

12.5. RECOMMENDATION:

Should MIDWIVES perform tubal ligation (post-partum and interval)?

Problem: Poor access to contraception
Option: Midwives performing tubal ligation
Comparison: Care delivered by other cadres or no care
Setting: Community/primary health care settings in LMICs with poor access to health professionals

Recommendation	<i>We recommend against the option</i>	<i>We suggest considering the option only in the context of rigorous research</i>	<i>We recommend the option</i>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<p>We suggest considering this option only in the context of rigorous research. The intervention should be evaluated where:</p> <ul style="list-style-type: none"> - A well-functioning midwife programme already exists - A well-functioning referral system is in place or can be put in place <p>The panel acknowledges the different methods of tubal ligation that may be relevant in this context.</p>			
Justification	<p>This intervention may be effective, and may reduce inequalities by extending care to underserved populations. There is some uncertainty as to whether the intervention is an acceptable and feasible approach.</p>		
Implementation considerations	<p>Not applicable</p>		
Monitoring and evaluation			
Research priorities	<p>Studies to assess the effects and acceptability of midwives performing tubal ligation are needed</p>		