

**Presentation title:** Promoting vasectomy as a way of involving men in Family Planning as champions and users.

**Focus:** Family Planning

**Organisation:** Reach A Hand Uganda (RAHU)

**Presentation type:** Poster Presentation

## Background

Reach A Hand Uganda (RAHU<sup>1</sup>) is heavily invested in promoting access to and uptake of Family Planning (FP) and modern contraception services in Uganda. RAHU is promoting voluntary male involvement in family planning and is implementing the Men plus project which promotes vasectomy as a viable and safe option for men. The project targets men of 35 years and above, their spouses (Tubal Ligation) and male champions in the 8 piloted districts of; Kampala, Wakiso, Iganga, Mityana, Mbarara, Hoima, Mbarara and Arua.

The uptake for FP services in Uganda remains considerably low with a contraceptive prevalence rate of 26% in married women and is almost non-existent among men. The low uptake is attributed to the widely held misconceptions on FP fuelled by misinformation on method use and side effects<sup>2</sup>. Uganda's total Fertility Rate (TFR)<sup>3</sup> is one of the highest in the region at 5.4%<sup>4</sup> (Tanzania - 5.02% and Rwanda - 3.88%<sup>5</sup>) and although the TFR reduced from 6.2% in 2011 to 5.4% in 2016 the Uganda Demographic Health Survey (UDHS 2016)<sup>6</sup>, Uganda's rate is still high. The implication here is that many families and young adults are having children that they are unable to support.

The **Menplus** project is addressing a challenge that limits FP uptake to women as being a "women's issue" as opposed to it being a collective responsibility of men and women. This explains why the available long-term FP methods and services are intended for women such as; the Intrauterine Device (IUD), Tubal Ligation, implants and hormonal methods (injectables and pills). On the other hand, Men's FP options are limited to the use of condoms which are an effective barrier method when used correctly and consistently.

## Strategy and Milestones

The project is using the male champions model who are encouraging their peers to take up vasectomy as a safe, quick and reliable family planning method. Male champions are clients who have undergone the vasectomy procedure and are willingly sharing their stories and experiences about the vasectomy as one of the available and effective long-term FP methods enabling them plan for their families. Through conducting integrated community outreaches, clinic-based interventions, district launches, group education sessions, online campaigns, and interpersonal communication, the campaign is breaking the barriers to accessing Vasectomy and Bilateral Tubal Ligation (BTL). Additionally, the project has established a **toll free** number (**0800200600**) which is capturing clients' feedback as well as referring potential clients to the designated men plus referral centers in the 8 districts to access the FP services. The project which started in Kampala city, has now expanded to 8 districts of Uganda, and Since its inception in February 2019, the campaign has realised **210 vasectomy** acceptors and **16 BTLs**<sup>7</sup> (as of June 2019)

## Lessons Learned

1. Interpersonal communication ( Use of Male Champions and Acceptors) is vital in addressing key myths and misconceptions that prevent men from accessing Vasectomy/playing an active role in Family planning.
2. A multi-sectoral approach is needed in increasing access to FP/Vasectomy. Organisations such Reach a Hand (community mobilisation) and Reproductive Health Uganda (service provision), working together increases access to services.

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<sup>1</sup> Reach A Hand Uganda (RAHU) is a youth led and youth serving organization premised on youth empowerment programs with a focus on Sexual Reproductive Health and Rights and livelihoods.

<sup>2</sup> Population matters; United Nations Population Fund (UNFPA) 2017 [https://uganda.unfpa.org/sites/default/files/pub-pdf/familyPlanning\\_BriefEdit%20%284%29.pdf](https://uganda.unfpa.org/sites/default/files/pub-pdf/familyPlanning_BriefEdit%20%284%29.pdf)

<sup>3</sup> the number of children per woman,

<sup>4</sup> 2016 Uganda Demographic Health Survey

<sup>5</sup> Uganda Bureau of Statistics (UBOS)<https://www.ubos.org/explore-statistics/25/>

<sup>6</sup> 2016 Uganda Demographic Health Survey

[https://www.ubos.org/onlinefiles/uploads/ubos/pdf%20documents/Uganda\\_DHS\\_2016\\_KIR.pdf](https://www.ubos.org/onlinefiles/uploads/ubos/pdf%20documents/Uganda_DHS_2016_KIR.pdf)

<sup>7</sup> Data from Partner Health Facilities

3. Engaging both men and women in embracing permanent and long-term FP methods is important in addressing cases of gender-based violence in families.
4. Clear messaging is vital in increasing access to Vasectomy. The messages need to be simple, enthusing and address reasons for Vasectomy.

### **Conclusion**

The use of satisfied users (male champions) is an effective tool that the project has leveraged to promote male involvement. It is particularly important in addressing myths and misconceptions around the vasectomy procedure and encouraging men to take it up as a safe and effective permanent FP service. The support of local and other community leaders has improved mobilization, attendance at launches and service provision stations. The multi-sectoral approach has ensured quality service provision to the men and women. Therefore there is a need to ensure continuity, and develop clear and simple messages addressing key myths and misconceptions about Vasectomy. It is also important to work with Government Health Centers and structures to tap into the men and women who visit them for services.

### **AUTHOR**

**Name:** Humphrey Nabimanya

**Title:** Founder & Team Leader, Reach A Hand Uganda (RAHU)

**Email:** [Humphrey@reachahand.org](mailto:Humphrey@reachahand.org)

**Physical Address:** Plot 7502, Block 244, Heritage Village, Kansanga, along Ggaba Road, Kampala, Uganda.

**Country of Residence:** Uganda