Standard Days Method (SDM) used as a Safe and Effective New Contraceptive Method of Choice: Findings from Community Based OR Study Experimented in Rural India

Damodar Sahu and Rebecka Lendgreen

Abstract

The Standard Days Method is a recent innovation in natural family planning; a method designed to plan or prevents unwanted pregnancy. The method makes use of a simple color coded beaded necklace for women to track the fertile days of their menstrual cycle by moving a band over the beads. Couples prevent unwanted pregnancy by avoiding unprotected intercourse during the fertile days. (Women with menstrual cycles between 26-32 days or having no risk of STI can use the method.) Data comes from research conducted by (the Institute of Reproductive Health), Georgetown University in collaboration with CARE-India in rural villages in Uttar Pradesh, India to determine effective service delivery strategies for SDM introduction. The study gathered information on how users manage the fertile days, user satisfaction, the effect of SDM provision on fertility knowledge and use of other methods. The study also compared the effect of involving men in the use of the method.

Findings: 482 couples were admitted into the study. After end of the study the cumulative continuation rate was estimated by independent variables i.e., age, education, parity, prior family planning experience and male involvement. These variables were statistically significant. Overall, SDM continuation rate was high (91percent) after three years of use. Male involvement in the delivery and use of the method, there is a higher chance of better and correct use of the method. Method failure was relatively low and the main reasons for discontinuation were pregnancy and out of range cycles. This suggests that couples, in general, consider the SDM a simple method to regulate their sexual behaviour during the fertile period.

Background of the Study

Search for alternative methods for managing the fertility behaviour at micro-level has been the main pre-occupation of planners and policy makers in developing countries such as India since a long time. The statistics reveal variation in the acceptance of family planning methods across the states. The most appealing method is female sterilization and this is mainly result of policies adopted during 1970s. The reasons for low acceptance of family planning methods are many especially among younger women, one of them is desire for a child and the other reasons are that these methods are unacceptable to family, religious condemnation and not a natural method. However, studies have demonstrated there is an unmet need (about 8 percent) for having fewer births.

In this direction the present study aims:

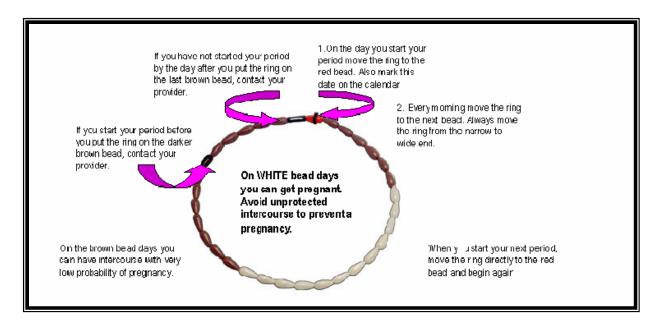
1. to determine acceptance of Standard Days Method among rural Indian women with different socio-cultural set-up; and

2. Also to examine the most effective service delivery strategies and male involvement for introduction the SDM.

Data and Methodology

Data comes for the study from research conducted by the Institute of Reproductive Health, Georgetown University in collaboration with CARE-India in rural villages in Uttar Pradesh, India. The study focussed on the two intervention blocks of the Sitapur district in Uttar Pradesh. In one block, the women focussed, traditional model of the study was implemented where only female volunteers provided information about the method, as well as in the use of the method. In order to measure the effect of involving men in the use of the method, the couple based, alternate model of the study was implemented in another block. In this block both the men and women delivered the method to the users and also provided counseling to the couple users which were not the case in the traditional model area. The experimental male involvement in the study drew both female and male volunteers to provide information and counseling about the method to women, men and couple. The female health volunteers provided information to the women's group and counseled potential users on the method. Similarly the male health volunteers disseminated the information on the Standard Days Method through the family planning orientation they provided to men. A total of 55 volunteers were selected in first block, of which 27 were male volunteers. In the second block, 28 volunteers were selected of which all were females. These volunteers were trained on the Standard Days Method and were also oriented on skills to impart counseling to the user/couple.

The Standard Days Method (SDM): The SDM is a simple fertility awareness-based method for family planning. It is based on the fact that in woman's menstrual cycle there is a 12-day "fertile window" period during which she can, with varying degrees of likelihood, become pregnant from unprotected intercourse.



The method relies on avoiding unprotected sex during the fertile days of the woman's menstrual cycle. This method is appropriate for women with menstrual cycles varying between 26 and 32 days and the window period is from 8th day to 19th day of the cycle. Thus, the method can be effective only if there is a cooperation/amity between the partners, women have regular menstrual cycle ranging between 26 and 32 days and there is no risk of STI. In order to track the fertile days during menstrual cycle, the method uses of simple color-coded beaded necklace by moving a band over the beads in order to prevent unwanted pregnancy. In case of breast-feeding females, this method can be adopted after completion of at least four post-partum menses. The most important feature of SDM is that it is a simple method, which can be easily taught, understood and used to prevent unwanted pregnancy. It mainly depends on avoiding unprotected intercourse during the fertile window period of the menstrual cycle.

The SDM was introduced in two blocks in various service delivery settings. Details are described elsewhere in SDM India report. A total of **482** clients were admitted into the study from 48 villages of both the blocks of Sitapur, UP, India, 54 percent from experimental block and 46percent from women-focused block. The study gather information on how the user manage the fertile days of the menstrual cycle to avoid unwanted pregnancy, user satisfaction, the effect of provision of the method on basic fertility and the use of other methods in the target area.

Consent form, Admission form, Follow-up form, Pregnancy form, Lost to follow up form and Exit form were used in the study to track the status of the users at different levels of the study. The volunteers were trained on the Standard Days Method in two phases, in the first phase the volunteers were familiarized about the method, calculation of the menstrual cycle and the fertile days, assessment criteria for inducting method users, counseling steps and role-plays. In the second phase, the volunteers were oriented about the couple communication about sex, follow-up schedule and the reporting formats.

Different activities i.e., Group promotional talks, Individual promotional talk/ Home visits, Orientation programs, BLAC (Block Level Advisory Committee) and Standard Days Method songbook were carried out by the volunteers in the community. These activities helped the volunteers to not only disseminate information on Standard Days Method but also to identify potential users for the study. It also provided a platform for the volunteers as well as for the users to discuss and share their thoughts on the method.

Methods: Both univariate (frequency, cross tabulation) and the trussel life table model is used. We have calculated continuation rate, variance, standard error, and confidence interval of continuation rate for each cycle used

Some of the results (Preliminary):

Forty-four percent of the users enrolled in the study completed the twelve cycles of the use of the SDM successfully.

Majority of the women enrolled (27 percent), exited from study due to their menstrual cycle being out of range.

Rate of incorrect use of the method was higher in the traditional model area (3 percent in Women-focused block) than in the alternate model area (0.4 percent in Experimental block) where men were involved in the use of the method.

- Rate of pregnancy during the course of study was higher in the traditional model area (19 percent in Women-focused block, 12 percent in Experimental block)
- Majority of the pregnancies that occurred in the traditional model area was because the male spouse was not supportive.
- 19 percent of females and 28 percent of the male users in the Experimental block block felt that the level of understanding and affection between the couple had increased.
- 29 percent of the female users and males in the Women-focused block block felt that the level of understanding and affection had increased.
- Men liked the method because it was natural, and had no side effect, they need not necessarily use any method to support use of the method and that it was cheap and inexpensive.
- Women liked the method as it was natural and had no side effects, and unlike earlier they were able to record their fertile days.

The result of the study suggest that given a choice, the rural couples would use the traditional natural fertility based method as it is not only natural and safe with no related side effects but also cheap and inexpensive. The volunteers though neo literate can effectively provide counseling and encourage the users to use the method correctly. Moreover, the follow-ups helped in better use of the method as the rural users are themselves ignorant of the correct use of the method and it took some time for them to be accustomed to the correct use of the method. It is evident from the study that with the involvement of male in the delivery and use of the method, there is a higher chance of better and correct use of the method. This involvement also in a way enabled a sanction for the women user for avoiding unprotected intercourse during the fertile days of the menstrual cycle. One of the major outcomes of the study is that the users in both the study areas felt an increase in the inter-spousal communication with the use of the method and they intended to continue using the method to space their family.

Since majority of couples use condoms in the fertile days to avoid unwanted pregnancy, the providers should ensure a regular supply of condoms to the users. The availability and subsequent use of the barrier method would be easier if the government supplies of the condoms to these areas are regular since the rural users have low purchasing powers to buy the commercially marketed brands. There is also an indication of the willingness of the prospective users to buy the Standard Days Method after seeing it work wonderfully for the user couples of their village. Another option to be explored is to make available Emergency Contraceptives in cases where female face objections by their spouse in avoiding unprotected intercourse during the fertile days of their menstrual cycle. This can to an extent lower the incidence of pregnancy during the use of the method. However, the providers as well as the users should be oriented about the correct and frequency of the use of these contraceptives.

Overall we found that the SDM continuation rate was considerable high (91percent). The reasons of method failure were comparatively few and the reasons of discontinuity were pregnancy or irregular menstrual cycle. This indicates that couples, in general, realize SDM as easy and simple method to regulate their sexual behaviour during the fertile window period.

Flow diagram for SDM OR study

