



Increasing Male Involvement Contributes to Uptake of No-Scalpel Vasectomy in Bangladesh

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Background

- In Bangladesh, male methods represent only 5% of the total contraceptive prevalence rate (CPR) of 56%.
- Sterilization in particular is not popular (<1% of the method mix), due to many myths and misconceptions.
- A review of recent national family planning (FP) data showed that some centers are starting to see increased uptake of no-scalpel vasectomy (NSV).
- In March 2010, the Mayer Hashi project conducted a rapid assessment at some of these centers to identify and document factors that might be influencing NSV uptake.
- In addition to other interventions, these centers have been using satisfied NSV clients as referrers.

Assessment Process

- A rapid assessment was conducted at four Mother and Child Welfare Centers (MCWCs) out of the total 93 of these district-level centers.
- The review methodology included:
 - Review of records and service statistics
 - Facility observation
 - Informal group discussions
 - Interviews with staff, referrers, and NSV clients
- Information was gathered by a team of Mayer Hashi researchers and project staff.

Key Factors that Contribute to High Performance

Managerial Factors

- Team effort at the center
- Effective involvement of satisfied vasectomy clients
- Consistent service availability and accessibility
- Systematic management of the clinic
- Efficient case management



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Key Factors that Contribute to High Performance

Technical Factors

- Skilled surgeon
- Prompt and effective management of side effects
- Effective client follow-up

Environmental Factors

- Community awareness of FP
- Positive attitudes of staff and surgeon
- Supportive district leadership
- Changing male perceptions on sterilization



Role of Satisfied NSV Clients

In the community

- Establishes a good relationship with prospective NSV clients
- Provides necessary information on NSV
- Uses himself as an example to prove that he is OK after NSV
- May facilitate effective spousal communication by talking to client's wife



At the facility

- Introduces NSV clients to the provider
- Accompanies clients during counseling session
- Accompanies the client home or arranges transportation

Scaling Up the Intervention

- Based on the rapid assessment recommendations, Mayer Hashi started supporting the Directorate General of Family Planning (DGFP) in scaling up the use of satisfied NSV clients to another 16 districts.
- As part of this scale-up, a one-day orientation for satisfied NSV clients was designed and implemented (30 NSV clients per facility).
- Between April 2010 and July 2011, 2,300 satisfied NSV clients participated in the orientation. They received a certificate from the Government as official recognition and encouragement.
- Satisfied NSV clients have started talking to prospective clients and referring them. Once they refer clients and accompany them to a facility, they receive the government-approved referral fees.
- The DGFP included the intervention in their Operational Plan and is conducting the orientation in non-Mayer Hashi areas with government funds.

Results

- Performance statistics from the national management information system show increased NSV uptake in a number of districts.
- Satisfied clients refer an average of 2-3 clients per month.
- Although 30 satisfied clients underwent the orientation in each subdistrict, it is generally a smaller group (7–10 men) that are actively involved in motivating prospective clients.

Program Implications/Lessons Learned

- Men usually do not feel comfortable discussing vasectomy with female fieldworkers.
- Satisfied clients speak from their own experience on NSV.
- Official recognition from the government encourages satisfied clients to become regular referrers.
- Satisfied NSV clients could be an effective impetus for combatting apprehension over NSV.
- Additional coaching and supervisory support is needed to encourage all NSV clients to become more active.
- Broader behavior change communication (BCC) activities contribute to increasing the overall acceptability of NSV, and satisfied NSV clients need to be linked up with local-level BCC campaign activities.
- NSV uptake can be increased through increased male involvement, through satisfied NSV clients.

Thank You



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