

Mainstreaming Emergency Contraception on a Global and National Level: Partnerships and Strategies

ABOUT ICEC OCTOBER 2017

For over 20 years, the International Consortium for Emergency Contraception has worked to expand access to emergency contraception, focusing on developing countries.

Emergency contraception (EC) is the only method of contraception that can be used to prevent pregnancy when taken promptly after unprotected sexual intercourse.

The International Consortium for Emergency Contraception (ICEC) works to ensure that EC becomes an integrated component of family planning and post-rape care on a global and national level through:

- Information sharing
- Advocacy and technical assistance
- Research
- Awareness raising and development of material

ICEC is implementing a three year grant from the Bill & Melinda Gates Foundation (2014-2018), supporting advocacy and knowledge-sharing efforts at the global level, with the addition of focused strategies to expand access in DR Congo and Nigeria and additional technical assistance in other countries.

Global Thought Leadership, Advocacy and Information Sharing

Through participation in technical meetings, our annual “EC Jamboree,” presentations, and outreach at global conferences. ICEC has cultivated a large network of stakeholders. Our email lists reach almost 4,000 individuals with information about EC in English, French, and Spanish. We contribute to the family planning field through engagement with local and global partners.

ICEC publishes and translates factsheets and guidelines, pulling from the highest quality available data and recommendations to provide the international gold standard for information on emergency contraception. Our clinical guidelines are available in eight languages and form the basis of EC guidance in many countries.

Technical Assistance in DRC and Nigeria

EC access is different everywhere, and every country requires tailored approaches to mainstream EC into family planning efforts. ICEC conducts policy and stakeholder landscaping analyses to create individualized and multifaceted approaches to advocate for EC.

MAINSTREAMING EC INTO THE NIGERIAN HEALTH SYSTEM

In Nigeria, ICEC is working with multiple local organizations to target the health system at the policy, service delivery, provider and community levels. Our initial landscape analysis showed a country with fairly high integration of a socially marketed product in pharmacies and drug shops, but no support from the public sector in policies or programming. By conducting advocacy events and multiple stakeholder alignment meetings, ICEC and its local partner, Civil Society for Family Planning (CiSFP), were able to successfully advocate for inclusion of EC on the Nigeria EML in 2016 and provide technical support for the Ministry of Health to release a Nigerian EC Strategy in 2017.

Now that there is initial policy acceptance of EC in Nigeria, ICEC is supporting local organizations to mainstream EC into family planning programming. One partner, Association for Reproductive and Family Health (ARFH), is

creating a training module on EC that complements the existing national family planning curriculum. To increase awareness of EC, ICEC supported Population Media Center Nigeria to include storylines about EC into radio dramas. Since pharmacies are such important sources of EC in Nigeria, Society for Family Health (SFH), a social marketing organization that introduced EC into Nigerian markets, is creating detailing materials to improve pharmacists' knowledge and acceptance of EC. At the same time, the Centre for Communication Programs Nigeria (CCPN) is creating brochures that can be used by family planning providers, as EC is introduced into public sector facilities. Supporting multiple Nigerian organizations allows ICEC to purposefully work to strengthen and mainstream EC in different sectors of the health system.

EC KNOWLEDGE AND PERCEPTIONS IN DRCONGO

The family planning landscape is quite different in the Democratic Republic of Congo; policies are generally supportive of EC, but access and awareness are still very low. EC has been generally seen as only relevant in cases of sexual violence in conflict-affected parts of the country, and not part of the family planning method mix. After mapping and analysis of the policy and stakeholder landscape, several events with high level stakeholders were held to generate more knowledge and acceptance.

Because awareness of EC was so low in the general public, support was provided to Population Media Center DR Congo to add EC storylines to radio dramas, and technical support was provided to DKT for their launch of a socially marketed EC brand. In addition, Johns Hopkins University Center for Communication Programs (JHU CCP) was supported to develop a client brochure on EC to match other single-method family planning brochures.

Research

ICEC works to improve the evidence base on emergency contraception. We have analyzed and shared EC data from Demographic and Health Surveys (DHS), PMA2020, and FPWatch. We have also supported research on key opinion leaders in key countries (India, Nigeria, and Senegal) and on use of EC, including use of EC as a regular contraceptive method, in Kenya and Nigeria. More recently, we have supported Tulane University to conduct qualitative research in Kinshasa, including focus group discussions with women to evaluate levels of knowledge and attitudes about EC, interviews with community religious leaders, and mystery client visits to pharmacies. Taken together, these Kinshasa studies provide fascinating information about the socio-cultural and community contexts in which women make decisions about their fertility.

Awareness raising and materials

As described in the country sections above, we are addressing low levels of awareness of EC among women, providers, and communities. ICEC is working with partners to create accurate EC materials for clients in Nigeria, DR Congo, and for Swahili speaking countries. We also contributed to EC modules in the FPTraining.org set of materials, for clinic and pharmacy-based providers. We are working to increase community awareness through supporting “edutainment” in Nigeria, DR Congo, and Senegal to incorporate messages about EC into storylines in radio and television dramas

Conclusion

Globally, EC is increasingly known and included in key policies and documents, but in individual countries, access is still challenging. In some settings, policies are not supportive; in many countries, awareness by women and health care providers is still low. Continued advocacy and technical support is needed to fully mainstream EC into the contraceptive method mix and ensure that it is available to women who need it.



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