World Vasectomy Day (WVD) focuses global attention on choice and men’s contribution to family planning.

BACKGROUND

On November 17, 2017, Mexico City took part in the global World Vasectomy Day campaign promoting men’s participation in family planning, especially through no-scalpel vasectomy (NSV). This celebration is part of the efforts made in recent years to promote free vasectomy services throughout Mexico and the world.

In Mexico City World Vasectomy Day, which is led by filmmaker Jonathan Stack, involved the collaboration of the National Center for Gender Equity and Reproductive Health (CNEGSR), the Secretariat of Health of Mexico City (SEDESA), DKT Mexico, and Population Council Mexico (PCMX).

OBJECTIVE

During World Vasectomy Day and its “Vasectomy-a-thon”, a 24-hour event in Mexico City, PCMX conducted an exploratory study to better understand the reasons men chose NSV, as well as their concerns before and after the procedure.

METHODOLOGY

This cross-sectional study was implemented at the T-II Dr. Manuel Escontría Health Center as well as mobile units at the Monumento a la Revolución.

The study resulted in a sample of 116 men who answered a survey of two sections that focused on:

1) their reasons, previous knowledge and concerns about NSV—collected prior to surgery
2) their understanding of their post-surgical care measures—collected immediately after surgery.

RESULTS

The principal reason for seeking no-scalpel vasectomy, among the men surveyed in Mexico City, was their achievement of a desired family size, for themselves and their partners.

Men who chose no-scalpel vasectomy (NSV) during World Vasectomy Day were between 19 and 60 years old, with educations higher than the national average (9.1 years of schooling, slightly higher than middle school); most were in a stable relationship, with at least two children, and reported using contraception, primarily the male condom.

Prior Knowledge of No-Scalpel Vasectomy

Most (73.3%) participants in this study revealed accurate knowledge about the NSV procedure. In general, men who elected to have the procedure had obtained prior information about NSV from their social networks (40.5%), or staff from health institutions (26.7%), or mass media such as television, radio, magazines, and newspapers (24.1%). Young men ages 19 to 24 reported obtaining their information on NSV largely though their social networks (61.5%).
Primary Reasons for Choosing NSV

The most important reason reported for choosing NSV was to avoid unwanted pregnancy (58.6%), followed by a wish to support a partner in family planning (17.2%), and partner’s health or genetic incompatibility (11.2%); the latter was more frequently mentioned among men age 25 and older. Environmental and social awareness were cited by members of the 19 to 24 age group, with some of those men reporting no children (Figure 1).

Primary Concerns About NSV

Pain and anesthesia were mentioned as the principal concerns related to NSV, for all age groups (45.7%). One third (32.8%) stated that they had no fear, but 10.3% reported fear of potential complications, in terms of their sexual performance or loss of masculinity.

Understanding Self-Care Instructions and Post-NSV Follow Up

All men who received NSV were provided instructions from their health care providers about self-care after the procedure, in addition to the need to perform a sperm count after three months. In assessing their understanding and retention of their post-surgery self-care instructions, 81.7% mentioned hygiene and anti-septic measures for the wound, and 52.9% reported having to wait between 20 and 30 ejaculations before unprotected sex.

Their understanding, or retention, of other medical guidance was almost entirely lacking: The necessity of continued condom use, to prevent sexually transmitted infections, along with a follow up sperm count three months after NSV were mentioned by less than 4% of survey respondents.

CONCLUSIONS AND RECOMMENDATIONS

The study reveals the need to disseminate information through mass media, social networks, and all levels of the health system about no-scalpel vasectomy (NSV)—as a permanent, simple, and cost-effective procedure with low rates of complications and minimal pain.

Based on this study’s results, we recommend that health institutions integrate NSV information, counseling, referrals, and services, for expanded family planning options and perspectives, within the National Family Planning Program.

Health institutions must also facilitate the monitoring and evaluation of men who undergo NSV—including during World Vasectomy Day—with follow up at least six months after the procedure.

For further information about this study, please consult the extended report or contact Isabel Vieitez at ivieitez@popcouncil.org or Adriana Ramos at aramos@popcouncil.org.