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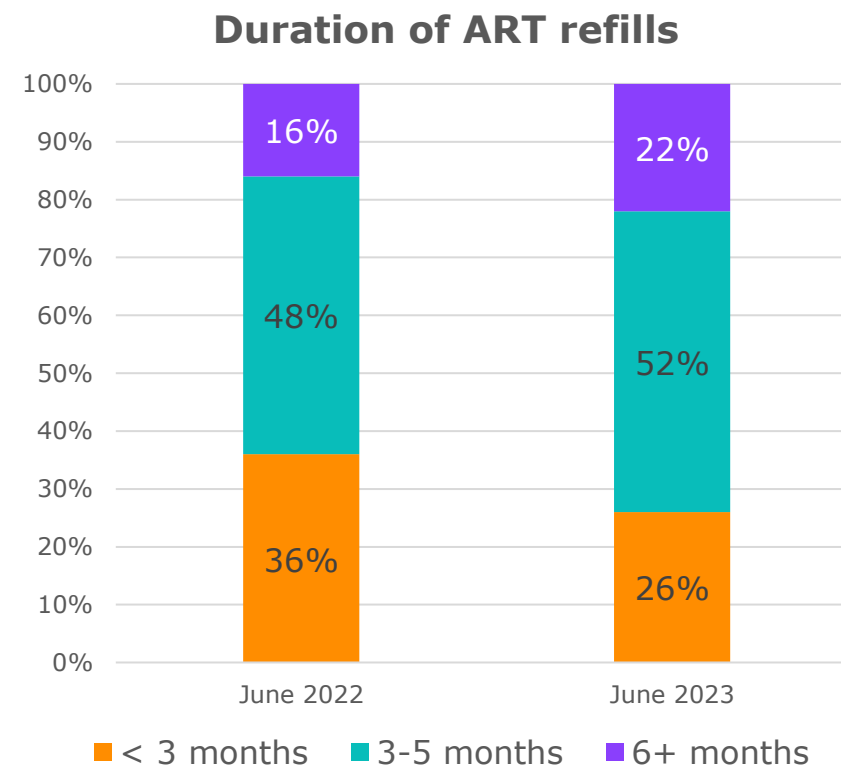
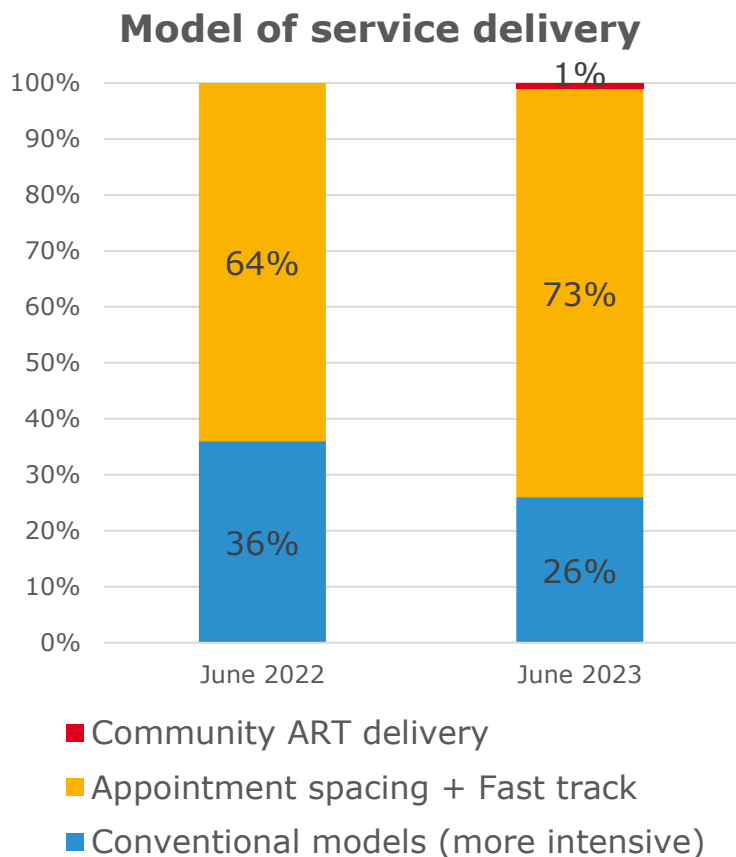
DSD beyond HIV treatment – case studies from family planning

Considerations for integrated DSD for HIV treatment and family planning Ghana



DSD for HIV treatment in Ghana

- **334,095** estimated number of people living with HIV on ART in Ghana
- By June 2023, **74%** of people on ART are receiving their ART care through a DSD model
- **73%** of those in a DSD model are enrolled in a facility-based individual model, either 6MMD or fast track collection





AIDS 2024

FP landscape in Ghana

Modern contraceptive prevalence rate (mCPR) among women 15-49

- **27.8%** among currently married women
- **45.6%** among sexually active unmarried women

Unmet family planning need among women 15-49

- **23.4%** among currently married women
- **24.6%** among sexually active unmarried women

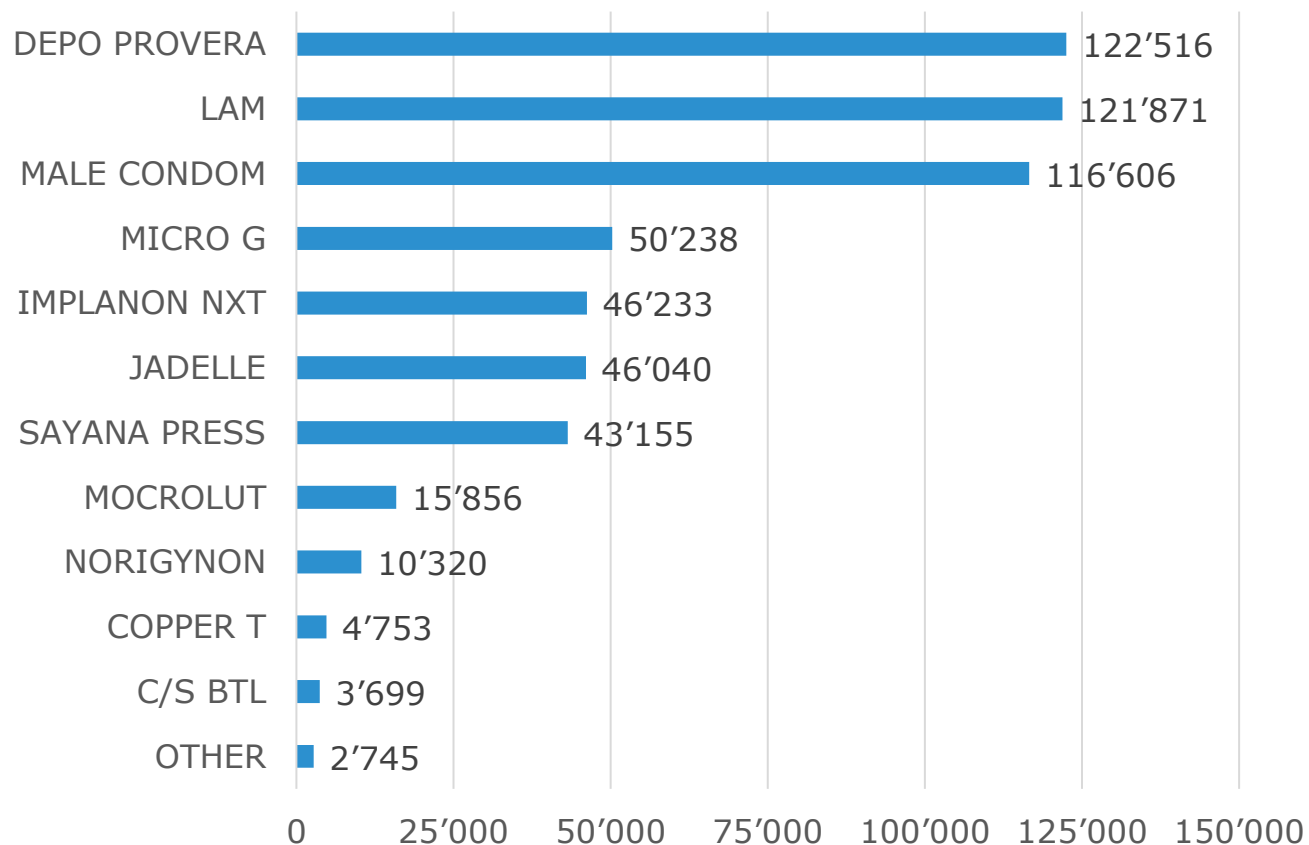
Total Fertility Rate=3.9

Source: DHS-2022

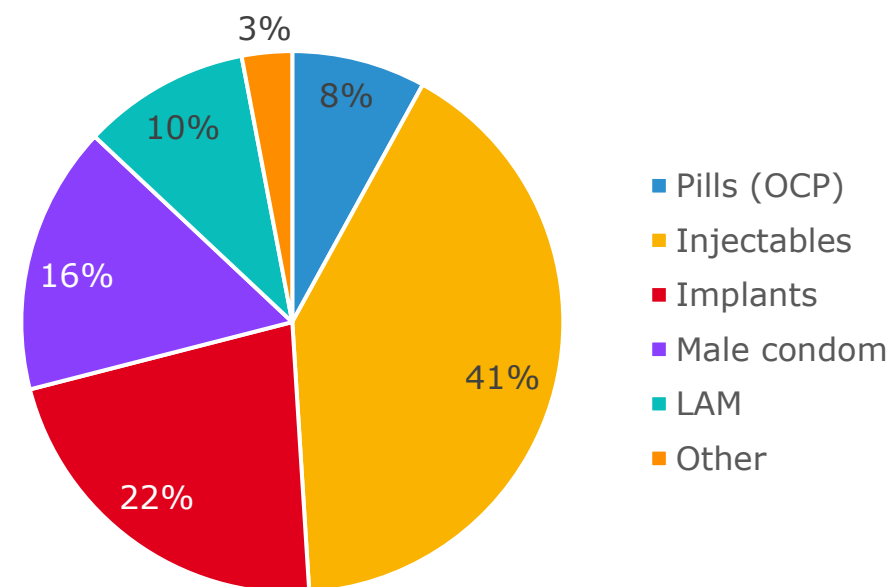


New method acceptor and method preference data

New acceptors by method, (Half year 2023)



Method preference, Quarter 1 2024

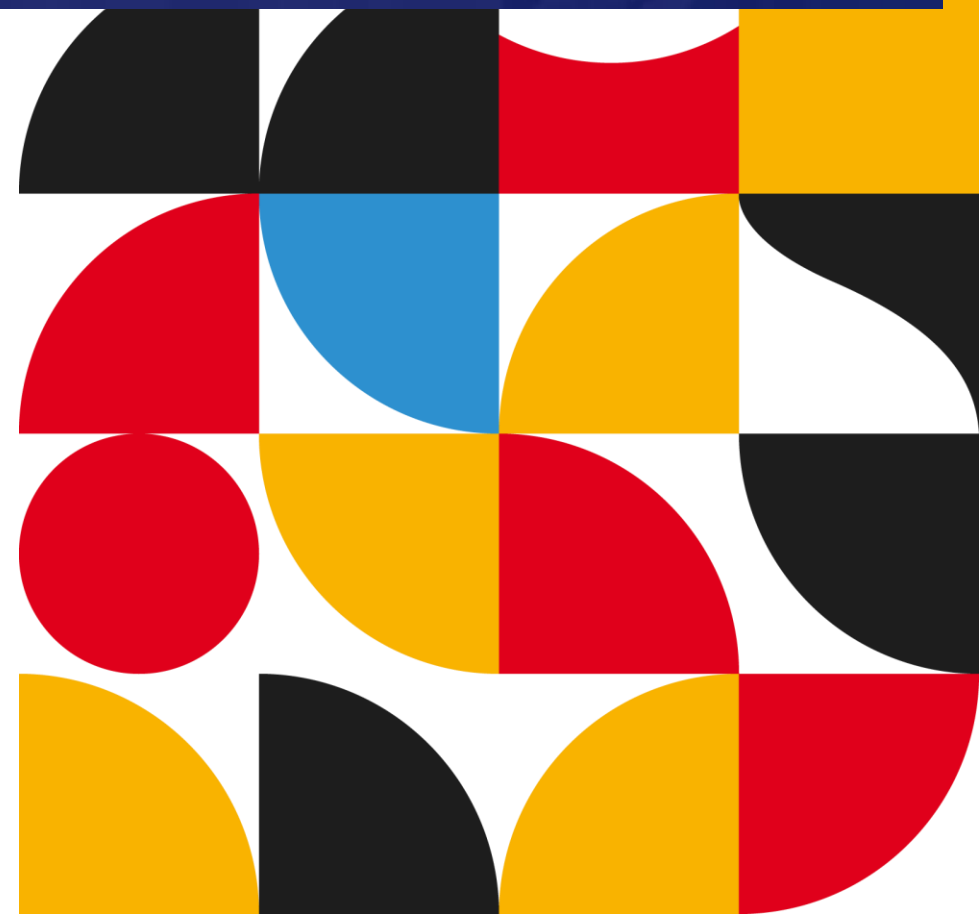


Ghana offers free long-term contraception in a 'game changer' for women's reproductive health rights

Ghana's National Health Insurance Program expands to include free long-term contraception from 1 January 2022

LARC implementation

- **Ghana prioritizes LARC and offers the service (insertion and removal)**
- Ghana LARCs include IUD (Copper T IUD and LNG-IUS) and implants (Jadelle and Implanon)
- NHIA ACT 825 has family planning as part of the benefit package and in 2022 scaled to full implementation coverage of modern methods (injectables, IUDS, implants and permanent)





Ghana's family planning policies

AIDS 2024

		IUD	Implant	IM injectable	Sub-cut self-injectable	Oral pill
Covered by Ghana's National Health Insurance Program: FREE		Yes	Yes	Yes	Yes	No
WHEN Service frequency	Clinical review	Annual	Annual	1-month (Norigynon)/ 3 monthly (DMPA)	3-9 monthly	1-3 monthly
	Script length			1 or 3 monthly	3-9 monthly	1-3 monthly
	MMD			1 unit	3 units (9 months)	1-3MMD
WHO Service provider	Cadre	Facility nurse, doctor, specialist		Facility + community outreach nurses		
			Community outreach nurse			Community health volunteers
	Self-administered				Yes	Yes
WHERE Service location	In facility/ In Community/ Both	Facility: FP services				
			Community outreach			

Self-injectable implementation

2017-2018: Subcutaneous formulation of the injectable (DMPA-SC) **feasibility and acceptability study** undertaken among clients choosing DMPA-SC:

- **35%** opted to self-inject for their first dose and **65%** chose to self-inject at 3 months (second dose) and 6 months (third dose);
- At 6 months, clients who took DMPA-SC doses home reported high satisfaction (**98%**) and comfort (**100%**)
- **41%** of DMPA-SC clients in the study were first-time FP users

2019: The Government of Ghana launched the national strategic introduction and **scale-up plan for DMPA-SC** making it available:

- both for **provider-administered** and **self-injection**
- in both **public** and **private** sectors; and
- at **all levels** of the health system

2023: **Implementation science research** on roll-out coverage, readiness, experiences



Key considerations for planning integration in low HIV burden context

Considerations

- **Facility type**
 - Faith-based vs non-faith-based
 - Proximity of family planning and ART services within the facility or closest public sector facility (for faith-based hospital ART services)
- **ART health workforce and setting**
 - OPD case load;
 - Capacity to provide family planning;
 - Enough space to handle change in service flow.

Facility-based 6MMD ART DSD model: integration approaches

- **One-stop-shop**
 - Public sector ART services with sufficient human resources
- **Coordinated intra-facility referral**
 - Public sector ART services with insufficient human resources or space
- **Coordinated inter-facility referral**
 - Faith-based ART services

One stop shop

	HIV		Family planning			
	ART-FP clinical visit	ART-only refill	Oral refill	Injectable SC refill	Injectable IM administration	LARC: Implant/IUD
WHEN	Every 6 months	3MMD if insufficient supply for 6MMD	3-6MMD (same as ART or 3MMD if insufficient supply to match 6MMD)	6 monthly (at ART clinical review)	3 monthly (at ART pick up)	Can be inserted or removed at ART clinical review
WHO	FP trained ART healthcare providers					
WHERE	ART clinic					
WHAT	1. ART clinical review including FP needs assessment/ FP review if using method and any method switch* 2. ART+FP 6MMS/6MMD	3-month refill only (fast track collection if insufficient supply for 6MMD)	4. Dispense 3-6 MMD pills (fast track collection if 3MMD)	4. Dispense 2 Sayana press units	4. Administer injection	Insertion/ removal if required

*including counselling and management of side effects

Coordinated intra-facility referral

	HIV		Family planning			
	ART-FP clinical visit	ART-only refill	Oral refill	Injectable SC refill	Injectable IM administration	LARC: Implant/IUD
WHEN	Every 6 months	3MMD if <i>insufficient supply for 6MMD</i>	Annual clinical review at every 2 nd ART clinical review Fast pick-up or injection administration same day following ART visit			
			3-6MMD (same as ART or 3MMD if <i>insufficient supply to match 6MMD</i>)	6 monthly (at ART clinical review)	3 monthly (at ART pick up)	
WHO	FP trained ART healthcare providers		FP providers			
WHERE	ART clinic		FP unit same facility as ART clinic			
WHAT	<ol style="list-style-type: none"> ART clinical review ART 6MMS/6MMD Any FP needs/changes check-in Coordinated referral for FP assessment and services 	3-month refill only (<i>fast track collection if insufficient supply for 6MMD</i>)	<ol style="list-style-type: none"> FP needs assessment FP review if using FP method and any method switch FP 6MMS 			
			4. Dispense 3-6 MMD pills (<i>fast track collection if 3MMD</i>)	4. Dispense 2 Sayana press units	4. Administration of injection (<i>every second administration fast track</i>)	<i>Insertion/removal when required</i>

Coordinated inter-facility referral

	HIV		Family planning			
	ART-FP clinical visit	ART-only refill	Oral refill	Injectable SC refill	Injectable IM administration	LARC: Implant/IUD
WHEN	Every 6 months	3MMD if <i>insufficient supply for 6MMD</i>	Annual clinical review same day as every 2 nd ART clinical review Fast pick-up or injection administration same day following ART visit			
3-6MMD (same as ART or 3MMD if <i>insufficient supply to match 6MMD</i>)			6 monthly (at ART clinical review)	3 monthly (at ART pick up)		
WHO	FP trained ART healthcare providers		FP providers			
WHERE	ART clinic		FP unit at closest public sector facility (within 1km)			
WHAT	<ol style="list-style-type: none"> ART clinical review ART 6MMS/6MMD Any FP needs/changes check-in Coordinated referral for FP assessment and services 	3-month refill only (fast track collection if <i>insufficient supply for 6MMD</i>)	<ol style="list-style-type: none"> FP needs assessment Clinical FP review if using FP method and any method switch FP 6MMS 			
			4. Dispense 3-6 MMD pills (fast track collection if 3MMD)	4. Dispense 2 Sayana press units	4. Administration of injection (every second administration fast track)	Insertion/removal when required

Overview of Ghana's operational plan

Engage recipients of care

- Orient NAP+ on concept
- Pick inputs on package design
- NAP+ support demand creation

Design integration package

- Develop training content, SOPs and job aids
- Build capacity
- Provide commodities
- Supportive supervision

Q3 '24

Q3 '24

Q4 '24

Q1 '25

Q2 '25

Establish data management system

- Engage stakeholders
- Develop indicators
- Revise data collection tools
- Build capacity
- Supportive supervision

Phased implementation

- Start with 2 and scale up to 8 facilities
- Conduct operational research using QI approach
- Develop national scale-up plan

Establish coordination mechanism

- Programmes meeting
- Appointing a coordinator(s)
- Scheduled joint meetings

Learning from implementation pilot

- Ghana seeks to learn lessons on acceptability, feasibility and determine the effect of the DSD integration on family planning uptake.
- Adjust based on lessons gleaned from the pilot.
- Reduce unintended pregnancies among women living with HIV.



Acknowledgements



MINISTRY OF HEALTH
REPUBLIC OF GHANA



USAID
FROM THE AMERICAN PEOPLE



Under the Office of the President



The Global Fund
To Fight AIDS, Tuberculosis and Malaria



REPRODUCTIVE
CHOICES

