

Closing the loop

DKT WomanCare is a step along the path of giving men and women complete control of their reproductive health

By iMPACT Staff

DKT International has never shied away from controversy.

From its first-in-the-world ad for an abortion pill in India, to Indonesian ads linking Intra-Uterine Devices to sexual pleasure, DKT has been a pioneer in promoting contraception and reproductive health across the globe.

DKT International recently launched its DKT WomanCare website, a milestone in its journey of making reproductive health choices available to men and women—whenever, wherever.

WomanCare is the exclusive global distributor of Ipas Manual Vacuum Aspirator (MVA), surgical abortion technology, and Levoplant, a 3-year contraceptive implant. Other products are in the pipeline, and the idea is to use market forces to effect change.



True Overholt, marketing director, DKT WomanCare



The website is a virtual space where medical practitioners can directly contact WomanCare's in-country distributors to purchase the products they are interested in. Future plans also involve building a consumer-facing side on the website, to provide online support to someone looking for an abortion, or safe contraception.

According to a 2017 study by the WHO and the Guttmacher Institute published in *The Lancet*, 45% of all abortions performed between 2010 and 2014 were unsafe. The scale of the problem is made more complex by under-reporting, as well as stringent regulations and anti-abortion lobbies across the world.

"In many countries, women are seeking abortion, but don't know where to go. We might be able to provide that final link," says True Overholt, marketing director, DKT WomanCare.

DKT International CEO Chris Purdy sees WomanCare as a natural evolution of their mission of "empowering women and men

to take control of their reproductive destinies. DKT and WomanCare are slightly different channels within that mission." (See Box for interview)

DKT International, with its various programs, is present in 24 countries. When Ipas looked for a partner to handle its global distribution, it was just the opportunity that DKT was looking for. In 2017, the organizations inked the deal that gave DKT WomanCare distributorship of their product in 100+ countries, including the United States.

While classic DKT programs are set up for depth in a project location, WomanCare is about breadth, and reach.

"We look at this through a supply-and-demand lens," says Overholt. "In a lot of countries, we realized that there is

¹Cahill, Niamh & Sonneveldt, Emily & Stover, John & Weinberger, Michelle & Williamson, Jessica & Wei, Chuchu & Brown, Win & Alkema, Leontine. (2017). Modern contraceptive use, unmet need, and demand satisfied among women of reproductive age who are married or in a union in the focus countries of the Family Planning 2020 initiative: A systematic analysis using the Family Planning Estimation Tool. *The Lancet*. 391. 10.1016/S0140-6736(17)33104-5.

an unmet need for the products. If we have to invest in selling a product, we have to tackle the supply side first.”

The unmet need is even quantified: a 2017 study published in The Lancet reported that unmet need for modern methods of contraception in the world's 68 poorest countries was 21.6%, and the demand satisfied with modern methods was 67.9%.

WomanCare's sales reflect that: 186,000 units of Ipad MVA were sold last year, and the website is only the first among many plans including geographic and product portfolio expansion for WomanCare.

With their wide network, and a culture-sensitive topic like contraception, WomanCare has had to tailor strategies depending on the country they work in. And they've had precedence with DKT, who worked with small roadside shops to sell condoms in the Ghana countryside, and also bought a boat to supply products in flooded areas of the DR Congo!

However, there are a couple of key differences, says Overholt: current WomanCare products are sold to clinicians, not the end users. “It's a little tricky from the communications perspective,” says Overholt. “While we get a lot of face time with clinicians, the prevalence of IUD is very low. It may be because it's not interesting for them, or the products they have seen have not been very good. We have to figure that into our communications.”

As with many commercial brands, Overholt says, WomanCare does not always focus on the brand, rather focusing on an aspirational lifestyle.

Also, because WomanCare is not on the ground the same way that DKT is, networking becomes critical, especially in the 75-odd countries where DKT is not present.

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“For changing behaviour, you need to partner with civil society and other organizations to complete the supply chain. On the other hand, if you are a small NGO in Angola trying to access quality healthcare, WomanCare can be a great partner for you,” says Purdy.

Another often-overlooked service that WomanCare brings to the table is market expansion, simply through awareness of products, says Overholt. “We're effectively adding a sector in some of these places,” says Overholt.

With services in the countries across the health indices spectrum, WomanCare is also keen to transfer best health practices from one country to another. Overholt sees huge potential in the way that technology can be harnessed to promote choices and hopes that the portal will be able to help that woman who wants an abortion with a reliable and safe way to do so.

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Chris Purdy, CEO, DKT International

Donors should set aside “mad money”: Chris Purdy, CEO, DKT International.

In an interview with iMPACT, Chris Purdy talks about DKT International, talking about sex, and running a non-profit. Excerpts:

How do you talk to people about their sexual health?

If you go back 40-50 years, we expected the government to take care of this. But the government was not very good talking about sexual health, but it's a good fit for civil society.

We need to figure out what our customers really want. Young people want information about sexual health. How do you give it to them without saying, “Don't do it”?

When youth talk about their Saturday night dates, they're not going to ask, “How was your reproductive health last night?” We do a lot of research and find out what the challenges are, and methodically try to remove those barriers.

How does DKT typically work when entering a country?

There's a saying in this space: No product, no program. There's no point in shifting behaviour if there is no provider of products or services. The first thing DKT does is set up an entity or a way to register, import,

and warehouse products, and make sure they are widely available across a range of channels. Then you talk about this.

How do you work in different cultures effectively?

One of the answers is that, in India, say, most of the staff are Indian. We find good local resources who are willing to be change agents in their communities.

Second, for me, it's always been about culture—not so much religion, but culture, which has a lot to do with education, and world view.

What are future plans at DKT?

We are exploring other low-income and emerging markets, and as always, have a number of irons in the fire!

WomanCare is a big piece of that. One other plan is to explore regionalization. While we don't have resources to bring DKT services to every country, we are looking at creating regional offices that will take programs to countries in the region. For instance, our office in Egypt serving most of Northern Africa.

Another big sort of pillar for DKT is exploring how we leverage the

changing role of technology to change the face of healthcare.

In India, we're seeing more and more women who go to the pharmacy and pick up abortion drugs. How can we use technology to make that safer?

In Pakistan, we put up feedback kiosks in the airport, so we received immediate feedback on our programs. We're looking at online doctor stores, so doctors can access all the products they need.

DKT International is actually a non-profit. What are some of the challenges in this field of work?

We are a non-profit but we work as a social enterprise.

A lack of tolerance for risk is always a challenge for non-profit work. Donors really should put aside a little bit of “mad money” –money that may or may not yield desired results, but invests in a crazy idea. That's really how markets move. We don't have that in the non-profit world. For non-profits, anything you can do to diversify funding sources and reduce dependence on a few donors is good. If you have a product, then the customer becomes your donor, and then it works well. 