

***Bolivia:***

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***Impact of Men's Knowledge, Attitudes and Behavior Regarding Fertility Regulation on Women's Lives***

**Emilio Zambrana, Donna McCarraher and Patricia Bailey**



**Summary of Final Report Prepared for  
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**This summary highlights findings from a larger scientific report  
and includes recommendations from in-country researchers**

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**I Introduction**

The total fertility rate in the province of Cochabamba, Bolivia, has decreased significantly, from 6.3 children per woman in the 1980s to 4.9 in 1994, according to the 1994 Demographic and Health Survey. In spite of this decline, couples say their family size is still too large. Women in urban Cochabamba would like to have an average of 2.3 children, signaling an unmet demand for contraception.

While previous studies have examined the roles of culture, religion and education in determining contraceptive use, little is known about how gender dynamics and couple communication affect family planning or family size. The Women's Studies Project (WSP) supported research in Bolivia to learn more about men's perceptions of family planning and how their attitudes, knowledge and behaviors affect women's contraceptive use, self-esteem, self-determination, sexuality and partner relationships.

**II Study Objectives**

The primary objectives of this study were to

- 1) describe the socioeconomic and demographic characteristics of the study population,
- 2) measure contraceptive knowledge, current and past use, and attitudes toward contraception,
- 3) identify problems and myths associated with various contraceptive methods, including the intrauterine device (IUD), the pill and tubal ligation,
- 4) determine the relationship between men's knowledge, attitudes and behaviors and women's family planning use,
- 5) describe the relationship between contraceptive use and different aspects of women's lives, including self-esteem, sexual relationship with partner, overall relationship with partner, and self-determination.

### **III Research Methods**

A survey, conducted by the nongovernmental organization Cooperazione Internazionale (COOPI) and the WSP, involved 630 couples of reproductive age. Study participants were married or in a consensual relationship and living in an urban area of Cochabamba.

Prior to the survey, researchers conducted focus group discussions (FGDs) to help them develop measurements for study variables, which included self-esteem, self-determination, overall relationship with partner, and sexual relationship with partner. A total of eight focus groups, led by a local psychologist and an anthropologist, were conducted with both men and women. Researchers included items solicited from the FGDs in the questionnaire and, at the time of analysis, developed a composite score for each of these four outcomes.

Study participants were chosen from three areas, based on the 1992 National Census of Urban Cochabamba. Area 1 is located in the northern part of the city, where 90 percent of its residents are middle- and upper-class professionals and office workers. This area has adequate sanitation, water and health services. Area 2, "La Cancha," is a densely populated area with poor sanitation services, one-third of its households are low-income. Area 3 is located on the southwestern edge of the city, 80 percent of residents are poor (income did not cover the minimum needs for food), and most residents were born outside of Cochabamba. Researchers used a multistage stratified probability sampling procedure to select study participants. A total of 90 census segments were randomly selected – 30 from each of the three areas – and researchers planned to interview seven couples from each segment. However, seven eligible couples could not be found in each segment, so researchers interviewed couples in census segments adjacent to and northeast of the original study area.

Men and women were interviewed simultaneously and separately, men were interviewed by male interviewers and women by female interviewers. SUDAAN software was used to analyze the data.

### **IV Research Findings**

The overall response rate for this study was 93 percent. In analyzing results, researchers found that 90 percent of study participants were married, while 10 percent were living in a consensual union. More than 86 percent of respondents were Catholic. The average number of people per household ranged from 4.7 to 5.1. Approximately 85 percent of study participants said they were happy with their partner and with the number of children they had.

There were slight differences in men and women's education levels and participation in the work force. Men were better educated than women, averaging 12 years of schooling, while women averaged 11 years. Forty-nine percent of men and 46 percent of women had

a high school education. Forty percent of men and 34 percent of women had a university education.

All men worked for pay, while only half the women surveyed worked outside the home. Approximately 32 percent of men were self-employed in the informal sector, while 48 percent worked for someone else. Fifty percent of the working women were self-employed in the informal sector, while 39 percent worked for someone else.

Both men and women had positive attitudes toward family planning. Yet, there were differences between men's and women's views on ideal family size and their contraceptive knowledge.

#### ***A Contraceptive Awareness and Use***

Both men and women demonstrated a high awareness of contraceptive methods, but men were slightly more knowledgeable than women. Ninety-nine percent of men and 93 percent of women had heard of at least one modern contraceptive method. However, men and women generally were not familiar with modern methods, such as injectables, foam, and sterilization.

When surveyed about traditional methods, 92 percent of men and 89 percent of women knew about rhythm, while 73 percent of men and only 56 percent of women knew about withdrawal. Nearly 67 percent of women and 53 percent of men who reported rhythm as their primary method could accurately identify the most fertile period of a woman's menstrual cycle.

In terms of ever-use of a contraceptive method, 72 percent of men and 64 percent of women said they had used traditional contraceptive methods at some point in their lives, while approximately half of study respondents reported using a modern method. Thirteen percent of men and 17 percent of women said they had never used either a modern or a traditional contraceptive method.

<b>Knowledge and Attitudes About Traditional Contraception</b>		
	<b>Men</b>	<b>Women</b>
Ever-used a traditional method	72 %	64 %
Knew about rhythm method	92 %	89 %
Knew about withdrawal	73 %	56 %
Could identify fertile time in woman's cycle	53 %	67 %

When questioned about current contraceptive use, two-thirds of respondents said that they had used a method during the 30 days prior to the study. Forty-one percent of couples said they were using a modern contraceptive method, while 25 percent of women and 27 percent of men said they were using a traditional method. Breastfeeding was reported as a method of fertility regulation by less than 1 percent of couples.

Fifty-nine percent of the noncontracepting couples were at risk of pregnancy. Reasons for non-use were postpartum or breastfeeding (28 percent), medical problems (18 percent), and lack of information (16 percent). Fourteen percent of men and 6 percent of women answered that they did not like to use contraceptive methods. Only 1 percent said they did not use a method because they thought it would be harmful to their health.

When looking at couples by socioeconomic status, those in Area 1, the upper-income area, were familiar with the greatest number of methods. However, in Area 2, only 38 percent of study participants had ever used any modern method. Ninety-two percent of the women using a method in Area 2 were at risk of becoming pregnant (they did not desire pregnancy but did not use a contraceptive) while the risks for those in Areas 1 and 3 were much lower, 54 and 40 percent respectively.

### ***B Attitudes and Satisfaction with Contraception***

Both male and female study participants held positive attitudes about family planning. Ninety percent of those interviewed: 1) approved of family planning, 2) had a partner who approved of family planning, 3) agreed men should assume responsibility for using methods, and 4) agreed that men should support their partner in the use of a contraceptive method.

Couple agreement on what method they used in the 30 days prior to the interview ranged from 64 to 87 percent. Couples who used modern methods had the highest levels of agreement about which method they used.

Yet, in spite of similar views about contraception and family planning use, couples did not always communicate about family size. Only half of the men and women interviewed reported talking with their partners about the number of children they wanted, and men and women defined the "ideal" family size differently. Men said that their ideal minimum number of children was 1.85, with a maximum of 3.76 children. Women said that their ideal minimum number of children was 2.02, with a maximum number of 4.21. Twenty percent of those interviewed expressed a preference for sons, and 10 percent for daughters.

Ninety-five percent of study participants said they and their partners were satisfied with their current contraceptive method. However, looking at specific methods, users of condoms and tubal ligation expressed the most dissatisfaction. Twelve percent of men

and 8 percent of women were dissatisfied with the condom. Three percent of men and 10 percent of women were dissatisfied with tubal ligation.

Study participants mentioned that their method diminished their sexual pleasure, their method was perceived as ineffective, they desired additional children, and their method caused side effects. However, given the small numbers on which these findings are based, researchers advised caution in drawing conclusions.

When asked about specific contraceptive methods, 54 percent of men and 46 percent of women gave favorable views on the condom. Sixty-seven percent of men and 62 percent of women said they would use a condom if their partner requested them to do so, but 16 percent of men and 39 percent of women said they would be ashamed to buy condoms. Study participants said the advantages of condoms were that they were “good/comfortable” (30 percent of men, 32 percent of women), they prevented sexually transmitted diseases (19 percent of men and 9 percent of women), and condoms were inexpensive and easy to obtain (5 percent of men and women). Few study participants said condoms were not comfortable, that condoms diminish sexual pleasure, and that condoms break.

Advantages of Condoms		
Advantage	Men	Women
Good/Comfortable	30 %	32%
Prevents STDs	19 %	9 %
Inexpensive	5 %	5 %

Study participants were asked about myths or problems associated with use of condoms, IUDs, tubal ligation and pills. Approximately 70 percent mentioned problems for each method. Some problems could be attributed to actual contraceptive side effects, such as weight gain for pill use or changes in the menstrual cycle for IUD users. However, 15 percent of study participants held inaccurate views of methods, including the myth that the pill causes cancer or that tubal ligation causes AIDS.

Fifty-five percent of women and 46 percent of men reported that they obtained information about reproductive health and contraception from private-sector services, such as pharmacies and physicians, rather than public institutions administered by the Caja Nacional and the Ministry of Health. However, twice as many men as women (25 percent versus 12 percent) reported using informal networks, such as mass communication and friends, as a source of information.

## *C Psychosocial Factors*

In examining the relationship between psychosocial outcomes and contraceptive use, researchers measured women's self-esteem, self-determination, quality of overall relationship with a partner, and quality of sexual relationship with a partner

Researchers determined self-esteem by assessing study participants' answers to questions such as whether a woman felt she was a good wife and mother, whether she was competent in her job, whether she saw herself as responsible and intelligent, and whether or not she was happy. Women in Area 1 (the high- to middle-income area) had the highest self-esteem scores, while women in Area 2 were most likely to say they did not feel competent at their jobs or were not intelligent. A high self-esteem score was more likely among women whose husbands had six to 12 years of education and who had a high sexuality score. Contraception played no role.

Items on the self-determination composite score included whether the woman managed her own money, whether she managed the family's money, whether she decided what clothes to wear, and her general appearance. Contraceptive nonusers and women from Area 1 had the highest average scores for self-determination. Of the women who were currently using a contraceptive method, 48 percent managed their own money, compared with 36 percent of the women not using a method.

Items on the partner relationship scale included whether the woman felt her partner respected her, if she had faith or trust in her partner, if she changed her opinion when her partner's opinion was different from her own, if she hid information from her partner out of fear, if she felt her partner drank too much, or if she felt her partner was jealous. Eighty-nine percent of all contraceptive users and nonusers said that they respected their partner and their partner respected them. On average, current method users reported having a better relationship with their partner than did women not using contraception. Forty-three percent of current method users reported that their partners usually or sometimes drank too much, compared with 61 percent of the women not using a method.

The sexuality items included whether the woman was satisfied with her sexual relationship with her partner, if she believed her partner was satisfied, if she could tell her partner when she did not want to have sex, if it was acceptable for the woman to take the initiative sexually, and if the woman was able to talk with her partner about what she did and did not like sexually. Current method users had a higher average composite sexuality score than nonusers. Seventy-eight percent of the current method users reported that they were able to tell their partners when they did not want to have sex, compared with 60 percent of the nonusers. Users were more likely to say it was acceptable for women to take the initiative sexually, and that they were able to tell their partners when they did not want to have sex. A high sexuality score was more likely among women who had completed some college education, had been married for five years or less, had used a modern method in the past 30 days, and reported they were happy, according to

researchers' logistic regression model. Those from Area 1 had an overall higher sexuality score than those from Areas 2 and 3.

In analyzing results, researchers determined that the only factors found to predict contraceptive use or use of a modern method were knowledge of methods and area of residence. Contraceptive users had the highest scores for both overall relationships with their partners and sexual relationships with partners. However, the highest composite score on self-determination was found among nonusers.

## **V Policy Recommendations**

Based on study findings, researchers outlined the following implications for reproductive health programs and policies:

- Couples do not communicate often or effectively about their desires for children. Men and women should be encouraged by health care providers to discuss with their partners the number of children they want to have as well as what contraceptive method they could use.
- There is confusion among users and potential users about actual contraceptive side effects and myths about various methods. Health programs should provide education programs to address the popular beliefs and myths concerning contraceptive options.
- Given that the rhythm method accounts for 25 percent of all contraceptive use, both men and women need to be informed about male and female fertility, which will enable them to better prevent unplanned pregnancies.
- Mass media is an important source of information for men, although less so for women. Efforts to educate men and women through mass media should continue since this could be a popular and effective way of getting information to the public.
- Many effective contraceptive methods are not widely known or used in Bolivia. Therefore, education campaigns should be conducted to increase awareness of different contraceptive methods, especially lesser known methods, such as vasectomy, tubal ligation, injectables and spermicides, with the goal of providing a range of contraceptive options at an affordable cost.
- The private sector was a major source of reproductive health information for study participants. Consequently, the public sector should make an increased effort to make the community aware of its local reproductive health programs and resources.
- For study participants in Area 2, lack of information about where to obtain a method was reported as a reason for not using contraception. Outreach efforts should be made to improve awareness of service delivery points, including pharmacies.

## **VI Study Details**

Mr Emilio Zambrana of Cooperazione Internazionale and Dr Patricia Bailey and Ms Donna McCarraher of Family Health International were responsible for this study. The study was supported by the Women's Studies Project, with funding provided through a cooperative agreement to the U S Agency for International Development.