Integrated Family Planning & Reproductive Health Program: A Community Based Approach

CATALYST/TAHSEEN Project in Egypt

The Need

IUD is the preferred family planning method in Egypt for more than two-thirds of users. It is also viewed as the best contraceptive method for nonusers who intend to use contraceptives in the future (Egypt Interim Demographic and Health Survey, 2003). Despite its popularity, there are several gaps that still need to be filled in the areas of counseling, and in addressing side effects and the many misconceptions and myths that deter women from using the IUD. The common misconceptions about the IUD that TAHSEEN address in its program: 1) IUDs cause bleeding to death, 2) IUDs leave the uterus, swim in the body then reaches the heart and causes death, 3) If pregnancy happens over an IUD it will cause anomalies to the baby.

Program Overview

TAHSEEN integrated family planning and reproductive health (RH/FP) model focuses on improving the quality of care, mobilizing the community and ensuring long-term sustainability. TAHSEEN’s community-based model for provision of RH/FP services involves training of providers, community mobilization, linkages to non-health programs, working with media and enforcing the message through behavioral change and communication activities. The following is a brief description of the TAHSEEN model, which is currently implemented in 54 communities in 4 governorates in Upper Egypt—Minia, Beni Suef, Fayoum and Giza.

Improving quality of services

TAHSEEN provides integrated RH/FP clinical training to community service providers—physicians, nurses, lab technicians, and outreach workers, from both the public and private public sectors, to improve their skills and ability to provide quality RH/FP services. In addition, TAHSEEN provides training on IUD insertion as well as on immediate postpartum IUD insertion to physicians and nurses working in district hospitals.
Mobilizing the community

Mobilizing the community involves enlisting the support of community leaders through, trainings, and conducting awareness-raising sessions in the community. The goal of this effort is to inform men and women about FP to enable them to make an informed choice. This will lead to increased utilization of services and create a more accepting environment for people who seek these services.

Training of community leaders: Community leaders are effective agents of attitude and behavior change. Important community leaders include local village leaders, Muslim and Christian religious leaders (male and female), members of Project-sponsored governorate-level youth committees, media professionals, elementary and secondary school teachers and principals, university-based officials, educators and peer-educators, agricultural and irrigation extension workers, literacy facilitators, community outreach workers (from the health unit and from local NGOs), officials who work at local youth centers, officials with the local Cultural Palaces, and local NGO. Many of these groups work in non-health sectors and represent non-traditional partners. Working with these individuals helps the Project reach communities that have traditionally been difficult to approach. TAHSEEN provides these multidisciplinary groups with trainings on various RH issues with special emphasis on family planning.

Community awareness-raising sessions: Trained community leaders conduct awareness-raising sessions with their constituencies and with the public at large in a variety of venues, including mosques, churches, literacy classes, and in NGO facilities. TAHSEEN provides them with materials, such as posters and brochures, to help them facilitate these sessions. Issues discussed include benefits of IUD and myths and misconceptions surrounding the use of IUD. A physician is often present during the sessions to provide the medical point of view of the topics discussed.

Linkages to non-health programs

TAHSEEN links with non-health programs such as literacy, agriculture/irrigation and incorporates important messages in their training curriculum to dispel common misconceptions and myth surrounding the use of the IUD as well as other contraceptive methods.

Media

TAHSEEN provides RH training to media professionals in television, radio and print media to build their RH capacity and improve media coverage of RH/FP issues. TAHSEEN establishes a media group that brings together media professionals as well as reproductive health experts and the governorate’s director of FP/MCH. The group meets once a month to discuss effective ways to highlight health issues in their community. Topics covered at meetings include the health and family planning situation in the focus governorate compared to the rest of Egypt, safe motherhood emphasizing disadvantages of early, late, frequent and closely spaced pregnancies, gender roles and husbands’ involvement in RH/FP and girl’s education and its impact on their health and that of their children.
Behavior Change Communication Vehicles
Plays & Puppet Shows

Plays and puppet shows are entertaining ways to convey RH/FP messages to large audiences. The plays are performed in conjunction with each governorate’s *Cultural Palace*, a state-sponsored cultural and performing arts center. Young people in particular respond to the familiar characters used in the puppet show; these shows are followed by panel discussions featuring medical professionals and religious leaders. NGOs organize plays and puppet shows as part of their outreach activities. Messages to dispel common myths and misconceptions about contraceptives including the IUD are incorporated into TAHSEEN’s plays and puppet shows, reinforcing messages disseminated by health providers and community leaders.

Men’s Involvement

Recognizing the influential role that men play in RH/FP, TAHSEEN/CATALYST adopted a multi-sectoral, multifaceted approach to engaging men in sharing responsibility for their own unmet reproductive health needs and supporting their partners. TAHSEEN works to provide men with direct, practical information about reproductive health matters, emphasize men’s shared role in planning their family and assists in the acquisition of communication skills needed to make a shared decision about family planning with their spouse. To this end, TAHSEEN trains religious leaders, local government officials, literacy educators, agriculture/irrigation extension workers, and media professionals to build their knowledge base of reproductive health, creating RH/FP champions in the community.

Results

TAHSEEN’s integrated RH/FP model proved to be successful in improving community knowledge of contraceptives and increasing the uptake of FP methods including the IUD. Community knowledge about the IUD has changed significantly judging from the pre/post test results of the various training activities with service providers and community leaders in Minia. Physicians improved their knowledge of the relationship between IUD and the risk of PID (pretest 20% and posttest 80%, N=594). Community leaders such as religious leaders and agriculture extension workers also improved their knowledge. For example, in the posttest 99% of the participants correctly identified that the IUD was effective for 12 years compared with 62% in the pretest (N=79). Also, agriculture extension workers, who are in turn teach farmers about FP, learned of postpartum IUD insertion (pretest 27% and posttest 84%, N=51).

Service statistics from five prototype clinics in Minia governorate revealed that IUD contributed to 65% of the method mix in quarter one of 2005 verses 41% in the same quarter of 2004. Furthermore, household survey in Malattia, Minia showed that the use of the IUD among low parity young married women increased from 46% in October 2004 to 51% in June 2005 (N=200; p<0.01).