

Tanzania

Expanding Family Planning Method Choice through Improved Implant Removals

Background

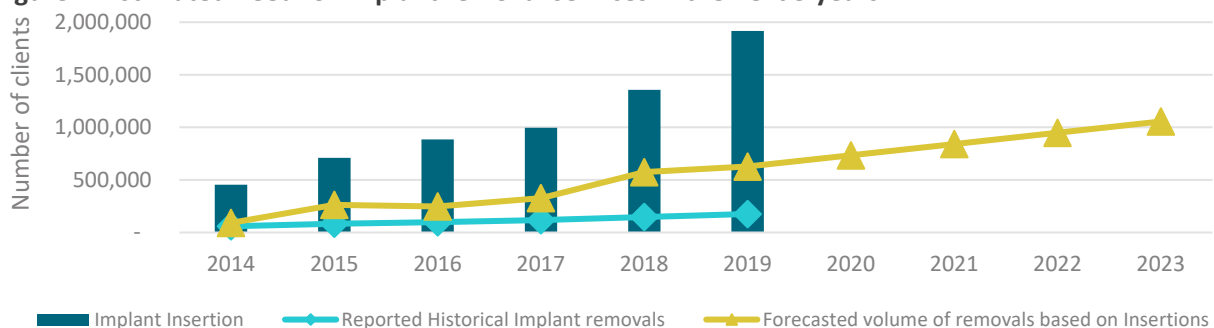
Implants are a form of long-acting reversible contraception with over 99% effectiveness within 7 days of insertion. Though effective for up to 3 to 5 years, depending on the specific type, implants can be removed at any time if the woman wishes to become pregnant or has any other reason. In recent years, uptake of contraceptive implants has rapidly increased worldwide, including in Tanzania, where there was an 838%¹ increase in implant uptake from 2013 to 2018, with services provided through routine facilities and outreach services. However, global evidence has demonstrated that some clients lack access to high-quality implant removal services. Countries like Tanzania with rapid scale-up of implants are in a critical period in which they must assess, plan, and allocate resources for implant removal services to ensure reasonable access to high-quality care among users, thereby contributing to sustained increases in implant acceptance. Ten regions in Tanzania with high demand for implants have forecasted that 2.83 million implants will need to be removed over the next five years.



Landscape Assessment

A landscape assessment conducted by Jhpiego in 2018-19 with the Tanzanian Ministry of Health, Community Development, Gender, Elderly, and Children (MoHCDGEC) and the National Institute of Medical Research (NIMR) found that before December 2018, only 6,197 service providers in Tanzania were trained on implant insertion and removal services²; a relatively small number in relation to the 13 million women of reproductive age who may need services. Only 7% of assessed providers were fully confident in their ability to provide standard implant removal services, including 61% of assessed hospital-based providers. This assessment also found that only 25% of the evaluated facilities had all of the equipment needed for standard removals and that the equipment that is available is often shared between units. The assessment revealed similar limitations in the availability of trained providers and adequately equipped facilities for difficult removals. Finally, the assessment found that 39% of women who came for removal services were overdue to have their implant removed or replaced.

Figure 1. Estimated need for implant removal services in the next 5 years



¹ Tanzania DHIS2

² MoHCDGEC Training Tracker

Strategies to improve implant removal services in Tanzania

Upon completion of the national landscape assessment and presentation to the national stakeholders, Jhpiego, under the guidance of the Family Planning Technical Working Group chaired by the MoHCDGEC, formed a task force which prioritized actions that were the most likely to resolve implant removal challenges. Three regions with high forecasted need for implant removals in the next five years (2019-2023)—Dar es Salaam, Dodoma and Kigoma—were selected to serve as pilot regions for implementation. EngenderHealth and Pathfinder worked in Dodoma and Dar es Salaam, respectively, since they already had projects in these regions, while Jhpiego primarily worked in Kigoma. In addition, the Clinton Health Access Initiative (CHAI) conducted data analysis in selected regions to identify facilities with high client loads and coverage. All other partners on the task force were asked to incorporate relevant activities in their project's work plans. The task force prioritized a few major areas of work, including:

- Building provider competency in difficult implant removals
- Improving awareness among frontline providers on the management of and referral for difficult removals
- Documenting and reporting implant removal services
- Ensuring availability of medical supplies and equipment

Additionally, based on the landscape assessment finding that 39% of women who came for removal services were overdue, the MoHCDGEC recommended that Jhpiego review qualitative findings related to these delays. Jhpiego also applied a Human Centered Design (HCD) approach to gain additional insights into the challenges women face in accessing removal services. Through this activity, women reported: repeated failed attempts to have an implant removed, large scars caused by poor quality services, delays due to non-palpable and non-visible implants, providers not using analgesia (lignocaine) during insertions and removals, and having to sit in an uncomfortable position through the procedure instead of lying down. These challenges were discussed with the district authorities, who have since ensured that removals are always provided with lignocaine and removals are no longer postponed. Regional- and district-level rectification strategies for the other challenges are under development.

Our Collective Achievements in Tanzania

- Expanding FP Choices collaborated with the MoHCDGEC to strengthen the capacity of national, district, and facility health care providers on routine implant removal services.
- Expanding FP Choices oriented ten national trainers and six implementing partners—Chama cha Uzazi na Malezi Bora Tanzania (UMATI), USAID Boresha Afya, EngenderHealth, Marie Stopes International, and The Challenge Initiative—with skills on difficult implant removals.
- Pathfinder trained 30 mentors and 86 health care providers on standard implant removals in all districts of Dar es Salaam Region.
- EngenderHealth and Pathfinder conducted Data Quality Assessments on a quarterly basis in Dodoma and Dar es Salaam regions, respectively. Though these assessments were for comprehensive FP, specific attention was paid to documentation of implant removal data.
- The USAID Boresha Afya project included implant removal activities in their FY20 work plan. They identified and prioritized conditions to improve implant removal services, including strengthening services, improving awareness, documenting removals, and equipment and supplies.

- Expanding FP Choices printed and distributed job aids to selected health facilities in Kigoma Region while the USAID Boresha Afya project covered all seven districts of the Lake and Western Zones, including Kigoma, Mwanza, Mara, Geita, Simiyu, and Shinyanga.
- Expanding FP Choices capacitated four referral sites in Kigoma—Maweni Hospital, Baptist Hospital, Ujiji Health Center, and Kasulu Hospital—on referral for difficult removal services. Clinical officers, doctors, and sonographers were trained on difficult removal services and are ready to receive referrals for clients needing these services from other health facilities.
- Expanding FP Choices supported the MoHCDGEC to develop an addendum on implant removals for the national FP training curriculum. This addendum will be printed and distributed to facilities which already have the broader FP training curriculum documents.

Recommendations

To guarantee that client-centered implant removal services are of high quality, future programs should ensure that the following recommendations are actualized.

To the MoHCDGEC

- Guarantee equipment for implant removal services—specifically standalone implant removal kits—are available at facilities to avoid rotation of equipment from one service to another.
- Improve providers' capacity to competently deliver high-quality services through appropriate practical skills training, certification, coaching, and mentorship.
- Ensure clients receive a high quality of care and respect during removals to address challenges communicated by women about removals being done without use of lignocaine or in improper and uncomfortable positions, such as insertion/removal while a client is in sitting position.

To all implementing partners

- Use the new implant removal training addendum with the current national FP training curriculum to ensure inclusion of all of the important updates related to these services.
- Provide technical assistance to capture and monitor implant removals using available registers and other HMIS tools.
- Assess the availability of implant removal kits in selected health facilities and advocate for improved availability of equipment sets throughout Tanzania.
- Strengthen referral systems for difficult implant removals.