

REPOSITIONING EMERGENCY CONTRACEPTION in INDIA

Report of an exploratory consultation

Background and context

Levonorgestrel (LNG) 1.5 mg tablets have been available in India without prescription for emergency contraception (EC), since 2005. The 5th National Family Health Survey reports high awareness of EC as an option, but use of the method is notably minimal at 0.4% over the past 12 months. This discrepancy between awareness and usage implies that surveys miss the bulk of EC use due to under-reporting by respondents (possibly due to stigma) or there is higher use by other categories. Meanwhile, emerging research and pilots suggest that EC pills could be used in a planned manner by those having infrequent sex, as an “on-demand” option.

Centre for Contraception Research (CCR), a unit of Action Research & Training for Health (ARTH), collaborated with the Population Foundation of India (PFI) to jointly host an online consultation on 'Repositioning Emergency Contraception in India' on December 8, 2023. The objectives of this consultation were as follows:

1. To review the current Indian scenario with respect to availability, efficacy, safety and acceptability of self-use options for emergency contraception
2. To explore the potential for repositioning emergency contraception in India, focusing on single-dose levonorgestrel.

The consultation was attended by 96 participants including public health professionals involved in family planning, clinical practitioners and academicians from medical colleges, representatives of international agencies, non-governmental organizations and the pharmaceutical sector. The schedule has been appended as annexure 1.

Session 1. Emergency contraception in India - then and now

Dr Suneeta Mittal, Director and Head of the Obstetrics and Gynecology, Fortis Hospital, Gurgaon, chaired the first session comprising three presentations that provided an overview of emergency contraception in India.

i. The use of emergency contraception in India: a historical perspective

Dr. Shrinivas Darak, Senior Research Fellow at Prayas, Pune, presented a historical overview of the introduction EC pills in India from a systematic review¹, noting that although awareness about these pills has steadily increased over time, actual usage remains low. The review indicated that women with higher levels of education and economic status utilized emergency contraceptive pills more readily. However, the negative and judgmental attitudes of a substantial proportion of service providers served to discourage the use of emergency contraceptive pills. This was despite the finding that use of EC did not lead to more unprotected sex.

ii. WHO trial on pericoital contraception

Dr Mario Festin, Professor (Obstetrics & Gynecology), University of the Philippines College of Medicine, summarized findings from World Health Organization's multi-country trial evaluating the effectiveness,

¹ Mehta, Nikisha R et al. "The use of emergency contraceptive pills in India: A meta-analysis." Indian journal of public health vol. 64,2 (2020): 178-185. doi:10.4103/ijph.IJPH_494_19

safety, and acceptance of peri-coital 1.5 mg LNG pills by women having infrequent sex². The study's results indicated that repeated peri-coital (around the time of sexual intercourse) use of LNG 1.5 mg by women who have infrequent sex is has high effectiveness, and is well-received as a form of contraception by women. He highlighted that its contraceptive effectiveness is higher as compared to women not using any contraception and comparable to women using condoms. He emphasized the need for more research into the acceptance of emergency contraception to further understand usage patterns and preferences among users.

iii. Legal issues around emergency contraception in India

Ms Anubha Rastogi, independent advocate based in Mumbai made a presentation on legal issues around emergency pills in India. She focused on the role of the Drugs Technical Advisory Board (DTAB) and recommendations from an expert committee tasked with assessing concerns about the social acceptability of EC pill advertisements and determining essential information necessary for consumers, to enable proper use. She emphasized that the legal framework governing emergency contraceptive pills is clear-cut -- these pills are available over the counter and do not require a prescription. However, despite permission being given for advertising emergency contraceptive pills through an exception to the Drugs and Magic Remedies Act, there remain concerns about the messaging surrounding these pills.

Dr Suneeta Mittal wrapped up the session, emphasizing the fact that systematic reviews and international guidance emphasized the safety of repeat use of levonorgestrel EC pills over a single or multiple menstrual cycles – this should serve to allay concerns among providers and users about its safety. In her practice, she had observed that women are aware about the emergency contraceptive pill, and a significant number of them had prior experience using it. Hence we need to reconsider the restrictive use of this option so that its full potential may be realized.

Session 2. Panel discussion: Towards wider availability and use of of single-dose LNG pills in India

In the second session, a panel discussion looked at a range of issues shared by diverse speakers, on what could affect greater access to EC in India in the coming years. Topics included market perspectives, role of communication in promoting EC, the influence of stigma associated with EC pills, and a formative inquiry into women's experiences from one part of the country.

Mr Vivek Malhotra, Chief Executive Officer, Population Health Services - India discussed market dynamics around emergency contraceptive (LNG) pills – while two major brands dominated in terms of sales, there were several other brands in the market. He underscored the currently minimal impact of social marketing on sales of these pills. A 2019 market study revealed that the annual volume of EC pill sales was around 33.5 million units. There was a price increase of 10-20% after 2015-16, with retail prices rising from around Rs. 99 to Rs. 110 per unit by 2019. He further noted a lack of alignment between the leading markets and the overall market growth.

Ms. Gunjan Khorgade, Research Associate at Action Research and Training for Health (ARTH) presented findings from a formative inquiry of rural-tribal women's experiences with the single-dose LNG pill in southern Rajasthan. Several women, especially those with migrant husbands, expressed a preference for this pill over daily oral contraceptive pills due to the advantage of not requiring daily consumption. Some other women felt that it costed less as compared to getting an abortion later, thereby making it a preferred choice. It was also evident that several women navigated their contraceptive needs by alternating and/ or combining condoms and single dose LNG pills to prevent pregnancy. It was clear that a certain number of women who had access and basic information on the pill, were using it in more or less a planned manner.

Reflecting on issues related to messaging and communication around emergency pills, *Ms Vithika Yadav*, Founder, Love Matters India and Teenbook, stressed the critical importance of a sound communication strategy for emergency pills. She advocated the need to use language that normalizes usage of these pills

2 Festin, Mario P R et al. "A prospective, open-label, single arm, multicentre study to evaluate efficacy, safety and acceptability of pericoital oral contraception using levonorgestrel 1.5 mg." *Human reproduction* (Oxford, England) vol. 31,3 (2016): 530-40. doi:10.1093/humrep/dev341

and felt that the language used to communicate emergency pills should aim to inform rather than intimidate individuals. She further reflected on the need to alter the terminology associated with these pills, moving away from the term "emergency," which carries a stigma in the minds of users, partners and families.

Dr. Sharad Iyengar, Chief Executive, ARTH reflected on the term "emergency" associated with LNG pills. He pointed out that labelling these pills as "emergency" contributes to the stigmatization of unplanned or unexpected but consensual sexual encounters, and that this disproportionately targets women. He shared an innovative community-level approach by ARTH to counteract the stigma linked to its usage, by branding the pill as "*Turant Goli*" (quick or Immediately available pill) rather than using the term "emergency" in the course of visual or interpersonal communication with rural communities. With initial results being encouraging, this might contribute to normalizing and de-stigmatizing the use of emergency contraception. He recommended greater involvement of people working in sexual and reproductive health domain to liberalize access to this option.

Wrapping up the panel discussion, *Mr Anand Sinha, Regional Advisor, Packard Foundation*, observed that the single-dose LNG pill appears to cater well to the needs of those including migrant couples, who engage in infrequent sexual activity. Hence it would be worth exploring a pathway for enabling access within the existing legal and market framework. *Ms Poonam Muttreja, Executive Director of Population Foundation of India (PFI)* saw an opportunity to promote the levonorgestrel pill as a form of self-managed contraception. She endorsed the value of repositioning this pill and recommended behaviour change communication strategies to normalize the use of emergency contraception. Questions and discussion that followed touched on the increasing promotion of EC pills by government health workers (ASHAs, ANMs, etc) and looked at whether the existing legal and policy framework could allow for greater access to this option.

Session 3. Directions for the future

The webinar concluded with a positive view of repositioning the levonorgestrel emergency contraceptive pill, and some recommendations, as follows:

1. Provider and policymakers need to recognize that levonorgestrel emergency pills are safe for repeat use, and that they fulfil a specific need for individuals engaging in sporadic or infrequent sexual activity.
2. Emergency pills hold potential for expansion in India, especially for women having infrequent sex. However, they face certain barriers such as high cost, stigma and poor user demand. Efforts are required to make emergency pills accessible and affordable to women, especially those with lower educational attainment and those inhabiting rural areas.
3. There is need to de-stigmatize or normalize the use of emergency pills -- one of the ways is to rebrand and promote this option in a manner that mitigates stigma. The innovation to rename it as "*Turant Goli*" in rural Rajasthan, is an example of such rebranding.
4. There is need for further research to understand user experiences of emergency contraception in India, especially in communities with high levels of male migration.
5. Stakeholders working in this sector should collaborate to outline strategies and initiatives to effectively reposition emergency contraception in India.

A recording of the webinar is available at the link given below: https://www.youtube.com/watch?v=FGfq_pOb7yE

For more information on the webinar and follow-up, please contact gk@ccr.arth.in or message +91-9404379466

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8 December 2023, 3.00 to 5.00 pm (IST)

Objectives:

1. To review the current Indian scenario with respect to availability, efficacy, safety and acceptability of self-use options for emergency contraception
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Schedule

Time	Description	Speaker/s
3.00 to 3.05 pm	Welcome, introduction and webinar objectives	Dr Sharad Iyengar, Chief Executive, ARTH
3.05 to 3.15 pm	Emergency contraception in India- then & now The use of emergency contraception in India: historical perspective	Chair: Dr Suneeta Mittal, Director (Obs&Gyn), Fortis Hospital Dr Shrinivas Darak, Senior Research Fellow, Prayas
3.15 to 3.30 pm	Legal issues around emergency contraception	Ms Anubha Rastogi, Independent Lawyer
3.30 to 3.45 pm	Peri-coital contraception	Dr Mario Festin, Professor (Obstetrics & Gynecology), University of the Philippines College of Medicine
3.45 to 3.55 pm	Chairperson's remarks	
3.55 to 4.07 pm	Towards wider availability and use of of single-dose LNG pills in India Women's use of EC pills in Rajasthan: formative inquiry	Moderator: Mr Anand Sinha, Regional Advisor, Packard Foundation Ms Gunjan Khorgade, Research Associate, ARTH
4.07 to 4.15 pm	Supply and marketing scenario	Mr Vivek Malhotra, CEO, PHSI
4.15 to 4.23 pm	Communicating EC: where were we, where are we?	Ms Vithika Yadav, Founder, Love Matters India and Teenbook
4.23 to 4.31 pm	Reducing stigma	Dr Sharad Iyengar, ARTH
4.31 to 4.45 pm	Audience questions	
4.45 to 5.00 pm	A way forward	Ms Poonam Muttreja, Executive Director, Population Foundation of India (moderator) Dr Suneeta Mittal, Mr Anand Sinha