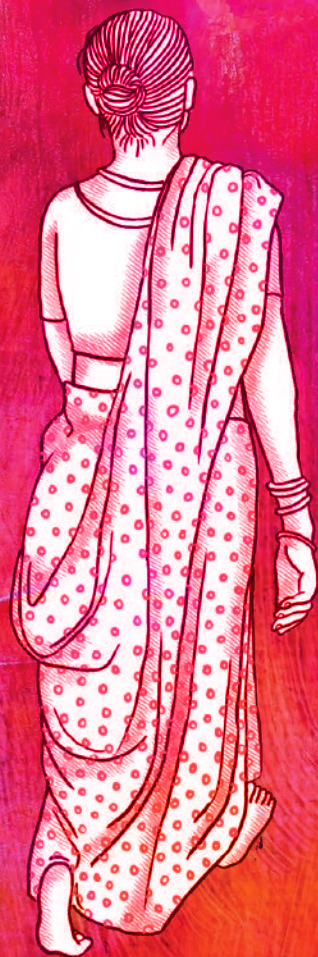


CHOICE OVER CHALLENGE

The Trajectory of Cross-Border
Journey of Indian Women to Avail
Contraceptive Implant Services in Nepal



An Overview

February 2023



Evidence indicates that an estimated 163 million women worldwide face unmet needs for contraception, with the highest proportion of this occurring among women in Sub-Saharan Africa and South Asia. To address this pressing issue, it is imperative to prioritize the inclusion of a comprehensive range of contraceptive methods that cater to the diverse needs of women across various age groups. By ensuring a wide array of contraceptive options, we can significantly reduce the prevalence of unsatisfied demand and unmet needs among women globally.

In a promising development, India recently announced the integration of contraceptive implants into its public health system, which was previously inaccessible and posed significant affordability challenges for Indian women. Monitoring data from clinics associated with the Family Planning Association of Nepal (FPAN, a member association of IPPF South Asia Region) indicates that a considerable number of Indian women, primarily from Bihar and Uttar Pradesh, cross the border seeking contraceptive implant services in Nepal's Terai Region. However, beyond mere statistics, little is known about their experiences. Consequently, it is crucial to generate evidence by conducting an in-depth exploration of their cross-border journeys.

To address this need, IPPF-South Asia Region and FPAN have collaboratively undertaken a cross-sectional exploratory multi-centric study adopting mixed-methods approach that combines quantitative and qualitative methodologies.

Cross-border clients who came to the FPAN clinic for implants had the agency to take decisions. Though their near and dear ones helped them in the process, more than two-thirds of the women said that they took the final decision on opting for implants by themselves. And 30% revealed that the husband was the final decision-maker.



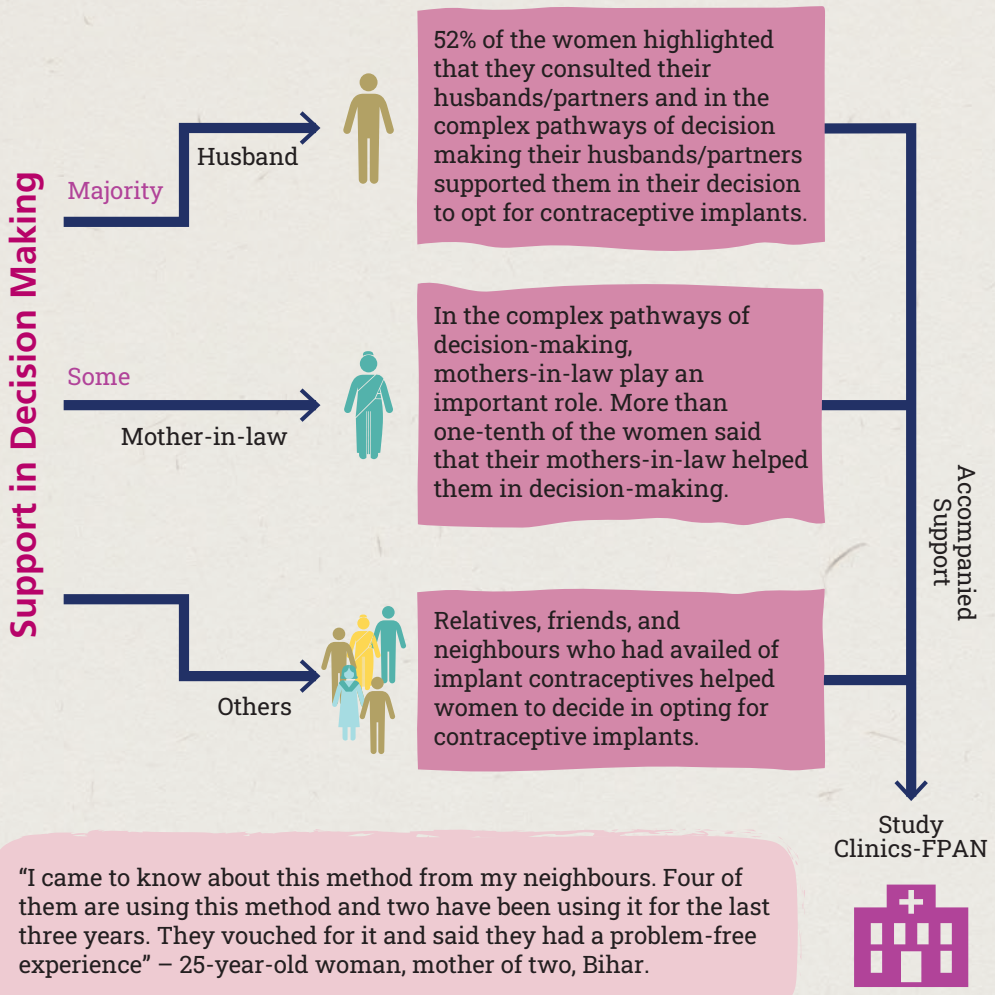
"I was accompanying my sister for her five-year injection (contraceptive implant). My sister asked me if I would like it too. At first, I was hesitant. I discussed it with her and later I decided to use it. Now after five years, I have come to get it replaced."





Through a structured survey, 218 clients who crossed the border for contraceptive implants were interviewed, and an additional 10 in-depth interviews were conducted to shed light on the trajectory of their cross-border journeys.

The study revealed that reproductive autonomy plays a pivotal role, with the majority of cross-border clients indicating that they consult with their husbands or partners before deciding on the implant method. Notably, these clients who sought contraceptive implants at FPAN clinics possessed the agency to make the final decision themselves. More than two-thirds (67%) of the women emphasized that they independently made the final decision to opt for the implant, highlighting the importance of empowering women in their reproductive choices.



"I came to know about this method from my neighbours. Four of them are using this method and two have been using it for the last three years. They vouched for it and said they had a problem-free experience" – 25-year-old woman, mother of two, Bihar.



Here is the story of a cross-border implant client who made her contraceptive choice despite challenges.



The trajectory of Pooja's cross-border journey for contraceptive implant

My name is Pooja, and I am 26 years old. A mother of three children, two boys and a girl, I come from Pupri in Sitamarhi district, Bihar, India. Today, I have travelled here to avail myself of the five-year implant contraceptive method. Living in a joint family, I have become aware of this method through my sister, who has been using it for an extended period. When she asked me to accompany her to the clinic for her implant removal, she also offered me the choice to consider this method for myself.

Reflecting on my circumstances and the expenses involved in raising more children, especially with three already, I made the decision to adopt this method five years ago. Now, I am here to have my old implant removed and get a new one. I am incredibly satisfied with this method, as I have not encountered any difficulties. Looking back, I realize that I made the right decision at the right time, freeing myself from worries about unintended pregnancies and repeated abortions.

Before using the implant, I relied on pills, but I always felt anxious about missing a dose and the risk of unintended pregnancies. Apart from my sister, a relative of my sister-in-law is also using this method, and we all appreciate its benefits. The best part is that it lasts for five years, eliminating the need for frequent visits to the health facility. And, if I decide to have another child, the removal of the implant is straightforward.

However, one of the challenges I faced was the long journey to access the implant contraceptive, along with the associated travel costs. We had to carefully consider the financial implications before coming here. It was also a bit scary to travel to a new place alone, so I had to wait until someone agreed to accompany me.

This time, my entire family, including my mother-in-law, brothers-in-law, sisters-in-law, and husband, is accompanying me as we also plan to visit the Janaki temple in this area. So far, we have spent over 1,000 INR on travel expenses.

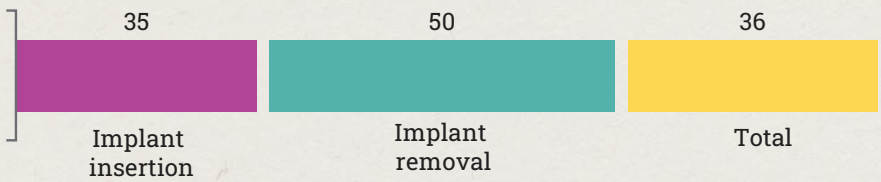




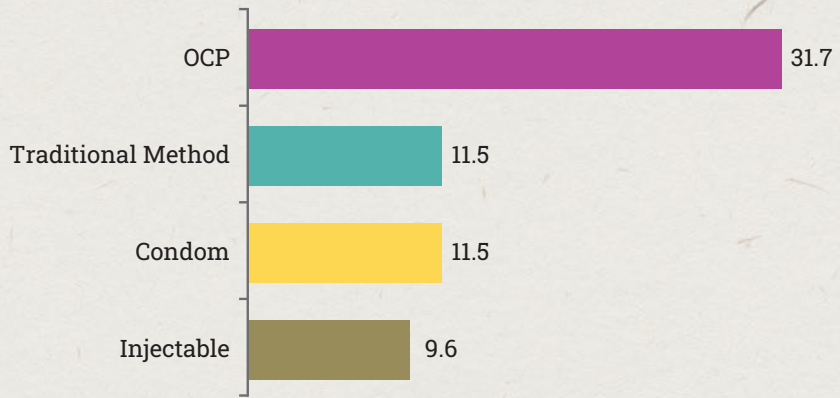
The findings revealed a significant aspect of reproductive rights, emphasizing that more than one-third of the women embarked on their contraceptive journey by choosing the contraceptive implant. This highlights their autonomy and the importance of honouring their preferences and choices.

Furthermore, the evidence showcased that over one-tenth of users of traditional methods made the switch to the implant contraceptive, illustrating the strong demand for and acceptance of this effective, long-acting modern method. The providers who offered implant services to cross-border clients affirmed that the implant was the most preferred modern contraceptive method. The clients cited various reasons, such as its ease of use, the freedom from daily administration, the confidentiality it provided, and the reduced need for regular facility visits. These preferences were expressed by the clients despite the challenges they faced, including traveling to a foreign land by crossing the border.

Beginning of contraceptive journey by using implant

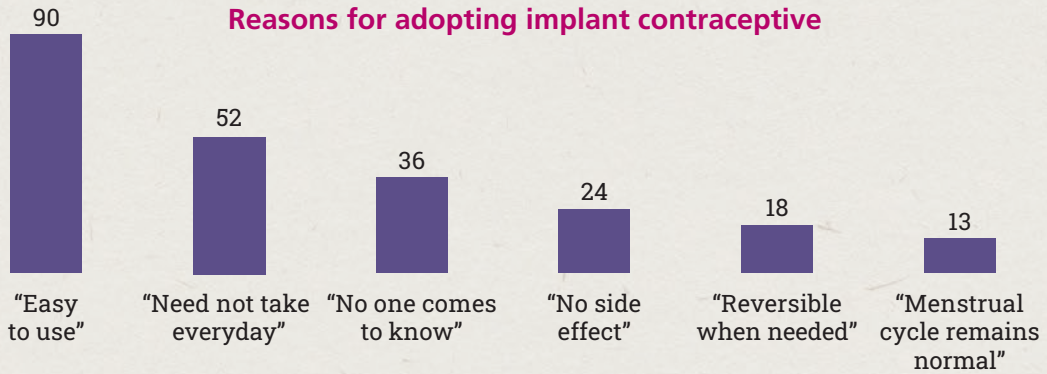


Switching from other contraceptive methods to implant





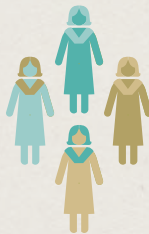
Reasons for adopting implant contraceptive



"I was using the three-month injection (Antra) earlier. But I had to frequent the health facility (every three months). If I use the five-year injection (contraceptive implant) I can relax for the next five years without worrying about unintended pregnancy and abortion. "– 26-year-old woman, mother of two, Bihar.

The study also revealed the numerous challenges faced by cross-border clients in their journeys. These included long distances to travel (95%), unfamiliarity with the destination country (51%), out-of-pocket expenses (41%), and the experience of traveling alone (5%). In response to these challenges, nearly three-fifths of women expressed a strong desire for implant contraceptive services to be made available in nearby health facilities in India. This emphasizes the need to prioritize accessibility and ensure that women have convenient access to their preferred contraceptive methods.

99%



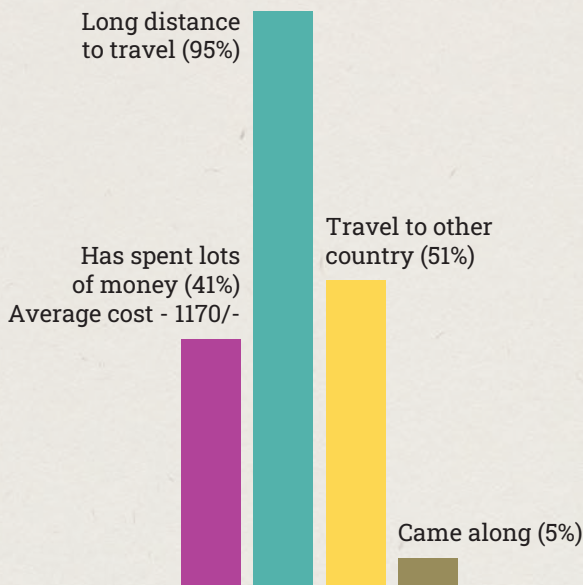
Almost all women shared that they faced challenges in their cross-border journeys. All the participants revealed that the non-availability of contraceptive implants in their home country-India was a major barrier.

The study showcased the agency of women in overcoming barriers to accessing their chosen contraceptive method. It encourages us to shift our perspective toward women's rights and choices, transcending societal, cultural, and political boundaries. This study serves as a foundation for future research on women's experiences and acceptance of contraceptive implants, contributing to evidence-based strategies for





“After reaching Janakpur (Nepal) we were roaming here and there. Then when finally reached here, the guard told the clinic was closed for that day. Hence, we stayed here at night then again come today. This incidence increased our expenditure. If this method is available in our area in India, then we need not spend so much money for this.” - Women 26 years, mother of 3 children, Bihar, India



Perceived Solutions

In response to those challenges, the participants highlighted a few mitigation plans.

57% of women suggested that contraceptive implants should be made available in their nearby facilities.

43% of women felt 'if female health workers can provide implant services', it will solve most problems.

expanding the range of family planning options. While the inclusion of implant contraceptives in India’s national family planning program is a positive step, ensuring accessibility to the last mile remains a critical area of focus.

Notably, the study highlights the unique context of Nepal, where implant services are delivered by staff nurses who insert and remove the implant. This successful example of task sharing in healthcare demonstrates improved accessibility and quality of care for clients. Advocacy efforts are needed to address the policy requirements and expand the provider base for implant services in other South Asian countries, fostering improved accessibility and choice for women.

Finally, **Choice over Challenge** is a study that underscores the significance of reproductive rights, women’s agency, and the need to prioritize accessibility and choice in contraceptive services, aiming to empower women to make informed decisions about their reproductive health.





IPPF

International
Planned Parenthood
Federation

South Asia Region