



Assessment of Private Providers' Knowledge, Attitudes, and Practices (KAP) related to LA/PM in Bangladesh

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Banyan Global Jhpiego Marie Stopes International Monitor Group O'Hanlon Health Consulting

Rationale and Background

- Use of LA/PM remains low in Bangladesh (13% of users), despite significant efforts to expand access and use.
- While the private sector provides a high percentage of FP methods (43% of all modern methods), they are an untapped resource to expand LA/PM provision.

Rationale and Background

Identified barriers to private sector provision of LA/PMs cont. :

- SHOPS Private Sector Assessment of LA/PM in Bangladesh, 2011 revealed the following barriers to private provision of LA/PM:
 - Training: few trained private providers; lack of training opportunities that meet private providers' needs
 - Demand: Clients have biases toward LA/PMs; lack of demand for service from private sector
 - Product: virtually no LA products available to private sector providers
 - Knowledge: policies related to provision; medical information on methods
 - Biases and Misconceptions: Of specific methods, on roles of providers and others in clients' decision

KAP Objective

This KAP study explores the knowledge gaps, biases and misconceptions more fully and provides useful insights to address them.

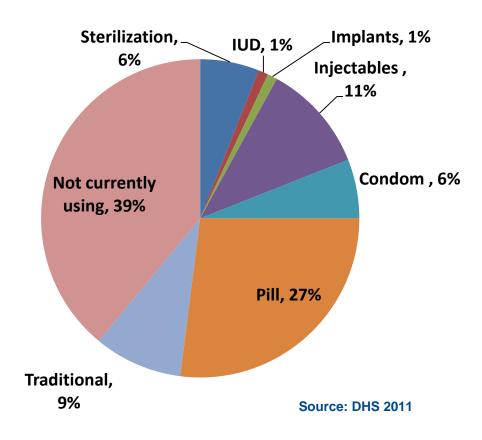
Background

DGFP-MOHFW, USAID and family planning community recognize that to reach the national FP objectives by 2016:

- There must be an expanded method mix in which LA/PMs play an important role.
- The private sector has an important role to play in service provision and behavior change

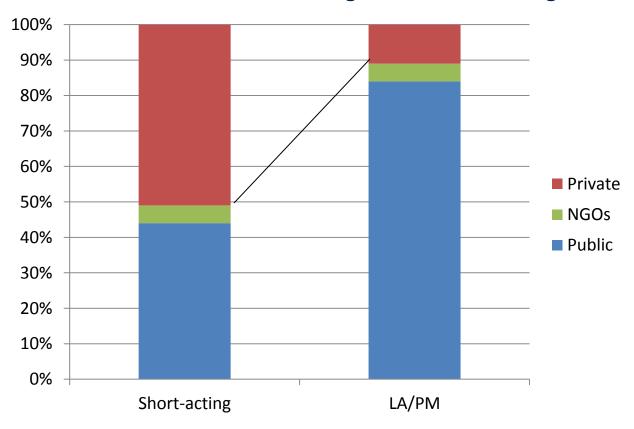
Low rates of LA/PM use in Bangladesh

Modern CPR = 52%



Public sector is the main source for LA/PM in Bangladesh

Source of access for short acting and LA/PM in Bangladesh



Source: DHS 2011

Research objectives of KAP study

To gain understanding of private providers':

Knowledge of methods, method-specific side effects, counseling and related issues, policies related to LA/PM

Attitudes toward LA/PM methods and provision, providers role in method selection, other influencers of clients' method selection

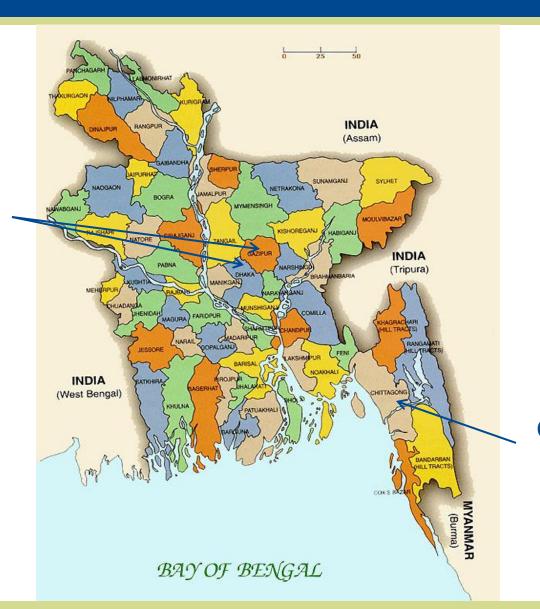
Practices related to provision of LA/PM counseling and services

Data collection methods for KAP study

- 1. Survey of 385 female private providers:
 - Ob/Gyns (155)
 - General practitioners and Graduate Doctors (GPs)
 (80)
 - Nurses (150)
- 2. Interviews with key stakeholders (12)
- 3. FGDs with users of LA/PM and users of other modern FP methods (12 groups with a total of 102 participants)

Sample universe

Dhaka district, Gazipur district



Chittagong (city corporation)

Characteristics of the sample

Characteristics of the sample: Type of facilities

Type of providers by type of facility

Type of facility	Ob/Gyn	GP	Nurse	Total
Private medical college	37	3	35	75
Private hospital/clinic	51	23	114	188
Chamber	67	54	1	122
Total (n)	155	80	150	385

Substantial proportion of practitioners trained to provide counseling and services of LA/PM and/or injectables

- 60% of Ob/Gyns
- 30% of GPs

13% nurses

High proportion of doctors offering FP counseling

Proportion of providers offering FP counseling by type of methods

	Ob/Gyn	<u>GPs</u>	<u>Nurse</u>
Practitioners providing counseling:	95%	74%	33%
Among those providing counseling, methods they counsel on:	Ob/Gyn	GPs	Nurse
Only short-acting	7%	10%	16%
Only LA/PM	1%	2%	4%
Both types of methods	92%	88%	80%

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Relatively high proportion of providers offering FP methods

Proportion of providers delivering FP services by type of method

	Ob/Gyn	<u>GPs</u>	<u>Nurse</u>
Practitioners providing FP services:	85%	53%	4%
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Among those delivering FP services,			
methods they provide:	Ob/Gyn	<u>GPs</u>	<u>Nurse</u>
Only short-acting	12%	45%	17%
Only LA/PM	7%	0%	0%
Both types of methods	81%	55%	83%

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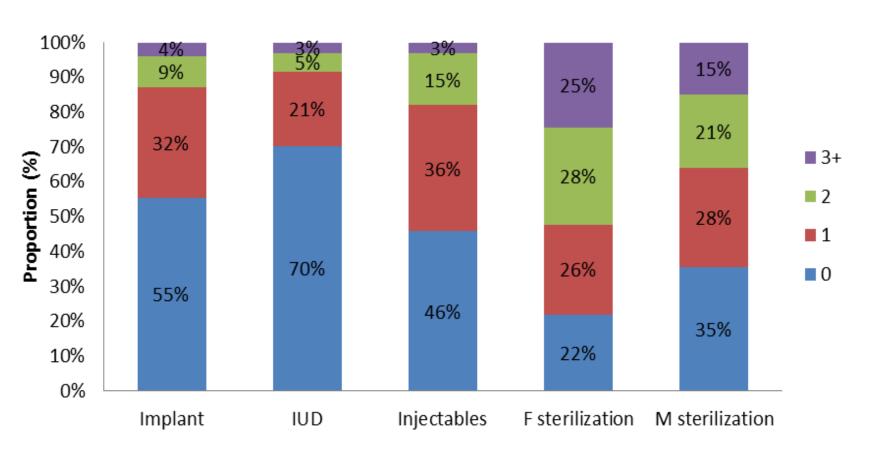
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Findings

Knowledge

Ob/Gyns have low levels of knowledge regarding side effects

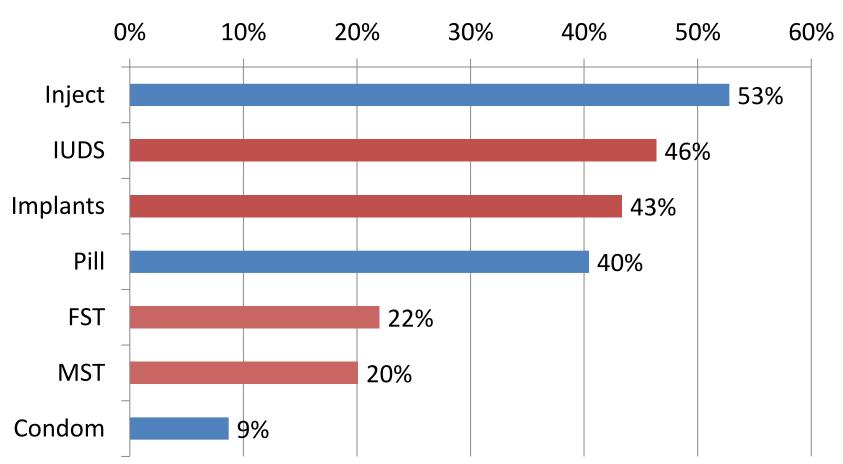
Proportion of Ob/Gyns mentioning 0, 1, 2, or 3 or more <u>incorrect</u> * side effects, by family planning method



Attitudes and Perceptions

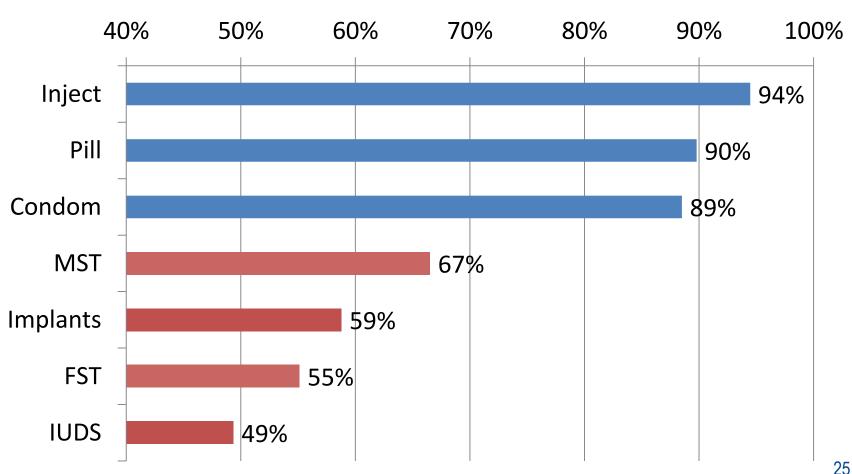
Providers believe LA/PM have too many side-effects





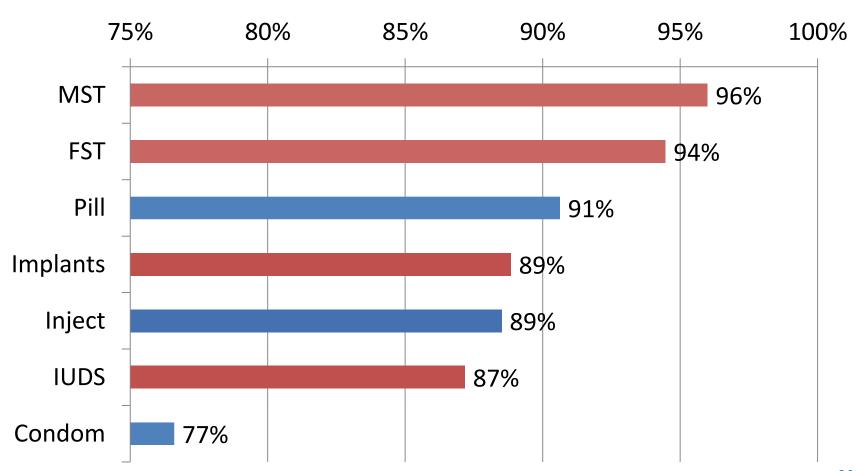
Providers perceive LA/PMs to be less convenient to use (for the patient) than short term methods

Convenient to use



Implants and IUDs considered among the least effective at preventing pregnancy

Effective at preventing pregnancy



Substantial proportion of *untrained* providers report high levels of competence providing LA/PM

Total (n)	75	77	71		
Competent	55%	74%	72%		
Neutral	17%	9%	14%		
Not competent	28%	17%	14%		
Level of Competence	<u>Implants</u>	<u>IUDs</u>	<u>FST</u>		
Ob/Gyns' perception of competence to provide each of these LA/PM, only among those untrained					

Providers consider many factors unrelated to the client's health when counseling on methods

Statement		Percent agreeing
a Waman mafan ta usa OC an aandama ayan I A/DM mathada		80%
a. Women prefer to use OC or condoms over LA/PM methods	Nurses	87%
b. Husbands prefer women to use OC or condoms over LA/PM	Doctors	81%
methods	Nurses	88%
c. Women take into consideration the opinion of their husband in choosing a FP method		87%
		93%
d. If the husband does not approve of a FP method, then the woman should not use it		66%
		75%
e. Religious beliefs affect the types of FP methods that I recommend	Doctors	36%
to my patients	Nurses	29%
f. Health care providers should have a lot of influence on their	Doctors	84%
patients' family planning method choice	Nurses	71%

Practices

Reasons for refusing varied widely by method

Proportion of doctors who mentioned these reasons for refusing to provide or prescribe LA/PMs, by method

Reason doctor refused to provide/prescribe	MST	Implants	IUDs	FST
Client was not legally eligible for method	5%	14%	23%	50%
Method was not available	3%	29%	40%	0%
Myself / clinic not certified to administer method	19%	35%	28%	3%
I felt uncomfortable prescribing the method	35%	14%	10%	26%
I did not have enough knowledge about method	35%	14%	10%	11%

Responses from 107 doctors who reported ever refusing to provide or prescribe these FP methods Note: MST = male sterilization; FST = female sterilization;

Summary of Findings

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- Providers have poor knowledge of side effects of LA/PMs
- Providers have negative perceptions about LA/PM effectiveness, ease of use and side effects
- Providers consider many factors unrelated to the client's health when counseling on methods
- Large proportion of untrained providers reported feeling competent at providing LA/PM methods

These findings could prevent high quality, client centered counseling and could prevent providers willingness to provide these methods at all.

Applying the Findings

- Trainings modified to meet provider needs in private hospitals and medical college affiliated hospitals.
- SHOPS' integration of LA/PM to pre-service curricula for MBBS should help address knowledge gaps and set attitudes toward these methods early in providers' careers.
- Training of trainers among Ob/Gyn and nurse professors at medical college affiliated hospitals to create practicum opportunities for graduating doctors

Applying the Findings

SHOPS is adapting the Evidence Based
Medicine approach in Bangladesh to improve
provider knowledge and attitudes through
channels that meet their needs as health
businesses. Topics selected for presentation in
the EBM program will be directly informed by this
research.





Thank you.

Please, send comments or suggestions to: Jorge_Ugaz@abtassoc.com Stephen_Rahaim@abtassoc.com



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