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Involving Men in Family Planning Programs and Services

Background

Several studies have shown that male engagement can improve access to and use of family planning (FP). But despite the Rwandan Ministry of Health's expanded focus on couple counseling in FP, male involvement in FP is still poor in both the household and healthcare settings.

The Medical Students' Association of Rwanda (MEDSAR) was awarded a small grant from the MEASURE Evaluation PRH project to investigate the barriers to integrating men into FP programs in Rwanda. The research team conducted one-on-one interviews with 96 community health workers (CHWs) and 24 nurses in 24 healthcare facilities in Rwanda's Southern and Kigali City Provinces. Focus group discussions were conducted with men and women, all parents either married or not, at each of the healthcare

facilities. To read the full study see:

www.measureevaluation.org/publications/wp-13-132

Findings

In many healthcare facilities there is no defined calendar for FP services for men apart from free condom distribution. Because HIV/AIDS discussions have dominated the sexual education agenda, less attention has been directed at FP awareness efforts among men. Furthermore, some consider condom use inappropriate in families.

Nearly 90% of the healthcare providers believed that men are not committed to practicing FP since they rarely accompany their wives to the facilities or show up for FP outreach or services. Women have few options when their husbands do not want them

to use FP, and there is no program or policy to help in such a situation; an outdated law requires mutual consent among couples in order to obtain contraceptives.

Men often view FP in relation to their financial situation. They are aware that bigger families are expensive; however, lack of education, religious beliefs, and cultural attitudes interfere with FP acceptance. For example, in Rwandan society children are considered a treasure or power for the family, thus encouraging larger families. Men may avoid using FP because they are trying for a boy, based on the cultural priority placed on sons. Some Rwandan proverbs and the fact that women primarily raise the children reinforce the belief that FP is a women's issue.

Both the CHWs and healthcare providers felt they needed more training on FP counseling and methods, especially vasectomy. Misinformation and rumors about FP (both urban and rural) prevent men from practicing FP and can influence their decision to prohibit their wives from using contraception. Men who understand and appreciate the role of FP are motivated to use it, but in the absence of many options for male-focused methods, men get discouraged and leave FP to women.

Recommendations

Factors that have facilitated the integration of men in FP through other RH services include: key

selection of counselors knowledgeable about FP counseling and methods; decentralizing the healthcare system through CHWs; and offering basic FP training to healthcare providers and CHWs. A variety of other factors could positively influence the integration of men in FP:

- Involve more officials in FP programs;
- Set a permanent plan of action involving men in FP integrated into different RH services;
- Make FP counseling after each hospital birth a standard practice;
- Increase the number of staff trained in FP and structure job roles and responsibilities to allow the trained staff to actively provide FP services;
- Rotate FP staff among RH units;
- Provide a variety of FP methods so CHWs and healthcare providers have enough commodities to provide FP services at the community level;
- Establish joint FP programs between healthcare providers and CHWs working in communities;
- Implement regular supervision for FP services;
- Support more FP talks and awareness building of FP programs, particularly in rural areas;
- Focus on FP education, starting from youth, to prevent unwanted pregnancies and instill a culture of FP;
- De-stigmatize male involvement in FP by using testimonies from men and couples who have had successful FP experiences;
- Provide supportive advice and counseling for men interested in FP;
- Create a policy change to allow equal access to FP for men and women, thereby giving women more agency about their healthcare.



<http://www.measureevaluation.org/prh>

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