

# Introducing the Caya Diaphragm in Francophone West Africa

The Caya diaphragm is a non-hormonal, discreet, and reusable barrier method of contraception—a thin contraceptive cup that fits over the cervix to prevent sperm from entering the uterus. With support from USAID, PATH and partners developed the Caya diaphragm through a human-centered design process involving women, male partners, and providers from multiple countries to expand women's options for non-hormonal contraception, especially in countries where diaphragms are no longer or never were widely available.<sup>1</sup>



**Diaphragm:** Reusable for 2 years, manufactured by Medintim.

**Gel:** 18-month shelf life, use within 3 months of opening, store at 4°C – 25°C, manufactured by DeltaMed.

The Caya diaphragm is indicated for use with a contraceptive gel, like the Caya gel. The Caya diaphragm is approved for use in many countries, including by the US Food and Drug Administration (FDA).

## PILOT INTRODUCTION

With funding from USAID, the Expanding Effective Contraceptive Options (EECO) project piloted the Caya diaphragm in Benin and Niger. In both countries, EECO and the Ministry of Health jointly delivered training, continuing education, and supportive supervision to the private sector, as well as to the public sector in Niger.

EECO provided Caya diaphragm and Caya gel supplies and support materials to facility-based providers and community health workers (CHWs), who integrated Caya into counseling on and provision of all available methods. They used posters with pictorial instructions for Caya use, and pelvic models to demonstrate diaphragm insertion and removal and to facilitate practice by clients.

Clients in Niger who accessed Caya through the public sector received the diaphragm and gel for free, per national guidelines. Clients who accessed Caya through CHWs or private clinics paid subsidized prices. Benin alternated between subsidized sales and free distribution events. The procurement prices offered to EECO by the manufacturer were \$US5.66 per Caya diaphragm and \$US3.76 per tube of Caya gel (in 2021).

## KEY BENEFITS OF THE CAYA DIAPHRAGM INCLUDE:

### Non-hormonal

The Caya diaphragm does not cause changes in menstrual bleeding patterns or other side effects.

### On-demand

Caya can be inserted moments before sex, and does not require action when women do not need protection. Caya should remain in place for 6 hours post-sex.

### User-controlled

Users can start, stop, and re-start using the Caya at any time without consulting a provider. The Caya diaphragm is one-size-fits-most and does not require a provider fitting.

### Reusable

Since the Caya diaphragm is reusable for up to 2 years, clients do not need to resupply the method. Resupplies of Caya gel are needed, however.

<sup>1</sup> Killbourne-Brook M, Hayes J, Hammak R. 2016. [Reinventing the Past to Reshape the Future of Contraception; The Story of the SILCS Diaphragm.](#)

## OPERATIONAL RESEARCH

EECO conducted data collection for a mixed methods operational research study (beginning in December 2019 in Niger and September 2021 in Benin), to identify the socio-demographic profiles of women who chose this method; understand how users are learning about the product and what barriers to access might exist; understand the client experience on the counseling and use of the Caya diaphragm; gather information about how users are storing and cleaning the product; understand the role of male partners in choice and use of the Caya diaphragm; and determine the discontinuation rate after 6 months.

### Results

Six months after initiation, 76.7% of survey respondents in Niger<sup>2,3</sup> and 76.5% in Benin<sup>4</sup> reported continued use of Caya. Top reasons for continued use across all respondents in both countries were that Caya causes no side effects for most users, works on-demand, and is reusable for up to 2 years. Roughly one-quarter of women interviewed reported intermittent use (alternating Caya use with no method or another method). Some men supported their partner's use; in other cases, women used Caya without informing their partners. Providers described Caya as compatible with the needs of many women and credited pelvic models with enabling effective counseling. In Benin, many users report using Caya in combination with fertility tracking, using Caya only during their fertile window.

## CONCLUSION

The results of EECO's pilot introductions in Benin and Niger are promising: they demonstrate that the Caya diaphragm has the potential to be a valuable addition to the range of contraceptive options, especially in settings with high levels of opposition to other modern methods. The results and insights gathered from these pilots can inform Ministries of Health and other stakeholders considering adding the Caya diaphragm to their national contraceptive method mix.

To learn more about EECO's pilot introductions in Benin and Niger, please contact: Beth Brogaard, EECO Deputy Director, at [bbrogaard@psi.org](mailto:bbrogaard@psi.org).



More than 76% of survey respondents in Niger<sup>2,3</sup> and Benin<sup>4</sup> reported continued use of Caya six months after initiation.

### NIGER

**150** adopters surveyed  
**25** IDIs with adopters  
**15** IDIs with providers  
**15** IDIs with potential partners

### BENIN

**225** adopters surveyed  
**30** IDIs with adopters  
**15** IDIs with providers  
**15** IDIs with potential partners

IDI = in-depth interview

<sup>2</sup> 95% confidence interval=0.70, 0.83

<sup>3</sup> Jackson et al. 2022. [A New Contraceptive Diaphragm in Niamey, Niger: A Mixed Methods Study on Acceptability, Use, and Programmatic Considerations](#). *Global Health: Science and Practice*, 10(1):e2100532.

<sup>4</sup> Manuscript forthcoming.

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