Vasectomy Knowledge, Attitudes and Practices in Nairobi County, Kenya: An Exploratory Study

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Specific study objectives

- Determine the levels of knowledge, attitudes and practice towards vasectomy among the catchment population of MSK urban clinics in Nairobi County.

- Assess community sentiments and perceptions on availability and quality of vasectomy services.

- Identify major and trusted sources of vasectomy messaging and modes for communication for vasectomy messages.

- Determine how the community perceptions on availability and quality of vasectomy impact on their utilization of these services.
Study methodology

- Qualitative methodologies: FGDs and IDIs
- Sampling
  - 8 FGDs
  - 12 IDIs
  - Participants included men who had and had not received a vasectomy; their wives; and community health workers
  - Purposive and snowball sampling techniques used
Key Findings- Knowledge & Attitude

- Knowledge of vasectomy is fairly good; however, negative attitudes are common.

- Religious and traditional beliefs contributed to negative attitudes.

- Some women felt that vasectomy could lead to sexual promiscuity among vasectomised men, as they would no longer have to worry about an unintended pregnancy.

- Some thought that men would regret the decision to have a vasectomy.

- However, there were several benefits of vasectomy among acceptors:

  “I am an outspoken and determined champion of [vasectomy] use as a family planning method and I believe that if more men chose vasectomy, it could dramatically improve the lives of Kenyan families.” - IDI participant
Key Findings - Practices

• Uptake for vasectomy was generally low

  “Such decisions [on child bearing] in many households in this community are either strongly influenced or are made solely by men”
  married female FGD participant, Kibera Sub-County

• Common misconceptions
  - Vasectomy interferes with testosterone production, which is the hormone that makes a man ‘a man’
Factors affecting the uptake of vasectomy

- Religious beliefs
- Myths and misconceptions
- Traditional beliefs
- Educational levels
- Political factors
- Provider attitude
Recommendations from the research

- Reach men with accurate information and promote male involvement in family planning
- Work with women to reach their spouses.
- Identify role models who have received vasectomy
Evidence to action

• Set up ‘well man’ clinics
• Create public awareness
• Work with women to reach out to their spouses
• Better policies to address vasectomy uptake
Thank you

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