
Male Research Cooperative Agreements Overview of Round 3

David M Johnson, MPH
Office of Family Planning
David Fine, PhD
Center for Health Training

July 2, 2010

Background

- Early OFP research on male RH services
 - Exploratory
 - Locally designed and driven

 - Three 5-year research efforts
 - Round 1: 1997 – 2002
 - Round 2: 2003 – 2008
 - Round 3: 2008 – 2013
-

Past Lessons Learned

- Administrative buy-in
 - Clinic culture
 - Existing policies
 - Challenges
 - Access—physical and perceived
 - Connecting—more than outreach
 - Clinician knowledge
 - Systems and billing
 - Forms and data
-

New Approach

- Transition from letting an idea happen to a more directive approach
 - Systematic approach by OFP to serve males
 - Direct services
 - Training
 - Research
-

Male Research Initiative

- Dissemination goal
 - Translational research
 - Inform current practice
 - Advance evidence base for best practices
 - Improve quality of care via changes to system-providers and individual-levels
 - Generate practical guidance and materials
 - Program innovation summaries
 - Toolkits for assessment and monitoring
 - Lessons learned
-

Round 2—2003 - 2008

- Curriculum-based
 - Educational interventions
 - Wise Guys, El Joven Noble
 - Clinic-based
 - Improved access and service provision
 - Transformational
 - Cross-site evaluation
 - Short-term interventions work
 - Limited scope
 - Fidelity issues
-

Round 3: Male Research Initiative

- Test a multi-component intervention at family planning clinics
 - Clinic environment
 - Administrative and clinical training
 - Outreach, inreach, and clinic promotion
 - Increase number of males served at FP clinics
 - Focus on FPAR-documented services
 - Maintain female client census
 - Five year effort (Fall 2008 – 2013)
-

Round 3: Male Research Initiative

- Five research cooperative agreements
 - Montachusett Opportunity Council (2 clinics)
 - Family Planning Council – Philadelphia (2)
 - University Health Systems – San Antonio (3)
 - Planned Parenthood of Montana (2)
 - Family Health Centers – San Diego (2)

 - Research Coordinating Center
 - Center for Health Training
-

Year One – Infrastructure

- On-site staff training
 - Grantee meetings
 - Clinic and grantee assessments
 - Physical environment and clinic mapping
 - Patient flow and efficiency
 - Protocols, policies and procedures
 - Community partners
 - Staff discussions
 - Client input
 - Human research protections
-

Year Two – Program Activities

- FP client inreach
 - Clinic changes—physical and policy
 - More staff training
 - Outreach

 - Identifying implementation challenges
 - Learning groups
 - TA
 - Program monitoring
-

Year Two – Research Activities

- Program action steps—Implement operational work plans
 - Change the environment
 - Initiate outreach and inreach activities
 - Enhance and maintain capacity building, i.e., training and technical assistance
 - Research/evaluation action steps
 - Implemented by local evaluators and CHT
-

Year Two – Data Collection

- Clinic environment changes
 - Physical plant
 - Policies and procedures
 - Clinic staff surveys
 - Community key informant interviews
 - Aggregate clinic summaries (FPAR)
 - Female client services
 - Client satisfaction
 - Male client visit records
-

Years 3 – 5

- Manage and grow innovations
 - On-going data collection and analysis
 - Client visit records, staff surveys, outreach events, and key informant views
 - Assess clinic capacity issues
 - Implement web-based monitoring
 - Document implementation
 - Describe client characteristics, services and trends
-

Other Considerations

- Services to empower men and their partners
 - Training needs
 - General and comprehensive
 - Encourages and supports staff
 - Updates and refreshers
 - Beyond clinical training—front desk, billing...
 - Sex...eroticism, relationships
 - Gender
 - Integration
 - The male presence
-