

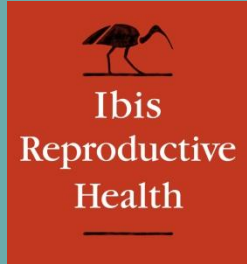
UCSF

University of California
San Francisco



Impact of integrating family planning services into HIV care and treatment on familiarity with and attitudes toward family planning methods

Sara J. Newmann, Daniel Grossman, Maricianah Onono, Elizabeth A. Bukusi, Mary N. Armes, Starley Shade, Rachel L. Steinfeld, Gorrety Akinyi Ong'udi, Cinthia Blat, Craig R. Cohen



Department of Obstetrics,
Gynecology & Reproductive
Sciences

School of Medicine

Background

- **Reasons for non-use of contraception include:**
 - **Opposition to Use**
 - **Lack of Knowledge**
 - **Fertility-related reasons**
 - **Method-related reasons**
- **Does the structural intervention of FP/HIV integration impact barriers related to partner opposition to and lack of knowledge of FP?**



Objective

- **Assess impact of integrated FP and HIV services on familiarity with more effective FP methods and male attitudes toward women using FP:**
 - Before and after the intervention
 - Between integrated and non-integrated sites



Methods

- **Prior to intervention staff received training and education to strengthen FP services at all sites**
- **Cross-sectional surveys conducted with a convenience sample at all 18 sites**
 - Pre-intervention: 488 women, 486 men
 - Post-intervention: 478 women, 481 men



Methods - FP familiarity score

- **FP familiarity score created based on the number of more effective FP methods patients could identify (score range: 0-6).**
 - Male and female sterilization
 - Oral contraceptive pills
 - Subdermal implants
 - Injectable contraception
 - Intrauterine contraception

Methods - Male attitudes towards FP

Men were asked if they agreed or disagreed with the following statements:

Contraception is women's business and a man should not have to worry about it.

Women who use contraception may become promiscuous.



Methods - Analysis

- Multivariable analysis controlling for clustering within sites and differences in baseline measurements.



Results - Demographics

Measure	Integrated		Non-Integrated	
	Female (%) n=316	Male (%) n=318	Female (%) n=163	Male (%) n=163
Age				
18-25	23	8	26	14
26-34	51	36	52	41
35+	26	56	22	44
Highest educational level				
None or primary	78	70	86	76
Secondary or greater	22	30	14	24
Married/Partnered				
Married	64	86	66	83
Living with partner	7	2	6	2
Partnered, not living together	11	4	11	5
Not in relationship	18	8	18	9



Results - Demographics

Measure	Integrated		Non-Integrated	
	Female (%) n=316	Male (%) n=318	Female (%) n=163	Male (%) n=163
Disclosed to partner	67	83	66	80
Reported health status				
Good	76	79	59	69
Fair	22	18	37	27
Poor	2	3	4	4
Number of living children				
0	6	8	11	12
1-3	58	43	57	44
≥4	36	48	32	43
Desired Fertility delay				
0-2 years	18	28	21	27
> 2 years	21	23	20	15
Does not prefer to have any more children	58	43	54	53
Other	4	6	6	6



Results – Current use of FP

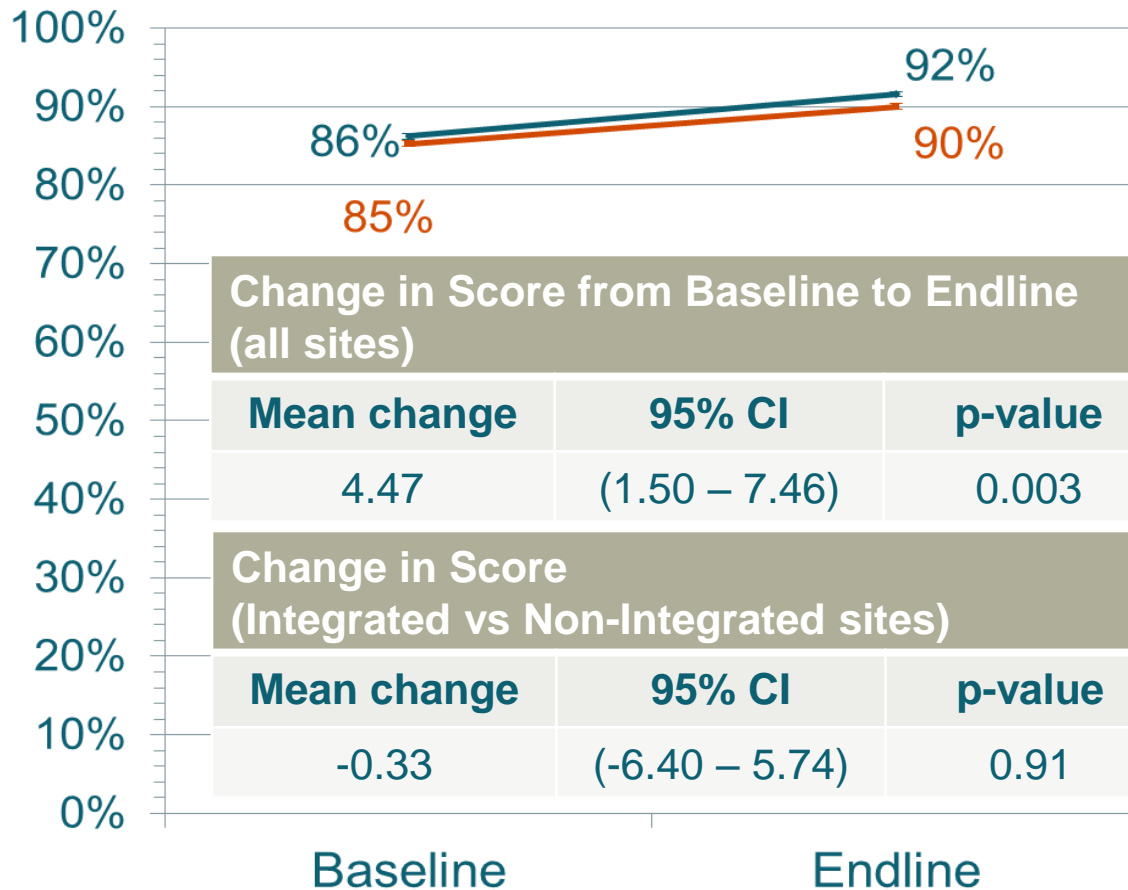
Measure	Integrated*		Non-Integrated*	
	Female (%) n=316	Male (%) n=318	Female (%) n=163	Male (%) n=163
More effective methods	59	24	41	21
Female Sterilization	2	2	1	0
Male Sterilization	0	0	1	0
Pill	5	3	1	4
IUCD	2	0	2	1
Injectables	35	13	24	14
Implants	15	6	12	2
Less effective methods	35	79	45	81
None	17	13	28	18

*total % is greater than 100% as patients could mention more than one current method

Results – Mean Familiarity Score

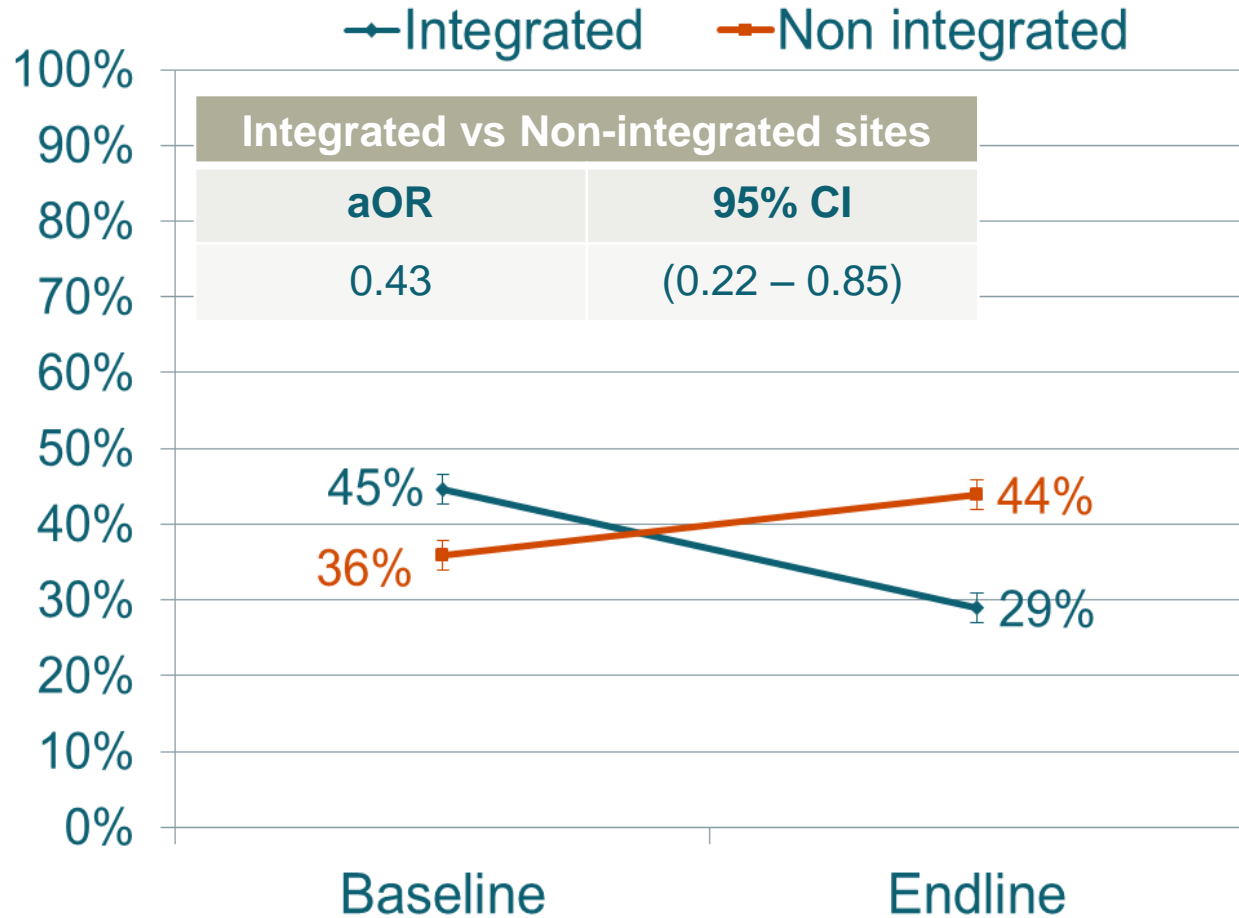
(n=1898)

— Integrated — Non integrated



Results – Male Attitudes FP is woman’s business

(N=929)



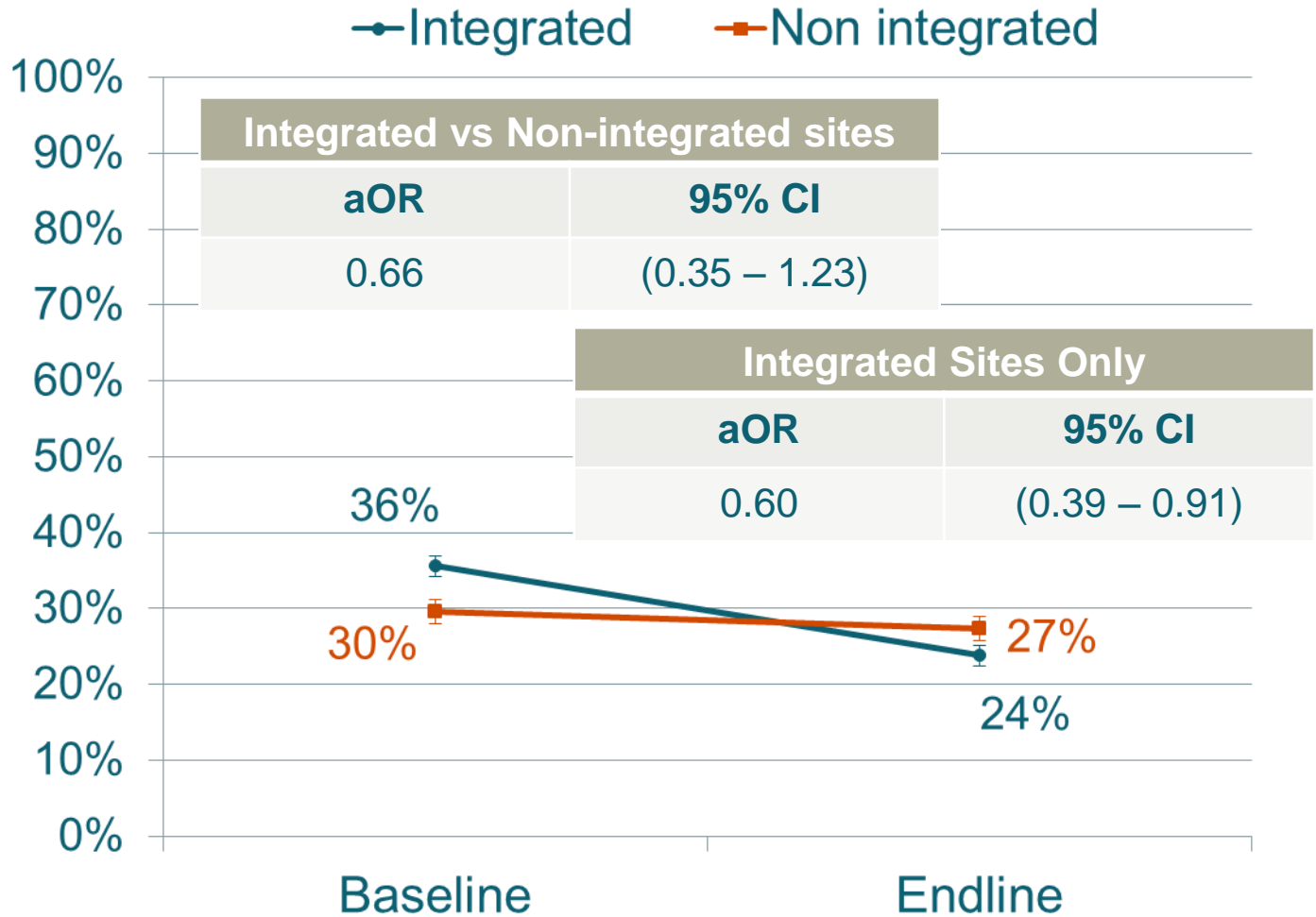
Bixby Center
for Global
Reproductive
Health

Department of Obstetrics,
Gynecology & Reproductive
Sciences

School of Medicine

Results – Male Attitudes FP use associated with promiscuity

(N=929)



Bixby Center
for Global
Reproductive
Health

Department of Obstetrics,
Gynecology & Reproductive
Sciences

School of Medicine

Conclusions

- **Following FP service strengthening, familiarity with more effective FP methods increased overall but did not differ by integration status**
- **Integration was associated with a decrease in negative attitudes among men toward FP**
- **Further research needed about how involving men and increasing gender equitability towards FP influences contraception uptake and use.**