

Self-Injection Best Practices Project: Uganda

Contraceptive self-injection

Access to a range of contraceptive choices allows each woman to find her best option for preventing unintended pregnancy. Injectable contraceptives, which provide three months of protection from pregnancy, are a popular method in sub-Saharan Africa.

Self-injection of contraception is a new option that enhances women's autonomy and control over whether and when to have children, while decreasing the time and costs associated with quarterly trips to a clinic. Subcutaneous DMPA (DMPA-SC) is a new, easy-to-use injectable contraceptive that is, by virtue of its design, uniquely suited for self-injection. Pfizer's Sayana® Press is currently the most widely available DMPA-SC product.

Uganda Self-Injection Best Practices project

Evidence from [research in Uganda](#) suggests that women are able to self-inject DMPA-SC safely and effectively following training by a health provider. As the Uganda Ministry of Health plans for national rollout of self-injection, there is need to learn how self-injection can be designed and implemented at scale, under routine conditions. PATH's Self-Injection Best Practices project was developed to address this need by:

- Applying principles and tools of human-centered design to develop self-injection programs for public-sector facilities, community-based distribution, private-sector outlets, and safe spaces for young women and adolescent girls.
- Implementing program models across delivery channels.
- Evaluating self-injection program models to determine what works.
- Disseminating optimal self-injection program components and delivery models to inform policy and practice in Uganda and beyond.

Progress and results to date

Implementation and monitoring

Beginning in the final quarter of 2017, health workers were trained to offer self-injection services across the following delivery channels:

- Public-sector facilities and community health workers in Oyam, Gulu, and Mayuge Districts.
- Public-sector facilities and safe spaces for adolescent girls and young women in Mubende District, facilitated by Mildmay Uganda.

A monitoring system was designed to capture information on the uptake of self-injection and the characteristics of women accessing self-injection services. Some preliminary learnings are shared below. These findings reflect only the first six months of implementation, and therefore may not be representative of the program once established.

What we know about health workers

- In May 2018, more than 160 facility- and community-based health workers (out of 240 trained) were actively offering self-injection across the four districts.
- Interest levels in the program, workload, and transfers of health workers affected the number of active health workers offering self-injection services across sites.
- Health workers vary considerably in their level of involvement in the program; the median number of women trained per health worker was 21, with a range from 1 to 150.



Using a printed instruction sheet during training and at home can help women learn and remember the correct self-injection steps. Photo: PATH/Will Boase.

What we know about self-injectors

- More than 3,000 women became self-injection clients within the first six months of program implementation.
- The self-injection program seems to be reaching younger women (<25 years) and new users of family planning; women with no education may be under-represented among self-injectors.
- The number of self-injectors is increasing over time.

What we know about consumption

- About half of DMPA-SC units distributed in the project facilities/sites were given out for self-injection, including self-injection at the clinic as well as units taken home.

Next steps

Evaluation

Multiple aspects of the self-injection program will be evaluated to identify the most successful program models for self-injection of DMPA-SC. Given the overall goal of avoiding unintended pregnancy, client self-injection proficiency is the most critical outcome for a successful program. Cost-efficiency, accessibility, user satisfaction, program quality, and provider perspectives on feasibility will also be assessed.

Results from the evaluation will be disseminated globally in 2019. A few program insights based on informal feedback from providers and clients are included in the box to the right.

Private sector

In September 2018, PATH began introducing self-injection services on a small scale through private-sector clinics, pharmacies, and drug shops in Luweero and Wakiso Districts.

John Snow, Inc., and PATH developed a [client training video](#) that will be used to train women to self-inject in the private sector, and can also be used by self-injection clients needing a refresher on the injection steps.

Key resources

- [PATH subcutaneous DMPA website](#)
- [Self-injection training curriculum](#)
- [Subcutaneous DMPA evidence-at-a-glance](#)

Program insights so far



Client training

Early results indicate that training by community health workers and nursing assistants (rather than higher-level cadres of nurses or midwives) may be a promising approach.



Client training

It may be possible for women to learn how to inject without practicing on a model, especially if given brief and clear visual/written instructions.



Storage

Women are able to store the unused devices at home relatively easily, often in a handbag or suitcase.



Reinjection

Providing a copy of the instructions used during training helps women with correct use, and women appreciate having a visual aid to take home for independent self-injection.



Reinjection

An online training video may be an option for women learning to self-inject, and/or as a reminder for women self-injecting at home.



Follow-up

Women prefer follow-up approaches that they initiate themselves (e.g., visiting a community health worker or facility if needed) over home visits or calls from providers.



Disposal

Providing an impermeable and inconspicuous container (e.g., petroleum jelly jar, wide-mouth water bottle) can help women store used devices safely prior to disposal.

For further information:

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