







THE EUROPEAN SOCIETY OF CONTRACEPTION AND REPRODUCTIVE HEALTH ESC CONGRESS 1-4 MAY 2024, BILBAO, SPAIN

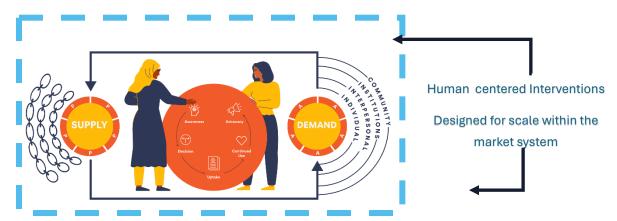
BACKGROUND

- Induced abortion is becoming common as women and girls can access medication abortion drugs through various channels including private pharmacies.
- However, women and girls who access medication abortion drugs through private pharmacies may not be exposed to comprehensive contraceptive counselling, which may affect post-medical abortion contraceptive uptake and continuation.
- This study presents findings from a project that worked with private pharmacies in Nakuru County of Kenya to improve contraceptive use and continuation after medical abortion.

OBJECTIVE

 Assess contraceptive uptake and continuation among women and girls who self-use medical abortion.

CONCEPTUAL FRAMEWORK



The figure describes how key influencers in the contraceptive market ecosystem were accommodated in adaptive intervention solutions for greater post abortion contraception market responsiveness.







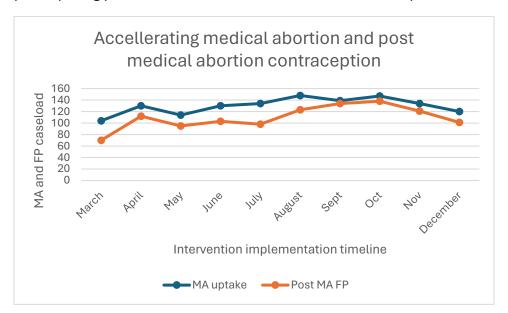


METHOD

- The project used an adaptive learning approach that integrated both research and program implementation to enhance pharmacy-based interventions to accelerate contraceptive use and continuation following self-use of medical abortion.
- Pharmacists received training on contraceptive counselling and provision, supply chain management and commodity seedstock to address both demand and supply constraints to contraceptive service delivery.
- A total of 193 women and girls accessing medical abortion through the private pharmacies involved in the project participated in survey and in-depth interviews that assessed contraceptive uptake and continuation after medical abortion.

RESULTS

Program data showed that out of 1300 women seeking medical abortion services from participating pharmacies, 1095 were initiated on contraception after medical abortion.



- Research data showed most used method after abortion being injectables (60%) and pills (42%), while 29% had used IUD, 22% had used male condoms, and 21% ever used emergency contraceptives.
- Majority (91%) of women who were using a method at baseline continuously used or switched to another method by the time of 3-month follow-up; contraceptive continuation was slightly lower among older (25 years and above) than younger women, and among formerly than never or currently married women. Contraceptive

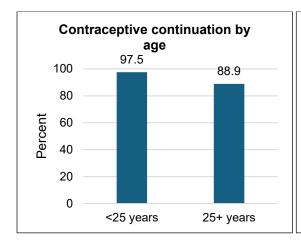


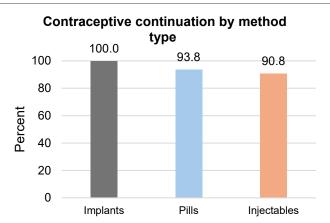






continuation was high across the main method types but highest for implants (100%), followed by pills (94%), and injectables (91%).





CONCLUSION

Building pharmacists' capacity in contraceptive service delivery has the potential to improve contraceptive uptake and continuation among women and girls who self-use medical abortion.