Since 2008, IPPF's Global Comprehensive Abortion Care Initiative (GCACI) has transformed access to safe abortion in 22 countries. A flagship programme providing focused investment and support to expand access to abortion care, GCACI has enabled IPPF Member Associations (MAs) across the Federation to provide high quality comprehensive abortion care and contraceptive services, implement community awareness-raising and stigma reduction strategies, conduct targeted advocacy to create an enabling environment, and use client-based data to generate evidence for improved abortion care and access. Here, we present some highlights from 12 years of supporting access to abortion care through GCACI.





9.9 million

UNINTENDED PREGNANCIES



3.9 million

UNSAFE ABORTIONS AVERTED

15,000

MATERNAL DEATHS AVERTED

20.7 million

COUPLE YEARS OF PROTECTION (CYP) DELIVERED¹



SERVICE DELIVERY IN:

246

SERVICE
DELIVERY POINTS

221_{CLINIC}

25 SATELLITE CLINICS



753,421

CLIENTS PROVIDED WITH ABORTION CARE

272,725

CLIENTS ACCESSED MEDICAL ABORTION

321,219

CLIENTS ACCESSED SURGICAL ABORTION

FROM 2016-2020:

2,043

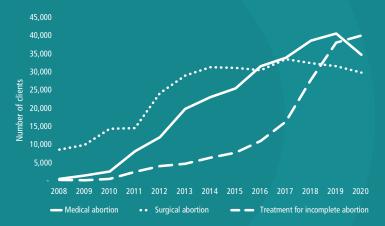
CLIENTS PROVIDED WITH ABORTION CARE OVER 12 WEEKS' GESTATION 159,477

CLIENTS RECEIVED TREATMENT FOR INCOMPLETE ABORTION

86%

OF ALL ABORTION CLIENTS WERE PROVIDED WITH A METHOD OF POST-ABORTION CONTRACEPTION

NUMBER OF CLIENTS PROVIDED WITH ABORTION OR TREATMENT FOR INCOMPLETE ABORTION, BY METHOD (ALL GCACI)





6.1 million

CLIENTS PROVIDED WITH A METHOD OF CONTRACEPTION



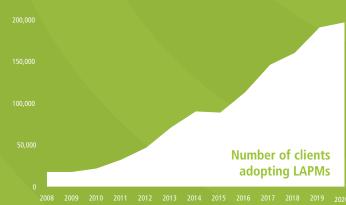
4.9 million

CLIENTS ADOPTED A SHORT-ACTING METHOD



1.2 million

CLIENTS ADOPTED A LONG-ACTING OR PERMANENT METHOD (LAPM)





Community awareness

Through GCACI, MAs have invested in a range of activities to increase awareness and reduce stigma about abortion, contraception and sexual and reproductive health. MAs utilize different strategies dependent on the context, including for example the use of mass media and social media, community education sessions, IEC material distribution, and information provision and referrals through community health workers. In 2020, among MAs in Africa, abortion clients were most commonly referred to clinics by community-based mobilisers (21%) or through referral partnerships with other health facilities (20%). Among MAs in the Asia region, clients learned about abortion services most often through word of mouth (23%), referral partnerships (16%) and community-based mobilisers (16%).

Reaching poor, marginalized and high-need groups

GCACI supports Member Associations to improve access to abortion care and contraceptive services for the most poor and marginalized groups, ensuring that no one is left behind. All clinics operate a no-refusal policy and low-income clients are provided with subsidized or free-of-charge services. Strategies include the establishment of youth centres, building the capacity of young people as peer educators and champions on abortion, and partnerships with higher learning institutions to enable young people to access abortion care. GCACI-supported clinics also operate in protracted humanitarian settings, providing vital abortion care and contraception to people living in refugee and internal displacement camps.



IN 2020, 43% OF ABORTION CLIENTS AND 38% OF CONTRACEPTIVE CLIENTS WERE YOUNG



IN 2021, 12 CLINICS PROVIDING ABORTION CARE IN PROTRACTED HUMANITARIAN SITUATIONS



Medical Abortion Commodities Database (<u>www.MedAb.org</u>)

Launched in September 2018, www.MedAb.org is a searchable database of quality medical abortion commodities available at country level. It has been accessed by users in more than 140 countries and currently provides information on products in 101 countries. In 2020, the number of users who actively engaged with the site was 94% higher than in 2019. This increase coincided with the COVID-19 pandemic when supply systems were disrupted and people needed up-to-date information on commodities. MedAb.org has also been referenced in external publications (including WHO and Guttmacher), proving its worth as a valuable asset in the medical abortion community.











Quality of Care

GCACI has supported 22 Member Associations and 246 service delivery points to improve quality of abortion care and all SRH services provided. Quality of care standards and practices have been institutionalized through frequent training, mentoring and monitoring, including through the establishment of quality of care committees. GCACI has also contributed to improved understanding of what women expect from quality abortion care, through research focused on a person-centred approach to abortion care

Institutionalizing abortion care

GCACI has increased institutional commitment and capacity to provide quality abortion care, not only within the MAs it has directly supported but also more widely across the Federation. Through strategies including resource creation, values clarification workshops, internal policy changes, technical trainings, and infrastructure and systems strengthening, GCACI has transformed IPPF's capacity to provide high-quality and person-centred abortion care. From 2008 to 2020, the number of abortion-related services provided by IPPF MAs increased by 236%, and in 2020, six of the top 10 abortion-providing MAs in the Federation were supported by GCACI.

From 2012-2021, GCACI has supported the production and publication of 25 resources, including clinical and technical guidelines, good practice case studies, video series and peerreviewed articles. Recent highlights include the following:

- Exploring stigma and social norms in women's abortion experiences and their expectations of care (2019)
- A cross-sectional analysis of mifepristone, misoprostol, and combination mifepristone-misoprostol package inserts obtained in 20 countries (2020)
- How to Provide Abortion Care During Covid-19 (2020)

For more information about the GCACI programme and available resources, please contact Rebecca Wilkins, Technical Lead, Abortion.