PATH is a leader in adapting health innovations with and for women across systems, populations, and geographies. Principles of choice and equity guide all aspects of our sexual and reproductive health work. We advance strategies and shift social norms to improve the health and well-being of women starting in adolescence and continuing through the life course. A rights-based approach—informed by evidence and embedded in practical solutions—enables us to align products, technologies, information, and services with diverse lived experiences.

**Product development that meets women's needs**

We develop, identify, evaluate, and refine promising tools and technologies. Our multidisciplinary end-to-end approach to product development is guided by user-centered design and more than 40 years of experience accelerating low-cost high-impact solutions that improve the lives and reproductive health of women and adolescent girls in low- and middle-income countries.

**Evidence to inform and refine implementation**

We generate and apply data to tailor innovations that benefit women at different stages of their lives. Our applied research from program evaluations, qualitative analysis, and clinical studies inform program implementation, country decision-making, global and national normative guidance, and advocacy efforts.

**System readiness to integrate and deliver health and social innovations**

Person-centered primary health care is foundational to our work. We partner with communities to develop and adopt new technologies and delivery models through health systems assessment, task shifting, provider training and support, and policy development. We lead coalitions and strategic thinking among global, regional, and local stakeholders that advance meaningful change by and for women.

We envision a world in which all women and girls are valued, respected, and equipped to take charge of their health throughout their lives through access to accurate and relevant information, appropriate technologies, and high-quality services.

A woman in Uganda receives counseling on her family planning options, including self-injectable contraception. Photo: PATH/Will Boase.
Our expertise in action

Contraceptive self-injection across countries

The PATH/JSI, Inc. DMPA-SC Access Collaborative provides data-driven technical assistance, coordination, resources, and tools to ensure that women in Family Planning 2020 countries have increased access to the option of contraceptive self-injection, delivered through informed choice programming. At least 20 countries are scaling up self-injection as an evidence-based self-care option, supported by the Collaborative and an array of partner organizations.

PATH also works more deeply in Uganda to coordinate scale-up of DMPA-SC self-injection. We gathered feedback from women and health workers to design, implement, and evaluate public and private self-injection program models. We are now working with the Ministry of Health and partners to streamline health worker training and support, monitor data collection and use, and guideline and policy rollout—ensuring that women have the option of self-injection through quality programming.

Promoting self-care in Senegal

In collaboration with the Senegal Ministry of Health, PATH is advancing self-care for SRH and rights through policy action and partner coordination. This work began through a series of consultations to increase awareness around self-care, disseminate the WHO Consolidated Guideline on Self-Care Interventions, and identify advocacy priorities specific to Senegal. Through a recently launched working group led by PATH in coordination with the MOH, partners are advancing a national self-care strategy and learning agenda aligned with the needs of health providers, civil society, and end users.

Advancing cervical cancer screening and treatment in Latin America and the Caribbean

PATH is accelerating evidence-based strategies and innovations for prevention of cervical cancer. Through our partnership with ministries of health and organizations in El Salvador, Guatemala, Honduras, and Nicaragua, public sector clinics have adopted HPV testing and thermal ablation to treat cervical lesions. Seventy-five percent of women screened used a self-sampling approach for HPV testing self-sampling, avoiding the health sector resources and personal discomfort associated with a pelvic exam. In the Dominican Republic, our research is comparing cervical cancer screening tests to identify the optimal approach for women living with HIV, who are at highest risk for cervical cancer.

New technology for HIV and pregnancy prevention

PATH is testing two new uses for our microarray patch (MAP) technology, an easy-to-use, discreet drug delivery system. We are researching the feasibility and acceptability of MAPs to deliver products critical to SRH:

1) a pre-exposure prophylaxis (PrEP) drug to prevent HIV infection, and
2) hormonal contraception to prevent pregnancy. This process has been guided by women and their partners as well as health workers to ensure the products meet their needs.

Advocacy for sexual and reproductive health and rights in Myanmar

In Myanmar, a PATH-led consortium works closely with the Ministry of Health to support and partner with decision-makers, service providers, and community members to develop policies that advance SRH services and rights. This has enabled stakeholders to advocate for evidence-based SRH policy changes, and increase health system accountability, responsiveness, and inclusiveness.

A new take on self-care for women

PATH’s SRH program is at the forefront of the self-care movement, promoting equity and choice for women to manage their own health safely and effectively. We accelerate user-initiated products such as self-sampling for HPV-based cervical cancer screening and self-injectable contraception and use digital health platforms to expand access to information and social support for prevention strategies. We work with country partners to advance self-care interventions and approaches across the health system.