Engaging Men to Improve the Utilization of Long-Acting and Permanent Methods of Family Planning: Experience from Oromiya Region, Ethiopia

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**RESULTS**

- EngenderHealth trained 950 HEWs assigned to the catchment areas of 69 public health facilities offering LAPM services.
- Over a 2-year period, 536 trained HEWs conducted 7,600 community dialogue sessions with men and visited 36,248 households to discuss FP options, including LAPMs, with couples.
- Through this work, HEWs reached 172,348 people, including 54,000 husbands. Of the total reached, 101,937 received modern contraceptive services. Further, more than half of those individuals (51,024) selected LAPM options: 54% received implants, 43% received the intrauterine devices, and the remaining 3% (including 72 men) selected sterilization. (See Figures 1 and 2.)

**METHODOLOGY**

- Building on Ethiopia’s basic training package for HEWs, EngenderHealth developed a 3-day training focused on engaging men in structured community dialogues and during household visits where HEWs can support couples in making informed decisions related to acceptance of LAPMs.
- Once trained, the HEWs facilitated bimonthly community dialogues with men to discuss LAPMs as a group. HEWs subsequently conducted individual household visits wherein they discussed LAPM options that could help couples achieve their reproductive intentions and provided referrals to health facilities and outreach services in their area.
- HEWs used registers to record key data related to the community dialogue sessions and household visits and provided data to the project for analysis. The project also collected service data from participating facilities for analysis.

**SIGNIFICANCE**

- While there has been an increase in the contraceptive prevalence rate in Ethiopia, unmet need for family planning (FP) has remained relatively high while use of long-acting and permanent methods (LAPMs) has remained low. Married women alone have an unmet need for FP at 22%, including 3% for spacing and 9% for limiting.
- The government of Ethiopia has deployed more than 35,000 health extension workers (HEWs) to provide community-based healthcare, including provision of select FP methods. However, HEWs are constrained by social barriers in providing FP, particularly as men serve as the primary decision-makers on issues such as family size, FP use, and method selection.
- EngenderHealth sought to build HEW capacity in delivering FP information and counseling and in engaging men as partners to facilitate uptake of FP, particularly LAPMs.

**IMPLICATIONS AND LESSONS LEARNED**

- This study demonstrated the effectiveness of engaging men as a group at the community level and then again individually with their partners at the household level in order to disseminate FP information and promote informed, shared decision making about fertility and method selection.
- While this study focused on LAPMs, it suggests that these communication approaches could be effective in similarly increasing demand for and uptake of other FP methods.