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## **Exploring IUD Inserter Interchangeability: Insights from Healthcare Providers and Key Stakeholders**

**Abstract Topic :** From Policy to Practice: Bridging the Gap for Effective Family Planning Services through the

Sector-Wide Approach

**Abstract Status :** Accepted **Submission Type :** Oral Presentation

## **Abstract Summary:**

**Keywords:** hormonal IUD, Implementation, LARC, healthcare provider training

Background: There are four types of IUDs available in Nigeria: copper IUD and three hormonal IUDs, Mirena®, Avibela™, and LNG-IUS. All these IUDs have similar insertion processes; however, the Mirena® uses a single-handed inserter (SHI), while Avibela™ and LNG-IUS use two-handed inserters (THI), similar but not identical to copper IUD. Understanding the interchangeability between different IUD inserters will inform family planning (FP) stakeholders in preparing providers to use different IUD products.

**Aim:** To understand providers' and key informants' (KIs) opinions on the minimal training requirements for using different IUD inserters.

**Methods:** We conducted semistructured interviews with 16 FP providers and 10 Kls.

Results: Providers felt low-level training (e.g., video) and at least one in-person supervision visit was needed to learn a new inserter type if already trained on a different IUD inserter. Conversely, KIs felt that high-level training (in-depth didactic and practicum) was needed to switch between inserter types. When asked to rank the four IUDs based on what they felt clients would choose if price and availability were the same, almost all providers felt

Mirena® would be clients' first or second choice.

**Conclusion:** IUD training curricula should include all available IUDs and the different types of THIs; as well as provide post-training supervision and materials (e.g., videos, manuals, and pamphlets). Stakeholders should advocate for donors and suppliers to explore the feasibility of developing a more-affordable SHI, as providers may see them as preferable.

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