



## Providing Implanon services at the community level through training of low-level care providers: A national scale-up program experience

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# OUTLINE

- Introduction
- Program Implementation and Assessment Methodology
- Results/Findings
- Program Summary
- Conclusion
- Recommendations



# INTRODUCTION

- The Integrated Family Health Program (IFHP) is a USAID-funded health program which aims to Improve Family Health: Family Planning, Reproductive Health, Maternal, Newborn, and Child Health. IFHP is implemented by Pathfinder International and John Snow, Inc.
- IFHP's training of health extension workers (HEWs) and task-shifting of Implanon insertion to HEWs at the Health Post (HP) level has resulted in increased access and use of long acting family planning (LAFP) at the community level.
- This presentation will discuss the Pathfinder/IHFP experience of the national Implanon scale-up program.

# IDENTIFY THE PROBLEMS

- Access and utilization of LAFP methods is only 4.2% of women using any methods in Ethiopia.
- There is a 25% unmet need for FP, 16% for spacing, and 9% for limiting; 28% rural and 15% urban.
- In mid-2009, the Implanon® scale-up initiative was introduced by the Ministry of Health to increase access to LAFP methods at the community level. HEWs were authorized to provide Implanon insertion services at the HP level, after a six-day quality, skill-based training.
- Profile of HEWs:
  - Completed 12 years of schooling with an additional one year training on HEP.
  - Salaried and deployed by the government.



## TASK IS SHIFTED TO...

- LAFP services provided at high-level health institutions are shifted to community-based LAFP services at the HP level.

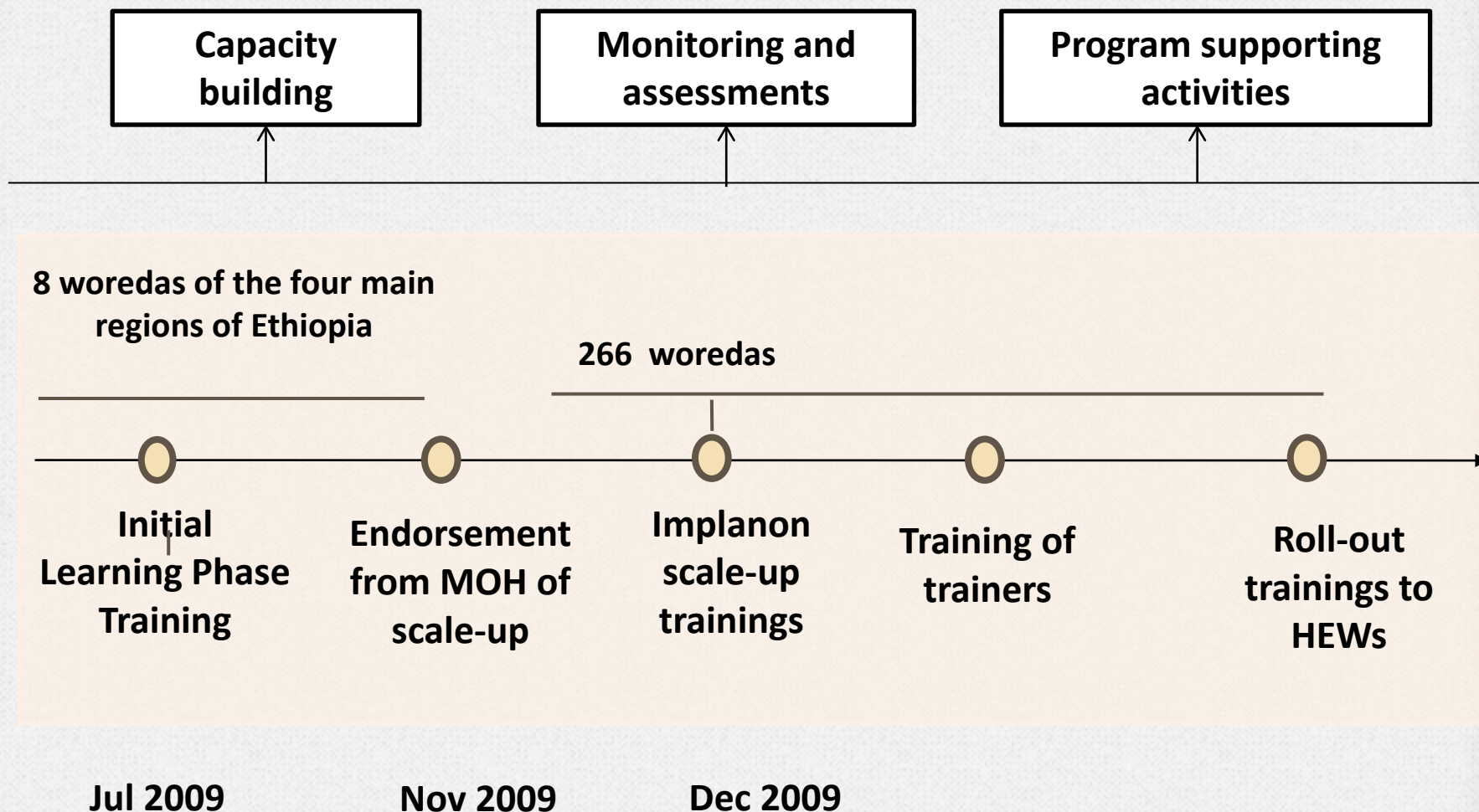


**LAFP services at  
high-level health  
institutions**

**shifted to**

**LAFP services in  
the community**

# PROGRAM KEY POINTS AND IMPLEMENTATION





# RESULTS/FINDINGS

## Capacity building trainings for HEWs and health care providers on Implanon insertion

- Nearly 7,638 (66.7%) HEWs successfully completed Implanon insertion training.
- Of the total of 5,713 HPs, 93.4% are staffed by a HEW trained in Implanon insertion (June 2009 to September 2013).
- 1,864 clinical care providers trained on Implanon insertion and removals, covering 75% of the Health Centers (HCs) in the implementation areas.
- 80.3% from a total of 79,893 clients who were served with different FP services during the trainings were eligible and chose Implanon.
- An average of 8 Implanon insertions were performed by each HEW during the trainings.

# RESULTS/FINDINGS (CONT'D)

## Program M&E

- **Program monitoring**

- In all trainings, at least 2 public sector FP experts attended to monitor and ensure quality of theoretical and practical sessions.
- Family Health International experts participated in each training and monitored program activities.

- **Program assessment**

- Community survey showed :
  - Increased demand at community level.
  - all FP services-even those normally provided at the HP level
  - for LAFP services.
  - For FP services not provided at the HP level - Insertion of Jadelle, IUCD, removal of Implanon ,Jadelle, IUCD



## RESULTS/FINDINGS (CONT'D)

**Program supporting Activities/interventions during the program period,**

- **post training, and gap filling supply support**

**Potential clients provided with Implanon insertion (July 2009 – Sept. 2013)**

<b>Program Supporting interventions</b>	<b>Total</b>
Total # HEWs trained	7,642
# potential clients who can be served post-training	229,260
Total health posts covered by Implanon insertion training	5,339
# potential clients who can be served, based on gap filling consumable support	320,340
Total clients served	549,600

## RESULTS/FINDINGS (CONT'D)

- Back-up of LAFP-supported health centers

**Distribution of client visits by 139 back-up supporting HCs at their respective health posts-September 2011 to September 2012**

FP services provided by the 139 back-up HCs	Total	% of visits
Total client visits for FP services	48587	100
Long-acting method insertions:		
Implanon insertions	7100	14.6
Jadelle insertions	1004	2.1
IUCD insertions	753	1.5
Other methods:		
Depo-Provera	25231	51.9
Combined oral contraceptive (COC )	4880	10.0
Mini-pills	70	0.1
Condoms	2535	5.2
Long-acting method removals:		
Implanon removals	4628	9.5
Jadelle removals	303	0.6
IUCD removals	75	0.2
Norplant removals	2008	4.1



- **IMPLANT REMOVAL SUPPORTING HEALTH CENTERS  
DISTRIBUTION OF CLIENT VISITS AT THE 215 IMPLANT  
REMOVAL SUPPORTING HEALTH CENTERS  
(JULY 2009 TO SEPTEMBER 2013)**

<b>Services</b>	<b>Total</b>	<b>%</b>
Implanon removals	11,389	73.5
Jadelle removals	1,137	7.3
Norplant removals	2,972	19.2
Total	15,498	100

# PROGRAM SUMMARY

## Capacity building trainings to HEWs

- Access to LAFP/Implanon was possible at community level
- Increased use of LAFP/Implanon at community level

## Program M&E

### Initial learning phase

- HEWs acquired Implanon provision skill
- Program beneficiaries were at community level
- No complications observed after insertion
- Implanon services at HP level increased method mix and client satisfaction



# PROGRAM SUMMARY (CONT.)

## Program M&E (cont.)

### **Program monitoring, assessment, and follow-up**

- All trainings and clinical practices monitored by public and partner experts
- Program identified increased community-level demand for LAFP/Implanon services
- Consumables and supply gaps/shortages at HP level identified
- Need for Implanon removal services at community level was identified.

### **Establish program supporting activities/interventions**

- Through program-supported activities, it was possible to support the Implanon program at the HP level.
- Supply/commodity support was provided.
- Implanon removal needs were met.

## CONCLUSIONS

- With proper training, follow-up, and technical support, low-level providers can be technically capable of managing Implanon insertion.
- Provision of services at the HP level by HEWs will improve access and use of LAFP-Implanon at the community level.
- There is a significant demand for LAFP-Implanon services at the community level.
- To sustain the ongoing Implanon insertion programs at the community level, a program of supporting activities must be initiated.



## RECOMMENDATIONS

Quality counseling and skill training of low-level health care providers on LAFP-Implanon is an effective, strategic approach to increasing access to and use of LAFP-Implanon at the community level.

To ensure the sustainability and integration of LAFP programs within the health systems of countries like Ethiopia, program planners should think beyond capacity building training for care providers.

Assessing and identifying program gaps, as well as establishing a program of supporting activities, are important components to program success.



# THANK YOU



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