Female Voluntary Sterilization

Directions

Two participants in your group will assume (or be assigned) roles. One will be a clinician, the other a client. Participants taking part in the role play should spend a few minutes reading the background information and preparing for the exercise. The observers in the group also should read the background information so that they can participate in the small group discussion following the role play.

Participant Roles

Clinician: The clinician is an experienced family planning service provider. S/he is calm and knowledgeable when counseling clients.

Client: The client is a 33-year-old woman with two children. She has successfully used Depo-Provera as her method of family planning for 6 years and is very happy with it. Her husband is now certain that he is too old to raise any more children and has suggested that she be sterilized; he says he is also concerned about her taking so many hormones for such a long time.

Situation

The client now comes to the clinic to get more information on sterilization. She says that she too does not want to have any more children, but is satisfied with Depo-Provera and is not sure why she should change. She is also concerned, however, that she may be taking too much medication for too long a period of time. She repeatedly asks about the permanent nature of sterilization.

Focus of the Role Play

The focus of the role play is on the interaction between the clinician and the client. The clinician needs to assess the client’s understanding of tubal occlusion, her concerns about long-term Depo use and her readiness to make such a decision. The clinician needs to give the client the information she needs in an impartial manner. She needs to pay particular attention to the client’s concerns about the permanence of tubal occlusion and what this implies. The interaction should continue until they agree that the client should discuss this new information with her husband before making a final decision.

Observer Discussion Questions

1. How did the clinician approach the client? Did she respond to the client’s fears and concerns, even when not directly stated?
2. How did the client respond to the clinician?
3. How might the clinician improve her interaction with the client?
4. Was the decision reached an appropriate one? If yes, why? If not, what would have been better?