



# GUYANA RESPONSIBLE PARENTHOOD ASSOCIATION

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## Monthly Report

**Implementing Partner: Help & Shelter**

**Reporting Month: October 2014**

**Target Region(s): 3 & 4**

**Community Facilitators: Linda Hustler; Colin Marks**

### Overview of the Activities and/or interventions for the reporting period

Session Title	# of Persons Met		Age Range	Site	Community
	Male	Female			
<i>To sensitize participants on benefits of FP; explore methods of available FP; educate on STI'S and consequences of improper treatment</i>	1	13	20-52	Canal # 2 Polder H/C	Canal # 2 Polder
<i>To sensitize participants on benefits of FP; explore methods of available FP; educate on STI'S and consequences of improper treatment</i>		24	15-25	Free & Easy Church of Christ	Free & Easy
<i>To sensitize participants on benefits of FP; explore methods of available FP; educate on STI'S and consequences of improper treatment</i>		12	16-33	Good Intent H/C	Good Intent
<i>To sensitize participants on the prevalence of STI's &amp; consequences of not getting proper treatment for STI's</i>		12	20-54	Belle West H/C	Belle West
<i>FP and effective parenting; the role and responsibility of both partners for FP</i>		19	18-40	Sophia HC	Sophia

<i>To show how FP can impact better and healthier relationships &amp; how healthy relationships benefit from FP methods</i>	2	10	19-60	Sophia	Sophia
<i>The inter-linkages between youth, sexuality and family planning</i>		9	16-25+	Sophia Youth Group	Sophia
<i>Exploring the benefits of FP and the impact of individual choice</i>		30	17-40	Sophia H/C	Sophia

## Major Output

### Achievements; outcomes

- Female participants were educated on what the abbreviation HIV/AIDS stand for and on the different types of STIs and how they can be contracted. Facilitator observed that the women knew only of HIV because it is one of the tests they are required to have done. Participants were also educated on good hygiene practices and why the use of douche bags and similar treatments are not advisable. The lone male participant disclosed that prior to the session he was unaware of STI'S and indicated that some of his male friends might be at the same disadvantage. He thought the programme was very helpful and informative, and said he would opt for using a condom as his method of FP. By end of the programme the participants were asked to relate all they had learnt about FP, HIV/AIDS and STI's the feedback was favorable and they were encouraged to practice healthy life styles
- Myths were dispelled and the correct information given about signs and symptoms of STI and how if left untreated could result in infertility. A demonstration on the use of the female condom was done and some women collected both male and female condoms. The teaching aid depicting STI'S was explained and shown to the women.
- Most of the women now understood the need to join FP and how useful such information would also be to their friends and family. A mother 39 years with 10 children expressed her fear of having the female sterilization but still thinks she will get it done.
- Participants attending sessions on West Bank Demerara were encouraged to attend the FP clinics at their respective HC or at the WDRH
- Pills and FP brochures were distributed at FP sessions held on WBD
- At the end of the session behavioral changes were promised by the women regarding the use of FP and towards better health care for the body

- 15 pregnant mothers remarked that FP was a most welcome option for them because of the status of their intimate relationship. Almost half of the participants were of the view that the injection was a very good option because it can be done in secrecy. They were however cautioned that the injections offer no protection from STIs, especially in the case of a promiscuous partner.
- The senior nurse at the Sophia clinic was very grateful for the female condoms which she says are “catching on” among the women visiting the clinic for supplies.
- Participants indicated that they had never received such information from their FP clinic; that as women they need to make sure to involve their male partners early in family planning decision making such as number of children and method of prevention; that the use of male condoms is a good start when there is no discussion between partners on FP especially in relationships where multiple partners are involved
- An elderly parent stated that this was the first time she was able to view FP from a different angle; previously she always saw FP as the health sector trying to control the population and felt that the health clinics needed to do a better delivery of information on FP. A few participants related that using a FP method allowed them to work and contribute meaningfully to their family and this helped to improve the relationship with their spouse; Another participant stated that though she wasn’t exposed to much of the information shared, she was forced to consider preventative methods after being involved in several failed intimate relationships resulting in terminations of unwanted pregnancies, which began to affect her physically and psychologically.
- Topics such as sexual satisfaction, choosing a FP method, number & spacing of children, risks of having multiple partners, male dominance, religious influences were discussed in the context of how intimate relationships are intricately tied into FP and the strengthening of the family unit
- Nurse Hinds (senior health worker) thought it would be a good opportunity for persons attending the family health clinic day to be exposed to information on parenting and FP as this particular target group has always recorded a high level of teen pregnancy resulting in vulnerability of children. Illustrations of the various FP methods was introduced and methods were examined for applicability to persons based on their age, circumstances, health & sense of comfort. Negotiating the use of family planning between a husband and wife was also presented as very critical for effective FP, as FP was not only for single persons who wanted to avoid pregnancy, but it is also a good way to space the children’s birth for effective management of the family unit.
- Nurses at the Health centre are very appreciative of the information disseminated at sessions and appreciate that the sessions are interactive and persons are encouraged to share views and opinions within the discussions.
- One participant was glad to learn about the injection method as it allowed for privacy and control over a women’s sexual reproduction
- Participants were introduced to aspects of sexual and reproductive health among youths. Most of the participants expressed the view that in their opinion reproductive health was only a subject for mothers or people who were producing children. However they were very receptive to the information that young people would be in a better position to make positive choices

when they understand the health consequences of sexual activity and also how to plan for managing the family unit. The group was also introduced to the various FP methods, benefits, advantages and myths

- Participants identified the following as parenting challenges with implications for FP -having to raise children without the help of the spouse, big families in small dwellings; no proper guidance in parenting or child care; youths flirting with sex and end up being parents; adults not playing proper role models for children; youths vulnerable to diseases, but they still seem not to care; poverty, ignorance and frustration evident among many young parents and adults
- A total of 183 FP brochures were distributed at sessions in Sophia, no figure was given for WBD but brochures were also distributed
- A total of 5 boxes + 70 male condoms and 86 female condoms were distributed at FP sessions

### **Common Themes**

*The common issues encountered, concerns being raised, information gaps.*

- One participant shared she never knew it wasn't right to insert her fingers in her vagina when taking a bath and that it is self-cleansing. Another shared the signs of STIS in women were not know because long ago persons would say it is a kernel and you had to use a cold iron as treatment
- Other social issues came up after the session and H&S facilitator was able to address most of their concerns relating to Domestic Violence. A mother shared that her 8 year old son is acting out and has threatened to commit suicide, she was advised to seek immediate help for the child from the social worker at the WDRH which is the nearest and most convenient social service provider for her.
- Some participants said that they didn't pay attention to health issues because they have the perception that it cannot happen to them and as long as they are not affected it is not a problem
- It was very difficult for the women to list and identify ways in which one can become infected with the HIV virus. This was most difficult among women of Indian descent.
- A question was asked about how someone can get cancer. The women all shared they have never heard about VIA screening and would like to know if and when it can be done in their community.
- Most of the women felt that contracting a STI is scary and men should be given this information and also get to look at the teaching aid on STIs because most men are cheating within relationships according to the female participants
- One participant explained that she had produced 9 children and the relationship was punctuated by violence and abuse resulting in her feeling less empowered to make decisions that would have affected the way she spaced her children.
- Topics such as sexual satisfaction, choosing a FP method, number & spacing of children,

## **Major Challenges**

- Participants at the family post natal clinics were distracted sometimes by their young children, who were sometimes restless.
- There were no major challenges at this session, though at the beginning of the session some participants were very reserved at expressing views and the snacks weren't adequate for all the participants to receive.
- There were some time constraints, so the facilitator agreed to return on another clinic day to further ventilate on the topics
- Some of the participants were very reserved in there interactions as it was the first time they were discussing, what they though was a private issue in a public space.

## **Recommendations**

- It was recommended that FP & STI information be transmitted on a larger scale to the male population