Employer-Based Approach to Increase Support for and Provision of LA/PMs in India

Reproductive Health Supplies Coalition Meeting
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Family planning initiative in Kanpur, Uttar Pradesh:

- Builds on best practices for company-based health care initiatives.
- Tests model focusing on increasing sustained access to and use of FP, especially LA/PMs.
- IUCD, female sterilization, and vasectomy.
Company’s Active Participation and Inputs Required

- Recruited small and medium-sized businesses from various sectors in Kanpur, Uttar Pradesh

- Company inputs
  - Providing venue and allowing participation during working hours
  - Covering time off for employees
  - Designating a peer health coordinator
  - Placing program posters in highly visible locations
  - Staffed information desk
Key Inputs from Both the Company and RESPOND

1. Health talks by RESPOND
2. Health coordinator training
3. Health desks: One-on-one information sessions with peers
4. Print materials: LA/PM posters and leaflets
5. Clinic facility referrals within geographic catchment areas of each business
## Participating Companies

<table>
<thead>
<tr>
<th>Company Name</th>
<th>Employees</th>
<th>Type of Company</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Company Name</strong></td>
<td><strong>Employees</strong></td>
<td><strong>Type of Company</strong></td>
</tr>
<tr>
<td><strong>Men</strong></td>
<td><strong>Women</strong></td>
<td></td>
</tr>
<tr>
<td>A2Z Group</td>
<td>1,200</td>
<td>0</td>
</tr>
<tr>
<td>Ashok Griha Udyog Kendra Ltd.</td>
<td>300</td>
<td>50</td>
</tr>
<tr>
<td>Asian Exports Private Ltd.</td>
<td>108</td>
<td>22</td>
</tr>
<tr>
<td>Equiplus India Exports Ltd.</td>
<td>720</td>
<td>80</td>
</tr>
<tr>
<td>Goldee Masale</td>
<td>650</td>
<td>350</td>
</tr>
<tr>
<td>Indicoat Shoe Accessories</td>
<td>500</td>
<td>250</td>
</tr>
<tr>
<td>Jyoti Capsules Private Ltd.</td>
<td>75</td>
<td>80</td>
</tr>
<tr>
<td>Kapoor Polyprint Private Ltd.</td>
<td>200</td>
<td>0</td>
</tr>
<tr>
<td>Kehr Surgical Private Ltd.</td>
<td>144</td>
<td>6</td>
</tr>
<tr>
<td>Nerolac Private Limited</td>
<td>700</td>
<td>0</td>
</tr>
<tr>
<td>Pepsico Indico Holding Private Limited</td>
<td>1,200</td>
<td>0</td>
</tr>
<tr>
<td>RGP Moulds Private Ltd.</td>
<td>150</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>5,947</strong></td>
<td><strong>838</strong></td>
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</tbody>
</table>

Impressive Results

- Recruited and trained 18 company health coordinators in LA/PMs.
- Reached 4,830 employees with small-group or one-on-one discussions during work hours.
- LA/PM acceptor rate ~1.3% of total workforce.
- Some businesses’ acceptor rates were 3-4% of their workers and wives accepting an LA/PM.
In May and June 2012, RESPOND surveyed 1,543 employees at six companies through a convenience sample.

Study objectives were to identify:

- What percentage of employees were exposed to RESPOND’s intervention?
- What percentage of employees (or their spouses) adopted a method of FP or switched to a new method within the last year?
- Would nonusers consider using FP in the future? If so, would they consider an LA/PM?
The sample for the endline survey consisted primarily of men (96.4%).

- 72.2% of participants were married.
  - 97.7% of married participants had children.
- 43.4% of married participants already using FP at beginning of the intervention.

**Method mix among FP users before the intervention**

(n = 477)
Findings: Exposure to the Intervention

Exposure to the intervention was high:

- 79.3% attended a health talk; 42.8% attended a health desk; 39.2% participated in both.
- 97.7% of respondents reported that they had seen at least one of the posters or brochures in their workplace.

<table>
<thead>
<tr>
<th></th>
<th>A2Z</th>
<th>Ashok</th>
<th>Equiplus</th>
<th>Kapoor</th>
<th>Kehr</th>
<th>PepsiCo</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health talk</td>
<td>81.3%</td>
<td>100.0%</td>
<td>100.0%</td>
<td>86.9%</td>
<td>24.6%</td>
<td>63.0%</td>
<td>79.3%</td>
</tr>
<tr>
<td>Health desk</td>
<td>75.3%</td>
<td>57.3%</td>
<td>30.8%</td>
<td>53.6%</td>
<td>49.2%</td>
<td>12.6%</td>
<td>42.8%</td>
</tr>
<tr>
<td>Both</td>
<td>70.4%</td>
<td>57.3%</td>
<td>30.8%</td>
<td>50.0%</td>
<td>6.2%</td>
<td>12.2%</td>
<td>39.2%</td>
</tr>
<tr>
<td>Neither</td>
<td>13.8%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>9.5%</td>
<td>32.3%</td>
<td>36.6%</td>
<td>17.2%</td>
</tr>
</tbody>
</table>
FP discussion was higher among those exposed to the intervention than among those who were not:

- 84.2% of those who participated in either health talks or health desks discussed FP with spouse.
- 51% of those who did not participate in the intervention discussed FP with spouse.
Goal to Support LA/PM Use Achieved: Method Switching

- Many of the exposed who switched selected an LA/PM.
- Among pill users who switched, for example, 22% chose an IUD, 41% chose tubectomy, and 14% chose vasectomy.

**Method Switching among Health Talk or Health Desk Participants (n = 144)**

<table>
<thead>
<tr>
<th>Method used before</th>
<th>Male condom</th>
<th>Pill</th>
<th>Injectables</th>
<th>IUD</th>
<th>Tubectomy</th>
<th>Vasectomy</th>
<th>Do not know</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male condom (n = 58)</td>
<td>0.0%</td>
<td>20.7%</td>
<td>8.6%</td>
<td>25.9%</td>
<td>25.9%</td>
<td>19.0%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Pill (n = 63)</td>
<td>17.5%</td>
<td>0.0%</td>
<td>4.8%</td>
<td>22.2%</td>
<td>41.3%</td>
<td>14.3%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Injectables (n = 9)</td>
<td>0.0%</td>
<td>0.0%</td>
<td>0.0%</td>
<td>33.3%</td>
<td>44.4%</td>
<td>11.1%</td>
<td>11.1%</td>
</tr>
<tr>
<td>IUD (n = 14)</td>
<td>7.1%</td>
<td>7.1%</td>
<td>7.1%</td>
<td>0.0%</td>
<td>42.9%</td>
<td>35.7%</td>
<td>0.0%</td>
</tr>
</tbody>
</table>
12.5% of married nonusers exposed to intervention adopted FP.

The male condom was the method most frequently adopted (41.5%), followed by the IUD (27.7%).

94.7% of participants reported intending to adopt FP in the future:
   - Tubectomy (58%), the IUD (40.1%), and vasectomy (31.3%) were most often listed.

Fewer (60.4%) of those who did not participate in the intervention said that they would consider using FP in the future.
User Testimonials

“I have a daughter aged 7 years... It was through one of the health talks, held at my factory, that I came to know about the IUD as a safe, simple, and effective method of FP, and I got it inserted within two days of attending the talk.”

—Reckha, age 30.

“I had never used a family planning method before. I attended several health talks at the factory. With 3 children, my wife and I knew we didn’t want anymore. Although I had many concerns, it really helped me to talk with the health coordinator who had also had a vasectomy. That was very helpful to me in making my decision.

—Ajeet, age 39
Key Conclusions

- Innovative way to reach men with FP messages.
- Reaching men and women at their worksite (with employer endorsement) provides additional credibility to FP messages.
- Industrial workers’ profile is well-suited for LA/PMs, in that most are married with children—although acceptance rates vary by company.
- Businesses had varying degrees of commitment to the project—the selection process must identify enthusiastic companies.
- “Champions” tend to be larger companies with dedicated corporate social responsibility programs—e.g., A2Z and PepsiCo.
- Company health coordinators are key for a program’s long-term sustainability.