# Introducing the Standard Days Method: Expanding Family Planning Options in Rwanda

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## Abstract

The Standard Days Method is a simple fertility awareness-based method of family planning that helps women identify the days each cycle when they are most likely to conceive. Couples who wish to prevent pregnancy avoid unprotected intercourse on these days. The method was introduced in 13 sites in Rwanda, a nation with a high level of unmet need for family planning. This was the first time the method was introduced into regular service delivery, without the rigorous follow-up of a study setting. Users of the Standard Days Method were identified from clinic records and participated in interviews and focus groups. Community workers were also interviewed. Results confirm that the Standard Days Method is easy for providers to teach and for clients to learn and correctly use. The method attracts couples who are new to family planning, and is a valuable addition to the method mix offered in Rwanda. (*Afr J Reprod Health* 2007; 11[2]:60-68).

## Résumé

**Présentation de la méthode des jours standards: Expansion des options de la planification familiale au Rwanda** La méthode des jours standards est une simple méthode de la planification familiale qui est basée sur la sensibilisation à la fécondité qui aide la femme à reconnaître les jours dans chaque cycle qu'elle a la plus forte chance de concevoir. Les couples qui veulent prévenir la grossesse évitent d'avoir des rapports sexuels à risque ces jours-là. La méthode a été introduite dans 13 sites au Rwanda, un pays dont le besoin non réalisé pour la planification familiale est d'un niveau élevé. C'était la première fois qu'on introduit la méthode dans les services d'accouchement réguliers, sans la suivi riguoreuse d'un cadre d'étude. On a pu identifier les utilisateurs de la méthode des jours standards à partir des dossiers de la clinique et ils ont participé aux interviews et aux groupes cibles. Les animatrices socio-culturelles ont été interviewées aussi. Les résultats ont confirmé que les dispensateurs trouvent la méthode des jours standards facile à enseigner et qu'elle est également facile à apprendre et à utiliser par les clients. La méthode attire les couples qui ne viennent que de commencer à employer les méthodes de la planification familiale. Elle s'ert de supplement utile aux plusieurs autres méthodes offertes au Rwanda. (*Rev Afr Santé Reprod* 2007; 11[2]:60-68).

Key Words: *Standard Days Method, fertility awareness-based methods, Natural Family Planning, Rwanda*

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## Introduction

The Standard Days Method® is a fertility awareness-based method of family planning. It was developed and tested by the Institute for Reproductive Health, Georgetown University. The method is easy to teach, learn, and use. This article describes the introduction of the Standard Days Method in Rwanda. This effort was the first time that the method was introduced as part of regular service delivery, outside of a study setting with regular follow-up.

Rwanda is the most densely populated country in Africa, with more than 300 inhabitants per square kilometers. About 87% of the population is engaged in agriculture, mostly subsistence.[1] The country experienced genocide in 1994 that killed more than 1,000,000 people. While the economy is gradually rebounding, Rwanda remains one of the poorest countries in the World.[2] Both of these factors are reflected in the available health care services. The 2001 Rwanda Service Provision Assessment found that only 57% of health care facilities offered some level of all basic child, maternal, and reproductive health services.[3]

The total fertility rate is still very high in Rwanda (5.8)[4]. The 2000 Demographic and Health Survey suggests that while almost all married women (97.4%) were aware of at least one family planning method, only 13.2% of married women were using a method, and only 4.3% were using a modern contraceptive method (before the genocide this figure was 12.9%). In rural areas, only 2.6% of women in union were using any family planning method.[5,6] These figures clearly represent a substantial level of unmet need for a spacing method. It is estimated that 36% of married women of reproductive age would use family planning to space (24%) or limit (12%) birth if they could.[7]

In this setting the Institute for Reproductive Health, Georgetown University and INTRAH/ PRIME II, introduced the Standard Days Method beginning in October 2002, in cooperation with the Rwanda Ministry of Health.

The Standard Days Method is a fertility awareness-based method of family planning. It provides women with simple instructions on how to identify the days each cycle when they are fertile. Women and couples who wish to prevent pregnancy avoid unprotected intercourse on these days. The Standard Days Method is most effective for women whose menstrual cycles usually range from 26-32 days. For these women the fertile period is defined as days 8-19 (inclusive) of the cycle. All users follow this rule in all cycles, as long as their cycles remain within the 26-32 day range. Most couples use CycleBeads®, a color-coded set of beads that help women keep track of their cycle days and the length of their cycles.

The Standard Days Method is highly effective. A multi-site efficacy study resulted in a pregnancy rate of 4.8 with correct use. The typical use pregnancy rate was 12.0.[8] The method was then introduced in several countries in a series of operations research and case studies, which confirmed that the method is easy to teach, learn and use.[9] It is an acceptable option for many women and their partners, and fits well as an additional contraceptive choice in existing family planning and reproductive health programs.

The Standard Days Method was introduced in 13 pilot sites in Rwanda in October 2002, including seven public health clinics, five clinics run by religious organizations, and one NGO site. Figure 1 shows the location of service sites in Rwanda. Providers in the service sites were trained in Standard Days Method service delivery, as were a core group of trainers. Community health workers affiliated with the sites were trained to mobilize and refer clients to clinics. Behavior change communication activities, including materials development and distribution, and dissemination of key messages, as well as limited media activities were undertaken. This was the first time the method was introduced in regular service delivery without the rigorous follow up

of clients that is inherent to efficacy and operations research studies. This article describes results from an assessment of this project.

## The Data

Focus group discussions and key informant interviews were undertaken in the 13 pilot sites in late 2003. The perceptions of existing Standard Days Method users were assessed, including difficulties they encountered, communication between the partners concerning when they may or may not have unprotected intercourse to avoid pregnancy, acceptability of the method to users, and client satisfaction. Providers were also interviewed to assess their attitudes and experience in offering the Standard Days Method.

The study included interviews with 121 women using the Standard Days Method, 51 partners of these Standard Days Method users, 14 women who discontinued use of the method, and 16 women who became pregnant while using the method (planned or unplanned pregnancies). An additional 53 users participated in focus groups, as did 51 partners of users. All these informants adopted the method through regular service delivery in Ministry of Health clinics and not as part of a study. Participants were later identified from clinic records and contacted one to twelve months after they began using the method. Those who agreed to do so participated in focus groups or were interviewed for this assessment. Some 57 community health workers mobilizing on the method also participated in focus groups, and 25 community health workers were interviewed individually.

The sample was a convenience sample. Interviewers followed a list of all users from each site, and interviewed those who were easily found and agreed to participate. They ensured that all sites in which the method was offered were represented. Together, the 121 women interviewed and 53 women who participated in focus group discussions represent about a third of all women who began using the Standard Days Method in Rwanda prior to this assessment.

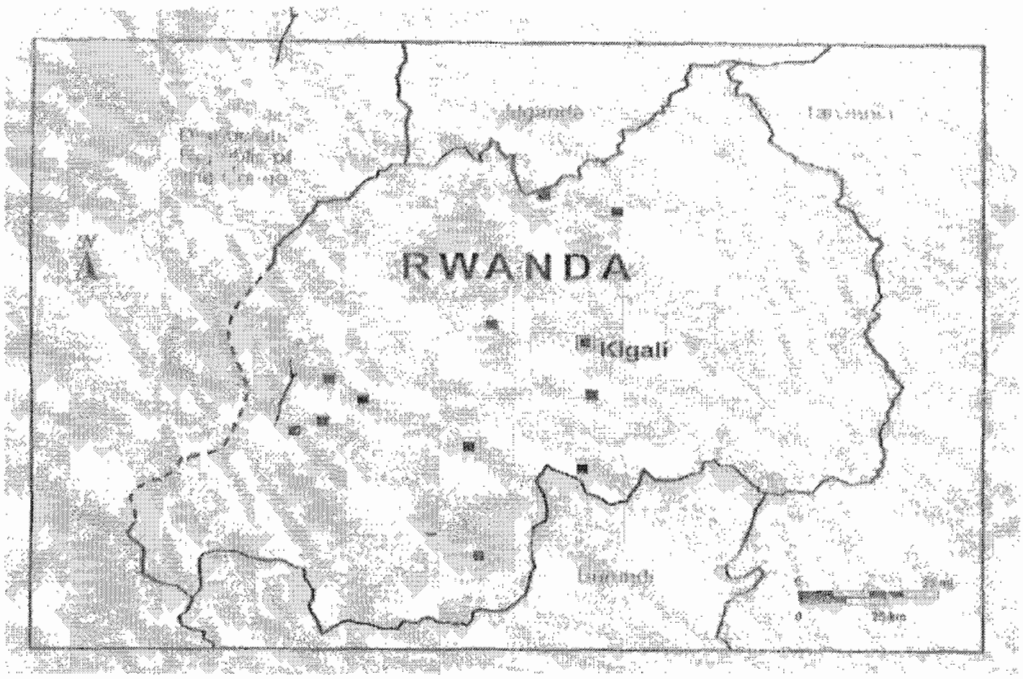


*Figure 1:* Location of service sites in Rwanda

## Results

### *Profile of Standard Days Method users in Rwanda*

We interviewed 121 Standard Days Method clients with a mean age of 30.8. All but one were married or in union, with a mean of 3.4 children (maximum 13). Education level was relatively low. While 5.3% of respondents had completed secondary school, 14.6% had no formal education and 21.2% had some formal education but had not completed elementary school. Almost half of responding women were catholic. Some 2.5% were Muslims; the others belonged to various Christian denominations. Most (80.1%) were still using the Standard Days Method at the time of the interview. The remainder had either become pregnant or stopped using the method for other reasons. However this figure does not represent the proportion of clients who became pregnant or stopped using the method, since study administrators made a special effort to identify such women to learn about their views of the Standard Days Method. At the time of the interview, continuing users had been using the method between 1 and 13 months (mean 5 months).

We conducted 12 focus groups with 53 additional women. Their mean age was 31.2. Overall they had a similar parity, educational, and religious profile to the women we interviewed individually. We also interviewed 51 men whose partners were using the Standard Days Method. They were older (mean age 38.3), and had similar education levels to women respondents (41.2% with no formal or uncompleted primary education). At the time of the interview they had been using the method for an average of 5 months. Some 51 additional men (all married to Standard Days Method users) participated in 12 focus groups. Their characteristics were similar.

### *Adopting the Standard Days Method*

Service statistics are available for nine of the pilot sites for a six months period beginning in April and ending in October 2003. During this period these clinics provided family planning methods to 1,225 women. Most women adopted injectable (46.3%) or oral contraceptives (27.3%), but 278 women (22.7%) chose the Standard Days Method. Only 4% of these new Standard Days Method users had ever used any family planning method before. This finding suggests that the Standard Days Method draws women who are new to family planning use, though some women who had previously used modern contraceptives chose the Standard Days Method to avoid the side effects they suffered when they used these other methods or to avoid longer term health issues that they perceived as associated with these methods. Almost no women were using another method at the time they chose to use the Standard Days Method.

Focus groups with users suggest that women often learned about the Standard Days Method when they approached their health provider seeking a family planning method. Partners of women who were using the method said they learned about the Standard Days Method at community meetings or from the radio. Focus group discussions with men indicate that some resisted accepting the Standard Days Method when their wives discussed it with them, but were convinced that the method was appropriate after talking to a health provider.

When female focus group participants were asked why they chose the Standard Days Method they said that it was effective, simple to use, and without side effects or health risks (since all family planning methods are offered free of charge in Ministry of Health clinics in Rwanda, cost was not an issue). Women who had used hormonal contraceptives in the past said they stopped using them because of side effects. Male users stated similar reasons, but some said that they chose to use the Standard Days Method because correct use of the method required their cooperation, so they felt involved in the process of planning their family.

*Using the Standard Days Method*

Using the Standard Days Method with CycleBeads requires that the woman or her partner move a black ring along their CycleBeads daily, one bead each day. The position of the ring on CycleBeads conveys whether the woman is in her fertile window (days 8-19 of the cycle). When the band is on a white bead (representing a fertile day) the couple avoids unprotected intercourse to prevent pregnancy. They can use a barrier method or abstain from intercourse on these days. Users are counseled to mark the first day of the cycle (the day the woman begins to menstruate) on a calendar. If the woman is not sure if she moved the ring she can check against the calendar to confirm that the ring on her CycleBeads is located on the right bead (for a detailed description and an illustration of CycleBeads, see Arévalo et al., 2002[8]).

The majority of respondents, male and female (including continuing users and those who became pregnant or stopped using the method) found that CycleBeads were easy to use and interpret. When asked to explain which days are fertile, 99% of women and 88% of men correctly responded that the fertile window is days 8-19 or that it is when the ring is on the white beads.

Focus group participants discussed strategies they used to remember to move the ring every day. They mentioned placing CycleBeads on or besides their bed in a visible location, choosing a specific time to move the ring each day, practicing to make moving the ring a daily habit, and reminding each other to move the ring. They also emphasized the importance of marking the first day of menstruation on a calendar, so that they can cross-check the position of the ring on CycleBeads against it when they are not sure if they remembered to move the ring, or when they think they might have mistakenly moved the ring twice in one day. The only difficulty respondents mentioned was their fear that the ring would break. Marking the first day of menstruation on a calendar was more problematic, since some women did not own a calendar. (this problem has since been resolved, as all women now receive a calendar with their CycleBeads). Women's CycleBeads were checked during the interview to determine if they had the ring on the right day. Some 85.4% of women had the black ring correctly placed on their CycleBeads.

The 16 women who became pregnant while using the Standard Days Method were asked about their use of the method in the cycle that resulted in pregnancy. All but one said they had unprotected intercourse on white-bead days, because they wished to become pregnant (eight women), or because they had two cycles out of the 26-32 day range, realized that the method was no longer appropriate for them, but chose not to use an alternative method (six women), or because they failed to move the ring daily and determine if they were on a fertile day (two women).

Few couples reported problems in avoiding unprotected intercourse during the 12 days fertile window each cycle. Some 95% of women users and 90.2% men reported that observing this rule was easy. Participants were asked if they used a barrier method or chose to abstain during the fertile window. Figure 2 shows the distribution of their responses. Note that women were asked about each type of behavior separately, allowing them to confirm more than one. Thus, some women reported use of both condom and withdrawal on the fertile days. Men, on the other hand, were asked just one question – what were they doing on the fertile days – therefore they could not mention more than one method.

Men and women reported very similar patterns. Most users reported abstinence during the fertile days. About a third of women and men reported using a condom or withdrawal during the fertile window in some or all of their cycles of method use. Only one woman said she occasionally had unprotected intercourse on her fertile days. When asked why she did so she replied: "I have told my husband to abstain, but

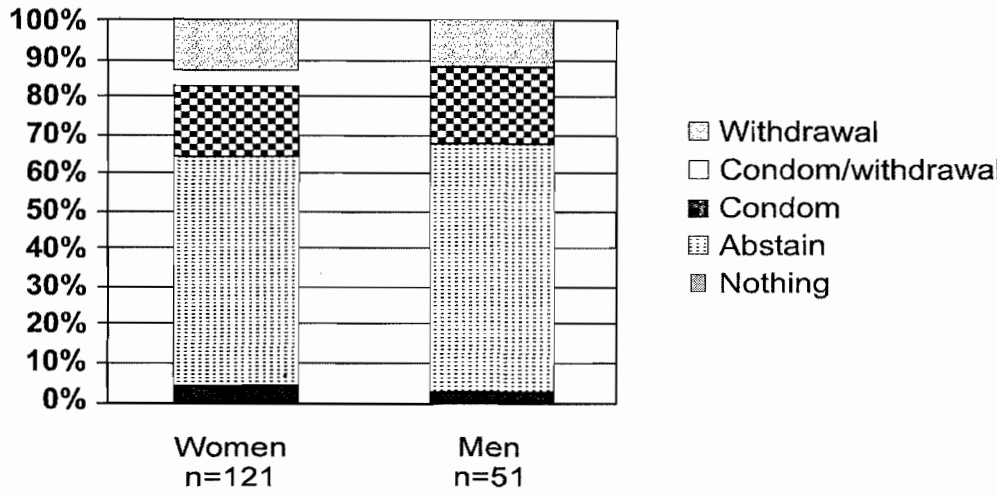


**Figure 2: Strategies for avoiding unprotected intercourse on fertile days**

*Figure 2:* Strategies for avoiding unprotected intercourse on fertile days

sometimes he can't and says only God can allow or not pregnancy, and then we have unprotected sex on fertile days."

Focus group participants discussed the possibility of the husband insisting that they have unprotected intercourse during the fertile period. Most agreed that this is not a concern, but some admitted that they could not refuse their husband if he insisted. One participant reported that once she wanted to have intercourse on the fertile days, but her husband refused, because the couple had decided to avoid pregnancy. Focus group participants agreed that it can be difficult to abstain if they drink alcohol during the fertile period. Men said they try not to drink on these days. Some women said that if their partner drinks they use condoms or sleep in separate rooms.

All men and all but three women users interviewed said they were satisfied with the Standard Days Method. Focus groups included a discussion about satisfaction with the method. Users liked it because it is easy to use, it is not associated with side effects or health risks, it is free of charge and is compatible with their religious beliefs, it does not require frequent visits to the health center, and it allows them to space birth according to their preferences. The only major criticism of the method was that it could be used only by women with cycles that usually range 26-32 days. Some men also found the 12-day fertile window long. Others noted that the Standard Days Method does not protect against sexually transmitted infections.

### *The role of men in using of the Standard Days Method*

By definition, a fertility awareness-based method of family planning, such as the Standard Days Method, requires the cooperation of both partners. Since the method affects the timing of sexual intercourse or the use of condoms for part of the cycle, the woman's partner needs to know when she is on her fertile days, and behave according to an agreed-upon plan in order to achieve pre-determined birth-spacing goals.

We found, however, that many men in the Rwanda assessment took an even more active role in the use of the method – they took it upon

themselves to move the ring on CycleBeads each day, or they marked the calendar. Some 93.4% of women users said their husbands were involved in the use of CycleBeads. When asked to be more specific, 84% of them replied that he either moved the ring himself, reminded her to move the ring, they moved the ring together (one couple even had two sets of CycleBeads, and both moved the ring daily), or he marked on the calendar when she told him she got her period.

It appears that couples actively discussed their decision to avoid unprotected intercourse on the fertile days. Some 90.9% of women users and 92.2% of men users said the topic was discussed and that both partners had mutually agreed to avoid unprotected intercourse on the fertile days, and had come up with strategies to do so. Focus group participants (both men and women) felt strongly that using the Standard Days Method strengthens the marital relationship because it leads to dialogue between partners. Moreover, some participants said that using the method increased their trust, mutual respect, and family harmony.

### *Discontinuing use of the Standard Days Method*

We asked 14 women who stopped using the Standard Days Method their reasons for doing so. Seven of the 14 discontinuers interviewed switched methods because they had a second cycle out of the 26-32 day range so that the method was no longer recommended for them. Four women left because they or their partner found the 12-day fertile window hard to observe. The other three women stopped using the Standard Days Method because of marital dissolution or changed fertility preferences. Of these 14 women 8 switched to oral contraceptives and two to withdrawal. The other four (including the three who stopped using the method because they no longer needed or wanted to use a family planning method) chose to use nothing.

All focus group participants, 97.5% of interviewed women and 94.1% of interviewed men said they were planning to continue using the Standard Days Method for at least another year.

### *The provider perspective*

Focus group discussions with community health workers mobilizing the Standard Days Method show that providers found the method easy to teach. They felt that training in method counseling added to their overall knowledge and improved the quality of care they offer. Mobilizing about the Standard Days Method clearly added to their workload and they had not received additional compensation, however overall providers said they would like to continue mobilizing about the method. Their one negative comment about the method itself was that it is not appropriate for all women who would wish to use it because of the cycle length requirement.

Similarly, of the 25 community health workers who were administered an individual questionnaire, 23 felt confident in their ability to describe and refer potential clients for the Standard Days Method. However when asked specific questions about eligibility for method use, 10 providers made mistakes. This finding confirms the importance of adequately training community workers in Standard Days Method screening and counseling, which various Operations Research studies of the Standard Days Method previously found[9]. Community workers need more intensive training than other method providers, because their health-care background is limited.

While about a quarter of community workers felt they had some difficulty in counseling in method use (most often in discussing sexuality), they indicated that they help each other, and seek the support of their supervisors, when faced with these difficulties. All the interviewed community workers said that they wished to continue offering the method.

## Discussion

The efficacy trial of the Standard Days Method and a number of Operations Research studies

indicate that the Standard Days Method is highly effective, and is easy for providers to teach and for couples to learn and use[8,9]. Users like it because it is inexpensive and in some settings free of charge, it is natural and does not have any side effects or any perceived health risks. Providers find it easy to teach, and health and family planning programs find it is relatively simple to add to the method mix they offer.

Health facilities in Rwanda were the first to offer the Standard Days Method as part of regular service delivery (albeit on a limited scale). The interviews and focus groups with users and providers that we describe in this article confirm what was found when the method was offered in study settings, and show that the Standard Days Method is a viable option for many couples. Since most users are new to family planning use, it is an addition to (not a replacement for) other modern family planning methods. Moreover, we found that the Standard Days Method can be an entry point for couples new to family planning, who use the method then switch to other modern methods.

Since these data were collected, the Standard Days Method was introduced in Rwanda in 15 additional sites, and plans are in place for national program expansion. Further research is necessary to explore the effect on overall contraceptive use and attitudes toward family planning of adding the Standard Days Method to the method mix on a large scale in entire countries or regions.

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