

## SUMMARY

### World Vision/Kenya Study Tour to WellShare International Iganga District, Uganda

**Background:** For the past four years, WellShare International has been implementing a community-based family planning (CBFP) project under the Advancing Partners & Communities Project (APC) in Eastern Uganda. The project incorporates community health worker (CHW) provision of emergency contraceptive pills (CB-EC) and injectables (CBA2I), including Sayana Press/DMPA-subQ. World Vision/Kenya requested an educational tour to explore introduction of CB-EC into its APC-supported project. The tour took place May 29-31, 2017 in Iganga, Uganda.

**Participants:** 14 delegates representing World Vision Kenya, Uganda, and USA; Ministry of Health (MOH) Kenya; MOH Uganda; Iganga District Health; WellShare International; FHI 360; and JSI.



Kenya and Uganda  
MOH delegation.

*Photos: Laura Wando*

#### Purpose of Tour for Visiting Kenyans:

- Learn about CBFP policy formulation.
- Review and discuss access to emergency contraceptive pills (ECPs) in the local context, CB-EC strategy and its unique challenges.
- Learn about the supervision of the program including the roles and responsibilities of the various stakeholders and tools for supportive supervision for CBFP at all levels in Iganga District.
- Observe the provision of short-term FP methods, including injectables and ECPs, by a community health worker (CHW), known as a village health team (VHT) member in Uganda.
- Learn about the FP commodity supply chain in the public sector in Uganda and how commodities are distributed and tracked at the community level.

- Learn about FP demand-creation activities and how community leaders--particularly religious--are involved.
- Review referral system to manage complications and provision of other FP methods and RH services.
- Share lessons from cascade training model with partners.
- Work with World Vision and Kenya MOH delegation to develop an advocacy and implementation action plan for introducing CB-EC and CBA2I into CBFP program.

#### Key Activities

**Day 1** (Monday, May 29th): Orientation meeting and introductions. WellShare hosted team visit to MOH and introduced members to Dr. Dinah Nakiganda-Busiku, acting commissioner for RH services, and Dr. Placid Mihayo, principal medical officer for RH services. Team proceeded to the field in the afternoon.



VHT member responds to questions from the educational tour delegation at an Iganga Health Center about CBFP service delivery, including CB-EC and CBA2I.

**Day 2** (Tuesday, May 30th): District MOH and administration courtesy call; review of goals and objectives of the visit at WellShare office; site visit to health center (HC) level III; meeting with health workers and VHT members; and discussion of support supervision, monitoring, referrals, commodities distribution, and reporting. Visit to VHT member's home to observe FP provision.



VHT member introduces a client and her family (on couch) to educational tour delegation prior to CBFP counseling and DMPA-subQ reinjection.

**Day 3** (Wednesday, May 31st): Meeting with a religious leader to discuss FP; site visit to HC level II to meet with VHT members and health workers; discussion of supportive supervision, monitoring, referrals, commodities distribution, and reporting, with emphasis on ECPs and youth. Testimonial by a Muslim couple that took up FP. Planning session to note lessons and actions for follow up by all team members.



Couple gives testimony about FP services from VHT member.

### Key Learning:

- WellShare monitors service delivery data closely.
- Encourage World Vision/Uganda to replicate aspects of Kenya program and use VHT members to provide FP, including ECPs and injectables.
- Advocate to add ECPs to the CHW method mix, since they already provide pills. In areas where World Vision's APC-supported project operates,

women and men accept that APCs are at times necessary.

- Midwives saw that CBFP provision by VHT members allowed them to focus on clients who have more critical needs.
- WellShare's approach to ECP educates and convinces men.
- ECP use led to subsequent uptake of routine FP methods by several clients.
- WellShare worked within the existing service delivery structure which can take more time, but is more sustainable.
- There are opportunities for WellShare to work with faith leaders in Uganda.
- Establish links between CB-EC provision, police, and post-exposure prophylaxis services.
- If Kenya RH guidelines allow, CHWs could provide services in their homes like VHT members.



VHT member schedules visit using client appointment card.

### Next Steps for World Vision Team:

- Conduct advocacy/stakeholder engagement activities to encourage task-sharing between health facility and CHWs, such as presenting at central- and county-level FP technical working group meetings.
- Modify CB-EC job aids and M&E tools so that they feed into Kenya HMIS.
- Identify champions (e.g., teachers, couples, religious leaders, CHWs) to participate in demand-creation activities.
- Assess and help supply chain management avoid stockouts.
- Identify and promote CHW motivators and throughout the intervention.



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