

Innovation

Unlocking Potential at the Point of Care

Re-imagining Pharmacies for Access, Quality, and Choice in Family Planning

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For many Kenyan women, getting FP services has for long meant enduring long queues, rushed consultations, and little privacy. However, across towns and cities, community pharmacies, once seen as simple medicine shops, are becoming trusted spaces where women can ask questions freely, receive respectful counselling, and choose the contraceptive method that works for them, bringing Kenya closer to national goals of wider family planning access and choice by 2030.

As one woman put it, “I feel like in a hospital there are so many people so they don’t concentrate on one person but when I come to the chemist it’s only me or another one client so she’ll explain to me the methods better than the hospital.”

For years, many Kenyans viewed community pharmacies as commercial spaces, good for buying painkillers, not for trusted FP advice. The concerns were real, based on some common experiences including instability, skill misconceptions, and concerns about quality of services rendered. Specifically, there were common reports that some pharmacies open today and close tomorrow, eroding trust. Providers were often perceived as less knowledgeable than clinic staff. Reports of substandard medicines or over-dispensing deepened public skepticism. Without intentional efforts to shift perceptions, pharmacies risked being overlooked despite being the most accessible health touchpoints for youth, women, and underserved communities.

This is the story of how community pharmacies are becoming a safe, easy, and trusted place for women to access family planning services. When the Market Test initiative began rolling out FP services, two Nairobi pharmacies stood out for building trust over the years: they built trust. Lucky Summer Chemist had served its neighbourhood for fifteen (15) years, while Moments Pharmacy for twenty-one (21). In

communities where businesses change overnight, their stability became their strongest asset. Different clients described them variously as where “you find the same familiar faces”; “they know you by name”; and, “you can ask anything without feeling judged.” These pharmacies used that goodwill to introduce injectable contraceptives, including DMPA-SC for self-injection by creating private corners for counselling, taking time to explain safety and dispel myths, checking blood pressure and weight and establishing referral links with nearby public health facilities. The results were immediate and striking. These two outlets recorded the highest number of FP revisits and injectable contraceptive uptake among all participating pharmacies, without a single stockout.

According to the service provider at Moments Pharmacy, “clients kept coming back because they trusted us. They knew we would guide them well.” Their story is simple but profound: when women trust the provider, they trust the method. This case study shows that pharmacies do not earn credibility just through training; they earn it through consistency, values, and care over time.

Building on the lessons from the Market Test project, the Optimizing the Pharmacy Channel (OPC) project was launched to scale up FP services within community pharmacies. The project works hand-in-hand with the Ministry of Health, the Pharmacy and Poisons Board, and professional associations such as the Pharmaceutical Society of Kenya, and Kenya Pharmaceutical Association to ensure that community pharmacies are trusted partners in reproductive health besides being points of sale. Through OPC, over 200 pharmacies in ten counties (Nairobi, Kiambu, Meru, Narok, Kisumu, Uasin Gishu, Kisii, Kajiado, Kericho, Nakuru) have been trained to offer high-quality FP services. Using a county-level trainer-of-trainers model, local experts now mentor and support pharmacy staff, ensuring that women receive consistent, client-focused care no matter where they go.

Pharmacies are also being integrated into the wider health system. If a woman needs a contraceptive method not available at her local pharmacy, she can be referred seamlessly to a nearby hospital. Like-

wise, hospitals experiencing stock-outs can direct women to pharmacies. This total market approach, which coordinates public and private sector actors, ensures that FP products are available, accessible, and affordable for all women and continuity of care. Data from these pharmacies feed into the Kenya Health Information System (KHIS), providing a clear picture of FP service delivery across public and private sectors.

The impact has been remarkable. Since OPC began in early 2023, more than 85,000 women and girls have accessed contraceptives through trained community pharmacies. Each number represents a woman empowered to make her own decisions about her health, helping Kenya move closer to its FP2030 goals: increasing modern contraceptive use among married women from 58% to 64% and reducing unmet need for family planning from 14% to 10% by 2030.

Behind the numbers is a simple truth: women want options they can trust, spaces that respect their privacy, and services that fit into their daily lives. Pharmacies are increasingly becoming that first, reliable point of care.

Today, pharmacies are now being recognised as official FP providers through standardised accreditation processes developed with the Pharmacy and Poisons Board (PPB). This ensures quality, consistent service for clients, while strengthening the public-private partnership that underpins sustainable healthcare.

Now, community pharmacies, once overlooked in public health planning, are proving they can be transformative. For women, this means having a trusted space to discuss options, ask questions, and make decisions with dignity. For Kenya, it means a tangible step toward universal health coverage and the FP2030 vision: a future where every woman and girl can access FP safely, easily, and with choice.



The writers work with InSupply Health