Maintaining Access to Contraceptives During COVID-19 Disruptions: Assessing Risk and Mitigation Strategies for Sierra Leone

What are the potential risks?

COVID-19 could result in a range of disruptions that may impact contraceptive use: Clinical staff may be reassigned to COVID19 response activities and may have reduced time or capacity to provide FP services, stay at home orders and social distancing policies may limit the ability of both women and clinical staff to access clinics, women may chose not to come to health facilities due to fears of potential exposure, supply chains may face distributions that limit the availability of supplies. While these disruptions will affect many health services, family planning has unique considerations because women are able to use a range of different contraceptive methods sourced from different places and COVID-19 is likely to create risks that vary by method and source. Additionally, a rights-based family planning program leaves these choices in the hands of users.

The graph on the left shows estimated users in March 2020 by method and sector (utilizing data from the CGA2019). The table on the right categorizes the level of risk of different users if COVID-19 disrupts service delivery and the share of users who fall into each risk group. The split of users is also shown by sector the vulnerabilities may be even higher for the public sector. This summary can help highlight where the largest risks are from a service delivery perspective in order to prioritize short-term "bridge" efforts to sustain access to contraception during COVID-19 disruptions.

Risk from the perspective of the supply chain must also be considered to ensure that products are available to women. This includes potential supply chain disruptions at the point of manufacturing, shipping product to countries, and distribution of product within a country. Risks also may exist in terms of a mismatch between stock on hand and expected shipments and potential short-term shifts in demand for self-care methods. Countries may need to explore approaches that allow for flexibility and opportunism in responding to the ever-evolving landscape.

What is the potential impact on women?

The potential impact of COVID-19 on contraceptive use will vary depending on the severity and duration of disruptions. Estimates have been made of the range of potential impacts under different scenarios. Mitigation strategies to ensure women continue to have access to contraception can help reduce these outcomes (see next page for details on these strategies).

Impact estimates based on different levels of decline by method and sector. Numbers also account for the loss in additional growth in users that would be expected without COVID-19 (based on pre-COVID-19 patterns of growth in mCPR). The longer disruptions last the more impact in terms of this loss in additional users, as well as the more impact on unintended pregnancy as the longer women are without contraception the higher their risk of experiencing an unintended pregnancy. Default assumptions are aligned to the scenarios used for the UNFPA Impact of the COVID-19 Pandemic of Family Planning. See: https://www.unfpa.org/resources/impact-covid-19-pandemic-family-planning-and-ending-gender-based-violence-female-genital-for-details.

Results in this brief use the CGA 2019 as a starting place and explore different scenarios to quantify potential shifts in contraceptive needs that could result from service delivery disruption and different mitigation strategies. Using the MICRO model senarios can be developed: https://www.rhsupplies.org/activities-resources/tools/micro/
Results in this brief are based on the default assumptions in the MICRO model developed by RHSC in collaboration with the Global Financing Facility (GFF) and Avenir Health. For more information visit: https://www.rhsupplies.org/activities-resources/tools/micro/