Practice/policy implications

DMPA-SC SI (self injectable contraceptive) has the potential to help women improve on their self-care options in contraceptive use and do away with access hurdles. The ICAN project work will expand understanding and measurement of contraceptive autonomy and allow for characterization and robust assessment of the association between SI use, progress towards fertility goals and contraceptive autonomy.











41

A woman selfinjecting while demonstrating to fellow women in Oyam

STUDY SITES

PRIMARY SITES (Mayuge and Oyam districts) **SECONDARY SITES** (Kole, Lira, Iganga, and Jinja districts)

STAKEHOLDERS IN UGANDA

- 1) PATH
- 2) Community-based Organizations
 - AIDS Informations Centre (AIC), Oyam District
 - Baitambogwe Community Healthcare Initiative (BACHI), Mayuge District



Makerere University School of Public Health P.O.BOX 7072 Kampala, Uganda

Tel: +256-414-543872

Email: dean@musph.ac.ug

Website: advancingmnch.org/about



The ICAN project is rooted on the idea that women's autonomy and decision-making should be a key priority in all sexual and reproductive health (SRH) efforts. Through a variety of research methods, scalable approaches tailored to meet women's needs are being identified, developed, and evaluated.











ICAN Project

Project Summary

ICAN project seeks to obtain a deeper understanding of how self-injection (SI) subcutaneous Depot medroxyprogesterone acetate (DMPA-SC) can be implemented to support informed contraceptive choice and use from the perspective of women through exploring interest in SI use, identifying promising implementation approaches. DMPA-SC was first introduced in Uganda in 2013 and was initially administered by village health teams (VHTs) and midwives; it's now available for home use and self-injection and it is currently under nationwide scale-up. ICAN project seeks to answer two key questions;



How can self-injection of DMPA-SC be implemented in a way that best meets women's needs as they themselves define them? This involves: a) formative qualitative research looking at barriers and facilitators of uptake of self-injection: and b) development of self-injection of DMPA-SC program enhancements using human-centred design (HCD) methods.

2

Can self-injection enhance contraceptive empowerment for women who face the most barriers? This involves: a) development and validation of measures of contraceptive autonomy; and b) longitudinal cohort study in which, women (including users and non-users of contraception – and SI) will be followed over an 18-month period.

ICAN overall specific aims



PHASE 1 aim:

Deeply understand contraceptive decisionmaking & women's experiences seeking, accessing, and using contraception, to understand for whom self-injection may be a powerful method.



PHASE 2 aim:

Identify effective approaches for introducing and supporting the use of self-injection (in the context of a full basket of contraceptive options) in a way that helps women overcome barriers and optimize facilitators to contraceptive decision-making and use

The project primary sites are Mayuge and Oyam districts and secondary sites are Kole, Lira, Mayuge and Jinja districts.

Investigators



PI Associate Professor Kelsey Holt, University of California, San Francisco, USA



PI Associate Professor Jenny Liu, University of California, San Francisco, USA



Co-PI Associate Professor Peter Waiswa, Makerere University, Uganda



Co-PI Associate
Professor Lynn
Atuyambe
Makerere
University, Uganda



Co-PI Dr. Dinah Amongin, Makerere University, Uganda

Activities

- Conducted in-depth interviews with 60 women to understand barriers and facilitators to contraceptive use:
- Conducted cognitive interviews with diverse pool of women to test different questions to include in scale to measure contraceptive agency.
- Designed appropriate community-based interventions for offering DMPA-SC SI using human-centered design (HCD) process. This involved insight gathering among contraceptive users and health providers, followed by individual and group brainstorming on insights to generate intervention ideas which we iteratively prototyped into testable formats and refined based on testing feedback among potential users.
- Currently, we are conducting a longitudinal observational cohort study using quantitative methods. Specifically, we have so far screened 1,994 women and conducted baseline survey with a cohort of women 1,913 women (including users of SI contraception (276), and non-users of contraception (419) and users of other FP methods (1,218)).
- Currently, we are also implementing a pilot of the social support program aimed at strengthening women's contraceptive agency, where 30 satisfied SI users were engaged to provide informational, instrumental, emotional and appraisal social support to women in making and acting on their contraceptive decisions.

Next steps/planned activities

- Midline survey (6 months follow-up) for the longitudinal observational cohort study will commence in April 2023 and endline survey (12 months follow-up) will commence in November 2023.
- Evaluation of the implementation of social support program will be done to assess potential effectiveness of the intervention and factors surrounding its implementation.