

CASE STUDY GUIDELINES

August 2019

ICA PROJECT INFORMATION

- a) Donation Recipient
- b) <u>Contact Person(s)</u>
- c) Acknowledgements
- d) Background of project
 - List objectives of project with ICA (related to LNG-IUS donation) or family planning program
 - List dates of project and donations
 - List (in table format if appropriate) all donation recipients and affiliates
 - Present a table representing of insertions by site to date

CASE STUDY INFORMATION

- e) Date of Case Study Data Collection and Report
- f) Case Study Purpose and Objectives (to be customized)
- g) Activities, Observations and Interviews Conducted for Case Study
 - List all activities and methods included in the case study
 - Include table with detail of activities. For example, the number of people interviewed, number people participating in focus groups, the number of direct observations by site of service delivery

CASE STUDY FINDINGS

The content of the case study should focus on the operational plans, procedures and perceived outcomes of the introduction of the LNG-IUS in the organizations supplied with LNG-IUS from the ICA Foundation. Include perspectives and personal experiences from direct observations in addition to responses to the below questions.

h) **Questions for Case Study**

• What are the goals and aspirations of the organizations receiving the donated or subsidized LNG IUS? How do they plan to integrate the IUDs into their family planning services once the initial supply of LNG-IUS is exhausted? Please note: at present, Mirena can be purchased from Bayer and Liletta is just beginning to be procured in a limited number of countries. The LNG-IUS for the moment only comes from the ICA Foundation.

- When was the product ordered, and when did it arrive? What were the up-front costs for necessary permits, importation fees, and other expenses to each organization receiving the product?
- When was training conducted? What were the outcomes of the training and the challenges faced in training for this product?
- How many staff members were trained in providing IUS services? Are they physicians or paramedical (nursing staff)? How will supervision and continuing education be addressed?
- Was the training manual provided by ICA useful? Did you receive the CD or a print copy? Does it need modifications?
- What are other information, education and communication (IEC) materials (for patients and for providers) are used in the distribution sites, specific to LNG-IUS? Would you be interested in more IEC materials? If so, what would be best?
- In how many sites is the product now being offered? Are additional sites being considered? What are the characteristics of these sites? What is the volume of demand for the product to date? How many different service delivery channels, e.g. hospitals, outpatient clinics, primary health centers, currently offer the method?
- How many LNG IUS have been inserted and how many have been removed to date? What have been clients' comments about the reasons for use or discontinuation? Have side effects been an issue of concern to clients?
- What is the cost of the LNG IUS to clients? What are the costs of routine IUD services and other long-acting family planning products (e.g., DMPA, contraceptive implants) and services (e.g., female sterilization)?
- What are the characteristics of the clients accepting the LNG-IUS? How do these clients differ from other family planning clients served by the organization and how do they conform to the Client Profile agreed upon before the donation? What segment of income do they represent?
- What is the standard of quality used in the provision of the LNG-IUS, e.g. what level of facilities and staff provide services, what oversight is given to the training and continued competence of staff in LNG-IUS provision, how is counseling monitored? How frequently is quality of care monitored? Where could quality of care in the provision of this product be improved?
- What are the opinions of providers and program managers about the role, acceptability and potential for the LNG-IUS within the collaborating organization?
- How well were logistics managed with the ICA Foundation and within the country? What could be done to improve the importation and distribution of the product in the country?
- What are the opinions of other stakeholders in the country, e.g. the Ministry of Health, bilateral and multilateral donors, medical associations, and Bayer AG country

representatives to the donated product and its strategy of introduction? Is there potential for future purchases?

- What are the plans for the use of this product for the next year? Are additional donations required or anticipated? What potential do you think the LNG IUS has in terms of overall contraceptive prevalence in your setting? What lessons might the Foundation learn from the experience of this organization?
- What is the likelihood of product use continuation if the product wasn't donated or subsidized, i.e. if the client had to pay the full cost?

i) <u>Lessons Learned</u>

- What are the existing barriers and challenges in the distribution and service delivery reviewed in this country project?
- What are some of the successes of this country project and its current distribution mechanism?
- Do you have any best practices to share that you would recommend for other partner organizations?

CASE STUDY CONCLUSION, SUMMARY AND NEXT STEPS

j) <u>Summary</u>

• Overall experience: please provide, in paragraph form, an overview of the findings as well as your impressions of the operations of this country project, shortcomings, successes and means of improvement.

k) New Proposed Agreements Emerging during Visit

• Are the donation recipients interested in receiving additional donations from the ICA Foundation? Are they interested and/or able to scale-up the current distribution network? Are other local organizations interested in receiving an LNG-IUS donation for distribution?

I) Additional Requests and Questions (from any party, specific source)