



IMPACT REPORT

FISCAL YEAR 2025

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From the Regional Director

Two Decades of Leadership; One Vision for Reproductive Justice

Since its inception, Ipas Africa Alliance has led the charge in addressing the critical and neglected public health crisis of unsafe abortion in Africa. Today, our work is defined by a transformative shift toward Reproductive Justice, an intersectional approach that champions the right to bodily autonomy, the ability to control one's sexuality, gender, health, and reproduction safely and with dignity, as a fundamental human right. We are seeing systemic shifts that are enhancing the reproductive health rights of women and girls, including access to contraception and safe abortion care. But there still is work to do.

This report reflects our commitment to a holistic reproductive health ecosystem and priorities for the future.

Through our Quality-of-Care work, we provided technical and evidence-based support to national, sub-national and community health systems, ensuring contraceptives and safe abortion healthcare services met the highest global standards and improved health outcomes for women and girls.

Our Policy and Advocacy work proactively collaborated with key stakeholders to create enabling environments for, and to remove legal and policy barriers to, access to SRHR. We worked with policy makers and legislators to secure rights-based policies and laws while challenging anti-rights narratives and efforts that threaten

the progress made on securing of women and girls equality and reproductive rights.

At the community level, we have witnessed the profound impact of community-led interventions in shifting social norms and reducing stigma towards contraceptive and abortion care. By collaborating with Community-Based Organizations (CBOs) and local champions, we increased conversations around the unacceptable burden and cost of unsafe abortions to households and communities including the preventable deaths that arise as a result, and their root drivers including SGBV, poverty, gender inequality, among others.

The challenges of tomorrow, from the climate crisis and related humanitarian crisis these engenders including floods, droughts and famine, to systemic gender-based violence, require even more investments and committed action to advance reproductive justice at the intersection with sexual and gender-based violence, and humanitarian crisis. We remain anchored in the 3rd and 5th Sustainable Development Goals (SDGs) around Good Health and Wellbeing and Gender Equality respectively, as anchor SDGs to the other SDGs. We recognize that sustainable development is only achievable when women and girls have the power to make informed decisions about their health and their futures. Our contribution to making that realized in our society and communities continues.



“Sustainable development is only achievable when women and girls have the power to make informed decisions about their health and their futures.”

Our Footprints in Figures



2

SRHR
Guidelines
finalized
**(1 Kenya,
1 Uganda)**



Civil society
organizations (CSOs)
reached and supported
by Ipas Alliance

12 CBOs



Community
members reached
through dialogue
sessions

9,508



Women and girls
who accessed safe
abortion services

25,830

SMA 3,539 and
22,291 from the
health facilities)



Post medical abortion
contraception uptake
– SMA clients

88%

public health facility
clients 60%



Public and private health
facilities supported to
provide MA services

194

(public 134 (Uganda)
and private 60
(Kenya)



Number of health care
providers trained on safe
abortion care

172

(95 – Uganda, 34 South
Sudan, 43 Kenya)



Commodities
distributed

6,040

doses of Combipack,
32 MVA kits and 42
Vaginal Speculi



Renovations of public
health facilities

120

facilities renovated
in Uganda



POLICY / ADVOCACY

Strengthened capacity of policy stakeholders and civil society to contribute to an improved, sustainable abortion ecosystem

We conducted a five-day regional journalist training in Cape Town, South Africa, bringing together journalists from Kenya, Uganda, Tanzania, South Africa, and Malawi to strengthen their capacity to report accurately and sensitively on SRHR issues, including abortion. Through sessions on abortion laws and policies, opposition toolkits, and rights based storytelling, journalists gained deeper knowledge and practical skills for identifying and countering harmful narratives.

Following the training, participants significantly shifted their reporting approaches - moving away from blame and shame-framing and instead highlighting unsafe abortion as a broader public health and health system challenge. This improved language and framing contributed to more respectful public conversations, helped reduce stigma, and supported a more rights-based media discourse that can influence policy action across the region.

For example, Ghetto Radio, a Kenyan grassroots radio station featured a piece highlighting silence and policy gaps as drivers of unsafe abortion in Kenya. <https://ghettoradio.co.ke/kenyas-unsafe-abortion-crisis-is-fueled-by-silence-not-recklessness/>



Journalist training: “Beyond the Headlines: A Journalist’s Approach to Reproductive Health and Rights.”



15

Journalists
trained



10

Media
stories
published



5

Countries
reached

Advancing Legislative Leadership on Sexual and Reproductive Health and Rights (SRHR)

Our strategic collaboration with lawmakers has strengthened parliamentary leadership and political alignment on sexual and reproductive health and rights (SRHR) by equipping legislators with the knowledge, tools, and strategies needed to advance rights-based policy and budget decisions. Through the Parliamentarians for Global Action caucus, lawmakers deepened their understanding of SRHR frameworks and legislative pathways, contributing to informed oversight and resource allocation.

Our strategic input helped strengthen the Family Sexual and Reproductive Health Bill by ensuring alignment with constitutional principles and international standards while supporting legislators to navigate political and stakeholder dynamics critical to its successful passage. The initiative improved prospects for advancing equitable, comprehensive reproductive health legislation by fostering cross-party collaboration and promoting proactive engagement with key influencers, including religious leaders.



A Kenyan member of parliament discussing SRHR issues with Ipas staff in a past event.

CSO Regional Consultations on Development of African Union Convention on Ending Violence Against Women and Girls in Africa (AU CEVAWG)

The African Union (AU) has developed key frameworks to address violence against women and girls (VAWG), including the Maputo Protocol and the AU Strategy on Gender Equality. However, implementation gaps and new forms of violence prompted the creation of the African Union Convention on Ending Violence Against Women and Girls (AUCEVAWG). To ensure the convention is inclusive and reflective of women's diverse realities, the GIMAC Network—alongside African Renaissance, the Nala Feminist Collective, and UN Women—held consultations with civil society organizations across Africa. As a GIMAC secretariat member and health cluster lead, Ipas Africa Alliance contributed to these discussions, which emphasized SRHR—especially access to safe abortion—as essential for survivor care, and reaffirmed the convention's importance in safeguarding gains made under existing instruments such as the Maputo Protocol.



Alliance staff addressing a ACEVAWG convention in Addis Ababa, Ethiopia.

Strengthened Youth-Led Advocacy and Policy Engagement on SRHR in Kenya

We supported youth leadership and regional advocacy on sexual and reproductive health and rights (SRHR) across East Africa by building young people's knowledge, agency, and capacity to challenge structural and cultural barriers to care. Through a reproductive justice-driven approach, youth from Kenya, Uganda, and Tanzania were equipped with practical skills to access SRHR information and services, identify and respond to restrictive laws and opposition groups, and monitor anti-rights movements affecting reproductive autonomy.

The initiative resulted in a more informed and organized cohort of youth advocates capable of navigating complex service-delivery environments and advancing rights-based narratives within their communities and national contexts. By centering youth voices and lived experiences, the

program reinforced youth-led advocacy as a critical driver of sustainable SRHR progress in the region.

In parallel, collaboration with NAYA (Network for Adolescent and Youth of Africa) enabled the co-development of a two-year national youth-led advocacy strategy on priority SRHR issues. This strategy provides a coordinated, rights-based roadmap for collective action, strengthening youth influence on policy discourse and contributing to longer-term systemic change in SRHR access and equity.



2

Youth workshops held



Youth from East Africa attending a SRHR convention meeting in Nairobi, Kenya

Enhanced Strategic Partnerships with Regional Coordination Bodies

We advanced continental accountability for women’s and girls’ reproductive health and rights through sustained, high-value engagement with the African Commission on Human and Peoples’ Rights (ACHPR). By strategically leveraging ACHPR’s normative and oversight role under the African Charter and the Maputo Protocol, we contributed to shaping regional policy discourse and advancing rights-based legal standards across Africa.

Participation in the 81st Ordinary Session of the ACHPR resulted in tangible institutional outcomes. Our evidence-based recommendations—including the decriminalization of abortion and accelerated domestication of the Maputo

Protocol—were reflected in the official report of the Special Rapporteur on the Rights of Women in Africa (SRRWA), reinforcing these priorities within the Commission’s formal guidance to member states. Ipas-supported initiatives were also integrated into the Rapporteur’s activity report to commissioners, strengthening visibility and institutional ownership of SRHR priorities.

Through convening and contributing to high-level fora on reproductive justice, gender equality, comprehensive sexuality education, and ending violence against women and girls, Ipas influenced the final NGO Forum outcomes and ensured that critical SRHR recommendations informed civil society advocacy at the regional level. Recognition of Ipas as a strategic partner—evidenced by the invitation to participate in ACHPR’s 2025 annual planning meeting—positions the organization to continue shaping regional agendas and supporting implementation of international human rights obligations.



SOAWR side event in collaboration with the Special Rapporteur on the Rights of Women in Africa.

Increased Knowledge, Skills, and Tools to Swiftly Respond to and Counter Opposition Tactics

Ipas strengthened grassroots resilience against anti-rights movements in Kenya and Uganda by equipping civil society organizations (CSOs) with practical tools to anticipate, monitor, and counter opposition to sexual and reproductive health and rights (SRHR). Targeted capacity-building enhanced local actors' ability to analyze opposition tactics, respond rapidly to emerging threats, and protect gains in rights-based advocacy. As a result, CSOs translated learning into action—successfully applying opposition-monitoring frameworks, developing context-specific response strategies, and deploying coordinated advocacy interventions to challenge harmful narratives and promote inclusive values.

- **Kenya:** CSOs rapidly countered two high-profile anti-rights actions by organizing parallel public engagements that challenged regressive exclusionary narratives and promoted inclusive interpretations of family and reproductive rights.
- **Uganda:** CSOs neutralized harmful messaging at a major regional parliamentary forum through coordinated media engagement and a public awareness campaign, reframing “African values” around dignity, inclusion, and human rights.



11

CSOs trained on opposition monitoring

Enhanced Provision of Support to the Ministry of Health in Finalization of SRH Self Care Guidelines

In Uganda's restrictive policy environment, Ipas engaged national and district-level policymakers to strengthen commitment to safe abortion and post-abortion care, culminating in a key milestone: the finalization and national launch of the SRH Self-Care Guidelines in October 2024, which Ipas supported technically and financially. The guidelines have since been integrated into national policy discussions, positioning self-care—including post-abortion care—as a legitimate, rights-based service delivery model. The launch generated strong political and sectoral momentum toward adopting self-care interventions as essential strategies for reducing maternal and newborn mortality.

Building on this progress, Ipas is supporting district leadership to adapt and implement the guidelines within local health systems, laying the groundwork for sustained institutionalization of PAC within Uganda's maternal health programming. This achievement reflects strengthened political will, improved policy frameworks, and growing leadership at all levels to translate advocacy gains into lasting health system reforms.



IMPROVED GENDER AND SOCIAL NORMS REGARDING ABORTION

Ipas AA has worked with community leaders, men, boys, adolescents, faith actors, and local administrators to **challenge harmful gender and social norms** that restrict women and girls' access to safe abortion and SRHR. Through reflective dialogues, community mobilization, and media engagement, our interventions have not only increased awareness but also shifted behaviors, reduced stigma, and fostered more supportive environments for women and girls.

- Through the efforts of CAITHS, RHI, and CYAN CBOs, fisherfolk communities in Kenya's Homabay County took significant steps to **end the exploitative practice** of "sex for fish." Beach management units (BMUs) were trained to hold perpetrators accountable, protect adolescents from exploitative labor, and promote women's economic empowerment through boat ownership. In Sindo, CYAN's advocacy for women's boat ownership addressed historical gender imbalances in the fishing sector, reducing disparities and enabling women to overcome financial and social challenges while fostering solidarity among female fish traders.



RHI, a local CBO supported by Ipas, engaging the fisherfolk community along Lake Victoria.



Strengthened Capacity of Community-Based Partner Organizations

The core focus of the Wellspring Project has been building the capacity of local community-based organizations (CBOs) to design, lead, and sustain strategies that contribute to a supportive abortion ecosystem. Through targeted mentorship, technical assistance, and financial support, our partners are increasingly demonstrating independence, innovation, and sustainability in their programming.



CBO staff in Kakamega holding a dialogue session with the community members.

Enhanced Knowledge and Digital Advocacy Skills on SRHR via Youth-led Engagement Workshop

Ipas reinforced youth-led digital transformation by convening a diverse group of young people—from tertiary institutions, universities, informal employment, and out-of-school settings—to shape inclusive, technology-driven advocacy for sexual and reproductive health and rights (SRHR). By intentionally centering youth voices and lived realities, the initiative positioned young people not only as beneficiaries, but as digital actors and change-makers within SRHR ecosystems.

This intervention strengthened young people’s digital literacy and confidence to navigate online civic spaces, equipping them with practical tools to create, share, and mobilize rights-based SRHR content. Youth participants deepened their understanding of critical issues such as stigma, sexual violence, and access barriers, enabling them to translate complex SRHR concepts into relatable, community-relevant digital messaging.

Collaborative design sessions catalyzed the co-creation of youth-driven digital solutions tailored to local SRHR challenges, reinforcing innovation, ownership, and sustainability. Values-clarification and myth-busting exercises further supported digital norm-change by fostering informed, open attitudes toward gender, sexuality, and abortion—key to countering misinformation and stigma in online spaces.



Youth who attended the digital engagement meeting.

Multi Stakeholder Community Engagement

In Uganda, Ipas enhanced community engagement and advanced positive social norm change on adolescent SRHR by convening multisectoral sensitization workshops and district-level dialogues across key regions, increasing stakeholders' knowledge of SRHR frameworks and generating district action plans. These efforts mobilized leaders to champion prevention of teenage pregnancy, influenced reforms of harmful cultural practices, and contributed to the adoption of protective by-laws—such as the ban on “disco matanga” in Tororo and Busia—ultimately catalyzing stronger community ownership and sustained implementation of SRHR policies.



4

Districts reached



105

Stakeholders sensitized



Rev. Mugalu highlighting the role of religious leaders in curbing teenage pregnancy during the central regional advocacy workshop.

Formations of SRHR Coalitions in Uganda

With Ipas technical and financial support, two SRHR coalitions were formed in Tororo and Busia. These coalitions convened capacity-building meetings, eight multi-stakeholder dialogues, radio talk shows, and SRHR awareness camps, reaching a total of 675 stakeholders. These engagements indirectly contributed to tangible results, including a reduction in teenage pregnancy and an increase in adolescents aged 10–19 accessing SRHR services, largely attributed to improved relationships between providers and adolescents.

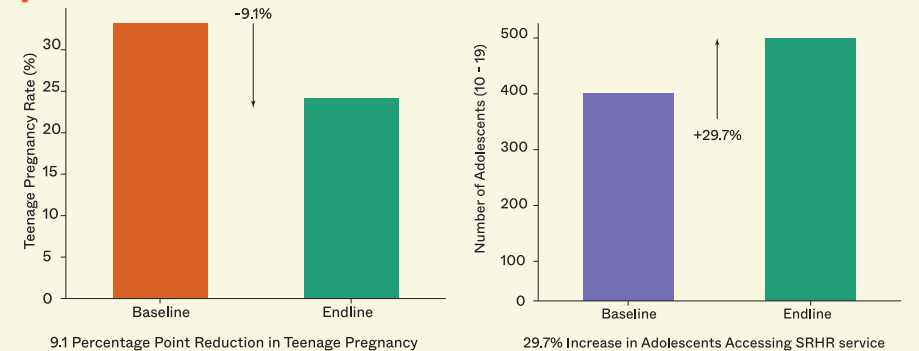
District governments also made noticeable budget allocations for SRHR and adolescent pregnancy prevention in FY24/25. At the community level, the implementation of national strategies contributed to increased school re-entry and access to skilling opportunities for young mothers.

In addition to these outcomes, Ipas provided continuous mentorship to the coalitions, supporting advocacy champions to participate in the ‘Billi Now global campaign’ and strengthening local fundraising capacities. A notable milestone was achieved when coalition member TDYAN secured new funding in consortium with Kyetume, underscoring the sustainability and resilience of coalition-building efforts. Collectively, these achievements reflect how strengthening grassroots coalitions amplifies civil society’s voices, drives policy adoption, and sustains momentum on adolescent SRHR at both community and governance levels.



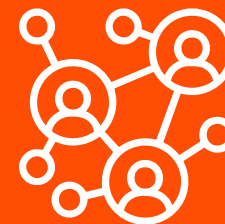
Quarterly learning meeting for the coalition members in Busia, Uganda.

Increased budget for SRHR and adolescent pregnancy prevention



2

Coalitions formed



675

Stakeholders reached

Tororo Youth District Advocacy Network (TDYAN) Impact: Shifting Social Norms and Strengthening Community Support

Through coordinated efforts by IBRC and TDYAN, social norms around abortion shifted significantly, creating an enabling environment for women and girls to access care without fear or stigma. TDYAN engaged 304 religious leaders and community influencers as champions for safe care, reached 2,500 people with accurate SRHR information, and trained 39 peer educators and health workers, resulting in over 700 referrals for CAC and PAC. The innovative youth-led theatre model further challenged stigma and sparked open dialogue, blending art and advocacy to normalize abortion as a life-saving intervention.



304

Religious leaders and community influencers engaged as safe care champions



2,500

People reached with accurate SRHR information



39

Peer educators and health workers trained



IMPROVED ACCESS, AVAILABILITY, ACCEPTABILITY, AND QUALITY OF SRHR

Expanded Access to Medical Abortion through Community Pharmacies in Homabay and Migori counties - Kenya

By strategically engaging community pharmacies as frontline access points within existing legal and healthcare frameworks, Ipas Africa Alliance is strengthening access to safe, self-managed medical abortion (SMA) services in Homabay and Migori counties. Through a targeted mapping exercise, 32 community pharmacies were identified and activated as potential or existing service delivery points—expanding the reach of reproductive health services closer to where women and girls seek care.

The intervention demonstrated strong system readiness, with **90% of mapped pharmacies expressing capacity and willingness** to provide medical abortion services in compliance with national guidelines. Targeted competency-based trainings equipped pharmacists with critical skills in pregnancy dating, appropriate medical abortion regimens, post-abortion contraception, and stigma reduction—shifting pharmacies from informal dispensing points to informed, rights-based providers.

- Access points for medical abortion increased by 26% in targeted communities;
- **1,227 clients** safely accessed MA services through trained pharmacy outlets; and
- Pharmacists' knowledge and confidence significantly improved, with a **10-percentage-point increase** in competency scores (from an average of **73% pre-training to 83% post-training** among assessed participants), alongside documented reductions in stigmatizing attitudes related to abortion care.



26

Percentage increase
in medical abortion
access points



1,227

Clients who accessed
medical abortion services
through trained pharmacy
outlets

Building a compelling business case for sustainable pharmacy-based post medical abortion contraceptive services

During FY25, the PMAC project assessed the business viability of pharmacy-based contraceptive services in Kenya using financial and service data from community pharmacies. Findings showed most pharmacies were profitable, with contraceptives contributing about one fifth of net profits and yielding higher margins than other products. Younger pharmacy owners tended to perform better financially, and pharmacies converted roughly 80% of medical abortion clients to contraceptive users, underscoring their role in linking abortion care to family planning. Successful pharmacies combined sound business practices with modern strategies such as digital marketing, community engagement, supply chain optimization, and valuebased, digitally enabled care to improve efficiency and client outcomes.

Improved Attitudes and Knowledge of Health Service Providers towards the Provision of Safe Abortion Services

A Values Clarification and Attitude Transformation (VCAT) training was delivered successfully to health service providers across project-supported facilities, to strengthen provider attitudes and competencies in the provision of safe abortion services. The training reached a diverse clinical cohort—including medical officers, clinical officers, nurses, and midwives.

As a result of the training, providers demonstrated significant improvements in knowledge, attitudes, intentions, and practices related to safe abortion access. KAPI assessment results showed an increase in average scores from 83.22% at pre-test to 94.59% at post-test, reflecting an 11.37 percentage-point gain. In addition, clinical knowledge scores increased substantially, rising from a pre-training average of 58.6% to 78.8% post-training, representing a 20.2 percentage-point improvement. These results indicate strengthened provider readiness and improved service delivery capacity for safe abortion services.



11.37

Percentage change in attitude



22,291

Women and girls who accessed safe abortion services in Uganda



20.2

Percentage increase in clinical knowledge

Supported Supply Chain of the Safe Abortion Commodities and Equipment

Ipas procured 6,040 doses of Combipack, 32 MVA sets and 42 vaginal speculi and supplied across its 134 intervention sites which strengthened their stock levels of the safe abortion products supplement to the government supply chain. This enabled continued and sustainable provision of the safe abortion services in the targeted facilities in Uganda.



HSS advisor taking a health provider through a process of updating an inventory record at the facility.

Renovations and Improving and Quality of Care

We improved the quality and readiness of PAC and CAC services by upgrading infrastructure in public health facilities across Uganda, with 48 receiving full renovations. These upgrades—ranging from improved procedure rooms and enhanced privacy to strengthened infection-prevention standards and provision of essential furniture—created cleaner, safer, and more confidential environments for women and girls. As a result, providers reported improved workflow and greater confidence to deliver PAC, while communities demonstrated increased trust through higher referrals and earlier care-seeking. The renovations have established a durable foundation for consistent, high-quality, and respectful maternal health care in all supported facilities.



120

Public health facilities renovated/ refurbished



Before and after renovation: The floor of a procedure room at Bugembe HCIV.

In South Sudan

Strengthened SRHR Delivery through Values Clarification

In April 2025, Ipas advanced quality and equity in sexual and reproductive health and rights (SRHR) service delivery in South Sudan through a Values Clarification and Action Transformation (VCAT) workshop convened in Juba. The engagement delivered measurable improvements in stakeholder capacity, knowledge, and attitudes—critical foundations for rights-based, client-centered care in restrictive contexts.

Among 34 participating stakeholders, **SRHR knowledge increased by 25 percentage points** (from 53% to 78%), while **positive attitudes toward SRHR rose by 31 percentage points** (from 64% to 95%), as evidenced by pre- and post-training assessments. Participants reported increased confidence to address complex and sensitive SRHR issues and to navigate legal, cultural, and social barriers affecting service delivery.

The workshop reinforced SRHR as a core human rights and social justice priority, strengthening stakeholder commitment to stigma-free, respectful, and client-centered services. By driving values-based transformation alongside technical understanding, the intervention strengthened a key health systems lever—provider and stakeholder attitudes—contributing to more ethical, inclusive, and high-quality SRHR care for women and girls in South Sudan.



25

Percentage change in knowledge gain



25

Percentage increase in SRHR knowledge among participants



21

Percentage change in attitude amongst the health care workers



31

Percentage increase in positive attitudes toward SRHR among participants



Participants being engaged during a VCAT session.

VOICES THAT VALIDATE OUR IMPACT

YOUTH

“Medical treatment alone is not enough. Counselling helped me feel human again.” **PAC Youth Beneficiary**

“Working with IPAS this past year as a Youth Champion has been truly transformational. Unlike typical youth-adult partnerships, we were trusted to make decisions, lead youth-driven activities, and continuously strengthen our skills. This experience has not only expanded my capacities but also deepened my confidence and perspective as a young leader, showing the power of meaningful youth engagement.” **Youth Champion**

WOMEN

“After I was helped, I told my friend not to go to the old woman. I told her to come to the facility because they treat you well and keep your secret. That is how others are now coming.” **PAC beneficiary in one of the Ipas-supported facilities in Uganda.**

“Through our partnership with IPAS, our organization has strengthened community-led, rights-based SRHR programming in Homa Bay County—advancing compassionate and accurate abortion care narratives, meaningful adolescent engagement, reduced stigma, and improved access to safe, respectful, and informed care. This collaboration reflects our commitment to empowering choices and protecting rights.” – **CBO Leader Kenya**

“We no longer receive women when they are almost dying like before. Community sensitization has helped them to come early. That change is because of TDYAN and IPAS working with community structures.” **Health worker, Uganda**

HEALTH PROVIDERS

Health worker recommendation for future approach to trainings.

“The training we received was very helpful, but it was only done once. With staff transfers and rotation, some of us who were trained are not always around. Regular refresher trainings would help maintain skills and ensure continuity.” **Health worker**

“I am deeply grateful to IPAS for the opportunity to attend the Beyond the Headlines SRHR training held in South Africa from 28 April to 3 May. The training strengthened my ethical, balanced, and impactful SRHR reporting skills and marked my first visit to South Africa, an experience I truly value. Applying the knowledge gained immediately after the training enabled me to secure a four-month DW fellowship on AI in the Newsroom, where I am amplifying SRHR voices through AI-assisted journalism. IPAS set a strong foundation for my professional growth, and I continue to carry this impact forward in my work.” **Journalist**

“I never thought I would have open conversations with my daughters about these issues. But now, through the Ipas training programs, I understand that my role as a father and an elder goes beyond providing—it’s about guiding, protecting, and ensuring our children and community grow up with the right information.” **Community Elder**

EVIDENCE FOR ACTION IN REPRODUCTIVE HEALTH

Evidence For Action In Reproductive Health

Behind the Counter: Transforming Post-Abortion Contraceptive Care in Kenyan Pharmacies.

Authors: Kristen Shellenberg¹, Steve Biko¹, Lucy Nyamwaro¹, Beatrice Otieno¹, Musoba Kitui¹, Francis Onyango² and Wilson Liambila²

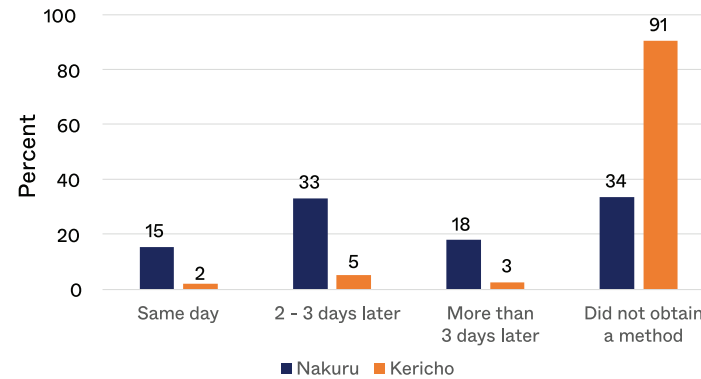
PMAC Project Goal: Develop scalable, evidence-based interventions to increase uptake and continuation rates of contraception after self-managed abortion among women of reproductive age in Kenya

Two project locations: Intervention County: Nakuru
Control Country: Kericho

Data are from the baseline of a prospective study conducted in Nakuru and Kericho counties of Kenya.

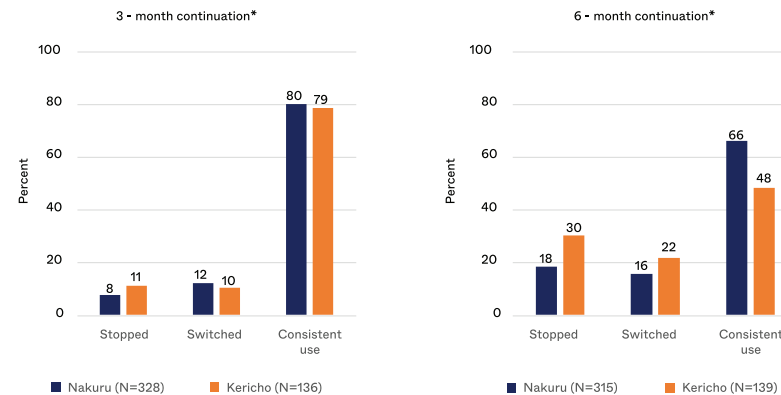
524 Women (363 in intervention and 161 in comparison site) were recruited from 27 community pharmacies in the intervention and 16 community pharmacies in the comparison site.

Timing of Contraceptive Uptake Following MA Purchase



Number of cases: Intervention = 357; Comparison = 159

Contraceptive Continuation Among All Women



*Among women using a method at the previous interview or who took up a method since the previous interview.



Results Summary

- Women in our intervention group were 7 times more likely to take up contraception at the time of MA.
- Although the gap in contraceptive use narrowed over time, women in the intervention group were protected from pregnancy closer to the MA event – a time of high risk for pregnancy.
- By 6 months post-MA, women in the intervention group were more consistently using a method, likely due in part to follow-up from PMAC pharmacists ensuring continuity of care over time.
- Continuation of most effective methods (injectables, pills, and LARCs) was consistently higher in the intervention than in the comparison site.

Ipas

CLIENT'S VOICE: “I felt really nice since most of them would just provide the service and never make any follow-up later on.... He asked me how my health was and if I encountered any difficulties. Other pharmacies are not that good since they will just leave you hanging.” **(Married 40-year-old, Nakuru).**

Ipas Africa Alliance envisions world where all people have the right and ability to determine their own sexuality and reproductive health. As partners of Reproductive Justice we build sustainable abortion and contraceptive ecosystems using a comprehensive approach across sectors, institutions and communities.

Ipas Partners for
Reproductive Justice
AFRICA
ALLIANCE

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