Contraceptive and Family Planning services and supplies are CORE components of essential health services and access to these is a fundamental human right.

This standard needs to be respected and protected as such by governments prioritising scarce resources during the pandemic. But with the focus of health systems on the response to the COVID19 pandemic, the provision of basic contraceptive counselling, the delivery of contraceptive products and services and the functioning of supply chains have been disrupted and women and men are at a disadvantage in accessing care from their regular providers.

The U.N. Secretary-General has issued a call for ‘continuous delivery of sexual and reproductive health services such as access to contraception without prescription during the COVID19 crisis, and key global partners and governance bodies have strongly voiced this in the political briefings taking place daily.


Some of the expected impacts of the Coronavirus include delays in seeking, accessing and receiving care (the three delays); an increased burden of morbidity and mortality among women and newborns related to unwanted pregnancies; undesirable pregnancy-related outcomes; and restrictions on movement and access to health systems which have not been overwhelmed. In addition, many families are dealing with issues resulting from lockdowns and reduced access to food and other necessities.

These issues make it even more important for the provision of contraception, not only in the midst of COVID, but at all times.

Starting from this uncomromising position, we present six key action points for policy makers, political leaders and health system providers:

1. Social Distancing and limitations on mobility speaks to an urgent need to expand postpartum family planning services, particularly long-acting reversible contraceptives (LARC) such as contraceptive Implants, Post-partum IUDs or Injectables. Access to postpartum care can be an issue across many parts of the world from time immemorial. The impact of COVID-19 increases the urgency and institutional barriers seen over the last 20 years have become incredibly valuable and precarious – as a ‘one off’ opportunity to provide women with contactless contraceptive options and provide women the choice to continue or resupply contraception.

2. The devolution of processes from large unified systems will help to provide rapid and necessary context specific changes to protocols and supplies on hand can help women exercise control over their lives.

3. Barriers to accessing contraception need to be lifted.

4. Implement telemedicine using mobile phones and social media as an adjunct to improving information and access to contraceptive products and services.

5. We need to anticipate and address likely supply chain needs and challenges.

6. Health care workers must be provided adequate Personal Protection Equipment (PPE).

Keeping in mind that with the current pandemic response, the focus of many health systems on the response to the COVID19 pandemic, the provision of basic contraception counselling, the delivery of contraceptive products and services and the functioning of supply chains have been disrupted and women and men are at a disadvantage in accessing care from their regular providers.

COVID-19 Contraception and Family Planning

Social Distancing and limitations on mobility speak to an urgent need to expand postpartum family planning services, particularly long-acting reversible contraceptives (LARC) such as contraceptive implants, postpartum IUDs or injectable contraceptives. In many countries, pharmacies and patent drug vendors are not allowed to sell products directly to users, based on outdated safety or quality concerns. In many countries nursing and midwifery education includes contraception advice and provision.

For example, the social distancing requirements related to COVID-19 raise the issue of the safety and availability of contraceptives and other medical supplies. The key challenge is to ensure that supplies reach clients and facilities in the last mile. Mitigation strategies addressing the tracking, security, storage and re-supply of contraceptive products and services and the functioning of supply chains have been disrupted and women and men are at a disadvantage in accessing care from their regular providers.

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