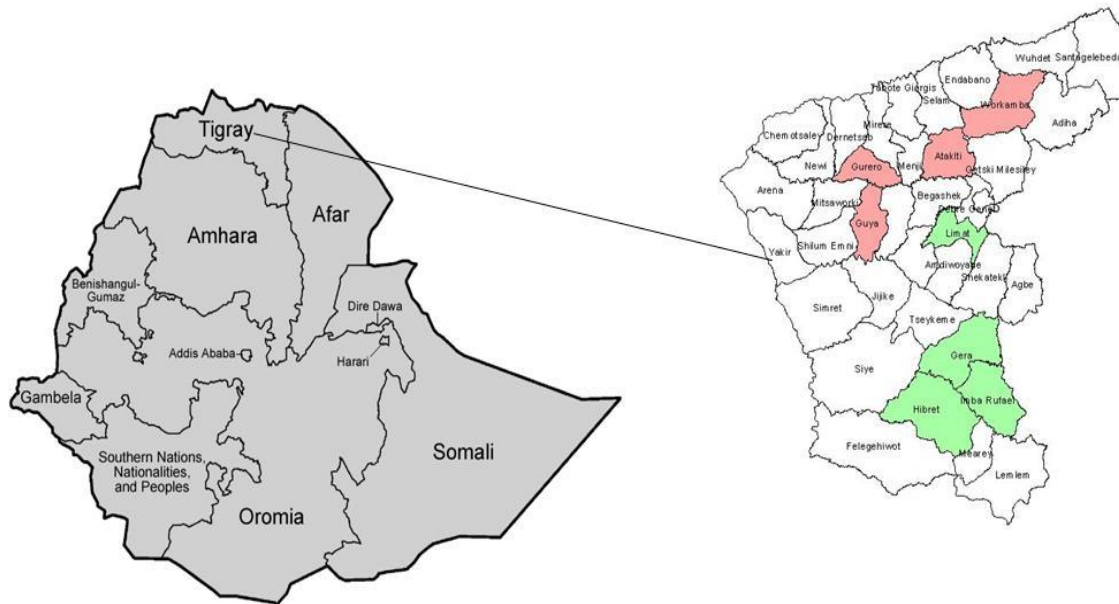
- CBD of family planning has historically been an effective model to increase uptake of modern family planning methods
- In Ethiopia, Health Extension Workers (HEWs) are low-level government health workers who staff rural health posts
- Community-based reproductive health agents (CBRHAs) are mobile community volunteers limited to distributing condoms and pills



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Study Objectives

- To demonstrate ability of Community-based Reproductive Health Agents (CBRHAs) in Tigray, Ethiopia to distribute injectable contraceptives as well as a control group of low-level public providers – Health Extension Workers (HEWs)
- To increase contraceptive prevalence by increasing DMPA availability through community-based distribution

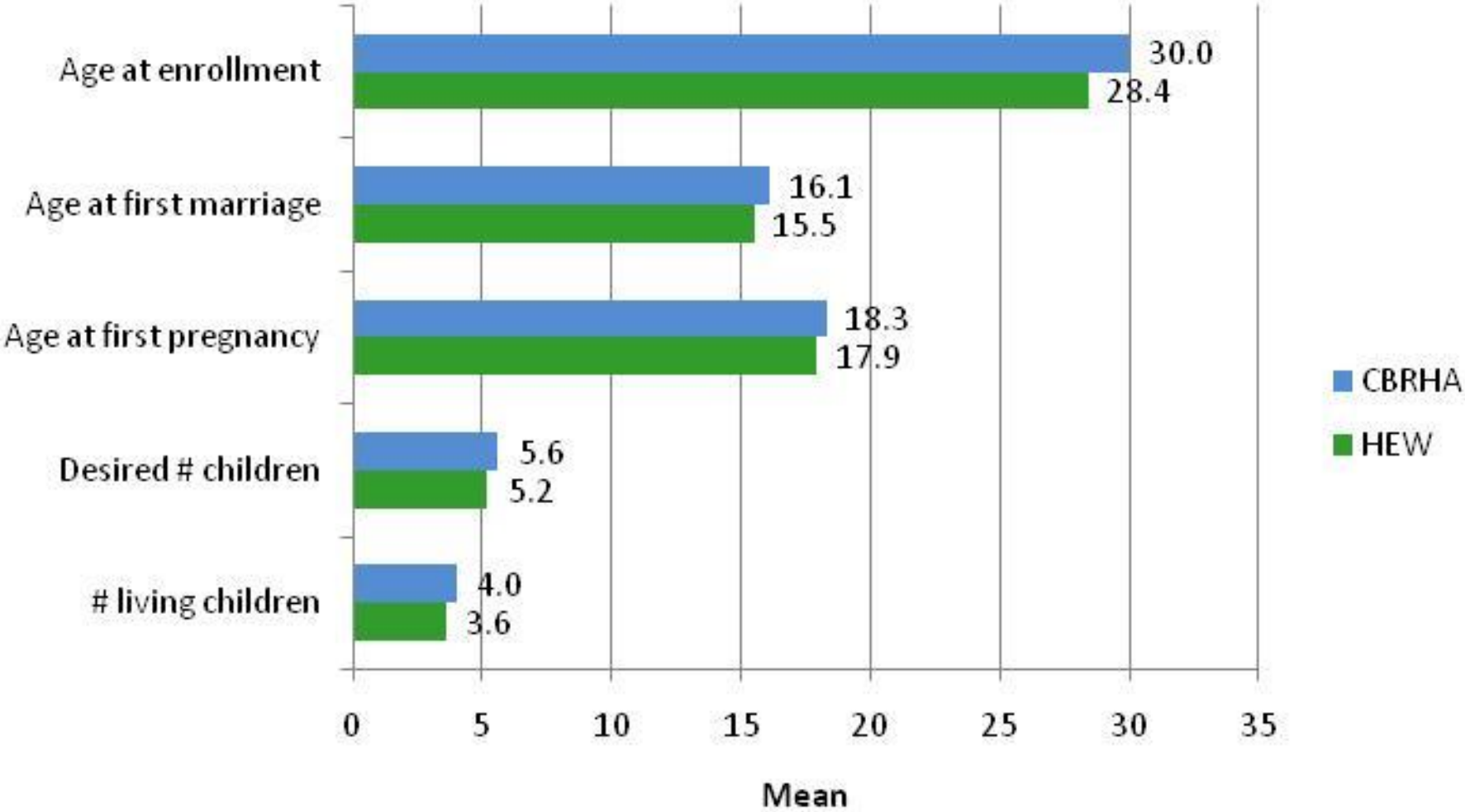


Methods

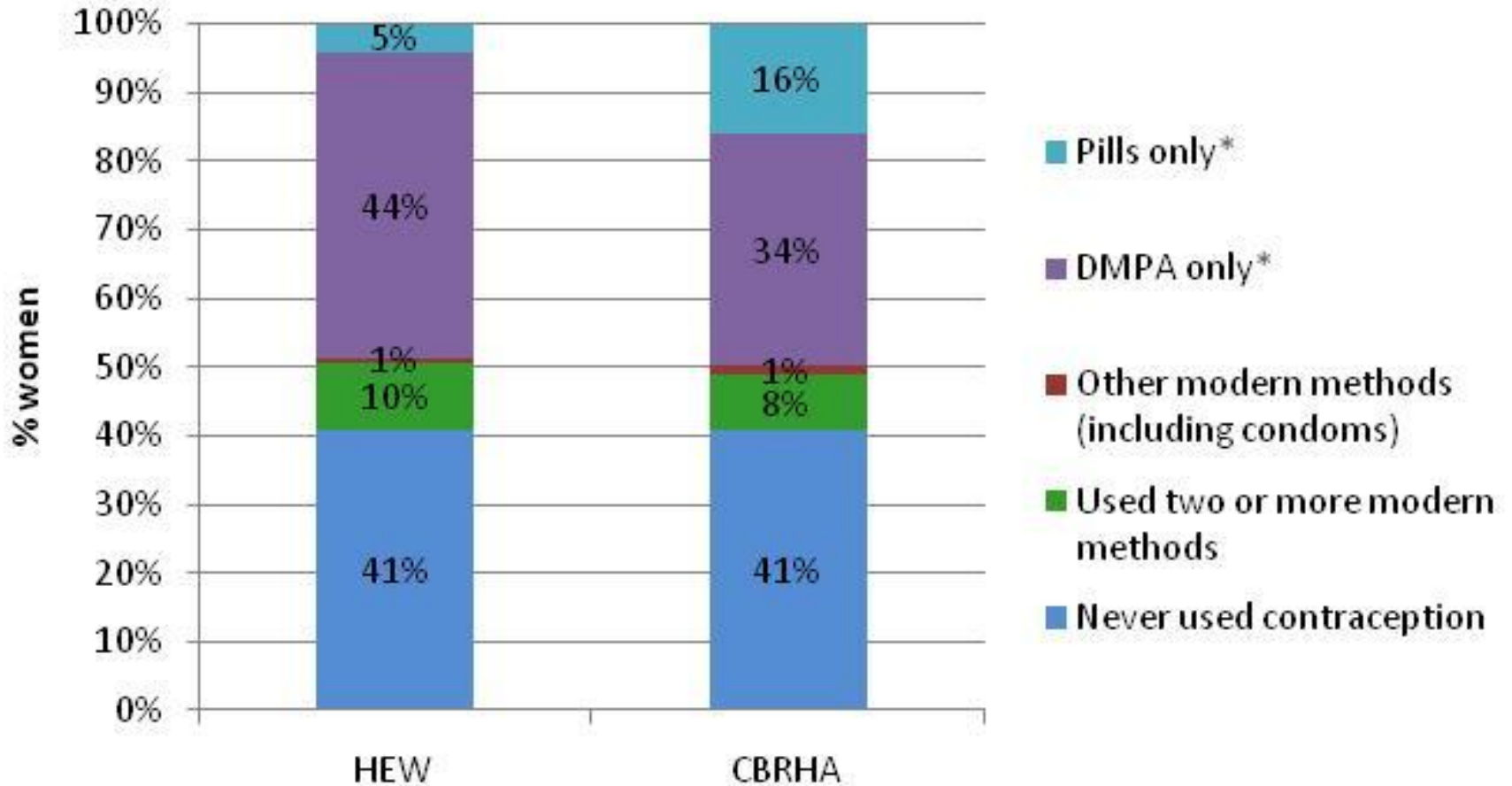
- HEWs and CBRHAs received same standardized 10 day training on injection technique
- Women self-selected provider for family planning
- After screening, women were enrolled and followed-up through two additional injection cycles and completed enrollment, 3-month, and 6-month post-injection surveys
- Morbidity, client satisfaction, client knowledge, continuation rates, effectiveness were compared between CBRHA and HEW clients



Characteristics of Clients by provider (N=1062)

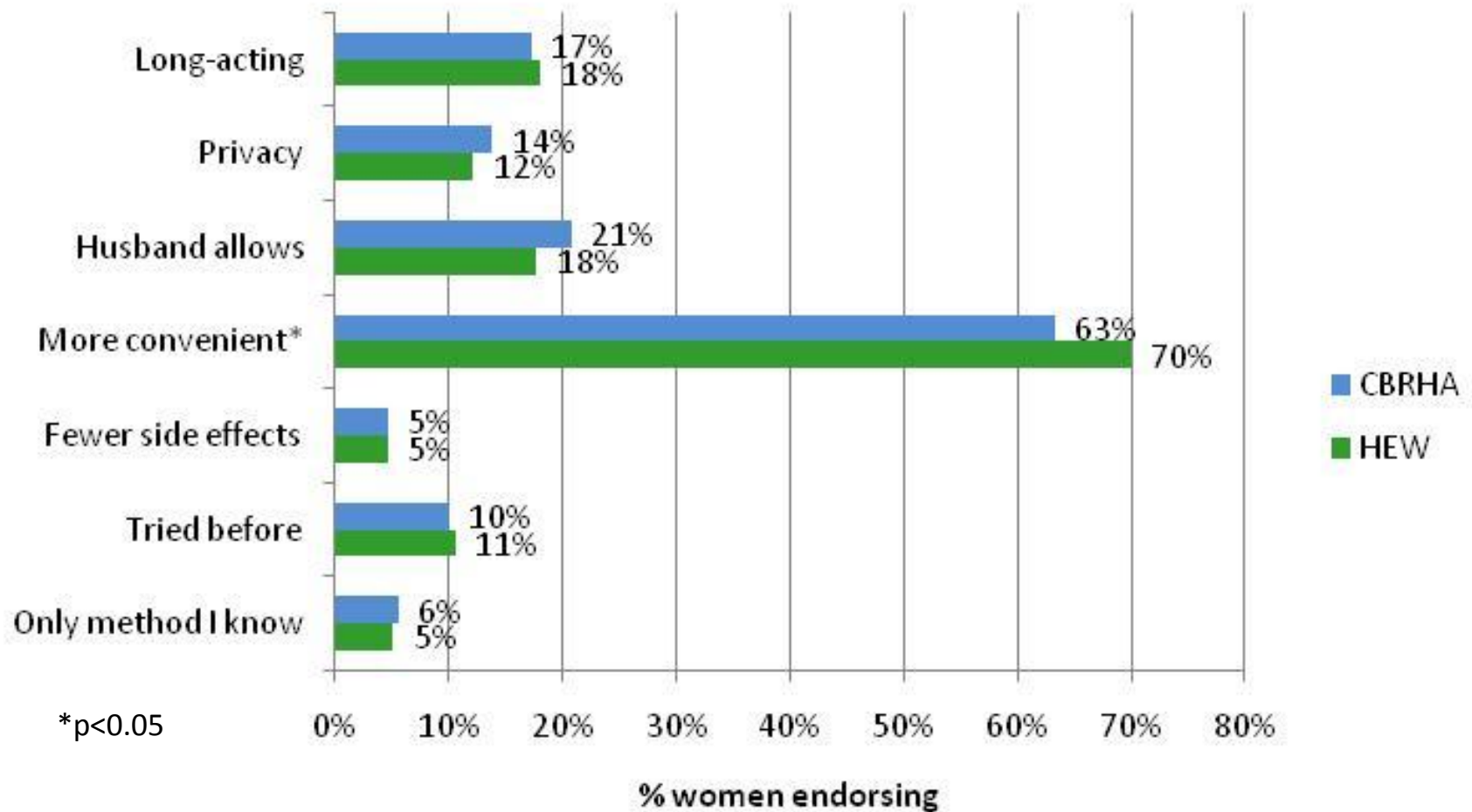


Previous use of contraception by provider (N=1062)

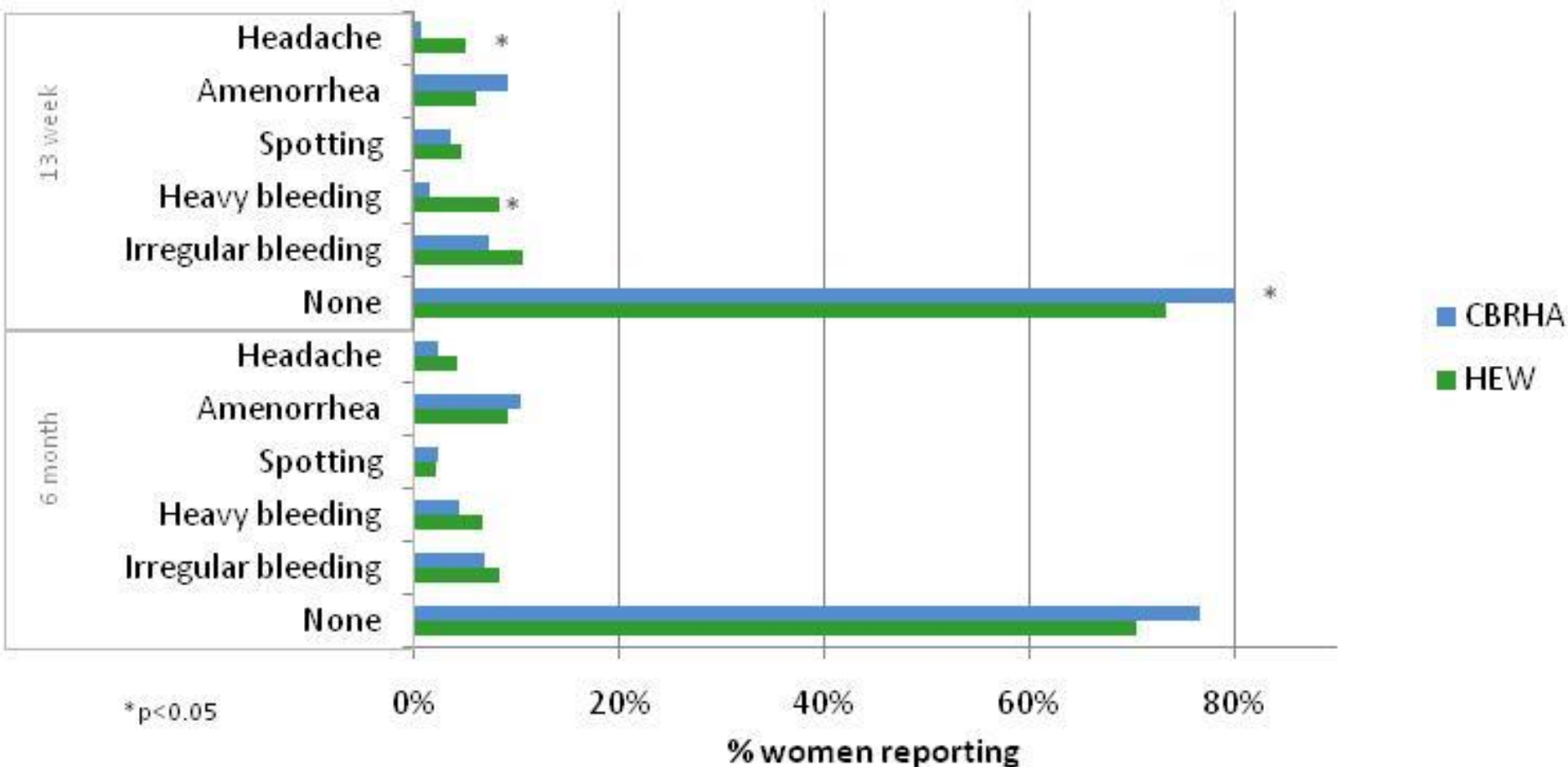


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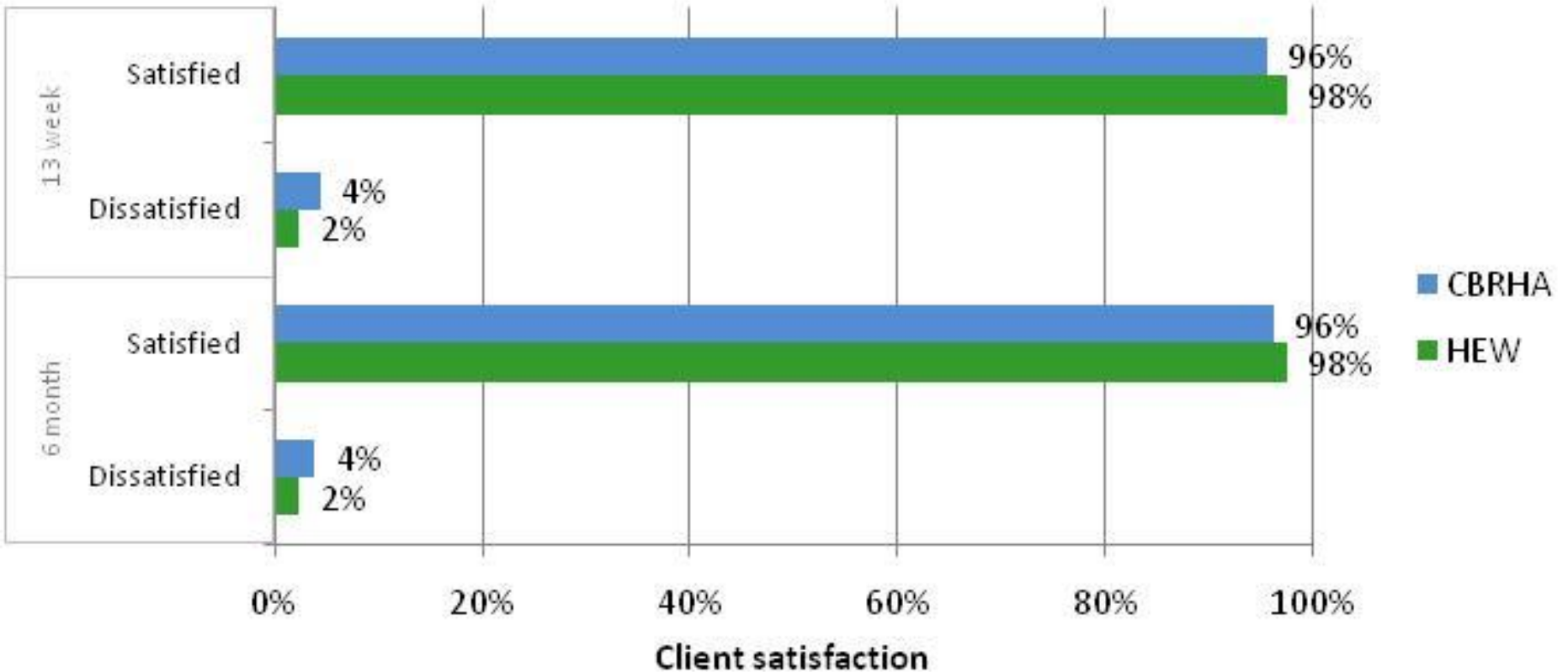
Reasons for DMPA use (N=1062)



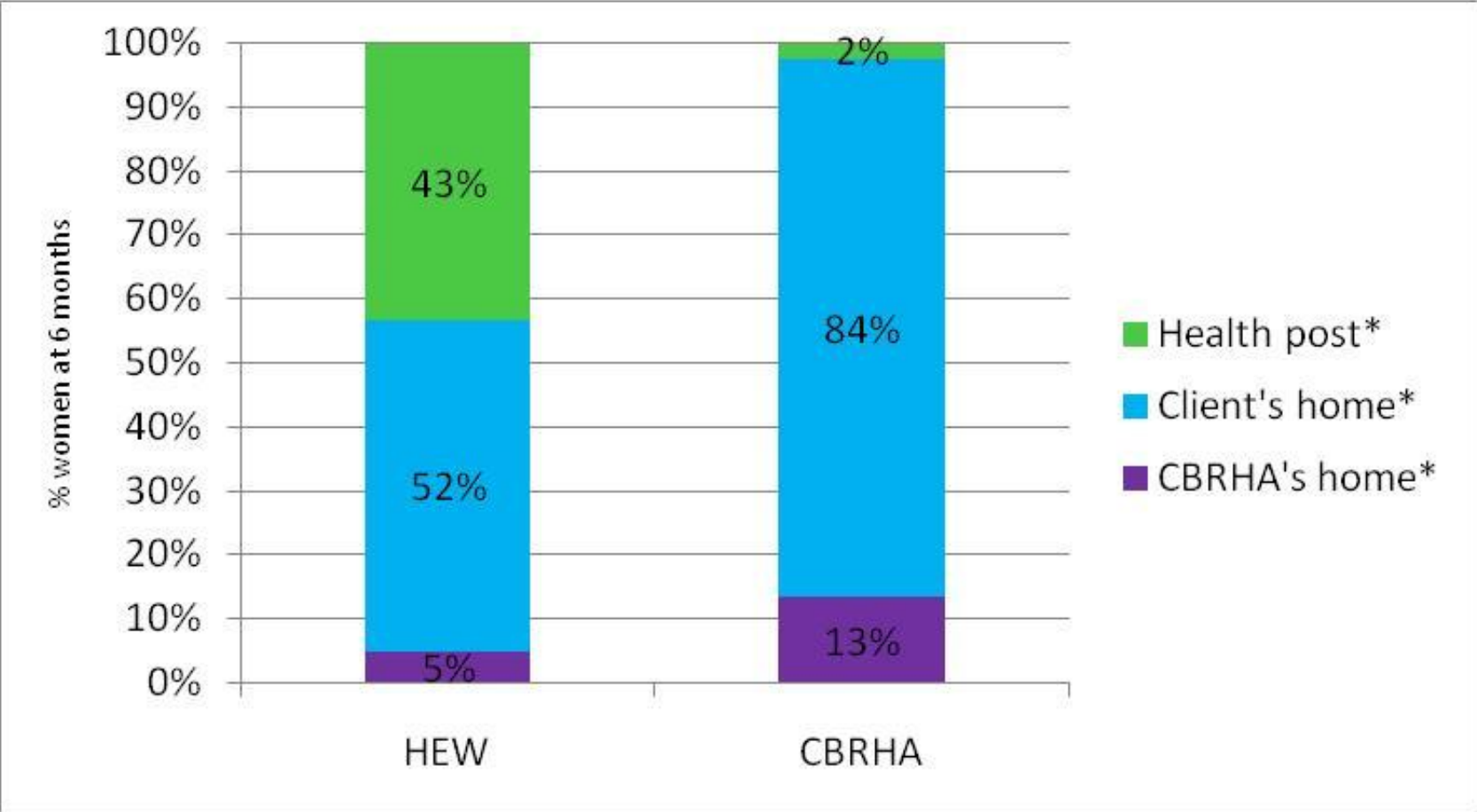
Follow-up: Reported side effects



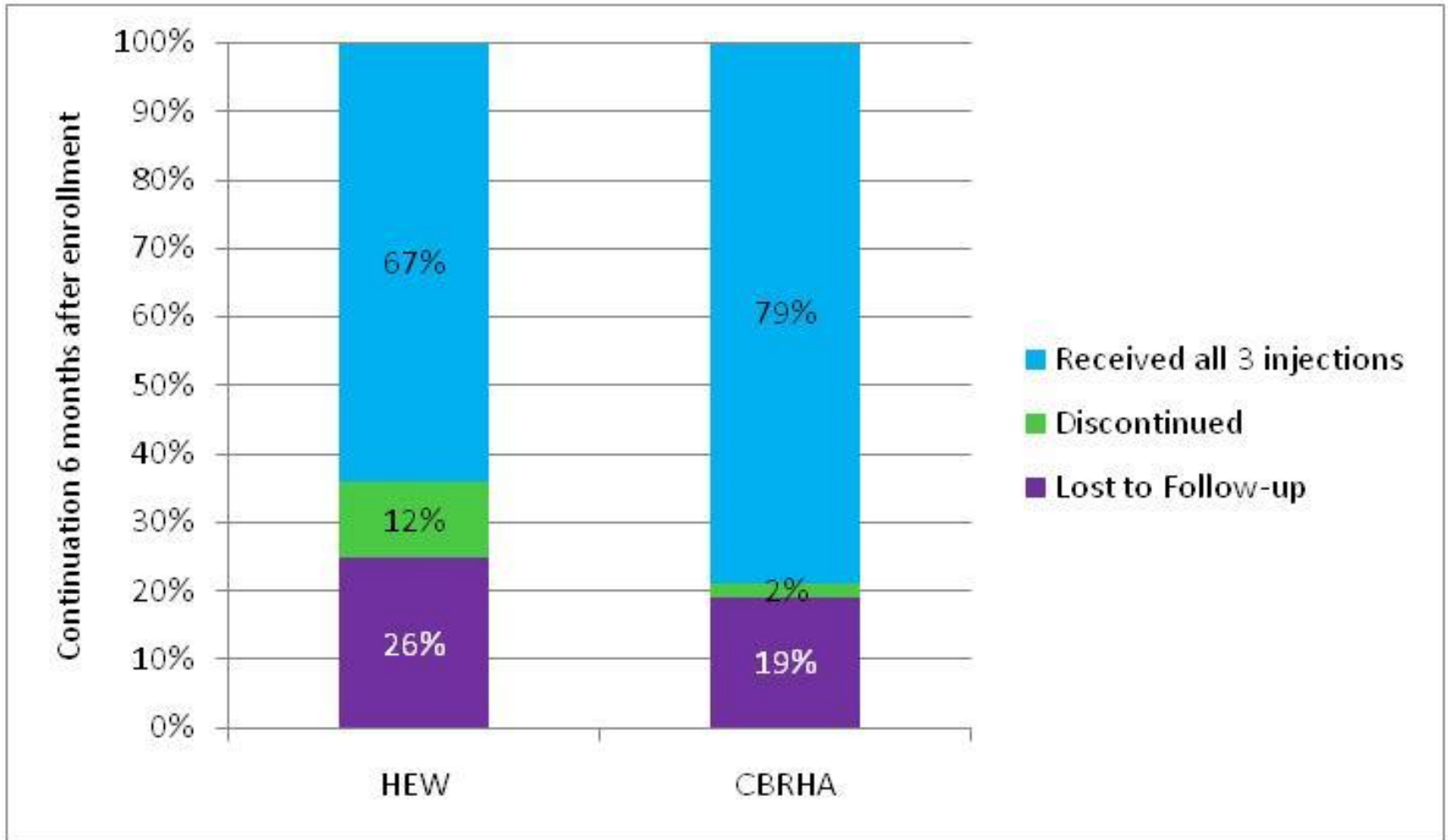
Client satisfaction with provider



Preference for point of service



Continuation and Discontinuation Rates



Conclusions

- With training, CBRHAs are able to provide DMPA injections to women in rural Ethiopia with the same levels of safety, efficacy, and acceptability as HEWs
- CBRHAs may be able to reach more women with a longer-acting contraceptive method, many of whom have never used DMPA before
- Women in rural Ethiopia have a desire to receive DMPA injections in settings outside clinics
- Further research should continue to explore the reasons that women continue to practice covert use of contraception and dialogue around men's understanding of the need for and input in family planning methods

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- The Brush Foundation
- District Project Coordinators, Supervisors and Heads of District Health Boards
- All HEWs and CBRHAs in Kola Tambien and Tanqua Abergel

