

EXPANDING THE BASKET OF CHOICE IN THE PUBLIC SECTOR: A NECESSITY

Policy Brief | August 2023

Transforming Access by Improving Choice and Options

India has by far the oldest family planning programme in the world and is a key stakeholder towards various global commitments. But India's success to move the needle from family planning to contraception has not always been successful. With changing times, technology and needs, family planning should be viewed in the larger 'choice' and 'sexual and reproductive rights' conversations. **India's unmet need for modern methods of contraception is at 9.4%¹, whereas the current contraceptive practices are heavily skewed towards female sterilisation.**

The focus is towards birth limitation rather than planning, which completely excludes youth and young people from the conversation on Sexual and Reproductive Health and Rights (SRHR). The basket available in public health is limited and often sterilisations especially targeted to women become the core function. There is an urgent need to mainstream choice in conversations and expand the basket of choice with the availability of implants in public health systems. India's programme should make concerted efforts to include more Long Acting Reversible Contraceptives (LARC) methods in public health systems.

Data from various medical and global research suggest that implants are a safe and effective method and have been well received in many countries. It has been approved for use in the private sector in India. However, due to price constraints, the product becomes inaccessible to rural and marginalised women. India's contraceptive needs require a shift and inclusion. To meet the rising demand for modern methods, it is critical that future programmatic efforts provide methods that are both accessible and acceptable to users. **Introducing implants in the public sector would improve choices as well as uptake of modern methods of contraceptives².**

¹ National Family Health Survey (NFHS) - 5

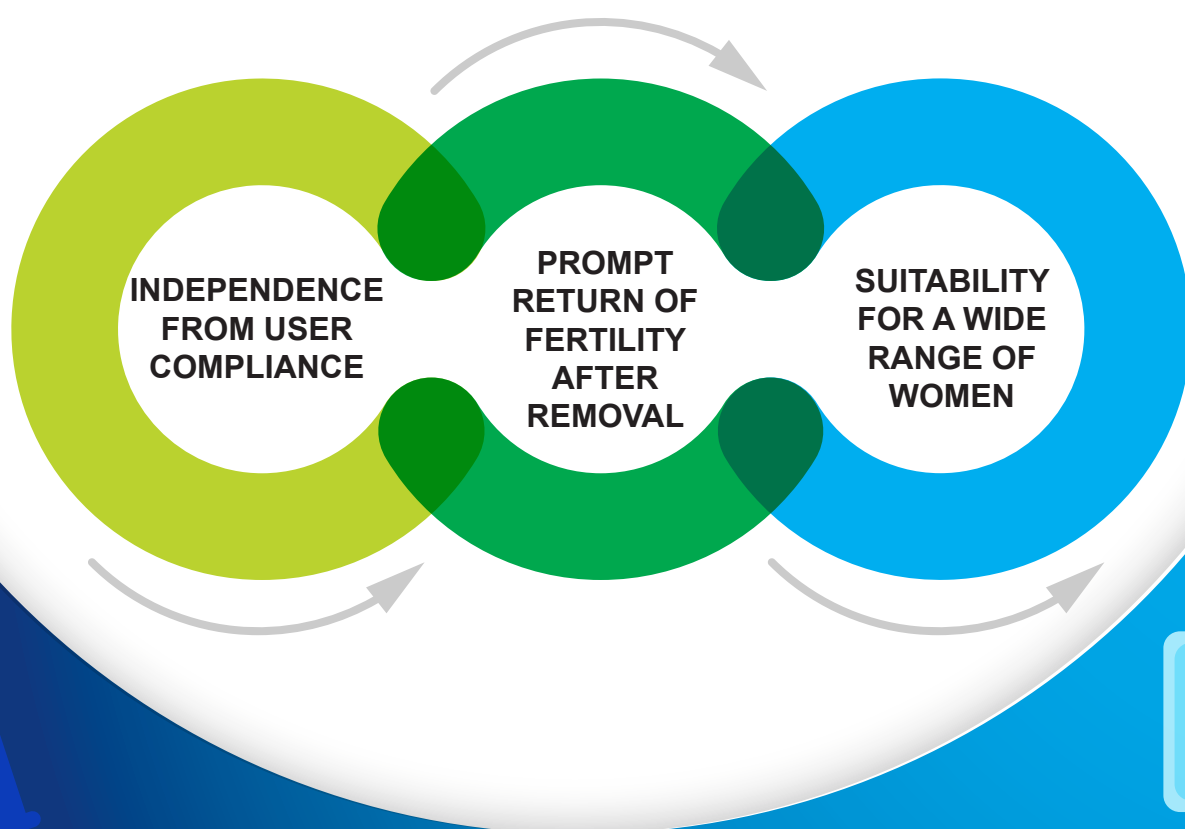
² Population Foundation of India. (2020). Evidence on contraceptive method mix in developing countries: South and South-East Asia. Retrieved from

Research Overview

The safety and efficacy of the method is indicated through available and emerging evidence from pilot introductions and studies on implantable contraceptives, a matchstick-sized rod that is inserted in the arm to prevent pregnancy. Implant contraceptives are being used in many countries worldwide. The major advantage is that it gives control to the woman and is active for a particular period of time after which it is completely reversible.

National surveys of several sub-Saharan African countries have revealed increased implant use as the main driver of improvement in modern Contraceptive Prevalence Rate (mCPR), with gains in implant use alone exceeding combined gains in the use of injectables, pills, and Intrauterine Contraceptive Device (IUCDs³).

In a study⁴ conducted in India to determine acceptability, efficacy, safety and return of fertility with Implanon, a subdermal single-rod contraceptive implant, it was found that Implanon was an extremely safe, effective, well-accepted method of contraception. The study also highlighted the advantages of this contraceptive method including:



Implants make family planning possible throughout reproductive life as:

They may be used to postpone the first pregnancy

To 'space' pregnancies or to provide reversible, long-term contraception when the desired family size is reached

Since implants do not contain oestrogen, they can also be used in women who do not want to or cannot use Combined Oral Contraceptives (COCs). **Moreover, implants are found to be 99% effective in terms of cost and use in comparison to other contraceptives⁵.**

³Jacobstein R. Liftoff: The Blossoming of Contraceptive Implant Use in Africa. Glob Health Sci Pract. 2018 Mar 30;6(1):17-39. doi: 10.9745/GHSP-D-17-00396. PMID: 29559495; PMCID: PMC5878070.

⁴Bhatia, P., Nangia, S., Aggarwal, S. et al. Implanon: Subdermal Single Rod Contraceptive Implant. J Obstet Gynecol India 61, 422 (2011).

⁵Federation of Obstetric and Gynaecological Societies of India. (2016). Subdermal implant can boost family planning in India: Experts. Retrieved from <https://www.fogsi.org/subdermal-implant-can-boost-family-planning-in-india-experts/>

Analysis of Research Findings

Availability of implants in the public sector can transform the health and lives of women and adolescent girls, but it can only be done with political commitment, supportive policies, and adequate funding in place. The surveys conducted highlighted that up till 2011, implant CPR in sub-Saharan Africa was only 1.1%. There has been expansion in client access and marked increases in implant prevalence, and share of the method mix as a result of:

GREATER
GOVERNMENT
COMMITMENT TO
RIGHTS-BASED
FAMILY
PLANNING

BROADER WORLD
HEALTH
ORGANISATION
ELIGIBILITY
GUIDANCE

SIZEABLE PRICE
REDUCTIONS

MUCH-INCREASED
COMMODITY
SUPPLY

WIDER ADOPTION
OF HIGH-IMPACT
SERVICE DELIVERY
PRACTICES

10 of the 12 countries in the recent survey conducted during 2015-17 show that implant CPR has increased to 6% or higher, while with 3 countries it is above 11%. Moreover, implant uptake has risen across almost all sociodemographic categories including unmarried women, women of lower and high parity, etc. Thus, decision-makers, donors, implementing organisations, supply chain partners, the private sector, and advocates must work together to ensure implant, as part of a broad method mix, are widely accessible.

Policy Recommendations

To ensure women and adolescent girls have access to a variety of contraceptives, strong policies and financing are essential. India's unmet needs for contraception are more for the conventional reversible methods than that of terminal methods of contraception. Therefore, decision-makers could consider the following recommendations:



Ensure inclusion of implant contraceptives in the public health sector to expand the basket of choices.

Grant subsidies, sizeable price reduction and increased commodity supply for mission-driven organisations to ensure implants are available and widely accessible.



Capacity building of frontline workers on counselling, health education and promotional activities for increasing awareness about the basket of choices in the community.

Regular training of healthcare workers including Accredited Social Health Activists (ASHAs) and Auxiliary Nursing Midwives (ANMs) for providing quality family planning services including implant contraceptive service.



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