Overview of Female Sterilization Programming in Eastern Africa

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Presentation Outline

> Background
> Increasing awareness and demand
> Enabling environment
> Supply side
> Priorities from a regional meeting on PMs
Background

Percentage of unmet need, mCPR, and %FS for 11 Eastern African countries

Source: FP2020, PMA2020 and DHS
Characteristics of clients using FS

- Majority are women >35yrs
- Number of living children 3+
- Urban (range 0.4% -10.2%) & Rural (range 0.4% to 11%)
- Level of education
- Wealth quintile

Source: DHS data
Increasing awareness and demand (1)

- Kenya RH communication strategy
  - National community health strategy
- Malawi request for SBCC Strategy for PMs and male engagement
- Affordable FP services
- Cost of FS services
  - Client payments for FS services as much as 100$ in public facilities
  - Not covered by most insurance schemes
  - RH voucher schemes

Percentage of current FP users who paid for FP at last visit for all women

- Uganda
- Kenya
- Ethiopia
Increasing awareness and demand (2)

- Addressing myths and misconceptions
- Young couples/individuals (want to limit early)
- Hard to reach popn., People with disabilities
- Use of champions – satisfied clients
- Community health workers /mobilizers
- Mass media
- Posters, fliers announcements at community gatherings/market places
- Use of social media
Positive social and gender norms

- Gender key factor influencing access and acceptance of FS (and MS)
- Gender norms e.g. cultural expectations influence extent women can access voluntary FS
- Ensuring programming is at minimal gender sensitive and accommodating
- Adoption of protocols for couple counseling
- Spousal consent not requirement
Enabling Environment

- Government leadership in most countries critical
- Legal environment
  - Allowed only for therapeutic reasons (Sudan)
- PM strategy – Ethiopia in process of developing one
- Costed implementation plans
- National guidelines and standards, procedure manuals
  - Global consensus on PM and FS technique
  - FS Champions at all levels
  - Partner coordination
Supply Side

> FS services in public/private/FBO outlets

> Service Delivery Modalities

  ▪ Routine services (static facilities)
  ▪ Mobile outreach (public or PPP)

> Infrastructure – minimum standards for procedure area - renovations
Skilled Providers

- A team effort (3-4 staff minimum)
- Lack of skilled providers most common barrier to access
  - Task sharing (mid-level providers – Malawi, Mozambique, Ethiopia, Tanzania, Kenya & Uganda)
- Provider bias
- Two weeks skills training (centralized/OJT/mentorship)
  - Mostly in-service training
  - Not harmonized in most countries
  - Centers of Excellence (Ethiopia)
- Skills to provide PMs no longer a requirement for registration after internship - doctors
Supervision, Management and QA

- Monitoring & mentoring/coaching visits
- Reporting & use of data
- Counseling & provider skills
- Job aids/guidelines
- Infection prevention
- Staff motivation
- Supplies and commodities
- Quality of services

% of FP staff reporting having received supervision visit and training/updates

Source: Service provision assessments Tanzania 2014/5 and Malawi 2015/6, NCPD Kenya Health Facility Assessment, 2015
Quality counseling

- Voluntarism, written informed consent
- Regret
  - After procedure
  - Regret among clients who did not receive FS – not addressed
- Counseling approaches
  - REDI/Balanced counseling/GATHER
- Task shift counseling to non medical providers & verified by surgeon
- Choice, side effects, after-care
- Post abortion clients

Quality of Counseling: (Method Information Index)

<table>
<thead>
<tr>
<th></th>
<th>Ethiopia - R4</th>
<th>Kenya - R5</th>
<th>Uganda-R4</th>
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<tbody>
<tr>
<td>% of current users informed about other methods</td>
<td>80</td>
<td>60</td>
<td>90</td>
</tr>
<tr>
<td>% of current users informed about side effects</td>
<td>60</td>
<td>40</td>
<td>60</td>
</tr>
<tr>
<td>% of current users informed what to do if they experience side effect</td>
<td>100</td>
<td>80</td>
<td>100</td>
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Source: PMA2020
Method Mix

- Increases client satisfaction
- FS important ingredient of the method mix
- National govts. commitment to expand method mix and increasing choices
- Skewed method mix common across and within countries
- Hard to reach populations
- Stock-out of commodities and supplies
Priorities from the East African regional meeting (Aug/Sept 2016)

- Ethiopia, Kenya Malawi, Mozambique, Tanzania, Uganda & DRC (MOH, Partners – USAID missions, CAs, Marie Stopes, IPPF Affiliates)

- Priorities from meeting
  - Harmonization of training approaches
  - Provider BCC approaches package
  - Guidelines on minimum infrastructure/procedure area requirements
  - Reporting systems (feeds into HMIS)
  - Best practices for engaging CHWs
  - How to work with religious leaders
  - Country specific action plans
Thank you!

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