



# CQUIN Differentiated MCH Workshop

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How can we leverage DSD for the integration of  
contraceptive care?

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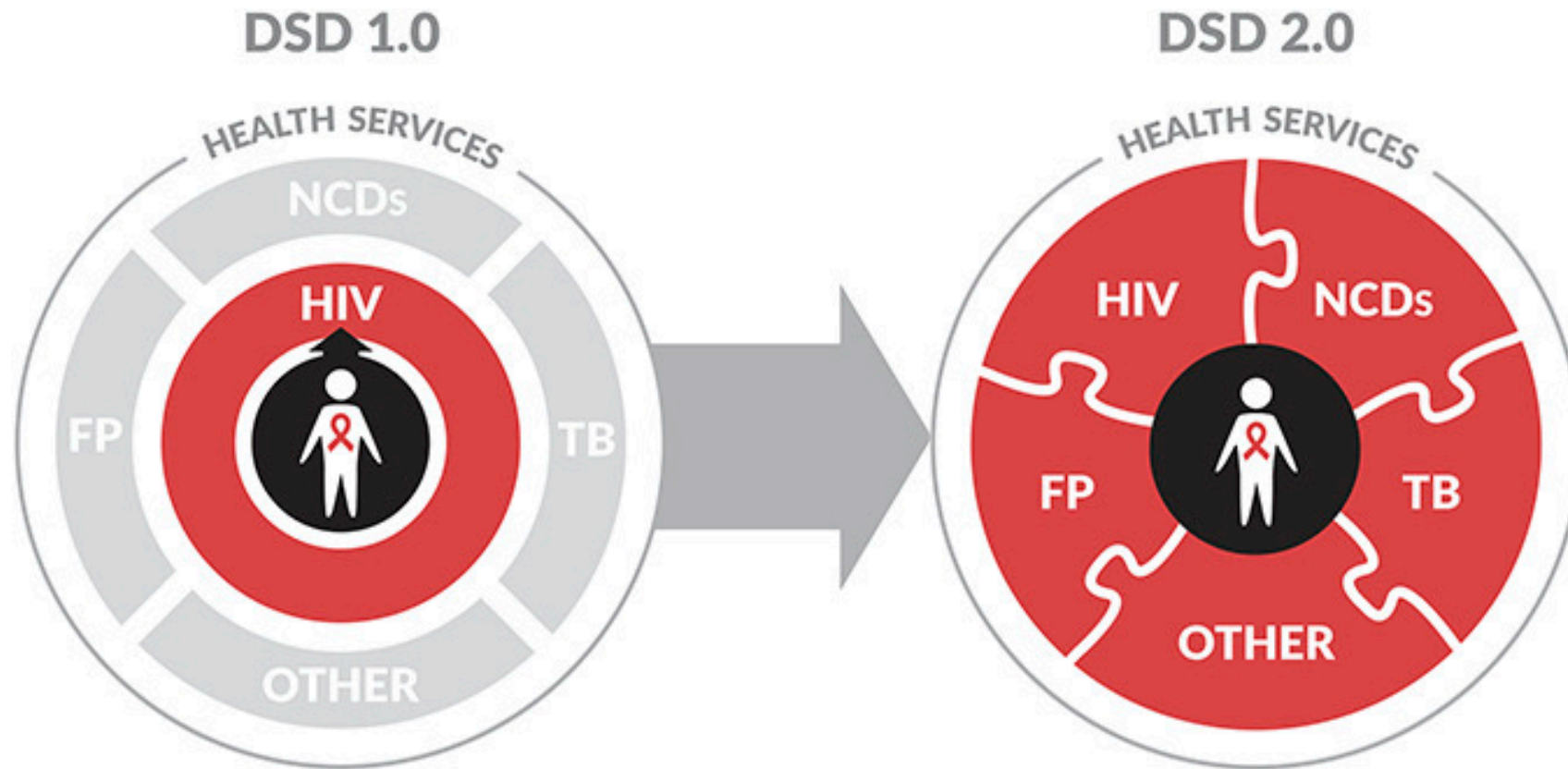
25 May 2021



HIV Learning Network  
The CQUIN Project for Differentiated Service Delivery

# Beyond just HIV treatment

## Transitioning to person-centered DSD 2.0



# \*New recommendation from the WHO

## 8.1 Integrating sexual and reproductive health services, including contraception, within HIV services

### **Recommendation**

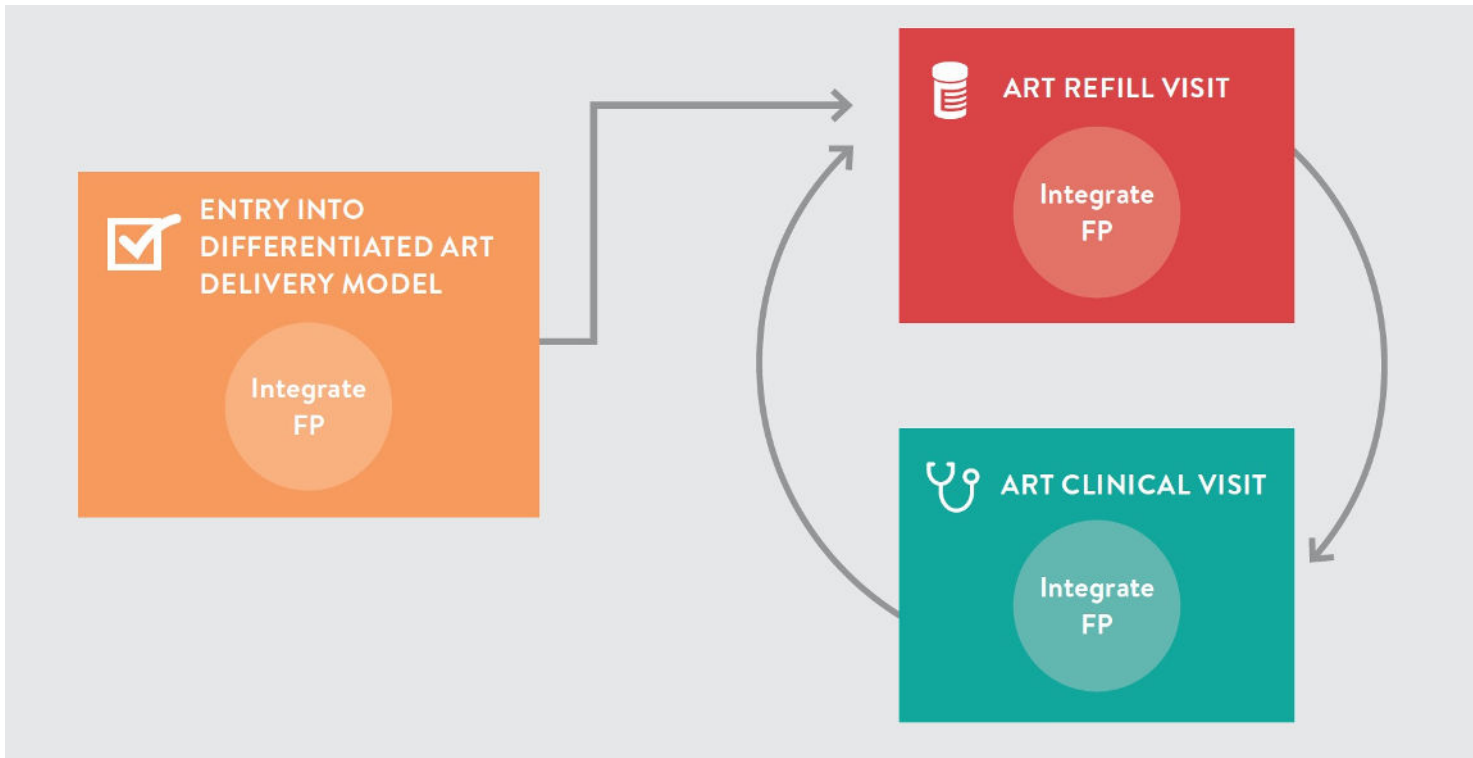
Sexual and reproductive health services, including contraception, may be integrated within HIV services

# Leveraging DSD for HIV treatment to strengthen family planning care



[http://differentiatedservicedelivery.org/Guidance/DSD-decision\\_frameworks](http://differentiatedservicedelivery.org/Guidance/DSD-decision_frameworks)

# Family planning care at different points of DSD for HIV treatment



[http://differentiatedservicedelivery.org/Guidance/DSD-decision\\_frameworks](http://differentiatedservicedelivery.org/Guidance/DSD-decision_frameworks)

“The definition of being established on ART (stability) should be applied to all populations, including those receiving second- and third-line regimens, those with controlled comorbidities, children, adolescents, **pregnant and breastfeeding women** and key populations.”

<https://www.who.int/publications/i/item/9789240023581>

Women should have a choice of DSD for HIV treatment – including during the postpartum period where integration of family planning is a priority.

# Building blocks of family planning care within DSD for HIV treatment models





# Example: Integration of family planning care within community ART groups (CAGs), Kenya

	IUDs	Implants	Oral pills	Injectables*
WHEN	Available but not taken up	At DSD entry At DSD clinical visits At facility walk in services in between visits if contraceptive need identified	Every 3 months, aligned	Every 3 months, aligned
WHERE	Available but not taken up	At same facility as ART where transition to DSD initiated/ ART collected for CAG	Collect ART and FP script from same clinic room and collect from the same pharmacy	Injection given in same room as ART assessment; group member in need nominated to collect ART for others
WHO	Available but not taken up	Implant- trained doctor, clinical officer, midwife or nurse	FP-trained clinical officer, midwife or nurse provides script	FP-trained clinical officer, midwife or nurse
WHAT	Available but not taken up	Implant information, counselling, insertion/ removal, management of side effects	Combined and progestin- only pills, information, counselling, script for pills, management of side effects	Injectable information, counselling, giving of injection, management of side effects *Self-injectable not yet available

# Key principles for integration of contraceptive care into DSD for HIV treatment



1. Engage women and girls living with HIV.
2. Utilize DSD referral and follow up as an opportunity for continuity of family planning care.
3. Promote the use of long-acting reversible contraceptives among clients in differentiated ART delivery models.
4. Align contraceptive and ART resupplies in differentiated ART delivery models.
5. Integrate family planning and ART care in differentiated ART delivery models in facilities and communities.



# The IAS – International AIDS Society – desk review of contraceptive coverage and method use and DSD policies in seven countries (2020)

## 1.1 Contraceptive coverage and method use










- Coverage of family planning
- Method mix at country level
- Data from
  - <http://progress.familyplanning2020.org/measurement#core>
  - National family planning strategy documents

## 1.2 National policy review

Policies and clinical guidelines assessed in eight countries:

- Eswatini, Ghana, Kenya, Malawi, Tanzania, Uganda, Zambia, Zimbabwe
- Review of contraceptive uptake and method mix
- Review of national DSD guidance and any recommendation for FP-HIV, FP-ART and FP-DSD integration

# DSD models and contraceptive method<sup>±</sup> utilization

	<b>Country</b>	<b>DSD Models</b>	<b>Unmet need*</b>	<b>IUD</b>	<b>Implant</b>	<b>Oral pills</b>	<b>Injectable</b>	<b>S/C injectable</b>	<b>mCPR<sup>§</sup></b>
	Eswatini <sup>1</sup>	FT; Clubs; Individual community; CAGs	15.2%	0.2%	4.6%	12.3%	29.7%	No	66.1%
	Ghana <sup>2</sup>	FT; Clubs; Individual community	31.9%	4.3%	21.6%	24.3%	38.4%	Yes	23.2%
	Kenya <sup>2</sup>	FT; Individual community; CAGs	18.6%	5.9%	18.2%	14.1%	47.9%	Yes	42.5%
	Malawi <sup>2</sup>	6 MMR; Individual community; CAGs	16.7%	1.8%	19.9%	3.8%	49.8%	Yes	48.9%
	Tanzania <sup>2</sup>	Fast track, clubs ; Individual community	26.3%	2.6%	20.7%	15.2%	36.7%	No	31.7%
	Uganda <sup>2</sup>	FT; CLADs; CDDP	30.5%	4.1%	17.3%	5.5%	51.3%	Yes	30.4%
	Zambia <sup>2</sup>	FT; Clubs; CAGS	20.9%	1.5%	17.9%	14.4%	52.8%	Yes	35.6%
	Zimbabwe <sup>2</sup>	FT; Clubs; CARGs; Individual community; Family groups	10.0%	0.8%	16.9%	56.5%	15.1%	No	50.2%

# Recommendations for integration with national policies

- In all countries there was a recommendation for family planning/ART integration in ART guidelines or operational manuals:
  - Recommendation in DSD guidance: Eswatini, Ghana, Kenya, Tanzania, Uganda, Zimbabwe
  - Recommendation in clinical guidelines: Malawi





# INTEGRATION OF FAMILY PLANNING WITHIN DSD FOR HIV TREATMENT MODELS

Version: April 2021

	Not specified	Alignment of clinic visit for FP and HIV	Some FP commodities MMD with ART refills	Some FP commodities integrated into specific models of DSD for HIV treatment
Angola	●			
Burkina Faso	●			
Burundi	●			
Cameroon	●			
Cote D'Ivoire	●			
DRC	●			
Eswatini*		●	●	
Ethiopia*	●		●	
Ghana*		●		
Guinea	●			
Haiti	●			
India	●			
Kenya*				●
Laos	●			
Lesotho	●			
Liberia	●			
Malawi	●			
Mozambique	●			
Namibia	●			
Nepal	●			
Nigeria	●			
Papua New Guinea	●			
Rwanda	●			
Senegal	●			
Sierra Leone	●			
South Africa	●			
South Sudan	●			
Tanzania	●			
Togo	●			
Uganda*				●
Zambia	●			
Zimbabwe*				●

## Key

- Latest national policy
- Interim COVID-19 policy

## References

Click on the ovals in the table to access the referenced policy.

## Notes

**Eswatini:** FP included in clinical consultation for all models; oral contraceptive refills provided for same duration as ART refills in COVID policy

**Ethiopia:** Oral contraceptive refills provided for same duration as ART refills in COVID policy

**Ghana:** Injectable contraceptive aligned with ART refills

**Kenya:** FP commodities provided within facility-based and healthcare workers led community-based HIV treatment models

**Uganda:** FP commodities provided within community-based HIV treatment models (CDDPs and CCLADs)

**Zimbabwe:** FP commodities provided within facility-based adolescent HIV treatment models

[https://differentiatedservicedelivery.org/Resources/Resource-Library/DSD\\_Policy\\_Dashboards](https://differentiatedservicedelivery.org/Resources/Resource-Library/DSD_Policy_Dashboards)



www.differentiatedservicedelivery.org

## Poll 1

**Can people in your setting  
access their contraceptive  
pills or depot in their DSD  
model?**





## Poll 2

**For those receiving  
6-month ART refills, are  
long-acting contraceptive  
methods (implant and IUD)  
offered?**

