A range of scientific models predict that a world without DMPA is bad for women. It’s a discrete, long-acting method that many women want and prefer. But this isn’t a scenario that’s likely to occur unless there’s profound negligence and poor communication.

In many parts of Eastern and Southern Africa—the parts of the world where DMPA use and HIV prevalence are high—the shot is the only long-acting option on the shelf in programs that provide little or nothing in the way of comprehensive HIV prevention. Women need contraception, so this is better than nothing—but not good enough by a long shot.

One woman faces many choices about HIV prevention and contraception. Funders and governments need to move to integrate programs that provide all these services in one place.

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