

# DKT Sudan

## Ensuring the right for all to quality family planning options since 2005

**A**mani ducks under the thatched roof to hand her neighbor this month's cycle of oral contraception. A village midwife, Amani recently attended a DKT Sudan training session, through which she became a community mobilizing agent. Thanks to new government legislation which DKT supported, midwives now have the right to distribute the pill, a first step that DKT sees as the re-positioning of services provided by midwives. Previously employed as a birth attendant, Amani is now a family planning expert in her community, where she dispenses pills and guidance, and refers women to DKT facilities for long-term contraception. Illiterate and lacking specialized training, Amani and her family struggled to get by on sporadic income from attending deliveries; now, she is able to supplement her income with financial incentives received from DKT for sales and referrals. Amani credits DKT for improving the livelihood of her family as well as adding meaning to her profession.

DKT is the largest non-governmental provider of reproductive health products and services in Sudan and provided over 1.3 million couple years protection (CYPs) there in 2011. This accounts for 47% of all modern method users and translates to an estimated 260,000 pregnancies averted. DKT Sudan addresses



**A midwife displays an IUD at DKT's franchised clinic in Gezira, where there is only one reproductive health specialist for every 275,000 residents.**

gaps in the reproductive health system through four major initiatives: 1) policy advocacy, 2) community awareness, 3) training, and 4) commodity security.

After initiating activities in 2005, DKT recognized the need to jump-start the stagnant state of reproductive health and partnered with the Sudanese Ministry of Health (MoH) to do so. Building on

its relationship with the MoH, DKT promoted programs that established post-abortion care and family planning in public health clinics; developed protocols for family planning training for newly graduating doctors; and promoted policies that allow midwives to be involved in reproductive health services. In 2011, the MoH formally recognized DKT for playing a pivotal role in reducing maternal mortality.

DKT has expanded the reach of family planning throughout Sudan by strengthening the capacity of remote rural clinics nationally and displaced-person camps in Darfur and the Eastern Front. DKT is addressing obstacles at multiple levels: working with religious leaders to promote community buy-in, promoting affordable commodities to the pharmaceutical market, and rehabilitating health facilities to improve their ability to serve more women with family planning services. *(continued)*

## Sudan

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In a developing world that is widely embracing the benefits of contraception, Sudan, a conservative Muslim nation, is still an exception. Only 20% of women who wish to prevent pregnancy have access to the means to do so, resulting in a low modern contraceptive use rate of 5.7% and high incidence (730 per 100,000 births) of maternal mortality, the eighth highest globally. Compounding the problem is a situation in which over 30 million Sudanese are served by fewer than 35,000 healthcare professionals, and only a very small fraction of those are equipped to deliver reproductive health services. India, with its vast population, has 50% more health care professionals per capita than Sudan.

Religion and culture are highly intertwined in Sudan, and Imams, or Islamic religious leaders, hold a great deal of public influence. For many years, family planning was perceived to undermine a fundamental responsibility to conceive large families and was widely criticized by Imams. As a product of this social pressure, many Sudanese women experience multiple, successive pregnancies without a single menstrual cycle in the years following marriage. Although steadily decreasing, Sudan's maternal mortality rate is one of the highest globally while its infant mortality rate (81 per 1,000 live births) is more than ten times greater than Western countries.

## Policy Advocacy

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In 2007, in collaboration with the MoH, DKT initiated an unprecedented national family planning and post-abortion care conference, bringing together key opinion leaders to foment public discussion and

spur the government to change policy. DKT was subsequently invited by the government to sit on newly established committees charged with increasing accessibility to contraception and setting the national family planning agenda. DKT promoted policies that officially listed many forms of contraception as essential drugs, expanded accessibility, and substantially decreased the cost of birth control to consumers.

DKT's influence further contributed to systemic protocol shifts such as ensuring mandatory reproductive training for all graduating doctors and nurses, health care providers who rarely received such training previously. DKT played a key role in launching a mandate for family planning counseling following post-abortion care and miscarriage cases. Evidence has shown that women are significantly more likely to initiate contraception following such dialogue.

## Empowering Midwives

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Village midwives (VMWs) are frequently the preferred or only accessible resource for reproductive-related issues in rural areas, where 80% of



**Village midwives trained as community mobilizers display IUDs. 6,000 rural women have been referred to DKT clinics through this program.**

Sudan's population resides. VMWs are present for the more than three-quarters of deliveries that take place at home. Before DKT's lobbying efforts, legislation that would allow their role to be expanded beyond just

birth attendants had consistently been opposed. Embracing UNFPA's initiative to employ midwives to address women's unmet needs, DKT engaged the midwifery workforce as community mobilizing agents in rural areas. DKT has directly trained some 3,000 illiterate VMWs to motivate rural women to consider long-term contraception. Midwives have been successful using these tactics, especially for women who can get to a clinic, where a large proportion of women now choose to have IUDs inserted while still on the delivery table.

DKT-trained midwives influence rural women to choose long-term contraception, like IUDs and implants. Through a referral card system, midwives receive financial incentives for each woman who follows through at a DKT-sponsored facility. In 2011, 6,000 new women received services as a result of the program.

In 2012, DKT provided the commodities and resources to train Darfur VMWs in IUD insertion, the first time midwives have ever been allowed such training. A few years ago, the prospect of midwives distributing the pill seemed unimaginable. Today, midwives are learning how to insert IUDs, preparing manual aspiration kits (MVAs), and leading workshops attended by religious leaders.

## Community Awareness

DKT Sudan has engaged Imams to discuss the benefits of birth spacing, framing it as a practice that promotes improved health outcomes for mothers and infants. Through seminars where DKT educates Imams, DKT is changing the attitudes of religious leaders, many of whom now speak on behalf of DKT to other Imams

and take pro-birth spacing messages to their local communities. To date, some 700 Imams have attended workshops sponsored by DKT. Addressing consumers directly, DKT has taken to the airwaves, running an educational radio show that reaches 80,000 listeners weekly and responds to questions about family planning from inquisitive callers all over the country.



**A doctor and midwife field reproductive health questions on DKT's weekly radio show.**

## Transforming the Market

In 2011, oral contraceptives and IUDs were DKT's most widely sold products in Sudan, with sales of 365,000 cycles and 119,000 units, respectively. Despite authorization for only post-abortion use, Misoprostol and MVA demand was also considerable in 2011, with sales of 450,000 pieces and 16,000 kits, respectively. Condoms are used in Sudan primarily for relations with sex workers, serving an important purpose in HIV/AIDS prevention. In 2011, DKT sold over 925,000 condoms as the main distributor of condoms in the capital and the sole supplier in some states.

Prior to DKT's 2005 entrance to Sudan, birth control products were available exclusively at privately run clinics. IUDs were seen as luxury products, typically selling at \$100. DKT-supplied IUDs are now available at public

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facilities at a cost of around \$2-3 (complete with the insertion service) to the patient, a price accessible to most women. Additionally, DKT is now the main supplier of IUDs and MVAs to the Planned Parenthood Federation of America (Sudan) and Ana Assudan, established humanitarian NGOs which use the materials in conflict areas like Darfur and East Sudan. Supporting rehabilitation and training efforts, and providing commodities at low prices, DKT is increasing these organizations' capacity to serve more and more women with higher quality care.

## Social Franchising

DKT Sudan's MotherHealth-branded franchise network actively collaborates with government hospitals. The franchised clinics (inside or attached to hospitals) feature DKT signage and are visited regularly by DKT staff to ensure product availability. Modest funding is used to update facilities, creating hygienic environments, modern delivery theaters, and increased seating for waiting patients. Renovation improves the way women are served and makes business sense as clinics can serve more patients and sell more contraception: At one Khartoum maternity facility, the social franchising arrangement has increased the clinic's typical daily capacity from only three women in 2010 to sixty family planning clients each day.

**W**ith midwives now emerging as respected members of the healthcare workforce, DKT Sudan

is looking ahead toward bigger wins, such as national policy that would officially allow midwives to insert implants and IUDs, and to contribute to post-abortion care by preparing MVAs. Equipped with evidence from pilot projects and through its role in the Reproductive Health Program Forum, DKT is in a position to expand its influence on a large scale.

DKT has been widely recognized as a major influence on national protocols introduced to require reproductive health training for graduating doctors, family planning counseling following all post-abortion care, and maternal health centers in public facilities. It is in large part due to these systemic changes that health outcomes like the maternal mortality rate is falling and contraceptive prevalence is on the upswing. DKT plays a crucial role in increasing availability and use of low-cost contraceptives, expanding the number of general medical providers equipped to practice reproductive health services, and facilitating thousands of midwives to act as community mobilizers.

Gaining allies and ambassadors with each radio show, training session, and birth spacing-themed sermon, DKT Sudan's community outreach is transforming cultural beliefs about family planning one day and one village at a time. Gradually, DKT Sudan is bridging the gaps to secure the opportunity for all Sudanese couples to know about and have access to the resources they need to decide the destinies of their families and bodies.



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