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Honduras: Marketing new reproductive health services is cost-effective

Frontiers in Reproductive Health

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OR Summary 26

Marketing New Reproductive Health Services Is Cost-Effective

At six rural health centers in Honduras, the use of ten-minute talks and leaflets to advertise the availability of IUD insertions, DMPA injections, and Pap smears increased use of the services at an affordable cost. The marketing efforts will be expanded to clinics where nurse auxiliaries have been trained to provide these services.

Background

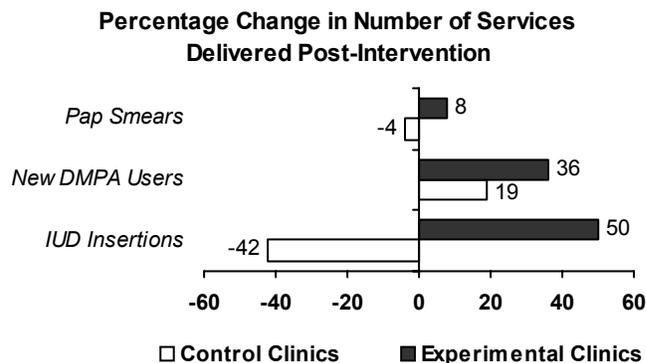
In 1999 the Honduran Ministry of Health (MOH) revised national guidelines on women’s health services delivery to allow nurse auxiliaries to insert IUDs, give DMPA injections, and take Pap smears. This policy change addresses low contraceptive use among rural women (40% compared to 67% in among urban women). The change also reflects findings from a 1998 Population Council study that showed that nurse auxiliaries can safely and successfully provide these services. Under the previous guidelines, rural women had limited access to long-term family planning methods because they typically attend rural health centers (RHCs) where nurse auxiliaries are the sole service providers.

In 2000 the Population Council and the MOH assessed the effectiveness and cost of using a simple leaflet, distributed by the nurse auxiliaries, to market the new services. Twelve RHCs (six control sites and six experimental sites) were randomly selected from 180 centers where the nurse auxiliaries had been trained to deliver the new services. Nurse auxiliaries at the experimental centers received 500 leaflets to distribute. They gave daily 10-minute talks about the services and asked each woman at the clinic to distribute five leaflets to friends and

neighbors. To assess the effectiveness of the promotion, researchers compared use of the new services (Pap smears and services for new and returning IUD users and DMPA users) from three months before and three months after the intervention in both groups of clinics.

Findings

- ◆ Client visits for the new services increased by 22 percent at the experimental clinics, compared with 12 percent at the control clinics. The experimental clinics provided an average of 7.7 more service visits per month, compared with 0.9 in the control clinics.
- ◆ In the three months following the intervention, IUD insertions at the experimental clinics increased by 50 percent while decreasing by 42 percent at control clinics (see Figure).



DMPA injections increased by 36 percent in experimental clinics versus 19 percent in control clinics. Providers at the experimental clinics took 22 percent more Pap smears, while Pap smears decreased by 4 percent at control clinics.



◆ A cost analysis found that the total cost of the intervention, including training, supervision, and the production of 25,000 leaflets, was US\$950.

◆ For the six experimental units, the promotional cost for each new service was US\$7.80 for three months. If the new services were expanded to 100 rural health centers over six months, 4,080 additional users could be recruited at a cost of US\$0.13 per additional user—a reasonable cost for this setting.

Policy Implications

◆ This simple promotion strategy resulted in increased demand for the three new RH services, particularly IUD insertion and DMPA injections. The intervention is cost-effective and should be implemented in all rural health centers where the new services have been introduced.

Utilization

◆ Based on the results of this study, the MOH plans to provide the leaflet to all nurse auxiliaries who have received the service training, as well as to NGOs that provide the same services.

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Villanueva, Vanira; L. Hernández, I. Mendoza and R. Lundgren. 1998. Expansión del rol de las auxiliares de enfermería en el ofrecimiento de servicios de planificación familiar y en la toma de citologías vaginales. *For more information contact: Population Council, Escondida No. 110, Col. Villa Coyoacán, 04000 México, D.F., Mexico. Tel.: 52-5-659-8537; Fax: 52-5554-1226; E-mail: disemina@popcouncil.org.mx.*

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