Role of Vasectomy in Family Planning Program in Nepal

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Approximately 33 million couples are protected from pregnancy by vasectomy around the world. It was estimated about 12 million vasectomies were performed in Peoples Republic of China and India alone. Other Asian Countries where vasectomy is popular are Korea, Thailand, Nepal, Bangladesh and Sri Lanka. In the United States of America, 5 million vasectomies were done till this date where as the United Kingdom accounted for about 1.1 million vasectomies. Guatemala, Mexico, Columbia and Brazil from Latin American countries and Canada, New Zealand and the Netherlands are other countries where vasectomy is popular.

In view of high population pressure His Majesty's Government of Nepal is increasing national sterilization target over and above the current substantial unmet demand for family planning services. In such a situation vasectomy can play a very important role in filling the gap between the demand, need and availability of sterilization services. The National Population Strategy has accorded high priority for fulfilment of the current substantial unmet demand for family planning services. In Nepal 75 percent of all contracepting couples rely on sterilization and just over half of these rely on vasectomy (CPS, 1981.) That works out to be about 2.8% of the couples of reproductive age rely on vasectomy. In Nepal 129, 876 vasectomies were done out of total 276, 164 sterilization till April 1984.

This shows vasectomy is socio-culturally accepted contraceptive method in Nepal.

VASECTOMY:

Vasectomy is one of the most effective and simple method and safer than female sterilization; it can be performed without difficulty in a doctor's clinic, health facilities and rural mobile camps. However, to do so on a mass scale with minimum complications it is necessary

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even for the experienced surgeon to understand the peculiar features of the operation and also in maintaining minimum medical standards. It is very important to minimise discomfort to the clients since even minor complications such as pain or/and swelling when occurs in the proximity of the testes produces a profound psychological effect on the client, particularly when he has volunteered for what he has been told is a trivial procedure. As we know, even a single dissatisfied individual, specially in some Nepalese ethnic group, adversely affect the family planning program in the country.

Overview Of Vasectomy Programs In General:

For the last three decades vasectomy is known as one of the most effective contraceptive methods. Initial promise and success in late 1960's and early 1970's was followed by decline in performance in vasectomy in commensurate with improved female sterilization methods. In the United States of America vasectomy's rise was associated with both support of professional medical community and extensive publicity. In People's Republic of China and India vasectomies are done in large numbers. The international donor agencies like International Project Association for Voluntary Sterilization and International Planned Parenthood Federation have contributed immensely in promoting vasectomy around the world. However, vasectomy still needs due attention when there is increase in population

On careful analysis one can find the following factors are responsible for poor performance in vasectomy programs:

- (a) Many professionals have taken an a priori position that men will not accept vasectomy
- (b) Indifferent and antidecisions, behavior and attitudes of the professional health and family planning community.
- (c) Lack of institutionalization of vasectomy programs.
- (d) Traditional patterns of male dominance in family decision-making in most culture of the world.
- (e) "Machismo complex"
- (f) The more complex female component attracts much more attention and resources than the male component of joint sterilization program of a country.
- (g) Female Sterilization have often been introduced under the umbrella of maternal and child health services, post partum services and routine obstetric and gynaecological services, whereas vasectomy cannot be hidden as such.

- (h) Like female, male clients do not discuss about family planning with peers.
- (i) Medical professionals treat vasectomy as a minor procedure, and hence do not give due attention to learning its technique.
- (j) Family Planning Managers do not give due attention to organizing vasectomy camps.
- (k) Hence the poor performance in the vasectomy is mainly because of neglect in the program rather than anything else.

Successful Vasectomy Programs:

Vasectomy has a great role to play in Nepal's family planning program. As American Public Health Association endorsed vasectomy in 1972, Nepal Medical Association should also take lead in endorsing vasectomy for Voluntary Surgical Contraceptive to contain the rapidly growing population.

While introducing any new product a good marketing technique, good publicity and good quality are essential factor for the success of that product. These principle can be applied to vasectomy service too.

Successful Vasectomy Program Should have The Following Components:

- a. Enthusiastic and creative leadership of the project managers;
- b. A categorical, focussed approach to program design and management which sets the vasectomy service component apart at least partially from other female sterilization and temporary family planning components.
- c. Consideration of the particular needs of man and of male psychology;
- d. A community based orientation to program organization which make the service more accessible and attractive and
- e. An active information and client referral program that employs a mixed communication method.

The following factors should be considered in any vasectomy programs:

- 1. Accurate information
- 2. Top class institutionalised service with minimum complication.
- 3. Good training
- 4. Research
- 5. Appropriate equipments

6. Advertisement in a professional advertising process with accurate information-
7. The service should be requestor-oriented not the service provider-oriented.
8. No acceptor should ever change his mind because he was kept waiting too long, under the new revolution of vasectomy service program.
9. Vasectomy services should be separate from other busy clinic activities.

By using marketing techniques as used in Sri Lanka, vasectomy programs can be promoted in a big way to achieve the set target. By this technique appropriate promotional materials, the coordination of the promotional efforts and available services, and the government's positive support for sterilization are the key factors for the success of the program. Medical profession can be harnessed to provide effective service by careful planning.

In conclusion, vasectomy being safe, simple and effective contraceptive method it should be promoted by all sections of the society.

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