

Feasibility of administering Sayana[®] Press in clinics and communities

Summary findings from an operational assessment in Senegal

BACKGROUND

Sayana[®] Press (depo-subQ provera 104[™] in the Uniject[™] injection system) is a unique formulation of an injectable contraceptive (depot medroxyprogesterone acetate or DMPA) administered subcutaneously in the Uniject injection system. Because Uniject is a prefilled, all-in-one injection device, there is no assembly of components (vial + syringe), the size of the injection system is small relative to intramuscular DMPA (DMPA-IM), it is easily disposed of, and the injection process is simplified. These attributes suggest great potential as an injectable contraceptive innovation, particularly for community-based distribution (CBD). This study assessed the extent to which Sayana Press simplifies the logistics of managing and administering injectable contraception and whether providers in Senegal found this new presentation to be more practical and preferable to the standard syringe-vial injectable contraceptive.

The operational assessment leveraged the acceptability study conducted by FHI 360 in Thies, Mbour, and Tivaouane by targeting the same 12 clinics from that study and asking providers who participated to reflect on their experience managing and administering Sayana Press. Semi-structured interviews with one provider from each of the 12 clinics and 9 affiliated CBD agents (*matrones*) for a total of 21 interviews, provided quantitative and qualitative data on the merits, challenges, and appeal of Sayana Press relative to DMPA-IM.

INJECTION CHALLENGES

Regarding their experience giving Sayana Press injections, 90% (19 of 21 providers) reported that they faced no difficulties injecting Sayana Press. In comparison, 50% of providers who regularly offer DMPA-IM injections (6 of 12) reported no challenges with DMPA-IM. Clinic providers who identified challenges observed that, with the autodisable syringes for DMPA-IM, the units may block before they can finish drawing from the vial—a problem not encountered with Sayana Press.

“The syringes are auto-blocking. Sometimes they block and we have to start over. Then we end up not having enough syringes.” —Clinic provider



Photo: PATH/Patrick McKern

EASE OF USE AND TIME REQUIRED

Most providers (81%) evaluated Sayana Press as easy to use (or easier to use than DMPA-IM if experienced with both methods). All of the providers (100%) reported that Sayana Press takes very little time to administer.

“The Uniject does not have too much stuff with it. There is no need to draw the product. The syringe doesn’t block, the Uniject is easy to use.” —Matrone

“Even the clients prefer the Uniject. The injection is subcutaneous, which is easier and the Uniject is prefilled and ready to use.” —Clinic provider

“The Uniject is prefilled. That is at least 2–3 minutes saved. Filling up a syringe takes time.” —Clinic provider

LOGISTICS

The most widespread logistical challenge reported by 18 out of 21 providers was frequent stock-outs of family planning methods.

“Because of stock-outs, we lose track of our clients. It’s heartbreaking to send a client home without being able to offer her chosen method.” —Clinic provider

Despite this challenge, the vast majority of providers (86%) felt that including Sayana Press in the method mix would neither ameliorate nor aggravate supply management.

Transportation was reported as a challenge particularly for *matrones*, with six out of nine reporting difficulties related to distance, time, or the cost of transporting family planning methods to the health hut.

“It’s very difficult. Picking up the medications takes up the whole day. Just to get there, pick the medications and go back, I have lost a whole day.” —Matrone

However, 20 out of 21 providers interviewed (95%) anticipate little impact on transportation—positive or negative—from the addition of Sayana Press.

About half of the providers reported storage constraints for family planning methods.

“Our cabinet is too small for everything we have to store. It would be nice to have more space...” —Matrone

Most providers (18 out of 21) think that storage of Sayana Press would not pose additional difficulties. However, three providers expressed that adding another method would require more storage space.

“We would need an extra cabinet for it, and the cabinet will need to have good security. If we have that, there will not be any difficulties.” —Matrone

With respect to waste disposal, most clinic providers expect waste management to be about the same as for DMPA-IM (neither easier nor harder); however, some noted that Sayana Press waste management may be easier to handle, because of its smaller size and fewer component parts.

“There is less waste and fewer supplies involved so we don’t have to worry about forgetting to throw away something and the risks associated with that.” —Matrone

NEW USERS AND METHOD SWITCHING

In total, 62% of providers expect Sayana Press to attract new users to injectable contraception and 52% expect some women currently using DMPA-IM to switch. The consensus is particularly strong among *matrones*, who envision that better access to the injectable at health huts will be appealing to new as well as continuing injectable users.

“If Uniject is used in CBD, I believe there will be new users. Health huts are very private, women don’t have to wait too long to get services, the huts are closer to homes than the posts, and the matrones have more time to provide good service than employees at the post.” —Clinic provider

“Women really like injectables. The problem is that it is hard for them to find injectables. If the matrones provided injectables, more women would do family planning.” —Matrone

“Already during the study, women who received the Uniject told other women about the smaller needle and those women have been asking about it.” —Clinic provider

CONCLUSION

The providers interviewed for this study were enthusiastic about the introduction of Sayana Press. In particular, they remarked on how easy it is to use, and how it saves time. Providers noted that adding Sayana Press will neither aggravate nor alleviate challenges in supply management, transportation, storage, and waste disposal. Most expect that the addition of Sayana Press will attract new users to injectable contraceptives—particularly if women can obtain the injectable from the *matrones* at health huts.



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