Contraception changes lives. Access to family planning care enables women to decide how many children they want, and when they want to have them. With this autonomy, women and girls can stay in school longer, pursue their career aspirations, become more financially independent, have better overall health and participate more fully in their communities.

In 2009 Marie Stopes International (MSI) launched a new, innovative program to empower nurse midwives as entrepreneurs to deliver high-quality family planning services in their communities. Called Marie Stopes Ladies, this successful model is now operating in 10 countries globally. We believe that Marie Stopes Ladies has the potential to transform community health care, and help eradicate unsafe abortion and unmet need for contraception.

In this game-changing model, female providers lean forward to serve other women in their community, generating income and transforming social norms. Women are enabled to access quality services from providers they trust at a price they can afford.

**The Marie Stopes Ladies model at a glance**

Marie Stopes Ladies is rooted in entrepreneurship and supported by ongoing, rigorous training and supervision by MSI country programs. The model aims to achieve financial sustainability, following an initial investment to start the project with limited ongoing costs. The Marie Stopes Ladies increase access for women who would not otherwise have a means of getting family planning services and also offer follow-up care.

**Countries recruit self-employed, qualified midwives/nurses in regions with high unmet need and provide training**

**Marie Stopes Ladies buy contraceptive supplies from MSI at a margin above the low price that MSI sources them at, directly from manufacturers**

**Marie Stopes Ladies deliver family planning services in their communities and charge a service fee**

**Clients pay Marie Stopes Ladies directly. Marie Stopes Ladies keep their income and report data to MSI supervisor**
Marie Stopes International (MSI) is a global leader and provider of comprehensive sexual and reproductive health care around the world. We work in 37 countries to offer a full range of contraceptive and (where legal) safe abortion services. To learn more about MSI or Marie Stopes Ladies, contact:

www.mariestopes.org

Marie Stopes Ladies offer a contraceptive lifeline. By going directly to underserved, remote communities with a full range of options, Marie Stopes Ladies provide choice and ongoing care for the women they serve.

Marie Stopes Ladies also have:

- The trust of the women and girls they serve.
- An understanding of the local culture.
- An in-depth awareness of the social factors influencing decision-making around reproductive health.

In the countries where this approach has been piloted, it is the most cost-efficient of MSI’s service delivery models. It is also highly effective at reaching young people and women with limited movement outside the home, due to restrictive gender norms or conflict.

Additionally, this model benefits the entrepreneurial women who serve as Marie Stopes Ladies. These trained medical professionals earn fees for services provided to women in their community, earning additional income for themselves and their families.

Our impact and future

Since piloting Marie Stopes Ladies in Madagascar in 2009, MSI has expanded the model to nine other countries: Burkina Faso, Ghana, Mali, Nepal, Niger, Nigeria, Senegal, Vietnam and Uganda.

Over the next five years, we aim to:

- Expand this program to new countries.
- Increase its financial sustainability.
- Grow the number of services delivered by Marie Stopes Ladies ten-fold.

We also aim for 45% of our Marie Stopes Ladies clients to be under age 25 by 2020 to help better reach young people with contraception. The Marie Stopes Ladies are on track to deliver more than 750,000 family planning services to women in 2016.

Profile of a Marie Stopes Lady

- Trained nurse, midwife or community health worker with an entrepreneurial spirit.
- Has a desire to generate an incremental additional income for herself and/or her family.
- Resides in rural or peri-urban communities where access to family planning and contraceptive services are limited.
- Permitted under local law to provide a range of short and long-term birth control methods.