

Study of Vasectomy Adopters with special reference to Motivational Factors

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Abstract- To find out myths and to suggest ways to overcome them among the acceptors of non-scalpel vasectomy (NSV) This study was conducted on NSV acceptors at Family Welfare Centre of SMS Hospital Jaipur (Rajasthan). The subjects were interrogated about the motivational factors, myths they had and the socio-demographic profile was also enquired. On repeat visits complications if any were recorded and treated. Chi-square test was used to find out the significance of difference between proportions. **Conclusions:** Out of total 327 vasectomy acceptors, 251(66.7%) had their wives in the age group of 30 and above. Their wives were significantly ($P<.001$) more literate than their husbands. Satisfied clients were the main motivational factor ($P<.001$). The causes of delaying vasectomy were many fears and out of all fears to lose of sexual desire was the commonest.

Index Terms- Contraceptive, Vasectomy, Myths, Chi-square Test

I. INTRODUCTION

No-Scalpel Vasectomy is one of the most effective contraceptive methods available for males. This new method is now being offered to men who have completed their families, as a special project, on a voluntary basis under the Family Welfare program. This project is being implemented in the country to help men adopt male sterilization and thus promote male participation in the Family Welfare programme.

Vasectomy is even far safer and easier, and recovery is quicker, than female surgical sterilization and it can be done in an office setting with a local anesthetic and without an incision. Despite its many advantages, vasectomy is widely used in only a few countries, including China, India, Thailand, Korea, United Kingdom, Canada and the United States. About 45 million couples worldwide rely on vasectomy for contraception, compared with about 150 million female sterilization users (1)

Men are often reluctant to consider vasectomy because of inaccurate information and myths. Vasectomy does not affect production of male hormones that control the sex drive, erection, or masculine features, such as facial hair or muscle tone. The method simply prevents sperm from being in the ejaculate (2)

Although vasectomy is considered as one of the most effective contraceptive methods available, there had been very few studies in comparison to research available on male sterilization. So, this study entitled “**Study of Vasectomy Adopters with special reference to Motivational Factors**” is an effort in this direction.

II. RESEARCH ALLOCATION

This study was conducted on vasectomy acceptors attending Family Welfare Centre of SMS Hospital, Jaipur (Raj.) during last financial year i.e. 1st April 2012 to 31st March 2013. Just before the vasectomy procedure all vasectomy adopters were interviewed about their motivational factor to adopt this method of contraception along with other desired socio-demographic details. Acceptors having more than two children were asked about their reasons of not adopting it so far after having two children and then they were also asked about the ways they had overcome their myths about vasectomy. After having gone through the procedure each of acceptors was asked to come for follow-up after 3 days, 15 days and 3 months. At each follow-up visit complications were observed and treated. At the time of last follow-up semen examination was also carried out.

Data thus collected was compiled, classified and analyzed with the help of computer to draw inferences.

III. RESULTS

Out of total 327 vasectomy acceptors, majority 179 (44.7%) were having their wives in the age group of 30 years to 40 years and quite a handsome number of adopters (22%) were having their wives 40 years or more than 40 years i.e. people are adopting permanent method in their later ages. Most of acceptors (83.49%) were Hindus and only few were Muslims and from other religion. Urban rural ratio observed was 2.84. Among acceptors their wives were significantly ($P < .001$) more educated than their husbands. Other studies (3) also revealed the fact that female education has significant role in acceptance of contraceptive methods.

Although majority (55.98%) was accepting NSV after having two children but no less proportion (44.03%) was accepting it after having more than two children, so defeating the purpose of family planning to control population.(4) They were more concerned with male child as only 16(4.89%) had accepted vasectomy without having a male child which was also highly significant ($P < .001$).

Satisfied clients were the main motivational factor observed in 80.12% to accept vasectomy, followed by word of mouth from others, incentives and others, which was again highly significant ($P < .001$). Other authors have also observed the same and advise that involving men who have had a vasectomy to encourage other men and can help to develop an interest in the procedure. (5)

When reasons for delay in accepting vasectomy were asked to acceptors having more than two children, different types of fears (in 96.53%) were the main reason, in which loss of sexual desire was observed the most followed by fear of weakness, loss of erection and fear of operation. More or less similar observations were made by other authors(2, 6). A study in Colombia found that both men and women still believe, incorrectly, that vasectomy affects a man's sexual performance.(2) Vasectomy does not affect production of male hormones that control the sex drive, erection, or masculine features, such as facial hair or muscle tone. The method simply

prevents sperm from being in the ejaculate. In the procedure, the provider cuts the vas- deferentia, through which sperm travel from the testicles to the urethra during ejaculation. After vasectomy, the testicles continue to produce sperm that eventually degenerate and are excreted, like other body cells.

When these acceptors were asked as to how they had overcome these fears and were ready to accept vasectomy, majority (95.68%) said that satisfied clients of vasectomy acceptors convinced them to adopt this method. These differences in reasons for delay in accepting vasectomy, myths they had in their minds and ways to overcome their myths were also observed highly significant ($P < .001$). Out of total 327 acceptors only 4(1.22%) had complications i.e. two (0.62%) had infection and one had hematoma. The study is well supporting with the findings of Nirapathongpron A et al who observed very few complications.(7) A final report of family health survey in five countries on 705 NSV acceptors has also observed only 10 men(1.4%) with hematomas (blood clots) and just one (0.14%) with infection at the procedure site.(8)

IV. CONCLUSIONS

Majority of vasectomy acceptors had their wives in the age group of 30 and above i.e. people are adopting permanent method in their later ages, thereby defeating the purpose of family planning to control population. Their wives's education have an important role in adoption of this method. They were having different types of fears about vasectomy and they were motivated mainly by the satisfied clients. So, satisfied clients of vasectomy may be very useful to encourage use among other men, remove the myths about the procedure and helps to develop an interest in the procedure.

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Table No. 1

Socio-demographic Profile of Vasectomy Acceptors

N=327

Age Group	No.	%
<25	12	3.67
25-30	64	19.57
30-35	81	24.77
35-40	98	29.97
>40	72	22.02
Religion Wise	No.	%
Hindu	273	83.49
Muslim	40	12.23
Other	15	4.59
NA Info.	9	2.75
Residence	No.	U:R
Urban	240	
Rural	87	
Total	327	2.84
Husband's Education	No.	%
Illiterate	176	53.82
<Primary	47	14.37
Middle	33	10.09
Secondary	43	13.15
Graduate & Above	28	8.56
Wife's Education	No.	%
Illiterate	107	32.72
<Primary	75	22.94
Middle	64	19.57
Secondary	49	14.98
Graduate & Above	32	9.79

Table No. 2

Motivational Factors to adopt Vasectomy

*Motivational Factor	No.	%
Word of Mouth	43	13.15
Government Schemes	18	5.50
Incentive	33	10.09
Satisfied Clients	262	80.12
	327	100.00

***Multiple Response**

Chi-Squire Test – 620.93 at DF 3, P<.001 LS=HS

Table No. 3

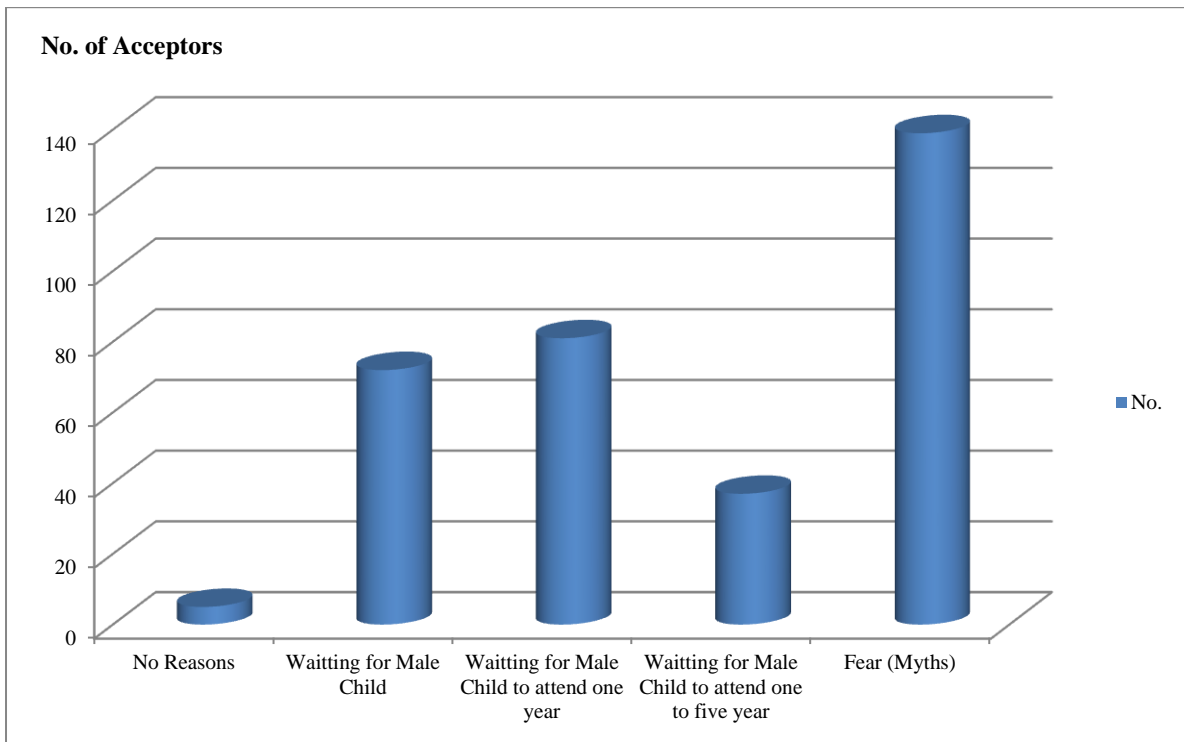
Myths about Vasectomy causing Delay in adopting Vasectomy

*Fear/Myths (N=139)	No.	%
Fear of Operation	51	36.69
Fear of Loss of Sexual Desire	123	88.49
Fear of Erectile Dysfunction	87	62.59
Fear of Weakness	94	67.63

***Multiple Response**

Chi-Squire Test - 81.93 at Df 3 P<.001 LS=HS

Bar Diagram me - Reasons for Delay in adopting Vasectomy



*Multiple Response

Chi-Squire Test - 283.39 at DF 4 P<.001 LS = HS

Bar Diagram me - Overcome Myths about Vasectomy

