

Recommended actions for advocates



Photo: PATH/Will Boase

Recommended actions for advocates to advance DMPA-SC, including self-injection

Many family planning advocates are pursuing increased choices and access to contraception for women and adolescent girls in their countries. The introduction and scale-up of easy-to-use injectable subcutaneous DMPA (DMPA-SC[†]) can facilitate progress toward expanded contraceptive access and realization of the Sustainable Development Goals—especially Goals 3 (good health and well-being) and 5 (gender equality).

How to use this tool: This tool provides examples of actions that may be useful for advocates seeking to increase access to DMPA-SC, including self-injection. Actions are grouped by three key themes: using evidence to inform advocacy, conducting direct advocacy with decision-makers, and informing and influencing policies.

1. Use this tool in conjunction with the “Advocacy strategy development template” to formulate a robust strategy.
2. Consider this tool a starting point for generating policy goals and advocacy actions relevant to your country’s stage. These are illustrative suggestions—you do not need to conduct every activity, and you may need to adapt them for individual country contexts.
3. Don’t be afraid to innovate with your advocacy actions! Creativity and ingenuity can make a huge difference in the lives of women and adolescent girls.

Helpful hint:

It is important to frame your DMPA-SC and self-injection advocacy within the larger context of informed choice, broad method mix, and contraceptive access. A wide range of family planning methods should be accessible to women and adolescent girls, and they should be able to freely choose the method that best meets their needs.

[†] DMPA stands for depot medroxyprogesterone acetate. Sayana[®] Press is the current brand name and a registered trademark of Pfizer Inc.

Use **evidence** and data to help inform decision-making on DMPA-SC and self-injection.

Action: Share information with your country’s decision-makers about how introduction of DMPA-SC, including self-injection, can help increase method choice, address unmet need, and expand access to contraceptives in your country.

Action: Learn about your decision-makers’ DMPA-SC and self-injection information needs and connect with research and/or implementing partners to identify existing evidence that can be shared and/or to determine if new data or studies are needed. (The “Evidence at-a-glance” resources within this Advocacy Pack are a good starting point.)

Action: Encourage researchers to engage a wide variety of decision-makers, advocates, and women’s and youth groups in the design of DMPA-SC and/or self-injection data collection or research studies in your country. This will help ensure their buy-in and interest in using results to make informed changes to policies and programs.

Action: Track new and recent research on introduction and scale-up of DMPA-SC and self-injection in your own and neighboring countries. Collaborate with research and implementing partners to spotlight studies/efforts and their importance for evidence-based decision-making.

Action: Work with researchers and implementers to help translate and package their emerging data and evidence for specific use by policymakers, to inform their decision-making on:

- Policy development and implementation related to DMPA-SC and/or self-injection.
- National and subnational scale-up of DMPA-SC and/or self-injection.
- Expansion of DMPA-SC and/or self-injection through additional delivery channels (e.g., community health workers and pharmacies).

Engage in direct **advocacy** to build momentum for DMPA-SC and self-injection.

Action: Generate demand for a range of contraceptive options in your country, including DMPA-SC and self-injection, especially among health workers, women, and adolescent girls. Bring citizen voices to bear on the decisions and actions of policymakers, including through media.

Action: Conduct and/or update stakeholder mapping to identify key decision-makers and influencers—including donors—with whom to engage on DMPA-SC and self-injection advocacy.

Action: Foster commitments by decision-makers to expand access to a broad range of contraceptive options and access opportunities for women and adolescent girls, including making DMPA-SC and self-injection available in your country.

Action: Conduct direct outreach meetings with target decision-makers, donors, and influencers on DMPA-SC and self-injection, including specific calls for:

- Inclusion of DMPA-SC in your country’s contraceptive method mix.

Helpful hint:

The Advocacy Pack for Subcutaneous DMPA has a variety of evidence-based tools and templates—including a product overview, evidence at-a-glance, and key facts guide. Start off by getting familiar with these tools and the evidence they offer. You can then adapt these resources for use with decision-makers in your country.

Helpful hint:

Depending on your country context, there are many policies that can expand access to DMPA-SC and self-injection. For examples of policies that may be relevant, see “**Important policies for advancing access to subcutaneous DMPA**” within this Advocacy Pack.

- Access to DMPA-SC and self-injection through multiple service delivery channels for women and adolescent girls in your country.
- Consideration of a total market approach—in both the public and private sectors—in the provision of DMPA-SC and self-injection.
- Development and/or harmonization of related national and subnational health and development policies to support scale-up of DMPA-SC and self-injection, including through multiple service delivery channels.
- Dedicated, long-term funding—including domestic resources—for DMPA-SC and self-injection programming, including financing for product supply and health worker training.

Action: Build alliances with advocates working on broader contraceptive access issues—such as task-shifting/task-sharing, self-care, private-sector engagement, and/or method choice—and include DMPA-SC and self-injection messaging and policy objectives as part of a shared advocacy agenda.

Action: Monitor DMPA-SC and self-injection program/introduction sites to ensure there is a broad method mix (not just DMPA-SC) and informed choice counseling for women and adolescent girls, as well as to guard against stockouts of DMPA-SC and other contraceptive supplies. Bring issues to the attention of implementing partners and ministry officials.

Understand, inform, and influence policies that expand access to DMPA-SC and self-injection.

Action: Draw on additional tools in this Advocacy Pack, including “Important policies for advancing access to DMPA-SC” and the “Advocacy strategy development template” to map your country’s policy gaps, bottlenecks, and potential enablers to support expanded access to DMPA-SC and self-injection for women and adolescent girls.

Action: Bring together decision-makers, advocates, researchers, implementers, health professionals, and citizen representatives in targeted dialogue to jointly address and advance expanded access to a diverse contraceptive method mix, including DMPA-SC and self-injection, through policy change and implementation.

Action: Provide targeted policy development support given your individual or organizational expertise and/or facilitate connections between decision-makers and global and regional partners to ensure policy development support for introduction and scale-up of DMPA-SC and self-injection.

Action: Monitor the implementation of relevant policies and their impact on access to DMPA-SC and self-injection for women and adolescent girls, and spotlight accountability concerns with key decision-makers and duty-bearers.

Helpful hint:

Don’t go at it alone with your advocacy for DMPA-SC and self-injection. In addition to collaborating with other advocates, make sure you are working with and within broader family planning and sexual and reproductive health mechanisms in your country, such as technical working groups or advocacy coalitions.

Helpful hint:

As you conduct your policy mapping, it is important to keep in mind the different service delivery channels you aim to leverage for DMPA-SC and self-injection in your country. These channels may include public-sector facilities, community-based distributors, and pharmacies and accredited drug shops.

Depending on your target service delivery channel(s), there may be unique policy barriers or opportunities. For example, if your country is exploring using community health workers or pharmacists to teach women how to self-inject, you may need to develop or amend specific policy guidelines.

Your innovative actions here:

Write your innovate actions in this space.

Useful resources:

[Advocacy strategy development template](#)

[Important policies for advancing access to DMPA-SC, including self-injection](#)

Family Planning High Impact Practices brief: [Comprehensive Policy Processes: The agreements that outline health goals and the actions to realize them](#)

Your access and accountability questionnaire

As an advocate, one of the most important actions you can take is to ask key questions of decision-makers about access related to DMPA-SC and self-injection. Doing so can help hold decision-makers and other key stakeholders accountable for authorizing and implementing critical policies and living their stated commitments. For example, asking your ministry of health (MOH) about the status of self-injection authorization for different cadres can help reinforce this as a priority issue, and encourage the MOH to address any bottlenecks in the policymaking and implementation process.

Use these questions to spark dialogue with relevant stakeholders.

1. Initiation

- Does your MOH understand how the ease of use and unique features of DMPA-SC, including the option for self-injection, can provide opportunities to expand access to injectables and diversify the contraceptive method mix?
- Is product registration in place or underway for DMPA-SC, inclusive of self-injection?

2. Preparation

- Has a comprehensive introduction plan been developed, and is someone accountable for overseeing it?
- Has funding been identified and secured to support introduction?
- Do policy restrictions on community-based distribution, provision of injectable contraceptives in pharmacies and drug shops, and/or self-injection exist?

We love your ideas.

Tell us what innovative actions you are taking to advance access to DMPA-SC and self-injection in your country that can be shared with others. Email us at FPoptions@path.org.

3. Introduction

- Have significant stockouts of DMPA-SC occurred, and, if so, in which delivery channels and at which level of the supply chain?
- Have advocates received data and information from introductory efforts and research studies, including from other countries?
- Is DMPA-SC and self-injection being introduced and scaled up within the context of informed choice? How is quality of care being monitored?
- Are policy discussions on scale-up and institutionalization taking place? Do these include dialogue on product affordability for the MOH and consumers, and sustainable financing for procurement, distribution, and programming?

4. Integration

- Has DMPA-SC been made available throughout your country?
- Has self-injection been made available throughout your country?
- Has DMPA-SC been included in all relevant policies affecting access, including the national Essential Medicines List, community-based distribution, private-sector provision, self-injection, and self-care?
- Has sustainable financing been identified and secured to support institutionalization or access at scale?