



Men at a Zika prevention workshop, led by psychologist Itzá Cárdenas and nurse Zayda Cáceres at the Tela Hospital in Honduras.
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Case Study

INVOLVING MEN IN THE PREVENTION OF ZIKA INFECTION IN HONDURAS

SEPTEMBER 2018

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SUMMARY

This case study describes activities carried out by personnel of the Tela Hospital, in the Atlántida Region of Honduras to involve men in the prevention of the Zika virus and its complications. One of the limitations of the strategy of providing condoms to pregnant women in order to help prevent sexual transmission of Zika is the reluctance of women to bring condoms home and use them, out of concern over their partner's potential reaction. The hospital staff decided to carry out activities to train spouses or partners of pregnant women, through educational activities and invitations, as well as to other men who visit the hospital for medical consultations, in order to bring them together, provide group counseling, and show them how to use condoms properly in preventing Zika.

Thanks to the support of the ASSIST project of the United States Agency for International Development (USAID), we built improvement teams at Tela Hospital and other health units in zones affected by Zika, in order to strengthen activities of the health services to prevent the transmission of infection in pregnant women, and to offer quality care to women and children affected by the virus. The Tela team tried out a variety of ideas to put out the message of the importance of preventing sexual transmission of Zika to men. One achievement of involving men in the process has been the declarations of satisfaction provided by pregnant women, saying that their spouses/partners are now more receptive and more supportive because they understand the reason, they bring condoms home. Based on this successful experience, the improvement teams at other facilities in the zone have replicated and even improved on this strategy.

INTRODUCTION

The Tela Hospital is in the Atlantic littoral zone of Honduras. Tela is a basic public hospital, covering a population of over 144,120 people. In 2017 it attended a total of 2,392 births. The Secretary of Health of Honduras (SESAL), with advisory assistance from the USAID ASSIST Project, selected the engagement of the hospital in the Zika prevention project, due to the high number of reported Zika and of pregnant women suspected of carrying the virus.

During March 2017, Tela Hospital organized three improvement teams: the first to implement Zika counseling in the family planning services, another for prenatal care, and the third for identification of congenital Zika syndrome (CSaZ, for the Spanish acronym for “síndrome congénito asociado al virus Zika”) in newborns. The improvement teams were trained in May 2017, by personnel from the Quality Management Department at the central levels of SESAL and ASSIST and started their activities in June. Each team prepared an improvement objective and indicator, reviewed the steps for care, identified gaps, proposed necessary changes in the care process in order to implement Zika counseling, and implemented a series of activities to achieve their objectives.

STARTUP OF WORK FOR IMPROVEMENT IN PRENATAL CARE (MAY 2017)

The team proposed two objectives for improvement: the first is related to implementation of Zika counseling for every pregnant woman during prenatal care; the second is related to provision of condoms to every pregnant woman who received counseling. The improvement team launched the following changes: a) Zika counseling was implemented for the first time at the hospital, using a new space dedicated for that purpose by the team; and b) female counselors were assigned and trained, who would approach

pregnant women at the pre-clinic and following their medical appointment; c) forms were implemented to register counseling data; d) education on the Zika virus (risks of Zika infection during pregnancy, and ways to prevent was provided at the pre-clinic; e) written information was provided in threefold flyers; f) a specialized medical evaluation was conducted by healthcare providers specialized in management of Zika; and g) condom packets were prepared to give to pregnant women after receiving counseling.

During the implementation process, it was necessary to make further changes in order to provide counseling. Ultimately, we identified that before receiving prenatal care from the physician, and after going to the pre-clinic, the pregnant woman and her partner should visit the (female) psychologist in order to receive counseling. No woman goes on to a medical consultation without first having received counseling from the psychologist or an auxiliary.

The availability of condoms for prenatal care was made possible by a generous donation of the government of the United States of America, through USAID. Thus, all establishments that were prioritized had condoms available.

ANALYSIS OF THE PROBLEM

When the team implemented its activities to achieve its improvement objectives, they ran into problems because many pregnant women would not accept the condoms; they would reject them or simply leave them behind at the hospital, because they were afraid to bring the condoms home, on account of what the reaction of their husband/partner might be; many mentioned that their husbands or partners were going to get angry and think that they were cheating on them; or sometime they would simply say that they would not use them. This led many members of the improving team to ask “*why?*” is this situation so. Based on their prior experience, they identified that one success factor in the prevention of sexual transmission was the involvement of the pregnant women’s partner. Faced with this necessity, the team added a series of activities to involve men in the process of counseling on Zika, and in order to obtain better results with the use of condoms during pregnancy. This is when they decided to start group counseling sessions with the men. The first men’s meeting took place on 6 June 2017.

INVOLVING MEN IN THE PREVENTION OF SEXUAL TRANSMISSION OF ZIKA

Faced with the challenge of involving men and getting them to take on a more proactive role in the healthcare of pregnant women and their babies (including the prevention of vector and sexual transmission, and how to use condoms properly) the team conducted the following activities. To start off, they discussed the issue with all members of the improvement team. At first, they themselves have doubts as to whether they would be able to obtain positive results. Later on, they held meetings with the entire staff of the facility, to sensitize them to the activities that were to be carried out, and to define the issues to be discussed at the meetings. They created a timeline for monthly meetings for the men and selected a professional to lead them. his responsibility at first was entrusted to the hospital (female) psychologist.

Invitations were created (a small simple card which stated the purpose of the meeting, its date, time, and place) which were distributed to pregnant women during counseling, for them to take them back to their

spouses, or at the hospital, to each spouse/partner who accompanied the pregnant women at the specialized consultation.

Subsequently, they delivered invitations to men who came to the hospital for other reasons. Although all men reached were welcome, the team focused on reaching out to men for the first time. All information on Zika was provided at one single meeting: transmission methods, personal methods to prevent the infection, environmental protection, sensitizing men to women’s healthcare (especially if they are pregnant) and the consequences to the baby if it is infected by Zika virus. Subsequently, they added other issues, such as masculinity topics (which made it possible to improve the attitude of the men at the meeting), techniques for using condoms, and family planning methods. More recently, issues involving early simulation of children were also included. From start to the finish, they used ice-breaking dynamics, questions to inquire about know-how and practices, role-playing, and motivational dynamics.

The meetings are held monthly, based on the schedule being developed, and are led by the (female) psychologist, who speaks about Zika issues; a professional nurse talks about family planning issues; and a (female) pediatrician talks about the issue of child stimulation.

These meetings lasted around 2 hours, during which they also train men in proper techniques for using condoms. The improvement team prepared a flyer with information on Zika, and prevention of sexual transmission. This is given to each man, along with a certain number of condoms to take home.



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CRONIGRAMA
RESPONSABLE: DRA. LINDA MOLINA / COMISIÓN PSICOPEDAGÓGICA: LIC. LUCIA FFA AGUIRRE / PSICÓLOGA DR. HOSPITAL TELA

Fecha	Hora	Actividad	Lugar	tema
27 febrero	9:00 pm	Grupo de masculinidad	Sala de supervisión Hospital tela	masculinidad y zika planificación familiar
16 marzo	9:00 am	Celebración DIA DEL PADRE (evento especial) Grupo de masculinidad	Sala psicología Hospital tela	<ul style="list-style-type: none"> El rol del hombre en la sociedad peruana masculinidad y zika planificación familiar
23 abril	9:30 am	Grupo de masculinidad	Sala psicología Hospital tela	masculinidad y zika planificación familiar
17 mayo	9:00 Am	Grupo de masculinidad familiar las esposas para celebración del día de la madre	Sala psicología Hospital tela	<ul style="list-style-type: none"> fortalecimiento de las parejas masculinidad y zika planificación familiar
15 junio	9:30 Am	Grupo de masculinidad	Sala psicología Hospital tela	masculinidad y zika planificación familiar
13 julio	9:30 Am	Grupo de masculinidad	Sala psicología Hospital tela	masculinidad y zika planificación familiar

DR. LINDA MOLINA

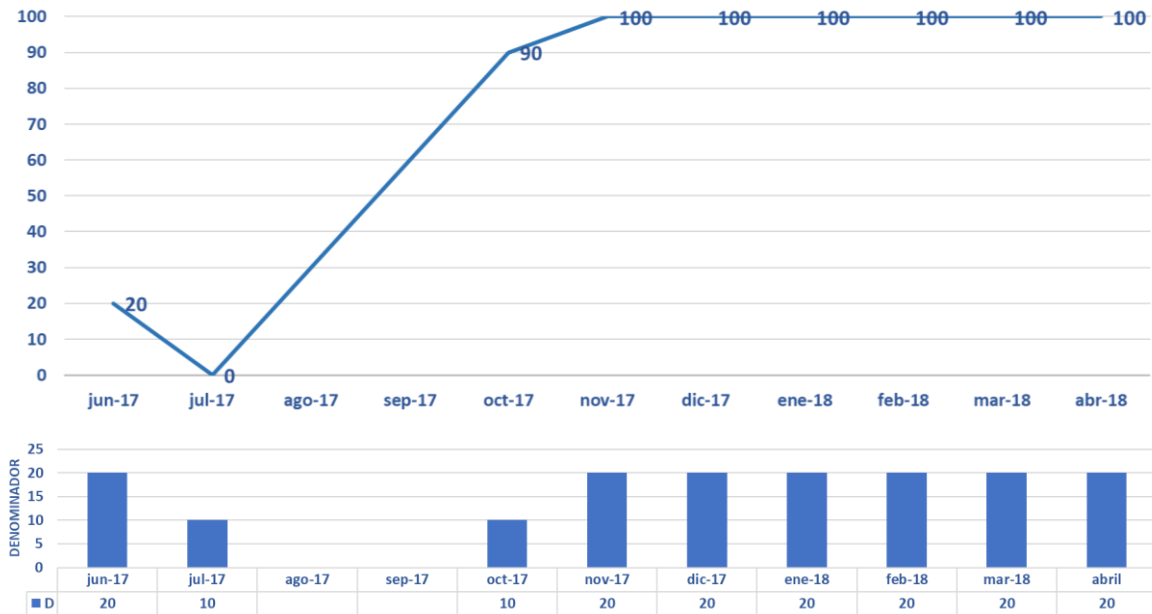
RESULTS

A timeline of the meetings with men with prior appointments, or who were reached for counseling on Zika is being kept monthly and on a ongoing basis at Tela hospital. Some 108 men have received information and/or counseling on Zika since the start of these activities at the Tela hospital. Of these, 19 were between the ages of 15 and 19, 37 between the ages of 20 – 29, and 33 were older than age 30. The success of the strategy has made it possible to schedule new meetings, which are held in the outpatient waiting rooms. As of the end of February 2018, men are being invited to bring their wives/partners and babies to the postpartum ward at the hospital. Is also being delivered, in addition to the normal appointments, for the pregnant women and the baby. The hospital of El Progreso and the Carlos B

González health facility visited Tela Hospital to learn about this experience, and now they are duplicating and even improving it.

Graph I shows the results in terms of increasing acceptance of the use of condoms by pregnant women.

I. Percentage of pregnant women who were given condoms for prevention of sexual transmission of Zika, Tela hospital (June 2017 to April 2018)



* Source: "Improvement Indicator Database" Database ASSIST Project.

REPLICATION EXPERIENCE AT THE CARLOS B GONZÁLEZ HEALTH FACILITY OF THE CITY OF EL PROGRESO, YORO (CBG), OF SESAL

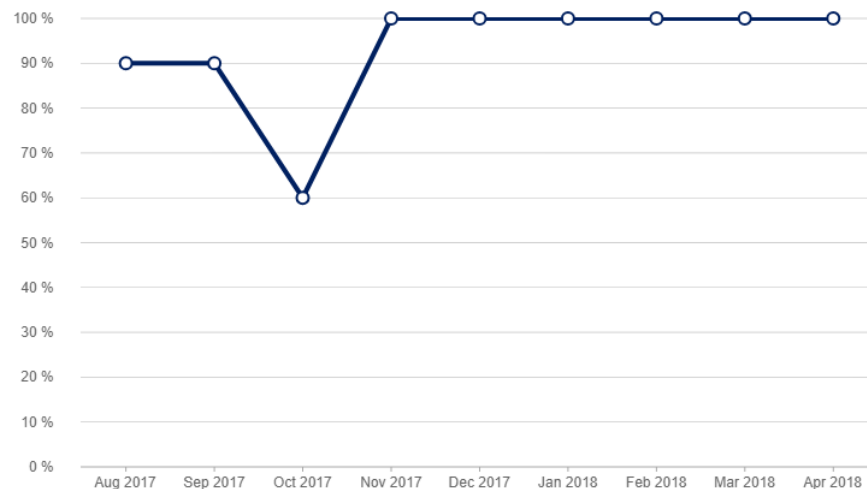
Staff from the Carlos B González (CBG) facility, in the city of El Progreso, [visited the Tela Hospital in August 2017](#) to learn about its work with men, after they identified that they were having similar issues. For example, when pregnant women were written prescriptions to get condoms at the pharmacy, they found that they were tossing the prescriptions in the trash; sometimes if the pregnant women did in fact get the condoms, they would discard them at the hospital, saying that they were afraid their husbands would get angry.

They replicated the experience, by holding meetings every Thursday, geared toward men, and they also began to provide counseling to pregnant women and their partners. Invitations are prepared, with specific times and dates for the husbands, which were handed to the pregnant women after counseling.

One of the innovations carried out by the CBG, was to identify, train and assign male-gender health workers to work with the men. This strategy improved acceptance by the men who participated in the meetings.

During the period between September 2017 to date, the CBG has had 96 men at the group meetings. Of 2,037 pregnant women who received care between October 2017 to April 2018, 24 pregnant women came with their partners, with both receiving Zika counseling as a result of the invitations to the men.

Graph 2. Percentage of pregnant women who receive condoms during prenatal training for prevention of sexual transmission of Zika, Carlos B González (SESAL) (August 2017 to April 2018)



Total de embarazadas monitoreadas en el periodo evaluado



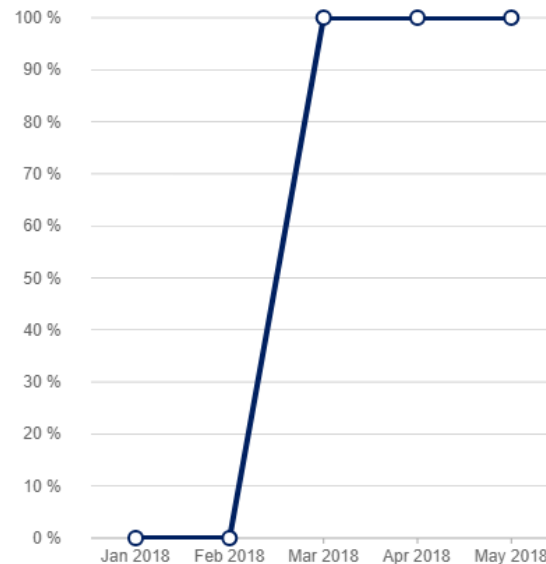
REPLICATION OF EXPERIENCE AT THE IHSS CLINIC OF EL PROGRESO (CIHSSP)

As a result of the exchanges of knowledge and experience in family-planning carried out in February 2018, the staff of the IHSS Clinic at El Progreso (CIHSSP) who participated were able to learn about the experience of involving men in the prevention of Zika, presented by the Tela Hospital and the CBG. Motivated by their experience, the team decided to implement a strategy adapted to its own context. The IHSS cares for insured employees of the in-bond (maquila) companies, which amounts to approximately 10% of the national population.

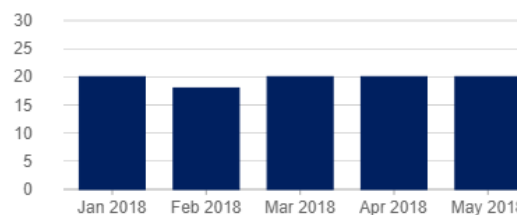
The CIHSSP began its activities with men in April 2018. They started off by inviting all husbands of pregnant women e coming for their first prenatal check at the clinic. Along with the appointment for the pregnant woman, they provide a written invitation to the husband/partner in order for them to negotiate leave with their employers. After the meeting, they receive a certificate for participation in the “Parent Workshop”. Likewise, they provide parents a second workshop meeting during the last prenatal care appointment (34 weeks of pregnancy). The team integrated four strategies to involve men: a) group meetings for the invited men; b) personal counseling for men; c) mandatory pre-marriage counseling sent out by the municipality of El Progreso, and d) counseling for couples (the pregnant woman and her husband). In addition to the issues addressed by Tela Hospital of, the CIHSSP added the issues of nutrition and postpartum depression.

From April 2018 to date, the CIHSS has provided counseling to 16 couples, 8 sessions for single men, and it has held 11 premarital meetings for 102 couples (204 persons), who have been counseled on Zika-related issues.

Graph 3. Percentage of pregnant women who receive condoms during prenatal training for prevention of sexual transmission of Zika, El Progreso Clinic (IHSS) (January 2018 to April 2018)



Total de embarazadas monitoreadas en el periodo evaluado





One experience described by the team, was the history of one of the men who participated in the men's meetings. When he was shown the exercises and counseling for the pregnant women, the husband took pictures on his cell phone. Later on, the pregnant woman provided the personnel feedback on the changes she had seen her husband: he began taking care of her, was concerned about her health, subsequently supported her during childbirth, and later on, with the newborn. They are satisfied with this strategy and will keep it going.

CONCLUSION

Preventing the sexual transmission of the virus is a responsibility that properly belongs to the couple. To address the pregnant woman alone is a weak strategy. Furthermore, the pregnant women do not always have the capability to transfer knowledge to her partner, or to negotiate the use of condoms. The men at first were hesitant to get involved, did not know about Zika, were unaware of the risk of sexual transmission, and did not allow their spouse to bring condoms home. Some of the statements that arose during the meetings with men were that "it's the women who don't like using condoms", "the women don't delegate child care, and "they feel weird and surprised at being at a meeting for men".

This good strategy, properly implemented with excellent techniques and dynamics has been able to change in the men's mindset, and their perspectives on how to stop infection by the Zika of virus and prevent harm to the newborn.

The steps for implementing the strategy, as suggested by the team, are:

1. Raising awareness of healthcare providers
2. Raising awareness of health facility personnel
3. Find suitable spaces to give the talks
4. Select the people who will be giving the talks (permanent, dedicated)
5. Prepare invitation cards
6. Provide information the men information, through flyers
7. Keep a record of the men's participation

NEXT STEPS

Registration of male participants who received counseling/information on ZIKA began in 2018, on the official patient daily care (ATA) forms. Previously, counseling care was not registered and went unnoticed. As of that date, all counseling of pregnant women and men is reported.

ASSIST will support SESAL in preparing an operational guide for implementation of the strategy of involvement of men in the prevention of Zika at other health facilities. Furthermore, SESAL, with the support of ASSIST, will identify work tools and aids that will help facilitate the meetings with men and the identification of issues that need to be addressed during the meetings with their respective methodologies, as well as to support layout and printing the flyer the Tela team prepared for giving to the men.

Members of the quality improvement team of Tela Hospital:

- Dra. Dioxana López, pediatrician, coordinator of the newborn (RN - recién nacidos) team
- Lic. Daira Contreras, chief of gynecology, member of prenatal
- Lic. Magdalena Menjívar, quality coordinator
- Dra. Linda Molina, coordinator of prenatal team
- Lic. Itza Aguiluz, psychologist
- Lic. Glenda Martínez, chief of labor and childbirth, a member of the newborn team
- Lic. Kathia Rodríguez, social services, childbirth, postnatal planning social, postpartum period, family planning team
- Lic. Riccy Molina, social services, specialized outpatient care, prenatal



Members of the quality improvement team of the Carlos B. González:

- Gisela Garay, nursing auxiliary
- Wendy Mejía, pharmacy exhilarate
- Norma Flores, attending physician
- Bessy Velásquez, services physician
- Alfonso Bonilla, facility director
- Francisco Rosales, guard
- Ebelinda Quiroz, statistician
- Esmeralda Velásquez, attending physician
- Nancy Chirinos, statistics auxiliary



Members of the quality improvement team of Clínica IHSS El Progreso:

- Dra. Karen Maldonado, psychologist, medical records technician
- Lic. Lucia Licon, Lic. in Education, pharmacy auxiliary
- Gina Reyes, laboratory technician
- Kensy Ocampo, nursing auxiliary
- Lic. Nohemy González, Lic. in Nursing
- Yolany Banegas, computer technician/laboratory technician
- Dina González, medical records technician
- Sara Puentes, nursing auxiliary
- Lic. Rubén Orellana, Lic. in Education, social promoter



For further information, call or write:

USAID Project for Applying Science to Strengthen and Improve Systems for Health
[Proyecto de USAID Aplicando la Ciencia para Fortalecer y Mejorar los Sistemas de Salud]
University Research Co., LLC • 5404 Wisconsin Avenue, Suite 800 • Chevy Chase, MD 20815-3594 • USA
Edificio Novacentro, Avenida Los Próceres, 9 piso 108B 3594 • Tegucigalpa • Honduras
www.usaidassist.org • assist-info@urc-chs.com

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