Strengthening the Post-Pregnancy Contraception Market Through Shared Learning Dissemination Workshop Summary

Context:

The landscape of reproductive healthcare is evolving, with an increasing emphasis on empowering individuals to take charge of their own health. As medication abortion (MA) becomes more prevalent globally, there is a growing recognition of the need to address the contraceptive needs of women and adolescents following self-administered Medical Abortion. However, the current healthcare system often fails to adequately support women and girls, leaving a gap in contraceptive access and counselling. The Post-Medication Abortion Contraception (PMAC) project, led by Ipas Africa Alliance and supported by Population Council Kenya, AskNivi, and Impact for Health International, has partnered with pharmacists, community mobilizers, women and girls to develop and test a range of prototypes that promote contraceptive choice after self-managed abortion. The final intervention package promotes the role of the pharmacist to increase access to post MA contraception through enhancing quality of care, building a business case, and sustaining efforts through ongoing advocacy.

On April 16, 2024, a one-day dissemination meeting was held to discuss insights gleaned from the PMAC-led Post-MA Contraception Market Analysis and foster alignment among government, pharmacy, NGO, and academic stakeholders to strengthen the role of pharmacists to sustainably offer quality contraception post MA. The meeting was designed to: share the experience of PMAC market development from multiple perspectives; shape a common vision for the PMAC market; and shift practices of key actors around PMAC and information sharing.



Share

WHERE ARE WE NOW?

To ground the dissemination event in an understanding of the current complexities of the PMAC market, a summary of the PMAC Kenya Market Analysis Report and the PMAC Kenya Final Intervention Package were presented by Ipas Africa Alliance and Impact for Health International, followed by a panel discussion. Titled 'Unlocking the Potential of Pharmacies to Expand Access to Post-Pregnancy Contraception in Kenya' experts across Kenya's contraceptive value chain explored challenges and opportunities related to pharmacy-led service provision, supply chain management, digital health solutions, the enabling environment; and the role of public-private partnerships.

Moderator:



Dr. Joan Oracha

Kenya Country Director | MSI Reproductive Choices



Panelists:



Laura Nabwire Country Lead InSupply Health

"We may be working on separate proposals and grants, but we need one true north to feed in to. All clients are "under" the MoH – so we need to begin with that.

The MoH is spearheading initiatives." (Supply Chain Management)



Douglas Omosa Kenya Pharmaceutical Association Chair | North Rift

"Policies and laws are the main constraints to contraception access in Kenya. This is not a conversation that should be spoken about under the table. If someone has the intent to do it, they will find a way. The conversation should be about how we make it better - without criminalizing the pharmacists and client."

(Enabling Environment)



Jackline Cheruiyot Program Lead | Ask Nivi

"There are four barriers in relation to post-MA contraception access — information, stigma, product, and data. Technology plays an important role in bridging these barriers — it presents an opportunity to provide access and meet clients where they are."

(Digital Solutions)



Dr. Stephen Githinji National Sales Manager | DKT Kenya

"At the pharmacy level,
we identify gaps in
knowledge and provide
counselling. We are
always looking for
partners to build
capacity in this area."
(Public-Private
Partnerships)



Jared Ojuok PMAC Pharmacist | Nakuru County

"Pharmacists have a lack of adequate training.
Service providers need to be trained in what needs to be done in relation to MA provision and counselling. Without this, complications and morbidities can arise."
(Pharmacy-Led Service Provision)

Shabe where do we want to go?



Through interactive small-group activities, participants co-developed a common vision of success for the market, which explored the desired health impact, key actors, and outcomes.

WHAT IS HAPPENING?

Empowered girls and women can access quality post-medication abortion contraception in pharmacies, leading to a reduction in unintended pregnancies and improved health outcomes.

BY WHOM?

Girls and women are supported by the system that surrounds them; their community who encourages their access to choice; pharmacists who have capacity to provide quality, non-stigmatized services; and policies and guidelines that enhance access for all.

HOW?

Pharmacies support girls and women to access quality and stigma-free post-MA contraception.

Awareness: Demand is generated through consistent, accurate information sharing across schools, communities, and health and digital spaces.

Availability: Post-MA contraception can be found in public or private pharmacies and digital platforms with referrals to alternative sources that might better serve her needs (e.g., LARCs).

Acceptable quality: Pharmacists provide comprehensive post-MA contraceptive counseling, services, and products.

Affordability: Women and girls can afford post-MA contraception, with support from innovative financing mechanisms.



Shift

HOW DO WE GET THERE?

A panel 'Innovations in Financing Post-Pregnancy Contraception Across Kenya' explored different financing models that could be leveraged to sustainably support affordable provision of pharmacyled post-MA contraceptives, especially in the context of reduced donor funding. Key models explored included UNFPA Funding Compact; Tiko's Development Impact Bond (DIB); and volume guarantees outside of donor-led initiatives.

Moderator:



Dr. Angela Akol Regional Director | Ipas Africa **Alliance**



Panelists:



Charity Koronya FP Specialist UNFPA

"We know that without commodities, there are no programs. Therefore, the UNFPA FP flagship program, the Funding Compact, establishes a framework where country governments pledge to increase funding for family planning commodity budgets, which is the case for Kenya"



Leah Wanaswa Country Director Tiko

"We are working on the world's first **Development Impact Bond (DIB) for** adolescent SRH. The funding is based on measurable outcomes - outcomes are anchored around the quality of services."



Willis Ogutu **Kenya Country Director**

"70% of contraceptives that are brought into Kenya are procured by UNFPA and USAID. We don't have a clear supply chain mechanism that guarantees price and ensures sustainability."

Reflecting on the day's discussions and activities, partners made individual commitments to make progress towards the shared vision. Key themes across commitments included:

- 1. Utilizing data for action: by prioritizing the analysis and sharing of pharmacy data among partners, supported by conducting a needs analysis and developing an action plan to overcome barriers and improve data utilization.
- 2. Collaborating for change: through expanding partnerships with pharmacies to advocate for increased access to contraceptives in discreet channels, aiming to dispel myths and promote informed decision-making.
- 3. Increasing access for all: by enhancing the capacity of pharmacy service providers through proactive resource-sharing and to improve access to quality contraceptive services by aligning on core training approaches.

Ipas Kenya and partners commit to continuing to share their learnings from the PMAC project to supporting making this shared vision possible.

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InSupply Health

- Pharmacists Society of Kenya
- Tiko
- Kenya Pharmaceutical Association